



NEWSLETTER

FEBRUARY 2022

President's Report

January 2022

Welcome to 2022. I hope you have all had a lovely Christmas and holiday break.

We certainly have not started the year how we wanted to, in fact I'm sure we are all suffering from a bit of cabin fever.

Our Tuesday Heritage Village volunteer group ended last year with a little celebration lunch at the Parkhurst Tavern, with high hopes we would start the New Year in a much more positive way.

Unfortunately, we have somewhat regressed. With school starting dates pushed back a couple of weeks, Covid restrictions and the alarming number of local cases, our Tuesday group decided to stay at home for a while. We are doing our best to stay safe until Covid numbers settle and the hospitals are not so stretched should anyone need them.

As there was no urgent business to discuss, the January Management Committee Meeting was cancelled. We look forward to getting back together for the February meeting to start the year afresh.

Dot Broad has been in contact with the Council and they have kindly waived fees for Scotia Place once again so we once again have a venue to hold our monthly meetings.

You may recall from our September Newsletter that our Standards Review was stalled in August when Covid restrictions prevented the review team from visiting. This hasn't changed. Tara from Museums and Galleries Queensland has been in touch and is trying to arrange new dates for the 'field visit'. Tara understands our safety concerns and no definite date has been set as yet. We certainly look forward to resuming our review which has a number of stages still to complete after the review visit.

We need to set goals to work on to keep the enthusiasm alive when we are able to return to normal.

Let's hope and pray the pandemic comes to an end soon, but in the meantime, we will continue to

adapt and live with the virus which has bought the whole world to its knees time and time again.

May the rest of the year bring positive results and we can return to some normalcy in our lives.

Bring on 2022.

Del Leitgeb
President

Olga Evans story

You never know what's going to turn up next in our collection. While going through the late Norma West's papers, I found this small mailing tube. Closer inspection revealed 19 tightly wrapped handwritten A4 sheets – fortunately in excellent handwriting. This was the text of a presentation which the late Olga Evans née Glazebrook had presented to a meeting of the University of the Third Age (U3A) on 6th April 2002.



Olga was a life members and I reported her passing in the November 2018 newsletter. She was 97. Olga's training years were 1939 – 1945, hard years with shortages of materials and the risk of attack. I really enjoyed the story and thought it would be well worth sharing with you. It's quite long, so I have only included the first half in this newsletter. Remember that when Olga says 60 years ago, it's now 80 eighty years ago!

The second short story draws on our oral history collection, mainly an interview with the late Dr T B Lynch conducted by Dr Tom Dewar 13 Feb 2007.

My nursing experiences 1939—1945**Olga Evans née Glazebrook (1921-2018)**

So much to tell you – where do I start?

Before I tell you about my training days as a General and Midwifery nurse, let me take you back in time to 1945 - the end of a long sad war. The peace treaty had been signed.

Imagine, if you can, the scene before us – and be part of it. In the distance hear the heavy regular tread of the soldiers marching in perfect time to the sonorous throbbing beat of the drums and the stirring of the military brass band, playing the Victory March. The boys are coming home, and the air is filled with excitement, and the people – the civilians – are there.

There are the wives waiting to greet their husbands with their children, some of whom have not yet seen their father. The soldiers' mothers and fathers, brothers, sisters, uncles, aunts, friends – they are all there.

There's a woman there with a breaking heart, but still managing to smile, with a glowing light of pride in her eyes, a tear falling softly upon her cheeks – her man has paid the supreme sacrifice and will not be coming home. The voluntary workers are there and the grandmas who knitted balaclavas and socks, tucking a loving message into the toe of the socks, for the young soldier she will most probably never meet.

The farmers, the butchers, who helped stretch the coupons for their goods for the families are there. The air raid wardens, locomotive drivers, VADS, young Red Cross girls, local bus drivers who transported American soldiers to and from their camps at all hours, in varying stages of inebriation. The young nurse who managed to sneak a few minutes to join this wonderful group of people agog with excitement. The "Stay at Homes" I call them. The ones who kept the home fires burning "until the boys come home" – and here they are!!

A little more than a week ago, on Anzac Day, we showed our pride and gratitude to these boys, some now old men, all of whom served their country in this and other wars as they proudly took part in the march.

Spare a thought in these special times for the "Stay at Homes" – the unsung heroes of the war. No one will ever know what they proudly contributed to "The Victory". Among them the nurses who kept the hospitals running in difficult times.

Now let's go back to 1939.

I had gained my Junior Public Examination Certificate (Grade 10). Not many girls went on to further education then except those who had chosen teaching as their career. I took a position as Governess at the tender age of 17 years. After teaching three children by correspondence and also teaching music, I decided at the end of the year that I didn't want to continue as a governess.

