

WAIPAWA HOSPITAL BOARD

Waipukurau Hospital
CENTENNIAL



Souvenir Booklet

1879-1979



GOVERNMENT HOUSE

I am indeed sorry that other commitments prevented me from being present at the Centennial Celebrations of the Waipukurau Hospital, and so I welcome this opportunity to extend my congratulations in achieving this historical milestone and my best wishes for the future.

I trust that all those attending the celebrations will have an enjoyable and rewarding experience. May you all look back with pleasure and forward with confidence, as you meet on this memorable occasion.

yours sincerely,

Keith Holyoake

Governor-General

The Board joins me in welcoming all past staff, board members, and visitors to our celebrations.

We are living in days when change is inevitable, constant, and accelerating at a rate which makes us pause from time to time and ask ourselves, what does the future hold.

The year of 1979 is the Centennial of our District Hospital in Waipukurau. This, and its Annexes and Pukeora, developed over the past hundred years, and now, constituting a multi-million dollar complex, reflects the vision and fortitude of our early settlers as well as the loyalty, determination, and perseverance of all who have followed and in some way supported, or contributed to, the preservation and betterment of our Hospital and Health Service, freely available to all in need.

Research has uncovered many historical facts, some of which have been recorded here with the Centennial Committee's hope that all who read the booklet will find it informative and interesting.

I convey the Board's gratitude to all who have assisted in the research and preparation of this booklet and to the enthusiastic Committee who have worked so hard to ensure that those attending the celebrations will enjoy the occasion for remembering and sharing past experiences.



Chairman.

Powhiri (A Welcome)

As a united body of local people, the tangata whenua (people of the land) take time to accord to the honoured guest a warm welcome. It was decided to use Maori protocol for the occasion and so the area before the hospital entrance becomes our marae, the courtyard on which the ceremonies will be conducted.

Reaching back into the ancient past, we give our Marae a fitting name, Te Ruatanewha (the lair of the denizen) and thus with one voice we say —

Haere mai, e te manuhiri tuarangi
Haere mai, ki Te Ruatanewha
Haere mai, ki Te Waipukurau
Welcome honoured guest
Welcome to Te Ruatanewha
Welcome to Te Waipukurau

Kawa (Etiquette) Wero (Challenge)

In order to protect our celebrations from any evil or misdoing, three young warriors of the people are sent to test the intentions of the visiting party and to challenge the guest of honour to uphold the sacredness, the integrity and the dignity of the occasion. If the total challenge is accepted indicated by the lifting of the third and final wero, or dart, the welcome proper begins.

Karanga (Ceremonial Calls of Welcome)

Maoridom accords to the women the role of the first embrace and "rite de passage" — it is the woman's voice who has the right to begin the welcoming ceremony, by womankind we all enter into this world.

The many aspects of the occasion and its quest, both past and present, are spiritually embraced by the karanga of the senior women of the tangata whenua, the people of the land.

Powhiri (The Welcome)

The assembled tribes rise with the voice and power of the people to welcome the guest and his people. Today we have assembled the strength of Ngati Te Whatuapiti, of Porangahau, Waipawa, Takapau and Waipukurau.

We are the descendants of Te Whatuapiti.
We extend to you our welcome.
We lament with you in your past grief.
We rejoice with you in the mana of this day.
Haere mai Haere mai Haere mai.

Whaikorero (Oratory)

The voice of the Rangatira now embraces the Marae, the occasion, the assembled people, and pride of place, the guest of honour.

The compliment to each speech will be given by Ngati Te Whatuapiti — a song given as a relish to the body of oratory.

The Guest of Honour, replies to the welcome.

Hohou Rongo (Renewal of Peace)

Our separation as Manuhiri (guest) and tangata whenua (host) is ended as the guest comes forward to meet the people with the Maori greeting of hongī — the pressing of noses — an ancient and well known custom.

As a united assembly we turn to the Dedication of the Centennial Plaque, to be followed by afternoon tea.

This concludes the welcome ceremonies to the Guest of Honour to the Centennial Celebrations.

Ka Mutu

OFFICIAL PROGRAMME

October 18, 1979

MAORI WELCOME

Mr Henare Petuha

GUEST OF HONOUR

The Minister of Health, Hon. Mr G. F. Gair

SPEAKERS

Mr A. R. Train, Chairman, Waipawa Hospital Board
Mr J. H. Nairn, Chairman, Waipukurau District Council
Mr K. Addis, Chairman, Waipawa District Council
Mr J. R. Falloon, M.P., Pahiatua.

UNVEILING CENTENNIAL MEMORIAL

Hon. Mr G. F. Gair

DEDICATION

Rev. W. P. Naera

HYMN

O, Lord my God, when I in awesome wonder,
Consider all the works Thy hands have made,
I see the stars, I hear the mighty thunder,
Thy power throughout the universe displayed.

Chorus

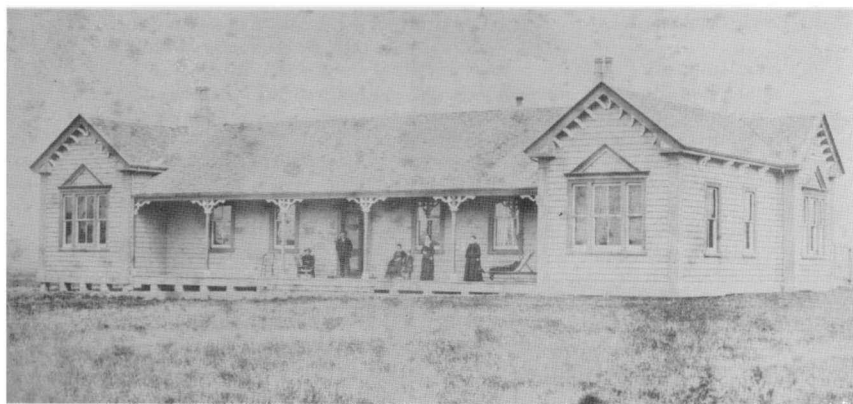
Then sings my soul, my Saviour God to Thee,
How great Thou art, How great Thou art (twice).

And when I think that God, His son not sparing,
Sent Him to die, I scarce can take it in,
That on the Cross, my burden gladly bearing,
He bled, He died, to take away my sin.

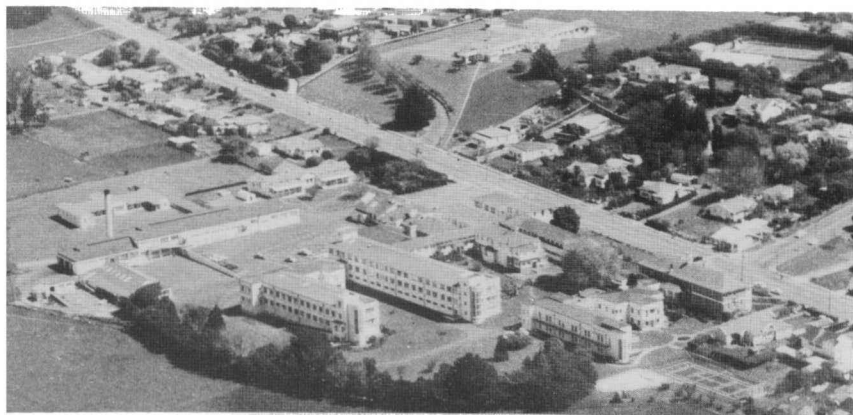
Chorus

When Christ shall come with shout of acclamation
And take me home, what joy shall fill my heart,
Then shall I bow in humble adoration,
And there proclaim, My Lord, HOW GREAT
THOU ART.

Chorus.



Waipukurau Hospital, Opened 1879



Waipukurau Hospital, 1979

Establishment & Development 1876-1886

Health services in the early days of settlement of New Zealand concentrated on the treatment of disease and accident with little attention being paid to preventive measures which naturally followed with experience, improvement in education, and advancement of technology.

In most districts up until the late 1870s, surgery was often undertaken in the patients' own home or in the doctors' rooms and indeed obstetrics were treated similarly well beyond that time.

Knowledge that hospitals had been commenced to be built in some areas and actually functioning in some others, obviously prompted a public meeting to be called which was held in the Tavistock Hotel, Waipukurau, in August, 1876, (the Tavistock Hotel at that time being located in the vicinity of the present Boxing Association Hall).

At this meeting, most of the influential people of the district were present to consider the question of the erection of a hospital. The meeting was representative of the greater part of southern and Central Hawke's Bay of that time, the whole of which area constituted the Waipawa County.

Mr H. R. Russell, who probably occupied the chair, stated that the Government was prepared to subsidise subscriptions to the extent of £500 and thereupon promised to donate 5 acres of land for the site, which offer was accepted and later taken up.

The outcome of the meeting was that the following gentlemen were appointed to take active steps in the matter:

The Rev. Shearman (local Anglican minister), the Rev. Alex Fraser (local Presbyterian minister), Mr John Mackersy (owner of Lake Station, Wanstead), Mr Ashton St. Hill (owner of Whangahu Station, Porangahau), Mr A. Grant (Burnside Station, Takapau), Mr A. Trestail (a local builder), Mr Rechab Harding (Mount Vernon and then local Member of the Provincial Council), Mr Jas Matthews (farmer and storekeeper of Hampden, Tikokino), Mr Sydney Johnston (Orua Wharo Station, Takapau), Mr J. Nicholson (accommodation house proprietor, one mile north of Otane), Mr P. Gow (owner of the Tavistock Hotel), Mr G. H. Saxby (manager of St. Lawrence Station, Patangata), Mr W. C. Smith (a local storekeeper and later a Member of Parliament), Mr B. E. Friberg (school-master of Hampden, Tikokino, and possibly the person who was Government agent for the selection settlement of the Scandinavian immigrants in Hawke's Bay) and Mr W. L. Newman (of Arlington Station, Waipukurau).

It is clear that whoever called the meeting must have gone to a great deal of trouble to contact these widely scattered

settlers and have had sufficient influence to secure their attendance. It was evident that the need for a hospital was widely acknowledged throughout the area.

The Waipawa County Council played a leading part in the early administration of the hospital then referred to as the "Waipukurau Hospital."

It appears that the first meeting of the Waipawa County Council took place in the Courthouse in Waipawa on January 4, 1877.

Parochialism between Waipukurau and Waipawa was evident from the very beginning of the county's activities and at a meeting on February 8, 1877, a motion was carried on the casting vote of the chairman to the effect that the future meetings of the county were to be held in Waipukurau until proper offices were provided in Waipawa. A meeting called for February 17, 1877, was adjourned because there was not a quorum present. A further meeting called for February 20, was also adjourned for the same reason. Both these meetings were set down to be held at Mr Monteith's store in Waipukurau. The next meeting called for March 8, 1877, was set down for the Courthouse in Waipawa and the meeting was attended by six persons.

A meeting of the council on April 2, 1878 which considered a letter from a Mr I. A. Smith concerning the Napier Hospital, produced a decision that Council was not prepared at the present time to assist in the erection of a hospital in Napier. The earlier temporary hospital premises in Napier were apparently unsatisfactory and a new hospital on a new site was being proposed.

At a meeting of the Waipawa County Council on April 4, 1879, a grant of £100 was made to the Waipukurau Hospital. At the Council's meeting on May 2, 1879, the clerk was instructed to write to the Colonial Secretary to ascertain whether the fee simple of the land on which the Waipukurau Hospital had been erected had been legally conveyed to Government. This proves that the hospital had already been erected by that date and a further reference to the fact that the hospital was in existence, but not opened for patients is to be found in the minutes of a special meeting of the council on July 3, 1879.

At that special meeting, the council also resolved to write to the Government, requesting that the appointment of the nine members of the Waipawa County Council as members of the Waipukurau Hospital Committee be sanctioned along with three other members to be elected by the general subscribers to the hospital. This system of administration of the hospital was approved by Government, a pound for pound subsidy was introduced, and the building had been insured for £1200.

The council at the same meeting thanked the Hon., H. R. Russell for the services he had rendered towards establishing the Waipukurau Hospital which was described as an institution which is a credit to the county and the thanks of the council were due to Mr Russell for his ceaseless exertions outside his handsome contribution by granting such a valuable site.

The equipping of the hospital was completed in 1879 at a cost of £301-17-5. The first patients were received into the institution on October 18, 1879, and between October 1879, and August 1880, 32 patients had been admitted, of whom 23 had been discharged as cured, three had died and six were remaining in hospital.

In 1879, the hospital consisted of a building of two wings — male and female wards — and four other rooms for housing of staff. By that time, the hospital had become known as the Waipawa County Hospital, and was referred to as such by both the public and Government.

The development of this "subscription type" hospital in the county's area was a typical example of pioneer initiative and pragmatism where the contributions by subscribers both attracted Government subsidy and gave donors a say in the hospital's administration.

By the end of the period of Provincial Government a number of forms of hospital management had been accepted and the re-organisation which was suggested at that time had to take account of the interwoven character of charity, local management, and State provision. These three factors dominated various attempts to find a uniform system until 1885.

The old axiom "Whoever pays has the say" was equally applicable to hospital management in the early days as it is today and by February 1880, the Inspectorate of Lunatic Asylums introduced by Government was extended to involve hospitals and charitable institutions.

The following is an extract from the report on hospitals in New Zealand by Dr D. Macgregor, M.A., M.B., Inspector-General of Hospitals and Asylums for 1886 which was addressed to the Premier on May 30, 1887, and presented to both Houses of the General Assembly by command of His Excellency:

"This hospital occupies a beautiful site a little distance from the town. The reserve is about 5 acres of good land well laid out and surrounded by a belt of fine trees. A considerable portion is cultivated as a kitchen garden and orchard. The building contains a female ward with five beds; a small isolating male ward with three beds; and two larger male wards, one of which contains five beds, all occupied. In addition to these rooms, there are a convenient dispensary, a committee room, a dining-room for convalescent patients, a handsome well-furnished kitchen and three rooms for resident staff. The wards are all comfortably furnished and kept very clean.

"The number of patients on the day of my visit was eight males and two females. It was evident that the greatest care and attention were devoted to their duties by Dr Reid and his staff. The doctor was spoken of in the highest terms by the patients and everybody connected with the hospital, while Mr and Mrs Putman are prime favourites. The hospital, as a whole, is kept in admirable order and is very comfortable. The fever ward

is a well designed and substantial building. The ward contains seven beds, all are at present empty although there are four fever cases in the hospital. I found the books all property kept."

The Inspector states with respect to the Waipawa hospital:—"The large male ward contains 15 beds, of which 14 are occupied. The female ward contained four patients. The staff consists of Dr Godfrey, whose salary is £200, Mr and Mrs Putman, salary £160, with two nurses receiving £1 a week. The doctor is skilful and attentive. Mr and Mrs Putman are old and valued servants who have done admirable service in their day. I am glad to say they have got competent assistance. There has been a decrease of 8d in the average cost per day."

To the Turn of the Century

The Hospitals and Charitable Institutions Act 1885 gave the Waipawa County area a Waipawa Hospital Board District status, but the absence of research material including a missing minute book makes it impossible to establish the exact time when the board came into existence, but indications are that this occurred in 1889.

The first major addition to the hospital was the construction of an additional ward in 1890 which was subsequently named the Lewis Reed Ward after Dr James Lewis Reed, who subsequently served the board as medical superintendent for 20 years.

Tenders for a nurses' cottage were called in October 1898 and Mr McLean from Dannevirke built this at a cost of £212. The cottage was not serviced with water until a year later when at the same time, both hot and cold water were made available to the dispensary. The job was not considered a cheap one for the sum of £15.

It was obvious that hard times were being experienced and many organisations were very active in raising money by various methods to provide extra equipment and services for the hospital which were unable to be financed from subscribers' fees and levies being made on the local authorities.

Between the establishment of the hospital and 1899 besides several Roads Boards being in existence, a borough had been established at Dannevirke, another one at Woodville, and the Waipawa County had been divided to create the Patangata County as well.

Some interesting facts recorded at that time in the board's minute book follow:

The hospital was purchasing its butter for 10 pence per pound, milk 8 pence per gallon, coal £1-19-8 per ton, wood 18/11d per cord, bread 6½ pence per 4lb loaf, and the tenders received for groceries were so close that the successful tenderer was decided by drawing lots. The undertaker charged 34/- for indigent burials.

Levies on the local authorities for the year ending March 31, 1900, were £330 each for the Patangata and Waipawa County Councils, and £35 and £30 respectively for the Danverke and Woodville Borough Councils.

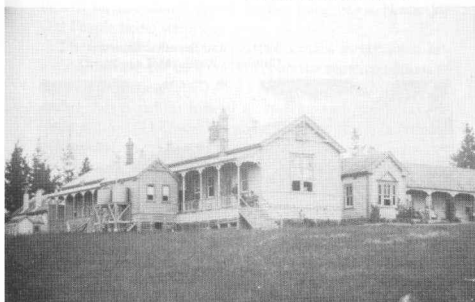
On February 15, 1899, it was reported that the Takapau Racing Club had donated 5 guineas towards the nucleus of a fund for purchasing Roentgen rays for the hospital and the following month Mr H. Hartley remitted the sum of £51-10-0, being the net proceeds on entertainment given at Waipukurau in aid of the hospital to purchase furniture and instruments with any balance to be placed in the Roentgen ray fund. This was typical of the public support at the time.

A report from the secretary of the hospital that patients were coming into hospital for operations and simply paying for one day's maintenance caused the board to institute a minimum charge of £1 in all cases where the patient was able to pay.

On April 12, 1899, it was decided that also a room at the hospital be provided for the secretary and also a fireproof safe because papers were not always available at meetings held away from the hospital.

The Railway Union applied through Pastor Ries for the issue of subscribers' tickets in the same manner as existed for Friendly Societies. The matron also made application for a laundress to be appointed instead of having a charwoman do the washing. This, however, was deferred for consideration at next meeting at which authority was granted to employ one at 15 shillings a week.

