

THE FIRST TRAINING SCHOOL FOR NURSES IN NORTH CAROLINA

After graduating from the Training School for Nurses of the Philadelphia General Hospital in June, 1894, I returned in July to my native state, where I had accepted the position of head nurse in Rex Hospital, Raleigh, N.C.

Out of a class of twenty graduates, only a few of us had definite work engaged. I was considered most fortunate in having a hospital position awaiting me. The usual salary in those days was twenty-five dollars a month, with maintenance. It did not occur to me to wish it were more.

Here and there in passing, a friend or classmate greeted me, "I supposed you will soon be organizing a training school!"

"Never such an undertaking in a small hospital," I said.

Not until I had been in Rex Hospital several months did I think it possible to have a training school in a hospital of twenty-three beds. The situation was serious. There was the hospital. In it were patients who must be cared for. We had no money to pay graduate nurses had they been available.

In Raleigh there were some young women of sterling qualities and of good family who wanted to learn to nurse. One town girl and one from the country had been taken in when the hospital was opened the previous May. More help was needed. Two Raleigh girls were interviewed and were told they could report for duty at eight o'clock every morning and work until six in the afternoon. These would-be-nurses were given their dinner—a good substantial home dinner: The hospital was so small that only out of town girls could be given a room and three meals a day. After a few months, however, sleeping accommodations and board were provided for all nurses.

By October the rush of work with typhoid cases had diminished, leaving a little time for the consideration of other things. It was already very evident that these nurses must have regular instruction to do good work. Therefore, arrangements were soon made for lectures.

Necessity is the mother of the some other things besides invention:

The birth of this little training school was not so much as mentioned in the daily press. It being somewhat premature, no one was sure it would survive the second summer: but this weakling, born of necessity and hard work, has proven its need by a steady growth in strength and usefulness to this very day.

There was no time to write to other hospitals in the state to know about their trainings schools. Then we knew no law save that human kindness to suffering humanity in trying to care for each patient according to his needs. Several years later I learned that no training school had previously been established in the state. So reluctant was I to believe this, that the records of the office of the Secretary of State were consulted for notifications.

The following members of the visiting staff of physicians were asked to lecture to the nurses:

"Doctors Peter E. Hines, A.W. Knox, K.P. Battle, Jr., and James W. McKee. When asked to lecture on medical nurses, J.W. McGee said, Miss Wyche, you know more about nursing than I do."

Anatomy, physiology, materia medica, surgical and obstetrical nursing were taught by the physicians. The various branches of practical nursing were taught by me. Clara Weeks, Docks' Materia Medica, and Gould's Medical Dictionary for Nurses were only text books. Any other books on nursing the head nurse could afford to buy were loaned to the nurses. There was no nursing journal. The Trained Nurse was published then, but we knew little about it. Classes or lectures were held four times a week unless a rush of work prevented.

While the doctors, lectured, the head nurse and the orderly listened for the bells. Classes were held in some part of the hospital where the bells could be heard. Each nurse was allowed to leave the class to answer a bell in her ward. So eager were the nurses to learn that no one missed a class except when absolutely necessary. Things went well until the matron got sick and no one heard the bell. "A nurse's business is to wait on the sick and not to go to school!" the matron exclaimed.

When classes began, no time was set for the period of training. We just worked and taught, and taught and worked for two and one half years. Then it was decided that these nurses should have something to show for their work. Later, when money was available, diplomas were issued to the following members of the first class: Misses Bessie Mordecai, Rosa G. Hill, and Bessie Purnell, from Raleigh, and Eva Palmer, from Warren County. A course of one and a half years was adopted for subsequent classes until a state law required three years before a nurse was eligible for state registration.

At first the night work was done by a nurse who had a year's practical nursing in a small hospital for chronic cases, the other nurses taking their turns of night duty as soon as they had several months' experience. From the beginning, these nurses wore uniforms and were taught hospital etiquette. My cap, being the first nurse's cap to appear in Raleigh, attracted much attention.

"A white dress is very unseasonable in winter," one doctor said.

Any nurse who wanted to go to a large and well-established training school was encouraged to do so. One went to the Presbyterian Hospital in Philadelphia and graduated.

When Rex Hospital was opened, there were two wards for Negroes. It soon occurred to those in authority that Negro women should be trained so they could take the lead in caring for their own people. One colored woman was taken in and sent to the colored ward to work under a nurse who had several months' experience in ward work. These two nurses worked side by side for the comfort and welfare of their patients. The colored for the comfort and welfare of their patients. The colored people made good patients, courteous and appreciative at all times. No other colored nurse was taken in. This one did not graduate because of lack of education. Provision was made later for the training of colored nurses by the opening of St. Agnes' Hospital, Raleigh.

