

NORFOLK & NORWICH
UNIVERSITY HOSPITAL

NURSES LEAGUE
JOURNAL



2016

The British war magazine was published in London on 22nd June 1914 eighteen days after the United Kingdom declared war on Germany. The publication had a circulation of 750,000 and contained articles, but the main focus was on photographs and illustrations.

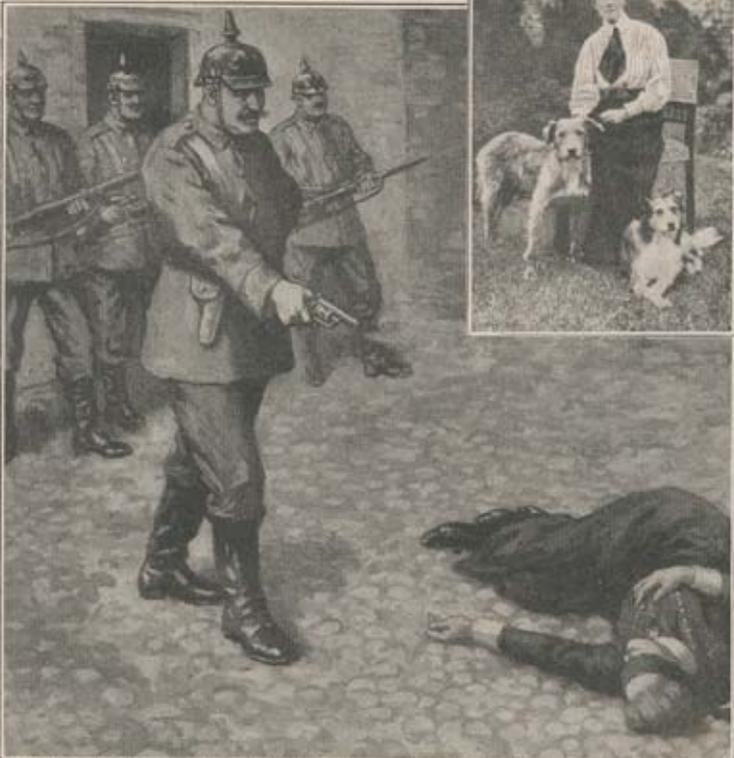
THE WAR

Illustrated

No. 62. Vol. 3. 28th October, 1914. A PICTURE-RECORD OF EVENTS BY LAND, SEA AND AIR. Edited by A. A. Hammerton

She who had waded to health and strength again
The stricken comrades of that maddest love,
She whose mad hands had worked the soldier's pain.

And glorified the name of womanhood,
Lay helpless while the German leader
Laid
And drew the deadly weapons from his belt.
C. E. B.



THE MURDER OF NURSE CAVELL.—The civilized world, which had become almost sceptical in regarding Germany's only act, learned a severe lesson on hearing of the execution of Nurse Cavell by the Nazis at Brussels. Nurse Cavell was charged with helping to smuggle Belgian men across the frontier, and found guilty by a German military court. A temporary sentence of death was passed, and though Nurse Cavell had worked conscientiously to

alleviate the suffering of wounded German officers at the hospital in Brussels, the penalty was inflicted under circumstances of peculiar brutality. The ill-fated woman had no strength to face the firing-party, and knelt down, whereas the officer in charge pronounced the grotesque farce, and, drawing a heavy German pistol, took his murderous aim, while the firing-party looked on. Inset: Portrait of the latest victim of German fury.

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THE NORFOLK AND NORWICH UNIVERSITY HOSPITAL NURSES LEAGUE.

EXECUTIVE COMMITTEE AND TRUSTEE MEMBERS.

Charity Registration Number 290546

2015 - 2016

PRESIDENT

Mrs Mary Dolding.

15 Greenwood Way, Sprowston, Norfolk NR7 9HW.

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Miss B Lee, Mrs. S. Rengert, Father I Weston. OBE.

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Mrs E Blaxell, Mrs D Collins, Miss A Copsey, Mrs M.R. Dolding,
Mrs W Hobbs, Mrs. Pat LeGrice, Mrs R McNamara, Mr M Surkitt- Parr.

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Elizabeth Blaxell,
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**THE NORFOLK AND NORWICH
UNIVERSITY HOSPITAL
NURSES LEAGUE
EXECUTIVE COMMITTEE**



Left to Right

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

2016 EDITORS' REPORT



Doreen and Elizabeth at the 2015 AGM.

We would like to thank those members who very kindly said that they enjoyed last years Journal and that it was one of the best. We don't think we will top it this year but even so we hope you find the articles interesting. Please keep them coming.

Elizabeth Blaxell
elizblaxell@hotmail.com

Doreen Betts
doreen.betts@ntlworld.com

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Norfolk and Norwich University Hospital Nurses League

Year Ended 31st March 2015

<u>Income</u>	2014/15		2013/14
Annual Subscriptions	865.00		920.00
Donations	917.92		921.00
Sale of membership Lists			
AGM Chapel Collection	335.52		342.62
Sale of Mugs/Badges	16.00	Sale of Mugs	70.00
Bank Account Interest	2.59		2.58
Gift Aid tax relief	272.77	Gift Aid tax relief	220.00
Income from Investments	582.77		608.24
B Taylor Legacy	35.00		
	<u>3,027.57</u>		<u>3,084.44</u>
 <u>Expenditure</u>			
Christmas Benevolent	517.45		520.74
Flowers/Gifts/Grants	169.90		113.89
Paed. Diabetes Fund NNUH	335.52	Chapel Fund NNUH	342.62
Journal	1,326.00		1172.00
Postage (journal)	817.74		444.90
Postage/Stationery	151.31		60.29
Display Poster	138.00		
Archive/Heritage	326.56		219.80
Catering	40.80		44.40
Petrol	138.70		115.52
AGM Expenses		AGM Expenses	61.00
Legal Fees	735.00		
	<u>4,696.98</u>		<u>3,095.16</u>
Surplus/Deficit	<u>- 1,669.41</u>		<u>-10.72</u>

BALANCE SHEET

Funds Brought forward

Barclays Community Account	3,757.97 (See note for 2013/14)	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
Surplus/Deficit	-1,669.41	-10.72
	<u>22,264.60</u>	<u>23,934.01</u>

Funds Carried Forward

Barclays Community Account	2,085.97	3,757.97
Barclays Instant Access saver	5,178.63	5,176.04
Unit Trusts & Investments	15,000.00	15,000.00
	<u>22,264.60</u>	<u>23,934.01</u>

Hon. Treasurer..... H A Barker *H.A. Barker* Accounts as c March 31st 2015

Hon. Independent Examiner..... *CM Ayres* Date..... *4/5/15*



A Message from the President.

Dear Members

A very warm welcome to all readers of the 86th edition of the NNUH Nurses League Journal and congratulations to our editors Elizabeth and Doreen on continuing to produce such high quality and impressive work. The Journals and those who kindly contribute with articles have become over the years a record of nursing at the hospitals and the work of the League. Please keep providing stories.



By the time you read this if living in this country anyway we should be having brighter, drier days and all looking forward to the spring and indeed the summer ahead.

I can report that the committee and I have had a busy year representing the League at various events many of which you will hear more about in articles in the journal. The various Edith Cavell events were well attended by League members and very much enjoyed.

Looking back to our 85th celebrations I would like to thank all who made the reunion so special and happy, I have had really good feedback about the event which is always encouraging. I hope you had some luck with growing the celebration bulb and were able to enjoy it and celebrate with me as a NNUH Nurses League member.

We are working hard to promote the League to try and attract new members which is vital if we want the League to continue. Please help us to find new members whenever you can.

Looking forward to the 2016 reunion, I do hope you will be able to join us and enjoy meeting up with colleagues and friends.

My very best wishes to you all

Mary Dolding



At our last committee meeting in November it was decided that we should try to make contact with those life members that we hadn't heard from in the past three years. The rather long list was reduced by trustees both past and present who either had contact with members or knew of their whereabouts. After we had exhausted all avenues I then wrote letters to the remaining members. I would like to enlist your help with those who have not replied namely E Boundy (London) N Cowan (France) M Gooch (Portsmouth) B Horkham (Australia) J Milk (Norfolk) P White (Australia) V Varney (Bournemouth) if any member has any knowledge of them, I would love to hear from you.

Perhaps I could ask life members, who because of distance are not able to attend re-unions that they occasionally send their reply slips back, so that we know that the journal is reaching them and our records are up to date. Thank you very much in advance.

Thank you once again for your letters, many of you saying how much you enjoy the journal. Pam Pirrie says she has been known to read it from cover to cover the moment it arrives; her husband who was a radiographer at the N&N enjoys it too. Pam has had an interesting career ending up running the Tissue Viability Service for her local PCT.

Finally, the trustees join me in thanking those members that send their subscriptions when receiving the journal; this reduces the postal cost of sending reminders. Also we would like to thank those members that kindly send us donations as they are very much appreciated.

Ann Copsy
Membership Secretary.

HERITAGE SUB COMMITTEE REPORT.



The Heritage Sub Committee has continued to meet since our last A.G.M to sort out and catalogue the Nurses' League memorabilia and place them in archival sleeves and folders. Those members who attended the last meeting on May 16th will have had the

opportunity to view the two folders covering the Royal visits and Orthopaedics for deposit at the Archive Centre, Norwich. Folders will be stored in the correct atmospheric conditions to preserve the material for future generations.

This year, we are concentrating on the badges we hold. All these have been photographed and we are adding any information we have to put with them. The two badges we are working on are the Alice Long Silver Memorial Medal and the Bronze/Jock Carruthers Memorial Medal. We have some information and

photographs from members and we are trying to trace the names of recipients of these medals from old newspaper cuttings in scrap books, old journals and reports held at the Archive Centre. However, we would value any input from members especially if any of the family have been nurses. Recently, we had correspondence from Patricia Whittle whose



mother Joyce Ryder trained at the Norfolk and Norwich Hospital from 1945-1948. Patricia has her mother's Jock Carruthers memorial medal and certificate dated 1948. Until then we did not know that a certificate was issued with the medal. We are not sure if certificates were issued with the Bronze Medal before the name was changed to the Jock Carruthers memorial medal. These badges were abolished during the early 1970s. Through speaking to Janet Hardingham we learnt that Janet was a winner of the Alice Long memorial medal in 1943. Are you, or a member of your family a holder of one of these medals? Are you one of the last nurses to receive one of these medals before the medals were abolished?

Cont. HERITAGE SUB COMMITTEE REPORT.

As well as the badges, we are trying to identify uniforms over the decades. We have some items of uniform in our collection but because uniforms had to be handed in on leaving the hospital, very few were saved. We are trying to identify change over time by studying the photographs we hold. A lot of change took place with the implementation of the Salmon Report. If you know when cotton aprons changed to plastic ones, stripes around the sleeves to coloured belts, material caps to paper ones, colours of the shoes and stockings/tights or any other information, please tell us so that the information can be noted in our folder.