Waipukurau Hospital, 1897



At September 13, 1899, meeting the secretary produced a list of patients who were in debt to the hospital and he was directed to threaten those who were able to pay with legal proceedings if their accounts were not paid within one month.

Tenders were accepted at the December 1899 meeting for the following year and boiling, corned, and roasted beef, were a penny, tuppence and three-pence per pound respectively. Gravy beef tenders at 2½d per pound and whole shins were four pence each. Sausages were to cost 1½d a pound and legs, shoulders, loins, and chops of mutton 1½d per pound also. All other mutton prices a half-penny per pound.

The total number of staff engaged at the hospital in 1895 was 12.

From the Turn of the Century to The Great War

In 1909 additional patients' accommodation was finally constructed in brick, the ward subsequently being named Godfray Ward to perpetuate the name of Dr S. C. Godfray, who served as medical superintendent from 1894 to 1914.

An infectious disease treatment annexe was built in 1919 a short distance away from the main hospital building and it retained this function until 1957 when it was closed through shortage of staff and re-opened again as a geriatric unit in 1962. This unit was given the name of Paul Hunter Ward in memory of one of the very early settlers of the district whose benevolence and philanthropy was well known.

On February 14, 1900, the chairman reported that Dr Godfray had gone to the Transvaal, but that his application for leave had not been received until after he had left. The board granted leave of absence for nine months and Dr Reed was requested to take charge of the hospital during Dr Godfray's absence.

The chairman reported that the matron, Miss Godfray, had also informed him that she had applied to go to the Transvaal and required leave of absence, suggesting that Nurse Derry should act as matron during her absence. On March 7, 1900, Miss Godfray on a majority decision of the board was granted leave for six months to travel to the Transvaal, and Nurse Derry was appointed acting matron for the period of absence. In August of the same year, a letter was received from Miss Godfray, asking for an additional six months' leave and this was granted. In November, Dr Godfray was granted an extension of three months leave on the application of his solicitor.

The board's farming activities commenced in January 1901 when three cows were purchased and a general hand was appointed for both hospital and farm work. The board leased additional land from Mr Potts at a rate of 15/- per acre per annum and the farming operations were specifically for the supply of milk to the hospital due to the poor condition of the local milk supply.

Some re-allocation of duties took place early in 1901. The hospital secretary was required to take charge of the windmill and be answerable for all the outside work and for all the departments inside which were not under the control of the matron. All buildings then roofed with shingles were authorised to be re-roofed with iron.

In June 1902, Dr Godfray reported in support of his application for an increase in salary that he did not anticipate that the opening of the Cottage Hospital at Dannevirke would materially effect the number of patients admitted to Waipukurau at least for several years and presently the average number of patients per day was 35, but during this particular month, it had just been over 40.



Mr. and Mrs. Archie Clark on Hospital farm

On July 11, 1902, the board authorised the purchase of sheeting at 13/4d per yard, quilts at 8/4d each and blankets at 14/9d each. At this time, there was no sewage in the area and inquiries were being made for full particulars for the purchase of a destructor and the probable cost of a septic tank at the hospital.

The year 1902 virtually closed on the note of the acting matron requesting the board to supply a portable boiler for the making of jam and the supplying of boiling water to the operating room, but the matter was deferred until next meeting when the matron would have returned.

During 1903 a petition to His Excellency the Governor was received, praying that the Dannevirke Hospital may be incorporated as a separate institution. It was resolved that there be no objection, that it be governed by a board of its

own, and that the division to the hospital district be made to give effect to same. The reply from the Inspector of Hospitals was that the matter would be given consideration when any amendment to the Hospital and Charitable Aid Act was under consideration. In fact, Dannevirke obtained separate board status in 1925.

There was a change of matrons in 1904 when Miss Carston was appointed to replace Miss Godfray who had resigned.

A report was received from the Inspector General of Hospitals early in 1905 on the state of the hospital buildings in Waipukurau, which contained a suggestion that a large hospital should be built at Dannevirke and just a cottage hospital at Waipukurau which would perhaps be sufficient for future requirements.

Trained nurses' salaries were raised to £55 per annum; problems were still being experienced in collecting patients' fees and it was decided to appoint a treasurer in addition to a secretary; it came to the board's notice that the matron had had the offer of an appointment at a higher salary and it was proposed that the matron be appointed treasurer on a salary of £20 per year because by this plan more patients' fees might be collected. The proposal was carried.

Until 1907 references to the hospital had been various. Away back in 1879 reference was made to the Waipukurau Hospital and when the Waipawa County became involved in it as trustees, it became the Waipawa County Hospital. Later it was referred to as the District Hospital, Waipukurau, then the Waipukurau Hospital again. In the Board's Minutes in 1907, it was referred to as the Waipawa District Hospital.

No doubt, the latter name followed the status given to the board under the provisions of the Hospitals and Charitable Institutions Act 1885.

During 1907, Dr Godfray reported to the board that he considered that the whole of the middle part of the hospital building should be dismantled and there should a two-storeyed building put up with the matron's quarters and servants' quarters, to be located in the top storey and the ground storey to be devoted to the various offices required. It was decided to obtain a report and ascertain the state of the present building and what it would cost to make the alterations as suggested.

Matrons and Servants Quarters
Childrens Ward, (McLean Ward).



The plans presented by the architects were accompanied by estimates showing that £15,700 would be needed to complete the work. This particular building proposal referred to the present physiotherapy department with the staff flat and the tutorial block above it which was erected in 1915 in memory of Dr Godfray and was then referred to as the administration block. The original proposal was considerably modified before being built.

Mr J. H. Nelson retired as secretary to the board in 1908 and Mr J. B. Ashley was appointed to replace him.

As early as 1906, correspondence had been received from the Prime Minister's office, suggesting that the hospital at Waipukurau take in probationers for which the Government was prepared to contribute £25 for each. On the recommendation of Dr Godfray, the matter was deferred.

A further approach was made in 1909 and the proposal was again deferred because of the lack of accommodation and the difficulty in obtaining pictures and lecturers. Authority was granted for the appointment of probationers in 1913 and on August 14, 1913, the matron notified the board that two had been appointed. The board decided that there should be three.

During 1909, a tender of £59 was accepted for the installation of gas at the Waipukurau Hospital to replace for then existing form of lighting. Additional land was under offer to the board-insurance cover was raised on buildings to £3300. Permission was granted to Dr Godfray, the then superintendent, to treat patients non-residing in hospital with radium at a fee of 5/- on condition that the radium did not leave the hospital premises and the charge made was paid into the general fund.

Strong representations were made to the Minister of Health to amend the Hospital and Charitable Institutions Bill to prevent the Waipawa District becoming merged with the Hawke's Bay area.

The year 1910 saw the Waipawa District Hospital Board ceasing to exist and on April 1, 1910, the Waipawa District Hospital and Charitable Aid Board came into existence with Mr A. E. Jull being elected chairman. It also saw the Joint Committee of the Hawke's Bay and Waipawa Hospital Boards for the administration of the Park Island Home for Old People being set-up.

The Drovers' Association was successful in obtaining hospital treatment for their members on the same conditions as Friendly Societies. The board took the very stern action in issuing ration tickets instead of making cash payments for charitable aid. The local constable accepted the appointment as almoner.

During 1911, five patients were issued with summonses for the recovery of hospital fees, trained nurses' salaries were increased by £5 per annum for a period of two years to bring them up to a total of £80 per year, and pressure was being brought on the board by the Department of Hospitals for the establishment of an infectious disease ward at the hospital.

In 1912, the Department of Hospitals announced that nurses from England were available for employment, but all

nursing positions were then full. The board was able to grant the then matron leave to visit England for a period of six months on a half-pay basis, the legality of which seemed to be queried by the Audit Office.

Pressure was being brought to bear on the board in 1913 for assistance towards the establishment of a medical officer in the Weber/Wimbleton area, but this did not seem to meet with any success.

Dr Godray died in June 1914, and Dr J. Lewis Reed obtained the appointment on a similar part-time basis.

By the end of 1914, the dispensing of charitable aid had reached tremendous proportions, the expenditure for which for the year ending March 31, 1915, approximated half of the total maintenance expenditure for the year. The price of indigent burials was reduced to 18/-, coal cost 39s 2d per ton, butter 1½d per lb, and an attempt to raise the patients' fees from 4/- to 5/- per day was defeated.

The matron requested improvements to the fowl-house. This was referred to the Building Committee, which appears to be in tune with the times when hospitals were expected to provide as much produce as they possibly could from the land they owned, and from public subscriptions.

It was on November 11, 1915, that the Palmerston North Hospital Board offered a horse-drawn ambulance for sale at approximately £50. This was purchased in February 1916, subsequent to the necessary repairs being carried out.

The war years saw many problems in regard to staffing, materials and supplies availability, finance, and the nursing of wounded soldiers returning from the war.

An interesting domestic problem arose in 1917 when the medical superintendents at both the Waipukurau and Dannevirke Hospitals jointly requested the board make a recommendation to the Inspector-General of Health to place them on a military footing with a rank to enable them to have complete jurisdiction over soldier-patients admitted to the institutions.

The tragic influenza epidemic swept through the district in the later part of 1918, causing a tremendous death toll and requiring establishment of a temporary hospital for the isolation and treatment of those afflicted.

It seemed that the epidemic hastened the final planning of the infectious block at the hospital which was built in 1919 and opened in 1920.

Isolation Ward (Paul Hunter Ward)



Between the Wars

Notwithstanding two worldwide depressions occurring between the two World Wars, consolidation of existing hospital services continued and sufficient expansion occurred to keep pace with the development of the district and its consequent increase in population.

Further land was purchased and farming activities were both extended and intensified and vegetable gardening developed to what then was a profitable degree. Steam boilers were installed to give greater efficiency to laundry services and sterilizing equipment and heating installations were introduced in various areas.

Liaison with the Hawke's Bay Hospital Board was continued and the renewal of the Park Island Agreement was effected for the administration of Old Peoples' Home facilities for both districts, and in spite of some difficulties earlier, district nursing services later continued and improved in the Porangahau area.

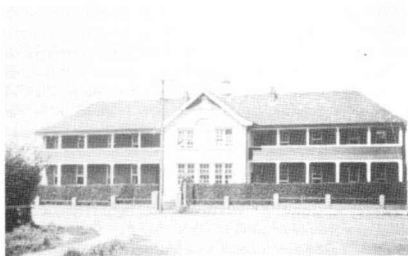
The board came into possession of a motorised ambulance from the Department of Health out of a pool of vehicles which were dispatched by the Imperial authorities to the New Zealand Health Department, who in turn handed them over to various boards throughout the Dominion on loan. The vehicle was a Sunbeam which was valued at £500.

Electric light was introduced into the hospital in 1923 and the installation cost £649. This electricity installation permitted a later installation of an X-ray plant costing approximately £700. This was purchased with such enthusiasm and arrived so quickly that some difficulty was being experienced in finding a suitable area in which to instal it. The medical superintendent, Dr. Reed, suggested the conversion of his own office into an X-ray room and this was approved by the board.

The division of the board district was reconsidered in 1924 and boundaries were declared so that patients residing inside such boundaries should with the exception of accidental or emergency cases be admitted to the hospital in that area unless the medical superintendent gave special reasons for admission elsewhere. This tuned conditions for an orderly ceding of the territory beyond the southern boundaries of the Waipawa and Patangata Counties to the Dannevirke district to be controlled by the Dannevirke Hospital Board from April 1, 1925.

In 1926 the brick portion of the nurses' home nearest to Porangahau Road was built and the remainder of the building which was of ferro-concrete was added in 1942. The main administration block was erected in 1927, following which the old administration offices were converted into extra childrens' ward accommodation to supplement that still providing a service in the original 1879 building.

In 1935 major additions were the present medical administration and outpatients' wing and a modern operating



Nurses Home

theatre block on the southern side of the main corridor. The medical administration and outpatients' block was extended in 1942 at the same time as Fisher Ward and surrounding clinical services areas were being constructed. These consisted of X-ray, physiotherapy and laboratory.

The lower floor of the Fisher Ward block was cubicalized and used as female household staff quarters until such staff was absorbed into the Nurses' Hostel. This lower floor has never been used as a ward and presently provides facilities for changing rooms for various sections of the staff. This major addition to the hospital in the early part of the 1939-45 war years entailed an expenditure of about £85,000.

Another important year in the board's administration which later had a profound impact upon the services and staffing requirements at the hospital was 1933 when Pukeora Sanatorium came under the control of the board and remained so until 1944 when a joint committee of seven hospital boards on the East Coast of the North Island was formed to control this institution until it was closed on September 30, 1956.

Fisher Ward and Clinical Services area



The Prestige Era

ESTABLISHMENT OF TUBERCULOSIS CLINICS AND THORACIC SURGICAL UNIT

With Government's adoption of a recommendation of the National Expenditure Commission, control of sanatoria passed to hospital boards with Pukeora coming to Waipawa and Otaki going to Palmerston North on October 1, 1933. This had the effect of forming an early link between Pukeora and the District Hospital, Waipukurau.

Even before the changeover, the establishment of TB clinics was considered essential for locating and isolating incipient cases into sanatoria to facilitate early arrest of the disease and prevention of spread. Both the Palmerston North and Waipawa boards worked independently towards establishment of clinics between 1933 and 1935, when a conference was called between the boards to discuss the endeavour to establish a clinic system which together with clinics already established in metropolitan areas would give the North island an overall coverage.

This conference decided on procedures and a little later a special meeting chaired by the Director-General of Health made further progress including agreement that Dr Hugh Short should be engaged as a visiting consultant to Pukeora Sanatorium, which inter-alia would ensure that Pukeora was working on similar lines to Otaki on matters of tuberculosis control. Dr Short was appointed from August 1, 1935, for one year, subject to review.

The chairman and managing-secretary of the Waipawa board accompanied the Director, Division of Hospitals, throughout the East Coast and Bay of Plenty areas to meet various boards' representatives to impress upon them the necessity for early establishment of the clinics. Hawke's Bay, Wairoa, and Cook boards were visited during mid-September, and during November, Opotiki, Bay of Plenty, Tauranga, Waikato and Thames boards also received the delegation with enthusiasm and pledged support to the scheme.

By December, the Palmerston North board had already established clinics at one or two of the West Coast of the North Island areas and in January 1936, Dr Short travelled to complete preliminary work to establish clinics in Hastings, Napier, Wairoa, Gisborne, Waipatu, Opotiki, Whakatane, Tauranga, Waikato, Thames, Hamilton and Taumarunui.

Upon Dr Short's return, representatives of the two boards were to meet again with the Director, Division of Hospitals to examine the possibility of a major scheme and if necessary, have steps taken to appoint a full-time officer in TB clinical

work with financial assistance to be obtained from Government.

Meanwhile Dr Gilbert Maclean had resigned as medical superintendent of Pukeora Sanatorium and Dr P. C. Anderson, of Wanganui, succeeded him in February 1936.

Two further meetings were held to define policy on clinic establishment and control as well as sanatorium treatment, but a full-time travelling TB officer could not be agreed upon and the existing arrangement was to continue until April, 1937, with the Waipawa board continuing to employ Dr Short for the eastern portion of the North Island, and if necessary, including Hamilton, Rotorua and Taumarunui in the Palmerston North Hospital Board's visiting schedule.

The Director-General of Health, Dr M. H. Watt, expressed the department's high appreciation of the manner in which the two boards were conducting Otaki and Pukeora Sanatoria during the brief period they had been in control, and gratification with the progress they had made in stimulating interest in TB preventive measures throughout the North Island. The Director-General regarded the handing over of the two institutions to Palmerston North and Waipawa as a most fortunate step and expressed the department's confidence in and appreciation of the policy that they had laid down.

Invitations were extended to the Auckland and Wellington boards' tuberculosis officers to visit Pukeora periodically to view the progress of their respective Boards' patients.

Surgical treatment of tuberculosis was brought before a committee of the board on August 6, 1937, by Drs W. B. Fisher and P. C. Anderson, and at a later meeting in October of representatives from the department and two boards, Drs Anderson, North and Francis addressed the meeting on the same subject.

The Director-General appreciated the progress that had been made in tuberculosis preventive measures by the two boards and stated that the future of the movement might in some way be affected by the proposed National Health Insurance Scheme, details of which he could not divulge at present. The meeting nevertheless agreed that the time was not yet opportune to circularise various North Island boards on the subject of chest surgery, but approved the principle of establishing a centre at Palmerston North.

On February 21, 1938, a most important conference was called of all boards in the Waipawa Hospital Board's tuberculosis officers' travelling area to discuss future policy, and the medical superintendents of all boards were requested to attend together with the Director-General of Health, Dr Hugh Short, and Dr P. C. Anderson. This was held in the board room at Napier Hospital with the Director-General of Health in the chair.

Dr Short addressed the meeting in a clinical vein and illustrated how around the tuberculosis clinic had grown a tuberculosis section of each hospital, supervised in effect by a tuberculosis officer whose main responsibility was to the hospital board of the district, and not to the Sanatorium Board which sends him there periodically. He hoped that he had

made it clear that each hospital board district now derived from its clinic a service in hospital work which was essentially a part and parcel of general hospital activities.

He stated that the Waipawa Hospital Board had with respect every reason to congratulate itself on being the instrument concerned in initiating a long overdue service in honourably fulfilling its promises to its sister boards in establishing the clinics. Mr W. H. Rathbone, chairman of the Waipawa Hospital Board, put the board's case on matters of finance.

It is interesting that a round table conference of representatives of East Coast boards, namely Cook, Wairoa, Hawke's Bay and Waipawa, was held following this conference and considered suggestions for group appointments of specialists for the whole of the area and particularly mentioned orthopaedic, paediatric, and ENT services.

By March 1938, all boards in the group with the exception of Thames had agreed to the new arrangements for Dr Short's visits.

