‘I love complexity’
RCN professional lead for older people and dementia care
Dawne Garrett enjoys challenging assumptions

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Why did you become a nurse?
I had a career in banking which was well paid and exciting, but essentially unrewarding. My neighbours were both nurses and suggested it might suit me.

What might you have done otherwise?
I have a background in theatre studies so possibly something in the arts. While working for an airline, I did fancy being an air traffic controller. I’m still thinking what my next career might be.

Where did you train?
On the Isle of Wight. It was fabulous; we had small intakes and were exposed to so many different types of nursing in a flexible atmosphere.

Why did you choose to specialise in care of older people?
I love complexity. Marrying physical, psychological and social needs with ethics and the essence of the individual is so interesting. I find linear pathways confining. I realised at an early stage that the core of adult nursing is delivering older people’s care.

Where have you worked previously?
Predominantly in the NHS in the north and south of England and with academic institutions to create practice development programmes. I have also done freelance work, working with clinical commissioning groups to streamline pathways for people with long-term conditions and develop new roles such as nurse consultants.

What does your work as RCN professional lead for older people and dementia care involve?
My role is diverse but comes back to two key principles: improving nursing care for patients and supporting nurses.

I do this by working with nurses on practice development, influencing policy, developing guidelines and standards, providing advice and resources and representing nursing across the board.

How does your role affect the practice of staff nurses in care home and acute settings?
It’s a combination of immediate and less immediate effects. The obvious impacts include development programmes, educational sessions, creating resources and I continue to work in practice. The less immediate, but no less important, effects include influencing policy, steering research, challenging political change and representing older people’s nursing throughout health and social care.

What do you enjoy most about your work?
Representing my colleagues and challenging assumptions to improve nursing care. I love meeting so many people and enjoy the architecture of the incredible building I am privileged to work in.

What is the greatest challenge?
Genuinely representing nursing is a challenge and is possible only if nurses engage. It’s important for nurses to be involved with, and shape the work of, the RCN. Without nurses’ views and suggestions, we are not able to represent them appropriately.

On a personal level, the challenge is to have everything I need with me. I’m rarely in the same part of the country from one day to the next.

Outside work what do you enjoy doing?
I love the theatre, entertaining, writing poetry and swimming. I am a member of the Association of Lighthouse Keepers and a besotted grandma.

What nursing achievement are you proudest of?
I’m proud to have pushed the boundaries of practice – not simply in extending the role of nursing, but in providing creative solutions that enable people to live more rewarding lives. Breadth without depth rarely serves our patients and residents well.

What advice would you give a newly qualified nurse in your field?
Have fun and enjoy your role. If you do anything, do it as a nurse and take those values with you. Articulate what nursing is whenever you can. The day it stops moving you in some way take a break.

Dawne Garrett is proud to have pushed the boundaries of practice

David Gee