

the making of **Medway Maritime Hospital**

A short history of the hospital - the early days

Compiled by Vivien Bouttell

Originally a naval hospital, the site was taken under the aegis of the NHS in 1961 and was simply called Medway Hospital for many years. In the mid 1990s a large extension was added to the hospital, bringing more services onto the site, and staff were asked to contribute their ideas for a fresh name to begin a new era. The name chosen was Medway Maritime Hospital and a logo was designed to incorporate the former naval links, with compass points, rope and sails. Although the logo has now been replaced by a modern graphic based on the clock tower, the name has remained, although the hospital is usually referred to locally as "The Medway". The story began over a century ago...



King Edward VII leaving the hospital after the official opening 1905

How it all began

The town of Chatham, lying on the banks of the river Medway in Kent was home to one of the main Royal Dockyards for centuries, with a large naval presence. There was also a substantial military presence, said to be the largest in the country before the building of Aldershot. These establishments attracted a high number of people to the town and surrounding area, looking for work. The general public had St Bartholmew's Hospital in Rochester and the military barracks had various hospitals of their own. The Royal Navy also provided hospital care and in 1827 a dedicated naval hospital, the Melville Hospital, was built just outside the dockyard gates. It was an imposing structure with several wards, but by the end of the century the Royal Navy was expanding to meet the

threats of war and the hospital was becoming increasingly overcrowded.

Plans were drawn up to replace the Melville with a larger hospital and a plot of 39 acres of farmland, on Windmill Hill, near the top of Chatham Hill, was purchased in 1899. The location was described as 'isolated' and it was felt that the hospital would be far enough away from the smoke from the dockyard and the fumes from the cement works on the north bank of the river, which were declared "very objectionable at the present naval hospital" – the Melville Hospital¹. The Lords of the Admiralty inspected it personally and declared it to be "a site unsurpassed by any in the country". The style of the buildings followed the examples used by the

Metropolitan Asylums Board's hospitals, which were judged to be the best at the time². It cost £800,000 to build and the main corridor, designed by ITC Murray, was more than 900 feet long. The buildings, which included six adjoining ward blocks and a church, were completed ready for the official opening in 1905.

On 26 July 1905, allegedly a very hot day, at approximately 11am, King Edward VII, in an open landau, was driven through the main gates. He attended a service in the church, accompanied by the following dignitaries³:

Rear Admiral Davis, Rear Admiral Graham⁴ Inspector General Pollard⁵, Captain Kirby, Commander Stopford⁶, Deputy Inspector O'Grady, Reverend Chaplain

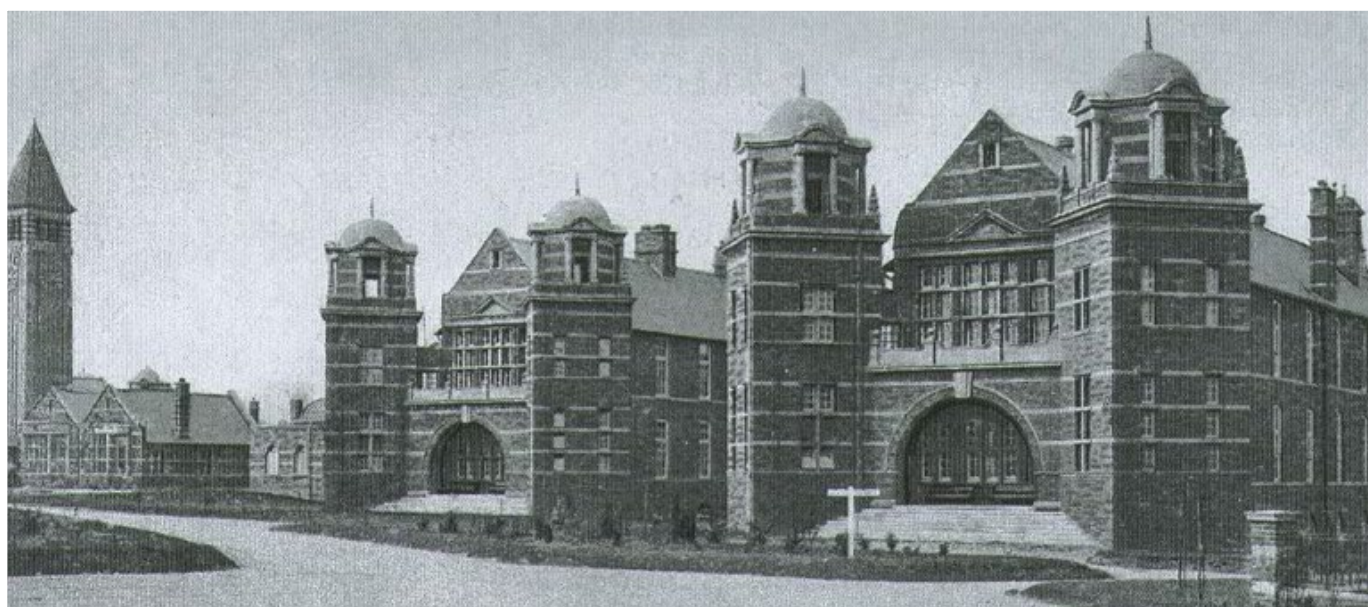
J. Moriarty⁷, Colonel Commandant Gordon⁸, Superintendent Civil Engineer Parr⁹, Civil Engineer Brinson, Head Sister Mackay¹⁰, Admiral Sir Hugo L. Pearson, KCB¹¹.

