

RANDOM HOUSE  BOOKS



Yes Sister, No Sister

Jennifer Craig

Yes Sister, No Sister

My Life as
a Trainee Nurse
in 1950s Yorkshire

JENNIFER CRAIG



EBURY
PRESS

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This book is dedicated to Registered Nurses everywhere

This book is a work of non-fiction based on the life, experiences and recollections of the author. In most cases names of people have been changed to protect their privacy. However, it is impossible to conceal that the author's matrons were Kathleen Raven and Grace Watts, and that her tutors were Mrs. B.M. Morley, Miss A.H.K. Bird and Miss Amy Squibbs.



In my outdoor uniform, February 1953. Cotton dress, starched cap, purple-lined woollen cloak – to be worn in all weathers.

Preface

THIS STORY IS based on my experience of training as a nurse at Leeds General Infirmary between 1951 and 1956 and of subsequently working there as a staff nurse, a night sister and a ward sister.

The events I have described are true. I have tried to give an accurate picture of the nursing procedures we followed at that time before they are lost to history. The pantomimes, surgeon's behaviour, housemen's antics and patients are, I hope, faithfully portrayed. The dialogue is, of course, fictitious. I have tried to capture the way people talked rather than give verbatim records.

To all nurses and doctors who worked at the hospital during the 1950s: I hope you enjoy this account and accept it in the spirit in which it is offered – as a memorial to times we shall never see again. We were great, weren't we?

To all nurses and doctors of today: I hope you read this with interest as you discover some of your historical precedents. I trust your work is as interesting for you as it was for us and I hope you are having as much fun as we had.

To the general reader: I may have given away a few trade secrets of what went on behind the starched uniforms, but only to reveal the essential humour and humanity of a great Yorkshire hospital. You have to remember that the majority of doctors and nurses, who essentially ran the hospital, were under thirty. If their youthful shenanigans shock you, I assure you that their patients always, yes, always, came first.

Chapter 1

A NURSE AT LAST! I see myself comforting those in pain; soothing fevered brows; saying, ‘There, there, I will make you feel better’; carefully changing dressings and efficiently plumping pillows so that the patient lies back with a sigh of gratitude.

Requirements:

- three pairs of black stockings
- one pair of flat, black serviceable shoes
- a selection of safety pins and studs
- a packet of white kirby grips
- two plain silver tiepins
- one pocket watch with a second hand
- one pair regulation nurses’ scissors
- five pounds, ten shillings and sixpence for text books
- six exercise books, pens and pencils
- two draw-string laundry bags clearly marked with name

A uniform, piled on my bed, consists of a short-sleeved, purple- and white-check cotton dress with pockets every-where. As well as waist pockets it has breast pockets, plus slots for holding pens and scissors. A separate rigid, round white collar is held on the dress with a safety pin and fastens with a stud at the front. The starched apron has a bib held up by tiepins and a waistband that also fastens with studs. Black stockings and shoes complete the outfit. Stocking seams have to be straight. I twist and turn to check before attaching them to my suspender belt.

I admire the reflection of a nurse in the mirror. Can this be me? I wish I was tall, slender and glamorous, like the images of young women presented to me in *Woman’s Own*, but I am not. I look more at home in hiking boots and a rucksack than in a little black dress and pearls. ‘She’s a sturdy lass’ is how I am described.

I straighten my back, turn from side to side and pirouette. ‘Look at me,’ I want to shout to the world. ‘Look at me. I’m a nurse.’ I re-read my letter of acceptance:

Dear Miss Ross,

The Board of Governors of the Leeds General Infirmary is pleased to inform you that you have been accepted as a student nurse in their three year programme leading to State Registration. Please report to 47–49 Hyde Terrace on December 3, 1952 in the afternoon. The uniform you were measured for will be in your room; please put it on when you arrive.

My long, navy woollen cloak with a purple lining has purple straps that cross at the front and fasten

at the back. In it I look exactly like the war posters declaring 'Your Country Needs You', which show a nurse in such a cloak. No cap yet. Two oblongs of white cloth, the size of a nappy, starched to the consistency of plywood, lie there on the bed. The mysteries of their construction are yet to be revealed.

A chain fastens my brand-new pocket watch into one of my breast pockets and I stick the scissors and a pen in the other. Wearing a short-sleeved cotton dress in winter in an unheated room is like wearing a bathing costume in a windy bus station. Even the cloak does not keep me warm. I put on my cardigan, pick up one white, starched oblong, safety pins and kirby grips and go down the three flights of stairs to the main floor.