When at the National Health Service Retirement Fellowship Christmas meal, Janet Hardingham recalled that

she was one of the first nurses to wear a long cape. During World War II Janet's bedroom in the Leicester Home was damaged by fire during the bombing raids of 1942. Along with some other night nurses Janet was rehoused in Bethel Hospital. Long capes were issued to keep the nurses warm and to cover up their uniforms as they walked from Bethel Hospital to the Norfolk and Norwich Hospital to report for night duty. Because the nurses were not allowed to wear uniforms out of the hospital, they had to walk the most discreet way which was past Chapelfield Gardens. Before that, shoulder length capes were worn.

Janet recalled that at the time the nurses' home was damaged, people were very kind and offered accommodation in their homes on Newmarket and Ipswich Roads. Some nurses had to double up in rooms in the Alexandra Nurses' Home so that nurses had somewhere to sleep by day and by night. If you have any World War II memories, we would welcome your input for our next folder.

All the folders we have been working on will be on display at the A.G.M from 1 pm and after the meeting so that you can look through them before they are deposited at the Archive Centre, Norwich.

Any information can be sent with your return slip to Ann Copsey.

Margaret Allcock email: margaretnza44@gmail.com

Vivien Aldridge email: valdridge@btinternet.com

Elizabeth Blaxell, Mary Dolding, Betty Lee



UPDATE FOR THE JOURNAL FROM OUR NEW WEB MASTER

I took over the responsibility of the Nurses League website from Dr Anthony Gordon- Gray in September 2015. The League would like to thank Dr Gordon Gray for all his many years of support to the League in particularly the large amount of work done on developing, maintaining and hosting the website for us. During 2015, the website has seen a monthly increase in the 'hits' it has received.

January 2015	180
February 2015	393
March 2015	172
April 2015	188
May 2015	213
June 2015	188
July 2015	201
August 2015	147
September 2015	136
October 2015	125
November 2015	299
December 2015	279

The November and December spikes potentially relate to the increased publicity the League attracted through the Edith Cavell 100 years celebrations. The League were very active in the support of this event with a stand at the Forum promoting the work of the NNUH Nurses League.

Scan this to visit
the site.



www.norfolkandnorwichuniversityhospitalnursesleague.co.uk

2016 will see in consultation with members developments to the web pages.... so it's a case of watch this space.

Any ideas for web development, please forward to:
dawncollins037@btinternet.com

Dawn Collins

Changes to Membership 2015

New Members.

Mrs Christine Adcock, nee Dyle, 1965-68. Mrs Patricia Carey, nee Hewitt, 1966-69.
Mrs Shirley Collin, nee Atkins, Service. Mr John Hayes, 1971-74.
Mrs Elizabeth Hogbin, nee Baugh, 1982-86. Ms Kay Marrison,
nee Gillingham, Service. Mrs Carole Monaghan, nee Stride, 1968-71.
Mrs Caroline Panter, nee Muir, 1968-71. Mrs Lyn Taylor, nee Kerrigan, Service.

Deceased Members.

Mrs June Coles. Mrs Jill Douglas. Mrs Eve Gascoyne. Mrs Vera Green.
Mrs Joan Leach. Mrs Kathleen Lewis. Mrs Dorothy Norton.
Miss Patricia Tungate. Mrs Evelyn Vincent.

Resigned Member.

Mrs Anita Rhodes.

A DONATION TO THE LEAGUE FUNDS.



Dear Hilary.

It was good to see you at the Nurses League A.G.M. We thoroughly enjoyed ourselves and were so interested to hear about the Nurse Consultants Role.

Thanks to all for the hard work that goes into this day to make it happen.

I have enclosed a cheque for £50 for the Nurses League funds.

At our church, St Peters West Row, we have a ladies breakfast club alternate months.

At the last breakfast I gave a talk and spoke about Edith Cavell. Everyone was so interested and said there was lots that they were unaware of.

The club members give a donation and the person who gives the talk donates to her chosen charity; hence the cheque.

With very best wishes, Hilary.

Hilary Last 1962-64.



THE ALICE LONG SILVER MEMORIAL MEDAL

Alice Long was born at Wells-next-the-Sea, Norfolk on 10th August 1872 to Frederick and Helen Mary Long nee Haylock. According to the 1891 census Alice was one of seven children in the family.

Alice's elder brother by two years, Dr Sydney Herbert Long, was a consultant physician at the former Norfolk and Norwich Hospital, St Stephens Road and at the Jenny Lind Hospital for children on Unthank Road, Norwich. Dr Long joined the staff of these hospitals in 1895 and remained associated with them for over 40 years until he had to resign under the age limit rule.

The 164th Annual report of the Board of Management held at the Archive Centre, Norwich, tells us that the Hospitals owed a great debt of gratitude to Dr Long's many years of skill and devoted service.

When his sister Alice died, still a spinster, on 12th September 1918 at the age of 46, Dr Long gave a sum of money in her memory. The money was for a silver medal to be awarded to the most proficient nurse during training and in the final examinations.

The medal was awarded in 1919 at the Hospital's annual prize giving and then annually until the early 1970's when reorganisations took place and the medal was abolished.

We have in our collection of badges, a medal awarded to nurse Mabel A. Schofield in 1920.

Margaret Allcock

Vivien Aldridge

Jean Thompson who has kindly researched the ancestry information.

The Alice Long Medal was instituted in 1919 by Dr Sidney Long as a memorial to his sister, Miss Alice Long. Dr Long was a Consultant Physician at the former Norfolk and Norwich Hospital, Brunswick /St Stephens Road. He gave a sum of money to provide a silver medal to the nurse who showed the greatest proficiency in training and the final examination for her certificate.

This medal was presented at the annual prize giving until reorganisation took place in the late 60's early 70's.



BRONZE MEDAL... JOCK CARRUTHERS MEDAL.

The Jock Carruthers Medal was formerly known as THE BRONZE Medal. At the 1936 Prize Giving, Matron, Mrs E. O. Jackson announced that “for some years past, the Bronze Medal has been given anonymously. I am now happy to be able to tell you that the donor is Mr Carruthers and he allows me to tell you this and to add that it is given in memory of his little son. The Bronze Medal will therefore in future be known as The Jock Carruthers Medal”.

Norman Stuart and Elizabeth Carruthers nee Forbes had three sons. Baptisms and Deaths registers from St. Edmunds Parish Church, Acle, Norfolk, which have been deposited at the Archive Centre, Norwich, reveal that their first two children were twins. Norman lived for 8 hours and was buried in Acle churchyard on January 29th. John Stuart lived for 22 months and died on December 21st 1918 and was buried in the same grave on December 24th. There is a memorial cross marking the grave with John Stuart’s inscription on the base of the cross. Norman’s inscription is on the other side. Austin Stuart was born on December 21st 1919. Austin was a Lieutenant in the Royal Army Medical Corps. Sadly, he died in WWII on August 1st 1945 at the age of 25 years.

The Bronze Medal would have been named after the twin John Stuart. Jock is the traditional form of Jack or John. It is possible that the medal was instituted around the same time as the Alice Long Medal as both Dr. Long and Mr. Carruthers lost members of their families in 1918.

This Photo shows Dr. S H. Long and Dr. N. S. Carruthers who donated the Alice Long medal and the Carruthers medal.



The Hon. Medical Staff, 1929.
J. Barfield, G. P. C. Clavidge, N. S. Carruthers, J. S. Leach, A. J. Cleveland, C. Neen,
M. W. Balman, H. J. Swaling, A. J. Washford, B. Morgan,
E. W. Everset, D. D. Day, F. W. Barton Fanning, S. J. Barton, Sir H. A. Ballance, S. H. Long.

BRONZE MEDAL...

Continued

JOCK CARRUTHERS MEDAL.

Nurse Joyce Makin's daughter, Patricia Whittle, has sent us a copy of the certificate issued with the Jock Carruthers Medal. Joyce was the recipient of the medal in 1948.

More research is required, but I have found in the N & N Scrapbook held at the Archive Centre a cutting from when Nurse M. Jones was presented with The Bronze Medal at the prize-giving in 1925.

Mr. Norman Stuart Carruthers, born 1885, Sanquhar, Dumfries, Scotland was a well respected E & T surgeon at the N & N and Jenny Lind Hospitals. He worked as Mr. Everett's assistant from 1920 when Mr. Everett retired and the vacancy was filled by the appointment of Mr. Carruthers.

As Chairman of the Nursing Committee, Mr. Carruthers had deep concern for the wellbeing of the nursing staff long before the limelight on "Nursing conditions". No matter was too small for his attention and all nurses soon learnt of the tradition handed down through all grades of the nursing staff, of going to ask Poppa when advice and effective action was required in the face of difficulties.

Margaret Allcock

Vivien Aldridge

Jean Thompson who has kindly worked on the ancestry information.

2016 Dates for your Diary

18th June 2016

Norfolk & Norwich University Hospital Fete

2nd July 2016

Cromer Hospital Open Day and Fete

8th December 2016

Norfolk & Norwich University Hospital Christmas Fayre

Recent Changes in Nurse Education

This synopsis reviews some of the key changes that have taken place in nurse education in recent years.

Project 2000

Far-reaching reforms in nurse education were instigated in the late 1980s and 1990s as a result of 'Project 2000'.

An academic level of pre-registration training was set at a minimum of Diploma in Higher Education.

Four 'branches' of nursing (now called 'fields') were identified. These are Adult, Mental Health, Children's and Learning Disability Nursing.

The first 18 months of the programme were designated the 'Common Foundation Programme'. During this period, students in all four branches received similar preparation in terms of theory and practice. Thereafter, they entered their respective 'branch programmes'.

Student nurses were given supernumerary status, so that they were no longer included in the workforce numbers. This did not mean that students had a merely observational role while they are in clinical practice. It did mean, however, that their educational needs could be given greater priority. Doubts emerged as to whether the 'Project 2000' model sufficiently equipped students with essential nursing skills, and prepared them appropriately for their roles as registered practitioners. In 1999, various revisions were introduced: clinical skills were given greater emphasis, the Common Foundation Programme was reduced to 12 months, and stronger links were established between education providers and health service providers.

The move into Higher Education

The last traditional School of Nursing closed in 1995, completing the move to institutions of Higher Education. Approximately 80 universities in England offer pre-registration nursing programmes. On successful completion of their programme, students gain both a nursing registration and an academic award.

The education and training function previously undertaken by nurse tutors and clinical teachers is now carried out by lecturers, who are expected not only to have clinical credibility, but also to promote scholarship and evidence-based practice by undertaking higher degrees and by engaging in research activity.

Until September 2013 the majority of nursing students in England studied at the level of Diploma in Higher Education. After this date, further changes were introduced with the effect that all pre-registration programmes would be at undergraduate level.

Continued - Recent Changes in Nurse Education

Applications are made through the Universities and Colleges Admissions Service (UCAS). Basic entry requirements are established nationally, although each local centre is allowed to set its own entry criteria. Selection processes also vary: not unusually, interviews will be conducted jointly by academic and clinical staff.

NMC Nursing & The NMC Midwifery Council

In 2002, the functions of the old UKCC and English National Board were taken over by the Nursing and Midwifery Council (NMC). The NMC's 'Code' (professional standards of practice and behaviour for nurses and midwives) is revised periodically, with the most recent version published in 2015.

Post-registration and post-graduate education

This period has also seen increased emphasis on post-registration education and training. Previously this was relatively unstructured, comprising in-house study sessions, along with a range of short courses approved by the English National Board. In 1992, the ENB Framework and Higher Award was introduced, whereby registered practitioners could study not only to improve and update clinical skills, but also to accumulate academic credit towards a Diploma in Higher Education or a Degree. Previous knowledge and skill could be recognised through a process of accreditation of prior learning (APL).

