How I moved from an ED nurse to a health tech boss
Changing course from a career in direct patient care does not mean you miss out on supporting nurses

Swapping the adrenalin-fuelled world of emergency nursing for a desk in a digital technology start-up might not seem the most natural career progression, but for Krista Burslam-Dawe the excitement and challenges are comparable.

‘By going into digital health in a private company, I’ve kept the fast-pace I’ve always enjoyed in emergency medicine, where you don’t know what’s happening from one day to the next,’ says Ms Burslam-Dawe, who joined health technology company Opto, as their chief operating officer last autumn.

‘It really suits me, as I have been able to keep that same kind of momentum, where things change quickly.’

Nurses do so much administration – I thought there must be a better way
Having started her emergency nursing career in 2001, eventually becoming a matron at King’s College Hospital in London in 2014, she had always assumed her career pathway would stay in the NHS, moving up the managerial ladder. But she became passionate about trying to improve triage, realising that digital technologies could pave the way for improved services.

‘The more senior I became, the more I was exposed to all the challenges emergency medicine faces,’ she says.

‘Like so many other emergency departments around the country, I saw the queues getting longer and longer, with the waiting room becoming the most anxiety-inducing area of the whole department.

‘We couldn’t see the patients quickly enough, and it didn’t matter how many people we put on that front door, we just couldn’t get on top of it. Nurses do so much administration and I wanted them to be able to go back to being nurses. I thought there must be a better way.’

Who better to influence a nursing product than a nurse
Working with NHS providers, Opto has developed a digital triage system with the aim of reducing waiting times and providing a more efficient and streamlined service that benefits patients and staff.

Having the involvement of nurses is key, Ms Burslam-Dawe believes. ‘Who better to influence a nursing product than a nurse,’ she says.

‘We know the challenges because we face them, day in and day out. It’s about making their lives easier, less pressurised and supporting them to do their jobs really well.’

Traditionally, she agrees that many nurses have fought shy of becoming involved in technology.

‘It can be scary,’ she says.

‘Throughout my career, it’s either helped or hindered me. Then I had a bit of a lightbulb moment, when I thought why am I so scared of it, when I have a phone I use all the time. Technology can be complicated, but it’s useful if it’s simple.’

Moving to health tech company was a leap of faith – and a culture shock
Leaving the NHS in 2017, Ms Burslam-Dawe joined a digital health company, where she stayed for five years. She admits her initial move into the private healthcare sector was a culture shock and a leap of faith.

‘Probably for the first year after I left the NHS, despite loving my job, I worried about whether I was doing the right thing,’ she says.

‘You start your career at 17, thinking you’re going to work in the NHS until you retire.

‘Who better to influence a nursing product than a nurse? We know the challenges because we face them, day in and day out’
My 6 tips for making a big career change work

» Be aware of your own potential and how you can use it. Nurses don’t realise the job opportunities that are out there for them and the influence they can have. For years, nurses haven’t got themselves into these positions because they didn’t know they were possible.

» Before making a big decision, list the pros and cons. This should include your current post, all the things you’d like to change and whether a new post could make that happen.

» Believe in yourself. Have absolute faith you can do it — if you couldn’t, you wouldn’t even be thinking of it in the first place.

» Seek the advice of your family and friends. They know you better than anyone and will give you encouragement.

» Seek out others who’ve trodden a similar path. They’ll tell you it’s not as scary as you think it’s going to be.

» Don’t feel you have to hurry to progress. I remember seeing people I started my career with applying for band 6 jobs really quickly. My dad said, don’t rush and do what makes you happy. You need to do things when they are right for you, when you feel you have got the skills and knowledge, otherwise you can feel like you’re sinking. Take your time.

I wanted to become a matron next, so I would be in a position to change things

I never thought I’d be working in health tech for a private company.’

At the outset, she was one of very few women involved in digital healthcare and nurses were under-represented too, with GPs predominating.

‘I remember turning up to a big digital health tech event in London in 2017,’ Ms Burslam-Dawe recalls. ‘I was the only woman in the room. It was hugely male-dominated.’

Fortunately, she can see how much that’s now changing. ‘There are some fantastic female leaders,’ she says. ‘You’re seeing some great females standing on stage.’

I wanted to travel the world, and nursing gave me the opportunity

Making brave and sometimes unexpected decisions has been a feature of Ms Burslam-Dawe’s career. ‘I wanted to travel the world and I knew nursing would give me that opportunity,’ she says.

Her father was a Royal Marine and encouraged her. ‘He said if you want an understanding of life, you must see what’s outside the UK. I always say my parents gave me wings to fly.’

After qualifying, she spent a couple of years at Derriford Hospital in Plymouth, where she met colleagues who had travelled abroad using their skills. She volunteered to work for the Red Cross paediatric hospital in South Africa, alongside the Metro ambulance service in Cape Town.

‘I was carrying out lifesaving procedures at the roadside, with just the headlights from the rapid response car for light, and delivering babies in the shacks in the townships,’ Ms Burslam-Dawe recalls.

‘I was totally fearless at that time. I was young and it was a great opportunity.’

I am now making a difference that benefits nurses

She also lived in Thailand, teaching English, before heading on to Australia, spending almost three years there in an emergency department (ED) in Sydney.

Returning to the UK, she worked at the Royal United Hospital in Bath, then St George’s in London, where she originally trained.

‘It was probably here that my love of triage really came out,’ says Ms Burslam-Dawe.

‘As a practice educator, I could see how I could support and develop the skills of new triage nurses. I wanted to become a matron next, so I would be in a position to change things.’

Although her current role is in a very different kind of setting, she still sees herself as a nurse.

‘A lot of people's perceptions of nursing is that to make a difference, you have to be hands-on caring for patients,’ says Ms Burslam-Dawe.

‘But we are so influential in other aspects of our experience. To be a good nurse, you don’t have to physically deal with patients every day. You can make a huge impact in other roles.

‘While I miss the hustle and bustle of the ED and talking to patients, I am not missing nursing. ‘I still feel like I’m a nurse and what I am doing is benefiting them and my nursing colleagues.’

‘I wanted to become a matron next, so I would be in a position to change things’