

NORFOLK & NORWICH
UNIVERSITY HOSPITAL

85th Anniversary

NURSES LEAGUE
JOURNAL



2015



THE NORFOLK AND NORWICH UNIVERSITY HOSPITAL NURSES LEAGUE.

EXECUTIVE COMMITTEE AND TRUSTEE MEMBERS.

Charity Registration Number 290546

2014 - 2015

PRESIDENT

Mrs Mary Dolding.
15 Greenwood Way, Sprowston, Norfolk, NR7 9HW.

VICE PRESIDENTS

Mr. D. Beattie, Miss P. Cooper, Mrs. L Gordon-Gray,
Miss B Lee, Mrs. S. Rengert, Father I. Weston. OBE.

HONORARY SECRETARY

Mrs. Ruth McNamara
9, Highlands, Old Costessey, Norwich, Norfolk, NR8 5EA

HONORARY MEMBERSHIP SECRETARY

Anne Copsey
8 Penshurst Mews, Eaton, Norwich, NR4 6JJ

HONORARY TREASURER

Mrs Hilary Barker
56 College Road, Norwich NR2 3JL.

ARCHIVIST

Mrs Margaret Allcock
Broadlands, The Green, Freethorpe, Norwich, NR13 3NY.

COMMITTEE MEMBERS & TRUSTEES

Miss V Aldridge, Mrs. M.N. Allcock, Mrs H Barker, Mrs D Betts,
Mrs E Blaxell, Mrs D Collins, Miss A Copsey, Mrs M.R. Dolding,
Mrs W Hobbs, Mrs. Pat LeGrice, Mrs R McNamara ,Mr Surkitt- Parr.

JOINT EDITORS

Elizabeth Blaxell,
47 Long Barrow Drive
North Walsham
NR28 9YA

Doreen Betts,
4 Hall Road,
New Costessey,
Norwich, NR5 0LU.

THE NORFOLK AND NORWICH UNIVERSITY HOSPITAL NURSES LEAGUE EXECUTIVE COMMITTEE



Left to Right

Anne Copsy, Margaret Allcock, Mike Surkitt-Parr, Wendy Hobbs, Elizabeth Blaxell, Pat LeGrice, Doreen Betts, Mary Dolding, Vivien Aldridge, Ruth McNamara, Hilary Barker.

Not Present
Dawn Collins

2015 EDITORS' REPORT



Doreen and Elizabeth at the 2014 AGM.

We cannot believe that another year has gone by.

We have found it a bit more difficult to put the journal together this year.

It becomes quite a task to research and write articles ourselves or to nag friends to contribute.

Please help us out by sending news of things that you have done on your own or with others or memories of your nursing days. (large or small)

Thanks to all of you who have contributed. Please keep things coming in to us.

Elizabeth Blaxell

elizblaxell@hotmail.com

Doreen Betts

doreen.betts@ntlworld.com

47 Long Barrow Drive
North Walsham
NR28 9YA

4 Hall Road,
New Costessey,
Norwich, NR5 0LU

Norfolk and Norwich University Hospital Nurses League

Year Ended 31 March 2014

	2013/14	2012/13
<u>Income</u>		
Annual Subscriptions	920.00	745.00
Donations	921.00	865.00
Sale of membership Lists		2.00
AGM Chapel Collection	342.62	303.00
Sale of Mugs/Badges	70.00	410.34
Interest recieved gross	2.58	2.57
Gift Aid tax relief	220.00	194.76
Income from Investments	608.24	605.80
	3,084.44	3,128.47
<u>Expenditure</u>		
Christmas Benevolent	520.74	481.06
Flowers/Gifts/Grants	113.89	186.04
Chapel Fund NNUH	342.62	303.00
Journal	1,172.00	1,170.00
Postage (journal)	444.90	226.84
Other postage/stationery	60.29	77.12
Archive/Heritage	219.80	3.80
Catering	44.40	25.20
Petrol	115.52	233.32
AGM Expenses	61.00	76.97
	3,095.16	2,783.35
-Deficit/Surplus	-10.72	345.12
BALANCE SHEET		
Funds Brought forward		
Barclays Community Account	3,771.27	3,428.72
Barclays Instant Access Saver	5,173.46	5,170.89
Unit Trusts & Investments	15,000.00	15,000.00
	23,944.73	23,599.61
-Deficit/Surplus	-10.72	345.12
	23,934.01	23,944.73
Funds Carried Forward		
Barclays Community Account	*Note 3,757.97	3,771.27
Barclays Instant Access saver	5,176.04	5,173.46
Unit Trusts & Investments	15,000.00	15,000.00
	23,934.01	23,944.73

***Note:**

Community Account balance £1,269.90 shown higher than bank statement, due to:

3 deposits banked in March relating to 2014/15 year: total £ 440.00 and,

2 cheques written in March relating to 2014/15 year: total £ 1,709.90

Hon. Treasurer: M.R. Dolding Date: 02/05/2014
 Mrs M R Dolding

Hon. Independent Examiner: Brian J Allerton Date: 30 Apr 2014
 Mr Brian Allerton



A Message from the President.

A warm welcome to all readers of the 85th edition of the NNUH Nurses League Journal. I write this as your new President and I would like to thank the committee and the members of the League who were present at our last AGM for giving me the opportunity and trusting in me to be your President for the next 3 years.

I will endeavour to work hard with the committee to uphold the objects of the League which were amended and approved at the last AGM. We have registered these changes with the Charity Commission and I congratulate my predecessor, Lavinia Gordon-Gray in her tireless efforts to ensure we have an updated document that is fit for purpose.



This is a time of change for the League but also a time of opportunities. We must continue to cherish and remember our past traditions as well as looking to the future to create a balance and perhaps seek out some new opportunities. I would really welcome any ideas you as members may have on the way forward. We know we need to attract new members and raise the profile of the League. To that end and with the help of one of our new trustees we have been able to add a letter from us into all newly qualified nurses' induction packs.

We also need to rely on you as members to spread the word and encourage others to join. Please continue to support us by contributing to our excellent journals. Your stories big or small are very valuable to us.

Annual Reunions continue and May 16th 2015 is your next opportunity to attend and we hope to have some special events on the day in celebration of our 85years.



The heritage leads have worked hard to prepare for archive some of our collections. We do appreciate all the treasures that have been added over the years. Please keep them coming.

Cont.

Cont. A MESSAGE FROM THE PRESIDENT

My training started in 1965 at the N&N and the efforts of all those who taught and guided us gave me the opportunity of having a really rewarding career in nursing for which I am truly grateful.

Those role models were the reason I joined the league in the early 70s and I was privileged if not a little daunted to be part of the League Executive Committee as a very young member in 1975. You see, like many of you, I have a long history of being a member and I believe the Norfolk and Norwich University Hospital Nurses League still has a place and a lot to offer members, the hospital and the community.

Today prospective nurses are told they need the right values and behaviours which are defined by the 6 Cs.

Care Compassion Competence Communication Courage Commitment

Perhaps not so different from what has always been required.

My best wishes to you all

Mary Dolding



Lavinia Gordon-Gray

After many years as a Trustee and President of the League Lavinia has decided to retire. We the Trustees, on your behalf, would like to thank her for her sterling work for the League

CHANGES TO LEAGUE OBJECTS.

At the Annual General Meeting on May 10th 2014 the members present supported and approved the changes to the League objects and an amendment to Clause 8 of the 2004 Deed which the Charity Commission had already approved. This required a new Supplemental Deed to the constitution of the League, dated June 10th 2014. The Committee took the opportunity also to tidy up some errors in the previous deeds, to re-define the criteria for membership, and to make provision for calling a special general meeting of the League if required.

The operative part of the Supplemental Deed reads as follows:-

3. Operative Part

The Trustees AGREE that the following amendments to the 2004 Deed shall henceforth apply:-

3.1 The following additional objects shall be added to that set out in Clause 4 of the 2004 Deed:-

- To advance the education of the public and to raise public awareness in the history and practice of nursing in hospitals in the Norwich area.
- To advance the education of nurses and other health workers and health professionals in the history of nursing in the Norwich area

3.2 Clause 8 of the 2004 Deed shall be amended by addition of the following:-

(x) to maintain a collection or collections of records, photographs and other memorabilia connected with nurses and nursing of the Norfolk & Norwich Hospital and other hospitals in the area and from time to time to mount exhibitions of such collection or collections for viewing by nurses and health professionals and by the public generally.