Post-registration education and training is now a commissioned process, and thus geared to meet not only the needs and aspirations of the individual, but also those of the local service and its patients.

Nursing scholarship has also been promoted by the increasing numbers of individuals undertaking post-graduate education and engaging in research activity.

Mentor preparation

The preparation of Mentors (registered practitioners who teach, support, and assess student nurses in clinical practice) has developed considerably since the



Continued - Recent Changes in Nurse Education

days of short courses in 'Art of Examining'. Courses must meet the NMC's Standards for Learning and Assessing in Practice, and mentors must fulfil ongoing requirements for their role, including regular updating.

Research

The first Professor of Nursing was appointed in 1970. The decade which followed saw the publication by the Royal College of Nursing of an influential set of research reports. Since then, and especially since the move of nursing education into institutions of Higher Education, nursing research has developed an increasingly high profile. Both teaching and clinical practice are expected to be evidence-based.

Service User Involvement

Increasingly, service users make important contributions to nurse education. They may be involved in the recruitment and selection process, in advising on curriculum development, in teaching, and in assessment. Amongst other things, this involvement by service users helps to ensure that nursing education remains patient-centred.

Enquiry-Based Learning

An important element in the student nurse programme is enquiry-based learning. Students are divided into small groups (of 20 or so) in order to study a scenario that will 'trigger' certain learning needs. In groups of 3-5, students will study an aspect of the care of the patient featured in the scenario, and then present their findings to the rest of the group. This is a learning style which helps students to develop their study skills, communication skills, and team-working skills, while also emphasising a patient-centred approach to care.

Assessment

Students are assessed in a range of ways. In each period of practice experience, there is a thorough assessment of practice, carried out by and with the mentor. Outside of clinical practice, assessment is based on, among other things:-

- Essay assignments
- Assessment of enquiry-based learning
- Report writing
- Written examination
- Dissertation

Some assessments 'bridge the gap' between theory and practice. One such assessment is the Objective Structured Clinical Examination (OSCE) that examines clinical skills such as the assessment of a patient in an emergency situation, and

Continued - Recent Changes in Nurse Education

medicines management. Another is the portfolio, which is an overall record of and reflection upon learning, and which the student must maintain throughout the programme.



Quality of care

Recent years have seen a number of incidents highlighting deficiencies in the quality of care offered to patients. Perhaps the most serious example of systematic failure occurred at the

Mid Staffordshire NHS Foundation Trust, leading to the commissioning of the Francis enquiry in 2009. Some have perceived links between such examples of bad practice and the transition of nurse education from an apprentice-style hospital-based training to a university-based undergraduate education. Others would argue that the relationship between cause and effect is more complex than that.

Postscript

The author has been a participant observer of nurse education for 44 years. In his view, 'change' in the abstract is neither a 'good thing' nor a 'bad thing'. Some changes are for the good; others are not. Some may be resisted; others are inevitable. What has not changed, in his judgement, is the desire of the vast majority of those who enter the nursing profession to care for their patients with knowledge, skill and compassion. Modern buildings, sophisticated equipment, well-designed curricula, expert teaching, and good management all have their place. But our students will always be our most valuable asset and our greatest source of pride.

Jonathan Mason, RGN, RNMH, RNT, MA, BEd (Hons), Cert Ed.
May, 2015

Mr. N. Alan Green...

...a Life Remembered

Alan Green died 4th May, 2015 and will be remembered by many members of the Nurses' League. He was for many years a Urology Consultant, working at the Norfolk and Norwich, West Norwich, Cromer and Jenny Lind Hospitals. Many will recall entering the old Norfolk and Norwich through the main entrance and noticing his car parked very close to the front door, a sign of how early he had arrived at work!

Mr. Green first came to Norwich as a junior surgeon in 1954, prior to this he had worked as an Anatomy demonstrator. Following this post in Norwich he moved to gain further experience and continue some research;

some of this time being spent in North America. He returned to Norwich in 1964 as a Consultant Surgeon, becoming a specialist Urology Consultant two years later and heading the first specialist urology unit in East Anglia.

In his professional life Mr. Green was well respected, he was an external examiner for the Royal College of Surgeons, in both England and Edinburgh. He was granted the Freedom of the City of London in 2004. He was a founder member and one time president of the British Association of Clinical Anatomists. He was also a member of the Travelling Surgical Society, its President for three years then for almost twenty years, its archivist. Following his retirement he also wrote many an obituary to be published in professional journals. He was widely known and highly respected.



Cont.

Continued - Mr. N. Alan Green...a Life Remembered

In his private life he was a family man, he and Doreen were married for more than sixty years, their four children were raised in Norwich. Doreen and Alan met when she was a nurse and he was a junior doctor; and their family were very important to them both. He was musical and involved in many local charities.

Possibly because of his wife's profession Mr. Green was always supportive of nurses. He was very interested in the work of the Nurses' League and had given us much support. He had accepted the honorary role of Archive Adviser within the League and his demise is a sad loss to the League.

Vivien Aldridge

ROSE PLANTING CEREMONY TO COMMEMORATE AND PAY TRIBUTE TO EDITH CAVELL

On a cold and rainy day six members of the League, Mary Dolding, Margaret Allcock, Betty Lee, Vivien Aldridge, Pat LeGrice and Elizabeth Blaxell, attended a rose planting ceremony in honour of Edith Cavell.

The Lord Mayor of Norwich, Judith Lubbock, and Simon Knighton, chairman of trustees at the Cavell Nurses Trust planted seven roses in the grounds of St. Stephen's church, Norwich with Simon White of Peter Beales Roses.

The roses are called Miss Edith Cavell and were introduced in 1917 with Attleborough - based company, Peter Beales, producing the plant. The company will not sell any this year so as to allow the Cavell Trust to sell them to raise money.

The National Garden's Scheme has also given the charity £50,000 to help in the nationwide planting scheme.

Elizabeth Blaxell



Edith Cavell

Commemorations 2015

October 10th

A record number of people turned out in appalling weather for the graveside service at Life's Green to honour Edith Cavell. Several members of the Nurses' League attended with dignitaries from Belgium and Germany. A procession with the Royal British Legion standard bearers and five senior nurses, Rachael Cocker, Elizabeth Hogbin, Chris Parfitt, Julia Watling, and Dawn Collins led to the plot where Edith Cavell is buried and where many people were gathered under umbrellas to pay their respects.



The service was led by the Bishop of Norwich. Hymns were “O God our help in ages past” and “Abide with me”

Among the dignitaries was the Belgium Ambassador to the UK, Guy Troveroy.

A wreath was laid from the Head of the German Delegation GB for the Republic of Germany which read. “In remembrance of Edith Cavell who overcame hatred and hostilities by practised humanity”.

Ann Copsey of the Nurses' League laid a wreath on behalf of Betty Lee for the London Hospital and the Nurses' League and a wreath was laid by Liz Hogbin from all Norfolk nurses.



Edith Cavell

Commemorations 2015

October 12th

A communion service was held at St Peter Mancroft church, Norwich, at 7am, the time Edith was executed. Mary Dolding our President and Dawn Collins a trustee attended.

In the evening a moving and poignant service was held in the Cathedral attended by a large congregation. Edith Cavell's great niece, Clare Wood, from Sudbury, Suffolk was there with her two children and grandson.



The service saw representatives of the congregation which included Kay Marrison, a member of the Nurses' League, physically journeying to different parts of the cathedral to represent different stages of Edith's life, from her arrest at the west end, trial at the nave sanctuary, imprisonment at the Chapel of the Holy Innocents to the execution at the grave.

Three hymns were sung "Jesu lover of my soul", "Abide with me" and "O Jesus I have promised". The last hymn Edith had inscribed in her prayer book at her confirmation when she was eighteen years old.

Members of the Nurses' League were present and three senior nurses.

The League sponsored a beautiful flower display in the cathedral to represent the Nurses' League.

Edith Cavell

Commemorations 2015

October 15th

A service was held In the Benjamin Gooch Hall at NNUH to commemorate the life of Edith Cavell.

The service was attended by the Rt. Revd. Graham James, Bishop of Norwich and the congregation included members of the Nurses' League. Eleanor Langan, the hospital chaplain led the service with Julia Watling (Head of Learning and Development). Dawn Collins (Deputy Director of Nursing, Mental Health), a member of the League recited the words of Edith Cavell. Father Ivan Weston, a former President of the League, read a lesson.

Two hymns were sung; "The King of Love My Shepherd Is" and "Love Divine All Loves Excelling".

The Hospital choir sang "When you believe" and a rousing rendition of "Hallelujah, Get Happy".

Included in the Bishop's sermon was this poem from St. Augustine.

*Watch, O Lord, with those who wake,
Or watch, or weep tonight, and give
Your angels and saints charge over
Those who sleep
Tend Your sick ones, O Lord Christ,
Rest Your weary ones.
Bless Your dying ones
Soothe Your suffering ones
Pity Your afflicted ones
Shield Your joyous ones, and all for
Your Love's sake
Amen*



Edith Cavell

Commemorations 2015

5th-17th October

The Nurses' League, having been invited by the Cavell Trust, took part in the exhibition in the Forum which was held over two weeks exploring Edith Cavell's life, her legacy and how nursing has developed over the last century.

Poster - thanks to Vivien & Mary

CAVELL VAN situated outside the Forum
The railway carriage carried Edith's body from Dover to London on May 15th 1919. The carriage is stored at the Kent and East Sussex Railway.



Elizabeth Blaxell



A presentation by Carrie Wingfield at 2015 Reunion & AGM.

Past, Present & Future

as a Nurse Consultant
at the Norfolk & Norwich University Hospital

Carrie Wingfield is a Dermatology Nurse Consultant at the Norfolk & Norwich University Hospital appointed to the post in 2011. The talk gave a flavour of how she reached this position at the hospital and demonstrating some of the conditions with graphic photographs to show what she does



and what she has seen in her clinic that morning. Not wanting to upset anybody she was willing to talk to people afterwards.

Carrie explained her talk may be a bit controversial and she was also a little nervous having recognised her old Deputy Nursing Director in the audience. Carrie came into nursing in her late 20's, she is now 52, not knowing if she was coming into nursing as vocational career, had got the notion of holistic care or if this was achievable with all the 'buzz' words which came into her education. This was a time in nursing when all was changing into academia. What she did know was that she did not aspire to the political environment of using the NHS and our hospitals as pawns in elections. But she did aspire to the notion of a career and predominately her role now as a nurse consultant to being the notion of simplistic human need and human quality within us all - wanting to be there for somebody when they need us most.

Coming from a management role into a nurse consultant role the transition was a complete switch back to being there for the patient on a one to one basis and being there when they needed us most. That is why Carrie is a Nurse Consultant today despite all the slides she will show of the skin conditions she has seen.