My mother had been encouraging me to train as a nurse. She had completed 18 months nursing in a private hospital, and I think in a nostalgic sort of way, she wanted me to carry on where she left off and fulfill her dream.

Up until this time I was not interested. However, after a year as a governess, I suddenly decided I would apply to train as a nurse, as governessing was not for me.

Having attended an Anglican Church school, I applied to the Anglican Hospital, St Martins, in Brisbane. A gift of £100.00 had to be paid to the hospital to allow the privilege to train there. I was the second eldest of five children, and Mum and Dad didn't have £100.00 to spare. That was a lot of money. When I did commence training my wage would be £2.90 shillings a fortnight, so £100 was near a year of wages for me.

I applied to the Rockhampton General Hospital, the RGH.

There was a long waiting list of girls wanting to train as a nurse. I was then 17 years 3 months. It was necessary for me to be 18 before I could commence nursing, so I had a while to wait.

In July 1939, I received a letter from Matron Green at the RGH asking if I would consider working at the Westwood Sanatorium for patients with tuberculosis, doing nursing duties while I was awaiting my call to the RGH. The Sanatorium was part of the Rockhampton Base Complex.

Pleased to be getting closer to training as a nurse, I eagerly accepted. I was duly met at the railway siding at Huxham with my goods and chattels by Lennie, a wardsman driving a horse and buggy – which was to be our way of transport to and from the railway siding for our time at "The San".

The Sanatorium was built on a slight hill in the middle of nowhere it seemed. It consisted of several open plan, well aired buildings for maximum intake of fresh air. Most patients were nursed on the verandahs.



The Westwood buggy, used to transfer people between Huxham siding and the Sanatorium. The driver in this 1936 photograph is Mr W Dixon.

I was to be at “The San” for 6 months – working 5 weeks straight, then having a week of leave, which allowed us to go home for a break. It was a busy time. We wore a white coat frock, a cotton veil tied back and black shoes and stockings. I sponged 17 patients, made their beds, put up the mosquito nets, all in one and a half hours before breakfast – no time to talk a great deal to patients.

We were made very conscious of the possibility of contracting tuberculosis. We never ate in the wards - scrubbed hands continuously after attending to patients. Sputum mugs were boiled in huge vats to kill the TB germs. We were told that boiling was the safe way to destroy these germs.

Some patients were treated with gold ointment. A small amount was rubbed into the lung area with the end of a test tube to prevent the absorption of the ointment by the nurse or sister. Gloves, gowns and masks were often used while treating patients. Chests were rubbed nightly.

We witnessed haemorrhages from the lungs – haemoptysis, as is the clinical name – a frightening sight the first time it was seen. We quickly worked to stay the haemorrhage. After calling the resident doctor, we placed an ice bag on the chest. I can’t recall the medication given by the doctor, but the bleeding was stopped.

I also had an education in astronomy while at “The San”. It was after midnight, in the dark middle of this nowhere place – no electric lights to be seen anywhere outside the hospital – only darkness.

The doctor and I were waiting for the undertaker to come from Rockhampton to take the body of a patient who had just died back to Rockhampton. It was the first death I had witnessed and it felt a little bit eerie, so the doctor in his wisdom must have noted my anxiety and pointed out several star formations e.g. the Big Bear, the Milky Way, the Saucepan, the Southern Cross, Jupiter, etc. – to take my mind off things. It all sounds romantic, but it was really only a survival exercise.

This information proved useful years later, after my children were born, and I spent what seemed to be ages on the step of the backyard toilet while my children did what they had to do. It was always after dark, about 7:00 pm, so to pass the time away I educated them about the stars – what I had learned while at “The San”. I’ve heard it said that children know less about the stars since the demise of the backyard toilet.

I made friends with Ivy and Leah while at “The San”. Like me, they had applied to study nursing at RGH and were at Westwood before turning 18. After being at Westwood for approximately 6 months, we received notification that we could commence our training at the RGH.

It definitely was a training with a difference, as it was during the war years. I felt as though it was a great privilege to experience what I did during my training through those war years.

In the 1940s, one trained as a nurse because that was what one really wanted to do, as the glamour of the profession, together with very low wages, was not very enticing.

The uniform was a white coat frock of sturdy cotton material, such as headcloth (if you remember that). It was fastened by white buttons with brass shanks and pins, so they could be easily removed before sending the uniform to the laundry, as the uniforms were starched and ironed on a press and came back quite stiff. A white cap with a brim and a drawstring at the soft crown at the back which allowed hair to be tidily tucked away under it. Whybrow shoes requested by Matron on the form were brown – first quality shoes and quite expensive, but well suited to the comfort of the feet after many hours on duty.

