

on the frontline

CMF caught up with some people who have 'been there, done that, got the T-shirt'

a junior doctor

Dr Phoebe Owen



What area of medicine are you in?

I am a core trainee in psychiatry (CT2).

Why did you choose this area?

At medical school I enjoyed so many areas but when I got a foundation rotation with a psychiatry placement I found I loved it, that I was good at it and it suited my personality. I have always felt challenged about Isaiah 61:1-3 and how I could use the skills God has given me to bind up broken hearts, proclaim freedom for captives and release the prisoners from darkness.

What motivates you in your work?

I spend more time at work than at church or anywhere else, so it's my place of witness and opportunity. Also, I am motivated by my patients. Many areas of their lives have broken down. I want to be some part of their journey towards restoration, and it is wonderful to see someone recover from a very severe mental illness and gain their life back.

What does a typical day look like?

We have a ward round with the consultant and discuss all of the patients on a Monday morning. Then as juniors we do our own mini 'ward reviews' during the week. Because I'm currently on a dementia ward, a significant part of my day is spent meeting with families, giving them updates, and talking to them about quite important decisions (eg end of life care).

What are the challenges in your workplace?

Our patient group can be challenging. They don't want to be in hospital and it's not a specialty where patients thank you for 'fixing them'! Your satisfaction has to come from elsewhere, which can also be tough at times.

I think there can still be a lot of stigma attached to mental health and so one of the privileges and challenges of working within this field is to encourage people to think differently about mental illness in the church.

What are the blessings in your workplace?

I love my colleagues: many are very different to me, most are not Christians, but we share day-to-day life and difficulties, and we laugh every day – which is really important. I am also increasingly enjoying sharing my faith with colleagues. The more I do it, the more encouraged I am to do it and I have certainly had more positive interactions than negative ones!

Do you have any advice for students currently going through medical school?

Press on! I found medical school extremely tough at times, but it is worth it. Invest in those good solid relationships, and also stay connected to your church. It's easy to miss church when exams are coming up, but those pressures will always be there (I'm still doing exams now, four years after med school!) and new pressures will be added. Remember always to 'seek first his kingdom and his righteousness and all these things will be given to you as well' (Matthew 6:33). ▀

a nurse

Gill Crouch



What area of nursing are you in?

Paediatric diabetes, mostly community with some hospital work.

Why did you choose this area?

I wanted a change from ward work, and wanted to become an expert in a specialised field. I also enjoy the variety in ages: ten months to 19 years.

What motivates you in your work?

Making a contribution in education and support to families living with the very challenging condition of type 1 diabetes – being there for them on the long journey as the child grows and develops.

What does a typical day look like?

Ward visit with an in-patient teenager admitted for stabilisation of diabetes as he's not looking after himself; phone calls and admin; then a school visit to teach staff about managing diabetes for a school residential trip, finishing with a home visit to a child and family for their annual review, going through all the aspects of diabetes management in the context of their individual routines at home, school, hobbies etc. We also have an on-call phone which we take in turns to carry, from 8am – 10pm. The days can often be long!

What are the challenges in your workplace?

We work with families for the long haul so I must retain a working relationship even when they are being very difficult. I can't make them better. It can be very draining work providing all the emotional support required.

What are the blessings in your workplace?

Really getting to know families and watching them grow in their ability and confidence. Working with young people through childhood and adolescence can be a joy and a challenge – assisting young people living a normal life with their condition.

Do you have any advice for students currently going through nursing school?

Spend a couple of years consolidating your training after qualifying, then find an area of nursing you are truly passionate about and get stuck in! ■

a consultant

Dr Idris Baker



What area of medicine are you in?

Palliative medicine.

Why did you choose this area?

I think it chose me. We had a one-off therapeutics lecture where the Prof took two themes – opioid pharmacology, and the art of prescribing as a matter of human engagement, not just signing a piece of paper. He brought these together in the context of the care of the dying. It was like a beam of light and I was hooked.

What motivates you in your work?

Did you know that about a third of hospital inpatients, for example, are in the last year of life – although you often don't know which ones? They have physical symptoms, psychological problems, social dysfunction and spiritual distress. Making a difference to these things in someone's last days and months is one of the biggest things you can do for someone, I am also driven to find ways to improve areas of unmet need, as we know that not everyone who needs this care gets it.

What does a typical day look like?

There's no such thing! I often start the day hearing about patients or helping manage the department. That's usually followed by a mix of seeing patients, taking phone calls, an outpatient clinic and holding meetings.

I enjoy spending a lot of my time seeing patients at home. Supporting families is so vital – family members are the ones who will be left with the memories of how someone was cared for as they were dying.

What are the challenges in your workplace?

The top one is probably the same anywhere, there are more things to do than time available. I try to focus on what's most important and not to lose too much sleep over the things that won't help anyone. I also get frustrated by the way people sometimes treat each other, and themselves badly and the way that contributes to ill health. I can feel powerless to do much about it so instead focus on what difference I can make.

What are the blessings in your workplace?

The people I work with, and above all the patients and their families. A very wise Christian once told me 'It's not for no reason that we're called human beings and not human doings'. My patients are a constant reminder of that because they are often able to do very little. Yet, however great the losses imposed by their illness, they display the glory of God in his creation.

Do you have any advice for students currently going through medical school?

Enjoy every minute and make the most of it. You'll never have quite the same opportunities or be surrounded by so many people wanting to teach you without the pressures of a day job interfering. Whatever your future plans, learn everything you can about every part of medicine now because nothing will be wasted. Finally, if you believe that God has called you into medicine, remember that calling as you study, and keep your eyes fixed on Christ. Sustaining and recognising the reason for your studies will set the tone for your career and more. ■

a GP

Dr Emma Hayward

***What area of medicine are you in?***

I am a GP and clinical educator, so I see patients two days per week and teach undergraduates the rest of the time.

Why did you choose this area?

I love the variety in general practice – who else gets to do a newborn check directly followed by visiting a 92-year-old in their home? I also love to teach and general practice is flexible enough to allow me to do both.

What motivates you in your work?

Being able to get alongside people when they are facing difficulty or distress; using clinical skills to make diagnoses; watching medical students having 'light-bulb moments' when they understand a new concept.

What does a typical day look like?

A day at the surgery begins with a nice drive across the Leicestershire countryside ready to start with a cup of tea and paperwork at 7.45am. I start seeing patients at 8.30am then do visits at lunchtime. After that I check blood results, sign prescriptions, write referral letters and file incoming post until I see my afternoon patients. I usually leave at about 6.30pm and get home in time to read my children bedtime stories.

When I'm at the university, I usually start at 8am but there is no typical day because I teach on such a wide variety of courses. Every semester is different.

What are the challenges in your workplace?

Keeping up-to-date with everything, running on time, balancing patients' needs with practice targets.

What are the blessings in your workplace?

An amazing team who really work well together and recognise that everybody has a vital part to play. Our patients are generally very grateful for our help and it's good to get their positive feedback when we've done a good job.

Do you have any advice for students currently going through medical school?

Medicine can fill 24/7 if you let it. I took every Sunday off at medical school (even the day before finals) and never failed an exam. I really felt the benefit of observing a Sabbath rest and would recommend that you try it. That said, I do not advise telling your tutor that the reason you failed your exams is that Dr Hayward told you to take Sundays off – you will have to work the other six days of the week! ■