The living room holds a group of girls dressed like me, who huddle around a small coal fire in a large hearth. We sit or stand, looking uncomfortable, not knowing what to say. A girl, who would seem more at home in jodhpurs and a riding hat than she does in her uniform, sits alone on a sofa. She has an aquiline nose, which makes her seem sophisticated, and permanently raised eyebrows that give her a surprised, questioning look. I plonk myself next to her.

'This is as absurd as I thought it was going to be,' she says. 'Imagine dressing like this in winter or in summer for that matter. This collar is already chafing my neck.' She runs a finger around her collar. 'What's your name? I'm Judith Horsfall.'

'Jennifer Ross. Where are you from?'

'A little village called Haxby, not far from York. How about you?'

'My parents live in Bombay and I have just come back from there so I can train here. I wanted to go to London but I have relatives here and my mother wanted me to be near her sisters so they can keep an eye on me.' I had had quite a battle with my mother over where I would train. I had lost.

My father was in the army in Burma during the war and away from England for five years. We live in Leeds. When he returned, a complete stranger to my brother and me, he could not settle in Britain. After a stint in the occupation forces he took a job in India running a service department for a major car sales firm.

'What were you doing before this?' I ask Judith.

'I did orthopaedic training for a year because you can start when you are 17 and I didn't know what else to do when I left school. How exciting being in India! What did you do? Did you go to school there?'

'No, I went to Leeds Girls High School and, after School Certificate, I had to wait two years to get into training. So I lived with my parents. They wanted to send me to a finishing school in the Himalayas but when I saw that you had to wear combinations, those all-in-one underwear with a flap for your bottom, I refused absolutely. So I just swam all day for two years, waiting until I was old enough to start training.'

'You might get awfully homesick with your Mum away. You'll have to come home with me sometimes. That is, if you can put up with my stupid brother!'

I smile at Judith. She must like me if she asks me home so quickly. 'I'd love to. But I don't think I'll get homesick. I've been waiting for this moment for two whole years. What was orthopaedic training like?'

Before Judith can answer there is a stir at the door as a large woman in a blue, long-sleeved dress with a mass of frilled starch on her head, walks in. She takes a commanding spot near the fire. A

image of my head-mistress at school comes to mind, along with an old feeling that my bowels are dissolving.

She surveys us for a moment before announcing, 'I'm Sister Thornton, one of the Home Sisters. Although I will not be living here, I shall be supervising you.' She catches sight of me and stops talking. 'What is your name?' she asks, staring at me.

'Jennifer Ross.'

'Jennifer Ross, *Sister*. Well, Nurse Ross, you are dressed in the uniform of a nurse from the Leech General Infirmary. Such a uniform is not worn with a cardigan. Take it off at once.'

'Yes Sister.' I can feel my face turn red.

'Nor, by the way, is any jewellery or make-up allowed

when you are in uniform. Now, as I was saying, I am not resident here so one of you must assume responsibility for the behaviour of the group. Who is the eldest?'

She looks around. No one says anything. 'How old are you?' she asks the girl on her right. 'Come round and state your age.'

Among the eighteens and nineteens there is suddenly a twenty-seven. We all turn to stare at the elder among us. She is a lively looking girl with freckles and brown eyes with a hint of mischief in them.

'Is there anyone older than twenty-seven?' Silence. 'What is your name?' Sister asks the oldest nurse.

'Sheila Dawson.'

'Sheila Dawson, *Sister*.' She speaks sharply. 'Well, Nurse Dawson, I am putting you in charge. I will explain what you all have to do and Nurse Dawson will see that you do it.' Sheila seems as if she is having trouble keeping a straight face.

'As you know, Roundhay Hall is where you will be going through Preliminary Training School and you will be going there each day by bus.'

She pauses to stare first at one girl and then at another. I am not sure whether we are meant to meet her eyes or whether we are to lower ours in submission.

'Eventually, the PTS will sleep there but the rooms are not ready yet. You will get dinner there each day but you will have breakfast and supper at the Infirmary.' She stands to attention with her hands in front of her like a fig leaf. 'You will walk to the Infirmary each morning leaving here at 7am, have breakfast and then be in the bus by 8am so you will be ready to start classes at 8.30am. The bus will take you back to the Infirmary for supper at 6pm. Then you will walk back here.'

Sister Thornton allows herself to assume an 'at ease' position with her hands behind her back, but the change does little to dispel my growing discomfort. 'As you walk through the streets in uniform you must behave with decorum as befits a LGI nurse. You will walk in pairs, keep together and talk in subdued tones. There is to be no laughter. Is that understood?'

'Yes Sister,' we chorus.

'We're in the army now,' Judith sings under her breath.

'The reasons you chose nursing are many and varied but what you must understand is that we require girls with dedication and strength of character and who can obey orders. Mistakes can cause the death of a patient.' Sister Thornton looks around at our upturned faces and sighs. 'Most of you will

prove to be unsuitable. I doubt if even half of you will finish training.'

