

LIFE AFTER TANFIELD



NAME **GILLIANNE MEEK (NEE STAYMAN)**

PUPIL AT TANFIELD FROM **1975 TO 1980**

MY LIFE AFTER LEAVING TANFIELD

My name is Gillianne Meek. I was at Tanfield 1975-1980.

I have just retired early as a Registered Nurse due to ill health.

I am writing to explain to you what a wonderful career nursing is, both from the clinical and academic perspective and how it is accepted as a profession world-wide giving the opportunities to work abroad and travel.

I trained at Shotley Bridge General Hospital (SBGH) at a time when nurse training was predominantly hospital based. I covered every department - orthopaedics, medical, surgical, theatre, aged care, paediatrics, maternity, A&E, mental health and community. I feel lucky to have had such a broad training base, but my love was health of older people, who end up being patients on every ward.

Here are some highlights:-

There is nothing better than seeing a small child return to the ward after having a cleft palate repaired, and seeing the relief on the parents' faces. Seeing a cheeky young teenager have his 'metalwork' removed from his leg so he can have a cast following several weeks stuck in bed, becoming more mobile and friendly with his family and staff.

Then there is sitting with patients when they are told bad news from doctors. Often patients didn't take this news in, and without crying I'd have to explain in words they would understand what the doctors had just said. In my early career, Doctors never thought about asking for a family member to be there when they were going to give bad news – not like now. In those days I'd always ask if they would like me to ring their 'nearest and dearest' to come in. I got told off a couple of times from senior staff, but I always lied that they had an appointment at the hospital themselves. My patients were always my concern.

The fun side was a miserable young man with a leg infection, sulking on Christmas day. The nurse in charge said right! Get all those left-over little trifles (they would have been thrown out – infection control), close his curtains and throw the contents at him. He was covered in hospital trifle and started to laugh his head off. I think then he realised he should join in the

ward festivities. Now I don't advocate doing that these days, but it completely turned his attitude around – we were all there on Christmas Day stuck in the snow.

The greatest privilege you can have as a nurse is sitting with someone who is dying, especially if they have no family. People who visit often just sit there in silence, but I always encourage them to talk, especially about the person, recounting good memories as hearing is the last of the senses to shut down. Talk about older family memories, chat about lunch, just chat. Let the person know you are there and sharing this time. They may have very little feeling in their limbs, but they will hear you, and those loving stories are the last thing they hear.

Often I didn't know the person I had to sit with so I would tell them all about my Grandparents. I'd tell them about what was in the news and what I had for lunch. We always made sure our patients were comfortable and their pain medication was correct. If the pain medication is insufficient it is the nurse's role to advocate for the patients to the Doctors. This is one of the main roles of the nurse – ensuring a peaceful death, it is the biggest privilege you can do for someone at their final breath.

I have a BSc Hons that I completed from Teesside University while I worked as a Deputy Manager in aged care. My husband, children and I later moved to New Zealand, as I easily got a nursing job there. I would have as easily got a nursing job in Australia, America or Ireland which were other options we investigated.

I have had the most wonderful career. I specialised in several areas, rehabilitation, palliative care and aged care. I always wanted my staff to care for patients the same way I would care for my Grandparents. Co-incidentally after we moved to New Zealand I found out my paternal Grandfather had served in the New Zealand Army during WWI, and by chance had lived in the city we live in.

In New Zealand I quickly climbed the promotional ladder, as I felt my SBGH had set me up well to cope with multitasking and being a caring, organised, fair and professional manager. I later worked as a senior lecturer as I took a Master of Nursing degree while I worked full time. 90% of my students were from India and the remaining 10% from other countries. I very quickly had to learn how to lecture to students where English is their second or subsequent language. I became so involved with the International Department, I travelled all over India and Nepal about 7 times. I learned some Punjabi but my Geordie accent made them laugh. I travelled from the Punjab in the North of India down to Kerala in the South, meeting potential students, doing Education fairs and meeting and auditing education agents.

The biggest thing I learned from these 3 week trips was showing respect. Showing to everyone what can be done as a migrant to New Zealand. However, the biggest bond was the fact we were all Registered Nurses.

After several years I took an 'easier' nursing administration position, due to ill health. NZ nurses decided to strike, but when I became a nurse my vow was always to put patients first, so I volunteered for one of the wards as emergency cover – nursing is nursing and the

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strike could only go ahead if there were enough volunteer nurses to ensure the patients' safety. Well as you've read, there are so many roles in nursing, however I haven't mentioned radiology, chemotherapy, Health and Safety, occupational health, prison nursing, Doctors' surgeries, management roles, industrial facilities, sexual health, cruise ships, a huge range of mental health job roles such as forensics – where does it stop. Then there is the opportunity to travel to work, due to global shortages of nurses.

My career in nursing inspired both my husband and son to become RN's. My husband Robert worked in acute mental health and one of his many opportunities was transferring a patient back home to China. My son James has had a wonderful and varied career – that led him to taking students to Zambia on several occasions. He now has his own successful practice in aesthetic (botox fillers etc) nursing.

I hope this gives you some insight into nursing, however, it is hard work emotionally and physically. The role often requires you to work unsociable shifts and as a Registered Nurse there is a requirement to keep up to date academically for your registration requirements.

On the photograph I am wearing a Staff Nurse hat (1 navy band) and both my Shotley Bridge and New Zealand Registered Nurse Badges.