Carrie works predominately at the Norfolk & Norwich Hospital as well as the new

Continued

Past, Present & Future

Cromer Hospital with its relaxed clinical atmosphere, enjoying the time spent there every week operating or seeing patients who have potential skin cancers. Her clinical work is predominantly surgery with skin cancers. Her second role is as a lecturer at the UEA and around the country educating nurses coming into dermatology and other health care professionals who deal with patients with skin disease on a regular basis. She could guarantee every person present would have something she could pick up! The skin is an organ, it is not perfect and there is something there for everybody in terms of benign, cancerous, eczema, psoriasis etc. Carrie talks regularly to student nurses who will come across the skin organ during their careers even though they are not studying dermatology.

Carrie has worked in the Dermatology Department for 20+years which itself has grown three fold since she has come into this profession and is growing all the time. It is a good team, great family and dysfunctional sometimes but she remains very proud of the department. The question she is asked all the time 'Why are you a Nurse Consultant and not a Doctor?' There is a little bit of an air of suspicion or misinterpretation not only from health care professionals but also from patients. It is not uncommon for patients to 'Google' her on receiving an appointment and to tell her they have done so to check her out as they are not sure and want to see a 'real' consultant. This is quickly put to bed when they get to know her but she does not blame them because this is a new role and people have the right to be suspicious when they come and seek advice on their health and they are right to query if you have the qualifications to treat them as they need to be treated.

Carrie has no objections to this but she does dislike the term 'super nurse' a term used by Tony Blair many years ago. Although she is the only Nurse Consultant in this area there are many in other specialities and dermatology in the UK and they are certainly not 'super nurses' but specialists in their own fields of practice. She has even been asked 'Are you really trying to be a doctor?' or 'Why did you not become a doctor?' to which she replies she does not know. This is the role she enjoys and does not want to be a doctor and having to take on all the responsibility for the patient. She wants to take part of it and concentrate on aspects that she can do well with the patients going away feeling they have had a good experience and the best of help. Being a doctor would take away the reasons she became a nurse. She hopes she gives inspiration and encouragement to other people especially to the student nurses who need to be nurtured in the

Continued

Past, Present & Future

hospital as much as possible and if they aspire to a role like this Carrie will do all she can to guide them that way.

She has even been asked by a nurse ‘What did you do to get that job?’ She did not set out as a student nurse to become a nurse consultant it is something which has evolved over time learning from patient interaction and involvement. This is a good core to the job.

When she started her ‘yellow brick road’ Carrie was a Health Care Assistant in 1990 living with her partner’s parents and her three year old little boy. She knew she wanted to be a nurse and to get into the profession as she needed to earn money. Starting as a health care nurse in surgical outpatients at the old Norfolk & Norwich Hospital she had a very good education from the nurses in that team. From there she went on to do her RGN training at the James Paget Hospital Great Yarmouth now also a university hospital. The list was too long at the N&N and she wanted to start her training as time was getting on and she was getting older. After her training she went on to a surgical ward at James Paget and later joined the dermatology department at the Norfolk & Norwich University Hospital where she progressed through the ranks – clinical specialist nurse then sister of the department and then finally a nurse consultant role came up. Predominately throughout the management side of her career she had tried to stay as clinical as possible but that is very difficult these days with the pressures that are on the ward sisters. To stay clinical is a big achievement and knew that the Nurse Consultant role would by definition keep her 50% clinical.

Her professional regime is now involved in education and although the clinical side of her job is very important the education and research are important too. Getting involved with an international and national society the British Dermatological Nursing Group, (BDNG) established in 1989 to cater for independent speciality group of nurses and healthcare professionals, has kept her on her toes. She has just stepped down as their President. Here Carrie was the head of ‘her game’ lecturing all around the country and the world. On a visit to Australia recently, where she was the key note speaker, after speaking to the nurses she was embarrassed to find when lecturing she had developed an Australian accent to the amusement of the audience. Carrie gets a lot of pleasure speaking and educating people about skin and skin disease which she does regularly at the University of East Anglia for pre and post-registration students.

Continued

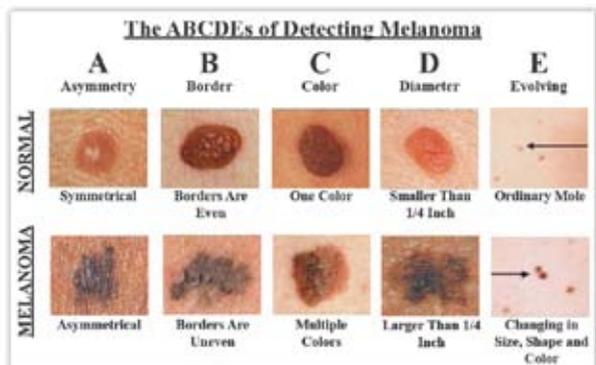
Past, Present & Future

The attraction of the role was to be clinical – 50% clinical – which is the definition of a Nurse Consultant. She is very glad her job is 80% clinical and the rest of her time is spent educating, teaching and developing educational programmes. Displaying slides of her work with cysts and cancerous lesions she explained the clinical work with patients and the methods used which has given progressively improved results over the years.

One of the things she hopes to progress onto is a succession plan for more nurses consultants. Specifically, why do we need more Nurse Consultants? This will look at how we can nurture staff and bring them along into this role as she will not be there forever in dermatology and wants this specialist role to continue and it to become a major part of the team. One of the biggest attractions was that she was able to drop a lot of the management side of her role which was changing, as times are changing in the NHS, realising more and more that both could not be done – good clinically and a good Sister. A division was needed somewhere so the decision to become a Nurse Consultant was a good one.

Often she is asked why she is performing surgery? There are a lot of nurses in the hospital working in enhanced levels and skills which people would not expect nurses to be doing but they certainly are. In the dermatology department skin cancer rates are going up and up and up and it is not known why. It is thought it may be that people can now afford to go away, the Ozone layer is thinner, recording data better and the population is living a lot longer. People live now into their 80's & 90's and a recent patient was a very active lady of 105.

Targets have to be adhered to and the only one to the real benefit to the patient is the cancer pathway where patients are seen in a very set time to bring their treatment forward and getting treatment in a timely fashion. The skin cancer clinic is where Carrie spends most of her time. Across the UK



Continued

Past, Present & Future

there is a big shortage of medical staff and dermatologists. Population ratio to dermatology is far below the other countries in the European community. Unfortunately we are about 557 whole time dermatologists short in this country so nurses are filling the gap very well. 50% of the referrals are skin cancer related which makes for a very long week.

Her working week starts with a case load conference takes place for two hours every Monday morning in the Benjamin Gooch Hall to discuss complex cancer patients. These need to be discussed in a forum to make an optimum decision on how to proceed with that patient's treatment. The rest of the week is skin cancer clinics or surgery, the occasional children's clinic and a special ladies clinic with teaching and education thrown in. Surgery gives a big adrenalin rush but also great job satisfaction working on a one to one basis with the patient only having local anaesthetic and being fully aware of their surroundings. Carrie showed slides taken in theatre that morning of how procedures were carried out and the successful end results.

Other slides included conditions she has seen in the last week - a child with severe eczema, a gentleman who had sought to have his tattoo removed privately and things had gone wrong, leg ulcer neglect and many more. People are never judged when attending the skin cancer clinic, soldiers, builders, postmen, sun-bed users or the elderly all are seen equally. Some things can alarm people and dermatology education is not good in nurses or doctors outside the speciality and things get missed sometimes to the detriment of the patient.

One of the major achievements in the department is chemosurgery developed by Frederic E Mohs in 1930's while at the University of Wisconsin USA. This is microscopically controlled surgery for difficult to remove skin cancers which cannot be seen very well. It is like peeling an onion taking a bit at a time for assessment so that it is known when all is removed before repairing the site. This method is used in basal cell cancer which often looks very innocent but results in a large skin graft. Some are seen which are very complex involving basal cell carcinoma, even though classed as non life threatening, it can be so detrimental to the patient's quality of life and their psychological wellbeing for the rest of their lives.

In the last week Carrie has been in Watford as part of her role teaching nurses

Continued

Past, Present & Future

in surgery practicing on pork belly excising pig nipples - much to the amusement of the nursing audience. It is hoped more sessions will follow. Starting soon is an important course at the University of Hertfordshire for nurses like herself who want to go into more advanced surgery.

What has she learnt as a Nurse Consultant? No one day is the same and there are some days when on going home she reaches for a bottle of wine needing to wind down after a hectic day but she still enjoys getting up and coming to work. While she feels like that she will continue nurturing her team and the students to get more nurse consultants where possible in any speciality as they all have a valuable role to play.

The hospital is now looking for their next Nurse Consultant and how they are going to find them. This role is challenging not only for Carrie but for everyone who enters this speciality because it is still questioned and needs justifying. It will make people realise what nurses can achieve and what they have become even though as many are still in that traditional nursing level where they want to be there for the patient. It is not just about all the glory of doing surgery and the adrenaline rush. What does the future hold? Carrie has no idea she is completely open to where the rest of career will take her as it changes every year with something new happening all the time.

Ruth McNamara



December 2015

My Special Visit.

As part of the Seniors Christmas Gift project organised so well by Ruth McNamara and undertaken by her and the other trustees, this year I was again fortunate enough to be able to visit Mrs Min (Edith) Cotton nee Anker 1943-46. I took flowers from the League and really enjoyed my visit with her in her delightful home.

As on the previous visit the short time I spent with Min was very special and a great opportunity to hear some more nursing stories. Much to her surprise she was awarded the Alice Long Medal for “general proficiency” in 1946 and was presented with a book of her choice at the same time. Min was a staff nurse in theatre before going to do her midwifery at Queen Charlottes Hospital. She married in 1948 moving back to Norwich but no longer worked, as married nurses were not employed at that time. During that year however because of shortages



of theatre nurses she was approached by matron and offered part-time work, she thinks she was one of the first married nurses to work at the N&N. She eventually returned to Theatre Nursing at St. Helens Private Hospital and ran the theatre there for 28 years initially having to balance life as a working mother. During those years she saw and managed many advances and developments in theatre techniques. She enjoyed working with Mr Green, Mr George, Mr Stephens, Mr Innes and Mr Joss in particular. When I asked her about nursing role models she told me how she admired and respected Sister Hardingham, Sister Griffiths and Sister Curson.

It really is such a pleasure to make contact on your behalf with our Senior members of the League at Christmas time.

Mary Dolding



Recently Qualified Nurses.



In the summer of 2015 the League was approached and asked if we would be interested in speaking to the recently qualified nurses, this was discussed and the committee agreed that it would be useful for the League and interesting for the nurses.

On 8th. September Mary (Dolding) and I went to the Education Centre at the Norfolk and Norwich University Hospital and made a short presentation to the nurses. They were nineteen in number, and all had qualified as Registered nurses six months earlier.



We briefly discussed the history of the Norfolk and Norwich Hospital and the “evolution” of nursing in the past century. This led into the history of the League, the objectives of the League, and how the League functions in 2015 and its relevance to modern day nurses.

We finished the session with some items from the heritage collection; a glass sputum jar dating from 1950s, an early insulin syringe with re-useable needles; some very early asthma inhalers and an enema kit. The nurses had never seen anything like the enema kit with its soap and rubber tubing and this caused quite a bit of conversation and some consternation!

We mentioned that nurses are always judged on their actions, appearance, knowledge and skills, by patients, carers, colleagues, students, the general public and the media. The best advice we could offer is to seek out good role models, have a passion for high quality nursing care and the NHS and be proud to be an NNUH Nurse.

