

## **IMPORTANT NOTE:**

**This work is a listening experience.**

**The transcription is strictly for accessibility only.**

## **100 VOICES TRANSCRIPTION**

Music from 4 PORTRAITS is denoted in italics - songs performed by professional singers..  
All other text was recorded on location across 10 hospitals.

*There are so many voices here. Fighting to be heard, above the noise.*

**VOICE 1:** It's very busy. It's noisy. Beds moving around all the time. Staff rushing here and there. But at the same time, they have got time for you if you have a problem. They reassure you.

**VOICE 2:** Normally the Royal Mail delivers a lot of packets and letters every morning. So we sort out the letters and packets. Sometimes we get a lot of gifts to the patients. That's a good thing in the post room you know I mean, we deliver the things to the patients. They are very happy and they say thanks to us.

*Voices that tell you the truth, voices who protect you from it. Voices who explain. Voices who call you darling, my love, they say...*

**VOICE 3:** We will look after you and we'll do our best for you. It is hugely challenging but hugely rewarding.

*They tell a joke, they say you're getting there. You're getting there.*

**VOICE 4:** As a nurse, it's important to speak for people that are unable to speak for themselves and being an advocate for them.

**VOICE 5:** Life goes on. We are temporary beings. We come and we go. But life in itself goes on.

*Voices from every ward, in every bed they speak of pain and of hope and they speak of loss...*

**VOICE 6:** So if you're a bit nervous about coming into a hospital, they reassure you and you're perfectly alright.

**VOICE 7:** It's always important to see you strive and be the best you can when you're working, to continue to improve standards and obviously, I work in hospital to provide the best patient care that you can.

**VOICE 8:** We need more options for lunch in the hospital.

*They apologise, they tell their stories, so many stories*

**VOICE 9:** I'd like to go to the Albert hall and hear the Royal Philharmonic.

**VOICE 10:** I think it's about what matters to you, Not what is the matter with you.

*Listen they're singing this chorus, this union*

**VOICE 11:** When you get in the lift, even if you don't know somebody, they always say hello. So, yeah, it's just a happy place.

*The voice of courage*

**VOICE 12:** You never, ever stop worrying and caring for your children.

**VOICE 13:** It may be a bad time in your life, but we'll look after you and we'll take care of you.

**VOICE 14:** Especially in the NHS. Such a multidisciplinary team and everyone who the patients encounter on their journey has had as much as a significant impact on them, from the cleaners who will like decontaminate the room from like a C. diff infection to the housekeepers that will give them like tea or coffee and biscuits and actually have more time per se than other members of staff to have a conversation with them and make them feel like a human being rather than just like a patient.

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**VOICE 15:** E.D. nurses are the most inspiring. People to work with. They're enthusiastic, they're kind, and they work under pressure as a team more than anybody else I've ever worked with before. And they inspire me every single day to be better at my job.

**VOICE 16:** As a cleaner, you probably hear this everywhere from cleaners, but when they make a lot of mess, that's basically the worst thing about the job, but that's what you're here for, and that's what you do, so you've just got to involved in the position, and get on with it so yeah.

**VOICE 17:** Yes. I took off my glove and we spent about 10 minutes almost exploring one another's hands, kind of like a dance. She would take hold of my hand and let it go and play with my fingers and thread her fingers through mine and then let go and then keep reaching out again. Yeah. Like a dance.

**VOICE 18:** A smile goes a long way to put people at ease.

**VOICE 19:** Every time I've been into hospital, because you come for different things at my age and they've done a wonderful job, great. Absolutely great. People moan about them in the paper. On the news and all that, but they're really, really good. Once you get into hospital, they're really good. It's just getting there.

**VOICE 20:** We are doing our very, very best. We don't always get it right. We want we want to hear when we don't want to hear your voice so we can make our services better for you and your families.

**VOICE 21:** Every day, choose a bit of joy in your life because life is very precious.

**VOICE 22:** I want to hear what other people have to say, how they express themselves, be that through a creative activity or yeh, through conversation.

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**VOICE 23:** So a porter is actually quite fun. It's physically, mentally and emotionally demanding. But what job isn't? And the fun part is you get to do it every day.

