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Hello Members – hope you are all well and starting to socialise a bit more now the restrictions have eased. Let me know if any of you have been meeting up and please share any photos for future newsletters. Well, our member spotlight this month is a continuation of the life story of our lovely Remi Clarke, you may recall we featured some of her amazing story in our July issue last year – I cannot believe it was that long ago – seemed like yesterday – anyway hope you enjoy – have you a story to tell? I am sure you have.

MEMBER SPOTLIGHT – Remi Clarke, Joint Treasurer, South Manchester Branch - Part 3

My 3 years general nursing training took place at Hertford County Hospital, a historic market town of Hertfordshire, about 20 miles from London and founded in 1832. I was in the class of January 1968. The interesting point about my class was the variety of students from different parts of the world. There were girls from East, West and South Africa, from India, the West Indies, Mauritius, Germany, Greece, and different parts of the UK. We often refer to our class as the International class. We were rich in diverse

cultures, which made an interesting group. We were all interested in learning about each other's cultures and in particular languages. I met my best friend Regina who came from Sierra Leone in that group. The first 3 Months learning was based in the school of nursing. Preliminary Training School (PTS). There we had lectures and practical demonstrations using various types of teaching aids such as manikins and plastic skeleton models. We also practiced on one another in demonstrating the act of lifting and various other maneuvers that we were likely to use in caring for our patients. This was of course before Health and Safety Regulations. It was all very interesting, but I was anxious to get on to the wards nursing real patients!! I had to wait a bit longer though because as a junior student nurse, there were other chores for us to do such as sluice duties and washing the bed pans. We were also responsible for making sure that the patient's bedside lockers were spotlessly clean using the "damp/dry dusting" technique!! Oh yes, it was all part of the nursing training. There was no room for MRSA!! My first placement was on a busy female surgical ward. Males and females did not share wards in those days. It was hard work but also very interesting and satisfying. I learnt so much very quickly. Every junior student would be paired with a senior student nurse or a staff nurse as mentors. I enjoyed hand over times and the consultant rounds. I found them both funny and stimulating. I loved the ritual of making sure that all patients were neatly tucked in bed before the consultant ward rounds. Firing of questions at junior doctors, student nurses and nursing sisters by the consultant at the patient's bedside during the rounds is sometimes comical! The look on Sister's face whenever she got the question, right? Well, it was as though she had worn a brownie point every time. All that aside, intense learning was taking place. In no time at all I was on wound dressing duties. I remembered my staff nurse mentor complementing me on my suture removing skills. However, I was not at all good at getting the



Remi 1970

corners right when making beds. I guess one can't be good at everything!! The 3 months placement ended too quickly, and I really missed my first ward as a student nurse. Other ward placements were Medical, Gynecology Children's ward Maternity. Accident and Emergency, Orthopedic, the operating theaters and night duty. Taking charge of the ward during a shift happens as early as second year. A daunting experience each time, it did prepare me for management role that was to follow later in my career. There were several exams in both theory and practical all of which we were required to pass. Working full time on the wards and studying when off duty left us with very little time for recreation. However, being so near to London meant we did have the occasional sightseeing trips to places of interest in the capital. One such trip was to London Zoo where I developed the love of elephants. I had never seen an elephant before as I had never been to a zoo before coming to the UK. The elephant we saw was from Africa like me and I felt connected to this amazing, large and beautiful creature. I now support the conservation of Elephants through the WWF. I have adopted an Asian elephant called KIRUBA. I eagerly look forward to the monthly updates about her. My family and friends know what to get me for birthdays and Christmas, yes anything with elephant photos is welcome every time!! One day, post pandemic I hope to visit Elephants in their natural habitat. One of my bucket lists of things to do and places to visit!