3.3 Pursuant to the amendment set out in Clause 3.2 above, the existing sub-clause (x) of Clause 8 of the 2004 Deed shall be re-numbered to sub-clause (xi)

3.4 Recognising that the description of clauses is incorrect in Clause 35(i) sub-clause(a) of the 2004 Deed, the Trustees resolve that it shall stand amended as follows:-

(a) No amendment may be made to Clause 4 (the objects of the League), Clause 8 (Powers), Clause 33 (Trustees not to benefit financially from their trusteeship), Clause 36 (Dissolution) or this clause without the prior consent in writing of the Charity Commission; and

3.5 Recognising that the criteria for membership of the League as set out in Clause 6 of the 2004 Deed no longer correctly describes the current membership criteria, the Trustees resolve that the text of Clause 6 of the 2004 Deed shall be replaced with the following text:-

Membership of the League is open to all registered nurses and formerly

Continued...

CONT. CHANGES TO LEAGUE OBJECTS.

registered nurses who satisfy one of the following conditions:-

- (i) The nurse has trained at the United Norwich Hospitals or their predecessors;
- (ii) The nurse has received a degree in nursing from the University of East Anglia;
- (iii) The nurse has worked at the Norfolk & Norwich University Hospital or its predecessors for a period of three years or more.

3.6 In order to facilitate the business of the League the Trustees further resolve that Clause 27 of the 2004 Deed shall stand amended by the addition (at the end of it) of the following text:-

Any other business requiring the consent of members (and specifically any consent required pursuant for the provisions of Clause 35) may be dealt with (as an alternative to being dealt with at the annual general meeting) by the calling of a special general meeting. The provisions of this Clause 27 shall apply (*mutatis mutandis*) to special general meetings as well as to annual general meetings.

The full text of the Supplemental Deed can be found on the Nurses League website:

www.norfolkandnorwichuniversityhospitalnursesleague.co.uk/constitution.php

Lavinia Gordon-Gray.

Scan this to take
you straight there!



A MESSAGE FROM THE MEMBERSHIP SECRETARY.

Thank you for your letters please keep them coming with all your news. Also an enormous thank you to those members who send their subscriptions when receiving the journal .This really helps as the postage continues to rise. The trustees join me in thanking those members who kindly send donations .They are much appreciated.

Anne Copsey.
Membership Secretary.

Letters to the Membership Secretary

Relating to the death of Anne Dickinson who died in 2014

Dear Ann.

Thank you for your letter relating to my mother Anne Dickinson's death.

I am sorry I didn't let you know the funeral details, I couldn't find an up to date Journal for the contact details. I did find ones from 10 to 15 years ago!

Mum loved talking about her nursing days. One of the Journals had her letter about her first visit to theatre and the surgeon who did an amputation. She had quite a way with words and would write to anyone and every one.

Kind regards,

Peter and Maralyn Burgess. (Son and daughter in law)



This letter was written by Ann Dickinson to us before she died in 2014.



Dear Miss Copsey.

Just a little "tit bit" from days gone by.

During the war, and after the N&N was hit by bombs in the Baedeker raids, 4 wards and the necessary staff were "billeted" out to Drayton EMS. With the hospital van doing its stuff ferrying staff back and forth as required. We also took over the nurses sleeping quarters.

As it was such a hot summer, I moved my bed under the window (a sash window) which nurses out late (without a pass) used to get in. Often, after just dropping off to sleep, the window would fly open and a nurse would climb in onto the bed and over me.

They had previously signed in' prior to going out' ready for Bucky's inspection of the register!!

Continued...

Cont. Letters to the Membership Secretary

One night the window flew open and outside was a “jibbering” patient from Hellesdon Hospital. I managed to get rid of him but next morning the papers and wireless were full of the news that a patient was missing and to report any news of his whereabouts to the police.

The police were swarming all over the place. I was very tired but instead of catching up with my beauty sleep I had to answer all their questions.

Ah well! All history now!

Best wishes and many thanks, its lovely to catch up with the dear old N&N again.

Yours sincerely

Ann Dickinson (nee Gibbs)

(Produced with the permission of Ann’s son)

Changes to Membership

New Members.

Ms. Jenny Bacon, 1971-73. Mrs. Mary Barker Ward nee Henry. No dates.

Mrs. Jean MK Browne, nee Munford, 1959-61.

Mrs. V Jane Laue-Knudsen, nee Luckett, 1959-1962.

Mrs. Patricia Wilson, nee Wrenn, 1958-60.

Reinstated Members.

Mrs. Marilyn A Bray, nee Eldridge, 1963-66

Deceased Members.

Mrs. AR Appleyard. Miss Bee Taylor. Mrs. Christine Barker. Mrs. Sheila Connors.

Mrs. Sylvia Crook. Mrs. M Ann Dickinson. Mrs. Mary Harper.

Miss Ruby Jolly. Mrs. Mary Sego. Mrs. M Lewis (2013). Mrs. B Norfolk (2013).

Resigned Members.

Mrs. Jane Copeland. Mrs. Bridget Kirk. Mrs. Rosalind Stone.

Mrs. Elsie Veale. Mrs. Karensa Wright.

Betty Lee retires as Trustee

At the AGM last year Betty Lee retired as a Trustee. We have mentioned in the past the many ways Betty has contributed to the League including the roles of secretary and membership secretary. She is continuing to play an important role within the Heritage group.

Betty did not want a fuss made so we gave her flowers on your behalf. Being a group who do not like to miss an opportunity to celebrate, the majority of the Trustees took Betty to the Assembly Rooms for afternoon tea. It was lovely and Betty really enjoyed it.



INTRODUCING OUR NEW TRUSTEES

DAWN COLLINS



Hello my name is Dawn Collins, and I am currently working as Assistant Director of Nursing at the Norfolk and Norwich University Hospitals NHS Foundation Trust. I trained in Norfolk in 1986 and have had a varied extensive career both in and outside the county. I am passionate about the nursing profession. I have a particular interest in nursing education and professional development. I was delighted to be elected as a Trustee of the NNUH Nurse's League and hope that I serve the League well in the future.

MICHEAL SURKITT-PARR



I completed my training at the N&N in 1978 and then worked as a staff nurse on night duty on the surgical unit at the West Norwich Hospital before undertaking my Theatre course. On completion of this course I worked as a staff nurse in the Phase K theatres before being promoted to Charge Nurse in the general / urology theatres. Following management roles in theatres in Northampton and Leicester I moved to the Directorate for Nursing and Quality at the Leicester General Hospital undertaking roles in Clinical Audit, Risk Management, complaints and litigation.

In June 2001, I was appointed to the post of Assistant Director of Corporate and Legal Affairs at the University Hospitals of Leicester NHS Trust.

In September 2003 I was appointed by the National Patient Safety Agency (NPSA) to the post of Patient Safety Manager for Leicestershire, Northamptonshire and Rutland, working with whole health communities to implement a range of patient safety initiatives and including national projects.

In July 2010 I was appointed as Joint Head of Clinical Review and Response leading the response team and function at the NPSA.

My current role is Head of Patient Safety in the national Patient Safety Domain of NHS England.

I am married with two daughters and I live in a Leicestershire village.

We asked 'Can you identify this room?'



Its been identified...

as the **Norfolk and Norwich Hospital Boardroom**, and possibly an earlier one as well, judging by the lamp/ light hanging from the ceiling. This was situated to the left of the cross corridor in the Victorian administrative block.

It is “overcrowded “with portraits, I suspect in the 1920-30 period.

The features are:

On the floor is a smaller table. From the 1960's onwards there was a much bigger table, I believe given/donated to the Hospital by Norwich Union.

The distant wall has a fireplace and a valuable mantle clock in the middle. This clock was stolen in the early 1960's, but was noticed on TV by a deputy head porter, Ernie Barrett, and subsequently recovered!

The large portrait above the fireplace is of William Fellowes, Squire of Shotesham & co-founder of the 1771 Norfolk and Norwich with Benjamin Gooch.

The smaller portraits/paintings to the left and going towards a large window (not seen) would later have graced the consultants' committee room/later sitting room. Many of these were re-hung in the NANIME Teaching Centre, Sir Thomas Browne Library.

Continued...

Cont. Mystery Room Identified'

Three doors, one on the right of the fireplace, led to two toilets (male) and at right angles to this on the right-hand wall is another door, which was the main entrance to the Boardroom from a transverse corridor. The steps up to the original medical residencies were off this transverse corridor, as were steps leading to the basement.

In the foreground on the right of the picture, one can see the beginning of another door. This led to a smaller committee room, and itself had an outer door to the entrance corridor. Although it is difficult to see details of portraits, the larger one above this door is undoubtedly of John Yellolly, physician on the staff, and also first President of the forerunner of the Royal Society of Medicine in London. It is not known whether that one belonging to the N&N (and hopefully stored safely!) is the original or not.