The King was presented with a silver casket containing a specially made gold key¹² which he placed in the lock of the hospital front door, turning it and declaring Medway Hospital open. He then undertook a tour of the buildings, delighting the staff and patients.



Courtesy of D Price 315

The original administrative front block of the hospital – presumably the door on the right was the one that the king unlocked.



Original ward block entrances

The hospital buildings

The new hospital consisted of six blocks or pavilions, labelled from A to F, which contained a total of 14 wards. At the end of each block were 'sanitary towers' housing toilets and washrooms, as well as fire escapes. The hospital had accommodation for 680 patients – with capacity to increase this to 900 in wartime.

The wards were laid out in the Nightingale formation, with 28 beds and there was also a 'separation cabin' on each ward with 2 beds and separate toilet facilities. Patients had access to balconies or verandahs at the end of each ward if the weather was fine. A description in 1914 tells us: "The walls are covered with

enamel paint; all corners and angles rounded; the floors of pitch pine with secret nailing are polished¹."

The administrative block, which ran across the front of the hospital opened into a large entrance hall. The rest of the ground floor on either side contained outpatient and

admission rooms, offices, an ophthalmic room, X-ray room, telephone, the library and board room. Above them were the laboratory, research rooms and the pathological museum. Behind this block, there were small smoking shelters erected between ward blocks with access from the long hospital corridor.

Behind the main hospital buildings was an isolation or infection unit containing four wards, standing alone near the rear corner of the site close to the junction of York Road and Marlborough Road. This was an independent unit with its own staff, containing an operating theatre, kitchen, mortuary, etc., taking patients with infectious diseases. These included mumps, measles, chicken pox and scarlet fever. The unit was segregated from the main hospital by a double fenced area approximately eight yards wide. Staff had to live in the unit whilst on duty and were not allowed to go into the main hospital. Any patients transferred to the main hospital first had to be bathed and given fresh clothes.

Dotted around the perimeter of the site were the residences, used by personnel involved in the running of the hospital. At the main gate was the police station, which later became the Porter's Lodge. This was originally occupied by the Metropolitan Police, who patrolled all areas of the hospital grounds around the clock. In later years they would be replaced by Ministry of Defence police until the handover to the NHS. Starting from the left of the



The hospital from the west showing the residences against the perimeter wall

main gate, the residences were allocated as follows:

1. Butler's Quarters, 2. Engineers, 3. Store Foreman, 4. and 5. Police Quarters, 6. Assistant Dispenser, 6a. Head Wardmaster, 7. Store Keeper, 7a. Cashier, 7b. Chaplain, 8. Inspector General, 9. First Fleet Surgeon, 10. Second Fleet Surgeon, 11. Deputy Inspector General, 12. Surgeons Quarters, 13. Nursing Sisters, 14. Dispenser, 15. Secretary, 16. Store Matron, 17. Stables, 18. Sisters Quarters (Infectious Division).

The last three were demolished at some point to make way for other facilities. It was unusual for staff in naval hospitals at the time to have accommodation other than on the wards.

At the back of the site were the steam laundry and laundry store rooms, the engine and boiler house, the coal store, mortuary, dynamo rooms, the water tower and water softening plant, sheds for the motor and steam ambulances, a carpenter's shop and a blacksmith's shop. The basements of the ward

blocks housed store rooms for supplies, both for the hospital and for use on ships afloat². A reserve was always kept in case of urgent need. These were organised into supplies required for each class of ship. There was also a barber's shop and a sterilising room in one of the basements. In front of the hospital buildings stood the church, dedicated to St Luke, the patron saint of physicians. The foundation stone was laid on 1 May 1905 by Vice Admiral Sir Hugo Pearson³, C in C of the Nore. It was in regular use until 1961, when the hospital was handed over to the NHS, and in 1933 was granted a licence by the Bishop of Rochester for marriages to be performed.

A small cemetery lay in the corner of the site near to A Block, which contained the graves of those who died in the isolation wards. Headstones were removed during later expansion of the buildings and no traces remain now.

Standing guard above the hospital is the clock tower, a local landmark 130 feet tall. It mimics the style of the tower in



St Marks Square in Venice and this is echoed in the smaller water tower, a Grade 2 listed building standing 117 feet tall behind it. On the walls inside the clock tower are plaques commemorating some of those who died in the naval hospital.

On 11 June, 1911 three stained glass windows were dedicated to the church⁴. The first was presented by the widow of the late Paymaster General Cunyngham Scales RN, the second was dedicated to the Virgin Mary by the Reverend Arthur G. Yates, late chaplain, and the third to St Luke by officer patients between 1905 and 1910, in gratitude.