*Best job I ever had, easy. I take a person from one place to another. One appointment to the next. Easy. They always ask...*

**VOICE 24:** We do walking. And pushing. That's our job. And talking to patients. But that's it. If we can make them laugh. It's a good day. Thank you.

*Best job I ever had, easy.*

**VOICE 25:** I like the walking around the freedom that we have. And it can be hard sometimes, but it's entertaining and we are actually making a difference with the patients. To see sick people and sometimes death because we deal with that as well as so it can get to you.

*Don't say that I've walked these miles carrying life and death, and everything in between.*

**VOICE 26:** Yeah, every day is different. You never know what character you get in the hospital. You never know what character is, like said you have good days and bad days, but every day is totally different. You can go from traumas, you can go from childbirth, you can have anything. It's totally different.

*That when the beeper goes, I dread what I might see...*

**VOICE 27:** I've been told off members of staff that we're only porters. That's it. We're only porters, we're not important. But, what can you do? you just smile at them and get on with it.

**VOICE 28:** Keep going. Keep trying to improve. And if you ever need anything, My door's always open.

*Small talk, we talk about the small things. Work, home, kids. Keep it light.*

**VOICE 29:** There's always something to learn. But what I know, I try and teach other people, or learn other people if you know what I mean.

*And I don't say that I can tell when small talk will be too much to bear.*

**VOICE 30:** They look at you like you're a peasant sometimes. They treat you like you're the peasants of the hospital, but realistically, if we weren't there to take a patient, that patient wouldn't be going to get their CT scans, their MRI's, things like that. But a lot of them are nice though.

*And I don't tell them that when they go, when they pass, I carry them onwards.*

**VOICE 31:** A patient who's passed away. We generally refer to them as Rose Cottages and it's just a way of people who might be affected by it - of softening the blow, and other patients don't properly understand what that means. And it's

just a less abrupt method of referring to it than, you know, deceased or body or wherever.

*Quietly, I say a prayer.*

**VOICE 32:** You know, somebody comes in with an appendicitis, you cut it out, and quite often they go home the next day and they're done with it and you know, you've cured them. So, you also have those ups as well as the downs.

**REPEAT:** The down sides... because we do all the dead bodies. So every time there is one, we've got to get them on the trolleys, take them down to the mortuary, things like that. so, especially when it's little, tiny humans, that's probably the worst part for me. At first it was awful. I hated it. But I don't know. I guess I'm just kind of used to it now. I talk to them before I put them on the trolley. And when I'm putting him in the fridge downstairs, it just makes them feel a bit nicer I suppose, even though they're not here, technically, I always treat them as if it was my family member. So, I try and be nice.

*There are so many voices here, fighting to be heard above the noise.*

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**VOICE 33:** Treat everyone as an individual. Consider their feelings and not just how you can best communicate with them, but how they might feel about it and ask, ask how they would like to communicate with you.

*She arrives with a bag she packed a month ago.*

**REPEAT:** Everyone's voice is unique and that's perfect to them.

*Kept by the front door. She's written down her plan. I listen.*

**VOICE 34:** Sometimes it's enough to listen and be empathetic without solving the problem.

*She talks to me. She tells me how she feels, what she needs, I listen.*

**VOICE 35:** As a speech and language therapist. There's a lot of pressure and you feel a lot of guilt if you know you are expected to be the person, the one person that can understand what someone with communication difficulties is trying to

say. And if you can't, if you're not the one that can understand that, you feel really guilty at the end of the day.

*And then she stops talking.*

**VOICE 36:** It's really important to me to advocate for the patient, even if they don't have capacity to make a decision that we make sure that their wishes and preferences are heard.

*I have learned the language of screaming, the high and wild, the furious, the righteous.*

**REPEAT:** There's always a means of communicating, even if it's not speech.

*I understand each breath, the fast and shallow*

**VOICE 37:** When you lose your voice, you lose a part of you. when I had my voice prosthesis put in, I regained part of me. And I'm lucky that I had such a good voice.

**REPEAT:** I want to know about the person and what is important to them, what matters to them, what makes them tick, what gives them strength, what gives them hope. And just listen to who they are, not what their condition is.

**REPEAT:** Thank you. Thank you for everything you do each and every day. It can sound very hollow, but actually you make such a difference to so many lives. And we're so grateful. How do we just do those things that can make it that little bit easier for for our staff to give the care they want to give to our patients.