It is just conceivable that all the portraits were "hung" for some special occasion.

N. Alan Green MS FFRCs



The Heritage Committee

The Heritage committee continues to work diligently at preserving the documents and artefacts that belong to the Nurses League.

Margaret and Vivien had a very enjoyable visit with Mr. Alan Green to record his answer to "Where is this room?" which was in last years journal. (See this years report for the answer.)

They plan to visit him again soon to collect more memories from him.

More work will take place to deposit items in the Norfolk Archives.



Two of the members at work.

Edith Cavell 1865-1915

Edith was born in 1865 in the Vicarage at Swardeston, a small village four miles from Norwich. She was educated mainly at home and was excellent at languages particularly French. She was also a talented artist and would collect and draw flowers.



The Reverend Cavell built a new vicarage after his father died and left him £1500. Her father encouraged her to help fund the building of a Sunday school which would be annexed to the vicarage.

Edith painted greetings cards and sold them and the Bishop of Norwich matched the money raised.

At the age of twenty two she became a governess to the children of the Reverend Powell at Steeple Bumpstead. Then in the summer of 1888 she went with her parents to Germany holidaying in Bavaria and this made her determined to find a post as a governess abroad.



Back in Swardeston she became a day governess to the children of two prominent Norfolk families, the Barclays and Gurneys.

In 1890 she was recommended for a post in Brussels looking after the four children of Paul Francois, a Brussels lawyer. She stayed there for five years returning home to help care for her ill father.

By 1895 Edith had decided not to work as a governess, but to train as a nurse. She began at the fever hospital in Tooting and stayed for seven months. She then applied to the London Hospital, Whitechapel to start her formal nursing training under the matron Eva Luckes.

In August 1897 there was an outbreak of typhoid in Maidstone and Edith and five other nurses were sent to help in the emergency. For her work there she was presented with a medal from the grateful people of Maidstone.

Cont. Edith Cavell 1865-1915

In 1901 Edith became Night Superintendent at St Pancras Infirmary where there were high casualty rates from complications in pregnancy, epidemics of diarrhoea in summer and respiratory diseases in winter. She stayed there for two years and in 1903 went to the Shoreditch Infirmary as Assistant Matron.

Edith was next offered a post in Manchester organising district nursing, but then an offer came from Brussels. Dr Antoine Depage asked her to set up a training school for nurses. He was impressed with English nurses and wanted an English nurse with fluent French, knew Belgium and who had trained at a London hospital. On the recommendation of the Francois family to whom she had been governess, Edith was appointed the Matron. The premises for the new school were four terraced houses and Edith embarked on an ambitious programme of making these buildings fit for purpose. She recruited mainly English, Dutch and German girls. Edith was very strict, but also understanding of her nurses. She was intensely religious. She wrote for the Nursing Times for many years. Eventually a new purpose built nurses' training school near the St Gilles hospital was built which soon gained international recognition for its high standards.



When Germany invaded Belgium Edith was at home with her mother, who since her husband's death, was living in Norwich. She immediately returned to Brussels.

In 1914 the hospital became a Red Cross Hospital taking in all nationalities. Edith began hiding British soldiers and arranging for them to be taken over the border into Holland. Between November 1914 and July 1915 she arranged papers, clothes and money for them; thirty five men at any one time.

Cont. Edith Cavell 1865-1915

An underground lifeline was formed, initiated by Prince and Princess de Croy, and some two hundred soldiers were helped to escape. The German authorities became suspicious and began to watch the school and searched it several times. Edith was arrested on 5th August 1915 with another resistance worker, Philippe Baucq. She was put into solitary confinement in the prison at St Gilles and was interrogated several times. She was asked questions in German which were translated to her. She replied in French and they were translated back into German. She signed depositions which were in German, but she had no way of knowing if what she had signed was what she had said.

Edith appeared in court with the others of the resistance including the Princess de Croy, on 7th October. The trial lasted two days although Edith's part of the trial lasted only ten minutes. The sentence was death, but none thought the Germans would put a woman to death. The deputy American Consul made strenuous efforts on Edith's behalf, but to no avail.

The English Chaplain Sirling Gahan visited Edith on the evening of 11th October. She told him "I have no fear or shrinking. I have seen death so often that it is not strange or fearful to me. Life has always been hurried and full of difficulty. This time of rest has been a great mercy. Everyone here has been very kind. But this I would say, standing as I do in view of God and Eternity: I realise that patriotism is not enough. I must have no hatred or bitterness towards anyone". Gahan gave Edith Communion and together they said the words of the hymn "Abide with me".

At 6am on 12th October Edith was shot, with Phillippe Baucq, by firing squad and buried in a makeshift coffin at the Tir National.

Immediately there was a huge outcry when the news reached Britain. Recruitment rocketed and brought America closer to joining the war.

After the war her body was brought back to England on a destroyer to Dover, thence by train to Westminster Abbey and then by train to Norwich. On 14th May 1919 her coffin



Cont. Edith Cavell 1865-1915

was carried on a gun carriage from Norwich (Thorpe) station escorted by nurses and soldiers of the Norfolk Regiment to Norwich Cathedral where a service was held. Edith was buried in an area called Life's Green by the south transept of the cathedral. The Cavell family asked for a plain tomb with a simple white cross, such as was used for fallen soldiers.

October 12th 2015 marks the 100th anniversary of Edith Cavell's death.



1) When Edith's father retired, he and his wife moved to a house in College Road Norwich. When she stayed with them, Edith worshipped at Holy Trinity Church Trinity Street.

To the left of the church organ is a wooden plaque describing how parishioners collected money for a Reredos depicting the last supper, in memory of Edith Cavell.

2) Alice Eliza Ottaway was one of the N&N nurses who followed the cortege from the railway station.

She later became a member of the Nurses League.

Elizabeth Blaxell

Excerpts taken from a talk given by Barbara Miller to the Norwich & District Branch of the NHS Retirement Fellowship.



The Remembrance Service for Edith Cavell 2014



Six members of the Nurses League attended the Remembrance service for Edith Cavell on Saturday 11th October, 2014 at Life's Green.

Five matrons from the NNUH took part in the parade, marching to the graveside. Dawn Collins, Assistant Director of Nursing, Rachael Cocker, Divisional Matron Women, Children's Services, Elizabeth Hogbin, Head of Compliance and Governance, Chris Parfitt, Matron Respiratory Medicine and Julia Watling, Head of Training and Education.



The service included two hymns; "O God, our help in ages past" and "Abide with me". The Address was given by the Vicar of Swardeston, the Reverend Paul Burr.

Continued...

Cont. The Remembrance Service for Edith Cavell 2014

Liz Hogbin laid a wreath from the nurses of the NNUH. Ann Copsey laid a wreath from the London hospital on behalf of Betty Lee.

There were many more wreaths this year from various organisations including, as always, a wreath from the Belgian people.

The area around the grave is now tended by the matrons of the NNUH who have planted some lovely flowers.



The Nurses League were first invited in 2005 at the 90th anniversary of Edith Cavell's death and every year thereafter to the grave side service.

NORFOLK EVENTS RELATED TO

Edith Cavell 2015

October 5th -18th NNUH	Exhibition/associated events at the Hospital and Forum.
October 10th	Graveside service at Life's Green. Royal British Legion Standards etc.
October 10th 7.30pm	Cathedral. Evening of words and music telling the Edith Cavell story.
October 12th 6pm.	Commemoration service in the Cathedral.
October 15th 6pm.	Chapel service to celebrate the life of Edith Cavell with The Bishop of Norwich, and the Hospital Chaplain Eleanor Langan.

EDITH CAVELL TRUST

“Qu'ils mangent de la brioche”

In December four members of the League and one member of the NHS Retirement Fellowship (Norwich) sold cakes in aid of the Edith Cavell Trust at the NNUH.



*The sum raised was
£278.43*

Mary Lewis's Red Cross Cake

Mary Lewis was a VAD who served with the Gloucestershire Branch of the British Red Cross Society during the First World War. Mary served this cake with a cup of tea to soldiers on troop trains, and her recipe was donated to our archive collection by her great niece.