She looks around again and her eyes light on me. She regards me contemplatively as if thinking there here is one unsuitable girl; anyone who wears a cardigan with her uniform is destined to fail. 'You must make many sacrifices for your patients and be prepared to make nursing your whole life. If you do not possess these qualities, you will be asked to leave.'

Am I prepared to make nursing my whole life? I look around me. How many of us are? How many of us will finish? What if I kill someone by doing the wrong thing? I might give the wrong medicine and poison someone, or pull out a tube or ... what else could I possibly do wrong that would harm a patient? These ideas had not crossed my mind before and now I am full of misgivings.

Will I be one of those who gives up, or, perish the thought, be asked to leave? If I am, what will I do instead? At one time I yearned to be a vet but I had been informed that women are not strong enough to be vets. When I said I wanted to be a nurse, my family smiled and told me that it is a wonderful career: I would never be short of a job and the training is ideal preparation for marriage. At school I took the courses listed under 'Nursing as a Career', so along with physics and chemistry, I had struggled with Latin.

Sister Thornton's voice invades my consciousness. 'All lights must be out by 10.30pm and the door is to be locked at 10 sharp by Nurse Dawson. There will be no late passes while you are in PTS. Now I will show you how to make a cap. Gather round this table. Can someone please give me their cap?' Sister Thornton takes one of the proffered white boards and folds it to produce a cap that fits the head above the ears, soars upwards, folds in a neat line and then hangs down at the back.

'There, that's easy isn't it?' she says. 'The head band is plain but when you have finished your probationary period, and if you succeed, you will be given a cap with the LGI emblem on the band. Now everyone is to make up a cap, put it on, and then it will be time for you to walk to the Infirmary for supper.'

'Why do we need to wear uniform if we are only going there for supper, Sister?' Judith asks. There is silence as Sister Thornton recovers from the question.

'Nurse, you are now a nurse of the Leeds General Infirmary and as such you will appear clean and neat at all times. You will be making your first appearance in the dining room and will be looked at by the rest of the staff. We do not want them to think that this PTS is sloppy, do we?'

'No Sister.'

'I shall leave you now. Make up your caps and then Nurse Dawson will see that you are properly assembled before you walk down the hill to the Infirmary.'

'How will we know where to go, Sister?' asks Sheila.

'Go in through the front door and ask the hall porter to direct you. I will call in tomorrow evening to see how you are doing.' She leaves and Sheila flops on a sofa, doubles up her knees and howls with laughter.

'Oh, my God! Me in charge! Wait till my brothers hear about this! Now then you lot, pay attention Nurse Ross, stand up. Say "Yes Nurse Dawson" when I speak to you and curtsy.' She stands up and imitates the voice and posture of Sister Thornton.

'Nurse Ross, you are not behaving with decorum. Pulling that face does not befit the uniform of an LGI nurse. We will walk to the Infirmary two by two, by the left, quick march a-n-d left, right, left, touch!' Someone has thrown a cushion at her.

Feeling more cheerful we all make up something that can be called a cap, put them on and hold them in place with white kirby grips. We fetch our cloaks and prepare to leave. It is raining. No one is sure whether an umbrella detracts from the dignity of the uniform so we leave them behind. Our cloaks do not fully cover our beautiful starched caps so we arrive for the first time at the Infirmary with pieces of limp cloth hanging from our heads like nun's veils.

We enter the front door of the Infirmary. The panelled hall with its marble floor ends in an elegant staircase in the distance. It begins as one wide set of steps that divide into two graciously curved flights leading upwards. The panels of the hall hold boards on which are painted, in gold, the names of the medical consultants and which announce whether they are in the house or not. One board is for physicians with the title of 'Doctor' and the other for surgeons with the title of 'Mister'.

A glassed-off room at the entrance holds a switchboard, hanging clipboards, several dirty mugs and a man named Jim. Jim, the senior hall porter, is part of the institution, and rumour has it that he was hired when the foundation stone was laid. As this was in 1868, he would be over 80 years old, which he clearly is not. His job is to answer those internal calls that seek someone such as a doctor or a sister, buzz the beep of that person, and then tell them where they are needed when they phone him back. He is also in charge of a small army of porters who manoeuvre patients on trolleys, oxygen tanks, food canteen and equipment around the hospital.

Jim directs us to the dining room. 'Go up them stairs and turn right onto the main corridor and then you'll see an arrow pointing to t'dining room at t'other end. Aye, it's grand to see such bright young lasses and I hopes tha'll be right happy.'