*She's at the centre of this new universe. I listen.*

**VOICE 38:** Um, I'm a psychiatric nurse and a general nurse but at the moment I work in neuropsychiatry, so you need both sets of skills really. And um. Running shoes. Sometimes you have to move quickly. Usually there's a warning or a build up, sometimes it just happens so you have to be alert all the time. Sometimes people just act out, the frustration gets too much. What we should really have is a huge hospital with grounds so people could run around until they're exhausted and then express themselves whenever they want to , but here you have to keep people in a small unit with a corridor, and sometimes their psychosis, it just makes them really, really frightened and angry.

**VOICE 39:** Space for me would be a garden space. It would be something that is calm and relaxing and allows you for a few minutes to forget that this is necessarily a hospital full of pain and worry and concern and allowing the sort of better feelings in life to come to the fore.

**VOICE 40:** I'm eating sausages.

**VOICE 41:** Eating sausages.

**VOICE 42:** We are lucky in that we are the only hospital in England that runs, owns and operates its own incinerator. What worries me is that the size of this site is going to expand and expand and expand. The incinerator can't. Sort it out.

**VOICE 43:** The hospital is huge. It's like a town, and you're liable to get lost.

**VOICE 44:** The design and construction of our buildings starts with the voices of our patients and staff.

**VOICE 45:** I think working for the NHS gives you a perspective on life really. You you realise how lucky you are at the end of the day that you can, you can walk out and other people aren't that lucky.

**VOICE 46:** I took the job on because for 30 years, like I said, I was a fireman and I love working with people, I love helping people out. And I can tell a tale and they can tell a tale. You know what I mean?

*Best job I ever had, easy. I take a person from one place to another. One appointment to the next. Easy.*

**VOICE 47:** My job is to service 25,000 Fire alarm devices between a team of six of us in the whole of the hospital. Can be strenuous at times, but it's rewarding keeping everybody safe in hospital.

**VOICE 48:** What we want people to know is to look at the labels on the bins and make sure you're putting the right things in the bins, because otherwise you can contaminate. Say, if you put a banana peel in a recycling bin, you will contaminate that whole recycling bin and then it can't be recycled and it does go into domestic, unfortunately. What we want staff to know is that there is someone at the end of the shoot that has to go through the waste, and if it's not

properly segregated. If say, you have a, a sharp in the recycling, they might actually really harm themselves.

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**REPEAT:** I look at my voice as being part of my personality. Without your voice, you lose part of yourself because your voice expresses so many of your feelings.

**VOICE 49:** Look, I'm sitting in a dark place. I'm feeling like a moving at a slow pace. Mama, I know you're up there. I know you're looking down on me. I know you're proud of me. I see you're smile in the crowd. Every day I get a feeling like you're next to me. The day that you lost your life made me lose my heart. I can't lie. I feel so low now. I remember the day that you died. I saw the pain in your eyes. I felt that in my heart. Just wish I could have heard your voice one last time.

**REPEAT:** If you're listening to this, and you are possibly going through something like I've been through and you're wondering what life is going to be like on the other side. All you have to do is believe in yourself and fight to get back to as much normality as possible. Do not give up. It is easy to give up. You have to fight to regain your personality. So fight for it. At the end, it is always worth it.

**VOICE 50:** So yeah, when I think about voice, voices, voices that I hear.... voices of my patients. I think about how closely linked, how intertwined our voices are with our personalities, with who we are, with our souls, with everything about us, and that we don't realise it, that we don't realise it, that our voices are us to some extent. And when you don't have one, you lose yourself or a bit of yourself.

**VOICE 51:** When you're intubated, you have no voice, and people treat you like an infant when you're not able to communicate. And people who've had laryngectomy before they have a voice valve inserted are often completely unable to communicate other than by writing. And it's really common for them to be treated like a child.

**VOICE 52:** We see them relying on writing on bits of paper for months and months on little whiteboards and so many moments of frustration when they misunderstand each other and their wife can't lip read them just right. And having a voice means that it's just effortless and they can focus a bit more on actually what they're saying rather than just getting the message across as well.



