

NARRATIVE OF HEAD SISTER NELLIE CONSTANCE MORRICE 7/6/1919

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Active Service A.I.E.F

Experiences of the Head Sister N.C. Morrice A.A.N.S from Nov. 25th 1914 till [until] March 6th 1919.

I left Sydney in the hospital ship Kyarra which sailed 25th Nov 1914. Of the trip from Sydney to Alexandria there is much to be said, it being quite one of the most unpleasant experiences of all my 4^{1/2} years of Active Service. The ship was overcrowded as far as the Sisters were concerned, the stewards and stewardesses insolent to a degree, the smells from bad meat and potatoes, so bad that we could scarcely remain in our cabins at times, still we were asked to sign a paper when we had reached our destination stating we were satisfied with the treatment we received on board and the condition of the ship. I for one raised an objection and said I thought it better to inform the authorities as to the condition we had travelled under, but was told by the Matron it was much easier to sign than raise objections. I did so rather reluctantly. (All through my military career I have met people in high position in the Military, who would rather you left things as they were, than that you entered a straightforward complaint, than trying to improve conditions in hospitals. Some matrons I have worked with have thought me an "awful bore" when I have gone into her office and entered a complaint about something that was not running quite smoothly in my ward & that only she had the power to remedy, such as disrespect and disobedience of orderlies both of which we had to tolerate, as there seemed to be no remedy for either in the military unless the orderly happened to be a man in himself. Certainly there was no law in our hospitals to make him one.)

The Kyarra arrived at Alexandria in January 1915, and we all disembarked for No 2 A.G.H. to which unit I was attached & went to Cairo and established a hospital at Mena House. There was a hospital there under the supervision of an Imperial Matron and worked by a few of our own Sisters who went over with the 1st Division of troops. When 2 A.G.H. arrived the Imperial Matron retired to a British Hospital and her post was filled by Miss Gould, our Principal Matron. I was put in charge of the Infections [Infectious?] Block where I had 56 beds and a staff of sometimes 2 Sisters and sometimes only 1 or 2 orderlies. As the beds were nearly always occupied, it was almost more than I could manage at times as there was an outbreak of measles in Mena Camp and I got all the acute cases in my block, the minor cases going to the tents attached to the hospital. Many of the measles cases had Bronchio Pneumonia as a complication, but the percentage of deaths was small in comparison to the [ordinary?] pneumonia cases who died. I also nursed typhus, erysipelas & scarlet fever in the same block & in one case of typhus only did I get a special nurse. When I asked for specials was told it was "Active Service" and I must manage.

(Written vertically on the side of the page..."The measles cases were the worst type I have ever nursed. Their temperatures were high for days, there was a [permanent?] discharge from the eyes, [ears?] & nose.")

In one instance I was on duty alone in the block and a patient was dying with typhus. I asked for a special nurse for him & was refused. Consequently I had to stay with him from 12 o'clock to 9pm

when he died without having had a mouthful to eat. I give this incident that perhaps common sense may be made use of in the next war. The clothing and equipment for the hospital was poor. We rarely could get pyjamas for the patients, they had to wear thick grey flannel [shirts?] and we were given very few of these. Medicine glasses were so scarce that one of the officers suffering from measles took pity on my having to hand round so many medicines in about 2 glasses, that he sent to Cairo and bought me two doz [dozen] glasses. I cannot say anything in favour of the management of the hospital as the rules and regulations seemed to be altered everyday and we had to "muddle" along as best we could. The biggest tragedy of all was when the wounded came in after the Gallipoli Landing. I got orders to evacuate all my patients & get ready for surgical cases. Again I had to "manage" without help & when I requisitioned for surgical stores to have things in readiness was told I could have them by applying to the Matron in her office at 8 o'clock that night. I knew the wounded were coming in that day so I applied to the theatre Sister, Miss Kellett, who saved the situation by giving me a large supply of sterilised dressings. The patients came in at 6 o'clock. We just seemed to muddle along as it seemed so hopeless trying to nurse surgical cases without any appliances we had to use our own instrument, dressings trays etc.