The main corridor of the hospital is about a quarter of a mile long. Its linoleum surface stretches into the horizon, and with hardly any people in it at this time of the evening, it reminds me of the yellow brick road in the *Wizard of Oz*. There is a distinctive smell about the place, a warm smell with a mixture of boiled cabbage, furniture polish and disinfectant.

We find the dining room without difficulty. It is the size of a gymnasium and filled with tables for eight. The chatter ceases as we enter. Everyone stares at us, and no doubt, at our limp caps. The room is full of young women, most in uniform like ours, but one or two are in mufti. A mass of purple at one end of the room attracts my attention. Three tables are for permanent staff nurses – perms – who wear purple dresses with long sleeves ending in stiff cuffs, small purple capes like army nurses and caps like ours.

We are surprised to find that we are served by waitresses rather than having to line up at a counter. If this first supper is a sample of the meals we are to be given, we will certainly not go hungry. Three courses, beef barley soup, sausages, baked potatoes and peas, followed by steamed pudding and custard arrive quickly, one after the other. Although most foods that were rationed during the war are now freely available, we still need coupons for butter and sugar and we have to carry these around with us in small tin containers.

Everyone in the room seems to be eating hurriedly and they barely finish before they are scraping back their chairs to leave.

'We will only get 20 minutes to eat by the time we've walked to and from our wards,' Judith says. 'That's why we learn to eat so fast.'

'The food's good anyway,' I say.

'They have to keep the slave labour going or we'll collapse and so will the hospital,' Judith says.

I sit between Judith and a girl called Marie Chart. Marie seems a serious type who doesn't smile.

much. Attractive dark eyes and olive skin give a hint of her Italian ancestry. She tells me that her childhood sweetheart is a medical student in another city and, after completing their respective training, they plan to marry and become missionaries.

‘We want to start a hospital or a medical clinic in a country where there is a lot of leprosy,’ she says. ‘Both Charles and I believe that we have been called by God to serve lepers.’ I hear Judith draw in her breath but she doesn’t say anything. ‘Do you feel you have a calling?’ Marie asks me.

‘No, I can’t say I do. I really wanted to be a vet but at school we were told women aren’t strong enough. In fact, the three choices for us were teaching, nursing or secretarial work.’

‘Not strong enough to be vets but strong enough to hoof 20-stone patients around,’ Judith says. ‘Amazing isn’t it? You see pictures of women from other countries carrying huge loads on their backs but we are not strong enough to do what we want to do.’

‘Well, after all, a woman’s place is in the home beside her husband,’ Marie says.

‘Don’t be so bloody silly,’ Judith snaps. ‘I suppose all you want out of life is to have lots of snotty babies and bake cakes.’

Marie is indignant. ‘Babies are not snotty, they are beautiful. They are God’s gift to us.’

‘Canting fool,’ I hear Judith mutter as I quickly ask Marie how many brothers and sisters she has.

‘I am one of nine but Charles is an only child so we will be a real family for him. In fact, that’s how I got to know him. My brother Paul used to bring him home from school as both his parents work and he was on his own.’ She holds her knife and fork correctly, cuts her food into delicate pieces and chews the prescribed 20 times.

‘When will you marry?’ I ask, as in contrast, I stuff large pieces of baked potato into my mouth and talk with my mouth full.

‘When we’ve both finished training, which will be in 1956. Charles is two years older than me so he’s started medical school.’ I am tired of asking Marie questions and as she doesn’t respond by asking me about my life, I turn to Judith.

‘What are you going to do when you’ve finished training?’

‘God knows. And if today is anything to go by, I may not finish. If all sisters are like that Thornton woman, I will never survive. Did you see her face when I asked her why we have to wear uniforms to come here just to eat?’

I laugh. ‘She looked as though she was going to have a fit! “Nurse, you are now a nurse of the Lee General Infirmary and as such you will appear clean and neat at all times”’ I say, imitating Sister Thornton.

‘Completely irrational. She didn’t even answer the question. I wanted to ask why we can’t be clean and neat in our own clothes, but I didn’t dare. Look around; there’s lots of people in mufti. And I don’t see why we should wear cotton dresses when it’s freezing. It’s warm here but there we are walking the streets and sitting in rooms with no heat...’ She doesn’t finish but takes a gulp of tea. ‘Not on that, she had no business frightening us all by saying we could kill a patient. Most of what we will be doing is routine menial jobs if it’s anything like orthopaedic training.’

‘What was it like in orthopaedic training?’

‘Much more relaxed. Has to be. The patients are there for months at a time. Poor little kiddies with casts and splints to correct congenital deformities. Some of them have to lie in body casts for weeks and weeks.’

‘Did you learn much that will help here?’

‘Well, we had to know the skeleton pretty well and I expect a lot of the ward procedures are the same. Bed making, bedbaths, that sort of thing. But we didn’t get any acutes or emergencies. And most of the patients who weren’t children were young. So this will be very different.’