Around the buildings were large areas of lawn and trees, including lime and horse chestnut. Pavilions were erected where patients could sit and there were dedicated smoking shelters easily reached from the main hospital corridor. There was also a ship's figurehead who was christened Harriet.



MEMBERS of the Women's Royal Naval Service are being trained as sick berth attendants, primarily to nurse sick colleagues and *members of naval families, but also to relieve male sick berth attendants in naval establishments. Here a petty officer is giving instruction at the Royal Naval Hospital, Chatham, in the shadow of a figurehead from the former corvette Scout, famous in the middle of last century.



MEDICAL WARD, ROYAL NAVAL HOSPITAL, CHATHAM. 102

Staff, patients and hospital routine

When the new hospital opened it was staffed by nine Medical Officers, one Head Wardmaster, seventy sisters and seven sick berth attendants. Unfortunately we do not know the names of the surgeons in 1905, but in the 1911 census the head surgeon was Fleet Surgeon Alexander Gascoine Wildley¹ and the Head Nurse² was Katherine Mary Stickley. There appear to be 432 patients, but the census totals are confused and it does not show the distribution between the wards.

Discipline on the wards was strict, with patients who were confined to bed being expected to lie at attention during ward rounds. Those who were mobile were given mops and expected to polish the floors. The senior nursing staff would have outranked most of their patients and were well able to keep order.

Not all members of staff obeyed orders, however. In January 1914 Dr Edward Michael William Hearn³ was appointed radiologist and anaesthetist at the hospital. He had begun his career in the Royal Navy 10 years earlier and had received many good reports from the commanders and captains of his various postings – apart from a regrettable incident where he had tried to cover up his fellow officers' overspending their wine rations. He had obtained good marks in his examinations and was said to have a particular aptitude for anaesthetics. On 17 September 1914, however, he was put on report for being out after 11pm and causing a disturbance in Rochester. He was informed that he would be posted elsewhere, but on 26 September he was informed that his conduct was unsatisfactory and although

his ability was above average and he had performed his duties satisfactorily, he “never displayed any interest or energy, his one object being to get away from the hospital”. He was transferred a few weeks later.

There was a separate ward for patients with tuberculosis. The windows were kept open around the clock “except in case of gales”, and the ward temperature was checked three times daily. If it was found to be below 50°F in spite of the radiators, the ward fire was lit and patients given extra clothing. Patients who were fit enough were encouraged to sit in the hospital grounds if the weather permitted, whilst those who could not, had access to the balcony or verandah at the end of the ward. Seventy-four cases of tuberculosis were treated during 1913.

In 1913 an article in the British Medical Journal on the treatment of syphilis⁴ over a 30 month period stated that upto 130 beds were set aside for patients with venereal disease.

During 1913 the numbers of patients treated overall were:

- Medical - 1,595
- Surgical - 2,746
- Infectious diseases - 164

The most common surgical procedures were for repair of hernias, appendicectomy, haemorrhoidectomy, varicocele, hydrocele and the plating of fractures⁵.

On 14 July 1914, a party⁵ was held at the hospital, hosted by the Medical Director General Sir Arthur May⁶, formerly medical director at Medway, and Surgeon General J. J. Johnson. The party was attended by the deans and heads of various medical schools and seems to have been an event to promote the hospital facilities, presumably to reassure the attendees of their readiness to cope with the coming war.

The following list of staff appears:

- Surgeon-General: In sole charge
- Deputy Surgeon-General: In charge of the Medical Division, Zymotic (Infectious Diseases) Hospital, Sick Officers Medical
- Senior Fleet Surgeon (Operating Surgeon) : In charge of Senior Surgical Section, Sick Officers Surgical and Operating Theatres
- Junior Fleet Surgeon

(Operating Surgeon):

In charge of Junior Surgical Section, Eye and Ear Section, Surgical Instruments for Hospital Services, Resident Families

- Staff Surgeon 1: Anaesthetist and Radiographer, Massage Department
- Staff Surgeon 2: Acute Medical Wards, Tubercle Department
- Surgeon: General medical Wards, Zymotics
- Surgeon: Minor Surgical Wards. Salvarsan⁷ and Venereal
- Surgeon: Minor Surgical Wards and Venereal
- Surgeon: In charge of Laboratory and Instructor to Probationers' Sick Berth Attendants
- Surgeon: Venereal Ward

The nursing staff were as follows:

- Head Sister
- Superintendent Sister
- Nursing Sisters (2 on leave): 11
- Chief Sick Berth Stewards: 11
- Sick Berth Stewards: 11
- Second Sick Berth Stewards: 37
- Sick Berth Attendants: 69

This was a total of 141 and there were also 26 Second Sick Berth Attendants available for mobilisation.