The belt was a two-inch wide piece of white headcloth fastened again by a removable button. The shoes, the belt and the brim of the cap provided the glamour of the uniform. We used raw starch, adding methylated spirits and some liquid soap to the starch to stiffen the brim of the cap and the

belt. We ironed the cap and the belt over and over until it was dry and so stiff that they could stand up by themselves. We pulled the belt around our waist ever so tightly to give the coat frock some sort of shape.

Then we took on our shoes – our pride and joy. We poured methylated spirits on the Nugget shoe polish in the tin and lit it with a match, until some of the polish melted. Then we brushed this melted polish on our shoes. Then we spat on them and brushed and brushed and brushed. Yes! We did spit on our shoes “in army style”, and we brushed and brushed until our shoes shone with a brightness that was matched only by the bright morning sunlight or the gleam in the young nurse’s eyes.

No jewellery or make up was allowed, so the nurse’s shining shoes and her bright smile was the only glamour she had.



Nurse Olga Evans in uniform on the verandah of the RGH Nurses' Quarters ca. 1941

Nurses lived in quarters. No one was allowed to live at home. Late leave until 11:00 pm was granted one night a week only, or occasionally until 12:00 midnight if there was a ball on. It was necessary to sign out and sign in on return. Constant checks were made by the Sister-in-Charge of the Nurses Quarters. Try as one might to stuff a pillow on your bed and dress it up, you always seemed to be found out.

At the rear of the Nurses Quarters was a large paddock – the “cow paddock” – reason being that cows were kept to provide milk for the hospital and poultry for an egg supply. This provided an

avenue to sneak in late at night without passing the Sister’s desk. We were wakened for duty by a very loud cowbell type bell which rang and rang for what seemed to be forever.

Then it was into the wards, our first day with the threat of an initiation ceremony to be performed by the second year nurses who lived on the storey above where we were housed in a dorm type of accommodation. We had heard that this included being hosed after we’d gone to bed. We could stand the hosing but what if we had our “monthlies”. Remember that I and many others had been brought up in an Age of Innocence. At boarding school, you mustn’t wash your hair if you were menstruating or it might send you crazy. I believed it and prayed that it wouldn’t be “that time of the month” when this initiation took place or I might never get to do my training. I can laugh about it now, but that’s how it was then. The situation did arise and we survived.

Back to the wards –

Beds had to be neatly made with corners mitred, quilts lined up at the same level and mosquito nets had to be put up on the rectangular testers, all level with seventeen knife pleats – four each side and nine at the front.

One particular sister wanted flowers in the ward at all costs – our imaginations ran riot as we made exquisite arrangements with different types of weeds with red centres, grasses and flowering trees.

Being in the throes of World War II, protection against enemy attacks was a high priority. Windows were taped criss-cross fashion to prevent shattering if the hospital was fired upon. Black shades were draped around all lights in the wards, as they were also in the streets in the city. At dusk, black blinds were drawn at all glass on the exterior of the building so as not a chink of light could be seen from the outside.

It gave the wards an eerie look and made patient observations very difficult – like the time I detailed one of the nurses to special a patient in the ward who, before being admitted, had tried to commit suicide – only to find when I returned after doing a round of all the patients in several wards, that the nurse was sitting by the man in the next bed and not the suicide patient.

A large red cross was painted on the roof of the hospital as a plea for mercy if, by chance, the city came under air attack. Air raid exercises were held. At the warning siren, all patients had to be



Panoramic view of the Rockhampton Hospital ca. 1940. The nurses' quarters are in the centre foreground. These burned down on the afternoon of 28 Aug 1945. If you look very closely, you will see some dairy cattle under the trees in the "cow paddock". The hospital itself is the long the series of buildings at the rear of the photo. The tall building houses the lift. The building to the left of the tower is the Lady Goodwin Maternity Hospital. Olga thought that the air raid shelter was below this building.

evacuated into the air raid shelters, built under the lower floor of one of the large buildings (the maternity ward, I think). Able bodied persons walked, some were taken by wheelchair. Patients unable to leave their beds were taken beds and all down in the lift to the air raid shelter. Other patients were put under the beds and mattresses piled on top of the beds. By the time we had most of the patients evacuated, the "all clear" siren would sound, and then began the task of moving the often upset patients back to the security of the wards. All of this took an hour or two – necessary, but precious time lost, seeing as the nurse had to complete their allotted duties before finishing their shift, even if it took hours, and no overtime paid.

(To be continued in the next Newsletter)

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Dr Thomas Brendan Lynch (1937 -2018)

The late Dr Thomas Brendan (Tom) Lynch was a legendary Rockhampton specialist who, for many years, had his own laboratories. In 2007, Dr Tom Dewar interviewed Dr Lynch for our Association's Oral History Collection. We do not have a transcript of the interview. Hence these notes have been compiled by listening to the recording and making notes.