**REPEAT:** A laryngectomy patient, when you wake up and you've lost your larynx, the only way you can communicate is with a piece of pen. A pen and a piece of paper, and that's it. You are lost. You are trapped in your own little world, you know, what you want to say - but you have to write everything out. And people with the best will in the world will not wait for you to finish writing what you really want to say.

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**VOICE 53:** I feel really passionate about working here, doing the job that I do. I feel really lucky to get to help people going through a horrendous journey. I have hope through the hard times and have hope through those losses and there's help, you know, there's help and support. And we are the ones to help and support to get through it.

**VOICE 54:** Okay. I like that I get to see different people, different cases, occasionally, like repeated, you know, but is fast, is fast paced. And at the end of the day, my patients always tell me, Oh, thank you. You've got nice teeth. Thank you. Thank you. I'm grateful. Have a nice day! Yeah. So I kind of, generally, I've had positive reviews from almost all my patients, so I love my patients. Yeh.

**REPEAT:** Things go really well or, like, really wrong. That's when you really notice, like, what that responsibility is like. So if you've done something that's like completely changed someone's outcome, that's like a nice feeling to have that responsibility and know that yeah, I was able to have a positive impact on this person's journey of life.

**VOICE 55:** I was only very young when I started in theatre and I was terrified. And the doctors were gods. And you used to cry because you were terrified of them. And, and again you was learning a very intense job and then some of the anaesthetists would just tell you to get out, cos didn't know what you were doing. And I used to go and cry when I was young. Then as time gets on, you learn. You learn to speak up and get them to one side and say, "Can I have a word with you, please?" And gradually over the years I gained respect. But it wasn't easy. It was hard. You've to really be established and speak up. When you do speak or you've got to speak up, not being rude. You've got to put your point across. Get them private. Tell them exactly what you think. And I found over the years that it did pay off.

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**REPEAT:** I think that sometimes people either wait until the room is empty or they wait until somebody arrives and then they're ready to die.

**VOICE 56:** So thinking about the thin places that are present both at birth and at death and how they're delicate, they're precious, and we need to be careful with them. But we only get one chance really.

**VOICE 57:** Yeah. So my younger brother, he knew the world and his wife. He just knew everybody. He, he did youth work all of his life and got to know lots of people. And we were told he touched so many people's lives. He came alongside them, he was just so caring and remembered all information about them. Yeah, he was just. He was just out there. Yeah.

**VOICE 58:** Death, basically. It's a daily occurrence here, unfortunately. And you have to strategize how are we going to deal with it. And new starters, for example, they very quickly have to develop a robust means of dealing with it, or you know, they're going to have issues they're going to have problems.

**VOICE 59:** It may seem from the outside that these conversations are unbelievably difficult and sad. But actually, if you are with the patient making a decision that helps them in their last months, then that's, that's a positive thing. And I think if you go into those conversations with that in mind, that actually whatever impact you can have, then it does make them less, less sad and less distressing even if the situation itself is extremely sad.

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**VOICE 60:** Yes, I'm going to be a granddad for the third time. So at the moment we got one of each and my daughter's having one in the next few minutes, like basically.

**VOICE 61:** Tomorrow. Tomorrow. is pay day tomorrow. It's only a day away. It's a hard knock life for us.

**VOICE 62:** Every day is different. It's I'm really busy, but we're really fun team. Everybody gets on and it's really nice. Been such a special, being part of such a special time in a family's life.

*She arrives with the bag she packed a month ago. Kept by the front door.*

**VOICE 63:** I've been here since 6 o'clock last night. We're about to have a baby.

*She's written down her plan.*

**REPEAT:** Tired, exhausted, but happy so.

*I listen.*

**VOICE 64:** Yeah. Babies just need food, love, warmth, and Mum and Dad know how to do that instinctively, and they just need that reassurance.

*I have learned the language of screaming, the high and wild, the furious, the righteousness.*

**VOICE 65:** You're amazing. Don't ever forget it. Just be you. Be positive, Enjoy every day and come find me if you need some help.

*She talks to me, she tells me how she feels, what she needs.*

**VOICE 66:** Husbands. When heavily pregnant ladies come in, their husbands dump them at the door because they're more interested in parking the cars. So we have to deal with the wife and then tell the husband where the wife is afterwards.