Dr P. C. Anderson who had accepted appointment for a limited period only resigned and Dr J. K. O'Dea carried on as acting medical superintendent of Pukeora and was later appointed to the position. Drs O'Dea and Short jointly recommended to the board the formation of a Chest committee on May 10, 1940, and at the same meeting, Dr O'Dea was appointed physician to the District Hospital in charge of chronic chest diseases.

The first meeting of the Chest Committee was held on August 1, 1940, at which the objects as set out by the board were agreed to, and from which a recommendation that no cases other than those of an acute or urgent nature should be submitted for chest surgery in the District Hospital without the approval of the Chest Committee. It was decided that this further recommendation be incorporated in the functions of the committee. The Hospital Chest Committee reported of a clinical meeting on September 16, 1940, where 16 cases were discussed and as a result three operations were performed by Dr E. Gordon Anderson.

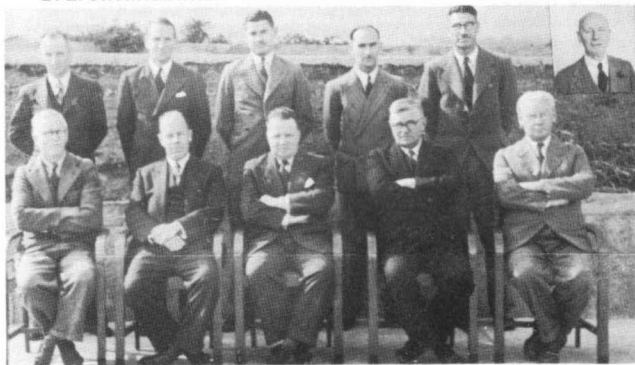
Some difficulty was still being experienced in obtaining departmental approval to surgical appointments for commencing chest surgery at the hospital. In May 1941, Dr Hugh Short, chairman of the Chest Committee, reported fully on operations of the thoracic surgical unit to date and forecasted results of a high order which would compare favourably with chest surgery performed elsewhere.

By June 1942, the time required at clinics had increased to an extent that each of the boards were required to make their own arrangements for the service of the travelling tuberculosis officer, and Dr Short's appointment was varied to that of consulting T.B. officer to the Pukeora Sanatorium and travelling tuberculosis officer to the Waipukurau Hospital Clinic.

A Sanatorium Investigation Committee was formed in August 1943, when the Waipawa Board was having trouble financially in keeping abreast with the maintenance of the buildings at Pukeora and thinking in terms of finding some new method of controlling the institution with the participation of other boards on the East Coast of the North Island.

An agreement signed between the Waipapu, Cook, Wairoa, Hawke's Bay, Waipawa, Dannevirke and Wairarapa Hospital Boards effective from July 1, 1944, established Pukeora Sanatorium Committee control with ownership remaining with the Waipawa Hospital Board. The deed and other supplementary deeds remained in force until September 30, 1956, during which period the Waipukurau Hospital provided general services for both patients and staff as required, and up until 1954 a thoracic surgical service for patients recommended for treatment by the Waipawa Hospital Board chest surgery committee.

The Waipawa board entered into contracts with the Pukeora Sanatorium Committee for each to supply the other with various services, the main ones supplied to the committee by the board being administrative services which involved the managing-secretary and his staff being servants of two separate bodies. Other services supplied to the committee from the board included dispensary, bacteriological and radiological.



Back Row: A.G. Bell, D.Y. Allan, R. deLambert, C.H. McKenzie, T.S. Norris.

Inset: C. Raymond.
Front Row: C.D. Costello, E.M. Luke, C.A. Taylor, H. Short, F. Matheson.

The Chest Surgical Unit continued to function as a Waipukurau Hospital unit, performing a service for all hospital boards in New Zealand who had patients in Pukeora Sanatorium who required chest surgical procedures. This of course, gave the Waipukurau Hospital the prestige it would otherwise not have gained, inasmuch as it was virtually running a national unit, and indeed still does so following the establishment of Pukeora Home for Disabled and running this on a basis of serving the whole of New Zealand.

The services provided by the committee for the board were mainly concerned with laundry and farm supplies.

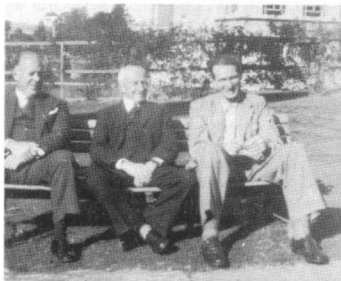
The 1945/46 period produced national statistics which convinced the Department of Health that thoracic surgery should be further developed in New Zealand and a special committee comprised of representatives of the R.A.C.P., R.A.C.S., and medical officers of the Department of Health recommended all major thoracic surgery to ultimately be confined to the four main centres.

The board agreed in principle with the exception that the Waipukurau Hospital remain as a permanent centre because of the established success of the Chest Committee, the proximity of Pukeora Sanatorium to the Waipukurau Hospital giving easy transfer of patients and continuity of medical and nursing treatment, and because the board's Chest Committee was established on identical lines to the proposals for the main centres.

General policy in regard to thoracic surgery was discussed again in 1951 by a special committee of thoracic surgeons and chest physicians and this was a reiteration of earlier declared views of the Department of Health which had the effect of the establishment of thoracic surgical units at Auckland, Wellington, Christchurch and Dunedin to provide services for regional areas.

The board put forward its case for retention of the unit, basing it mainly on the necessity for all arrears of work to be overtaken in the main centres before ceasing operation at Waipukurau. The lengthy case submitted produced an acknowledgement from the department of the importance of the work being carried out at Waipukurau and as it would be some years before a unit could be fully established in Wellington, thoracic surgery must be continued to be done both at Palmerston North and Waipukurau Hospitals, if the needs of the areas were to be served.

A further special committee was set up by the Department of Health to meet on the 21st and 22nd September, 1954, to review the work of the existing thoracic and cardiac surgery units and to advise whether the present policy should in any respect be modified to allow the establishment of thoracic and cardiac surgery units at hospitals other than those approved at present and if so, to what extent. The department pointed out there had been a tendency by certain boards to depart from the policy earlier decided upon where units had been approved in the four main centres only. Submissions were invited to reach the department by August 24.



Eric Luke, Bill Fisher, Don Allan
relaxing after the morning session

The medical superintendent, Dr W. B. Fisher, reported to the board on the history of the unit and its work which steadily increased, having its peak from about 1946 to 1952, and of the very definite decrease that had occurred since. After stating the reason, he intimated that Mr E. H. M. Luke, senior thoracic surgeon, was to resign his position at the end of the year, but that he might be able to be persuaded to continue if the work to be done at Waipukurau showed signs of returning to the amount at the peak period. In any case, should there still be a demand, arrangements could possibly be made with the Wellington Hospital thoracic surgical unit to supply a surgeon.

Submissions made to the surgical committee were.—

- (i) That the Waipawa Hospital Board Chest Surgery Unit continue to function to the extent found necessary to cope with the amount of work offering.
- (ii) That it continue to rely on the Wellington Hospital Board for the provision of certain specialists.
- (iii) That the Waipawa Hospital Board agrees with the principle of allowing specialist units to develop as required to deal with cases requiring treatment, the necessary restraining influences being covered by present control by Health Department on expenditure and appointments, and open hospitals staffed with well qualified responsible medical staff.

The report was also submitted to the Waipawa Hospital Board chest surgery committee, which requested the board to allow Dr Fisher to appear before the special committee in September. Dr Fisher reported on his return that he had informed the committee that the board considered that it had made a worthwhile contribution to chest surgery for the past 13 years and that it considered that it had a duty to continue to do this type of work until such time as it was shown that there was no longer a demand on this board to provide this service.

He stated that he agreed that if the time arrived when Wellington Hospital could deal adequately with all cases without delay, the need for the Waipawa Hospital unit would go, as then most surgery would be done before a

patient was sent to a sanatorium and so that any advantage occurring from our proximity to Pukeora Sanatorium would disappear.

The chest committee still functioned and held its last meeting on November 5, 1955, when the following resolution was passed:

"That it be a recommendation to the Waipawa Hospital Board that owing to recent developments in medical and surgical treatment of pulmonary tuberculosis, it is considered advisable that cases of pulmonary tuberculosis from this area requiring surgical treatment be now referred to the thoracic surgical unit in Wellington and that a surgeon from that unit be invited to attend at Pukeora Sanatorium and Waipukurau Hospital at such times as are considered necessary by the respective superintendents for the assessment of such cases. It is further recommended that the procedure be reviewed in 12 months time by the Waipawa Hospital Board chest surgical committee when a further report should be made to the board."

The secretary of the Waipawa Hospital Chest Surgical Committee, Dr C. R. Stevenson, wrote to the board on November 10, 1955, expressing appreciation for all the assistance and facilities the board had provided to enable the committee's work to be successfully carried out over the past 15 years, that recent advances in the treatment of TB, by way of surgery now necessitated the functioning of full-time thoracic surgical units at the main centres, and that the board's work had been of great stimulus to the development of proper units in these centres. He also stated that many hundreds of people in New Zealand should be very grateful for the help the board had provided to enable them to regain their health and happiness.

The Director-General of Health was notified of the resolution passed by the chest surgery committee and was informed that the committee would be reporting back in 12 months' time, which meant that the committee had not disbanded completely, but the machinery was still available to revive the chest surgery committee if the occasion arose within the next 12 months. This ended an era of prestige as far as the Waipukurau Hospital and the board was concerned, but the board gained further prestige following its resumption of control of Pukeora and the successful establishment of a "first" — Pukeora Home for Disabled.

Besides the respective medical superintendents and other whole-time medical staff at Waipukurau Hospital and Pukeora (Bill Fisher, Rob de Lambert, Pat Anderson, Jimmy O'Dea, Colin Stevenson, John Trezise, Colin McKenzie, Campbell Davidson, Graham Clark and Farquhar Matheson) amongst other notable medical personnel associated with the clinics and the unit were: Hugh Short, Rodney Francis, Oscar Moller, Gordon Anderson, Eric Luke, Gilbert Maclean, John Twigg, Eardley Button, Desmond Costello, Don Allan and towards the end James Baird and Timothy Savage.

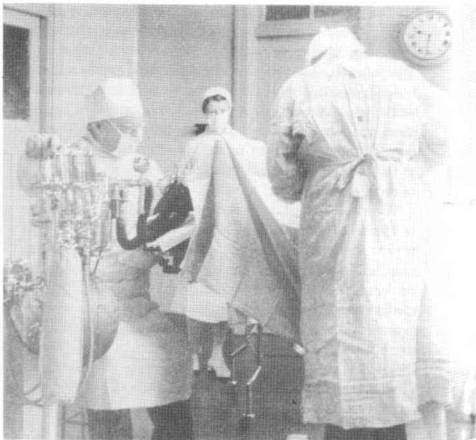
Don Allan was associated with both the committee and the surgical unit for practically the whole period, on the committee as a member and a chairman and with the unit as a physician and an anaesthetist. His contribution was tremendous. The surgical team reported as having received considerable help at operations and in pre and post-operative care from John Trezise, who was assistant medical superintendent from April 1952 to December, 1955. Dr A. B. Elliott, who formed a bronchoscopy clinic was also of considerable help to the team. Dr Alf Slater attended regularly and introduced staff to new anaesthetic equipment and techniques without whom an alternative specialist in anaesthesia would have had to be engaged.

The theatre sisters earned great praise from the surgical staff and some of these sisters were: Phillips, Dalton (now Mathews), Greenwood, King (now Harvey), MacNicol (now Jones), Condie (now Taylor) and Beachen.

Summary of results 1940 to 1954:

TB cases considered	600
other chest conditions referred	123
major operations (TB cases)	345
minor operations (TB cases)	431
other chest diseases referred	200
major operations	150
minor operations	50
other chest diseases referred (bronchoscopies)	374
Total deaths in 15 years	11

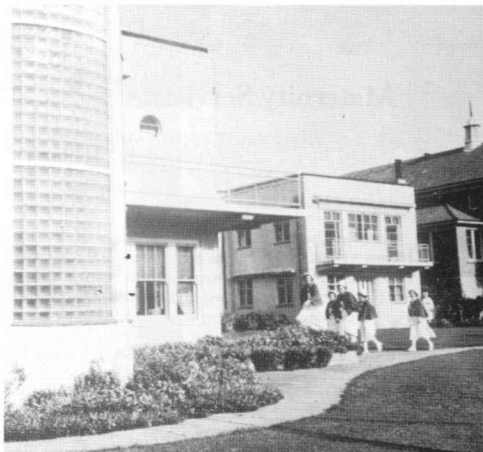
These figures are regarded as speaking for themselves, giving a quick understanding of the work done by the surgical team.



Development Over the Last Quarter

In the early 1950s it became obvious that the remaining portions of the original hospital buildings would have to be replaced and a rebuilding programme prepared.

A disastrous fire destroying the Pukeora laundry, however, caused a change of priorities as well as change of thought for the relocation of the laundry service which after the decision to have it placed at the District Hospital, produced a more urgent development scheme involving extension to the main kitchen block with the provision of male and female dining-rooms, new male staff living quarters, and also an emergency water reservoir for laundry supply and fire services. This was followed by a new boiler-house, laundry and linen servicing department, ambulance garages, workshops, incinerator. These buildings were completed in 1956 and commissioned in June 1957.

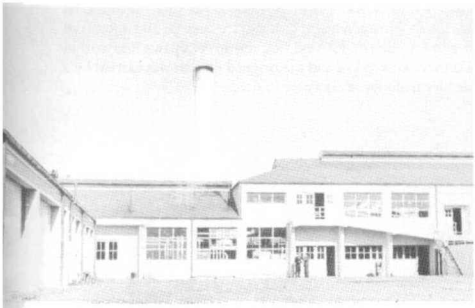


While the planning for this was proceeding, the Nurses' Home additions of 1942 were provided with an additional heating system to ease a condensation problem and thought was given to the proposal to have the Paul Hunter Ward converted to a geriatric unit. A series of loans was arranged and the administration block was completed in March, 1961, the geriatric unit in 1962, the new ward block and mortuary in 1963, operating theatre in 1964, and additions to Raymond Maternity Annexe in 1966.

This building programme, which commenced in the mid-1950s, was carried out at an approximate cost of £400,000 which when added to the conversion of Pukeora Sanatorium to a Home for Disabled and converted to decimal currency meant a capital expenditure of over £2,000,000 in the last 25 years.

From voluntary contributions, a very fine swimming pool for staff was built in the vicinity of the Nurses' Home in 1964 at an approximate cost of £3500. This pool has provided enjoyment to many staff and others.

The very modern and well-equipped coronary care unit was established in the nursery area of the McLean Ward out of voluntary contributions and some of the proceeds from the sale of the Rathbone Maternity Hospital. It was named the Rathbone Coronary Care Unit to perpetuate the name of Lissie Rathbone whose estate contributed large sums of money to both the Waipukurau and Dannevirke Hospitals. A T.B. annexe built out of monies from this estate after the 1914-18 war was sold by tender in the 1950s to make room for the large development programme and this annexe is now a holiday house on the Mangakuri Beach.



The old boiler house building became surplus and in 1958 was converted to be used as the bulk and issue stores, then situated in the basement and ground floors respectively in the Fisher Ward block. Vacation of that area permitted six extra nurses' bedrooms to be constructed to avoid any large scale additions to the Nurses' Home, which, if necessary, at a later date also allowed for automatic expansion of the female domestic quarters which were adjacent. This did not eventuate.

Planning was commenced for additions to the administration block, the new ward block (which included the mortuary and new ambulance entrance), alterations and additions to the operating theatre block, including air-conditioning, new lighting, and anti-static flooring, and a small addition to the Raymond Maternity Annexe.

Maternity Services



From just before the turn of the century, home confinements were considered to be the normal pattern of maternity care, but expectant mothers also had available to them lying-in establishments owned and operated by midwives, who were unregistered and no licence was required for the establishment.

It was not until the Midwives Registration Act was passed in 1904 and the success that was met with the establishment of the St Helens Hospitals in the main centres that a new era of rapid advance in hospital maternity care commenced. Licensing and registration was compulsory at the end of 1907, and various small private obstetric establishments came into being throughout the Waipawa Hospital Board district, some of which continued to operate well beyond the time when the Rathbone Maternity Hospital was established by the Waipawa Hospital Board.

Besides registration, the new era saw pupil nurses being given instruction, the maternal death rate lowered, programmes of ante-natal care started in public hospitals, inspection of private hospitals, and in 1925, the passing of the Nurses and Midwives' Act laid down a sound basis for training and practice of midwifery and maternity nursing.

In the northern area of our then large hospital board district, the two establishments operating were the St Joseph Street Hospital in Waipukurau and Sister McKenna's Hospital in Takapau. The latter hospital which was licensed for three patients was closed in early 1944 and the St Joseph Street Maternity Hospital operated by Sister Johnstone and later leased by the board from October 1, 1944, until March 31, 1948, served as a very useful interim extra establishment until the maternity annexe to the District Hospital was completed.

The trend away from home confinements to hospital obstetrics developed early and advanced rapidly and by 1927, 58.5 per cent of infants were born in hospital and 11 years later 87.32%, and by the 1960s it had risen to over 99%.

Maternity services for the indigent were made the responsibility of hospital boards in 1932 as a result of an amendment to the Health Act and in 1936 the Department of Health drew all boards' attention to the need for the provision of small obstetric units specially staffed and equipped for obstetric emergencies which, up until that time and still are in some places, treated in the surgical departments of public hospitals.

It was as early as 1912 that Mr A. E. Jull, Waipawa, offered a section of land in Waipawa as a site for a maternity home. A board committee in the same year reported the desirability of establishing a maternity home providing suitable arrangements could be made with the medical officers and the cost was not excessive. It was decided to obtain plans and estimates but costs seemed to be the impediment to the advancement of the proposal, and the later gathering of war clouds prevented any further consideration until after the epidemic following the 1914-18 war.