Tom Lynch was born in Melbourne. However his family moved to New South Wales where he completed Year 12, ranking 70th out of 13,000 students. He commenced tertiary studies at the Sydney University in 1955. After completing pharmacy in his first year, he changed to medicine, graduating in 1961. He spent his residency year at the Mater Hospital in Brisbane. As was common at the time working hours were long. In obstetrics, the "shift" began at 8:00 am Friday

and ended at 3:30 pm on Monday. Tom said that the best chance to get a sleep was on Saturday afternoon while the football was on. Commencing in 1962, Tom began 5 years of specialist training in pathology at the Mater Hospital in Brisbane.

After he graduated, he was employed by the Commonwealth Health Laboratory at the Rockhampton Hospital. After 5 years there, he opened his own pathology laboratory in Rockhampton. In about 1972 he purchased a bigger building and made a large investment in equipment and staff.

As many readers will know, Tom had a scary experience in 1973 when he accidentally locked himself in the cold room in the days before safety features were made compulsory. As Tom tells the story, the cold room was running at 15 °C with a big fan in operation. The room was only about a 1.8 m cube. Tom tried holding the fan to stop it, but it started to smoulder. He knew that the fumes would poison him, so he gave up on that idea. After two hours, he was able to pry the door open about half an inch, so he was sure that he had enough oxygen. He said that the lab didn't have enough money to build shelves, so the cold room was full of crates and boxes. He always carried spare paper in his back pocket in case he wanted make notes. So he found a crate that he could fit into, papered up the cracks, and settled down to wait, expecting that he would soon be found.

Tom did all of the night call-outs, typically 4 to 6 each night. Because he wasn't available, his second-in-charge, Myra Landis, started doing these call-outs. Myra was tired of this by about 4:00 am and called his home. Tom's wife took the call and said he wasn't there. So they started a search and Myra found him in the cold room at about 4:00 am. He had been there for about 8 hours!

Another very well-known Rockhampton specialist was the late Dr Mervyn Roy Gold. Merv was also

interviewed by Dr Tom Dewar in 2007. He came to Rockhampton in 1946 as the Medical Superintendent of the Rockhampton Hospital. He left the hospital in 1950 and went into private general practice. In 1966 when he was fifty, he decided to go to Sydney for further study to specialise in dermatology.

Dr Gold's story was published in our November 2007 newsletter and may be found on our website at [ACHHA-Newsletter-November-2007.pdf](#)

When Dr Gold returned to Rockhampton as a specialist dermatologist, his interests coincided with Dr Lynch's because they both had the job of peering through their microscopes at pathology slides, taking particular care with checking for melanomas. At the time, the death rate for a treated melanoma was about 14% but for an untreated melanoma was 100%.

Dr Lynch had been taught the basics of pathology by a Professor Vincent McGovern when he was a medical student at Sydney University. Dr Gold spent three years working with Professor McGovern during his specialist studies, going through the slides which had to be read every morning. Tom said that as a result, Merv was better at reading slides than he was. For 30 years, Tom and Merv met at Tom's laboratory every Saturday morning to go through the week's slides together. If there was a slide they couldn't agree on, it was sent to

Professor McGovern for adjudication.

Tom said that before working with Merv, his error rate in reading melanoma slides was about 2%, which was considered fairly normal. After working together, his error rate went to zero.

To better serve his patients in Gladstone and Emerald, especially when roads were closed due to flooding, Dr Lynch purchased two aeroplanes and hired pilots. He also had a pilot's licence himself. In a recent interview, Dr Anthony Keating spoke to Dr Porter Kenny. While discussing Dr Lynch's service to Rockhampton and the profession, Dr Kenny said that Tom went to Bankstown in Sydney to learn to fly. When he had completed the training, the instructor asked him "Now what sort of plane are you going to buy?" Tom said "This one". So Tom duly purchased the plane and flew it back to Rockhampton. He apparently got himself lost for a while on a Rockhampton-Gladstone trip one night but obviously recovered the situation.

Tom told Dr Dewar that in a typical year, he would examine about 35,000 slides as well as managing the lab and the staff, managing purchasing and so on. He supervised a small number of University doctoral students and undertook a substantial amount of research. One of his very significant achievements was finding a cure for amoebic meningitis.

Association Membership

The Association welcomes your support for our activities. If you wish to join our Association, application forms are available from Committee members, from the Contact us page of our website www.achha.org.au or by emailing secretary@achha.org.au. Please make cheques payable to Australian Country Hospital Heritage Association Inc. and post to ACHHA Inc, Box 4035, Rockhampton Qld 4700 or pay by direct deposit to our Westpac Membership Account BSB 034-210 Account No. 23-3836. To enable us to identify you, please use your family name plus Mem (for membership). Any of the Committee members listed on the final page will be pleased to assist you.

Membership Fees

Annual membership is \$20.00 for an individual and \$30.00 for a family. Life membership is \$200.00 for an individual and \$300.00 for a family.

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