In May or June I was transferred to Gezireh Palace, which building was being taken over by 2 A.G.H & half the staff & equipment were being moved there to receive the patients. There we found conditions for the Sisters were rough to say the least of it. No cloths on the tables, enamel mugs and tin plates in our mess. I've soon learnt from the Imperial Sisters that they were living in a civilised fashion & asked why we could not do the same, but was told we were on "Active Service" & must "put up" with the roughness of things. However we objected & conditions in our mess [gradually/greatly?] improved. The patients came in to Gezireh in large numbers, there again we had to nurse them under the most trying conditions due to bad management. For instance no soap or washers would be given to us for the patients by the Matron till [until] the patients came in, thus if we were receiving 20 patients, the 20 patients would have to be in the ward before we could even start sponging our patients. Then we were supposed to go down to the Matron's office and give the number of patients in the ward [&] she would issue the soap etc accordingly. We eventually found that buying the soap ourselves & tearing up old garments of our own for washers was the easiest way out of the difficulty. Fortunately the wounds we got in Gezireh were not of a serious nature, though very septic at times, the entrance being small and the exit being rather jagged & the surrounding parts often being much blistered & burnt caused, they tell me by the application of Iodine when the wound was first inflicted.

In September 1915 volunteers were asked for Lemnos, so I volunteered with some other Sisters & that same month 25 Sisters were sent to No 2 Stationary Hospital at Lemnos. We went over on the "Assaye", a British Hospital Ship & found the conditions for both patients and Sisters very much better than on the Kyarra. We were disembarked at Mudros where we were met by the Commanding Officer of No 2 Stationary & some of the officers of the unit & taken up to the hospital, where we found everything in readiness for us as far as our own personal comfort was concerned. The men seemed to have thought of everything for our comfort & convenience to the best of their ability, but being the first Sisters in the unit & not being wanted, as we were afterwards told by the officers & orderlies, or some of them, we found our work was uphill to say the least of it. I have known an officer in charge of the ward to come in and give an order direct to the orderly in front of a Sister. At times our presence was ignored by the officer with the result that we had very little control over the orderlies. The officers seemed to want the orderly to know that they were quite

satisfied with the work the orderlies were doing & that Sisters were quite unnecessary. However the patients thought otherwise _____. In this Hospital there was equipment and beds for almost 250 men. [Out?] of that there was a “[Unit?] Tent” with beds & everything in the way of equipment that was able to be got. The “Fighting Man” with dysentery & wounds had to lie on mattresses on the floor of the tents. The first sight that met my gaze when going over the hospital was some of the dysentery & jaundice patients (both diseases being very prevalent at that time) sitting on commodes outside the tent doors in the icy wind and sleet with no clothing but their pyjamas, doubled up with pain & passing blood and mucus & on going inside the tents found these same patients sleeping on mattresses on the floor which were encased in mud, having heavy rain the night before. It did not take the Sisters long to get the patients raised on trestle beds made of stretchers raised on boxes or anything they could get - kept the sick men in bed & ordered that bed pans should be given to them. Then again I noticed the first day I was on duty how dishevelled & dirty the patients looked, & there was no need because the Red X [Cross] supplied plenty of pyjamas, dressing gowns, slippers & razors. The men streamed up to the dressing tent looking more like wild men than anything else, unshaven, long hair & weeks of dirt & vermin on them. In a few days after our arrival the men presented a very different appearance, they had groomed themselves & had a wash & I’m sure were feeling better in consequence.

During the first days on Lemnos I hear the water was very scarce, but when we arrived there in Sept 1915, there was a good supply & no excuse for neglect of patients. Nobody will ever realise the personal discomfort the men suffered through vermin & no change of clothes except those who actually saw them come in from the Peninsula. We used to take their dressings off & find even their wounds crawling with vermin & even sponging & putting them into clean pyjamas did not always rid them of the vermin. Then when night came we use[d] to sit on the sides of our own bunks & search our own garments one by one till we had found all stray ones. I do not know which worried me the most, those or the big black centipedes that use to crawl from under the tarpaulin on the floor & occasionally find their way into our beds. In speaking of the regard with which the officers held the orderlies, I should just like to mention one incident in the operating tent one day___I asked the orderly for a bundle of sterile dressing towels & he handed me some which I happened to know were not sterilised, so I said those will not do, the surgeon will need sterilised ones, so the orderly said never mind Sister, the Captain won’t be any wiser, I never think of sterilising the towels for him & he never knows. Of course I put this down to ignorance, he little knew the danger he was exposing the patient to. So far I have stated only the horrors of Lemnos, but we were greatly compensated for all our hard-ships by the great courtesy & kindness of the men towards the Sisters, including the naval men. Many a time when we would only have the bare rations for our mess, the naval officers would send up cakes & sweets out of their own hampers from home to us. In November about 26th there was a great blizzard on the Peninsula & after that the patients came onto the island in hundreds suffering from frost-bite. They came in such numbers that Ambulances were not able to convey them all to the hospitals, so they were brought to the hospital in transport wagons. So bad were their feet that they simply fell out of the wagons and crawled down to the tents on their hands and knees. Many of them had their hands frost bitten as well, they told me they got it going down from their post to the boat, as their feet were too sore to walk & they had to assist themselves on their hands. They seemed to respond fairly well to the treatment of dry boracic & cotton wool. After the blizzard we noticed we got very few cases of dysentery & jaundice.