A move was made in January 1919 to obtain information as to what subsidy was available for the building of a maternity hospital under the broad heading of Maternity and Child Welfare, and there is evidence that the Department of Health periodically prodded the board to take some action, but on each occasion the lack of funds appeared to be the delaying cause.

In October 1923, Mr W. H. Rathbone reported the possibility of funds being available from the trustees of the Estate of Lissie Rathbone and in December of that year, an offer was received to provide up to a certain sum for the establishment of a maternity home in Waipawa. An attempt to discuss the matter in committee was lost. A report from the special committee was read, a very lengthy discussion ensued, and it was moved and seconded that the offer be accepted. An amendment that the trustees be asked to make a grant sufficient for one hospital in Waipawa and one in Dannevirke was lost and the original motion was carried by a slender majority of six votes to five.



Sister Jessie Oliver
Rathbone



RATHBONE STAFF
1935



RATHBONE STAFF, 1945

The Department of Health was written to, stating what the board was contemplating and approval was sought. Architectural drawings were forwarded to the department in January 1924 and by April, a proposal was placed before the Director-General of Health that conditionally upon the Government granting a subsidy of at least a pound for pound for the first cost of the maternity hospital including in such costs land, buildings, equipment, fencing and laying out of grounds, the trustees were prepared to grant a sum of up to £5000.

Strangely, the Director-General reported back that he was not at present prepared to recommend to the Minister to consent to the establishment of a maternity home in Waipawa. Accordingly it was decided to send a complete file of all correspondence on the subject to Sir George Hunter and Mr E. A. Ransom, MPs., requesting them jointly to wait on the Minister of Health and press the matter for a final and decisive answer to the offer. Mr A. E. Jull at the same time re-stated his offer to donate the section conditionally upon the maternity home being built in Waipawa. The land offered on this occasion was in Waverley Street where the home was later erected, the earlier land offered fronting Melville Street apparently having been developed since the first offer was made.

By August 1924, department representatives had visited the district, the trustees had paid over the sum of £5000 as a grant towards the maternity hospital, the board seal had been affixed to the deed of conveyance of the section donated by Mr Jull and on November 12, 1924, a tender from Mr A. H. R. Gillespie, of Dannevirke, was accepted for the building of the home.

The chairman reported the maternity home as nearing completion on October 14, 1925, and on December 9, 1925, Miss S. W. Pinkerton, was appointed as the matron. Sister Luoni was appointed to the staff on January 13, 1926, and the first patient was admitted on February 2, 1926.

The first patient was Mrs Lily Irene Mills, of Waipukurau, whose husband, Mr A. R. Mills, was a shepherd for Mr C. Dalby. Mrs Mills was admitted under the care of Dr W. B. Fisher who later was to become the board's medical superintendent. A total of 61 patients were confined in the Rathbone Maternity Hospital during 1926-27 and the total number of births during the period of its operation was 5258.

Notwithstanding the Waipawa Hospital Board district having shrunk from Woodville in the south to a line through Wimbledon, Ormondville and Norsewood, the demand for maternity beds threatened to exceed the number available at Rathbone Home with the threatened closure of St Joseph Street Hospital in Waipukurau. Action taken, was making two extra beds available at Rathbone Maternity Hospital immediately by requiring two members of the staff to live-out, to lease the St Joseph Street Hospital, engage the then proprietress as matron, and immediately apply to the department for authority to build a 10 bed maternity unit on a section of land on Porangahau Road opposite the isolation ward (now Paul Hunter Ward) which was under offer to the board from Miss K. F. Anderson, who earlier had operated a private hospital in Gaisford Terrace.

Other earlier proposals of buying additional land adjacent to Rathbone Maternity Hospital and the leasing of the Al-madale Boarding House in Russell Street, Waipukurau, were abandoned.

The Maternity Services Investigation Committee of Mrs G. Wall, Mrs M. Hope and Mr B. G. Atkins, supported by the power behind the board, the then managing-secretary, Mr P. R. Smyrk, formed a formidable team. The land was purchased, and the architects instructed to prepare sketch plans for 10 patients' single rooms with the provision for six extra to be erected later with nursery accommodation

Raymond Annex from the air



Opening of Raymond Annex, 1948



to suit. Other conditions of the brief were quarters for the sister-in-charge and ante-natal facilities at both the proposed annexe and the Rathbone Maternity Hospital.

The land was purchased, the Maternity Services Loan for £34,000 raised, which proved insufficient making a further £10,000 necessary one year later, the tender was let to the Fletcher Construction Company Limited, and the building was completed and opened in May 1948.

The construction of a maternity unit at Waipukurau was mainly because the Rathbone site had little potential for development because the site did not lend itself to the construction of further patients' beds without affecting the available ones. A further reason was that the centre of population of the district was in Waipukurau.

Accordingly, when bequest monies left to the board by the late Mr W. H. Rathbone, an ex-chairman, became available, these monies were used to construct a modern patients' day room at the Rathbone Home and other capital funds were used for the modernisation of the nursery and upgrading of the heating services by an oil-fired burner following the closure of the Waipawa gas works.

Meanwhile the maternity annexe in Waipukurau had been built and had been named to perpetuate the memory of Dr Cuthbert Raymond, whose services as a general practitioner and a surgeon in the district had been so highly valued by the public over a considerable span of years.

The Raymond Annexe was originally a self-contained unit, but was later linked to the Waipukurau Hospital by way of steam services. It served as a training school for maternity registration when a separate certificate was issued for that qualification, and also trained maternity nurses on the 18 months course for those who had not trained as a general nurse. With the introduction of the nurses' new curriculum, the institution became much more an annexe because it was partly staffed by nursing trainees from the Waipukurau Hospital after the two qualifications were merged into one.

The annexe was initially a 10-bed one in 1948, but as early as 1954 a sketch plan for considerable alterations and additions were prepared with thoughts in the first instance of doubling the bed capacity and providing staff accommodation. About this time, a departmental maternity services committee was studying the overall New Zealand scene, bearing in mind the population shifts, reduced stay in hospital, employment of new techniques, and generally aiming on a degree of standardisation in regard to planning bases for developing maternity services.

The inevitable delays associated with hospital building programmes caused an abandonment of the scheme of doubling the size and the proposal for six extra beds and a sizeable nursery extension without staff accommodation was put forward before drawings were completed because of the maternity scene being in a state of constant change. Justification for six extra beds disappeared and the board was happy to accept the proposal for the addition of two extra patient beds, the construction of a sizeable day room, an alteration to the nursery layout and adjoining workrooms and

the upgrading of the ablution blocks to provide for the introduction of the controversial bidet technique. The architects were instructed to commence drawings in April 1963.

Opportunity was taken to convert the heating system from steam to circulating hot-water, and this amongst other complications and delays did not allow a tender to be let for these additions until June 1965, with work being completed in September, 1966.

By this time, the Rathbone Maternity Hospital which had served the district well for over 40 years, became an extremely uneconomic unit because its daily occupied bed state had dropped as low as 2.5 with a daily cost per occupied bed of \$29. A recommendation came before the board for the institution to be closed, which was not adopted in the first instance on the casting vote of the chairman, but in the second instance, when the same recommendation came forward a little later, was adopted by the board on the same basis.

This caused considerable bad feeling throughout the area and after protracted negotiations, the Minister of Health finally consented to the proposal and the hospital was closed on August 7, 1967. An earlier attempt to obtain an injunction to restrain the board from closing the home was unsuccessful and the subsequent legal proceedings to prevent the board from selling the hospital also failed.

Notwithstanding the existence of a trust, the supreme court ruled that the board was in fact entitled to sell the home, subject to the consent of the Minister of Health, and in fact it was later sold to Dr P. Mann, who set up private practice there following a period on the whole-time staff of the Waipukurau Hospital. Dr Mann is still practising there and since 1967 maternity services have been centralised in Waipukurau.

Little use was being made of the ante-natal clinic at Raymond Annexe with doctors preferring to examine their patients in their own surgeries, and this together with other factors such as the decline in the number of births due to the acceptance of oral contraception, and the falling-off of patient admissions at the Waipukurau Hospital caused such a lack of clinical material that in May 1969, the Nurses and Midwives' Board revoked authority for the board to offer the three year general nursing programme which led to the tutorial section of Raymond becoming available for extra patients' beds in the event of an emergency.

This made Raymond Annexe capable of catering for 14 cases at one time and no embarrassment has risen since in regard to insufficient maternity accommodation in the district. In fact, the average number of occupied beds at Raymond Annexe for the year ended March 31, 1979, was 4.52.



Several improvements have been made at the annexe since 1967 in regard to heating services in the delivery suite as well as oxygen supply piped into the same area. The upgrading of the preparation room and installation of showering facilities and the introduction of air conditioning has been completed. Carpeting of the day room has also been carried out and through the kindness of the various service clubs throughout the district, colour television has also been made available.

Successive matrons and sisters in charge of the maternity units in the board's area have been:

Rathbone annexe:

9-12-25 - 31-5-26,	Miss S. W. Pinkerton
12-6-26 - 30-11-46,	Miss L. Bridge
1-12-46 - 1-1-47,	Miss D. Dalton
2-1-47 - 9-5-48,	Miss J. Oliver
10-5-48 - 31-10-48,	Miss B. Hane
1-11-48 - 7-2-52,	Miss P. R. Leslie
8-2-52 - 10-2-63,	Miss E. Oliver
10-2-63 - 7-6-67,	Various seconded temporarily from Waipukurau Hospital with Sister L. M. M. Irvine from 30-3-65 until closure.

St Joseph Street:

1-10-44 - 31-12-46	Mrs E. Johnstone.
1-1-47 - 31-3-48.	Mrs J. McCallum.

Raymond Maternity annexe:

10-5-48 - 5-2-66,	Miss J. Oliver
6-2-66 - 16-1-69,	Miss E. Oliver
17-1-69 - 24-2-74,	Miss H. E. Cody
25-2-74 - 1-4-77,	Miss J. S. McKellar
2-4-77 - present,	Miss J. D. Gaston.

Mrs. Noeline Reisma and Mrs. Norma Connolly



Nurse Beryl Spencer with babies Connolly and Reisma

First baby born at Raymond Annex



Mr. and Mrs. Maurice Cammock and Allan



Sister Ethel Oliver



RAYMOND ANNEX NURSING STAFF, 1979

Back Row: S/N H. Wood, H/A T. Davis, H/A L. Booth, S/N L. Richards, H/A J. Patterson, H/A H. Spotswood, S/N A. Limbrick
Front Row: H/A J. Fox, S/N M. Lee, S/N J. Taylor, Miss J. Gaston - Nurse in Charge, C/N I. Luxton, S/N J. Fraser.
Inset: S/N G. Rose, H/A L. Harrison.

Medical



Medical Superintendents:

- Dr. Jim Reid (part-time), 1879-1894
Dr. S. C. Godfray (part-time), 1894-1914.
Dr. J. L. Reed (part-time), 1914-1926; whole-time 1926-1934.
Dr. W. B. Fisher (part-time), 1934-1945; whole-time 1945-1955; (Assistant to J. L. Reed 1926-1934).
Dr. C. R. Raymond (part-time acting 1939-1940); visiting staff, 1926-1945.
Dr. R. M. de Lambert (acting 1940-1945 and acting Pukeora Sanatorium 1941-1944).
Dr. T. S. Norris (part-time acting 1955-56 in between appointments). Visiting staff 1934-1965).
Mr T. Lawrie (whole-time), 1956-1962.
Dr. A. G. Bell (whole-time acting) 1962-1963 and 1964-1965, R.M.O. 1934-1937, visiting staff part-time 1938-1962, whole time assistant medical superintendent 1962-1967.
Mr J. A. Weir (whole-time) 1963-1964.
Mr R. Neville Austin (whole-time) 1965-1966.
Dr. D. G. Sisely (whole-time) 1967-1978.
Dr. K. V. Marriott (part-time acting) 1978-1979.

In the Reid, Godfray and Reed periods, photographs show us riding breeches and leggings, stiffly starched collars, waistcoats and pocket watches and chains, not forgetting the moustaches, sometimes heavily waxed and pointed at the ends, and frequently stained with whatever beverage was chosen. Funny how we occasionally still see the latter, but without the wax.

Not many living will have remembered Jim Reid. Some would have remembered Charles Godfray, but many will recall Lewis Reed well and have heard from their fathers, mothers and uncles some of the stories of the times — hardship, suffering, hard work, long hours and the only means of communication, horseback, buggy or gig.

One of the stories recalled is word reaching hospital for a man with a crushed leg near Porangahau, requiring urgent medical attention — a ride on horseback by the medical officer — the amputation carried out on the roadside following the administration of the best part of a bottle of whisky and the anaesthetic; the subsequent moving of the patient to hospital and a satisfactory recovery.

Another one about the doctor in Waipawa who had obviously been working around the clock and was required to attend a meeting of an organisation to which he belonged and the social hour which normally followed. He couldn't quite

make it home and it was some time later that he was picked up by some of his colleagues and safely taken home and put to bed. It is said that all his colleagues received an account a day or two later. He knew he had seen them the night before.

The missing link, a minute book covering the period between 1879 and 1898 prevents reliable and accurate research, but what has been written depicts Jim Reid as a medical officer who performed yeoman service to the community both outside and inside the hospital.

Charles Godfray, who served the community of the district for a period of 20 years, was held in very high esteem by all and always affectionately known as "The Doctor." It has been written of him that he was first and foremost a clever, resourceful and tireless physician, and at his funeral service in 1914, one of the officiating clergymen posed a question: "What do not the early and the scattered settlers of Dr. Godfray's wide district owe to him?" and went on to say "Early and late through the blackest night, torn at by wind and pelted by rain and hail, the doctor was ever on the road, and the wonder is, that while he bore the fatigue of those days as a strong man, he did not come to an untimely end in one of the many unbridged rivers that he crossed on horseback. It can be said that regardless of fatigue and at the risk of his life, he obeyed the call of duty."

As a public man, Dr Godfray, served on council and committee, possessed a love of music and of the stage and took an active part in every form of sport offering, in particular rugby football and on the hunting field.

James Lewis Reed, who was born in Queensland, returned with his parents to Ireland and was educated at Belfast Col-



Dr. S. C. Godfray



Dr. J. Lewis Reed

lege and Victoria College, Jersey, studied medicine at Edinburgh University after qualifying, practiced in Cumberland for a short period then travelled through England and the Continent, working in hospitals in Scotland, Antwerp and Brussels before receiving an appointment on a steamer bound for Australia where he eventually settled for two years before coming to Waipawa in 1893 to be associated with Dr Godfray.

Dr Reed rendered able service as medical officer to various lodges and societies as well as being health officer to the Waipawa Town Board. He was active in athletic, racing, and hunting clubs, and was also a keen and enthusiastic member of the Waipawa Dramatic Society, being a leading figure in many of its productions. Dr Reed obtained the appointment of surgeon superintendent to the District Hospital following the death of Dr Godfray in 1914. Dr Reed's appointment was a part-time one until 1926, and during this period in November 1915, applied for and was granted leave to go to the Front and he nominated Dr. Hotop from Geraldine to be his locum tenens and this was accepted by the board. Dr Reed did not return until 1919, and in 1921 was awarded the Colonial Auxiliary Force medal for long and efficient service.

Dr Reed's appointment as a part-time superintendent was terminated in 1926 when the board insisted upon a whole-time appointment for which Dr Reed himself applied and was successful, later resigning in 1934. In 1930 Dr Reed received the coveted distinction of being appointed a Fellow of the Royal Australian College of Surgeons then expressed as F.C.S.A.

The year 1926 saw the appointment of honorary medical officers to the hospital in the persons of Cuthbert Raymond and Bill Fisher, but in 1927, conditions of appointment whereby they were required to attend the hospital at operations for several hours a week without remuneration were questioned and from later negotiations with the Department of Health, the system of paying for part-time assistants emerged. But nevertheless the hospital remained a "closed" one and the "open" system was not adopted until Bill Fisher took over the part-time superintendency in October, 1934.

Dr Reed reported to the board on the hospital's activities during the year ended March 31, 1927, and quoted the number of patients under treatment for the year as being 760, of which 464 cases were surgical and 296 medical. Of the surgical cases, 363 operations were performed in the theatre of which 222 were major and 141 minor. Of the 296 medical cases, all were treated in the general wards with the exception of 45 which were admitted to the isolation ward. Also reported was that in addition to anaesthetics administered in the operating theatre, there were 88 general anaesthetics given in the wards, making a total for the year of 451 administrations. He reported that the number of patients had continued to rise since 1920/21 in which year only 389 inpatients were cared for.

In making his recommendations to the board before resigning, Dr Reed suggested a part-time medical superintendent with a resident medical officer with at least two years'

hospital experience, the medical superintendent to be responsible for the general administration of medical services and to do the ordinary routine work of the hospital in conjunction with the resident medical officer. He would attend his own cases and such other cases as were sent in by outside medical men, attend to X-ray, lectures to nurses, operating or assisting at operations.

The resident medical officer would act under instructions from and in conjunction with the medical superintendent to help in routine work of wards or in the theatre, nurses' lectures, keeping of case records, etc. He then recommended an anaesthetist, etc. to give anaesthetics or assist at operations — to operate on his own cases — to act as medical superintendent when necessary and to assist during the absence on leave of the resident medical officer. He stated that he had in mind Drs Fisher and Raymond with the R.M.O. position to be advertised, and his attempt to interest Drs Coutts and Norris in being associated with the hospital.



Dr. W.B. Fisher



Dr. C.R. Raymond

Bill Fisher first became associated with the hospital as an assistant to Lewis Reed in November 1926 on a part-time basis, was appointed to the position of part-time medical superintendent with a right of private practice on October 1, 1934, and was granted leave for military service in December 1939 with his first posting to the Maori Battalion with which unit he left New Zealand. He was associated with the Fifth and Sixth Field Ambulance Units in Greece, Crete and the Western Desert, and commanded the Sixth Field Ambulance in Tunisia and Italy. Towards the end of 1944, he was posted to the command of No 1. New Zealand Gen. Hospital and remained with the unit until the end of hostilities. In 1945 he was awarded the O.B.E.