**REPEAT:** I'm not the fittest but I have a go like, do you know what I mean like, holidays and things like that, swimming. I like all that sort of thing with the kids, so.

*There are so many voices here, fighting to be heard above the noise.*

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**VOICE 67:** When I had my operation last year the nursing staff were brilliant. The doctors were brilliant. Never had any issues.

*I work with numbers, lists and data. New referrals, long term waiters, sizing up the cost of a defibrillator. Nobody told me, nobody said that the 6cs would include a calculator.*

**VOICE 68:** So I did six years working in my previous role. I was a healthcare Band 2, so we had 27 beds and although I really loved my job and I gave it my all, I

found it quite challenging and demanding. It was very hard and there'd be like two or three mainly two sometimes health care assistants for twenty seven patients and a lot of them were bedbound. So, by the time you started at one end of the ward you're back again. So you was on like a wheel type of thing. You were just going round and round and round and yeah, If I felt really honest. It took his toll a little bit and I made that decision to leave. But I care, you know, I'm there for them, I always gave them my best.

*The numbers keep rising and when I go to bed at night, it's the numbers that are running and turning and jumping in my mind.*

**VOICE 69:** As a manager, you do have your own frustrations, but you just you tend not to voice them because you're trying to support the system and your job is that continuation of that system.

*I know I am one of many in this great army of ants. I make myself heard with the language of hard fact.*

**VOICE 70:** You've got to trust the numbers that you see, instead of it being sort of that warm feeling when you see someone getting up and walking or you get someone up and moving, there are roles where you can get too detached, and that's actually the risk, you've got to make sure that you're still thinking about the patients.

*With these spreadsheets I am banging my only tiny drum. With these numbers I am shouting.*

**VOICE 71:** You go on the NHS site, you look for jobs, you find supply chain, and then you go for the interview process, they get back to you, if you're successful, and then yeah, you've got the job. It's not bad, no complaints. Everyone in the building, nurses, my team, everyone's cool, haven't had any problems, so yeah, so far it's been good.

*Sometimes I want to give up. Before I fall apart.*

**REPEAT:** We're a bit short on rotas, and then, there's more pressure on the staff, and then it's a slightly worse place to work, and they take that home, see the adverts for Australia and disappear over there, and then the cycle repeats.

*But I know that every number is a frightened beating heart.*

**REPEAT:** Me and my team, and all of us are going through a cost of living crisis – and many of our team members are struggling financially, so this morning I was sitting with a nurse who said he’s travelling almost two hours to get here, so I’m sure a significant proportion of his salary is spent on transportation, he’s taking national rail coming here, so these are the huge sacrifices the people around me are making, the health care delivery in London possible and they’re sharing the burden.

**REPEAT:** If I didn’t do bank I would just about pay the bills but it would be, you know I wouldn’t have anything extra.

**REPEAT:** It’s a really tough time in the NHS at the minute. We’ve got the junior strikes, we’ve got the consultant strike coming and this’ll be our first experience of a five day strike. So yeah, we’re worried for our patients, aren’t we? making sure that there’s a safe level of care for them.

*A vulnerable body that’s crying out for care. I’m in service to these numbers, to fresh objectives and new drives, because that’s where the joy is hiding – in the kaleidoscope of these lives.*

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**VOICE 72:** When I came in here I was a bit apprehensive. And then I thought. They’re so gentle, kind and they don’t boss you about, they just sit down and explain what they’re doing, which is the main thing, so they know what you’re doing and it’s going to do you, that’s me, a lot of good eventually, and I think, I appreciate that.

*I listen*

**REPEAT:** When we work in critical care, it’s a battle between life and death, you get the person in the most difficult time in their life, battling between life and death and then the most of the time, majority of the time, we manage to save that person and bring that person back to the family,

*She’s at the centre of this new universe.*

**REPEAT:** And you’re bringing that smile and happiness, that’s a very privileged position to be in there, as a nurse, like presenting your patient back to their family and back to the community and bring tears to a lot of people.

*Until silence and then a cry.*

**VOICE 73:** Today is prom day. So, my twin god daughters are going. They both got the dresses. One's going in her Vans, the other is going in her Doc Martin's. And my youngest son gets married next week. I am not in work mode at all. I am in party mode, so Friday cannot come fast enough for me this week. Loving it.