The nurses appeared to enjoy the session, Mary and I enjoyed meeting and talking to the nurses and we wished them success in their future careers.

Vivien Aldridge.

Retired Nurses in the Loire à Vélo



United Norwich Hospitals Feb 1968 – 1971

In the 2015 Journal Margaret Blyth (Key) wrote an article about the above set. She ended by saying she was off to book the next group holiday. The holiday ended up being a self-guided, cycling holiday in the Loire, taking in chateaux and vineyards.



The group consisted of myself, Brian (my husband), Margaret, Graham (Margaret's husband) and Anne. The great friendships we made at the Norfolk and Norwich during our training have endured and lasted a lifetime. We all met our husbands whilst training; they all have become great friends. Between them they have managed to develop the skill of subverting our natural nursing inclination of organisation and bossiness! There have been lots of wonderful holidays together over the years.



Sadly, Frank, Anne's lovely husband, died in 2011 after a long and courageous fight against MND. Anne used all her nursing skills to give Frank the best care possible at home. Frank loved cycling and I had promised him

we would cycle London to Paris in aid of the MND association. It remains on my bucket list of things to do.

As a taster the five of us decided to cycle along the Loire. We booked with Freedom Trek Holidays who described the cycling as easy to moderate, 25 -35 miles a day over 6 days. They organised the bikes, the hotels and transfer of luggage.

Continued

Retired Nurses in the Loire à Vélo United Norwich Hospitals Feb 1968 – 1971



We started the holiday in the beautiful medieval city of Blois. The bikes were provided at the first hotel. We decided on one electric bike in case of any one struggling.

The first day we cycled from Blois to Amboise, a sedate 25 miles flat route along the Loire - beautiful scenery and a lovely picnic by the river. Margaret and I took turns on the electric bike which was great. You still had to peddle but it gave you an extra boost. Anne, Graham and Brian felt they were far too fit to need help!

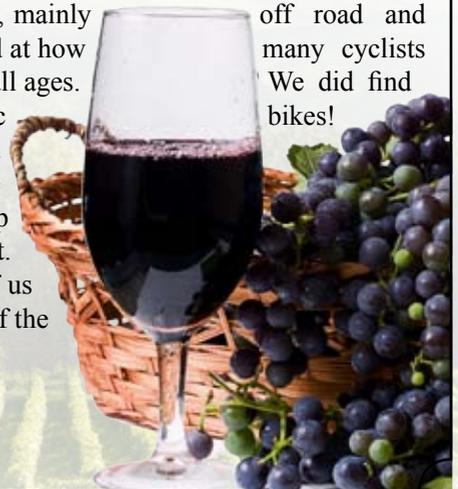
The second day we did a circular route to the stunning chateau at Chenonceau, a tour of 30 miles, much of it up hill. We had to keep stopping to rest, consequently we didn't arrive back at the hotel until 19.45, only just in time for dinner which we were too exhausted to eat! The food at all the hotels was typical rural French cuisine and was very good.

The following day was also 35 miles, mainly up hill. Anne finally broke and had a turn on the electric bike. She was immediately converted. We girls decided to hire two more electric bikes for the remaining three days.

This made the next few days so much more enjoyable. We were able to appreciate the beautiful scenery without thinking 'Oh no' when another hill appeared. The men continued to be derisory about electric bikes but they were the ones most exhausted each night.

The cycle paths in the Loire are excellent, mainly in amazing countryside. We were surprised at how there were from all over the world and of all ages. most of the Americans were on electric We feel a sense of achievement that aged 65 - 67 years old we were able to complete the 150 miles. All those years of running up and down Nightingale wards has kept us fit. I'm sure Frank would have been proud of us but I'm not sure he would have approved of the electric bikes!!

off road and many cyclists We did find bikes!



Gill Houston (Fare) 1968-71

LIFE EXPERIENCES

Janet and I met at the first PTS class of Sister Taylor in September 1941. We have been in constant touch throughout the years and now we are both living in the Salvation Army Care Home in North Walsham. Not originally planned, but that's life!

Sadly Janet has dementia with clear moments and then she is pleased to know that I am here.

Old age is very cruel and never contemplated in our younger days and now we have so few friends that remember us.

A visit is always welcome!

Betty Silvester nee Larter (1941-44) and Janet Wood nee Drew (1941-44)

3 Happisburgh Walk
Furze Hill House
73 Happisburgh Road
North Walsham NR28 9HD Tel: 01692 500293

BEA TAYLOR'S LEGACY

Miss Bea Taylor, who died last year, left £710 to the Nurses league. The committee agreed that this will go towards preserving our heritage collection.



HOSPITAL FETE

The League took part in the NNUH hospital fete on 20th June with a "Guess the name of the Teddy" and "Splat the rat" games raising £100 for the Friends of NNUH.

Our President, Mary Dolding, was interviewed on the hospital radio.



AN

ENIGMATIC



VIEW OF THE NORFOLK + NORWICH HOSPITAL 1967-1975

In late June 1967 I departed from school with 2A-levels and an S-level and wandered aimlessly into the adult world (OK, I wasn't really that naïve!). For sometime I had worked, part time, on the petrol pumps at a service station on Earlham Road, long since gone. At least we provided a service "Check your oil, sir" "Wipe you windscreen sir" "How many gallons would you like, sir" "Do call again, sir" Being a good Boy Scout and, hopefully, with my development suitably nurtured, I happily fell into this repartee with customers and had great camaraderie with the staff. Odd evenings, I would work behind the bar in a local hotel, open to locals, and met a great cross section of people. Hopefully we were providing a good service to guests.

Although I had applied for various "career opportunities" and had several interviews in various parts of the country, nothing attracted me to the big cut-throat world of doing a job for 'the company' and its profits, rather than providing a service. Late one sunny morning in July, I bumped into an old school friend who was waiting to go to university in the September. I explained that I had only part time jobs and was helping with a Son-et-lumiere at the Maddermarket Theatre on a voluntary basis. He said he was working as a hospital porter and they wanted another porter. Naivety struck with the words "Oh dear, I can't stand the sight of blood!!" He reassured me that working in the stores department would not put me in a position to see blood, unless it was in bottles from the Transfusion Service. He suggested I saw George Smith, the then Head Porter at the main entrance office at the N&N. When I arrived I was greeted by Ernie Barrett who was the 'Front Hall' porter based in the mail room where the post was sorted and delivered or put in pigeon holes. He introduced me to the Deputy Head porter, Bert.

So began my career in healthcare and a lifetime providing service to people. I was taken by Bert, a few days later, to meet George Rhodes the storekeeper and Herbert his assistant and given a long brown coat. I have visions of myself when I watch 'The Royal' in the role of Alan, the porter. Oh, dear, that programme is remarkable true to life in many areas!! My first task was to start filling large wicker

AN ENIGMATIC

Continued

VIEW OF THE NORFOLK + NORWICH HOSPITAL
1967-1975

baskets with the ward number/name painted in big black letters, from an order list placed inside by the ward sister. All sorts of things I had no idea about then, were placed in these baskets; then the trolleys came out and they were delivered to the wards along the polished cork floors of the hospital, tiles of the departments and the tarmac around the outlying wards – PB, Male Ortho, Wards 9 & 10, with a rubber cover over in inclement weather.

I was amused when I first had a student nurse come in and she told me the staff nurse had sent her for a 'long stand'. I asked what this was for, but George ushered me away and reassured her that he would get one. After a considerable time he returned to the counter and told her she had had a long enough stand! It did happen several times, but he reassured me that it was slightly less embarrassing than being sent to pathology for a "fallopian tube"!

As the new hospital was about to be built, the service areas – works department, incinerator, mortuary etc were being built behind the hospital, off Wessex Street. Due to security at night, the basement link access to that area was sealed off after 5pm. Consequently, if someone died at night, they could not be taken directly to the mortuary. Instead a large old and stately Vanden-Plas bodywork ambulance (The Royal and Heartbeat come to mind again) was parked outside ward 2, opposite the back entrance to theatres. It was the storemen's job to check this every morning, and then drive it round to the old mortuary via St. Stephens Roundabout & Wessex Street if there was a deceased person in there. This monster of a motor vehicle was then reversed some 80 yards to the old mortuary with garden walls a few inches away on one side and 10-15 feet drop a few inches away on the other side where the works department foundations were being laid! Eventually I mastered this task, and also to ring the bell mounted in the middle of the vehicle's radiator to warn (usually frighten) pedestrians.

During my 4 years as a porter, I also studied for a Diploma in Business Studies for 2 years, working every holiday at the N&N and for a year after I finished. I am proud to say that I was always seen as reliable and flexible enough to relieve any other portering duty – even at short notice. This was in the pre-work study days, when porters had their own areas of work – stores, front hall, house porters, night porters, x-ray porter (we were regularly mistaken for each other!), CSSD, theatre, nurses home etc. I did all the areas several times – except for one. Sid was away,

AN ENIGMATIC

Continued

VIEW OF THE NORFOLK + NORWICH HOSPITAL
1967-1975

but I only did his swill job on one occasion, that was enough! How things have changed – for the better or not?

Finally, I do recall that there was a delivery of ice, mainly for physiotherapy use, once a week. This was brought by a rather wizened chap who appeared to be well into pensionable age. It was delivered in a 1cwt block which he carried in a length of sacking over his feeble shoulder, down some well worn stone stairs, to an ice-cupboard to the right of the main entrance. It was by a rear exit from the kitchens and lined with lead and in a cool and sheltered place. If ice was required, the house porter, based by the Casualty department, would go to the ice cupboard with a bucket, and chip ice of the block with an ice pick!

Overall the portering staff were a reasonably cheerful band and enjoyed the service they provided to patients. There were very few nooks and crannies at the old N&N I did not know – certainly ones nurses never came across; and 101 other tales I could tell!!

There were some characters around and a few names that might be recalled. Ken Garner Hospital Secretary, Matron Cooper, Miss Andrews, the lovely Sister Ransome, Sister Hill-Harrison, house porters Colin Daynes, Tony Muncer, theatre porters Roy Hupton, Billy Blake, Ray Germany (who spoke 9 languages and often called on for interpreter duties), Theatre attendants/plaster technicians in orthopaedics, (Claude, Ray, Jimmy). Mr McKee & Mr Watson-Farrar, Dr Oliver and his cigarette holder, Dr Thorpe producing hospital shows, and the shenanigans of the some junior doctors.

Gradually younger ancillary staff started and roles developed with the NHS to allow them to take on roles such as theatre technicians, to advance within the health service. A new generation in the health service was coming with the Salmon report into nursing. The arrival of Douglas Beattie was a notable appointment that indicated the change which was to envelop us all in nursing, while other health care management and strategy commenced the start of a major directional change in care.

Early one evening a staff nurse walked along the corridor with her cape on, starched hat and carrying a basket over her arm with a packet of spaghetti sticking out. I engaged her in conversation as to her recipe for bolognaise (my signature dish). That led to the start of married life, when I thought I should embark, finally, on a career. With a diploma in Business Studies and the Salmon structure for

AN ENIGMATIC

Continued

VIEW OF THE NORFOLK + NORWICH HOSPITAL
1967-1975

nurse management, I decided a career in nursing and management may be the way forward for me. I returned from honeymoon to commence training in June 1971.