In recognition of hard work students were awarded prizes when they do exceptionally well. Hospital badges and certificates are presented to students who have been successful in passing the hospital exams. **Low Point:** During my second year, I was admitted to the Nurses sick bay one evening with severe abdominal pain. The diagnosis was Ovarian Cyst for which I had abdominal surgery. It was the second abdominal surgery in less than four years. I felt so sorry for myself thinking why me!! Having to take 12 weeks off to recover was very stressful as I feared that I might fall behind and not make the grades required to continue with the training. However, my best friend shared her lecture notes with me and with hard work, was able to make the grades. I also made a full recovery from the surgery. **High Point:** I was awarded the operating theatre prize for my year. I enjoyed my placement in theatre and learnt all the operating instruments and other procedures including cleaning and autoclaving all instruments. The theatre sister mentioned that I had photogenic memory. Pity I lost it somewhere along the way! The prize giving ceremony took place at Shire Hall, Hertford. Headline in the Hertfordshire Mercury newspaper dated March 13th, 1970 read 'Bishop's comment on nurses' poor pay' I guess not much has changed in over 50 years as the same could be said about nurses pay today. Prior to the prizegiving ceremony, the prize winners were invited to choose a book from a list for their prizes. As I was going to do my midwifery training, I selected Myles Textbook for Midwives. It was highly recommended book for Midwifery students at the time. The prizes were presented by the Bishop of Hertford see pic (left) - I was not making eyes at the Bishop as my mates teased! I had a much thinner face and big eyes when I was younger!! I was the happiest girl in the world the day I was presented with my SRN Certificate. I felt that I made my family proud.



Bishop of Hertford

Midwifery Training Part 1: I started my 6 months Part 1 midwifery training at Rush Green hospital Romford, Essex. It was a busy and very modern unit. Disposable bedpans in the early seventies were very new entity. I made up my mind very quickly that I would not be staying on to do the second part of the midwifery training. The main reason being that the unit was very large and impersonal. I was on duty on the labour ward one day, when asked by one of the midwives to answer a buzzer call. It was to a woman in her fifth pregnancy who was not thought to be in labour. I was shocked to find a very distressed woman alone who had just given birth to twins. I pressed the Emergency call buzzer, and the room was soon filled with staff from all over the unit in a real panic. This terrible experience made me more determined not to continue with my Part 2 training at that hospital. Overall, I did find the midwifery training interesting and did not allow the incident to put me off wanting to follow my dreams of becoming a midwife.

Marriage: I got married just after completing my part one training and before starting my part two. My marriage had been arranged by my family for a good reason. My intended husband was going to be a doctor and be able to provide me with a comfortable life. He had come to the United Kingdom when I was 12 years old to study Medicine. Unfortunately, and partly due to lack of finance, he could not pursue his medical career. Despite this, the marriage went ahead as arranged. My best friend Regina was my chief bridesmaid at the wedding in August 1971.



Regina & Remi

Midwifery Training – Part 2: This took place at Hitchin a market town in North Hertfordshire. It was a small pretty town with cobbled streets. The hospital in contrast was old, and we were still using the boiling method for sterilizing urinary catheters in early seventies! However, the care given to the women were excellent. Despite being a very busy unit, every woman was made to feel special. I was very happy that I made the right choice. The first three months were hospital-based learning and the last three months Community based.

Community: I will always be grateful to my community midwife mentor Jill who taught me so much about normal home births. The skills learnt all those years ago, was to help me achieve my goal as community-based midwife supporting women in their choice of home birth during the last 25 years of my career leading to my retirement in 2011. I was fortunate to have been a student midwife in an area of high home birth rates in the early 70's. Hitchin was an area where some of the British passport holders of Uganda were re-settled following their expulsion from the country by the then dictator leader of the country Idi Amin. The hospital became very busy as a result. Systems were then put in place to allow for more home births for low-risk women. Hospital births were reserved for most first-time mothers and high-risk women. I was fortunate to have delivered 21 babies in the community as a solo student midwife. I was given a push- bike, luckily for me, there were very few cars around in those days as I was not a confident biker! I can relate to the Television programme "Call the Midwife". I remembered thinking that all babies should be born at home as they were always so straight forward, babies usually come out screaming! Unfortunately, my very last home delivery, the baby did not come out screaming and needed a bit of gentle resuscitation. I sent for help as I embarked on resuscitating the baby putting into practice my lecture on the subject. Baby responded well and was fully examined by the GP. This incident made me aware of the need for midwives to know more about infant resuscitation. I eventually did the Neonatal and Intensive nursing care of the newborn at the Jessop hospital for women in Sheffield some three years after qualifying as a midwife. I found the knowledge gained from doing the course valuable throughout my career.