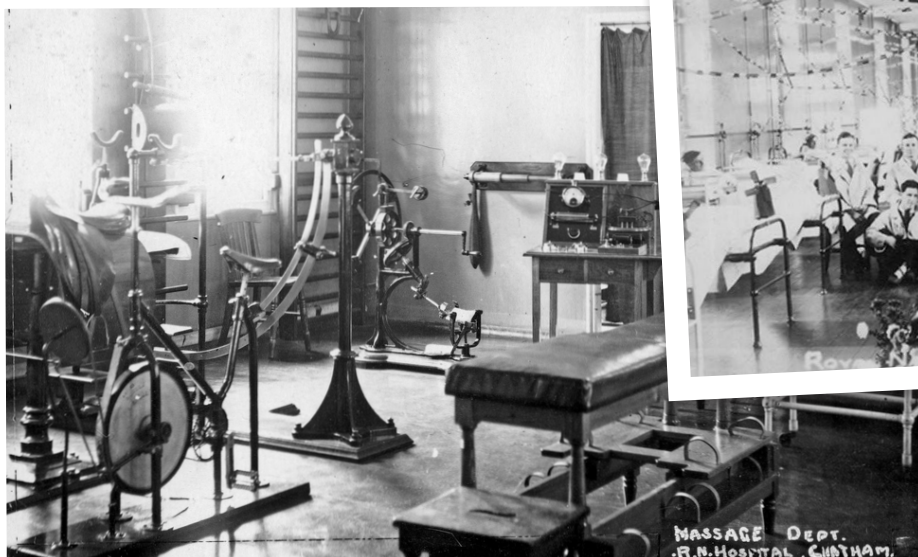
The training of Sick Berth Attendants at the hospital began in April 1912 and by July 1914 100 had completed the training, which lasted a year⁸. They were aged between 18 and 22 and had to pass a physical and educational test.



As well as caring for the sick the course included reading, writing, arithmetic and general dispensing of medication. Cooking for the sick was also included and involved having to pass a practical examination and participants also had to pass in swimming. During the

same period 175 St John's Ambulance members were trained in short courses, going on to join the Royal Naval Sick Berth Attendants Reserve. The average rate of pay for a Sick Berth Attendant in 1911 was 6d per day⁹ and they were expected to include cooking,

cleaning and other general duties in their work. However, in 1911 it was agreed that these should not be part of their role and civilian staff were brought in to allow the Attendants to concentrate on nursing.



The Massage Department

Massage had been used since at least 1850, but training was not standardised. The Naval Massage Service was formed in April 1917 and a Royal Naval School of Massage was opened at the hospital. Students were trained in "massage, medical gymnastics and medical electricity"¹⁰.

On 30 April 1917 Head Massage Sister Elspeth Kingdon¹¹ began work at Chatham. She had trained at St Thomas' Hospital in Swedish remedial massage exercises and had obtained an electricity certificate. Mrs Kingdon remained at Chatham until 1924, during which time her annual reports described her performance as either above average or exceptional.

Mental health patients were treated at the hospital and in 1937 one of only six mentally trained naval nurses, John Greene, was transferred to the hospital. The first thing he did was to get rid of straitjackets and during the Second World War staff used the padded cells to sleep in.

There were good times in later years. There was a hospital football team and a hockey team and a grass tennis court opposite Residence 8, presumably for the officers.

The hospital's Christmas parties invited wards to outdo each other in themed decorations and photographs taken in 1952 show a concert party. The hospital's 50th



Christmas 1931

anniversary celebrations in 1955 included a band, a 'silly costume' football match, and a dance in the WRNS quarters that saw the Surgeon Rear Admiral crowned with a Native American headdress.



The picture above shows a medal presented for a slow bicycle race at the hospital in 1955¹². Perhaps this was a patients' race as part of the rehabilitation process.



The King and Queen, accompanied by Prince George, far left, and Princess Mary, right, visit survivors of the Zeebrugge action 24th April 1918

The hospital at war

World War I

In December 1914 an article in the British Journal of Nursing¹ describes the hospital as the “newest and most perfect of our naval hospitals” and refers to “the perfectly equipped kitchens where the cooking is done entirely with electricity”. The head sister of the Queen Alexandra’s Royal Naval Nursing Service was stationed at the hospital at the time and the article, in the typically flowery prose of the period, ends “There should be comforts in plenty for the Fleet”.

On 26 November 1914 the hospital was involved in tragedy when HMS Bulwark², at anchor on the Medway west of Sheerness, was blown apart at 0750 hours. Of the 750 men

on board only 16 were rescued and taken to the hospital, but seven of those later died. The explosion literally blew the ship to pieces and the cause could not be definitely identified, but the investigators concluded that ammunition on board had detonated by some accidental means.

Six months after the loss of HMS Bulwark, the mortuary facilities at the hospital were called into use again when HM Auxiliary Ship Princess Irene³ blew apart whilst undergoing repairs at Sheerness Dock. This time the casualties were fewer with 273 men lost and only one survivor. Once again there was no definite cause established, but it was felt that a faulty mine primer

could have been to blame. Many of the dead were buried in Woodlands Cemetery in Gillingham, where the Admiralty reserved an area specifically for naval personnel.