British Red Cross Museum and Archives

Ingredients

- 1 cupful of soft dark brown sugar (175g)
- 1 cupful of water (240ml)
- 1 cupful of raisins (200g)
- 3 ounces of lard or margarine (85g)
- ¼ of a grated nutmeg (or ¼ teaspoon of ground nutmeg)
- 1 teaspoon of cinnamon
- 1 teaspoon of ginger
- 1 teaspoonful of bicarbonate of soda (dissolved in 20ml of hot water)
- 2 cups of plain flour (300g)
- ½ teaspoonful of baking powder

How to make Mary's Red Cross Cake

1. Preheat oven to 180°/160° fan.
2. Put the following ingredients into a saucepan: brown sugar, water, raisins, lard/margarine, nutmeg, cinnamon and ginger.
3. Boil together for three minutes, then allow to cool.
4. When cool, add bicarbonate of soda (which has been dissolved in some hot water).
5. Sift the flour and baking powder together.
6. Add the flour mix to the other ingredients.
7. Stir well.
8. Pour the mixture into a greased 18cm circular tin, and bake in the oven for 50 minutes.
9. Leave to cool.
10. Slice and serve with a cup of tea.



At the British Red Cross, we know that it's often the little things that make all the difference. Someone to listen to, a cup of tea and a slice of cake just like Mary's can mean the world to someone suffering a crisis.

Nursing in **WORLD WAR ONE**

Nursing in World War One was exhausting, often dangerous work and the women who volunteered experienced the horror of war first hand, some paying the ultimate price.

Young men and women in 1914, like their parents, expected the war to be short. Music Hall songs were patriotic and optimistic. Women were expected to wait at home patiently or, if they were from working-class homes, to join munitions factories. “Keep the home fires burning,” they were abjured. “Though your boys are far away, they will soon come home.” Had they been injured however, there would have been very few nurses to look after them.



The main trained corps of military nurses was the Queen Alexandra’s Imperial Military Nursing Service (QAIMNS). It was founded in 1902 at the time of the Boer War and in 1914 was less than 300 strong. At the end of the war four years later it numbered over 10,000 nurses. In addition, several other organisations formed earlier in the century had the nursing of members of the armed services as their main purpose - for instance, the First Aid Nursing Yeomanry launched in 1907.

Apart from them, there were thousands of untrained women working as midwives or nurses in civilian life, but they had little or



Continued...

Cont. Nursing in **WW1**

no experience of working with soldier patients and their status in society was little better than that of domestic servants.

Because the British Army was so resolutely opposed to all female military nurses except the QAIMNS, early volunteers from Britain were obliged to serve instead with the French and Belgium forces. Many of these early volunteers were from aristocratic families and their servants. Powerful women who ran large families and large estates were well versed in management and saw no great problem in managing a military hospital instead. Their confidence in their own abilities was impressive.

The most famous of these women was the Duchess of Sutherland, nicknamed "Meddlesome Millie". Soon after war was declared, she and other grand ladies like her took doctors and nurses to France and Belgium, organising their own transport and equipment to set up hospitals and casualty clearing stations.



Whatever bureaucratic obstacles were put in their way, the huge and bloody tide of casualties in the spring of 1915 simply swept them away. Even the British Army's top brass yielded to the combined pressures of need and confident commitment.

At this stage of the war, women began to be invited to serve in a range of capacities, of which nursing was one. Thousands of young women from middle-class homes with little experience of domestic work, not much relevant education and total ignorance of male bodies, volunteered and found themselves pitched into military hospitals.

They were not, in most cases, warmly welcomed. Professional nurses battling for some kind of recognition and for proper training, feared this large invasion of unqualified volunteers would undermine their efforts. Poorly paid VAD's were used mainly as domestic labour, cleaning floors, changing bed linen, swilling out bedpans, but were rarely allowed until later in the war to change dressings or administer drugs.

Cont. Nursing in **WW1**

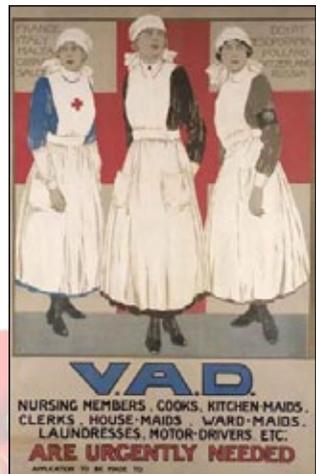
The image and the conspicuous Red Cross uniforms were romantic but the work itself exhausting, unending and sometimes disgusting. Relations between professional nurses and the volunteer assistants were constrained by rigid and unbending discipline. Hospital life was harsh and contracts could be withdrawn for minor breaches of the rules.



Medical issues in the war were largely unknown in civilian life. Wound infections were the most common, contracted when men were shot by machine gun bullets. Their wounds were infected by bits of uniform and polluted mud from the trenches carried by the bullets. Of course, there were no antibiotics, and disinfectants were insufficiently supplied and very crude. Much work was done in Britain to deal with the infected wounds, but thousands died of tetanus or gangrene before any effective antidote was discovered. Blood transfusions were effected towards the end of the war, by linking up a tube between the patient and the donor; a direct transference.

When the war ended, most VAD's (Voluntary Aid Detachments) left the service and went home where men were scarce.

Elizabeth Blaxell



Modern Diabetes Care in Children

a presentation by



Dr Nandu Thalange
Senior lecturer UEA, FHEA, MRCP. MRCPCH.

Dr Nandu Thalange has been practicing in paediatric diabetes care for the last twenty five years. He was well known by many of the Members present at the 84th AGM and Reunion. He said he was honoured and delighted to have the opportunity to speak to the Members on his work with children who have Type 1 Diabetes cared for at the Jenny Lind Hospital which is now based within the Norfolk & Norwich University Hospital in Norwich.

'Life is short and the art long; and the right time is an instant; and the treatment precarious; and the judgement difficult.'

Hippocrates 460-377BC

Dr Thalange (Nandu), suggested that Hippocrates could have been speaking about judgement of Diabetes in children as it is so true that practicing on them is like following a moving target while they all grow, eat and exercise variably and react unpredictably. Fear of hypoglycaemia is a big issue. Those who have grandchildren or children know how true that is as they get a tremendous amount of hypos – much more than adults with diabetes. Norwich took part in a clinical trial with 347 children worldwide and in one year results showed they had totalled 21,000 hypo attacks.

Children are dependent on carers and parents for help and as teenagers have the desire for independence but not the ability to become independent. This causes tension as the children grow up. With the tremendous burdens in teenage years they find it hard to cope, and have diabetes.

Diabetes care at school is an issue but luckily in the UK, in contrast to other countries in the world, we have legislation and mandates covering the care of diabetes in schools. The latest being 'live'

Cont. Modern Diabetes Care in Children

from September 2014.

'Jenny' was used as an example as to how treatment and attitude to diabetes can affect a child from a very early age. She was diagnosed at age four and a half and initially control was very good with twice daily injections (RHI & NPH) she became a bright, high-achieving schoolchild. Unfortunately at the age of eight and a half she had a nocturnal hypoglycaemic seizure after a school sports

day. This had a devastating effect on the family who were traumatised by events and subsequently became adverse to acceptable blood glucose targets at bedtime, consistently aiming for levels 12-15mmol/L. This was achieved through snacking and ensuring this level by insulin dose reduction and worse with habitual snacking leading

to excessive weight gain and HbA1c levels 8.5-10%. Insulin therapy was switched to basal-bolus regime – long acting insulin once a day plus rapid acting with meals. In spite of this, control declined due to non-adherence to bolus injections. Three meals a day plus 3/4 snacks should have resulted in 7/8/9 injections a day. More than most of us can imagine. So as a result she only injected with meals and not snacks soon learning that by not having the required number of injections she lost weight so continued to extend the pattern of omitting her insulin injections.



Cont. Modern Diabetes Care in Children

The resulting decline in control led to weight loss which was praised by her family and friends but by the age of fifteen had persistent microalbuminuria and background retinopathy with HBA1c 12%. She had performed very poorly with school examinations and subsequently left education for low-paid manual employment. For a bright girl this was a terrible outcome.

'But I was young and foolish, and now I am full of tears'

W B Yeats 1865-1939

Where did the medical team go wrong?

Nandu said he had learnt during over 25 years in practice that in long term diabetes care one should fit diabetes around your life – as it should be. A background of snacking is a hard habit to break, so extra shots of insulin become a “casualty” leading to poor diabetic control. It has been known for twenty years that basal-bolus is the best therapy and it is always the intention to intensify this plan as people are reluctant to do what is needed at the beginning of diagnosis. With ‘Jenny’ it meant that we were not meeting her needs by not starting her on intensive insulin therapy.

A study in late 1980's showed intensive therapy control gave a better health outlook with a perfect world aim of HBA1c 7% giving lower increased risks. 9.5% showed a really big increase in complications but at 11-12% they were huge. This study, Diabetes control and Complication Study (DCCT) showed intensive therapy made a difference and saved lives.