Other appointments made to the part-time medical staff in 1934 were Dan Norris and James Coutts with Dan carrying right through to June 30, 1965, well before which time he became the "father" of the local visiting medical staff and was the one that the board looked to so frequently for a long period to act in between appointments and during absences of superintendents. Dan's popularity with both his colleagues and the public always ensured harmonious working of the hospital and a busy successful private practice. He was later to become a member of the Waipawa Hospital Board and served from 1965 to 1971.



Dr. T.S. Norris



Dr. A.G. Bell



Dr. D.Y. Allan



Mr. T. Lawrie

Arthur Bell also joined the staff in a full-time capacity on October 1, 1934, but resigned in May 1937 to travel overseas to further his studies in surgery. On returning to New Zealand, he set up in private practice and was appointed to the honorary medical staff in 1938, which staff became stipendiary in 1939. He vacated that position in March 1962 and again travelled overseas, being reappointed on October 29, 1962 as assistant medical superintendent whole-time — a position which he held until December 21, 1967, and later taking up practice in the South Island. Arthur acted as whole-time medical superintendent between 1962 and 1963 between a resignation and a new appointment, and again between 1964 and 1965. It has been said of Arthur Bell that perhaps no doctor of our district worked harder or for longer hours and could always be found when he was wanted. His capacity for work was tremendous as was his popularity.

The "open" system of hospital brought in following Bill Fisher's appointment to the position of part-time superintendent allowed each doctor on the visiting staff to attend to the patients he himself had sent into hospital, but following discussions with the visiting medical staff, a new system was given a trial in December 1938 whereby each doctor was put in charge of a ward or wards and certain types of patients requiring special investigation and treatment such as orthopaedics or urological allocated to particular doctors who would thus have the opportunity of becoming more proficient in the management of these cases. The system worked well and was slightly modified in November 1939 where a division of patients into medical and surgical took place with all the medical patients being under the care of Dr Allan and a reversion to the former system of each surgeon attending to his own surgical cases which would lead to smoother running. Dr Allan's surgical cases came under the care of the acting medical superintendent who had the prerogative of delegating their treatment if required.

Dr Raymond was appointed acting superintendent, at the time of Dr Fisher's departure overseas, to exercise control over all patients in hospital, especially over all surgical cases. This arrangement lasted until Dr Raymond asked to be relieved of the position of acting medical superintendent in December 1940 so that he could revert to the position as senior surgeon and chairman of the visiting medical staff. The Department of Health approved of the board's recommendation and Rob de Lambert took over the position of acting medical superintendent after giving the board written

assurance that he would remain in the position until Bill Fisher returned or vacated the position of medical superintendent. Dr Raymond was always considered as a surgeon of considerable skill, resigned on April 22, 1945, and later moved to the North Auckland area where he lived in retirement.

Don Allan was appointed to the visiting medical staff in January 1938 as a very highly qualified physician and patients admitted to the Waipukurau Hospital were recipients of his expertise for 35 years as a physician, specialising in cardiology and anaesthesia. Don Allan still gives service in the district as a private practitioner and in recent years was made a Fellow of the Royal Australasian College of Physicians. Don made his mark in sport as well as medicine excelling in cricket, tennis, bowls and snooker and at the same time being a competent golfer, still playing the game once a week. He will be remembered for long time.

The introduction of Social Security legislation in 1938 required further study of medical staffing patterns and remuneration resulting in cancellation of "honorary" appointments and replacing them with stipendiary visiting appointments.

As an eminent doctor stated: "The retention of honorary staffing — so long an honoured service given by the medical profession to the poorer people of the Dominion — has become impossible with the development of public hospitals — and with the necessary specialisation in medicine it is only by some staffing on a part-time basis that all specialties can be provided economically."

In 1940 all honorary appointments were terminated, leaving those holding them free to apply for stipendiary positions. A certain sum of money was allocated for division between those applying and being accepted in either senior or junior positions as defined by the Brisbane System which also called for each board to establish an appointments committee. The committee was to have particular regard to post-graduate qualifications, professional skill and standing, past service, and personal suitability. Due to the size of its hospital and its consequent inability to attract sufficient highly qualified medical personnel to the area, the board reposed the functions of such a committee in the medical superintendent. While the appointment of certain personnel was automatic due to qualifications, the remainder were also virtually so, due to the long established policy of desirably associating all the general practitioners in the district with the hospital, mainly to prevent professional isolation and to assist the district medical service generally.

The brunt of the administration of the medical services of the hospital during the war years (1940-1945) was borne by Rob de Lambert who for the majority of that time also had Pukeora Sanatorium to administer. He was spoken of as a "born administrator," a hard worker who had no time to take a holiday, and a very able medical officer with a flair for radiology in which he later obtained a post-graduate qualification.

With Bill Fisher's return from overseas in 1945, chest surgery was well under way and by 1952, consolidation of medical staffing had taken place with the appointment of additional visiting specialists and a whole-time surgeon in the person of John Trezise who gave a period of very valuable service until the end of 1955, both as a surgeon and as an administrator as a relief for Dr Fisher.

Tom Lawrie was the next medical superintendent and besides providing much in the field of surgery, consolidated the medical administration and shared the rather difficult task of establishing the Home for Disabled at Pukeora and seeing it through its experimental stages. Chest surgery had ceased at Waipukurau when Tom arrived and this would have been the beginning of the gradual decline in clinical impetus at the Waipukurau Hospital which finally in 1971 caused the Medical Council to revoke the gazetted recognition of the hospital as a house surgeon training institution. During these years, Jim Weir had served for 18 months as superintendent and Neville Austin for a similar period with Des Sisely taking over the position in 1967 and remaining until 1978. The service by Des Sisely was valuable and as well as giving more stability to the established medical staffing pattern, provided another pair of surgical hands as well as a referral service for many ophthalmic conditions.

By 1978 many adjustments had been made to the specialists' appointments and the sessions of the visiting medical staff and currently we have Kevin Marriott acting as part-time medical superintendent with Tony Quinn, Peter Mann, Ian Fleming and Tim Mason assisting from their local practices and supported by others in various specialties from Palmerston North, Napier and Hastings. (Mr G. J. Taine, orthopaedics; Mr N. Little, E.N.T.; Drs Feltham and Nathan, radiology; Dr L. L. Cordery, radiotherapy; Dr F. M. B. Woodhouse, geriatrics; Mr S. R. Young, and Mr G. R. Krishnaya, surgeons; Dr C. O. Crawford, neurophysician; Dr R. D. Wigley, rheumatology; Drs A. V. Kurta and G. Kirk, physicians). The position of medical superintendent is currently being advertised.

Medical services to the district hospital would not be adequately covered without mentioning, as well as those above, some who served as house surgeons and made their careers elsewhere and others who served the district in general practice and made an additional contribution to the hospital as members of the visiting medical staff. Some of these were: Colin Foote, Brian Mulverhill, Martin Girling-Butcher, Jim Hall, David Sabiston, Joe Harkness, Des Dickson, Bob Macalister, Charlie Wong, Bill Davies, Ed Petersen, Bill Drake, David Hogg, Don Nairn, Carol Willis, Maurice Nathan, Russell Comber, and Phyllis Taylor. All of these doctors and others, whose names may not be mentioned, will remember the long and arduous hours of call duty which carried no extra remuneration while they were on the whole-time staff of the hospital.



MEDICAL STAFF, 1979

Back Row: A. Quinn, I.D. Fleming, T.J. Mason.
Inset: K.V. Marriott, G.R. Krishnaya
Front Row: A.V. Kurta, P. Mann.



Nursing

Mrs Putman	1879	1895
Miss Shepherd	1895	1898
Miss Godfray	1898	1904
Miss Carston	1904	1922
Miss Drummond	1922	1932
Miss Turnbull	1932	1945
Miss Mitchell	1945	1946
Miss Rose	1946	1958
Miss Shaw	1958	1969
Miss Bayly	1969	1972
Miss Pence	1973	present day

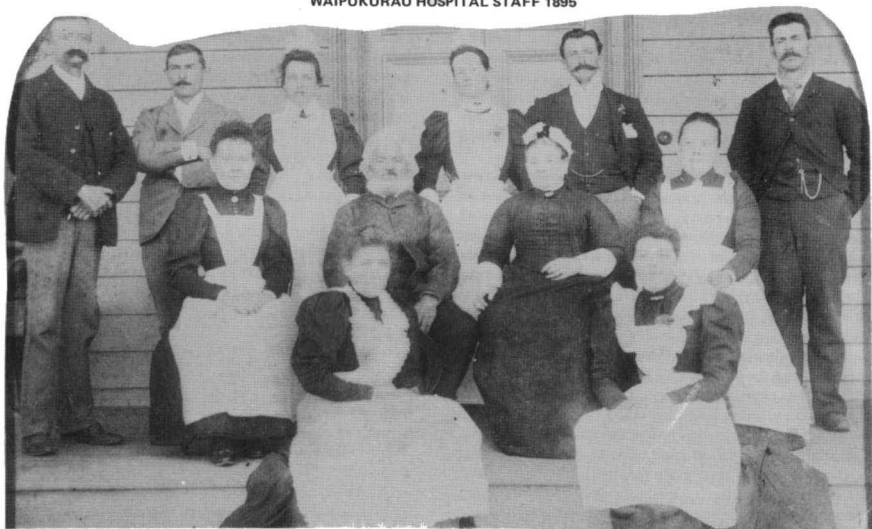
A century of service to and caring for the community and district has been given by the nursing profession under the leadership of only 11 women. They were known over the years in turn, as matron, lady superintendent, supervising matron and supervising principal nurse, and although the titles have changed, the principle of maintaining a high standard of care for the patient and providing a good training for nurses has been the unchanging ideal and achievement over the hundred years.

When the hospital opened, the wife of the master of the hospital, Mrs Elizabeth Putman, was the matron, and she filled this position for 16 years.

Unfortunately, little has been recorded about the service given by Miss Shepherd and Miss Godfray. Miss Godfray, the sister of Dr Godfray saw service in the Boer War.



WAIPUKURAU HOSPITAL STAFF 1895



Back Row: Mr. J. Nelson Dr. Godfray, Nurse Skinner, Nurse Spooner, Dr. Lewis Reed, Mr. T. Halligan
 Middle Row: Bella Clarken, Mr. Putman (Master), Mrs. Putman (Matron), Mrs. Staines
 Front Row: M. Moran, A. Kearns.

Miss Shepherd and Nurses



Miss Godfray and Nurses in front of Nurses Home about 1904





STAFF 1913

Back Row: Nuran Claire, Jackson, Berryman, Amerson
 Middle Row: Dr. Raymond, Sisters Flynn, Knight, Rogers,
 Richardson, Dr. Bogle
 Front Row: Dr. Reid, Matron Carston, Mr. Ashley

Miss Margaret Carston, the fourth matron, was on the staff at the outbreak of the Boer War in 1899. After volunteering and seeing considerable service in South Africa, she returned to Waipukurau and was appointed matron, holding the position for some 18 years. Management of the dispensary was also her responsibility.

It was during this period that the hospital became a training school, and in 1913 four girls commenced their training. A Takapou girl Miss Gertrude Jackson, (now Mrs Harward) is the only one alive. To her, nursing was the fulfilment of

her childhood ambition and she loved every minute of it. Mrs Harward remembers Miss Carston as fair and just, and says she taught her manners as well as nursing skills. There were no regular intakes of probationer nurses, and usually there would be only one or two at a time.

Another trainee of this period describes Miss Carston as quick in speech and movement, demanding a high standard. When on the warpath one had to beware, but she gave praise where praise was due, and had a lively sense of humour. A keen gardener, it is reputed that she was responsible for the lay-out of the hospital gardens.

Miss Helen Turnbull, a girl who was later to leave her mark on the hospital, commenced her training in 1917, the start of 28 years of service.

The first local girl accepted for training at Waipukurau Hospital, Miss Irene Booth (now Mrs Gore), commenced in 1920. She is quietly reminiscent—

"I am Sprinkle the ward floor with damp tea leaves, sweep, then polish the tops of the lockers; after breakfast, repeat sweeping and polish floors — making soap — and plum jam, and what about helping cook the fish in the main kitchen when it was cook's pay-day and she was incapable!

"Do you remember the friendships made — singing around the piano, the fun, and the love of nursing?"

Miss Meg Wagner also started in 1920 and, apart from two breaks away, she held many senior positions including that of Deputy Matron under Miss Drummond, until her retirement in 1952. Returning to active nursing in 1955, she again filled several senior positions and latterly a period of part-time relieving until the end of the sixties. Nurses and patients alike remember her nursing skills, her dignity, her love of garden and flowers and "Wags" as she was affectionately known, must have the honour of being the hospital's longest serving nurse.

In 1922 Miss Carston retired and has the distinction of being the longest-serving matron. She later spent some years as a home sister.



Hilda McLean, Win Cairns, Meg Wagner, Rosetta Black.

Miss Catherine Drummond, who had served overseas during the 1914-1918 war, was appointed matron in 1922 and held this position for 10 years. She is remembered as a "leader" and expected her staff to give of their best at all times. She also served as anaesthetist for the doctors. The trainees received lectures from the doctors, but gained their expertise by precept and example from the sisters and matron. Much credit must be given Miss Drummond for her organisation within the district during the earthquake of 1931. Staff remember her concern and help for the nurses. After long work hours, Miss Drummond would drive great distances to enable a girl to get news of home and family. She retired in 1932, spending the remaining years of her life in Christchurch.

Miss Rosetta Black (now Mrs Cairns) was brought up in the district and began her training in 1924. Giving service at Pukeora Sanatorium, as midwife at Rathbone Maternity Home, and at the hospital, she held the position of afternoon supervisor when she retired in 1945.

NURSING AND MEDICAL STAFF 1931



Two more local girls commenced in 1925. One who was to give 21 years of service was Miss Bell Mitchell. She was the first tutor, the first trainee to undertake the post-graduate course, and is remembered by nurses of her time as an understanding home sister. She was matron from 1945-1946, leaving to marry Mr Jim Stewart. At the time of writing, she is in our care, and is visited by many of her ex-colleagues and trainees, all enjoying her humour and love of people.

The other was Miss Hilda McLean who gave between 20 and 30 years of love and service to the hospital, being the assistant matron at the time of her retirement.

During the thirties, two more local girls (sisters) began their careers and each was to serve over 30 years. They were also destined to leave their mark on the district maternity services. Miss Jessie Oliver started in 1931 and as well as a period spent in general nursing, she was a sister-in-charge of Rathbone Maternity Hospital and the first sister-in-charge of Raymond Maternity Annex, holding that position for 18 years. In 1934, Miss Ethel Oliver commenced and had a pattern of service similar to that of her sister. She was sister-in-charge of Rathbone Maternity Hospital for 11 years, and was appointed to the charge position at Raymond on Miss Jessie's retirement. Even today, Ethel is still associated with the hospital as supervisor for the State examinations.

In 1932 Miss Helen Turnbull was appointed matron, a position she held with grace and dignity for 13 years. Just to look at Turnie, as she was affectionately known, was to see her inner strength — a lovely calm face — white hair (and do you remember her hats?) She exemplified the term "a born nurse." She could adapt to any circumstances, having empathy with relatives of patients and staff in both troubles and

joys. Her nurses became an extended family and she was intensely interested in all their doings. Miss Turnbull was an example of the era when one was on duty until all was quiet and under control. Devoted to the welfare of people nursing was her first love. Living in Christchurch during her retirement she retained close ties with Waipukurau, visiting the district at intervals.

In 1939 the war years commenced and with the war came an extension of the specialist chest surgery being done for patients at Pukeora Sanatorium. This period gave both the medical staff and nurses a challenge to meet.

The nursing staff achieved expertise in chest surgery, and were privileged to work with some of the foremost surgeons of the time. Theatre sisters and their nurses will remember the three monthly sessions of what seemed day and night work. Over these weekends it was never tactful for "spareribs" to appear on the menu! The surgical nursing staff also had great skill and there are many ex-patients throughout New Zealand who remember Waipukurau Hospital with gratitude.

The wind of change started to be felt in the early post-war years. Tui Mayo was tutor when a block system was introduced, and this was a great step forward from having lectures after duty. A day off a week became a more regular thing. Students from overseas were included in classes (Yugoslavia, France, Holland, Great Britain, Samoa, to name but a few) and this brought greater understanding of other cultures, and this, together with the integration into the service of overseas trained nurses, broadened everyone's outlook. Note also, the probationer nurse has become a student nurse.



NURSING AND MEDICAL STAFF, 1934



Nursing and Medical Staff
1944



Nursing, Medical and Paramedical Staff
1946



NURSING STAFF 1979

Inset: S/N M. Scott, S/N B. Atkins, E/N R. Kale.

Fourth Row: E/N T. Fraser, N.L. Watson, H/A J. Fogarty, H/A J. Jenkins, H/A M. Rosser, H/A B. Anderson, H/A K. Fayen, H/A J. Barnes, C.S.D. L. Jones.

Third Row: H/A P. Warren, S/N A. Edgcombe, N.A. Holmberg, N.P. Rose, N.N. Kutia, N.S. Wynne-Lewis, N.W. van Leeuwen, N.J. Perry, N.K. Heremia, N.M. Hill, N.S. Barry.

Second Row: Mrs. P. Hewitt, S/N E. Horn, S/N C. Moriarty, S/N K. Simcox, N.K. Smyth, E/N L. Codyre, E/N A. Dickinson, E/N C. Morris, E/N B. Carruthers, E/N A. Lloyd, E/N F. Hughes.

Front Row: S/N G. Newton, S/N M. Hoogenboom, C/N M. Ruffell, S/N M. Prince, S/N D. Warren, C/N A. Hall, C/N V. Thelwall, C/N H. Ross, C/N R. Holes, Mrs. H. Cole (Tutor), Miss P. Pene (Supervising Principal Nurse).