Many casualties were treated at the hospital during both world wars and possibly the greatest test of the hospital’s resources came on the night of 3 September 1917 when German bombers dropped two 50kg bombs onto the Drill Hall at Chatham Dockyard⁴. The Drill Hall had been brought into service as a dormitory because there had been an outbreak of meningitis at the barracks and around 900 men were inside the building, most of them asleep. The blast from the bombs not only killed outright

but also shattered the glass roof, bringing lethal shards raining down to sever limbs and heads. The total number of dead was officially given as “no less than 130” with a further 88 wounded, but the actual figures still remain unclear. The Drill Hall Massacre, as it came to be known, was the worst bombing incident on UK soil during the First World War. It was noted that admissions for psychological disorders

at the hospital rose steadily throughout the First World War. – 635 in 1915 to 1,390 in 1918⁵.

A stage was installed in the recreation room in 1916, presented by the Shanghai branch of the Navy League. Allegedly, at some point a tunnel was dug between the naval barracks and the hospital church, to allow safe transfer of patients during air raids.

Chief Surgeon at the time of the royal visit in 1917 was Sir William Watson Cheyne⁶, who had been house surgeon to Joseph Lister and continued to promote the use of antiseptics after Lister’s death.

At the end of the war the influenza pandemic was beginning to take hold and it is recorded that on 29 June 1918 a special ambulance train left Chatham for Dover and returned some hours later bringing 104 patients⁷. On 10th July another train brought back 140 cases. One victim of the disease was Albert McKenzie VC⁸, who had been badly wounded on 23 April 1918 whilst leading a raid to recapture Zeebrugge. Later in the year he was recovering from his wounds in the hospital, despite suffering from a septic foot, when he caught the flu which turned into pneumonia. He died a week before the Armistice was signed, aged 19.



Inside a hospital train in World War II

A ‘Boys Own’ hero

During the 57 years that the Royal Navy ran the hospital, many naval medical staff were transferred there for short periods – a few months or even weeks – until their next posting aboard ship. One such person was Surgeon General Edward Leicester Atkinson⁹, based in Medway for a few weeks in 1916 and later for a year in 1919.

Edward Leicester Atkinson in his laboratory on the Polar expedition



A surgeon and parasitologist, between 1910 and 1913 he was a member of the Terra Nova expedition to the South Pole led by Captain Scott, and it was Edward Atkinson who took over leadership after his colleagues disappeared and then found the tent containing the bodies of Captain Scott and two members of his party. He was awarded the Polar Medal at the conclusion of the expedition and a four-mile stretch of cliffs on the north coast of Victoria Land was named after him.

Edward Atkinson saw action on several fronts during the war and was badly wounded in France by a shell in 1917, receiving the DSO for refusing to leave his post. In 1918 he was awarded the Albert Medal (now the George Medal) for bringing two unconscious men up onto the quarter deck of a burning ship in Dover harbour, having been initially knocked unconscious himself during the first explosion. Whilst attempting to rescue a third injured man he was caught in a second explosion which drove a piece of shrapnel through his leg, immobilising him. Atkinson had to remove the shrapnel himself and then brought a further two men onto the deck. He was temporarily blinded, badly burned and severely wounded as a result. In 1919 Atkinson was awarded the Chadwick Medal (Gold). This was given every five years to an officer of the Armed Forces who has, in the preceding years, especially assisted in promoting the health of personnel in the Navy, Army or Air Force. He died in 1929, at sea, aged 47.

World War II

In August 1939, as war broke out again, the number of medical staff at the hospital was as follows¹⁰;

- Surgeon Rear Admiral Sheldon Francis Dudley¹¹.
- 2 Surgeon Captains – John H Burdett (Medical) Robert Francis Preston Cory (Surgical)
- 6 Surgeon Commanders 2 Surgeon Lieutenant Commanders
- 2 Surgeon Lieutenants
- A Matron
- 2 Superintending Sisters
- A Senior Sister
- 18 Nursing Sisters

The list of medical staff in 1945 reflects the number of patients that the hospital received during the war¹²:

- Surgeon Rear Admiral C F O Sankey
- Temporary Surgeon Rear Admiral Gordon Gordon-Taylor¹³
- 3 Surgeon Captains, one specialising in diseases of the chest
- 6 surgeon Commanders¹⁴
- 16 Lieutenant Surgeon Commanders (some of whom were seconded from civilian hospitals)
- 2 Surgeon Lieutenants
- 1 Matron
- 2 Senior Sisters
- 48 Nursing Sisters

With high numbers of men joining the service during the war, those who were able-bodied were sent to sea. Some staff members were transferred from Chatham into theatres of war. Frank Baker¹⁵ for instance, a former Sick Berth Attendant at the hospital, was killed on 19 August 1942



Sir Sheldon F Dudley

in the abortive raid on Dieppe, known as Operation Jubilee. The men who were drafted in to take over the work as Sick Berth Attendants were often those who had some physical defect or were old or illiterate. Many failed their training examination and standards of nursing were often poor, both at sea and in the naval hospitals. It was reported that when staff at Chatham were instructed to give a patient with a hernia a blanket bath, they attempted to lower him into a bath with a blanket, and did not notice when another patient stopped breathing¹⁶.

