

When You Are a Nurse, a Daughter and Next of Kin - The Challenges of Knowing Too Much



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Dear readers,

HAPPY NEW YEAR! I hope you have all had a colourful start to 2025.

I'm guessing that, just like every other year, this will not be a boring one. Some might say that's a good thing. I am one of them.

My year began in a positive way. I have taken up a registered nurse position for NHS Wales and will soon begin work at the University Hospital in Cardiff. They have a major trauma centre, which is now my area of focus. I am slowly saying "goodbye" to NHS England and "hello" to NHS Wales. You might ask, "Why?". My answer would be, "Why not?". Different wards and different uniforms are waiting for me there.

From a nursing skills perspective, there might not be much difference as we are all on the same level. BUT, I might start to learn a new language = Welsh J. My new employer encourages healthcare professionals to learn it. Well, the basics anyway. I am really looking forward to it. In the last 2.5 years, I have had a good look at the world of clinical nursing. I have tried nursing homes, respite homes, and mental health wards. Eventually, I concluded that I belong in the acute sector. After 30 years, I need the buzz, the vibe, the craziness, and the beauty of ward work. So, that was the start of 2025: new year, new job. Woohoo!

However, as we all know, life is not always epic, happy, and full of good stories. There are challenges, too. A big one came along right after I signed my new contract. My dad was hospitalised. To give you a brief backstory: my dad is a medical wonder with 3 MIs, 2 strokes and 8 stents. NO medical textbook has a patient case like my dad! He is tremendously strong, like a huge mountain. Giving up is just not an option for him. For us, as a family, this is good.

Anyway, Dad was put on a MAU (a medical assessment unit). I left the UK and travelled to Germany, full of anxiety. I am very aware that there is a shortage of nurses and doctors in the wards, the units, and basically everywhere. I now found myself on the other side of the equation - as a daughter and the next of kin. I tiptoed around the staff, apologised for my questions, and felt awkward when I went to the nurses' station. WHY? I tried not to waste anyone's time, but as a nurse, a daughter, and a next of kin, I needed to know what was going on with my dad - a man of almost 81 years.

The ward round seemed like something from 30 years ago. Lots of medical terminology was used, which my dad simply didn't understand. Patient contact lasted a nanosecond. Again, I kept thinking "why?". When I began my training in Germany 30 years ago, this is exactly what I experienced as a student and young staff nurse. Three decades later, I can still see this same pattern of behaviour in my old Heimat. This is not acceptable.

On day 3, I asked my questions without hesitation, but I still felt strange and awkward. Thankfully, I met a staff nurse at the MAU who helped me.

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God sent her, I thought.

How crazy is it that I feel sorry for the shortage of nurses and doctors in my old Heimat? I am certain I am not the only one. On one hand, I am the next of kin and my dad's advocate. On the other hand, I am also a professional nurse with the same level of knowledge as the people caring for him. That means I'm thinking in both personal and professional terms. Weird.

If family members don't get the support they need from us healthcare professionals, they are lost. They need us as much as our patients do. My mum and my sister would never have asked the staff, and that can't be right. Certainly, they couldn't communicate in the same way as I can because I have the nursing and medical knowledge. Mum is nearly 85, and she would be like my dad, sitting in bed listening to the doctor without fully understanding.

This experience taught me another lesson for my ward work. Always, always include family members in the care of my patients. I always have done and always will. Now, even more so!

Dad came home with us. He did it again! We are happy and proud of him.

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