

Nursing - 1957

By
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(nee Nicholson)

My nursing training began in the Kingaroy General Hospital on the 18th. March, 1957. The hospital was large and narrow, curved and double-storeyed. The brick building extended to General Nursing Wards, an Outpatients Department, and a Maternity Wing.

Top floor consisted of Private, Semi-Private, Male, Female and Children's Surgical Wards, Isolation Ward, Operating Theatre, Sister's Office, and Tea Room - plus the top floor of the Maternity Wing. On Ground floor there was the Male Medical Ward, Outpatients Department, Pharmacy, X-ray, Film Developing Room, General Office and Switchboard, Casualty, Kitchen, Dining Room and Sewing Room - plus the corresponding ground floor of the Maternity Wing.

Matron A E Farr managed the hospital. She was responsible for the nursing staff and gave most of the lectures. My class included Loris Dascombe, Esme Kennett, Rita Schulz, Marie McGill, and Doreen Welch.

Some of the Rules and Regulations for nursing staff:

Requirements for nurses entering the profession (from original list): 2 brown cardigans, 2 pair broad fitting shoes, 1 pair plain brown crepe soled shoes, watch with second hand, torch, shoe bag, laundry bag, cup and saucer for private use, 2 material covers - 18" x 18" - for duchess, 2 material covers - 24" x 16" - for locker, padlock and key, raincoat and umbrella, serviette ring, white underclothing for duty (if you wear a half slip, you must wear a vest). Do not bring unnecessary possessions into your room.

Uniforms were made of white sheeting in a coat frock style, with collar, double yolk back and front, two box pleats in the back bodice and a four gored skirt. These were heavily starched. A belt 1½" wide made in the same material was worn. Hems had to be 3" wide and the length of the uniform from the floor had to be 12" when finished.

White caps made of madaplam were worn and all hair tucked underneath. After passing final examinations a butterfly veil (a veil tied in at the nape of the neck) was worn.

Fingernails were cut short and unpainted. No jewellery was permitted to be worn while on duty.

The matron compiled a daily roster which allocated each nurse to a particular ward and special duties. In the wards, senior nurses taught juniors. Sisters and nurses were addressed by their title and surname only. All nurses stood with their hands behind their backs when addressing staff, even if they were only a day senior to themselves.

A weekly roster was also written out by the matron. Day shifts: 6am - 3pm or 6am - 4pm. Evening: 1pm - 9.30pm or 3pm - 9.30pm. Broken: 6am - 9.30am and 4pm - 9.30pm. Night: 9.30pm - 6am.

We worked a 48 hour week, had one day off each week, and attended lectures outside work hours. Wages were from around £4.0.0 (\$8.00) a week. Any overtime worked on the end of a shift was unpaid.

All nursing staff had to be female and unmarried. Nurses in training had to live in the Nurses' Quarters. It was a large double-storeyed brick building comprising an upstairs self-contained flat for the matron; a lounge, kitchen, bathroom and staff rooms in a separate wing for the sisters; and an upstairs and downstairs wing comprising lounge, kitchenette, bathrooms and rooms for nurses.

Any leave had to be requested personally and granted by the matron. Leave consisted of:- Picture - 11pm; Dance - 12mn; Ball - 1am; and Overnight and Home-leave. A book had to be signed when you returned from Picture, Dance or Ball-leave and your signature and presence witnessed by the night sister on duty. Infringement of these 'sign in' times would mean being 'confined to barracks' for a month and leave of any kind would not be granted during that time.

Overnight-leave was only granted if a day shift had been worked and an evening shift was being worked the following day, and you were obliged to say where you intended spending the night. Home-leave had to be spent at your parent's home.

Lights had to be out and every-one in bed by 10.30pm. The night sister did rounds in the Nurses' Quarters and checked to make sure each nurse was in her room. Often, random checks were made later in the night.

The junior night nurse was responsible for going over to the Quarters at 5.30am, waking up the day staff, and taking an early morning tea tray to the matron.

In the dining room nurses were segregated from the sisters, and all were under the ever watchful eye of the matron who dined alone. A buzzer on the wall was rung and our meals were brought to us by one of the kitchen staff. We never entered or left the dining room without first excusing ourselves to matron.

Night duty was worked six weeks at a time. Junior night nurses made cotton balls from large rolls of cotton wool, and dressings were cut from combine rolls. These were packaged along with dressing towels and other surgical items, loaded into a large stainless steel autoclave, and wet and dry steam sterilised for 30 minutes at 250 degrees. As soon as night staff nurses came off duty they had to retire to an old wooden building behind the Nurses Quarters and remain there till 3pm. Kitchen staff would deliver a pre-ordered drink at this time.

The junior day nurse was responsible for soaking, cleaning and polishing with Bon-Ami, all the bedpans and urinals. She also tested the early morning urine specimens. This involved noting the colour, odour, taking the specific gravity and testing the reaction with litmus paper to determine whether the specimen was acid or alkaline. Then various tests for certain ailments were carried out by adding different chemicals to specimens in a test tube. For some tests, specimens had to be boiled over a naked flame.

Day shift nurses were responsible for washing, polishing and sterilising bowls, instruments, syringes and needles which were used in the wards. A steriliser was filled with water and items boiled for at least 10 minutes.

An inventory of bowls, instruments and syringes was carried out every afternoon by the day staff and all items had to be accounted for. If an item was missing no one was allowed to go off duty till it was found. All thermometers had to be accounted for. If a nurse accidentally broke one she had personally to report it to the matron.

Linen and blanket cupboards had to be tidied at the end of each shift. Blankets were folded twice lengthways, then the two ends folded into the centre, then the centre folded.

Beds were made with the bottom sheet right side up, second sheet right side down, then the blankets right side up. All corners were mitred (each sheet and blanket at the end of the bed is folded under the mattress once, then the side edge picked up about 8 inches from the corner and taken up to a right angle, the resulting triangular piece of sheet or blanket below the mattress line is then tucked underneath the mattress). Quilts were removed in the evening, folded neatly and placed at the foot of the bed.

In Outpatients nurses developed X-rays.

After four years of practical and theoretical training in General, Medical and Surgical Nursing, Invalid Cookery, Theatre, Outpatients, Casualty and a six week stint in the Maternity Section, we graduated as Registered Nurses on the 31st. May, 1961.



Jessie Nicholson being presented with her Registered Nurses Certificate by Dr. Winterbotham at the Graduation Ceremony, Kingaroy Hospital 1961.