Plans exist for a World War II operating theatre, built underground at the front of the hospital¹⁷, with a subterranean passage leading to it from the corridor on Level 1 between A and B blocks. No trace of it remains, but it is thought to have been sited near the main roundabout towards the multi-storey car park and ended near the



Sir Gordon Gordon-Taylor

perimeter road opposite the entrance to Residence 6. Psychiatrists were based at the hospital to treat sailors who had been evacuated from warships¹⁸.

In the early part of the war a German bomber scored a hit on A Block, making it

structurally unsafe, but at a later date it was converted to offices. Quarters were built for WRENS at the side of A Block, towards the eastern wall. They were later converted into a Social Club, but this was demolished in the rebuilding of A Block in the 1980s.

A patient at the hospital in 1943 was the author of *Lord of the Flies*, Lt William Golding¹⁹. Engaged in the development of weapons at an establishment in Buckinghamshire, he had developed the habit of walking around with detonators in one pocket and a battery in another, strictly against orders. The inevitable occurred and he suffered a severe injury to his thigh. Treated initially in Buckinghamshire, after six weeks he was discharged to his home in Kent, only to be admitted to the hospital at Chatham for a further five days.

In 1945 Surgeon Captain Thomas Latimer Cleave was transferred to the hospital for a period of three years following completion of his war service. He was a pioneer in nutrition and highlighted the dangers of refined carbohydrates, but his work was not recognised until the 1970s. During the war he acquired the nickname of "the bran man" because he insisted on having sacks of bran delivered on board ship to combat constipation amongst the sailors²⁰.

Following the war, security was tightened. Visitors had to ring the bell at the hospital gates and tell the security staff at the lodge which patient they had come to see. The staff would then telephone the ward and, if entry was granted, a member of staff would be sent to escort them.



NAVAL HOSPITAL (ENTRANCE) CHATHAM

The original entrance to the site with the police guard



The closing ceremony in 1961

The handover

In 1958 a local MP, Mr Wells, raised a question in the House of Commons¹ regarding complaints that had been made by the people of the Medway and Swale area that there was a shortage of beds for acutely ill patients. The Minister of Health responded that the regional board was examining the possibility of using the Royal Navy hospital which would become available in 1961. He added that a number of civilian cases were already being treated in the hospital.

In 1959 Lord Louis Mountbatten, the First Sea Lord, paid a visit to the hospital² and was followed a year later by Princess Alexandra of Kent³.

In 1960 the MP for Gillingham, Sir Frederick Burden, raised a question about the plans for the hospital⁴ and was told that it would come under the aegis of the National Health Service on 1 April 1961. He was told that considerable work needed to be carried out to enable it to fulfil its role and that it was likely that around 100 beds would be available for "general acute work" within two years and it was hoped to find employment for the 200 or so civilian employees. In 1961 the hospital was transferred to the care of the Medway Health Authority. It closed for modernisation and reopened in 1965.

The last service to be held in St Luke's Church was the

official ceremony of closure on 30 January 1961. Amongst those present were:

Surgeon General Admiral V. W. Beech: Chaplain of the Fleet, Venerable Archdeacon J. Armstrong⁵: Admiral Sir Robin Durnford-Slater⁶: Medical Director and General Superintendent, Vice Admiral W. R. S. Panckridge⁷.

Then, with a full parade led by a brass band, the Royal Navy marched out through the gates.

Sources and notes

A few of the photographs were taken from the collection in the hospital Post Graduate Library.

How it began

Picture of King Edward VII leaving the hospital - www.kenthistoryforum.co.uk

New hospital site plan¹. BMJ 9th June 1900

Style of buildings². The plan shown in the BMJ July 1914 of the finished hospital shows that the design was followed faithfully. The only major changes appear to be the addition of some buildings along the southern perimeter wall and the church. BMJ 9th June 1900/July 1914

Opening ceremony attendees³. Robin Estick (Hospital chaplaincy) 1983

Rear Admiral Graham⁴. This was Walter H.B. Graham, Rear Admiral commanding Reserve division at Sheerness and Chatham in 1905. (Navy List 1905)

Inspector General Pollard⁵. This was Evelyn R. H. Pollard, appointed Inspector General of the Royal Hospital at Chatham in 1905. (Navy List 1905)

Commander Stopford⁶. This was Frederick George Stopford. He was appointed Commodore 2nd class of the Royal Naval Barracks at Chatham in 1905. (www.dreadnoughtproject.org)

Reverend Chaplain J. Moriarty⁷. This was James H. Moriarty, appointed as Chaplain and Naval Instructor in 1903. He was later transferred to Portsmouth. (Navy List 1905)

Colonel Commandant Gordon⁸. This was Cosmo G. Gordon, of the Light Marine Infantry. (London Gazette May 5th 1903)