Inset: H/A F. Wanoa, E/N C. Hall, N.D. Pullen, N.E. Pywell, N.R. Childs, N.S. McCarthy,

Fourth Row: C.S.D. P. Spencer, H/A P. Birdsell, H/A K. Norris, N.C. Noble, H/A C. Bungard, N.D. Burt, H/A E. Berquist, H/A S. Hickey, H/A P. Hatt, Mrs. Garva

Third Row: E/N M. Stolte, E/N A. Budd, E/N S. Ferguson, N.L. O'Keefe, N.K. Philpott, N.D. Wilson, N.D. Scott, N.J. Bidois, H/A P. Jackson, H/A D. Kennett.

Second Row: E/N P. Logan, E/N B. Fleming, E/N F. Darby, E/N R. Helena, E/N M. Cato, E/N M. Petersen, N.N. Wyllie, E/N J. Williams, S/N S. McLaughlin, S/N E. Scarlett, C/N M. Taylor.

Front Row: Mrs. P. Graham (Day Supervisor), C/N J. Hamlin, C/N Y. Robertson, C/N M.A. Catley, S/N S. Sloan, S/N C. Green, S/N B. Staines, S/N M. Collin, S/N B. Russell, S/N E. Robertson, S/N A. Beck, C/N K. Kearns.



ROYAL VISIT 1952

Mr. J. McCarthy, Mayor, Queen Elizabeth, Prince Philip, Miss E.A. Rose

Following the marriage Miss Mitchell in 1946, the new matron (known from this time as lady superintendent), Miss Ellen Rose, brought from Southland a regime of change, both in administration and, "a change of fashion." Her managerial skills brought better utilisation of all resources although it was only in later years that the nurses of the change-over period recognised the benefits of change. Vast changes were opening up in these post-war years in all aspects of hospital service, plus social change within the community.

Miss Rose had the honour of being presented to the Queen during the Royal Tour in 1953 and, just after her retirement in 1958 due to ill-health, she was the recipient of the M.B.E. for her services to nursing. With some improvement in health, she was able to establish, in Southland, a home aid service, continuing to make a valuable contribution to the community for a number of years.



"From veils to the cap and bow"

TRAINING IN NURSING.

WAIPUKURAU HOSPITAL.

NEW CLASSES for training in Nursing will commence at Waipukurau Hospital, in November, 1956, and January, 1957.

Waipukurau Hospital is an "A" Grade Training School. Entry may be made at the age of 17 years as a CADET NURSE and as a STUDENT NURSE from 18 years of age. The course of training covers 3 years.

Full board and lodging, uniforms, shoes and stockings are provided without charge.

Salaries for each fortnight are:—

1st year: £9 10/1

2nd year: £10 5/8

3rd year: £10 15/2, and on qualification the salary is that of Staff Nurse at £16 14/2, followed by annual increases according to positions held.

Inquiries are invited for full particulars from the Lady Superintendent. 3055



Miss E.A. Rose

Do you remember — "Counting the crockery and the linen daily — yearly stocktaking — choir and carol practices — a happy Christmas day, all day long — the comradeship of living-in — the annual nurses' ball in the sitting-rooms?"



Sister P. Graham

In 1949, a young Southland-trained nurse Mrs Peggy Graham commenced duty, and over the next 30 years made a mammoth contribution to nursing service, not least of which was her development of a central dressing service, commenced in 1950, into a comprehensive central sterile supply department. This led to the National Health Institute utilising her services to lecture to several courses on central sterile supply management. She spent ten years as sister-in-charge of the operating theatre, during which time there was upgrading and extension of the theatre block with incorporation of the central sterile supply department facilities. Changes were dramatic — the ward steriliser became redundant and the day of “disposables” was fast emerging. Mrs Graham gave up theatre work in 1968, returning to the senior relief position she had held earlier and in 1969 was appointed to the position of day supervisor (assistant to the matron). Later, carrying the responsibility of in-service education for the registered staff, she established a continuing cardiac arrest resuscitation programme for all members of hospital staff — and no-one dare miss this instruction! Holding the supervisor's position until her retirement in October 1979, nursing service has benefited greatly from the conscientious approach Mrs Graham has given to all aspects of her work and from the ground work carried out by her to improve patient care.

The year 1958 brought Miss Freda Shaw from Thames to replace Miss Rose, and shortly after her arrival she was to be involved with the first nurses' reunion. Important changes were to take place during her 11 years as supervising matron, not least of which was a major change to nurses' salary and conditions of work. The 40-hour week was implemented. Payment of overtime and penal rates for weekends and public holidays commenced, annual leave was increased — time-sheets had to be kept. A traumatic experience for nurses who were accustomed to staying on duty until their work was done — and sneaking on early to get a good start!

This era brought a new category of student to the hospital: the community nurse. It saw the first male students. Sadly, it also saw the revoking in May 1969, of the general nursing programme, due to a lack of clinical material for the three year general programme. Nevertheless all traditions and pride in their hospital is being ably carried on by the students and graduates.

Miss Shaw's years of retirement in Auckland since 1969 have unfortunately been beset by ill-health.



Miss F.M. Shaw

Do you remember — “Rolling swabs — making dressings and packing drums on night duty — the “tray book” — the sterilizer floods — and the burnt catheters?”



Acting Supervising Principal Nurse 1979



Miss Dorothy Bayly who replaced Miss Shaw in 1969, had great interest and flair for administration and was also the first matron to wear "mufti" on duty. Having gained insight into the smaller hospital, she moved in 1972 into another administrative field, joining the Nursing Division of the Department of Health. It is interesting that the hospital service once more benefits from her skills, as she is now the principal nurse at Rotorua hospital.



Miss D.J. Bayly

Miss Pearl Pene who was matron at Waimate Hospital, commenced at the beginning of 1973, and September of that year brought the Waipukurau Hospital nurses' diamond jubilee reunion. A most successful gathering and many friendships renewed.

Over the next few years, changes to salary scales and conditions of service have continued. Annual leave entitlement has further increased, special allowances for shift work and "changing time for nurses" to name just a few. The poorly paid nurse is a thing of the past; instead, nursing staff salaries are approximately 48% of the total salaries and wages expenditure.

Another change, was one of nursing titles. Miss Pene found herself the supervising principal nurse and she no longer employs sisters, but charge nurses and staff nurses. The community nurse disappeared; there is instead a student for enrolment who, on graduation becomes an enrolled nurse. A new category of nurse works at Waipukurau Hospital in 1979, the comprehensive nurse, who complete their training outside the traditional hospital setting.

This era finds the heads of nursing more and more involved with administration and further away from the patient. Another change is no segregation of departmental and nursing staff. Nurses now enjoy the mixing during "Smoko" and meal breaks with all categories of hospital employees, including the board members.

A major change in the centennial year is the commencement of the district nursing service. This had been strived for by the nursing administrators for over a decade. At last, the right statistical evidence became available for the Health Department's approval. The service quickly proved the community need — and it has already been extended to the employment of home aids.

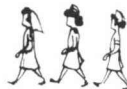
The year 1979 brings many problems for hospital administrators. Money is short; and nursing services are doing their utmost to assist during the economic crisis, without lowering the standard of patient care. Staff still have a strong sense of comradeship and are proud of the hospital and its good name.

Over the 66 years, students have achieved a high pass rate in the State Examinations, and much credit for this is due to a succession of excellent tutors.

There have been vast changes; but nursing enters the second century of Waipukurau Hospital, secure in the knowledge that the high standards laid down by the nursing leaders of the past, plus the high standard of facilities provided by the Waipawa Hospital Board for nursing staff, will ensure that the future will be as we, the present-day staff, make it.



Miss P. Pene



SOME OF THE TUTORS



Sister J. Staines,



Sister B. Mitchell,



Sister G. Jago,



Sister N. O'Rourke



Sister J. O'Connell



Sister N. Cole



Sister A. Slater

Administration



When the Waipukurau Hospital was commissioned in 1879, administration was by way of a Hospital Committee with management in the hands of a Master and Matron together with a part-time Medical Superintendent. It is thought that the Master probably carried out the duties, which today would be shared by a House Manager and clerical officers under the control of a Board executive officer.

Mr and Mrs Putman were Master and Matron respectively until 1895, and their grand-daughter, Miss M. Hartley, who still lives in Waipukurau, will be the guest of the Centennial Committee at the Celebrations in October, 1979.

Mr J. H. Nelson commenced as the first Hospital Board Secretary probably in 1889 and he served in that capacity for a period of approximately 18 years. A daughter, Mrs J. H. Jenkins, still lives in Waipukurau, and a grandson Mr P. Sharpin, worked as a Clerk for the Waipawa Hospital Board during the 1930s, later transferred to Wellington, and subsequently became the Managing Secretary of the South Otago Hospital Board in Balclutha.

The duties of Secretary of a Board in 1908, were to keep the accounts, answer correspondence, attend all meetings, attend the Hospital daily from 9am until 11am, and attend to all other duties generally appertaining to a secretaryship.

Mr G. B. Ashley who was also Town Clerk, was appointed to the Secretaryship in 1908, and on his resignation being accepted in 1919, Mr J. J. East was appointed to fill the vacancy and carried on until 1927 when his appointment also terminated.

New conditions of appointment and duties were decided upon by the Board and because this took some time and was to be widely advertised, a local Public Accountant, in the person of Mr F. A. G. Dunn was called in to act as part-time Secretary with Miss M. Patterson acting as Treasurer. After a few months, Mr P. R. Smyrk was appointed and provision was made to increase staffing.

Percy Smyrk came from the Hawke's Bay Hospital Board Office in Napier, which he apparently joined after his return from World War I and arrived at a time when further development of the Hospital was imminent — a challenge which he accepted with enthusiasm and drive. By 1933 he was required to expand his staff considerably because of the Board having taken control of Pukeora Sanatorium on the 1st October of that year.



Mr. and Mrs. Putman



Mr. J.H. Nelson

Mr. P. R. Smyrk



One of the clerks appointed was Mr J. S. Knobloch, who rose to the position of Accountant in 1936, joined the R.N.Z.A.F., in 1940, was awarded the D.F.C., in 1944, and after demobilization from the position of O.C. Operational Training Unit, Ohakea, returned to the Board's service in September, 1945, to his previous position of Accountant, and later appointed to the position of Assistant Secretary/Accountant. His position was occupied by Mr E. W. T. (Jack) Brooks during the war years, who had the task of coping with all the accounting problems arising from the Board ceding control of Pukeora Sanatorium to a Joint Committee in 1944.

After serving as House Manager at Pukeora Sanatorium between 1945 and 1950, Jack Brooks was appointed Assistant Secretary to Jack Knobloch, who succeeded Percy Smyrk following his untimely death that year. Percy Smyrk is remembered as a colourful personality whose interests during his career extended over a very wide range, all of which were pursued with tremendous verve.

The title of Secretary was changed to Managing Secretary with the introduction of new By-Laws on the 1st April, 1935, which gave the Managing Secretary control over all male employees of the Board with the exception of Medical Staffs, and was made the recognized official channel of communication between the Board and all officials and employees. The new Conditions of Appointment in 1950 made the Managing Secretary the Chief Executive Officer of the Board.

Mr N. F. Armstrong joined the Board's service in 1952 as a Staff Clerk, later promoted to the position of Accountant which position he held until his retirement in 1977 after 25 years of valuable service.

Jack Brooks who retired in 1967 was in his 30th year of very valuable service and later served as a Board Member for a period of nearly 10 years, the largest portion of which was as Deputy Chairman.

Jack Knobloch has served the Waipukurau Hospital and the Board longer than any other person and will complete 46 years service on the 11th September, 1979, of which over 29 years has been as Managing Secretary and Chief Executive. During his period of service, the development of the three Institutions has been completed for the foreseeable future with plans having been drawn for a Hostel and Workshop for utilization by the New Zealand Society for Intellectually Handicapped – a tender for which it is hoped may be let some time in 1979.

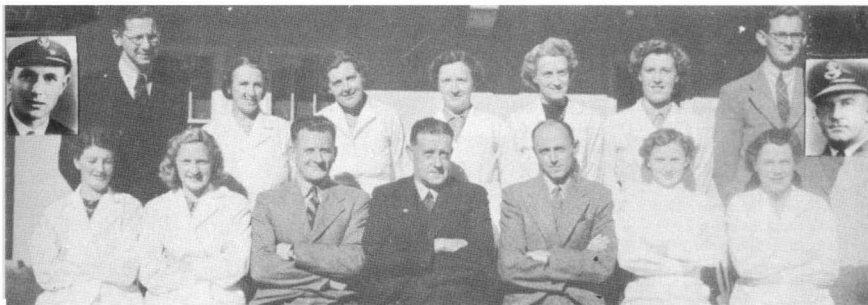
Amongst the very many persons who have made significant contributions to the administration as long serving officers are: Irene Shaw (now Butler), Mary Buchanan, Zena Welsh, Mary Urquhart, Iris Ferguson, Gwladys Major, Vaughan Halligan, Keith Yanko, Pete Smith, Betty Douglas, Ruth Barclay, Joyce Haldane, and Kevin Higgins



Mr. J.S. Knobloch



Administration Staff, 1935



Administration Staff, 1944



Administration Staff, 1979

A family record is that of the Hunter Family of Porangahau commencing with Mr Paul Hunter having been elected to the Board in 1920, his son, Mr Percy Hunter succeeding him in 1926 – giving 41 years service, 20 years of which was as Board Chairman, and his son, Mr Paul Hunter, who was appointed to fill the vacancy was elected Chairman in October, 1971, which office he held until not seeking re-election in 1977. The original Paul Hunter was also Chairman for certain meetings in the 1920s so that father, son, and grandson, all occupied the Chair and between them contributed a continuous 57 years of service to the Waipukurau Hospital.



Successive Chairmen:

Mr A. E. Jull: December 1897 – December 1898
Mr W. White: December 1898 – December 1902
Mr A. E. Jull: December 1902 – December 1904
Mr W. White: December 1904 – December 1905
Mr A. E. Jull: December 1905 – December 1906
Mr W. White: December 1906 – December 1907
Mr A. E. Jull: December 1907 – September 1908
Rev. H. M. Ries: September 1908 – December 1908
Mr W. White: December 1908 – December 1909
Mr A. E. Jull: December 1909 – April 1912
Mr G. E. Bickford: April 1912 – April 1914
Mr A. E. Jull: April 1914 – November 1914
Mr G. E. Bickford: November 1914 – May 25, 1923
Mr H. Burnett: May 25, 1923 – April 3, 1925
Mr W. H. Rathbone: April 3, 1925 – December 17, 1947
Mr T. P. Hunter: December 17, 1947 – February 21, 1968
Mr F. Eagle: February 21, 1968 – August 20, 1969
Mr J. A. Harrison: August 20, 1969 – October 27, 1971
Mr G. P. Hunter: October 27, 1971 – October 12, 1977
Mr A. R. Train: October 12, 1977 to present day.



Members Waipawa Hospital Board, 1932



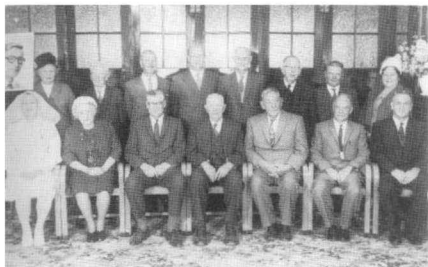
Board Members and Executive Staff, 1944



Board Members and Executive Staff, 1934



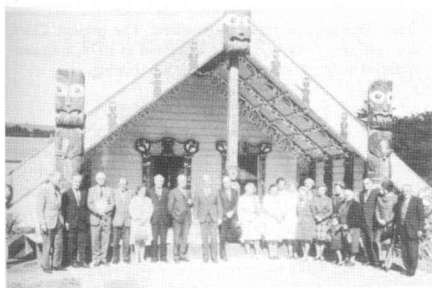
Board Members – Raymond Annex opening 1948



Board Members and Executive Staff, 1963



Board Members and Executive Staff, 1969

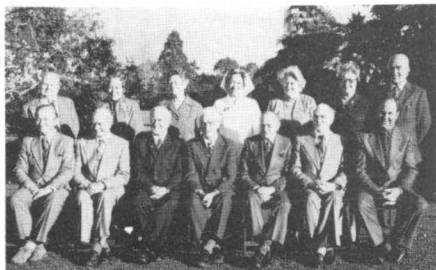


**Poho - O - Kahungunu Meeting House
Porangahau**

**Board Members, Executive Members and
Friends, 15th September 1971**



Board Members and Executive Staff, 1979



Board Members and Executive Staff, 1971



Para-Medical



LABORATORY SERVICES

The Laboratory was established in 1934 in a small side room next to the old Dispensary, and the first appointed Bacteriologist was Miss Lovell-Smith, who had received some laboratory training at Napier Hospital, and who was also a nurse. Tests were of an elementary nature, and work was also sent to both Palmerston North and Napier Hospitals, as had been the case prior to Miss Lovell-Smith's appointment. Specimens to these two Hospitals were despatched by express train and would arrive at their destination about 1pm in Palmerston North and 5pm in Napier, with reports being telephoned back in the evening wherever practicable. Miss Lovell-Smith departed after comparatively short service, and it was not until 1938 when Miss Bourke was appointed that the Laboratory was again adequately staffed. Miss Bourke had lengthy laboratory experience, some being in Napier and Auckland. During her stay at Waipukurau she was instrumental in starting a local branch of the National Blood Transfusion Service which preceded the existing New Zealand Blood transfusion Service, which now operates regionally the mobile units based in Palmerston North visiting Waipukurau on a regular basis, with the Hospital drawing its requirements from Palmerston North as required. Blood transfusion work had become much more important with the advent of the Chest Surgery Unit at the Hospital and a greatly increased demand for blood. In 1941 Miss J. M. Martin became assistant to Miss Bourke, being employed equally between the Laboratory and the X-Ray Department, but she stayed only one year. In 1941 the Laboratory moved to the present location below the X-Ray Department. It had been intended that it should be in the present Outpatients' wing, but all available space there was required for that Department.