A more recent study from twenty-one leading diabetes centres in Europe showed that only 9.2% of children in Scotland and 14.4% in England and Wales reached the target of 7.5% or less. This meant 1 in 7 were not getting anywhere near the target and thus reducing life expectancy by 21 years.

Type 2 diabetes is now being seen in children and the risks are still very high with complications rare but a much worse prognosis of 80% amputation within 20 years of onset or even death. Unfortunately diabetes is a costly disease but it is the complications of micro vascular and macro vascular which hugely increases costs of treatment involving in-patient stays. Good care and lower

Cont. Modern Diabetes Care in Children

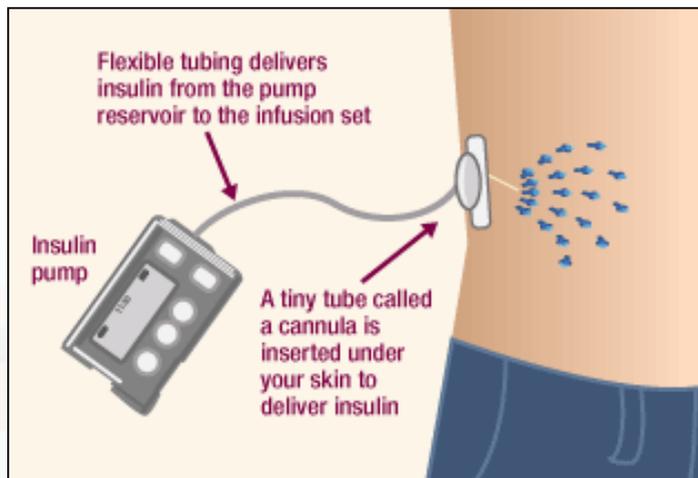
HBA1c counts reduce overall costs by 20% and complications should be tackled urgently.

It is difficult to give children multi daily injections but now there is genetically modified insulin which can be used. Intensive insulin therapy is complex and tough to administer but is proven to improve long-term outcomes although challenging to deliver to children. Carbohydrate intake has to be worked out as each requires different doses of insulin at times during the day. Exercise and glycaemic factors of food have to be calculated requiring 7-10 blood tests a day. This can cause a lot of stress and worry for the carers and parents of a young diabetic trying to balance the diet and insulin administration dose. Today blood monitor meters are more efficient and can store results for reference.

A major change to some patient's lives would be an insulin pump, which has computer controlled insulin syringe that can calculate the dose required. The introduction to these in children often requires a stay in hospital to stabilize the blood sugars and carbohydrate intake. Insulin is programmed as to the type of food eaten. Unfortunately these are very costly and in the Norfolk area

there are only 120 children using this equipment. These pumps cost typically £2,000-£3,500 a year each with consumables another £1200-£1500 a year. Additional life-time

costs with a pump can amount to £35,000-£40,000 but gives an increased life expectancy with lower complication-free survival. A pump gives greatest cost-effectiveness for those patients with worse control.



Continued...

Cont. Modern Diabetes Care in Children

Practicalities of pump therapy:

The needle for the pump must be changed every third day, sooner if there are any problems, e.g. soreness/inflammation at the site.

As with insulin injections the site of the needle must change, using the same site can cause discomfort, infection and/or swellings. The needle can be sited anywhere on the abdominal wall, the thighs or buttocks. The needles are very easy to place, a small gadget is loaded with a new cannula, a site chosen and a flick of a button fires the needle home; the introducer is removed leaving a small cannula in situ.

Many children will wear their pump in a case attached to their belt or clipped to their clothing. At night they can wear a pouch on a long strap which they wear around their neck. Some pump users, (or with the smaller ones, their Mums), are quite creative and custom make cases for the pump.

The pump can be removed for bathing/showering/swimming but should be re-connected within 30-45 minutes.

In summary: one needle every three days rather than four or five injections daily, so less anxiety regarding over use of sites. Freedom to swim with their friends and socialise without obvious performance of injecting resulting in better diabetic control.

At the moment adults have to suffer with unnecessary side effects and the NHS has to pay for complications. A single hospital admission with severe hypoglycaemia attack can cost £2,200. The alternative to this treatment is an artificial pancreas but this is not yet a commercial project as it is very expensive to produce – beyond NHS budgets.

In conclusion:

Diabetes is a tough, relentless and unforgiving disease the costs of which are huge.

Children and young adults with diabetes are at the highest risk of poor outcomes.

Modern therapy makes good diabetes care possible.

Cont. Modern Diabetes Care in Children

*'Enough if something from our hands have power, to live, and act,
and serve the future hour'*

William Wordsworth 1770-1850

In the questions which followed his very interesting talk, Nandu told the Members how teaching staff in schools dealt with a diabetic child.

School staff are naturally terrified unless they have had some experience. The Jenny Lind unit provides any training required. If the Nursery or primary schools do not have a member of teaching staff available another staff member can be recruited; in one local school the caretaker takes over the responsibility of giving the child his lunchtime injection. In other schools the secretary and Mums take it in turns to give the injections. If the child does not have injections at school, psychologically they may think that they do not have diabetes at school, so every effort is made to prevent this backward step.

Each place has a different situation and historically has a very good relationship with the unit. Norfolk started intense therapy long before it was available in most parts of the UK. Because of this they take on an individual approach with the schools providing what help they need. The tone of the work is always set by the head teacher who works with the family to provide the best way forward to get the insulin delivered and for the child to manage school.

Diabetes

Special thanks to Vivien Aldridge Trustee and ex Diabetic Specialist Nurse at the NNUH for her knowledge and proof reading.

Ruth McNamara (Secretary)

United Norwich Hospitals - February 1968-1971



Left to right:

Back row - Anne Haxby, ???, Myra Sargeant, Sarah Mobbs, Margaret Key, Kay Woolsey, Elizabeth Daniels, Mary Coldham.

Middle - Annabel Pritt, Pat Sidebotham, Robert Soto, "Dukie", Jennifer Hawes, Marylin Waters, Judith King.

Front - Gill Fare, Joan Lee, Sheila Corble, Shirley Rooke, Vigdis Hennington, Dilshad Nanji (Dillie), Jennifer Osborne.

2nd February 1968 - 47 years ago, how quickly they have passed. Where are you all now? I hope the above photo will bring back many memories.

Four of the above (Anne, Kay, Gill and I), have remained firm friends, joined by Doreen Betts (nee Hall) in 1971. We have met regularly over the years, with our husbands, children & now grandchildren, often sharing holidays, more so since we have retired.

Cont United Norwich Hospitals - February 1968-1971

We all have fond memories of our SRN training in Norwich, at the Norfolk & Norwich (Newmarket Road site), Jenny Lind (Colman Road) and West Norwich Hospitals. Also of the camaraderie of the Nurses' Home, although we couldn't wait to "live out" in our second year, to escape the late night passes & sneaking in to avoid Night/Home Sister. Anne, Gill & I lived in Avenue Road, & for a short time Judy King shared with us. Unfortunately we lost touch with Judy many years ago.

Soon after qualifying we all married, and continued working in our chosen fields of nursing - with breaks for the births & care of our children.

Now all finally retired we ended our careers as follows: Community Nurse (Anne), Day Centre Manager & Practice Nurse (Kay), Cardiac Specialist Nurse (Gill), School Health Adviser (Doreen), and Nursing Home Matron (Margaret).

We are now all so busy, in volunteer roles, community projects, caring for grandchildren & elderly parents, etc. we wonder how we had time to work! Of course holidays are also very important - since our families have grown up we have shared several short breaks together in self-catering properties at home & abroad.

If anyone would like to contact one of us my email address is margaret93@talktalk.net or via Doreen Betts (editor)

We have met Sheila at some of the League AGMs.
Must finish now to book the next group holiday for 2015.

Margaret Blyth (Key)



A letter from Christine Higginson.

2 Egmont Drive,
Avon Castle,
Ringwood,
Hampshire,
BH24 2BN.

Dear Doreen,

I thoroughly enjoyed reading the Journal in particular the article written by Gill Thorn "An Email from Australia" I undertook my training in the same set. Initially I went to Alderman Woodrow School and lodged in Denmark Road with Mrs. Bucknole, followed by six months pre-nursing at Dereham Cottage Hospital.

I undertook my nursing training with Carol Crosby and Hilary Crane at the Norfolk and Norwich Hospital under Matron Watson.

After qualifying I went to the West Norwich Hospital and worked as a Staff Nurse on Burns and Plastics followed by six months on the Geriatric ward.

I then married John and moved to Hertfordshire.

Following this, we made the decision just over thirty years ago to move to Bournemouth where we purchased a care home and have lived there ever since, with our three children Karen Peter and Caroline, remaining local to the Bournemouth area.