Superintendent Civil Engineer Parr⁹. L. Parr is listed in this role in May 1905. (Navy List 1905)

Head Sister Mackay¹⁰. This was Grace Hamilton Mackay, a head sister in Queen Alexandra's Royal Naval Nursing Corps. Miss Mackay

had a rather chequered career: she began at Haslar Hospital in 1884 and moving to the Melville Hospital in 1885, then back to Haslar, followed by Malta and Plymouth. In 1895 she was declared unfit for duty, but reprieved and then incurred "grave displeasure" for refusing to carry out an order. She was transferred back to the Melville Hospital in 1902 after giving information to the press, and complained about her accommodation there in 1904. After the move to the new hospital she was complaining about her colleagues and was warned about her unsatisfactory conduct. She was declared unfit for duty in 1909, retired and then moved to live in Windmill Road. The final comment in her record reads: "In completing her arrangements for the future she may rest assured that she will not be recalled to service under the Admiralty". (Census 1911, National Archives ADM 104 Nursing service register)

Admiral Sir Hugo L. Pearson¹¹. He joined the Royal Navy in 1855 and served on several vessels. He was Commander of the Royal Yacht Osborne and Naval ADC to Queen Victoria for some years. He was Commander in Chief of the Australia station from 1898 to 1901 and Commander in Chief at the Nore from 1904 to 1907. He was knighted in 1904 and died in 1912. (Colonist, Volume LIV, Issue 13445, 17 June 1912)

Presentation of the key¹². www.sussexhistoryforum.co.uk

The hospital buildings

Description of the wards¹. Although the report in the BMJ of 1914 describes pitch pine floors, the BMJ (9 June 1900), described them as being of teak.

Picture of 2 Blocks www.kenthistoryforum.co.uk/

Picture of hospital showing the residences www.kenthistoryforum.co.uk/

Basement stores². BMJ July 1914

Sir Hugo Pearson³. www.campus.medway.ac.uk

Church windows⁴. Robin Estick (hospital chaplaincy) 1983

Reverend Arthur G. Yates⁵. Reverend Yates was chaplain for the Caledonia, the boys' training establishment. At Queensferry, Sheppey when the hospital opened. In 1906 he was in a similar role at Harwich and was transferred to become the Medway Hospital chaplain in 1907. His name appears in the Navy List for 1911, but may have died in 1910. (Navy Lists)

Picture of St Luke's Church
www.churchpo.stcardviews.co.uk/

Picture of ship's figurehead. The Age May 31st 1949, Google News

Hospital routine

Fleet Surgeon Alexander Gascoine Wildley.¹ F/S Wildley was transferred to Medway in 1911 but did not stay long. By 1913 he had been promoted to Deputy Surgeon General at Haslar. During the First World War he had a distinguished career, being awarded the Legion of Honour, the United States of America Navy Cross, and Commander of the Order of the Crown, Italy. He was made Surgeon Rear Admiral and knighted in 1919. (Navy Lists, UK Naval Medal and Award Rolls)

Head Nurse². A Naval Nursing Service was first established in 1884, at Haslar, in Portsmouth, and in Plymouth. In 1897 the service was extended to Chatham and Malta and, in 1901, to all Royal Naval Hospitals. In 1902, the service was renamed the Queen Alexandra's Royal Naval Nursing Service (QARNNS). There was also a QARNNS Reserve, of civilian nurses, for service in wartime only. (The first nursing services in the Royal Navy - National Archives.)

Picture of a ward by Vernon Hancock
www.kenthistoryforum.co.uk/

Dr Hearn³. Medical Officers ADM 104 Vol 10. National Archives.

The treatment of Syphilis⁴ at the Royal Naval Hospital Chatham by Surgeon Gilbert Bodley

Scott RN – BMJ November 22nd 1913.

Statistics for 1913⁵. BMJ 18th July 1914

Garden Party⁵. BMJ 18th July 1914

Medical Director General Sir Arthur May, KCB⁶. He joined the Royal Naval Medical Service in 1878 and took part in the Egyptian war of 1882, where he received the Khedive's bronze star. He was mentioned in dispatches for devotion to duty whilst part of the expedition to relieve General Gordon at the Siege of Khartoum in 1884. He was Medical Director at Chatham between 1910 and 1913, after which he took up his post at the Admiralty. His term of office there ended in 1917. He was knighted in 1914. (Obituary, Br Med J. 1925 May 2)

Picture of Sir Arthur May.
www.sttudehistorygroup.co.uk/

Salvarsan⁷. This was the first organic anti-syphilitic, the first man-made chemotherapy agent, invented in Germany in 1909. It was described as a 'magic bullet', being the first cure for the disease which had previously been treated with a variety of ineffectual substances including mercury and arsenic.

Training of Sick Berth attendants⁵. BMJ 18th July 1914.

Sick Berth Attendants pay and role⁹. British Journal of Nursing September 9th 1911.