‘Come on, Sheila’s getting us all up to go.’ I say. ‘This is a damn nuisance – having to carry tins of butter and sugar everywhere we go.’

‘I think it will be easier to give up sweetened tea and buttered bread, don’t you?’ replies Judith.

Despite the rain and cold we endure as we walk back up the hill to Hyde Terrace, I am so happy I could sing. I am with a group of girls my own age and we are going to be nurses. I feel proud in my uniform. Even though the stiff collar and starched apron are uncomfortable, I love them. They fulfil my image of a nurse – competent, caring, a figure to be relied upon in any emergency.

Yet I have an unfamiliar sense of unease as Sister Thornton’s words come back to me. I had been so excited about starting training and the thought of failure had never crossed my mind. Judith said she might never finish if the sisters were like Thornton. Surely they couldn’t be? Sisters must be the most skilled, the most kind, the most caring of nurses, or they wouldn’t be sisters. They will be eager to help us become like them and will show patience as we struggle to learn.

I know the work is hard but everyone says it is very rewarding and worthwhile. No, I am not going to be put off by Thornton; I am going to be a really good nurse and, one day, I will be a sister.

Chapter 2

ON THE BUS to Roundhay Hall I sit next to a goofy-looking girl with the unlikely name of Hermion Blinks. She tells me this apologetically and says that she is usually known as Blinks. Large glasses that distort her eyes above her slightly buck teeth give her a gormless look; but when she smiles she has that certain attraction some ugly people possess. I am drawn to her as one who is drawn to a spaniel. I feel protective as I sense she cannot stand up for herself.

'I live in Newcastle,' Blinks tells me, 'but I came to Leeds to get away from my mother and sisters. They tell me all the time that I will never survive nurses' training. I'm determined to show them.' She takes off her glasses to polish them with her handkerchief and gives me a big grin. 'According to them I'm not good for anything except serving fish and chips in a lorry driver's caff. I don't want to go home on my days off to that.'

'What did you do before this?'

'I stayed at school in the sixth form.'

'Did you like it?' Going into the sixth form had been an option for me but I could hardly wait to leave the boredom of school.

'Well, I didn't have much choice.' Blinks paused for a minute. 'I'm the youngest of four girls. My older sisters went to university, one's still there, but I didn't get high enough marks.' She turns to smile at me. 'So here I am, the dumbo of the family.'

'Marks don't mean everything,' I say. 'One girl in my form never did well and now she runs a dance academy even though she's only 19. Did you really want to go to university?'

'To be truthful, I don't know what I want to do. This is the lesser of several awful choices. I was told that nursing is great preparation for marriage.'

We both laugh. 'I was told that too.'

'I can't see myself getting married whether I become a nurse or not. Who would propose to someone like me?' Blinks laughs as she says this; I can see that she has no self-confidence.

'I don't see why not,' I say. 'I'm sure you'd make a wonderful wife.'

Blinks pulls my arm from under my cloak and holds her own alongside it. 'Look at that,' she says. 'Look how strong you are and how scrawny I am. My sister says I would blow over in a breeze.'

'Men don't marry women because of the size of their arms,' I say, laughing. 'They like to be mothered.'

'They also like to look at a nice smile like yours.'

'Ah yes, but I'm not the sort to pander to a man. My mother said I should never beat a man at sports because they don't like it. Well, tough tatties I say.'

The bus turns through a gateway of stone columns supporting lions rampant that look lonely without their wrought iron gates. I expect these were removed in the war effort. Roundhay Hall has been a minor stately home before it was donated to the Infirmary. A square, grey stone building set within several acres of lawn and trees, that, to me, seems far too dignified to house a preliminary training school for nurses. At this time of the year the trees are bare and the grass gleams with ice.

chill wind lifts my cloak as I descend from the bus and nearly whips my cap off. Are we going to freeze in unheated rooms here? I will never survive. I have been cold ever since I arrived back in England from India.

Two Sister Tutors meet us. They wear grey dresses and straight caps like American nurses but with a frill across the top. Sister Uprichard and Sister Downes are to be prominent figures in our lives for the next three months so we examine them carefully. Sister Uprichard is plump, with a large bosom and a round, cheerful face. Sister Downes is small, bird-like, with a walk like a penguin. This particular walk propels her along at a tremendous rate – soundless and efficient.

Up and Down, as they are naturally dubbed, show us round. The main floor holds a lounge, classrooms, a practical room, kitchens, including one where we will learn to cook, and a large cheerful dining room. Upstairs are to be the bedrooms where future generations of probationers will sleep. There is central heating, thank heaven.

