

plains of the ward being stuffy, when all the time they are breathing in noxious vapours from the sick around them, and are slowly undermining their own health and the efficiency of their work.

Besides sleep, fresh air, and exercise, food is another most important item in the night nurse's well-being.

Regulations differ slightly in hospitals about the hours for meals, but all are agreed on the point that no nurse should ever go on duty fasting, or with a cup of tea only. Yet is it to be wondered at that so many nurses on night duty complain of indigestion, when they have formed the habit of eating sweets, fruit and various indigestible things until a late hour in the afternoon? when they rise so late after being called that they have little or no time to partake of the breakfast provided for them? when they nibble at biscuits and sweets in the ward during the night, and drink tea just before going to bed in the morning? Naturally, they cannot eat the plain, wholesome food that is ready for them at regular hours under such conditions. They fall back on tea, tea, and always tea. They are in a fair way to become chronic dyspeptics.

Breakfast before going on duty; a cup of freshly-made tea with a bit of toast about midnight; hot coffee or milk and something more substantial between 3 and 5 a.m.; dinner when provided; and hot milk, with a light repast about noon, ought to be quite sufficient for anyone. Food should not be taken in the wards, if possible, and *never* without washing one's hands. Tea should not be constantly resorted to in order to relieve the sinking, empty feeling that one often gets on night duty. A little hot milk, or something to eat, is much better.

There is also one more point about this right living, on which good work so largely depends, and this is in the matter of occupation in one's off-duty time.

There are opportunities of social intercourse, as all are free at the same time, which only exist for night nurses in a hospital, and which may be used to form helpful and pleasant, life-long friendships, or which may degenerate into idle and mischievous gossip about everyone's business in the place. Sometimes two nurses on night duty will become so friendly that they can hardly speak to anyone else. They will only go out with one another, and make the others feel quite uncomfortable if they come into the room where they are.

Friendship is a good thing, but it is a pity to ignore everyone else. To be too exclusive is to debar oneself from much that is pleasant in hospital life. Also, sometimes, a too violent friendship ends in an equally violent quarrel, and then the two become the laughing-stock of the rest on account of their fickleness.

Again, it must be remembered that, where people

are more closely associated, opportunities of friction are greater; and then touchiness and irritability spoil the record of a night nurse who on day duty gives way to none of these things. A willingness to oblige, and to bear and forbear, is very necessary on night duty. At all times, good temper is a delicate plant that needs care and much watering with patience and courtesy to bring it to perfection.

There are opportunities on night duty for all sorts of pleasant little excursions, as well as for music, reading, study, or needlework. It is a pity to get into the way of doing nothing when off duty except to lounge about and read novels. And even when on duty there occur quiet intervals in every ward when there is no actual work to be done for the patients, and the nurse can sit down to write a letter or do a little needlework of her own. Such occupation, however, needs to be held very lightly, for I have seen a nurse become so absorbed in a bit of fancy work as to be quite unwilling to put it down if a patient called her, and to look upon it as a grievance if she should get no time for her favourite employment during the night!

If a nurse is attending lectures, and is really fond of study, she may sometimes find time to write out her notes when on duty, and so to work as to fit herself for a higher position in the nursing world when she shall be certificated.

Why, indeed, should a nurse, just because she is on night duty, become slack and slovenly, both mentally and physically? Yet some seem to think that the bare fact of their doing night work excuses them if they are constantly unpunctual at meals or in going to bed. They do not keep their uniform neat and spruce, but wear a general appearance of neglect. The life is doubtless harder in some ways and more exacting; but it has its compensations, and it is for the nurse to prevent herself from degenerating whilst engaged in it.

A nurse, then, who attends to all these points of right living is in a position to do her very best for her patients, and to profit thoroughly by the experience she will get on night duty.

(To be continued.)

Irish Unanimity on Registration.

One phase of the Registration movement which gives ground for unqualified satisfaction is the unanimity with which Irish Matrons and nurses are supporting it, and the enthusiasm and vigour which they are putting into the campaign. Had English Matrons shown the same public spirit as unanimously, the Nurses' Registration Act might by this time have been in operation. We hope that in this matter all the three kingdoms will act conjointly. At the same time, Irish nurses are not likely to be dominated by the Central Hospital Council for London. Will Ireland get a Registration Act first, after all?

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