Fast Forward a few years 21 years: Nursing and midwifery training were not university degree courses in my days. Since teaching students was an integral part of my job, I knew that I had to upgrade myself by obtaining a university degree. It was hard work as I was also working as a full-time midwife. I had to do this on a part time basis and funded it myself and the Trust did give me time off for study. From April 1994 to December 1997 at Manchester College of Midwifery and Nursing and at the University of Manchester, I studied for



Remi now

DPSM/ADM and a degree in Midwifery studies, I enjoyed the courses and felt better equipped to support the students. this concludes this part of my story. Thank you for reading - Remi



Remember replays are now available on demand. Assuming you have registered for a talk you will receive a confirmation email with a link to join the talk live. After the talk has finished this same link can be used for 7 days to watch a replay of the talk on demand. Registration is easy - please just visit www.mirthy.co.uk/NHSRF and you will get an email with a link to click at the start of the talk. The next talks all starting at 10.45am are as follows:

- 1 June – Under the Influence – Andy Smith**
- 15 June – Tommy Cooper – Steve Short**



Our Facebook page is a great way to find out what branches are doing across the UK and it would be good to share ideas and experiences as we all start to make plans to hold meetings. If you have not yet joined the Facebook group yet, you can do so by using the following link: <https://www.facebook.com/groups/117538834934279> Our new Central Branch has its own Facebook page too which you are happy to join – here is the link <https://www.facebook.com/groups/2799711820278321> Does your branch have a Facebook page? If so please email the details and I can include in our next newsletter.



The NHS this week announced a £160 million initiative to tackle



waiting lists that have built up during the pandemic. The money will fund trials in a dozen areas and five specialist children’s hospitals that the NHS is describing as ‘elective accelerators’; these sites will implement and evaluate ways to increase the number of elective operations they deliver. We have been working with NHS England to support this initiative by advising on principles for effective communication with patients about their elective treatment. Rachel Power, our Chief Executive, said: “The lengthening of waiting times due to COVID-19 has been well publicised, and patients are anxious about what this will mean for them. This worry comes on top of the impact of having to live for longer with the pain or discomfort of their condition, and for many is compounded by having had multiple appointments postponed or cancelled. “Steps to accelerate the recovery of elective treatment are, therefore, very welcome – the importance of treatment being timely, to ensure the best possible outcomes, is well recognised. Effective communication with patients at this critical juncture is an essential.”



NHS England and NHS Improvement is recruiting to a range of Patient Public Voice (PPV) partner roles on groups with responsibility for the commissioning of specialised services. These PPV roles support the commissioning of often rare and complex specialised services across England. This includes treatment for rare cancers, genetic disorders, or complex medical conditions or surgical procedures. PPV partners ensure patients and the public are at the heart of specialised commissioning - informing, supporting and influencing the work of Programmes of Care and Clinical Reference Groups. All roles currently open to applications are considered Expert PPV Advisor roles and, in line with the NHS England and NHS Improvement’s PPV policy, have an attached involvement fee which PPV partners are eligible to claim. Watch this [video](#) and read this [blog](#) to hear from specialised commissioning PPV partners about how their involvement has an impact. The closing date for applications is 20 June 2021.

If you have questions about any of these roles, please email england.voice-crg@nhs.net. For full details of the roles and how to apply, click the button below.



Algebra Word Search

C	B	B	B	T	N	C	O	N	C	L	B	T	A	ALGEBRA
O	A	I	L	A	R	B	E	G	L	A	N	A	Q	COEFFICIENT
E	C	N	A	R	M	I	E	B	R	O	O	T	E	DEGREE
F	G	O	I	I	C	R	E	U	M	R	I	L	T	ZERO
F	T	M	M	A	L	C	R	N	N	A	T	N	N	CONSTANT
I	E	I	O	O	A	I	G	T	F	L	A	A	T	VARIABLE
C	N	A	N	T	I	B	E	O	E	T	U	A	T	POLYNOMIAL
I	I	L	O	R	R	U	D	I	S	N	Q	N	I	LINEAR
E	E	E	M	I	O	C	A	N	E	B	E	E	N	CUBIC
N	I	P	O	L	Y	N	O	M	I	A	L	L	I	MONOMIAL
T	Z	E	R	O	B	C	I	E	E	O	Y	E	C	BINOMIAL
E	L	B	A	I	R	A	V	N	T	T	C	U	E	EQUATION
F	M	T	I	R	A	E	N	I	L	P	B	D	B	ROOT
L	L	A	M	N	N	B	N	F	O	I	T	B	A	

And finally, don't forget this is **your** newsletter so we want **your** stories, anecdotes, thoughts. If you do have a contribution but haven't got anything typed up just give me a ring and I can type this up with you over the telephone - call 07967 489162 or email northwest.England@nhsrf.org.uk - Karen North West Development Officer.