**REPEAT:** There's been years of saying "clap for you because you work for the NHS" and you're heroes and things, but it's not, it's no different, people come here to do a job, get paid, they want a good place to work.

*Best job I ever had, easy. I take a person from one place to another. One appointment to the next. Easy.*

**VOICE 74:** The rapport that we gain with them is so strong, so quickly. So, you can know someone half an hour and before you know it, you acting like really good friends. You know their fears about everything they're coming to, and the bond is really strong.

**VOICE 75:** The good thing about the NHS is a lot of people come here to work as a stepping stone, but end up staying for the people. And, doing what we can to make the experience a lot better.

**VOICE 76:** We serve like a basic lunch, breakfast and evening also, but we start like whole day serving the customers, so we are always exhausted ok.

**REPEAT:** Every day You just need to always remember that we're not going to be here for long and just make the most of, you know, what you can, what you have at the moment because you never know when it ends. Yeah.

**VOICE 77:** My voice is really important to me because I love to sing and um it's incredibly important. I think everyone's voice is important to them.

**VOICE 78:** The singing just helps me feel more free, um it helps with the breathing, feeling more upright. I enjoy singing hymns in church on a Sunday. And then the other opportunity is this class for people with Parkinson's, which where we do lots of different voice exercises. EEEEE. AHHHH, and lots of different things.

*There are so many voices here, fighting to be heard above the noise.*

**VOICE 79:** Well if I sing, it will rain! So well, I'm not good in singing, but I think I could do some sentence or something.

*Voices that float above your head.*

**VOICE 80:** La la la la la bamba.

**VOICE 81:** So, it all sort of started on Saturday. Well, last week when we ended up in urgent care, and I think because it was a child with some sort of head trauma, it was pretty instant, straight in and they were so lovely and the nurse was so good and we got seen instantly, and everybody has been absolutely wonderful - haven't they?

*Voices that tell you the truth, voices that protect you from it. Voices who explain.*

**REPEAT:** It varies from day to day. If you've had a good day, then you can go home. and think about the cases that you saw and that you think you managed well. All the things that you thought that were interesting, all the things that you saw for the first time, all the things that you've got to do for the first time. Equally, if you feel like you made a mistake, then you'll go home and you think about that for a while.

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**REPEAT:** I always get excited in the presence of people. I love people. So, I wasn't always destined to be a nurse, but I want to be with people on their most difficult time, that's when I felt people needed me, so I chose nursing because nursing gave me an opportunity to be with people when they most needed me.

*Voices who call you darling, my love, they say do this for me, sit up for me, they tell a joke, they say you're getting there. You're getting there.*

**REPEAT:** We do have days when you come out of clinic and you think - I could dip my brain in a bucket of dettol for what I've just heard, you know, of what somebody's been through. And people can be quite disparaging about functional neurological disorders, you know that the patient is judged, that they're elaborating their symptoms, that they're putting it on, that there's

nothing wrong with them, all that kind of thing, and then when you hear what they've been through, it's quite horrific.

**VOICE 82:** When I started nursing, there was someone, I used to say oh "I am a nurse" and then someone told me, don't ever say that, say "you work as a nurse" there's so many parts that compose your persona, you're not just a nurse, you're not just a dancer or a composer, so I guess that's something that I have very present in me, yes, I work as a critical care nurse, that's part of my life allocated this many hours. I feel like all the different components of me they reenergise each other and they make sense in certain aspects of my life.

*Voices from every ward, , in every bed, they speak of pain and of hope.*

**VOICE 83:** Next year I will be 60 -and I'm going to retire, by the grace of god. And I will come back again as part time maybe one day or two days, that's my plan. I don't want to sit down at home.

*I work with numbers, lists and data, new referrals, long term waiters, sizing up the cost of a defibrillator. Nobody told me, nobody said that the 6Cs would include a calculator.*

**VOICE 84:** There really are a number of people that as soon as we see their faces, even if we don't remember their names yet, we know who they are, we don't have to ask them again the same questions that we have to ask over and over again, because we know that at some point we asked that question and it made them cry, we asked that question and it made them uncomfortable so, being in the line of work where we get to meet all of them before they have the surgery or even after they come back for a follow up, they would see us and we would remember them in even years. I remember like after three years I've seen a patient again and I still know them, and I'm happy to see them better than they were here, and it's really nice.