When any entirely new treatment was to be undertaken by a doctor, he would come to the hospital, help with the preparation and treatment until the patient's confidence had been gained and the doctor felt that the nurses could do the work alone. In those days hospitals were not so often chosen in preference to home treatment, and it meant so much to have the confidence and co-operation of the patients in the hospital and its treatments.

When the Brandt method of treatment of typhoid fever was first used in Raleigh, one doctor came to the hospital every two hours, day and night, to help with the cold tub baths, except from twelve to four in the morning when the patient was allowed to sleep.

The Woodbridge treatment for typhoid fever came into use soon after the cold plunge bath and got well under way. This treatment consisted in the giving of a tablet every fifteen minutes, except for the four hours' rest period at night.

After making a capsule for several days one man said, "I sure will rattle when I get up from her." His tablets had been put in capsules.

In another case - that of a little boy who was to have a fourth bath on the day of admission - the patient said, "I been washed, I been washed three times."

"You are not dirty. We are just watching the fever away", said the nurse. After that there was never a murmur.

Imagine what this treatment meant, with some patients in one ward, some in another, some upstairs and some downstairs, some taking tablets, some taking tubs:

After substituting for the night nurse on one occasion, a nurse said, "I gave thirteen tub baths in twelve hours. These women were allowed to step in and out of the tub, as was the rule with mild cases."

Under this strain two nurses almost collapsed. A graduate and a practical nurse were secured. The graduate had been trained in a women's hospital, and when her mother heard that she was nursing men she urged her to come home. This, however, she did not do. In a recent letter, she said, "This is a nightmarish recollection to me after a lapse of more than thirty years - that continuous procession of bath tubs and orderlies around the ward." There was a lack of many facilities which we now consider necessities. Many an ingenious makeshift was pointed out to me. Every one worked to the limit of her endurance and the head nurse seemed to be always on duty." She spoke of this as an epidemic of typhoid fever, but the two following summers were just as bad.

The Rex Hospital nurse might have said, "We may be drab and ill equipped but we help to heal people and that is all that nay hospital can do."

These nurses might now say, "Not even in retrospect will be despise the day of small things and great efforts.

One night an orderly, a man of sixty, said to me, "Now, Missus, if you can't remember my name, you just think of the first man."

Adam was told to go to Dr. J's room: "Go up the back steps and turn to your right."

Three times Adam went up the back steps and came down at the front door: On his third trip, I located him at the front door.

Bewildered and embarrassed, he exclaimed, "Is I a fool?"

Another orderly took delight in telling the patients and their friends that before doctors could practice they had to be able to take a skeleton to pieces and put it together again in a dark closet.

It is fitting that the first training school for nurses in North Carolina should have been organized in the first chartered hospital. At that time we knew nothing of what took place fifty four years before in regard to the will of John Rex. All we knew was that John Rex had left some money to build a hospital in Raleigh.

Rex Hospital had no application blanks. I had no idea that a training school would be organized, and so brought none as a sample from Philadelphia. For the first years student nurses received no pay, not even money to buy books. But there was a homelike atmosphere and good food. In most cases, the family physician was a member of the staff.

During the years intervening between the organization of the first training school and the State Nurses' Association, other hospitals opened. In each hospital was one graduate nurse trained in another state, and for the most part not native to North America.

These nurses were busy, each in her own way, organizing the hospital training school according to ideas and plans of her own school, which plans seemed good enough, or at least the best she could do under such different conditions. These out of the state nurses did good work, and remained within our borders varying periods of time. Small salaries and the problems of hospitals in a new field did not tend to hold nurses from other states, nor were these features attractive to our own women who went north to study, where they remained a year or more.

Many and similar problems doubtless confronted every later nurse as she hastened from her Alma Mater to assume the duties of leader and educator of nurses in a small hospital, - some of which had come forth under great difficulties, and sometimes only after a period of long waiting. The educational feature did not come up to the expectations of many students. The head nurse herself realized often her short comings as a teacher. How to avoid a repetition of these conditions in her new field was a vital question. Head nurses were chosen because of their executive ability rather than special fitness as teachers of nursing. The work had to go on and a good manager was always sought. Their were already a few born nurse-teachers, perhaps whose ability had not been discovered.