pansion but for the things that she did in her own name: the medical aid she
arranged for the women of India, her work with lepers, her immense interest
in nursing. This interest was kept alive by her three daughters, and one of
them as Lady PLumpett, wife of the Governor-General of New Zealand,
found the first extensive remote nursing service on this planet.
Another one of her daughters, Lady Hermione Blackwood, took the arduous
training as a nurse and as a midwife, and it was when we were both nursing
in France that we met.

‘Lady Dufferin outlived her husband, all of her sons, her generation.
In closing this brief sketch of a noble life, we quote from the poem written
by Rudyard Kipling, ‘The Song of the Women,’ commemorating Lady
Dufferin and her work in India.

‘If she have sent her servants in our pain,
If she have fought with death and dulled his sword;
If she have given back our sick again,
And to the breast the weaking lips restored,
Is it a little thing that she has wrought?
Then Life and Death and Motherhood be nought.’

Of particular interest
To our male nurse members.

**NURSING IN THE NAVY**

**BY A SICK BERTH ATTENDANT**

[From *The Nursing Mirror and Midwives’ Journal*.]

The sick berth staff is a comparatively unknown branch of the Navy, and
for that reason, and because I know our method of working will interest all
members of the nursing profession, I shall give a rough idea of our organisa-
tion. Most of our time is, of course, spent in ships, but, as our duties there
are very complex, I do not intend to do more than just touch on them.

Entrance is through the normal channels of enlistment into the Navy.
The period of engagement is for twelve years with the option of re-engagement
for a further period of ten years, which qualifies for a pension. The
new entrant joins as a probationary sick berth attendant, and after a discipli-
nary course of two months’ duration he goes to hospital for technical training,
which consists of a course of forty-five weeks. At the end of this he sits for
an examination, and on passing becomes a sick berth attendant. After twelve
months as an attendant he may sit for another examination, which qualifies
him for promotion to leading sick berth attendant, usually after six or seven
years’ service. Two years from the time of promotion he may take another
examination qualifying him for promotion to sick berth petty officer, which
he becomes after another year’s service, according to vacancies and re-
commendations. After a further period of two years, and on passing the
examination, he is eligible for promotion to sick berth chief petty officer.

**Special Courses.** After three years’ service, and according to vacancies,
the sick berth attendant may volunteer for a course of X-ray, operating,
massage, or laboratory assistant. This qualifies him for extra pay of six-
pence a day. An attendant also gets extra pay for working in syphonic or
mental wards and for dispensing duties on a ship.

The course undertaken by the probationer is very comprehensive, usually
consisting of two lectures a day besides work in the wards. He also does
special training in the dispensary, operating theatre, laboratory, and genito-
urinary departments, and attends all post-mortems. The instructing staff
consists of a medical officer, a sister, a chief petty officer, and a petty officer
or leading attendant. The hospital is in the charge of a surgeon rear-admiral,
and is divided into two divisions—medical and surgical—with a surgeon-captain in charge of each. The medical division consists of acute, sub-acute, convalescent, mental, zymotic, T.B., and sick officers' wards. The surgical division has clean and dirty surgical wards, fracture, convalescent, eye, ear, nose and throat, and venereal wards.

The Watches. The attendants usually do one month in three or four on night duty, while the remainder take their turn in rotation. Besides staff employed in nursing duties, there are others employed in the duty office, receiving room, out-patients, record, and survey departments. Leave is given in watches. A typical fortnight's leave for attendants is: First Monday, duty; first Tuesday, 4 p.m.; first Wednesday, 7-30 p.m.; first Thursday, 4 p.m.; first Friday, 4 p.m.; first Saturday, duty; first Sunday, 7-30 p.m.; second Monday, 4 p.m.; second Tuesday, duty; second Wednesday, 4 p.m.; second Thursday, 7-30 p.m.; second Friday, duty; second Saturday, 1 p.m. (short week-end leave). The fourth week-end is a long week-end (from 7-30 p.m. on the Friday). The zymotic, T.B., and departmental staff have special leave; chief petty officers and petty officers get more leave. This leave, while being in excess of the usual nurse’s leave, is less than that in other branches of the Navy. The night duty staff get leave from 7-30 a.m. until 11-30 a.m. every day except the married members, who get all-day leave.

The hospital is a typical general hospital, plus mental, T.B., and zymotic wards. All cases are kept in hospital until they are absolutely fit, when they are discharged to duty, or until nothing further can be done for them, when they are invalided, and further treatment, if necessary, is carried out by the civilian authorities.

Venereal Disease. About five thousand cases pass through each of the three main hospitals annually. Of these about half are medical and half surgical cases. Deaths average about forty a year. Venereal disease accounts for about two hundred cases, but this total is gradually becoming less. Pulmonary tuberculosis accounts for about fifty cases, and here again the total is dropping. Each member of the staff spends about twelve of the twenty-two years in a ship, and whilst serving in a ship his work is very different from that in hospital. The sick berth staff in a ship is the public health department, and many and varied are the jobs. The number of staff carried in a ship varies with its size; roughly, it is four in a battleship, three in the larger cruisers, two in the light cruisers, one in a sloop or gunboat, and one or two to a flotilla of destroyers.

F. B. A.

AN OUTLINE LECTURE ON HOME SAFETY

A Contribution very kindly made by the Safety First Association of India

Home accidents are caused chiefly by thoughtlessness and carelessness—these can be overcome by training in safe habits.

The easiest way is not always the safest way:

1. It is easier to draw up a chair and stand on it to hang the curtains than it is to go out into the godown and bring in the step ladder—the proper tool for the job.

2. It is easier to pick up the broken glass with the fingers than to get a dustpan and brush the broken glass safely into the dustpan.

In India statistics giving the causes of accidents are not available. There is therefore the necessity of taking those of U.S. America and England in order to enable us to realise the serious problem of Home Accidents.