Our first instruction is how we are to address sisters. We are to stand when spoken to and startle when they enter a room. We are to say ‘Yes Sister’ or ‘No Sister.’ We are to realise that, in comparison to them, we are on the same level of the biological scale as an amoeba.

When Up and Down finally leave the room we all relax and carry on with getting to know each other. Suddenly Sister Downes re-enters. Well-trained at Leeds Girls High School, I stand up along with about two others. Down looks around and leaves the room, only to enter once more seconds later. Again only I and one or two others stand. Everyone else continues to lounge in her seat and chat. With a frozen face, Down leaves again. She returns with the same result as before, but this time she claps her hands and says ‘Obviously we have a group here who cannot follow directions. You have only been here ten minutes and you have already demonstrated that you are incapable of listening and learning. I fear for the future of nursing.’ With this, she leaves the room, re-enters and the entire class springs to its feet.

‘Be seated. Now I will explain your timetable for the time you are here. You were late this morning but in future we expect you here promptly at 8.30am.’ She stands at the front of the class holding a sheaf of papers. ‘You will have classes until one o’clock, an hour for lunch and then leave at six o’clock. There will be two short tea breaks, one in the morning and one in the afternoon. Some afternoons you will be out, either on the wards or on a field trip. I will now hand out individual timetables as you are not always together.’

She passes out sheets of paper. We are together for lectures on anatomy and physiology, nutrition, hygiene and care of patients with a variety of diseases. We split up for cooking, time in the practical room and experience on the wards. There are also several field trips planned.

All this time, Up has been sitting to one side. When Down has finished she comes to the front of the class. ‘Now, Sister Downes and I would like to know your names. I want you each to stand up, tell us your name and where you are from. We will be writing down your names as you go round.’

There are 32 of us. The previous evening there had been 33 but one girl was so homesick she left this morning. ‘How ridiculous!’ I said to Judith when we heard. ‘Can you believe that someone would apply, go through an interview, arrive here and then leave because they miss their mummy?’ I feel contemptuous. I am the one whose parents are far away while this girl lives nearby. If I leave it will be for a reason far more important than homesickness.

After the introductions we are led into the practical room. It is set up as a small ward with eight beds, a sterilising room and a sluice room which houses urinals, bedpans and a bedpan hopper the

washes bedpans and urine testing equipment. At one end is a cupboard containing numerous enamel bowls, instruments and linen. Dummies occupy two of the beds. A skeleton hangs in one corner, metal poles on wheels and with hooks on them are clustered in another corner, and in another are stainless steel, two-tier trolleys. Large, colourful anatomical maps decorate the walls.

‘Now nurses, I want you to watch carefully while Sister Downes and I make a bed. Afterwards I will ask you what you observed. Nurse Horsfall, would you please time us? Start counting from when I say “go”.’

Up takes two chairs and places them back to back at the foot of one of the beds. ‘Go,’ she says, and she and Down move as though they have suddenly been switched on. In unison, like professional ballroom dancers, they strip the bed, one sheet and blanket at a time. Each piece of bedding is folded in three and laid over the two chairs. Then they make up the bed again.

‘How long was that, Nurse Horsfall?’

‘Two minutes, 45 seconds, Sister.’ We are awed.

‘What did you notice?’

‘That you moved together as a team,’ says one girl.

‘Yes, you are to strive to work exactly together. It is faster for one thing but also much easier on your back. What else?’

‘The counterpane hangs with the same amount on each side and the corners are an exact triangle,’ replies another.

Down strokes the counterpane of the bed they have made. ‘The ward looks neater when the beds are well-made and a neat ward is a sign of good nursing. What else?’

‘The bottom sheet is as taut as a drum.’

‘Yes. Wrinkled sheets are one of the main causes of bedsores.’ Down takes on a grim tone. ‘Bedsores are due to poor nursing care – nothing else, despite what you may hear to the contrary. What else?’

No one answers.

‘We shook the blankets and sheets as little as possible to avoid creating dust in the air and spreading infection. We will make it again more slowly and point out some of the things to watch for. Then you will work in pairs to make a bed.’

I work with a girl called Wendy Sandstone, or Sandy. We are hopeless. When she is at the top of the bed, I am at the bottom. It takes us a good ten minutes to strip and make the bed and the result is lopsided and the bottom sheet has wrinkles in it.

Up comes over. ‘Never mind, nurses, try again. You will soon get the hang of it. Start at the top of the bed then you’ll have enough sheet to make good corners. Here, Nurse Sandstone, let me show you.’

We try again with a slightly better result but still the counterpane is crooked. This time we have Down check us. ‘You obviously have no sense of balance. Nurse Ross, can’t you tell when one of you has more counterpane than the other? Do it again.’