In January 1916, after the evacuation of the Peninsula, No 2 A.S.H. embarked on the Dunvegan Castle & we left for Alexandria. The Sisters were sent to Cairo where we rejoined our old unit No 2 A.G.H. at Ghezireh Palace for temporary duty. I was only there a fortnight when orders came from headquarters for me to go to Ismailia & join the staff of No 1 A.S.H. then stationed there. I found it well organised, well equipped (with necessities) hospital, where it was quite easy to work, although we had very severe cases of dysentery, pneumonia [& various forms of fevers]. It seemed like paradise to get into civilisation again after Lemnos; our quarters were in French villas & the hospital in a convent quite near. We were able to give the patients every care while nursing them in No 1 A.S.H. The food was good & in plenty, & we had every help from our officers of the unit as far as the welfare of the patients was concerned. The pneumonia cases did remarkably well, while the dysentery cases recovered sufficiently to have them transferred to the Base Hospital at Cairo. Emetine was used carefully for the treatment of the dysentery cases.

In September 1916, orders came for the unit to be transferred to England, so I with a staff of 10 Sisters left on the hospital ship Letitia for England. The English Sisters were taken off & we did duty on the boat during the voyage. We had on board 500 patients, the greater number being from Mesopotamia. Our ward had 70 tubercular patients, some of them being in the last stages of the disease, one death occurring from amongst them. I was in charge of the officer's ward, where I had some medical cases & the patients looked most emaciated, not as much from the sickness they were suffering from, as the hardships they had endured. The equipment on the ship was good & food for the patients excellent, with a liberal supply of British Red X [Cross] goods. After arriving in England I remained on duty at Southall for a few weeks till [until] No 1 A.S.H. arrived in England, then where it was established at Dartford as No 3 A.A.H. I returned to the old unit, where again I found a well organised, well disciplined hospital. We took the greater number of patients as convalescents, although there were some wards kept & were always filled with acute cases, mostly wounded.

I remained at Dartford till [until] I was promoted & made a Head Sister & was transferred to No. 3 A.G.H. at Brighton. I cannot speak very much in favour of the hospital as I was put in charge of an underground ward of 100 beds mostly nephritis cases. Imagine having nephritis patients underground. However my reign there was short as orders came through for the 3 A.G.H. to go to France. It was an evil ward for sick men. I remember so well one morning there was a new medical officer doing rounds in my ward, & he asked me which was the best Auxiliary Hospital to transfer the patients to so I promptly said No 3 A.A.H. at Dartford, so quite a number of stretcher cases were marked for Dartford, where I knew the equipment was better than any of our other hospitals & the whole hospital heated with steam pipes. However next morning instead of all my poor stretcher cases going to Dartford a burly Sergeant came into my Duty Room demanded that no stretcher cases were to go to Dartford, they all had to go to Harefield, knowing the difference between Harefield & Dartford I was indignant to say the least of it, especially as I knew that headquarters had given orders that all Auxiliary hospitals were to get a share of stretcher cases.

In April 1917, the Nursing Sisters of the 3 A.G.H. left London for France, we were divided into 3 lots, each lot going to different British hospitals for duty, till [until] our own hospital was ready, which was being established at Abbeville. I went to No 2 [British] Stationary Hospital at Abbeville for duty & liked being with the British very much. The O.C. and Matron were both Army Regulars & exceedingly nice to work for. We slept in Bell Tents and provided our own equipment. The hospital was very busy

at the time & we admitted wounded almost daily, if I remember rightly they were from Bullecourt. The wounds were very dreadful, but the medical staff was good, though the nursing staff was small, a number of V.A.D's being employed. The Matron made use of some of us for what she called special convoy duty, we always had to be called when a convoy was being admitted. Sometimes we would be sent for just as we were creeping into bed at 9pm, other times we would be awakened at 2 a.m to get up & go on duty. The equipment of the hospital was good & admitting a big convoy was made much easier for us by the fact that although the orderlies were an ignorant class of boys & quite untrained in nursing, they were trained to discipline & would always do as we told them.