**VOICE 85:** My first placement was on a care of the elderly ward, which we all know is probably one of the heaviest places to work - and I, the smells the sounds, everything was completely overwhelming, and I remember thinking "If I can get through an 8 week placement here, I think I'll be fine for the rest of the course". And that's exactly what happened. You're sort of born to be in a role like this for sure.



**REPEAT:** After Covid, I've gone back to dancing, so mainly I do hip hop and commercial. They've been asking me to kind of lead a class here, for the well being team actually asked me to do it, but I'm not sure if I could meet people's expectations for that.

**VOICE 86:** What I said to her was, I'm trying to help you and I'm trying the best that I can. But what you're asking me isn't reasonable, and it isn't my it isn't my job. And I'm not just just not able to help that way. I'm just not able to do you know what you're asking - it's unreasonable.

*Maybe no one's listening. Maybe there's a ceiling on how far my voice can reach.*

**VOICE 87:** What keeps me going through the day is Massimo. Italian stallion. You watch 365 days and you'll know exactly what I mean.

**REPEAT:** I've got a 4 year old daughter, so running home to do bedtime is probably something that daily gives me incentive, and something to look forward to still, so yeah, I think that, and it gives me pride to tell her what I do. Even when we're sort of playing doctors and nurses I go "no, no! Nurse's don't do it like that we do it like this".

**VOICE 88:** Take notice of the guys that is doing it. Basically, we're here to do a really important job. And if we didn't empty the waste bins, the waste bins would soon be overflowing and then you'd definitely notice. These guys appear invisible work in the background, but we'd be absolutely lost without them.

**REPEAT:** A cracking set of lads, who, they're the quiet lads in the background. You never see them, really. And it's not a glamorous job. We say to people, do you want to go on the waste, want to go and empty bins? "No, I'm not doing that" But, it's great. And they're left, they're left to their own devices, they're left to work alone. And they work well as a team. And you'll never see them slacking. They probably walk about 30,000 steps in a day as well - so they're pretty fit lads like, as well like, you know what I mean? But you wouldn't look that from the size of them! Know what I mean?

*They always ask, the same question - 'How many miles have you walked today?' And I always have the same answer, 'too many to count!'*

**VOICE 89:** Actually, the whole family were like, You have to go back to nursing. Yes, you must. You must do nursing. You must like it. So I was like, Why? They said, No, we know. Like, you know, when they know you, like they know your own, what's the word? You know, potential. But you don't know. Yeah. So they were like, We know you can do nursing. We were always encouraged. Even when I got when I was in school, it was kind of difficult for me because it's been a long, long time, you know, So I have to, like, go back to school thoughts. And most of my classmates were like, younger. And I'm like, I'm you're auntie like, what am I doing here?

**VOICE 90:** We learn every day. Medical practice changes every day. So, we learn every day. We keep updated with our knowledge and the new what is new in the world so that we can keep our patients safe.

**VOICE 91:** So as nurses, we live this job. We don't just come in through the door and come to work. This is our life.

*She talks to me, she tells me how she feels, what she needs. I listen.*

**REPEAT:** You have to have nerves of steel really, and not take it personally, that's the difficult thing because nurse's are very sensitive, and you think, "Oh, why don't they like me?" You know, they'll come and tell you, "You're fat and wearing a wig and you're.." And it's all defensive stuff, and it's very difficult not to take it personally, - but that's the big thing really.

*And I don't say that I can tell when small talk will be too much to bear.*

**VOICE 92:** One lovely patient who passed away, it took me a long time, and his wife, and all his family come here, and they do our decorations every Christmas, and it's just lovely. I'm not talking cheap trinkets, these are proper big baubles and we haven't paid for it. The family come in, hang them up, take them away. So, we make long bonds like that.

*And I don't tell them that when they go, when they pass, I carry them onwards.*

**VOICE 93:** There are a lot of people going through a lot of other things that are a lot more important than your nine to five, and taking it home, and working late. It's little things like spending time with your family, and just saying "I love you" or little things like that. Without getting teary eyed. BLEURGH. Setting up the blog is sort of a way of educating people, because when you don't have cancer or you

don't know someone with cancer, it's very distant and you don't know anything about it, but then when you get it everyone's got it - and it's very present in everyday life, you're just not aware of it. Or you choose not to be. Yeah. It's interesting.