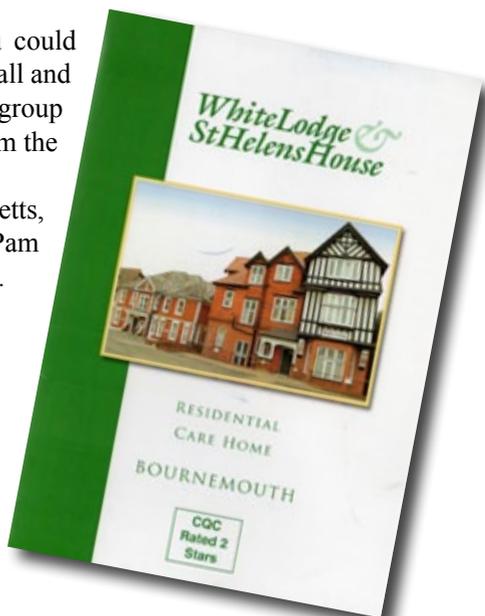
I would be extremely grateful if you could pass on my contact details to Gillian Hall and would very much like to hear from the group of ladies that I remember so fondly from the class of 1965.

I also fondly remember Pamela Betts, Lavinia Gordon-Gray, Annette Jude, Pam Cooper, Ruth McNamara and B Taylor.

With thanks and best wishes

Yours Sincerely,

Christine Higginson (nee Wilkins.)



MARY NIXON NÉE GAY WAS 100 YEARS OLD ON AUGUST 17TH 2014.

After seeing an article in the Eastern Daily Press featuring Mary's 100th Birthday I went to see her in Holt to learn the story of her nursing career at the Norfolk and Norwich Hospital.

I expected to meet a frail 100yr old but instead Mary was just the opposite and I had the most enjoyable morning laughing and comparing our lives as nurses.

Mary trained at the N&N 1935-38. She had not really known what to do as a career. She tried teaching but it was not for her.



Mary's friend Bridget was going for an interview to train as a nurse so Mary decided to apply too. Mary remembers that she felt nervous as she arrived at the Hospital, entering the big square entrance hall was daunting and being called into Matron's Office. Nevertheless she was successful.

Mary joined the Preliminary Training School for three months with 11 other students and was taught by Sister Tutor Rogers and Sister Tutor Doyd.

She had to have her uniform made at her own cost.

The twelve nurses worked two days per week on the wards and were able to go home at weekends. Mary would go home to her parent's home at

Spratts Green Farm near Aylsham.

Unfortunately Mary failed her finals the first time. She had been asked to make a Linseed poultice and didn't have a clue!! When nurses failed they had to go to Ipswich to retake their exams and the Tutor there told her not to worry "they would get her through" which of course they did.

After her finals Mary went to the General Lying in Hospital to do her Midwifery Training.



Continued...

CONT. MARY NIXON NÉE GAY



Mary worked a lot of her training in Main theatres with Sister Griffiths. She remembers a houseman called Douglas Donald who sometimes was called Donald Douglas!! She had fond memories of Mr. Charlie Noon, who always wore a bowler hat and Mr. Brittain.

There were lots of chores such as making powder balls to put inside gloves before sterilizing them. "It was very messy" Everything was sterilized in the autoclave and the trolleys were set up with bowls, trays of instruments and green towels.

One night Mary was called to theatre when off duty to help out as there were a staff shortage and two theatres were needed to run side by side. An acute appendectomy on one side of the

theatre and a Caesar on the other.

Mary assisted at the delivery of twins by caesarean section and both babies were passed to her. Holding one slippery baby was difficult to hold but two were almost impossible and she thought, "If someone doesn't come and take them quickly they will be on the floor!"

Mary was also involved with a lot of orthopaedic surgery. Mr Brittain asked her to go to Hellesdon hospital to assist him with a knee operation. He paid her £3 which she was not sure she should keep but she did. He took her to Hellesdon Hospital in his car. Mary asked him if it would do 100mph. and he drove very fast down Guardian Road to prove that it could.

When on Night duty Mary would do 3 nights on each surgical ward relieving other nurses. The night nurses had to serve breakfast before going off duty. The patients had their own eggs, which had to be collected and named before cooking them in a large pan. You were in real trouble if the patients didn't get their own egg.

Junior nurses came on duty at 7-30am. Then Sisters and Staff Nurse later. When Sisters were off duty they were taken breakfast in bed by the ward maid but more often by a junior nurse.



CONT. MARY NIXON NÉE GAY

Mary went to London for 6 months to do her Midwifery training at the General Lying In Hospital.

When Mary returned to the N&N after being in London she became a Sister on a 40 bed surgical ward.

In 1940 as World War Two progressed, the hospital was bombed and Mary's surgical ward was moved to the David Rice Hospital in Drayton along with the Medical Ward, a Gynae Ward and an Operating Theatre.

Mary felt they got used to working in the difficult conditions and to the bombs dropping on Norwich.

She remembers walking back from Cringleford to the Hospital one night and watching the fire-bombs dropping on the city, "Strangely we didn't worry too much about it."

Shortly after the war Mary met Bill when he came to the N&N as a houseman. The couple were married in 1948 and moved to Holt where Bill became a GP.



Mary had three children, Elizabeth, John and Robert and took a break from Nursing to bring up her children and concentrate on being a G P's wife. Someone always had to be on call, which restricted family outings and social life but she liked the work and helping Bill.

When the children were older Mary went to work in Kelling Hospital Theatres until she retired in the mid 1980's.



Mary has for many years been involved with the community in Holt and still manages to go to the over 60's Club and sometimes walks into town with help.

Mary celebrated her birthday with her family and friends along with a telegram from the Queen and her MP.

Doreen Betts

MRS. JANET PALLETT NÉE STEEL. TRAINED 1938-1941.
(AS TOLD TO PAT LEGRICE)



I was born in Theale near Reading, Berkshire in 1918.
My father was a Parson at Fulbourn where we, my Mother, Father, my two brothers and my sister lived.

I was educated at Cambridge High School. At sixteen I took my School Certificate Exam to be a Children's Nurse. I could not train to be a nurse until eighteen years old, so I went to Tadworth Court in Surrey to a convalescent home for children from Great Ormond Street, until I was eighteen years old. I was unable to be accepted at a London Hospital.

I was recommended to apply to The Norfolk and Norwich Hospital, as it had a good reputation for nurse training. On passing the interview, I commenced my training in 1938 to 1941. under Matron Jackson and later Matron Stolworthy. I remember an incident during the Second World War when Colman's factory was bombed and being on night duty [and asleep] I was called to help in theatre as there were many casualties. When the sirens went off we had to collect the radium boxes from the wards and take them to the well.'

CONT. MRS. JANET PALLETT NÉE STEEL

After the all clear we took them back to the wards again.

Bill and I were married on September 3rd 1940. I still lived in the nurse's home. On one occasion Matron Stolworthy found out I had a man in my room, I explained that he was my husband, but still he was banned!

I qualified in March 1941. My husband was in the Royal Artillery and whilst he was in England, I travelled with him. Our son Michael was born in 1942. When Michael was 20 months old, my husband was posted to the Orkney Islands. Our second son John was born in 1945, he died at 6 weeks old with meningitis. I was living at this time in Mundesley. I became a house wife until Michael was 17 years old. He was going to college. My husband was now home from the war days, and we moved to Yarmouth Road, North Walsham; our house was near North Walsham Cottage Hospital.

I had an interview with Matron Grey at the North Walsham Cottage Hospital. Matron Grey offered me a theatre post, I explained to her that I had not worked in the theatres for 20 years. I felt very nervous about this important post.

My meeting with the surgeon Mr Alan Birt made me feel more nervous. His first question to me was "Are you my new theatre nurse?" I replied "Yes". Next question, "Where did you train?" My reply was the Norfolk and Norwich Hospital. He replied to me, was "If you were trained by Sister Griffiths, you will never forget it".

I did Mr Birt's Lists with him for 20 years. I was working with him when he was doing his last surgical list at the North Walsham Cottage Hospital. He presented me with a pair of Mayo scissors, and said, "Now we have not got the theatre table between us I think we may now be Alan and Janet".

I still have the Mayo scissors beside me in my room.

Following Mr Birt's retirement I worked with Mr Cameron for two to three years at North Walsham.

I was transferred to the operating theatre at Saint Michael's Hospital Aylsham, where I scrubbed for Mr Gallagher who specialised in extremities.

In 1981 when I was 63 the authorities retired me from nursing.

I enjoyed my retirement with my husband Bill, who sadly died in 1997.

I am now residing at the Manor House, Skeyton Road, North Walsham.