Miss Wordingham (Wordy) greeted us in the class room. Although the image of an old fashioned nurse comes to mind, she was very up to date with nursing practice. I spent 3 years hanging on every word she said in school, and I am sure we were all better nurses and better people for it. Mr Chappallaz, Mr Hume, David Lee, Sister Roberts all took part in educating us, as well as others whose names escape me. In some ways I had an advantage of 4 years seeing how 'the system' of the hospital worked and where and how to get things done – but not always approved by others, because it had never been done that way before!

My first afternoon placement on a ward was with the 'bladder daddies' – ward 7 and Alan Green's operating morning (Ron Thorpe's show "Oliver" – they sang " You have to drain a bladder or two, boys" for him!). I walked proudly onto the ward in my white coat, and a gentlemen called me saying: " Doctor, could I have a word". I went over and politely explained I was a student nurse, but would find a doctor for him. I was then brought down to earth big time, when another gentleman shouted: "Oi, orderly, come here". Wordy appeared, with a white gown on and the two of us cleaned, washed and changed post-op patients most of the afternoon. Being taught by a compassionate expert was a most enlightening experience for my first hands on nursing experience.

Being a bit of a rebel, I did sometimes cause a stir; notably arguing that male nurses should do an obstetric placement. At that time, a man looking after a woman, particularly in an intimate situation was clearly frowned on. I have read the books, know the principles, but still would not feel too confident if I had to deliver a baby even now! Overall I studied hard and had so much enthusiasm to learn more and perform better as a nurse. One clear memory is of the Great Ormond Street Nurses coming to the N&N to do their adult nurse training for about a year. Of course, several met partners here and remained in the area! Only just before this last Christmas, I met one who had married an old school friend of mine and they are living in Malvern, but were in Norwich for a mutual friend's family wedding.

On completion of my training, I became a staff nurse with Sister Lockhart on Ward 8, shortly after Ivan Weston had left to take holy orders. My memory of Lockers almost clearing a cot-side, when a gentleman arrested, to perform CPR and bring him round will remain with me forever! I enjoyed the role on Ward

AN ENIGMATIC

Continued

VIEW OF THE NORFOLK + NORWICH HOSPITAL
1967-1975

8, although, despite respecting him, I refused to put my arm through Dr Oliver's starched white coat arms, prior to a ward round, so he could put it on. Fit of pique and he cancelled the ward round; not a professional decision in my book for that reason. I am afraid that the days of the nurse purely serving the doctor were fast disappearing.

Dr Colin Brown arrived, as a highly thought of neurologist, and I believe the first in that speciality at the N&N. His enthusiasm certainly rubbed off on me and I took a particular interest in this, regular escorting patients to and from Wards C2 & C3 at Addenbrookes. I decided that to take an interest, better understanding of behaviours and psychology was needed. To that end I decided to qualify in mental health, initially and then try for a neurology post and qualify as a neurological nurse.

And so in 1975 I moved over to Hellesdon Hospital and said 'goodbye' to probably the happiest seven and a half years of my life. Neurology did not come into the future, after my mental health placement! I worked as a Psychiatric Social Worker on a fixed 2 year contract in West Norfolk, where I have remained. Over the years I have worked as a medical representative, manager of several successful nursing homes, managed a day hospital, and latterly Occupational Health. A varying career, constantly learning, stimulated way back from my time in the school of nursing at the N&N.

"The only way to do great work is to love what you do....." reputedly said by Steve Jobs, co-founder of Apple Inc. I am not sure that I did 'great' work, but when I went to get a job as a hospital porter, as an aimless youth, I entered a world and career I loved and hopefully did my best for everyone.

My career, starting happily at the N&N – it was not NNUH then(!). Hundreds of memories, some sad, mostly happy, and many a tale to tell. At all times my ethos of service, reinforced in the school of nursing, have stayed with me! I sometimes wish I could briefly go back to how it was, walk the old hospital and grounds and then a visit to The Coachmakers or Trowel and Hammer - just like the old days. Alas, the familiar faces are no longer there. But I will raise a glass to all the people who worked at the N&N on St Stephen's Road.

John Hayes 1971-74

DISORIENTED

PERPLEXED
BEWILDERED

Ser-en-dip-i-ty

I was born in October 1939.

My Father was English, but my mother was German and spoke very little English. For the convenience of my Mother, my father employed a German speaking Norland Nanny to look after me. The timing and language problem was particularly unfortunate as war with Germany had been declared only a few weeks before. In June 1940 the police from London arrived, without invitation, at my home in Norwich to take my Mother to be interned at Holloway Prison, where she would remain for six months until it was presumably decided that she was not a danger to this country.

Upon arriving at the Prison, my Mother casually remarked that she had an eight months old baby that she really ought to be feeding! The police responded at once and returned to Norwich to collect me.

On arrival at the family home, the Police spotted a collection of my nappies laid out on the line to dry by the German speaking nanny. A clever way to send a message to the Luftwaffe they thought. Now on the alert, when entering the house, they found the Nanny at work on an electric sewing machine; another possible way of sending messages which needed to be checked.

The Nanny was instructed to line an empty crib with a supply of nappies and place me in it with nothing else other than the baby clothes that I was wearing. The crib, nappies and I were then driven to Holloway Prison where I was locked up with my mother for the next two months.

By then, the authorities decided that there was no need to detain me any longer, taking up valuable space in prison, and my father was asked to take me home. He objected to this idea but relented after being told that the alternative was to put me into an institution. So back home I went without a mother and to a reluctant father.

By this time, my home was nanny-less as the police had informed my Nanny that there would be unspecified "consequences" for her if she did not leave her employment without delay.

When my mother was released, after a Court Hearing, she returned home on a

Continued

Serendipity

rather temporary basis and by the time I reached the age of five, her marriage to my father had come to an end.

So I never really got to know my mother and my father was a business man with little time for a home life. My care continued to be in the hands of successive Nannies.

My mother used to refer to her life in Holloway as “my time in Hollywood”, not that it was glamorous; indeed it was damp and rat infested.

I will pause for a moment to mention that, only a few years ago, I visited the Records Department at Kew to see if there is any information about the reason for Mother’s wartime internment. I was told that there were records held at MI5 and I could try writing to them enclosing my mother’s Death Certificate. This I did, but MI5 replied that, although there were records, they were unable, in this case, to release any information. So the mystery remains.

In the absence of a mother, I started my schooling at Norwich High School for Girls. The more time I could spend at school and away from home, the better as one of the least suitable Nannies soon became a particularly unsuitable step-mother!

From then on, I was not welcome at home and life there was most uncomfortable, and at times, terrifying.

Thinking ahead, my father made arrangements for me to attend a Finishing School in Switzerland for one year to follow the end of my school years in Norwich at the age of 17/18 with the fees paid in advance.

As luck would have it, my father died suddenly at the age of 52, when I was only 15. This gave “the Wicked Step-mother” the opportunity to pack me off earlier to Switzerland before I had really finished my time at the High School. Thus she had the chance to settle my father’s affairs without the presence of any competing party!

After an interesting year, my time abroad came to an end and I returned home to Norwich at the age of 16 to find that other arrangements had been made for me with immediate effect. A suitcase had been packed for me and a pre-arranged taxi arrived, into which I was bundled.

Continued

Serendipity

After being fitted for a uniform, I started work at 7 am as a pre-student nurse at Dereham Hospital.

I found myself well away from home and unprepared for this adventure which had been imposed on me by my step-mother under the threat of otherwise making me a Ward of Court. A term which was new to me but I assumed she meant that I would again, be under lock and key in some form of prison.

However, I settled at the hospital and lived in the Nurses Home for about two years, after which, at age 18 I applied to do my General Nurses Training at the Norfolk and Norwich Hospital, where I was accepted. This was the first choice that I had ever made for myself.

My training was a great experience for me, and I made some wonderful friends, many of whom I am still very much in contact with today.

Again the hospital became my home I rarely went near to my family home again. Having completed my SRN Training in 1961, it was not long before my life in hospital came to an end when I married and became, in due course, a mother. When my children were of an age to be left I returned to the Norfolk and Norwich Hospital as a phlebotomist, which I found to be a varied and sociable job which I enjoyed for 13 years, with one year in the middle as a Practice Nurse in a GP's surgery.

Looking back at my time in the nursing profession, which started nearly 60 years ago, I realise that, although I never had the opportunity to choose it, fate was on my side when it happened to be chosen for me.

My unhappy and unsatisfactory life at home had come to an end and so fortunately it was replaced by life in hospital with the bonus of being able to do a really worthwhile job amongst so many good and lasting friends. At long last I had a home (the hospital) and a family (my nursing friends).

Yvonne T. Brock (nee Morse)
1958 - 1961

Why I wanted to be a Nurse

Dear Miss Copsey,

I have enjoyed being a member of the nurses League and reading the journal and will be sorry to resign. I am moving to Kent to live near my daughter as arthritis is making me more and more immobile now.



Like Christine Sewell, my mother was my inspiration to be a nurse. Whilst at Bignold Primary School (behind the old N&N hospital) I wrote in an essay "when I grow up I want to be a nurse like my mother and visit people and make them feel better" Mum used to take her three girls to visit elderly housebound people to chat and cheer them up.

My mother was Ethel Ann Clements who trained at the West Norwich Hospital in 1931-34. She met my father there when he was a male nurse. Mum was a district nurse base at the Cavell Home next to the maids Head Hotel before the NHS came into being.

I remember seeing Edith Cavell's stuffed dog Jock in a glass case in the hallway. I wonder what happened to him as I never did see him at the Unthank Road Nurses Home when they moved there.

I found this photo and card while "sorting out" and thought should leave them in Norwich in this special Edith Cavell year.

Yours sincerely
Barbara A Baker nee Clements 1954-58

Nursing Memories

of Kathleen Lewis (nee Keely).

When World War II started I went to some First Aid Classes where I met the local doctors wife, who suggested that I should take up Nursing. I applied to the Norfolk and Norwich Hospital, was interviewed by Matron and accepted for training. Aged 28yrs I was 10yrs older than most of the girls, but I found I could cope with the academic as well as the practical parts of training (winning prizes for medicine and dietetics) I also formed new friendships including Christine Bush(nee Westwood) Rona Drew (nee Ash) and Beryl Shearing. My cousin Mary Gay was Sister at the Hospital and was kind to me.



Norwich was bombed and the Hospital was hit by incendiaries. Army units stationed nearby were called to help evacuate several wards. I spent some months at the Jenny Lind Children's Hospital and was there for Christmas. A pantomime was organised and I was Wee Willie Winkie wearing curlers and a dressing gown carrying a candle stick.

Because several ward were damaged in the main Hospital some patients were moved to a small hospital just outside the city. I was out in the countryside feeling a bit isolated especially at night.

We left the doors open in hot weather. One night a woman became hysterical as a cat was on her bed and she hated cats. I calmed her and the other patient down saying there was no cat and all was quiet. Next morning we made the beds as usual and when we moved the bed rest to shake up the woman's pillows, there sound asleep was a large black cat!!