**REPEAT:** It takes extra effort, extraordinary extra efforts to access healthcare, that's not right. And there's not enough people around to support women to achieve health and wellbeing that they need. People normalise women's pain, and it's not right.

*She is speaking to me from the part of her that's still animal, from the place before time, I listen.*

**VOICE 94:** When I first joined, I joined with the team, was fully, full of men and they hadn't had a young female engineer part of the team before. It's definitely been a bit of a generational divide because there are a lot of the people I work with are probably like, my parents age. So, I sort of just kind of say, you know, like times are a bit different now, like it's a different approach to things and you kind of have to be a bit more open and not everything is so black and white in certain situations.

**REPEAT:** Actually being male in a profession in which the majority of practitioners are female helped me to better myself actually, because I then got a chance and an opportunity to understand what women are going through every single day - the kind of discrimination, the struggles they get, even travelling to work, going back home from work, it's not always easy as like you know, I get that privilege, I don't need to think about anything when I travel, I just like wake up, and I just get on the train, but it's not the same for women. I mean it's not women's fault, it's society's fault, so I'm more and more aware of my privilege and what I could do to support like you know sometimes when you and your senior female colleague go in scrubs with the same uniform and go and speak to a family or a visiting team, then suddenly like you know, they will turn to me as a male person, and my senior female colleague standing next, she probably has more information, more opinion and better experience than me, could contribute better, but like you know, suddenly I become the centre of attraction for no reason. So, I recognise that as a very junior person, I feel I need to intervene early enough you know when people turn to me and start talking to me, just point towards "that's the consultant" or "this is the charge nurse," I'm the staff nurse here.

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**VOICE 95:** So if anything it can be a little bit upsetting because you've done as much training to possibly can do with a nurse to better yourself; extra reading, extra workshops, everything you can possibly do to better yourself and patients still say that they want to see a doctor. There's advance clinical practitioners, they still want to see that doctor's uniform.

**VOICE 96:** It doesn't matter who you are, whether you're a receptionist like me, whether you're a cleaner, a porter, a consultant. If everyone just did their little bit, just their little part, everything just falls together, especially for the patients.

*I know I am one of many in this great army of ants. I make myself heard with language...*

**VOICE 97:** If there's a reaction or a crash, I have to make sure I'm the first one on the scene and the doctors are called. You can panic sometimes it depends on their reaction, so if it's a bad one and the airways constricted, it can be quite scary, especially if the family is also there—so you have to deal with their family, try to calm them down and at the same time try to assess the situation.

*There are so many voices here, fighting to be heard above the noise.*

**REPEAT:** So I was trained in the Philippines 1994, so I came in this country 2003. All different of course, it's like a culture shock for me. I have to adjust, even the words that I'm using the, even the, you know how we address children here, we have to adjust, so the culture and everything. It's a little bit shocking, but I did manage.

*In the kaleidoscope of these lives.*

**REPEAT:** I'm just happy because I started from the bottom – so I know from the bottom going to the top. Yeah so, I'm happy. I will not be reaching this stage without my team. So. Happy. Yes.

**VOICE 98:** I had the most amazing grandmother who was the kindest person I've ever met, still today, she's sadly no longer with us, and she always told me I would be a nurse.

**VOICE 99:** I was a lousy accountant - so my dad at a young age took me to work in his office and by five o'clock I was wondering why my page of the boat ledger was standing upright - there was so much Tippex on it. So then I looked and thinking well, accountancy's not a career for me, so there was a job vacant that said Dental Nurse, applied and here I am. I'm NHS from a long time. I love my NHS. It's a long time. They haven't killed me yet. I must be doing something right!

**VOICE 100:** I sort of always knew I wanted to be a dentist. When I was a dental student and we would have our oral surgery sessions, I think for some reason I decided that day it was a good idea not to have lunch, and we had decided to go for our first extractions, and then yeah, I went to take out the tooth and I just, didn't make it, I hit the floor. And now here we are, I'm doing it every day, standing upright.