Finally we make a presentable bed and are allowed to go for dinner. Sandy loves to chat. She prattles on about whether the peas are cooked properly, have I seen someone or other’s cap and isn’t it funny folded that way, whether it is the number six bus that stops outside the front door of the hospital.

or the number eight, aren't the flowers in the front hall pretty, will her shoes last a year, and so on. She has a crush on June Allyson, the film star, and writes to her asking for autographed photographs which she pins up on the inside of her wardrobe.

Her mother died when Sandy was 12. After that she was expected to, and did, run the house for her father and two older brothers. Only when the brothers left home was she allowed to contemplate a career for herself. Her days off are to be spent cleaning the house and leaving a week's meals ready for her father, as these are the conditions under which she was allowed to leave home.

After dinner and a walk around the grounds, we have the first of many lectures. It is firmly implanted into us that the control of disease and the way to health lies through clean water, treatment of sewerage, hygiene and fresh air. The first hygiene lecture includes personal hygiene, which Dow approaches head-on with little or no regard for our sensibilities. We are told that we are to bathe daily with particular attention to our underarms.

'Patients are sick enough without having to smell a nurse's armpits as she bends over them,' Dow says. 'You must constantly check that you do not smell and if any of you realise that one of your colleagues smells, you must inform her. It is difficult to smell your own breath so you must ask a colleague to check for you.'

From then on we exhale vigorously at each other to do the breath test and begin a life-long habit surreptitiously sniffing our armpits.

I go out for a day with a district nurse and see for myself the appalling conditions in which some people live. I have seen abject poverty in India but I did not realise it is also prevalent in my own country. Many people live in 'one-up one-downs', as the rows of small houses built in the Industrial Revolution are called. They are literally two rooms, one on top of the other. There are no bathrooms. Six houses share an outside toilet and each house has one cold-water tap. Despite the lack of running hot water the steps of most of the houses are well scrubbed and the lace curtains at the windows gleam white against the grimy brick walls. All except for the one house that we enter.

The district nurse knocks on the door and I can hear shuffling inside. Finally the door opens.

'Coom in, coom in,' an old man says.

After we step straight from the pavement into the living room, I am met by an unpleasant rancid smell. When my eyes are accustomed to the dim light, I see a large, square table that takes up most of the space. On it stands a medley of unwashed empty milk bottles, chipped mugs, dirty plates precariously balanced on each other, greasy cutlery, a box of sugar cubes, a stale loaf, several slices of old toast and a collection of tins.

A coal fire burns in the hearth beneath a cluttered mantelpiece. Drawn up to this is a plush-covered easy chair with a cushion holding down the protruding springs. Under the window, a stone sink with one leaking tap has a wooden draining board covered with more dirty dishes. In the sink, a pan containing what looks like burnt porridge, is filled with greasy water and the plop, plop of water dripping into it is an irritating background sound.

Against one wall stands a cabinet with a crocheted runner covering its uncluttered surface. On it sits a framed photograph of a woman wearing a fur collar and a cloche hat of the 1920s.

'Good morning, Mr Harrop,' the district nurse says. 'This is a student nurse from the Infirmary who is spending the day with me. How are you?'

'Nicely, thank you,' says the old man. He has been tall but is now lean and bent. He wears

collarless shirt, a stained grey woollen cardigan and pyjama bottoms. 'Would you like a cuppa?'

I am relieved to hear the district nurse say, 'No thank you, Mr Harrop. We're running a bit late today. How's your leg?'

He sits on the easy chair, extends one leg and rolls up the pyjamas to uncover a bandage around his calf. The district nurse kneels down to unroll the bandage and I promptly feel sick when a huge ulcer taking up most of his calf, is revealed.

'It's looking a wee bit better,' she says. 'There's signs of granulation down this edge, look.'

Looking better? How much worse can it be than this? I stare at the cavernous wound. It looks as if an animal has taken a bite out of him and then sprayed it with green pus. The district nurse pulls a dressing tray out of her bag. She washes her hands with her own soap and dries them on her own towel. Then she throws the old dressing on the fire before starting to clean the ulcer. I can hardly look. Will I ever be able to attend such a horrible wound without vomiting? My image of myself efficiently changing dressings quickly vanishes. Instead I see a dithering twerp who has to swallow hard and smile through clenched teeth.

Desperately needing something to do or say, I pick up the photo of the young woman and say, 'Was this your wife? She was very beautiful.'

'Ay, she were that. Allus was, even to the end. I never fancied another woman, only her. She died three year since.' Mr Harrop takes the photograph from me and strokes the glass. 'I still miss her. T'house wouldn't be this mess if she was here.'

'When is your niece coming again, Mr Harrop?' the district nurse asks.