One unhappy incident happened thus:- Because of the danger of fire during air raids, night nurses took turns to fill baths in the nurses home with water. At midnight two of us went along the corridors turning taps on full then went to the next floor doing the same before rushing back to turn off the taps when the baths were full. We went back to clean the sterilises etc. Presently night Sister rang to say part of the nurses home was flooded. Alas the water had run from the top floor through several bedrooms as one of the taps had been left on!! We were both called to Matron the next morning and severely reprimanded and told we might have to go before the

Continued

Nursing Memories of Kathleen Lewis (nee Keely).

hospital board as some repairs were needed. I was very worried but in the end we heard no more.

After a hectic spell on men's surgical I was sent to the eye block, a smaller ward and quite peaceful.

At night Sister would ask one nurse to play the piano and because I belonged to the hospital choir I would sing gentle song such as "Just a song at twilight"

The eye specialist was a stern rather forbidding fellow. However, at Christmas we put a red bobble hat on him and took him round the ward on a trolley and we saw a different side of him as he obviously enjoyed it.

A curious thing happened on the men's surgical ward which was on the ground level. The doors were left open at night because of the mild weather. I was on day duty and was told in the morning that the patient who was concussed from a head injury had managed to get out. He had only the top of his pyjamas on and had wrapped the bed cover round him. He walked though the streets to the bus station (he was a bus driver) and drove a double decker bus to his home on the other side of the city. Imagine the alarm of his family and the consternation of the hospital! No doubt the night nurse had done the rounds and assumed them all settled. The doors were kept closed after that.

After three years I took and passed my final exams and became an SRN. Several of us decided to train as Midwives in Sheffield. We did 6 months there and 6 months in Norwich on the District. We were very busy as there was an influx of babies following the men coming home from the war.

It was very cold and icy and we spent many nights out on our bikes skidding on the icy roads.

After a short spell at Earlam Hall Christine and I decided to look for another job and decided on Winchester where a modern new wing had just been built. This was when Michael Lewis came on the scene. But he stayed only a few months. I applied for a post at Poole in Dorset as Junior Sister. After some months a new Registrar arrived, it was Michael Lewis!

We became friends and went out together as much as possible and went to the same little church near the hospital. We eventually became engaged to be married.

This should have been in 2015 journal but was missed out. Kathleen has since died and we include it this year in her memory.



ELIZABETH FRY

Last year we commemorated the work of a Norfolk born lady Nurse Edith Cavell.

That brought to mind another Norfolk born lady who made her mark as a social reformer. That lady is Elizabeth Fry.

Principally she is known for her work on prison reform and improving conditions for the poor. She also saw a need to train nurses and set up a nursing school in 1840. Her nursing school inspired Florence Nightingale who took a team of Fry's nurses to the Crimean War.

She was also a great supporter of vaccination and trained others in the procedure which resulted in very few cases of smallpox in the villages she had influence over.

Elizabeth (Betsy) Fry nee Gurney was born on 21st May 1780 in Gurney Court off Magdalen Street Norwich one of thirteen children.

Her family was a prominent Quaker family. Both parents were part of local banking families, the Gurneys and Barclays. Her home was Earlham Hall now part of the U.E.A. When Elizabeth was twelve years old her mother died and she then became partly responsible for the care of her younger siblings.

As a young girl she loved dressing in bright colours, was a good horse woman, sang and danced and enjoyed the life that her privileged position gave her. Then in her teens she heard an American Quaker preacher William Savery. She was very moved by his words and immediately started visiting the poor, sick and prisoners, taking clothing and giving comfort. She also started a Sunday School to enable her to teach the children to read. At this time she became a 'plain Quaker' giving up her bright clothes.

Aged 20 years on 19th August 1800 at Friends Meeting House Lower Goat Lane Norwich she married Joseph Fry. The Fry family were Quakers and manufacturers of Frys chocolates however Joseph was a banker.

Elizabeth and Joseph moved to The City of London later living in East Ham and Forest Gate. Their family grew to eleven children, five sons and six daughters.

A family friend suggested that she visited the woman's section of Newgate

Continued **ELIZABETH FRY**

Prison, where she was horrified at the conditions and returned there with food and clothes.

Due to family difficulties (her husband went bankrupt) and pregnancies, four years elapsed. In 1816 she started a school for the children detained in the prison with their mothers. The women were encouraged to sew and read the Bible and do tasks. They responded to Elizabeth's care and kindness and conditions improved.



Sometimes she stayed in the prison overnight and invited nobility to stay so they could experience the bad conditions and see how the women were helping themselves.

Elizabeth's brother in law Thomas Buxton MP promoted her work among fellow MPs. On the 27th February 1818 Elizabeth addressed a Parliamentary Commission the first woman to do so recommending women should look after women prisoners and stressing the importance of education and useful employment while the women were detained.

Many of the women prisoners were put on the convict ships and sent to Australia. These ships were not well run so Elizabeth made improvements by encouraging the women to take on tasks. The night



before the women were to leave she would spend the night with them reading the bible and supporting them to take care of themselves.

1819/1820 winter was very severe. The homeless would have been greatly affected but Elizabeth found a warehouse in Cheapside to give temporary shelter, food and care. This was financed from charitable giving. Many of them were found

Continued **ELIZABETH FRY**

employment. Some of the sick were restored to health and those who remained sick were sent to hospitals.

In 1821 she was able to visit prisons nationwide as she accompanied her husband on a business trip along with her two daughters.

1822 November 1st she gave birth to her eleventh child and became a grandmother to her first grand child.

She suffered bad health in 1824 and went to stay in Brighton. Ever mindful of others she saw what a solitary life the coast guards lived. She then set up a campaign to initiate libraries in coastguard stations and by 1836 all the stations and Naval hospitals were equipped.

Night shelters started in Brighton and due to their success were copied nationwide. Elizabeth died on 12th October 1845 of a stroke at Ramsgate. She is buried in a Quaker burial ground in Barking. The coastguard flew their flags at half mast and a thousand people stood in silence.

Although Elizabeth did amazing work for the poor and needy, she had her critics who accused her of neglecting her family. As she had a privileged place in society her motives were questioned.

Queen Victoria was a great admirer and Elizabeth was granted an audience many times and gifted money. Elizabeth had access to many influential people who she persuaded to give donations and use their influence.



After her death a refuge was opened and an asylum founded in her memory. Since then she has been remembered with several memorials and has her image on The Bank of England £5 note since 21st May 2002.

This will be replaced in 2016 by Winston Churchill. Each year in May the Canadians commemorate her with The National Elizabeth Fry week.

Hilary Last

The AGM Gladioli

Here are some of the Gladioli grown from the presidents' gift at the AGM.



NOTABLE EVENTS IN THE YEARS ENDING WITH 16

- 1016.** Cnut the Great (or Canute) King of Denmark claims the English throne after the death of Edmund “Ironside”.
- 1116.** The Byzantine army defeats the Turks at Philmelion.
- 1216.** Death of King John. His nine year old son Henry III succeeded him
- 1316.** Universal crop failures occur leading to the Great Famine.
- 1416.** The Catholic Church burns Jerome of Prague as a heretic.
- 1516.** Thomas Moore’s most famous work, “Utopia”, completed and published in Latin.
- 1616.** Sir Walter Raleigh is released from prison in the Tower of London where he had been imprisoned for treason, in order to conduct a second (ill-fated) expedition in search of El Dorado.
William Shakespeare died.
- 1716.** James Edward Stuart flees Scotland to France with a handful of supporters following the failure of the Jacobite rising of 1715.
- 1816.** Sir Humphrey Davy tests the Davy lamp for miners at Hebburn colliery.
- 1916.** 1st January. The Royal Army Medical Corps’ first blood transfusion using blood that had been stored and cooled.
- 9th Jan.** Battle of Gallipoli.
- 27th Jan.** Conscription introduced by the Military Service Act.
- 1st Feb.** German Zeppelin raids on the West Midlands, claiming thirty five lives.
- 25th Mar.** Military Medal instituted as a military decoration for personnel of the British Army and other services below commissioned rank, for bravery in battle on land.
- 24th-30th Apr.** Easter Rising in Ireland.
- 25th Apr.** German battle cruisers bombard Lowestoft and Great Yarmouth. (My Mother, who was three at the time remembered this – a shell went through the wall in her garden).
- 21st May.** Daylight saving introduced.
- 31st May-1st Jun.** Battle of Jutland.
- 1st Jul-11th Nov.** Battle of the Somme. More than one million soldiers die, with 57,470 British Empire casualties on the first day, 19,240 of them killed, the British army’s bloodiest day.
- 2nd Sept.** William Leefe-Robinson becomes the first pilot to shoot down a German airship over Britain.
- 15th-22nd Sept.** Battle of Flers- Courcelette in France. The battle is significant for the first use of the tank in warfare.
- 21st Nov.** Hospital ship HMS Britannic sinks in the Aegean Sea after hitting a mine. Thirty lives are lost.
- 7th Dec.** Asquith resigns. Lloyd George becomes Prime Minister.
- 22nd Dec** The Sopwith Camel biplane fighter aircraft makes it’s maiden flight at Brooklands.

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



I lived in Jersey, not far from St Helier, in the early to late 70's.

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 most patients I went to 'nurse', a nurse maid would have sufficed.

Mr Smith

One day I was referred to go to a gentleman who was confined to a wheel chair. I totally forget why he was immobile.

He was about 60 years old and owned two, quite large hotels on Jersey.

The house was large and had had some modifications added to accommodate his wheel chair. There was also an indoor swimming pool. I don't remember ever seeing other members of his family but I suppose they must have been around somewhere.

He was a pleasant man, very friendly but as time went on it became apparent that, although his legs didn't work, other anatomical areas did!

I hadn't been attending to his needs for very long when he asked me to come into the library as he wanted to find a book he needed to refer to.

A ladder was in already in place and as I climbed up, I realised he was looking up my skirt and was quite obviously er..excited. I can't say it particularly bothered me, I just felt sorry for him. As I'm now 68, I realise 60 isn't that old, in the grand scheme of things, to have hormonal urges.

However, the end came swiftly when he asked me if I would like to come and swim in the pool... 'apres' working hours... did I have a bikini and if so, would I mind wearing it? I felt it was time to move on...



Continued...

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

The Parrot

I went to another very large house with the obligatory swimming pool, to look after an elderly lady who needed a fair amount of basic nursing care.

They were very posh, even by Jersey standards!

Her two daughters were in residence, one in her early 20's and the other popped in and out, with 2 small and very boisterous sons. (When I first moved to Jersey children did not go to school until they were 6 years old. The law changed, thank goodness, during the 7 years I was living there.)

Anyway, I digress....the younger, more glamorous daughter had this parrot!

It was called Napoleon. It was also very rude and could eff and blind like a navy! I thought it was a horrible thing, even though I'm an animal lover.

It lived in a cage but the inside of this cage was absolutely filthy, knee deep in guano..It couldn't have been cleaned out for months. Bird droppings were scattered everywhere, generously littering not only the table the cage sat on but the floor underneath as well.

Posh they might have been, clean they were not. Nowadays the Health and Safety brigade would have had a field day, as Napoleon lived within the family confines.

Also..... I was in the very early stages of pregnancy and was rapidly developing severe hyperemesis.

Now hyperemesis hadn't been identified in 1971 but believe me, it existed! It was just morning sickness 'par excellence' with no hospitalisation or IV therapy etc. I just took mild anti emetics (mainly travel sickness pills) Nothing worked and consequently I was completely pole axed for the first 3 months of both my pregnancies.