Picture of the Massage Room. Royal Naval School of Massage. www.sciencedirect.com/

The History of Massage and Physiotherapy in the Royal Navy¹⁰ – Jack Stockton

Mrs Elspeth Kingdon¹¹. National Archives, ADM 104 Vol 1 Register of services of massage sisters in naval hospitals.

Medal¹². Ebay (France)

John Greene. The Guardian 23 May 2001
Picture of Christmas 1931. National Museum of the Royal Navy, Portsmouth.

The Hospital at war

¹Miss Margaret H Keenan was Matron in Chief of the QARNNS between 1927 and 1929. She was transferred to Chatham on the recommendation of Grace Mackay. The British Journal of Nursing 19th December 1914.

HMS Bulwark².
www.wessexwfa.org.uk/
www.navalhistory.net/

HMAS Princess Irene³.
www.wessexwfa.org.uk/

Chatham Drill Hall Massacre⁴.
www.campus.medway.ac.uk/

Royal Naval Psychiatry⁵: Organisation, Methods and Outcomes 1900-1945 by Edgar Jones and Neil Greenberg - Mariner's Mirror 92, no.2 2006

Picture of the Royal visit 1917. Copyright (c) Mary Evans Picture Library 2008

Sir William Watson Cheyne⁶.
www.watson-cheyne.com/

Ambulance trains⁷. First introduced in 1900, the trains had been specifically built to carry stretchers and had been used to evacuate wounded troops from the front as well as on disembarking. They carried a crew of medical officers and orderlies.
(www.worldnavalships.com) (bmj 2 June 1900)

Albert McKenzie VC⁸.
www.millwallfc.co.uk/
Inside a hospital train.
www.kenthistoryforum.co.uk/

A 'Boys Own' hero⁹.
www.haslarheritagegroup.co.uk/

Staff in 1939¹⁰. The Surgeon Commanders included William A Hopkins who carried out research into causes of the common cold.
www.digital.nls.uk/

Sir Sheldon Francis Dudley¹¹. He was previously a professor of Pathology at the Royal Naval Medical College at Greenwich and in 1941 became Medical Director General of

the Royal Navy. He was knighted in the 1942 Birthday Honours list.
<http://munksroll.rcplondon.ac.uk/> www.npg.org/ .

Staff in 1945¹².
www.digital.nls.uk/

Sir Gordon Gordon-Taylor¹³. An expert anatomist, Gordon-Taylor became known during World War I for taking on cases with severe abdominal wounds. He was a pioneer of blood transfusion and an acclaimed orator, lecturing in many different countries. His knowledge of anatomy led him to become an examiner and he presided over examinations in Australia, India and Sri Lanka. He came out of retirement to join the Royal Navy in 1939, having been rejected by the Army because of his age. In later years he worked as an adviser for the British Council, travelling abroad wherever British surgery could be of help.
www.livesonline.rceng.ac.uk/
www.tandfonline.com/

Surgeon Commanders¹⁴. One of these was Eric Thomas Sutherland Rudd, who would go on to be appointed honorary surgeon to the Queen in 1955. www.genealogy.kolthammer.org/ Another was L B Osborne, who would be appointed honorary dental surgeon to King George VI in 1951 and later to the Queen and would take part in the Coronation Procession in 1953.
www.householdcavalry.info/

Frank Baker¹⁵.
www.naval-history.net/

Poor standards of nursing¹⁶. Poxed and Scurvied: the Story of Sickness and Health at Sea by Kevin Brown - Naval Institute Press, 2011

Underground theatre¹⁷. It is said to have cost £7,500. www.sussexhistoryforum.co.uk and Medway Maritime Hospital Estates.

Royal Naval Psychiatry¹⁸: Organisation, Methods and Outcomes 1900-1945 by Edgar Jones and Neil Greenberg

William Golding¹⁹: The Man who Wrote Lord of the Flies by John Carey - Faber & Faber, 2010

Surgeon Captain Cleave²⁰.
www.archives.wellcomelibrary.org/

The Handover

Parliamentary questions¹.
<http://hansard.millbanksystems.com>

Earl Mountbatten².
www.southampton.ac.uk – Mountbatten papers.

Princess Alexandra of Kent³. 6 July 1960 –
Credit Keystone-France

Parliamentary questions⁴.
<http://hansard.millbanksystems.com>

Chaplain of the Fleet, Venerable Archdeacon J. Armstrong⁵. The Reverend John Armstrong was awarded the OBE for devotion to duty during the Battle of Narvik in World War II and from 1958 to 1961 was Honorary Chaplain to H. M. The Queen and awarded the C.B.E. He retired in 1963. www.the.saleroom.com

Sir Robin Leonard Francis Durnford-Slater KCB⁶. In 1956 he was awarded Commander of the Legion of Honour for services during the Suez Crisis. He was the last Commander in Chief of the Nore, retiring in 1961, (The Gazette)

General Superintendent, Vice Admiral W. R. S. Panckridge⁷. In 1958 he was appointed Honorary Physician to HM The Queen. (The Gazette)

Picture of the closing ceremony -
www.kenthistoryforum.co.uk/