The new laboratory was spacious and served for many years until 1970 when the Department expanded into two small vacant rooms and finally in 1975 using an adjacent large room.

In 1943 the first qualified technologist, Mr G. W. McKinley, was appointed from Auckland Hospital to take charge of the laboratory services at both Waipukurau Hospital and Pukeora Sanatorium. He was to remain until his retirement in 1978, and during this time, Mrs J. Carter and Mrs A. Johnston served as qualified assistants for one year and two years respectively. Mr K. Boddy (now of Clyde) was qualified assistant from 1973-1977.

In 1943 Miss Bourke left to go to New Plymouth Hospital and then started a long period when assistants were employed with the object of training them to pass the qualifying examinations. The Intermediate Examination, later the Basic Training Certificate, taken at the end of the third year became the first step in the five year qualifying course, and by the time this examination was phased out in favour of block courses at the Central Institute of Technology, a period of twenty-five years, all assistants who attempted either the Intermediate or Basic Training Examinations were successful, and the present day students are continuing to have success in the examinations they attempt. Many of the earlier assistants now hold important positions and many were successful in passing the final examinations after a further two years at a Base Hospital Laboratory. Staff members have taken an active interest in their professional organisation, the N.Z. Institute of Medical Technology, Mr G. W. McKinley and Mr H. Hutchings being past-Presidents in addition to serving some years each as Hon. Secretary, and both being Examiners for both the Basic Training and final examinations. The present Chief Technologist is Mr B. Collins appointed in 1978, with one qualified assistant and three assistants in training.

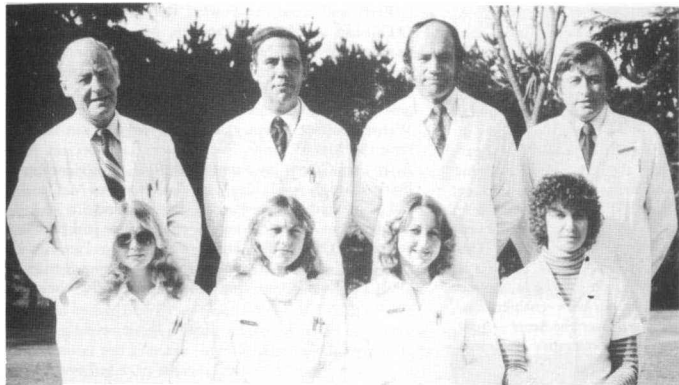


Mr. G. W. McKinley

X RAY

Records show that talk of a fund for the purchase of Roentgen rays began in 1899. They do not show when the plant was obtained. The first X ray plant was installed shortly after the installation of electricity in 1923 and inevitably many modifications and additions occurred as time went by with quite radical modifications between 1935 and 1954 to cater for radiology services during the chest surgery period.

In 1959, complete replacement of plant cost in excess of five thousand pounds. With the purchase of mobile plants for services at the bedside, as well as additions and modifications in the 1960s and a virtual replacement again in the 1970s together with an automatic film processor and a silver recovery unit, the cost was in excess of \$50,000. Presently there was a further sum of approximately \$10,000 on the capital programme for extra units to produce even better films for easier interpretation. It is recorded that Dr Lewis Reed did his own X ray work.



X Ray — Laboratory and Dispensary Staff, 1979



Interpretation of films in the earlier years were by the respective medical officers employed in the hospital until consulting radiologists from other areas visited frequently to interpret and report. This commenced with Dr Moller in the 1930s with Dr Costello following for a long period of service from 1943 until 1962 when Dr Graham Beale gave a short period of service until June 1964. Dr P. N. Newsam, who had earlier given locum service in 1961, gave further service from 1964 until 1971 when Drs Feltham and Nathan obtained the appointment. They still give a service of interpretation and report from Napier, with a visit fortnightly for major procedures.

Lack of records prevent naming all who have acted as charge radiographers, but among those since 1940 were:

Isobel Simpson, Velda Cassidy, Janet Paton, Ken Campbell-Board, A. Burnett, Jim Fitzmaurice, Fiola Seatu'u, Arthur Yarnold, Ross Wilkinson, Bronwyn Ebbett, A. McPhail, R. Falloon, John Black, Colin Darby and presently Ron Bell since 1971.



DISPENSARY

In the early days the matron dispensed the rather limited range of medicines available. In 1921, Mr T. W. Walker, ("Tommy") commenced service at the Pukeora Sanatorium as Dispenser, Radiographer and assistant in laboratory work. He commenced as Dispenser part-time at Waipukurau Hospital in 1933-34, starting full-time service at the hospital in 1940, and part-time at Pukeora. His ubiquitous

duties also included Basal Metabolic Rate tests and recording Electrocardiographs, using equipment rather different from today's sophisticated transistorised machines. After 41½ years service to Pukeora Sanatorium and Waipukurau Hospital, he retired in 1961. Mr Ian Ruffell was then appointed dispenser, holding the position since.

As modern medicine developed and needs changed, the quarters of the old dispensary became too cramped, and the department was transferred to modern spacious quarters opposite the operating theatre in 1977.

The introduction of new medications and medical treatments has progressed in a spectacular way, particularly since the 1950s following the discovery and introduction of the antibiotics in the 1940s, to the multitude of highly sophisticated drugs and treatments available today. Reflecting these modern changes, the position of part-time Dispensary Aid was created in 1978, replacing Mr Bob Tiller, who gave long service as part-time dispensary orderly for 23 years. Other dispensary orderlies have been Mr Don Taylor and Mr Arthur Findlay.

The Dispensary services today include the supply of all modern drugs, surgical dressings (gamma sterilised), surgical instruments, surgical equipment and appliances, electrocardiographic services, and the supply of medical oxygen and medical gases throughout the hospital and district.



Mr. T.W. Walker

PHYSIOTHERAPY

It is not recorded where the department was located in the earlier years, but later was near the present outpatients department.

A physiotherapy department was included in the clinical services block opened in 1942 and following the opening of the new ward block in 1963 the brick area of old McLean Ward was renovated to make the present department. Treatments have changed and massage by a masseur or masseuse in the earlier days has developed over the years to the use of sophisticated electrical equipment plus continued use of standard basic treatment by the physiotherapist. The training previously done in the medical school situation is now at a polytechnic. The physiotherapist works in close liaison with the Occupational Therapist with rehabilitation. Emphasis of treatment has changed over the years — particularly after the 39/45 war — post-operative treatment during the chest surgery era — the use of the Kenny treatment during the polio epidemic — routine pre operative preparation and post operative treatments — maintaining mobility of the disabled at Pukeora — rehabilitation of the stroke patient and the geriatric as well as covering the whole range of outpatient activities.



Early staff were Fay Fowler, Ruth Ferguson, Frances O'Callahan and Mr W. Petersen. Mr Petersen left the hospital on a part-time basis as well as having his own practice. Among charge physiotherapists were: Mick Simpson now Cameron, Virginia Williams now Robinson, Barbara Watts, Constance (Stancy) Lash married and was later to return as Mrs Williams, Sue Crearer, Katie Benson, Ann Bryce now Green, Joy Bronte now Reid, Ann Henchman, Francis Bird, Jackie Bridge, Judy Anderton now McDonald, and Jean Syme. Of recent years, Joy Reid and Sue Rickey, nee Anderson, have returned for considerable periods when necessary. A physio-aide during the forties was Pam Hewitt and when the policy of employing an aide was reinstated in 1963, Pat Ritchie now Orr held the position for about 10 years.

OCCUPATIONAL THERAPY

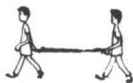
This department has always been located at Pukeora. In 1966, an aide, Miss Pauline Allan transferred to the hospital using a room in the Physiotherapy department. Of recent years a part-time aide has also been employed and they function under the control of the charge occupational therapist still based at Pukeora, their main work being with children and the geriatrics. Owing to the number of geriatrics they are ably assisted by members of a voluntary organisation "Friends of the Hospital."

Physiotherapy Staff

1979

Occupational Therapy Staff



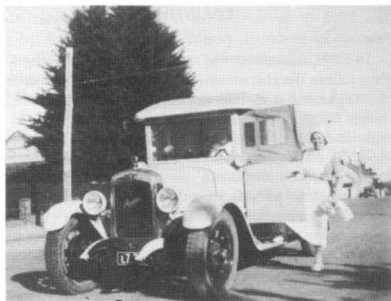


AMBULANCE

The service commenced with a horse drawn cart and has developed over the years, through several types of motor vehicle, to the ultra modern, well equipped ambulance of 1979. Until a roster system of orderly drivers started in 1977, it was run by way of a contract driver.

Mr Edwin G. Price, who had been employed as a casual labourer in 1943, took over the contract in 1944 being followed by Mr Boy Evans from 1964 - 1977. Ted Price, as he was known by all, was also employed in part time work as a labourer and later as a fitter/labourer and is reputed to have never had a day's holiday. An enthusiastic member of the St John's, Bob Evans was also employed part time, firstly as a medical orderly and latterly in the laundry. His private 2-way - monitored by his wife - was the forerunner of the present day radio/telephone that now functions in both ambulances as well as in the Porangahau District ambulance. He still works in the laundry and until recently did a share of the ambulance call.

The driver of today is known as an ambulance officer and they all have their St John's First Aid Certificate and participate in special training for ambulance personnel in Auckland. Mr Eion Torrance, House Manager, is in overall charge of the service and the ambulance officers are Messrs Ian Eagle, Phillip Ellmers and Colin Stanton.



Austin, About the thirties



1979



LAUNDRY

In 1899, a laundress was appointed to do the washing and thus relieve the charwoman of that duty. This seemed to be the beginning of laundry services at the Waipukurau Hospital. An architect was engaged in 1919 to report on the estimated cost of a building and machinery to be imported from the United Kingdom. In 1924 investigations were still taking place by the Board's Secretary to obtain as much information as possible regarding the installation of steam laundries in Hospitals. Between that time and 1930, both a boiler house and laundry was established in a building which still stands and is now the Central Store. In the southern end of that building, the boilers were housed and the steam generated was fed to the laundry in the central portion.

Services were adequate until some time after Pukeora Sanatorium was taken over when it was found to be economic to have all laundry done at Pukeora where a much larger plant and more modern machinery serving a much bigger institution was in operation.

The names of Lunt, Fogarty, and Rayner, were the most well known in laundry circles up until the disastrous fire which destroyed the laundry at Pukeora in 1951, causing a daily trip by heavy truck to Napier with soiled linen and staff to assist with processing at the Napier Hospital.

A temporary laundry was built on the same site, some of the old machinery was recommissioned, second-hand machinery purchased, and finally the service was reinstated at Pukeora whilst drawings were going on for a new boiler-house and a laundry building at the Waipukurau Hospital to serve all institutions in the future. This together with a linen and sewing room, a gardeners' depot, ambulance garages, carpenters' and painters' workshops, and incinerator building was the most complex building and engineering works undertaken by the Board and from the original brief to the

commissioning of the building, six years elapsed. By the time the new laundry service was ready for use, Pukeora had closed as a sanatorium and re-opened with a few occupied beds as an experimental Home for Disabled.

Mr Albert Woodford was appointed the first Laundry Foreman and gave nearly three years service before moving on to another Hospital Board. Mr Ben Te Ao Hikawai took over the position in September, 1960, later became Laundry Manager and still occupies that position. Ben was first appointed as an Orderly in 1952, later became Head Orderly and was involved in Dispensary and Theatre servicing as well as Postmortem work up until about two years ago. He was also associated with the ambulance contractor for many years and also continued with this as a "call driver" on a voluntary basis until recently. Whilst an Orderly, he was also involved in farm work in taking his turn with other Orderly staff in carrying on the farming activities in between the resignation of the last farm manager and the leasing of the property for a town milk supply. Having served for a period of 26 years in so many capacities, he could have the rightful claim to being one of the Board's most versatile employees.

The laundry now has large modern machinery and last year processed approximately 450 tons of linen, at a direct cost of \$74,752.



Laundry and Linen/Sewing Staff, 1958



LINEN/SEWING

The person responsible for the care and repair of the hospital linen in the early years is not recorded, but Miss Mary Harding was employed for many years as the sole seamstress, probably commencing in the 1930s. For many years a room at the end of the laundry area behind the old boiler house was used for storing the linen and a small adjacent room as a sewing room. The commissioning of the new laundry block in 1957 provided both good storage and issue area for the laundered linen stock and a large, bright room for the sewing room staff to work in.

The system of ordering and issue has changed over the years from one where a ward sister ordered her daily requirements, to an imprest system serviced by the linen room staff. The sewing room work has also changed. Instead of repairing being done to heavily starched cotton uniforms, with belts, they now maintain trim drip dry cotton synthetic uniforms which are on issue to the staff from a pool room. The matron or her assistant were responsible for the management of the linen service, the condemning of linen, and for a number of years even organising an annual stocktaking of all linen. General control passed to the House Manager in the late sixties and during 1979 a linen committee was established under his chairmanship. Members are the Supervising Principal Nurse, Day Supervisor, Linen Supervisor, Linen Sorter, and the Laundry Manager.

The longest serving person in this area is Mrs A. Tomic. She and her two daughters came as displaced persons from Yugoslavia in 1949, making their home at the hospital.



Vanda, now Thelwall, graduated as a nurse in 1953 and since her marriage has given lengthy periods of service and is presently on the staff. Gordana after schooling, trained as a teacher and is married.

Following Mary Harding, Miss Vera Ross, Mrs Edwards and Mrs Elizabeth Begley were Head Seamstresses and in 1959 Mrs Tomic (Tommy as she was known to all) was appointed Linen Supervisor. On her retirement in 1973, Mrs Ives now fills this position. The position of linen sorter has also been filled by women giving lengthy service, among them Mrs A. Booth, Mrs A. Hussey and the present one, Mrs Condliffe employed on the sewing room staff for a number of years.



Laundry and Linen/Sewing Staff, 1979



WORKS/ENGINEERING

Most of the carpentry work was done by contractors and job carpenters up until the time the Board took over the Pukeora Sanatorium in 1933. Mr Ernie Begley, who had been employed at Pukeora from about 1927, was to spend 33 years as foreman of works, as well as giving tremendous service as Clerk of Works on one or two of the big contracts. After his retirement in 1966 he was brought back into the Board's service to finish off the clerk of works job at Pukeora. Mr Brian Neave, who first worked for the Board in 1949, replaced Mr Begley and he has just retired at the end of July, 1979. He continues to be an "anchor man" on the centennial committee.

As well as the high standard of maintenance and equipment by the works department, there are many articles still in use that are a testimony to the standard of work put out by such men as Mr John Lunt, who was well known and loved by all the staff. These days, as well as all types of maintenance work, many major new works have been done. Mr Derek Wilson has just been appointed as works supervisor.

Engineering services were also carried out on a contract or jobbing basis for many years. Staff employed by the Board has expanded until it now includes most trades such as boilerman, fitter and turner, plumber, electrician. Today they even employ apprentices and many articles of equipment are made by hospital staff. Mr Fred Heaseman was Engineer for 14 years and was replaced in 1942 by Mr Ray Spotswood. Mr Spotswood became fire officer for the Board's institutions as well as being Chief Fire Officer for the district. After 31 years of service he retired in 1973. Mr Keith Sangster, who had been employed as assistant engineer in 1971 was appointed chief engineer in 1974. Mr Fred Welsh, the Board's electrician for 18 years, acted as deputy

for Mr Spotswood. Mr Eddie Heaseman, the son of Mr Fred Heaseman, is the present deputy. Mr E. E. Jones (Barney) was well known, working in the boiler house from 1925 until 1950, and was always available to solve a problem over the 25 years he served.



Mr. F. Heaseman



Mr. R. Spotswood



Mr. E. Begley,

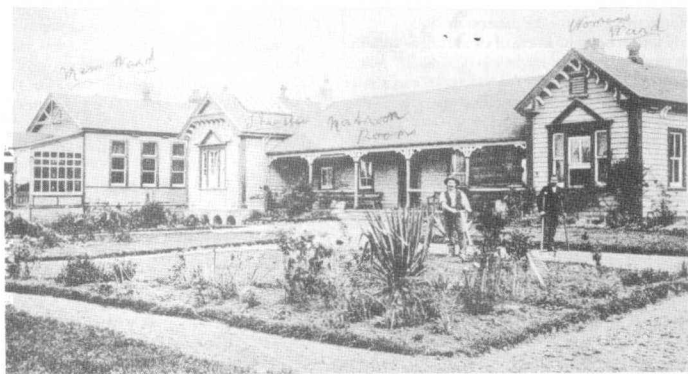
Mr. B. Neave



Mr. J. Lunt

GROUNDS

From the early years photographs show the beauty of the Hospital grounds and they continue to be a feature. From 1936, Mr Charles Milne was the Head Gardener and on his retirement in 1960, Mr Stan Waters, who had been at Pukeora since 1948 was appointed. When he retired in 1978, the position was filled by Mr Reg Rayner. Though employed at Pukeora, Mr Reg Hussey had much influence on the Board's grounds in general; he retired in 1971 after 35 years service with the Board. Mr Bert Allen spent 20 years from 1928-1948 as a gardener.



Mr. Archie Clark and Dick Pilchard, Patient



Grounds, Works and Engineering Staff, 1979

KITCHEN

Control of the food service over the years has been the responsibility of the Matron or her deputy and this involved not only compiling a menu but also ordering the food required and control of the staff. In the late sixties the House Manager became responsible for the general management of the kitchen with the weekly menu continuing to be done by the assistant matron who was also directly responsible for any special diets. After the appointment of Mrs Helen Carter in 1973 as Food Supervisor, the Day Supervisor prepared a series of cycle menus, and basing the weekly menu on these, Mrs Carter is now responsible for all aspects of food service with the Day Supervisor being available for consultation when necessary. They also introduced a selective menu for the patients in 1975.