So... needless to say, looking after that patient was short lived too. Even now, 44 years on, if I see a parrot, memories of the nausea come flooding back.

Karen Thompson (Nieuwenhuis)
Oct 1965 – Oct 1968





2015 AGM SNIPPETS





2015 AGM SNIPPETS



The Assistant Practitioner

My Journey

You may be thinking: what is an Assistant Practitioner (A/P)? Well, an A/P bridges the gap between the traditional Nursing Auxiliary/Health Care Support Worker and the Registered Nurse, as well as other professional roles. The role was first introduced in the Norfolk & Norwich University Hospital Foundation Trust (NNUHFT) in 2000. The A/P is a nationally recognised role, competently delivering health and social care to and for individuals and can undertake clinical work in domains that have previously only been carried out by registered professionals. An A/P possessing the correct mix of skills to meet patients' needs can free up Registered Nurses etc, who, as a result of the changes taking place in the NHS are seeing their own work boundaries expand and taking on increasingly complex roles.

The role of each A/P is designed around the needs of the department and its patients/ service users. Skills, knowledge and competencies are taken from a variety of professional backgrounds and the role provides a flexible, high level of care delivery.

Training consists of a two year Foundation Degree in Health Care Science and successful completion of core and role-specific competencies. The training gives the A/P a more in-depth understanding of anatomy and physiology as well as health issues and the factors that influence health and illness. The level of training and experience means that the A/P can often work alone without supervision, another aspect where Registered Nurses etc are released to carry out duties more befitting with their expanded roles.

My own journey began in 1991, when I joined the Norfolk & Norwich Hospital at the old site in the city where I worked on the Nurse Bank as an Auxiliary Nurse. I completed various National Vocational Qualifications (NVQs) and worked within many specialities, but mainly Cardiology and Radiology. I began my study for the Foundation Degree at City College Norwich in 2006 and graduated in 2008 after which I was fortunate to gain a position as the sole Assistant Nurse Practitioner in the Radiology Department.

I work alongside a Registered Nurse and Health Care Assistants. My specialised clinical skills are:

- Cannulation
- Cardiology electrocardiograms (ECGs)
- Aseptic technique dressings
- Tracheostomy care

The Foundation Degree was funded by the NNUHFT and its completion satisfied the major step toward A/P qualification. However, having been bitten by the study bug I decided to strike while the iron was hot and self-funded a third year at the University of East Anglia for a BA(Hons) in Professional Studies, with which I graduated in 2011. This was a very proud day for myself and my family and would not have been possible had I not been placed on the A/P programme.

Pamela Everett

† *Obituaries*

June Rose Coles (1957-60) 1939-2015

June and I qualified in 1961 and we both worked at the Jenny Lind Hospital for several years and became good friends. June was a dedicated theatre nurse and did her training at St Georges, after that she returned to the Norfolk and Norwich to main theatre where she scrubbed for Mr Birt.

After some years she moved to intensive care and night duty which suited her family commitments and she remained there until she retired.

When she became a lady of leisure we met each month for lunch and a chat at the Assembly House. I always looked forward to seeing her as she always brightened my day with her down to earth approach to life and her dry sense of humour!

June leaves a son and daughter and three grandchildren. She will be sadly missed by her family and mine, and many more whose lives she touched.

Monica Frost (nee Clark) 1958-61.

Mrs Elsie Green (1947-50)

Born in Great Yarmouth on 5th July 1929, Mum was the second daughter born to Gladys and Sidney Morley, spending the first part of her life growing up with her sisters Joyce and Phyllis. Her early memories were of them playing on the North Denes.

The Second World War arrived when she was 10yrs. The family endured bombing raids. She was eventually evacuated to live with relatives who farmed 10 miles away and was considered safer. She formed a strong attachment to them and her cousin Molly and never forgot their kindness.

The war interrupted mums education and she left school at 14yrs with no qualifications.

She started work at the local printing works then moved to Arnolds as a window dresser using her artistic flair. Eventually she decided that she would like to take up a career in Nursing. With no School Certificate this was something she should not have been able to do. However Matron was so impressed with her she was given the position of Nurse Probationer and began training in earnest in 1947 qualifying in 1950. she remained lifelong friends with Clare, Mertyl and June and they met regularly over the succeeding years.

† *Obituaries*

Continued - Mrs Elsie Green (1947-50)

Once qualified Mum moved to London and trained as a Fever nurse at the Coppetts Hill Isolation Hospital. It was here that she encountered some of the most deadly diseases known to man. She must be one of the few nurses who to ever have nursed patient with Rabies. She admitted that it scared the life out of her! It was at this time that she met our Dad, Arthur, a Shropshire lad who had just been demobbed and was working for a builder in the capital.

They married in 1956 and moved to Chester. Against medical advice not to have children as she had twisted fallopian tubes and only one ovary she gave birth to martin and myself within 15 months of each other.

The family moved to Cheltenham in 1963 where we spent 19 happy years. Mum took up various nursing posts and eventually opened a Nursing Home for post operative care. It was a successful enterprise but short lived as Mum became ill and had to retire. The nursing Home stated in 1971 is still in business today.

We moved into a rural spot where we had an acre of land and out buildings and became a farming enterprise. Escaping chickens were not so bad but Mum avoided rounding up escaped calves and was notable absent when the roof blew of there pen one Christmas Eve.

When Mum had recovered well enough she took a post at the Teacher Training College in Cheltenham while Dad worked building Heathrow Airport. They moved back to Norfolk in 1988.

Mum loved to entertain and arranged many get together's with family and friends. Regrettable Dad did not live to enjoy his retirement passing away in 1999. Mum moved to Cromer where she stayed for the rest of her life.

Mum loved to have her grand children stay often for the Cromer Carnival. She was very proud of them both and was even more proud to be introduced to her great grandson Joshua. The last photo of her was with them, four generations together, just before Christmas last year.

She suffered a stroke on December 27th last year. We were able to look after her at home with help until she was admitted to Benjamin Court in Cromer where she died peacefully three weeks later.

Mum played a big part in our lives and her passing will leave a huge gap but her love kindness encouragement and friendship will stay with us forever.

Julian A Green (Son)

† *Obituaries*

Eva (Eve) Mary Gascoyne (Taylor) (1937-40)

1919 - 2015

Eve was born in Cambridge in March 1919. She left Cambridge County High school for girls in 1936 and went to work in the laboratory at Chivers of Histon. Bored with this she wanted more of a challenge. Her Mother had been to a talk by Matron Jackson of the Norfolk & Norwich Hospital and agreed she should apply for a place to train as a nurse.

Eve commenced training in 1937-1940 earning a few shillings a week, but the work was demanding and interesting. The food was memorable and she talked of such delicacies as marrow and ginger jam!

She worked on Surgical and Medical wards and also on the Children's ward which she found terrifying at first. She remembered Sister 'Tilly' Tye and 'Nanny Norton' who were strict but dedicated nurses.

She also recalled how she was told of the outbreak of WW11 by her nursing friend 'Babs Seymour'.

Eve met her husband Clifford Gascoyne when as a police constable he was sent to the hospital to escort a man who had attempted suicide.

She never returned to nursing once she was married but would frequently be called upon by friends and neighbours to give advice or practical help using her nursing skills. They lived in Norwich and had two children. Elizabeth, her daughter, went on to train as a nurse at Addenbrookes Hospital and their son went to settle in America.

On retirement from the Police they moved to Mattishall Norfolk to run a small holding.

Sadly Eve was widowed at the age of 62 years after nursing Clifford for 4 years. She then took up creative writing and drama as well as a local parish councillor. She enjoyed visiting her grandchildren in America and Britain. One grandchild became a policeman like his Grandfather before him.

Unfortunately 16 years ago she began to have memory problems and struggled to cope with everyday tasks but could always remember the N&N badge worn by trustees who visited her at Christmas for several years bearing flowers as her Christmas gift. She eventually spent over four years in being well cared for in a local residential home.

She was very tough lady who had a full and active life until the ravages of Alzheimer's disease took over.

Liz Cussans (Eve's daughter)

Ruth McNamara (Secretary) who attended her Memorial Service.

† Obituaries

Patricia Tungate - Patricia Tungate (1956-58)



Pat was born in 1936 in Northumberland. On moving to Norwich she went to The Blyth School. In 1953 Pat began her nursing career at the Royal Orthopaedic Hospital in Birmingham. It was a very happy time and it is where she met and became good friends with fellow nurse Marilyn. In 1956 they went on to commence their nurse training together at Charing Cross Hospital in London. Pat became homesick and decided to return home to Norwich to complete her training.

At the end of her general training at the N & N Pat took the role of staff nurse. She then met up with her friend Marilyn again to do midwifery in the City of London Maternity Hospital. It was an experience, but Pat craved to get back to real nursing, moving on to work as a staff nurse at Great Portland Street.

After another short stint back at the N&N, Pat became a 'trail blazer' of her time and set off for Montreal with her friend Marie. She took the week long crossing from Southampton to New York, which in it's self must have been a huge adventure. Pat loved Montreal and the state of the art hospital, the nursing and the lifestyle. Pat stayed in Montreal for 3 years.

In 1968 her daughter was born. She returned to work at the N&N and was taken under the wing of Matron Priscilla Cooper, who offered her the post of sister on the newly established 5 day ward.

In 1970 Pat had joined the the teaching staff at the School of Nursing as a clinical teacher.

In 1985 Pat did a residential teaching course in both Ipswich and Huddersfield. As Helen finished school, Pat's career geared up again, qualifying as a nurse tutor. When the School of Nursing became part of the university, Pat and her friend and colleague Barbara travelled to London once a week to the Royal College of Nursing. In 1994 they received their degrees from Baroness Cox.

When making presentations, Pat was known 'to do different'. Whilst presenting the Martha Rogers Model of Nursing with Barbara, they projected a slide of the moon landing with the caption "District Nursing", with background music from the

† *Obituaries*

Continued - Patricia Tungate (1956-58)

2001- A Space Odyssey. On another occasion, Pat presented a care plan for E.T! Pat was student orientated and worked hard to further their knowledge and understanding. She even went as far as going to the butchers for “visual aids” in an attempt to explain her point.

Patty, one of the first Project 2000 students had her first encounter of clinical teaching with Pat. She recalls Pat’s soft but commanding voice, her professionalism and amazing ability to turn the theory into practice.

It was Pat’s teaching of the physiology of blood pressure that sparked Patty’s interest in Cardiac Nursing. In all Pat was an excellent lecturer who was supportive and highly respected by all her students.

Pat retired in 1996 at the age of 60, but would almost definitely have stayed a further 5 years at the School of Nursing had it not moved to its new site at Hellesdon. A long time and loyal Nurse’s League member, she continued to attend many AGMs and reunions and enjoyed meeting friends and ex-colleagues.

In 2006 Pat moved to Reydon to be nearer her family. She had nine very happy years there.

Her passing was a complete shock to everyone. So many cards and letters have spoken of Pat as a strong, brave woman who was elegant, gracious and kind. She was a good friend in every sense and a first class nurse who had a fulfilling career. She was a doting Grandmother to Jemima, Kitty and Oscar and a totally committed mother to her daughter Helen.

