

Speaker Biography

Sue Eskins

NAHH Trustee

36 years ago as a nervous teenager I travelled from North Wales to Guy's Hospital in London to begin my nurse training. Little did I know that Nursing would become my passion and I would meet incredible people along the way.

As a qualified Nurse I consolidated my training by working in medical and surgical environments at Guy's, learning key skills which I still use today. I went on to do Intensive Care at the Royal London Whitechapel before heading off to Australia for 2 yrs. Here I travelled and worked. A mixture of agency nursing on the wards and ICU. Importantly I met my late husband, Jon.

On return to the UK I wanted to combine my career with a more family friendly work pattern. This led me to District Nursing, a comparison with ICU as you are caring for the whole family and meeting individual needs. I was pleased to be caring for people in their homes and matching their needs to individual care. I had 10 happy years in Bristol before moving to Wiltshire in 1999. During this time I had extended my qualifications to a Bsc in Community Health. My Community Nursing career continued, my children grew and I was able to complete the Practice Educator award in order to share my experience and influence the next generation of Community Nurses. During this training I was involved in supporting the Health Care Assistants to extend their skills in basic venepuncture, wound care and nursing skills.



In 2007 I became a Palliative Care Nurse Specialist at Dorothy House Hospice. I was able to draw on all my community skills and expertise to ensure patients and their families received the best end of life care in a place of their choosing. I have gone on to manage the community teams and have overseen the opening of the Outreach Centres in 2014. This has taken hospice care to another level by reaching out to the community in their communities. Community engagement and collaboration is becoming vital to support networks and I am proud to have been involved in networking in the DH area e.g. the Polish community, people who are homeless, networking with voluntary groups, earlier referral, extension of skills for non-qualified staff, outpatient clinics and multi-disciplinary working are all helping to ensure patients receive the best care. Currently I am Clinical Lead supporting the community teams including H@H and the Co-ordination Centre.

My heart is very much in community care and I am delighted to be appointed a Trustee for NAHH where I hope I can share my experiences but importantly listen to your views and experiences. I look forward to working with you to ensure that in these challenging times we maintain our high standards and patients continue to have a choice at the end of life. H@H services are vital for allowing patients and families to cope at home and achieve a good death.

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