PAT GEORGE NEE NORTON (1956-60)



Pat was born in Morley St. Peter and then lived at Frettenham where her father had a farm. Her mother died on Christmas day when Pat was eight. She had three brothers and a sister and was educated at Norwich High School. After O Levels Pat attended Norwich City College to do a pre- nursing course. This took three months off the PTS training which she began in November 1956. At that time nurse training was for three years and three months.

When Pat qualified she worked as a Staff Nurse in Theatres with Sister Griffiths and Sister Ransom.

One of her duties was to wash the rubber gloves, wrap them in linen and then place in the autoclave to sterilise them. Unfortunately, one time on night duty, she forgot about them and they were burnt to a cinder. Another duty was packing radium needles (for treating carcinoma of the cervix) five into a box. One was somehow lost down the drain and a Geiger counter had to be used to retrieve it.

Pat used to quake in her shoes when Mr. Birt was performing one of his heart operations in case she handed him the wrong instrument. Once, to lighten the mood in theatre, Mr Birt told Pat that when he had a bath he always washed his shirts at the same time!

One Christmas Day Pat and some other nurses had a 2-5 duty and being rather fed up as there was nothing to do, they walked down to Bethel Street Police Station and were made very welcome with cups of tea by the policemen. (The police themselves were quite often found having a cup of tea on Baby Block at the Jenny Lind hospital when they were on night duty.)

In November 1961 Pat married Derek George. In January 1962 she went to the old Gt. Yarmouth General Hospital in Theatres and worked there until she had her daughter, Christine, in 1964. When Christine was six months old they moved to Abbey farm, Thurne and lived on £10 a week until the first harvest. After having her son Leslie, she took a year off and then went back to theatres.



Continued...

CONT. PAT GEORGE NEE NORTON (1956-60)

In 1968 she went to the maternity ward as they were desperately short of midwives. As Pat was not a trained midwife she assisted the midwives weighing babies and staying with the mothers whilst they were in labour. She then moved to the Special Care Baby Unit at Northgate which later transferred to the James Paget hospital at Gorleston. Pat took a day release course at Reading hospital in Special baby care. Pat was then given the post of Sister in the Unit and stayed there for nearly forty years retiring in 2003 when her husband died. She then returned to work on the bank until she was seventy. Pat was very highly thought of and felt privileged to be asked to open the refurbished and updated Baby Unit with Mr. & Mrs. Albert Jones on July 21st 2004.

Elizabeth Blaxell
2015

“The Knitting Nanas” at Manor House

The Knitting club was formed in April 2014. The idea came from Janet Pallet and Doreen Waters. The wool is donated by family and friends and blankets bonnets and teddies are knitted for NICU at the N&N hospital. They now hold sessions every Tuesday afternoon for one and a half hours.



More Christmas memories from the late 1950's

With thanks to Magaret Fox nee Bowden.



Sister Johnson (The Late Mrs Cox) and the Staff of the old Ward 6.



Sister J Cannelland
Staff of old ward 3.



Back Row. From the right SN A C Bryant (the late Mrs Rose) Sister J M Tate, Sister I M Griffiths, Sister M I Ransom.



Main Theatre Staff including Sister Griffiths and Sister Ransom.

Cont. More Christmas memories from the late 1950's



Main Theatre staff
Celebrating
Christmas.



Singing Carols
around the wards



Sister Freeman
and Staff, Ward 6



Sister Curson and
Staff Ward 7

Why I chose Nursing...by Danni Needs



One of my earliest childhood memories was helping my mum make her nursing hats. I remember her getting ready for work thinking how pretty she looked and just how important her job must be to wear such a special uniform! Something sparked inside me which would later see me following in her footsteps.

However, it would be sometime before I joined the force of nightingales as I had some living to do before I was ready to take on such a challenging vocation.

I soon realised that caring for children was really something for which I had a natural ability when I embarked upon a colourful career of youth work/mentoring and school related roles.

From working for such organisations as the Matthew Project, the police force and various colleges and schools, I found my true path. It was from a conversation I had with a careers advisor one afternoon when asking how I could pursue my passion for caring and helping children that I was directed towards a paediatric nursing degree. A qualification that would give me an opportunity to enter the healthcare service and enable me to pursue a varied and challenging occupation.

It now seems a lifetime ago that I applied to the UEA and found out during my travels through Asia that I had succeeded in obtaining a place on the nursing degree.

So in September 2009 I began my studies, during which time I became a mother. Fortunately I was able to continue the course with the support of staff at the NNUH, the UEA and my family.

Finally after four years of sweat and tears and several “I can’t do this” rants, I qualified last August as a paediatric nurse and managed to secure a job at the Day Procedure Unit at the NNUH. One of the proudest and most satisfying moments of my life.

I start my day with a smile and feel privileged to be doing the job I do. I often hear my friends moaning about going to work, yet I can honestly say that there hasn’t been a day when I’ve dreaded going in (well perhaps the first one- due to nerves and the unknown).

Cont. Why I chose Nursing...by Danni Needs

DPU feels like a little hospital within the hospital and I've felt welcome from day 1. We work closely together with all medical professionals with the feeling everyone is as important as each other. I feel comfortable in approaching my manager as I would my peers and I have no qualms in discussing my opinions with a consultant or the matron. My role as a DPU nurse is varied in nature and offers the opportunity of being involved in the whole patient journey from admission to discharge, including pre-assessment, anaesthetics and recovery. I feel this gives me scope for career progression and opens up many opportunities to develop my nursing role.

But most importantly, I have been given the opportunity and precious task of caring for children. As a nurse and a mother I appreciate how critical my role is and I am constantly reflecting upon how we as nurses can improve the care we provide through the Trust.

Making a difference is primarily why I came into nursing, so when a male patient personally wrote to the Chief Executive to tell her that his procedure at DPU was a "pleasure" and that it rivalled private care, I knew we were doing something right.

This makes me truly proud of my profession and spurs me on to be a proactive and empowered nurse. I'm now looking forward to a full and varied nursing career here at the NNUH.

Dani Needs

Ps My Mum is still a nurse at the NNUH with a twenty five year achievement award under her belt, but minus the hat and is still the most glamorous and awe inspiring nurse I know.

This speech was given by Dani Needs at NNUH 2014 Nurses Day celebrations.



OH HOW TIME FLYS



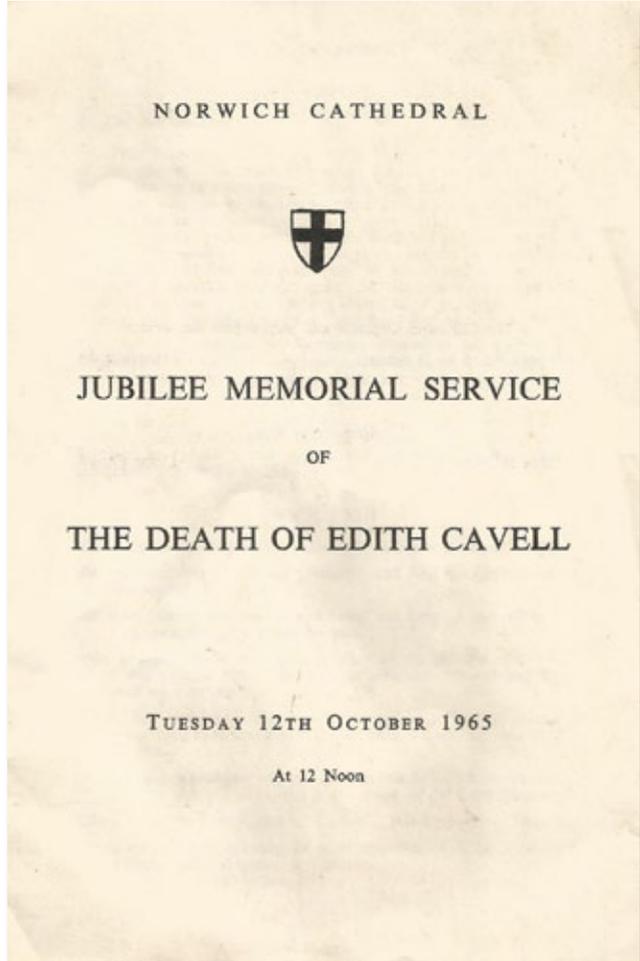
This photo was taken nearly 50 years ago in October 1965 during my first month as a student nurse at the Norfolk and Norwich Hospital.

So many new things to learn, see and do including new skills to acquire, new books to read, a new uniform to understand. Living in a new place, sleeping in a new bed, leaving a much loved family home.

The joy of making new friends, some I am so lucky to still have to this day.