'She couldn't come last week but she should be here today. She'll clean up and bring me some bread and tea. I'll be alright.'

'I'm a bit worried that you're not eating properly,' the district nurse says as she packs her bag.

'Oh, I'm alright. Neighbour brings me a Sunday dinner and my niece will bring me some fish'n'chips and mushy peas. Tha' don't need much to eat at my age.'

We leave and as we retrieve our bicycles I say, 'That's terrible. How can we leave an old man like that? He should be in a home.'

The district nurse is attaching her bag to her pannier when she looks at me and says, 'What makes you think he would be better off in a home?'

'Well, he'd get regular meals for one thing and he wouldn't be so dirty. His clothes are filthy and did you see the state of the sink and dishes? It was disgusting!'

'You're making a lot of judgements about how people should live. The most valuable thing for old people is their independence and that's what he has. Does it really matter if his clothes and house are dirty? Does it?' She stops to look straight at me with her clear grey eyes.

I don't know how to answer. We have just had lectures on hygiene and here is a nurse who does not seem to think it matters. I had seen filth in India, but nevertheless, people did cope and even seemed cheerful. But I still don't think we should just walk away from an old man who cannot look after himself.

'The most important thing for you to learn, lass, is to stop thinking you can change the world. Nurses can only do so much. If Mr Harrop wants to go into a home, I will arrange it, but he doesn't.'

My mentor mounts her bike and as we pedal off she says, 'When you get dirty patients coming in

the hospital, remember they often have only cold water and no proper bathrooms. It's a wonder they manage at all.'

I will appreciate the difficulties people live under, and I will value independence, but I will not stop thinking I can change the world because I know I can.

Chapter 3

THE WARD IS like a cathedral with immensely high ceilings. Tall windows, wanting only stained glass to support the illusion, rise up to finish in an arch. Rows of beds, each with a white counterpane stretch to infinity down either side. An untidy line down the centre of the ward consists of Sister's desk first, followed by a sink, oxygen tanks, a medicine cabinet on wheels, an emergency trolley, easy chairs, and eventually, a long wooden table covered with vases of yellow and rust chrysanthemum. Beyond that is a low built-in set of cupboards topped with a work surface.

'Come along Nurse Ross, don't stand there gawking!' Sister Downes says as we first enter Ward 2. I feel like a newborn lamb that first confronts the enormity of a moor.

'Sister Curtis, this is Nurse Ross who will be here until 6pm. She is to go to first supper and is then off duty.' Down leaves me to my fate.

Sister Curtis is an immense woman who seems truly formidable in her sister's uniform. Her appearance is deceptive however, for she has a gentle voice and her first words are 'Yes, the first sight of a ward is overwhelming. It will shrink in time.' She leads me to her desk. 'I'm glad you're here and you can be very useful to us. Perhaps you can begin by taking these TPRs for me.' She writes eight bed numbers on a piece of paper. I must be looking blank as she says, 'You know, temperature, pulse and respirations. The thermometer tray is on the cabinet at the end of the ward. Have you been shown how to chart TPRs?'

'Yes Sister.'

I try not to draw attention to myself by letting my feet clop on the polished wooden floor but I am sure all eyes are on me. I wonder if my stocking seams are straight. I hope a patient won't call me. A man does call out but to his neighbour. 'Jack, has tha' got a pencil?' His neighbour nods. 'Nurse, can you pass t'pencil this way?' Thank goodness for a request I can readily meet. 'Thanks luv,' he says and I hand him the unpainted wooden pencil.

The thermometer tray lies on the cabinet as promised and I am relieved to see that it looks just like the one in PTS. Bed eight is the first on the list. The occupant is asleep. Not wanting to wake him up I move to the next on the list. This time a pair of suspicious eyes glare at me from a sallow, drawn face.

'Just going to take your temperature, Mr Greenside,' I say, noting his name on the temperature chart that hangs above his bed. Glass thermometers rest in a container of pink fluid in a tray holding cotton wool balls. I wipe one and attempt to shake it down with that flick of the wrist expert nurses have mastered but I have not. My shakings are to no avail: the mercury remains where it is at 96 degrees. Frustrated, I use my whole arm but even this windmill approach will not shift the mercury. I look for another thermometer and am relieved to find one registering 96 degrees.

'Can you put this under your tongue please.' Mr Greenside's toothless mouth opens for me to place the thermometer under his tongue. My pocket watch is ready, his wrist is held out, but he has no pulse. In a panic, I feel around his thin, bony wrist, pressing gently on various parts, but there is no pulse. My first task, a simple one of counting a pulse and I can't do it. Any remaining images of competence vanish.

I try the other wrist. Oh joy – there is a pulse. I carefully count it for a full minute and then

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