

# STAFF STORIES

## Deborah Lowe



Senior mortuary officer Deborah has been with the Trust here in Dudley for 25 years, but here she tells us more about her time working in Birmingham before making her move over to Russells Hall Hospital, her Heggie Award-winning qualification and what her vital role in the NHS has taught her...

### **When did you first start working in the NHS?**

I started in 1989 in a little maternity hospital called Marston Green over in Birmingham. I was there for three years and then they eventually closed down and merged with Birmingham Heartlands Hospital, so I automatically got transferred over from just maternity to a big hospital that was both adults and maternity. I went over to Heartlands in 1992 and I did four years there, and then I started at Russells Hall Hospital in June of 1996. I've been here ever since.

### **Can you talk me through your different roles during your time with the NHS and explain a little about each one?**

My original role started off in maternity where it was just babies, so it was doing post-mortems, viewings and dealing with, sadly, the mothers and families who had lost their babies.

We used to have to do two exams to qualify – one for the diploma and one for the certificate, and we were given two years to complete each one. I managed to do both of mine within the first 3 years. I got my first qualification in 1991, and I got top awards in the country for that. It's called the Heggie Award. Our qualification is with The Royal Institute of Public Health and Hygiene, and our proper name is anatomical pathology technicians (APTs).

I went from Marston Green to Heartlands where I then started taking on adult post-mortems. Heartlands Hospital is a massive hospital, so we did adult post-mortems and babies, viewings and liaison with funeral directors. Here, I was trained in how to take parts of the heart for organ retrieval and harvesting. I then, more recently, qualified in something called enucleation, which is how to take out eyes for corneal donation. My role in organ donation is really important, as the gift of life or an improved life for someone else is very comforting and one of the most generous things a family can support at such a difficult time.

I moved from Heartlands over to Russells Hall Hospital because I lived nearer here at the time, and I wanted to work in a busier environment. Russells Hall is a public mortuary, so we do post-mortems for people who have died in the community. Coming to Russells Hall meant that I did exactly the same work – it was both adults and, at the time, baby post-mortems, but we also did forensic work and post-mortems for people who had died in the community, whereas Heartlands was mostly people who had died in hospital. My training was vast here, we learnt everything from how to take spinal cords out to lots of specialised techniques, and I think the most interesting part of it was a lot of the forensic work.

What I liked about working here was that I was really surprised by how everyone knew each other. You have to allow an extra 10 minutes to go up the corridor just to say hello to people, so I was made to feel really welcome here.

It's a really hard job, and it's physically, mentally and emotionally challenging. You see things you shouldn't see, and you see things you're never going to forget, but it's probably the most rewarding job. It's a privilege to do my job. We do everything we can for our families and if we can make something easier or better for one family every day, that's our role.

**Is there anything you have been particularly proud of during your time?**

Definitely the last 12 months. We were all scared and we were all a little bit overwhelmed, but everyone just pulled their socks up and got on with their job. A positive to come out of it was that we were all left to do our jobs. The by-product of working in the NHS is that there's a lot of stuff that has to get done, like audits and meetings that all seem to get put on hold, but we were all just left to do what we've been trained for, what we've qualified for and to make the best of a really bad situation. I think we did brilliantly, and I put that down to the resilience of staff in the whole hospital.

**How has the NHS changed since you first started?**

Science has moved on a little bit, as we now do a lot of digital post-mortems. We're probably a forerunner for it, there are a couple of other areas, but our patients will have a scan instead of an invasive post-mortem. It's a lot better for the families because the thought of a post-mortem to a lot of families isn't nice. I'm not going to say it's 100 per cent a move forward, and in some cases you will always need a traditional post mortem. The idea is you'll have a digital scan and you'll see what the results are – if they're conclusive and worthwhile you go with that, but if not, you may need an invasive post-mortem, but it helps to reduce the invasiveness. It's reduced the need to do full post-mortems, but it hasn't eliminated it altogether.

There's also a lot more documentation we have to complete now and there has been an increase in audits. I see the reason why, as we are regularly inspected and people are increasingly looking at us and questioning us.

**Is there anything you would say to people thinking of joining the NHS?**

It's an honour and a privilege to work for the NHS. Don't necessarily do it for the money or if you're a bit of a glory hunter – you're not in it for single person glory. It's about the achievements and the sense of pride that you get for coming to work every day and making a difference to someone's life. If this job shows me anything, it's that life is way too short. You need to love your job. My staff make my job nice, the job itself can be emotionally challenging, but the staff and people around me make it nice, and I think that works for a lot of departments in the NHS.

**If you could sum up the NHS in one sentence what would it be?**

We're all tiny cogs in a massive machine, but we're all vital. No one's role is more important than the next person's role. We can't run what we run as a massive organisation like this without the tiniest cog in the bottom.