What a new Life.
What an adventure.
What a privilege.

During that first month our set even represented the N&N at the 50th anniversary of Edith Cavell's death at a cathedral service which was televised on "Songs of Praise."



Mary Dolding

PRIVATE NURSING IN JERSEY – C.I. (Part One)



I lived in Jersey, not far from St Helier, in the early to late 70's. Both my daughters were born there.

I applied to Jersey General Hospital to work 2 nights per week. I did one shift, came home with flea bites and never went back!

I then applied to a private 'home nursing' agency . There must be plenty of scope in a place like Jersey, I reasoned. There was....

It quickly became apparent that for most patients I went to 'nurse', a nurse maid would have sufficed.

My first patient:

Colonel Dawson (widower) and his two eccentric, late middle aged daughters. A lovely Portuguese cook/maid/bottle washer. Two gummy, toothless poodles who peed on the expensive, antique, enormous Persian carpet that covered the main hall floor and gardeners various, as the estate covered a few acres!

The house was huge..... slightly smaller than Downton Abbey. I have no idea how many rooms there were but it is now a private school. It had a huge entrance hall and a wide sweeping staircase. I used to imagine balls etc. held there in the past with the ladies in crinoline and suchlike, rustling down the staircase and through the hall and huge rooms.

An enormous chandelier at the end of a green velvet rope hung down from the ceiling, to light the staircase. It tinkled when anyone walked down the stairs
Colonel Dawson had his own rooms in a small part of the house. I was given my own rooms, loo and bathroom, along a passage, a bit away from where the house was lived in. I hated having to go there. It was dark and very spooky.

I seem to remember my day was from 10am to 4pm although I was often sent home earlier as they thought my husband would miss me. He was at work till about 6pm but I didn't feel it necessary to mention this as I got a bit bored after lunch.

I can't ever remember if I ever did anything for him except for the day I escorted

Continued...

Cont. PRIVATE NURSING IN JERSEY – C.I. (Part One)

him to Jersey General for a blood test. I think I used to help him put his socks on. I used to sit in a comfortable chair outside his room and read... but the money was good. (tax at that time was 20p in the pound I think)

I used to pick up the Daily Telegraph on my way to work, which he promptly commandeered to read as soon as I arrived and I was sent to the cavernous kitchen for a cooked breakfast. The inclusion of this was par for the course, which was fine with me.

The Portuguese lady was lovely and made a real fuss of me.

At lunch time, the Colonel and I tottered down the stairs to the dining room. His daughters drifted in at the appointed hour of 1pm.

It was a huge, rectangular room with the obligatory chandelier... and the dining table!! The four of us sat round one corner of it! We were served a light lunch. Sadly my day finished before dinner.

I liked the colonel and his daughters very much. They were real aristocracy, unlike some others I looked after.

They were Old Money not Nouveau Riche. As such, money was never discussed. That was considered vulgar and there was nothing vulgar about the Dawsons. They treated me with the greatest respect and consideration.

Colonel Dawson and his family were whisky people from Scotland and made a fortune during the war owing to.. ahem.. black market activities.

He promised me he would tell me all about it one day but he never did and as he was about 80yrs old and his daughters in their mid 50's, they will have long gone to that great distillery in the sky.

I was only there for about 3 weeks but it was a great experience. I can definitely say, I really did see how the other half lives.

Karen Thompson (Nieuwenhuis)
Oct 1965 – Oct 1968



MY EXPERIENCES AS A PHLEBOTOMIST.



I worked as a phlebotomist at the Norfolk & Norwich Hospital for 10 years and 10 years at a Doctors Surgery.

I had previously worked as an Auxiliary Nurse on Orthopaedics.

When I started my training as a Phlebotomist I was taught in the Maternity Department as ladies who are pregnant have better veins, which makes it easier, but even so it is quite nerve racking when you take your first bloods, and having to pretend to the patient that you have done this before. In those days we had to learn all the different codes for each blood test, as the forms were all hand written by the Doctors. After about 6 weeks, you are considered adept enough to move on to other Departments and are taken with an experienced Phlebo to general wards and the Psychiatric Hospitals. What an experience that was. I visited Hellesdon, David Rice, Thorpe St. Andrews and Little Plumstead Hospitals. In the secure wards at Little Plumstead we were locked in a room with two or three nurses. Two to help hold down the patient, so that we could get the bloods first time, and one standing guard at the windows so that other patients could not get at us. As you can imagine there was much shouting and screaming. Even so I enjoyed my work, but felt so sorry for the poor patients. I then moved on to bleed children and babies, another nerve racking experience.

I then moved to Phlebotomy Outpatient Dept. We had a very large work load. We covered the wards in the mornings, sometimes taking samples of the entire ward, also trying to decipher the Doctors' writing and having to be back in the Labs with the bloods by 11am. Then we had to go to Outpatients to help with the vast amount of people waiting.

I became very experienced and heard lots of funny things patients say to you, eg. "Will this hurt?", "Is it a clean needle?", "Could I get HIV?" etc.

Young men were most liable to faint as they considered they were too macho to ask to lie down, and if I had a pound every time a patient referred to the Tony Hancock joke, I would be very rich woman.

I had a very happy time at a GP Practice for 10 years before I retired, but I did miss my contact with patients.

Karen Wilkinson.





WHY VOLUNTEER?

I have just finished a shift of volunteering at the NNUH in the Big C centre at their open day. It was busy and although I do feel weary I feel I have helped to make a bit of a difference and therefore have that sense of well being.

I am a regular volunteer at the centre and I feel proud to help support the small but special team that work there trying to improve the lives of people who attend and have been affected by cancer.

I am sure many of you may already volunteer in your chosen field but I just wanted to remind you that if you live in Norfolk there are some great opportunities for volunteering throughout the Trust and in lots of different settings.

As nurses we were required to have key skills, including excellent people skills, good communication and observation coupled with an ability to answer questions and listen. We needed to be happy to work as part of a team and have the ability to deal with emotionally charged situations.

Being a hospital volunteer may give you a great opportunity to use those skills and give you a sense that you can continue to make a difference.

If you want to volunteer for the Trust there are a few steps to go through but if you want to find out more start by contacting:

Voluntary Services Department

Level 1, West Annexe 2

Norfolk & Norwich University Hospital

Colney Lane, Norwich NR4 7UY

Telephone 01603 286060 Email volunteers@nnuh.nhs.uk

Mary Dolding

Ps. you could always send us your own stories of volunteering

Several League members belong to the Norwich Branch of the NHS Fellowship.

There are branches all over the country.

For more information about a branch in your area access the website below.



Norwich & District Branch.

THE NHS RETIREMENT FELLOWSHIP

"Enjoying the future"
Join us today and enjoy the benefits.

The Fellowship exists to maintain friendships and to provide opportunities to make new friends through a range of social and leisure activities.

Find out more at

www.nhsrf.org.uk

Reg Charity No 287936

2014 AGM SNIPPETS



† *Obituaries*

Miss Bee Taylor

This is to inform you that our well respected and much loved stalwart member and Vice-President Miss Bee Taylor passed away on Thursday 15th January 2015 in the care home she had been in for some time.

She had received regular visits from two of our Trustees Pat and Elizabeth but had been poorly on the last two occasions. As you probably know Bee was over 100



years old and had been the treasurer for the NNUH nurses League for over 30 years.

Mary Lane Harper, Nee Gittens. 1918-2014.

Mary Harper trained in Huddersfield in 1946. She met Jack, her future husband, a Norwich man, on a train while travelling to Sheringham to visit her brother. They agreed to meet again and eventually married in 1951.

Mary worked at the Norfolk and Norwich Hospital from 1954 until she gave up nursing in 1960. During her time at the N&N she worked with Janet Hardingham and Molly Snelling in Outpatients.

Jack died in 1968 leaving Mary to bring up their son David on her own.

During her years of retirement Mary took up painting and went on many painting holidays. She exhibited and sold her paintings and became well known as a local artist. She painted until she was 90 when her eyesight failed in 2008.

Her last days were spent at Larchwood Care Home where she was happy well cared for.

Margaret Hayles nee Catchpole Age 95. 6th February 2015

Aunt Marg trained at the Norfolk and Norwich Hospital from March 1st 1944 – March 1st 1947. She made lots of friends at the hospital. Her room was, I think, on the ground floor of the Nurses home. I remember Aunt Marg telling me that she used to be woken in the night because girls who had been “out on the town” needed to come in as the front door had been locked. They climbed in through her window. Aunt Marg was a bit older than most of her intake and she had five younger sisters. Maybe she helped the girls when they broke the rules because she was reminded of her sisters.

Dawn Butler (niece)