In June of the same year the Matron of the 3 A.G.H. took another Sister & me down to Compiègne to attend a school of Instruction at the Carrel Dakin Hospital there. We used to go each day at 8.30am just as the Chief Surgeon was starting on his round of dressings. In my opinion the treatment if carried out correctly was most successful & the results more than satisfactory. I saw patients in the hospital with compound fractures of the legs. In 9 days from the time the [wound] was done the wound was clean enough to stitch up & the leg done up in a splint, as a simple fracture. The Carrel Dakin treatment as I saw it was this [thus] -- The dressings were removed & the surface of the wound [illegible] and surrounding parts cleaned with liquid soap. In wounds that are not able to take the tubes Dakin's emulsion is applied.. [surface wounds?]. The tubes are removed only every 2 or 3 days to be sterilised. Cultures are taken every 2nd day (no irrigation having been done to the wound for some hours before the culture is taken) till [clean/clear], then the daily for 5 days before stitching up. I have seen wounds stitched up & heal by first [intention?] within a few days with the treatment, other wounds I have seen suppurate & the patient develop a high temperature immediately following the operation, but on inquiring from the patient what treatment he had, I found that the man who healed up straight away was the man who had the Carrel's tubes put in to his wounds as he was wounded. After the dressing was removed & the surrounding parts cleaned with liquid soap, the tubes if not taken out should be irrigated to see the perforations are not blocked, then the wound packed with Dakin [gauze?] & a thick pad of wool applied. It is usual to irrigate the wound 2 [hourly?] & if properly carried out there should be no drainage through onto the bed. The dressing was only changed once in 24 hrs. I have heard many medical officers & Sisters complain that the treatment caused severe haemorrhage in many cases, but I was more fortunate & saw no haemorrhages, only the best results.

While at Compiègne we were taken over a French Military Hospital which was quite the most desolate place I was ever in. No trained nurses, but some French V.A.D's that were giving their best work to the soldiers & were very charming women. We were also shown over the Rothschild's Hospital where the treatment of "Ambrine" for burns was a great success. We were shown patients that had just been admitted & were shown how to dress them & also patients that had quite recovered. Although the burns had been extensive, it was difficult to notice any scar even. The treatment as we saw it was this [thus]. The blisters were cut and all loose skin removed. Surface of wound irrigated with Peroxide & surrounding parts cleaned with [abs?] alcohol and the wound dried with [electricity?]. Apply Zinc Oxide Pomade to healed edges. Spray Ambrine on the raw surface & cover with a thin layer of sterile cotton wool, then spray with another application of Ambrine & bandage with a thick pad of cotton wool. Change the dressing daily, & when removing the dressing it should peel off & give no pain or discomfort to the patient. No Ambrine should be applied over new tissue that is forming. I did not see the Ambrine used in our own hospitals for burns, though we got some very severe cases at times.

In October 1917 I was transferred to No 25 General Hospital, Hardelot. It was a British Hospital of over 2000 beds & I remained in that unit till [until] after the Armistice was signed when I applied to return home & I can truthfully say it was one of the happiest times of my military career. It was mostly a skin Hospital, although we took a number of surgical & medical cases. We had some [famous?] skin specialists on the staff, who seemed most satisfied with the progress the skin patients made with the care of the Australian Sisters. I cannot speak well of the treatment given to the skin patients as I was Matron's Assistant & spent most of my time helping her in the office when I was not round the wards enquiring after all the sick boys, whose next of kin I used to write to, to inform them of the patient's condition. The situation of the hospital to me seemed ideal. It was right on the beach & only about 2 miles from the most glorious woods one could ever imagine. The main part of the hospital was in an Hotel, the officer's hospital in a villa, as was also the medical block. The remainder of patients were under canvas until the last few months we were there, when they started putting up huts. There was a marked difference in the huts that were put up at the end of the war to those we started in. They seemed to have improved them in every way, both for the comfort of the patients & the convenience of the Sisters to work in.

I left England in January 1919 on board H.M.A.T. Demosthenes en route to Australia. We had about 1100 troops on board, 300 of which we took on at Suez, the greater number of which were malaria patients. The voyage home was a very pleasant trip, the troops being well conducted & apparently quite satisfied. The hospital was fairly well equipped, but to my surprise no splints were provided. The food for the patients was good, with a good supply of Red X [Cross] extras & comforts for the patients. We did not have much sickness on board; it was mostly sickness amongst the Malaria cases, with one case of Blackwater Fever, & two cases of Pneumonia, both of which recovered. One point that seemed to stir the indignation of a great many on board was the fact that when we reached the first port of call which was Albany, the M.O. wanted to disembark our case of Blackwater Fever who was practically in a dying condition & have him sent straight to hospital but the authorities said "no", he would have to go in to Quarantine amongst the Influenza cases. At each of the ports the same answer was given. The Boy's destination was Queensland but at Sydney he was taken ashore & sent to a Military Hospital.

I seem to have written a great deal but I'm afraid there is a great deal that will be of use to any Record office, but anything I have written is quite fact.

N Morrice H/Sister

A.A.N.S.

7.6.19