

The following comments made by *Truth* on the subject of hospital orderlies will appear apt to most trained nurses:—

"The South African Hospitals Commission made some severe reflections upon the R.A.M.C. hospital orderlies. I suppose one must take it that there was ground in some cases for unfavourable remark, but I doubt very much whether it will ever be possible to get a satisfactory class of men on the present terms. An Army Medical correspondent calls attention to the following points as showing the difficulty of obtaining competent and trustworthy nurses under the present system. 1. No recruit can be taken over 65 in. in height without special permission from the War Office—an idiotic regulation devoid of all foundation in reason. Except on the basis of height, little or no discrimination is exercised in the selection of recruits, and no attempt is made to get rid of men who evince no aptitude for their work so long as they commit no breach of military discipline. 2. The R.A.M.C. private, however efficient and experienced he may be, can never earn more than 1s. 10d. per diem, an absolutely inadequate rate when compared with the pay earned by competent nurses in civil life, or even with that of skilled men in other branches of the army, e.g., in the Royal Engineers, where a skilled artisan may earn as much as 3s. a day. It will be seen from an article in this issue of *Truth* that the War Office is actually paying at the present time 5s. a day, in addition to army rations, to civilian nurses. 3. No proper nursing uniform is issued or recognised, the ordinary blue serge being quite unfit for hospital purposes. A man is only given two shirts, one to be worn while the other is at the wash. Such arrangements are not calculated to foster a high standard of personal cleanliness. 4. The men are habitually over-worked, and no proper distinction is drawn between day and night work, as it is in every well-regulated hospital. There is not one of these points on which reform is not necessary if our army hospital service is ever to be brought up to a proper standard of efficiency."

We are also glad to see that our contemporary is still calling attention to the action of the medical branch of the War Office in obtaining its civilian male nurses for military hospitals "through an agency, which utilizes the monopoly conferred upon it by the War Office, in order to sweat the men of a substantial portion of their earnings." It is a matter which should, undoubtedly, form subject for enquiry when the question of Army Nursing Re-organisation is considered.

If the suggestion made by the Matrons' Council to the War Office were adopted, and orderlies received systematic training for three years in the wards of military hospitals, and were certificated after examination, we should soon have a reserve of properly qualified male nurses, who would be invaluable in time of war, while they would be most useful members of the community as private nurses in time of peace. At present we have the anomaly of a plethora of so-

called male nurses, while there is not one general hospital in the country where they can at present obtain the necessary training.

The Dublin Nurses' Club are to be congratulated on the successful organization of a very interesting and instructive series of lectures, which have been largely attended by the members. A recent lecture on "Inflammation and Suppuration" was given by R. C. Maunsell, Esq., M.D., Surgeon to Mercer's Hospital. It was illustrated by excellent diagrams and was greatly appreciated by the members of the Club.

Much regret has been felt locally at the resignation of Miss Baxter (the Matron) and the nursing staff at the Women and Children's Hospital, Cork. Not only the efficiency of the nursing department but the building in which their work is carried on, is due to Miss Baxter's energy, and there is a strong feeling that an effort should be made to retain her valuable services. The vacancy has, however, now been filled by the appointment of a religious sister.

"An Old Nurse" brings vividly before the mind's eye medical and nursing work in the tropics in this month's *Central Africa*—

During my journey to Zanzibar (she writes), in November, 1898, I tried to extract from Archdeacon Johnson some description of Likoma Hospital, hoping that eventually I might find myself settled there at work. My endeavours met with meagre success. "It is a nice quiet place," he said, "I like to be there when I am ill." I learned also that it was made of stones, and that the walls were painted *black* inside! It was not till nearly a year later that I actually beheld it. I had been about five months at Kota Kota when I was summoned to Likoma to look after the medical work while the Bishop and the doctor went away to Unangu. It sounds rather absurd that a nurse should have to replace two graduates of medicine, but there was nothing else to be done, and therefore no more to be said. I arrived a few days before their departure, and my first morning was spent in learning the geography of the dispensary and in making the acquaintance of the out-patients. These dear people evidently shared my opinion as to the futility of a nurse in the place of a doctor, and bullied me horribly for the first few days, though I am glad to say that we afterwards became excellent friends.

That same afternoon two members of the staff did not appear to tea, and I, scenting fever as a war-horse does battle, betook myself for the first time to the hospital. I climbed the hill quickly (N.B.—If you are called upon to build a hospital in the tropics never build it on a hill unless the nurses' quarters are at the same height) and demanded admittance. At that time the entrance was through a lobby, or sort of wide verandah, in which at first sight all the accumulated lumber of the station appeared to have been deposited. My heart sank, but I pressed on, and boldly entered the door leading into the hospital proper, and found

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