The early forties brought an era of two kitchens with the commissioning of a separate kitchen at the nurses' home. When the kitchen was closed in the sixties, all meals were again prepared in the main kitchen. There is a vast difference from earlier kitchens with alterations — structural and otherwise — and the installation of modern equipment being made over the years. Today it is a busy well-equipped unit which supplies "meals on wheels" as well as catering for all areas and also many extra hospital functions. The good reputation they have for the meal service is well deserved.

Miss Amelia Ann Peckett who later married Tom Staines was an early first cook. Mrs Hazel Ruby Britain, Mrs Grace, Miss Jean Proudfoot now Nisbett, Mr Ted Sullivan, Mrs Iona Ellmers nee and presently Mrs Betty Manning nee Giddens are some of the first cooks who followed; at the Nurses Homes were Mrs Elizabeth Agnew, Mrs Dora Potts, Mrs H. R. Britain and Miss Pearl Giddens now Pratt.

DOMESTIC SERVICES

The Matron or her deputy also had the control of the domestics, later to be known as household staff, until a new policy in the late sixties made them the responsibility of House Manager. Until the late thirties, a large proportion of the ward cleaning was done by the nurses. A household supervisor, Miss Margaret Eyre-Walker, was appointed in 1949 resigning in 1956. Mrs P. V. Paul was appointed to the position in 1958 and on her retirement in 1968 Mrs Helen Carter, who had transferred to the kitchen when Rathbone closed in 1967, was in charge until her appointment as Food Supervisor. Mrs Jean Bell, nee Clarrie, the then charge domestic, replaced Mrs Carter and following her retirement in 1974, Mrs Muriel Neave, nee Giddens, already on the staff, presently holds the position, being appointed in 1975.

The hospital has always enjoyed a good reputation for its standard of cleanliness and throughout the hundred years this section of the hospital team have supplied co-operative and excellent service to both the patients and other hospital staff.



ORDERLIES

This section of the staff, who over the years had a name-change from "porters" have always been involved with all areas of the Hospital. Starting as "odd job" men, the range of duties asked of them has been wide covering as well as general portering and cleaning work, assistance with the farm and milking in the earlier days. Specialist areas covered are mortuary, dispensary, ambulance, operating theatre and stores.

The house manager, known earlier as house steward, has overall responsibility for this section with a head orderly being responsible for general deployment of staff. Mr Keith Yanko, who worked for the Board for 41 years was firstly stores clerk, then house steward and later spent years as pay clerk before retiring in 1968. Mr E. T. Smith, always known as "Pete," started at Pukeora in 1937, later transferring to the hospital staff as house manager before he left for a similar position at Cook Hospital, Gisborne, in 1973. After short service by Mr J. King and Mr J. Verner, Mr Eion Torrance was appointed House Manager in 1978.

As well as routine work, their range of duties is wide and varied, and they are a willing and versatile staff, being involved with both the patients and all sections of the hospital staff.

There have been many long serving staff, some being:
Stores — Messrs Frank McVicar, Ted Barnes, Jimmy McKay.

Head Orderlies — include Messrs F. W. Granger ("Skip"), Lou Hanson, Marshall "Chook", Arthur Findlay, (presently head orderly Pukeora), Vic Mustchin, Ben Hikawai and since 1973 Ian Eagle.

Mortuary — Messrs Don Taylor and Ben Hikawai were responsible for many years.

Theatre — Messrs Don Taylor, (over the busy chest surgery era and later) Ben Hikawai, Tommy Condliffe.





ANCILLARY STAFF
about 1903



1935



1944



Kitchen Staff, 1979



Household Staff, 1979



Orderly Staff, 1979

Pukeora

Pukeora was until September 30, 1956, the only male tuberculosis sanatorium in the North Island and when it was converted by the Waipawa Hospital Board to a home for disabled and physically handicapped persons of either sex in a special age group, it was claimed to have been the only institution of its kind in the world.

"Pukeora" translated from Maori and meaning "healthy hill" is set in the rolling hills of Southern Hawke's Bay, approximately four miles south of the town of Waipukurau on the main Napier-Wellington highway. The institution has an interesting history and whilst most people in the North Island are at least aware of its existence and whereabouts, few in comparison have probably been fortunate enough to visit it, study the health service operating there, take note of the environment of the people, and enjoy the magnificent views from practically all points of the compass — views of which one never grows tired, as they are constantly changing with the seasons, the weather conditions, and even the hour of the day.

Situated as it is, on an elevated site approximately 800 feet above sea level and with practically a sheer cliff face on the north-eastern side, one can follow the Tuki Tuki River for miles across the Ruataniwha Plains to the north-west, which plains rise gradually to meet the Ruahine Ranges. In the winter time particularly, the Ruahines are a magnificent sight. Looking to the south-east, one has a magnificent view of the Tuki Tuki River winding its way down through Waipukurau, and further to the south, activities on the aerodrome can be watched, beyond which lies Lake Hatuma, the duck-shooters' paradise and was a popular rendezvous for all those interested in speed-boat racing.

"Pukeora" was built by the Government at the close of the 1914-18 war, its primary function at that time being to house and treat T.B. patients of the Armed Forces. Reception of T.B. patients commenced in August 1919 and control was in the hands of the Defence Department, all employees at that time being in military uniform. Military control was replaced by Health Department control on August 1, 1921, the reason for the change being that the functions of the institution were extended to provide for treatment of civilians as well as armed-forces personnel.

The Department controlled the institution until October 1, 1933, when as an outcome of the National Expenditure Commission's Report, the department had received definite instructions to cease control of institutions of that kind. Negotiations which followed resulted in the institution being vested in the Waipawa Hospital Board by Order-in-Council

and the board administered the institution as a T.B. sanatorium until July 1, 1944, when it was found more advantageous to form a Joint Committee of seven Hospital Boards on the east coast of the North Island to carry on the administration.

Due to medical research at that time and a more complete study of tuberculosis in which X-ray examination was probably the most important single factor, emphasis was thrown on to the necessity of finding and treating the early cases. The use of collapse measures, including surgical treatment, became much more frequent as their value became apparent and emphasis shifted from open air treatment and was placed to an increasing extent on bed rest. These changes demanded radical departures from conceptions of 25 years previously and the provision of new facilities and special services were necessary.

It was found that the spreading of interest in the matter of finding and treating the early case of tuberculosis, was one of great importance, with a result that the Pukeora Sanatorium Committee was formed by way of a special agreement between the Waipau, Cook, Wairoa, Hawke's Bay, Waipawa, Dannevirke and Wairarapa Hospital Boards. The Pukeora Sanatorium Committee administered the institution until September 30th, 1956, when as a result of a special conference held in Wellington earlier in the year, it was found that one tuberculosis sanatorium only was necessary in the North Island. This was brought about by the success that had been met with chemotherapy in the treatment of tuberculosis.



Pukeora Sanatorium, 1921



During the late 1930s when the institution was still under the control of the board, a considerable number of female cases which were not the true sanatorium type, but in the chronic category, were admitted to the institution from the Auckland area by way of special arrangement with the Auckland Hospital Board, to relieve an acute hospital bed shortage in that city. At one particular time, there were 160 tuberculosis patients being treated at Pukeora and figures show that from the time the institution first commenced, over 7000 cases of tuberculosis had been treated, most of which were cured and are now following their normal occupations in the community.



Pukeora Sanatorium



NURSING, MEDICAL AND PARAMEDICAL STAFF, 1934



ANCILLARY STAFF, 1934



NURSING, MEDICAL AND PARAMEDICAL STAFF, 1944

Opening
Pukeora Home
for the Disabled
1957



ANCILLARY STAFF, 1944

With the closing of the institution as a sanatorium on September 30, 1956, and taking into consideration the capital value of the land, buildings and equipment, it was imperative that some use should be found for such valuable premises. Many proposals were submitted to the Waipawa Hospital Board, the Health Department and the Minister of Health himself. Arguments were advanced in favour of the establishment of a veterinary college, a Borstal institution, an old peoples' home and a convalescent hospital.

The Hon. J. R. Hanan, Minister of Health, had during the time he had occupied the Health portfolio, been informed by Dr G. A. Q. Lennane, Director Division of Physical Medicine, of the lack of facilities available for housing and caring for disabled and physically handicapped young people whose parents had either passed on, or been unable to any longer care for their physically handicapped children who were already being cared for in such excellent institutions as the Wilson Home at Takapuna and reaching the age that would preclude them from remaining any longer in such institutions and that their only outlook was the spending of the remainder of their lives in public hospital wards, which often sadly lacked adequate occupational therapy and education facilities.

Mr Hanan aptly described the lack of a special home for these unfortunate people as "a great gap in our welfare state." His positive approach to the problem culminated in the filling of that gap and "Pukeora" is now fulfilling the function which had previously been envisaged.

From the closing of the sanatorium in 1956 until 1957, the board carried out a conversion programme which mainly centred around the forming of ramps in place of steps for wheelchair access and egress, the widening of certain doorways for the same purpose, the closing-in of exposed verandahs for weather protection and installation of heating services. Staff were employed and residents admitted gradually with some coming from as far afield as Invercargill and Kaitiaki. The numbers soon built up to 19 and by late 1958, the maximum number of beds available were filled, this being 36, and early in 1959, five more beds were made available by converting an area of the old east verandah block.

Regular reports to the Department of Health were necessary on the stewardship and the success of the pilot scheme, and in 1960, Dr. Lennane, in his capacity as the Director of the Division of Physical Medicine re-visited the home and was able to report back to the department that the experiment had succeeded by providing for the happiness, physical, psychological and social welfare of a group of people whose only alternative would have been either stagnation at home with aging parents or admission to the chronic wards of public hospitals.

The department agreed with the feelings of the board that Pukeora should continue and, if possible, be reconstructed and enlarged. Although the department concurred with the views that Pukeora should be developed on its present site on the basis of economy, bearing in mind the recent capital

invested in the buildings and services, this view was not shared everywhere and may have contributed towards the subsequent slow progress in development.

In 1961, agreement was reached that reconstruction and development to an 80 bed unit would be a practical and economic proposition and that any additional beds needed for this type of case would probably be catered for in a different area, possibly in the South Island.

By July 1962, an outline report of requirements and phases for conversion was submitted to the department and in December sketch plans were authorised for Phase I. Working drawings were authorised 12 months later, but a contract was not able to be let until June 16, 1965, to build Phase I, consisting of a school, an occupational therapy department and sheltered employment workshops. This development programme was completed by September 14, 1966.

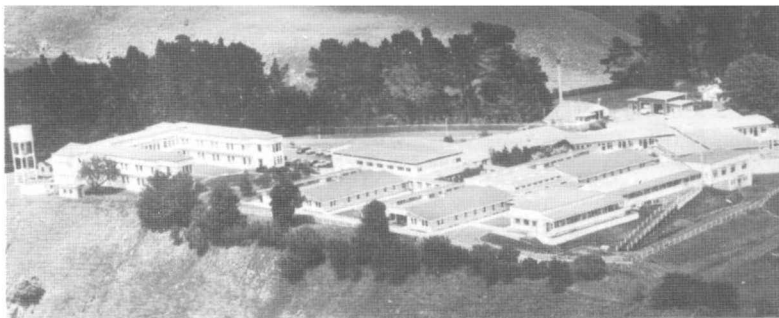
Planning for intermediate services and for the second phase commenced immediately after letting the contract for Phase I. This phase which was carried out in two stages under separate contracts comprising kitchen, dining-room, administration block, social hall, indoor heated recreational swimming pool and three new 20 bed living units were sufficiently advanced to be officially opened by the Rt. Hon. Sir Keith Holyoake, Minister of Foreign Affairs, on March 3, 1972. The contractor officially handed over on March 21, 1972, together with garages for wheelchair transporter vehicles, a new gardeners' depot, and grounds development to cater for most services.

The contracts under Phase 3 had been let during Phase 2 construction and these involved the construction of oxidation ponds for sewerage disposal, development of outdoor sheltered employment facilities for plant propagation, alteration to the old Ward 1 wing, now called Makaretu House to cater for 20 beds, and various hobby activities and services besides the development of grounds mainly for the residents' recreation and enjoyment. By October 1973, all buildings and services were being used, but the development and layout of grounds as well as the completion of ring fencing of the home continued until June of this year.

What Pukeora provides now in 1979.

- Living accommodation for 80 physically disabled persons in the younger age group, 60 of whom are able to be accommodated in single rooms, no charge for accommodation, but expected to maintain themselves in clothing, personal toiletries, travel and spending money.
- Free transport within the board's area by special wheelchair transporter vehicles equipped with hydraulic loading devices, but a charge made for pleasure trips outside its boundaries.
- A full-time nursing service to guard the general health and personal hygiene of the residents with specialists' services such as dentistry and optical arranged as required.

Pukeora
Home for the
Disabled



NURSING STAFF, 1979



ANCILLARY STAFF, 1979

● Educational facilities, compulsory for those in the age range and optional for those outside it, provided that they are accepted by teaching staff; speech therapy services are also available.

● An occupational therapy programme for those able to participate which aims to provide a stimulating environment and satisfaction through creativity and employment.

● Physiotherapy for those in need.

● Sheltered employment for residents to apply their capabilities purposefully to industrial production in spacious workshops with a variety of jobs available from which there is profit-sharing.

● Swimming classes allowing residents to swim once a week with the assistance of voluntary helpers in a heated indoor swimming pool.

● Many forms of recreation in a hall providing room for table tennis, indoor bowls and pool table, as well as a film show once a week free of charge from a 35mm installation.

● Social outings to picnics and to sporting fixtures as well as participation in paraplegic games.

● A library stocked by the Country Library Service run by the residents themselves and for the less fortunate, talking book machines.

● A canteen for day-to-day purchases with a weekly wheelchair transporter trip to town

● Colour television in each of the four lounges and rooms set aside for hobby activities, such as amateur radio, etc.

● Church services on a rostered system controlled by the Ministers' Association of the district with the chapel open at all times for spiritual use.



Since its inception, the Waipukurau District Hospital has been an integral part of the community, quickly becoming its largest industry. The people of the district have given lengthy service to their hospital, in many instances covering three generations and frequently, over a period, a family. It is impossible to mention here the large number of staff with long service as a period of 10 — 15 — up to 20 years is a rule rather than an exception.

20 - 25 years

Mr Bert Allen (Grounds)
Mrs Majorie Clarke (C.S.S.D.)
Mr Tom Condliffe (Orderly)*
Dr Ian Fleming (Medical)*
Mr Lou Hanson (Orderly)
Mrs Pam Hewitt (Nursing)*
Miss Bell Mitchell (Nursing)
Mrs Elsie Naylor (Household)*
Mrs Elsie O'Connor (Household)
Dr Tony Quinn (Medical)*
Dr James Lewis Reed (Medical)
Mr Wally Saxton (Orderly)
Mr Geoff Taine (Medical)*
Mr Bob Tiller (Orderly)
Mrs A. Tomic (Linen)
Mrs Vanda Thelwall (Nursing)*
Mrs Peggy Walker (Nursing)

25 - 30 years

Miss Jean Burkin (Household)*
Miss Rona Burkin (Household)*
Dr Martin Girling-Butcher (Medical)
Miss Margaret Carston (Nursing)
Dr Bill Fisher (Medical)
Mr Ben Hikawai (Orderly:Laundry)*
Mr Barney Jones (Engineering)
Miss Hilda McLean (Nursing)
Mr Charlie Milne (Grounds)
Mr Ted Price (Ambulance/Engineering)
Miss Rene Shaw (Administration)
Miss Helen Turnbull (Nursing)
Mr Tom Walker (Dispensary)
Mr Stan Waters (Grounds)
Mrs Zena Welsh (Administration)

Among family names that come to mind are: Giddens, Brown, Ross, Quintal, Stowe, Rayner, Burkin, Ellmers and Eagle.

20-30 plus years of employment, sometimes accrued with broken service or a period at Pukeora or Rathbone, is not uncommon.

30 - 35 years

Mr Ernie Begley (Works)
Dr Arthur Bell (Medical)
Mrs Peggy Graham (Nursing)*
Mr Gordon McKinley (Laboratory)
Mr Brian Neave (Works)
Dr Dan Norris (Medical)
Miss Ethel Oliver (Nursing)
Miss Jessie Oliver (Nursing)
Mr Ray Spotswood (Engineering)

35 - 40 years

Dr Don Allan (Medical)
Mr Pete Smith (Administration)

40 - 45 years

Mr Jack Knobloch (Administration)*
Mr Keith Yanko (Administration)
Miss Meg Wagner (Nursing)

*Still on staff at time of writing.

Total Staff in 1895 — 12.

Total Staff in September 1979 — 223.

Please do not feel left out if your name has been missed — we did our best.

Remembered also at this time of the hospital centenary are the people who have been on the staff at Pukeora and Rathbone, many of whom have 15-20 years of service.

To paraphrase a well known naval prayer:

"God bless our Hospital and all who work in it."

The Centennial Committee wishes to thank the many people who have given time and talent with the preparation of this booklet, especially the typists, Olive Tutaki, Betty Ford and Joyce Haldane. Special thanks are given to E/N Anne Seymour for her graphic art.

Centennial Enrolments

1900 - 1929

Collett, Amelia (Rayner), 1903, Household
Harward, Gertrude (Jackson), 1913, Nursing
Gore, Irene (Booth), 1920, Nursing
Cairns, Roseetta (Black), 1924, Nursing
McLean, Hilda, 1925, Nursing
Stewart, Bell (Mitchell), 1925, Nursing
Charteris, Catherine, 1926, Nursing
Dillon, Elsie, 1928, Nursing
Stowe, Don, 1929, Farm/Orderly

1930 - 1939

Smith, Pearl (Lorrigan), 1930, Nursing
Welsh, Huia (Matthews), 1930, Nursing
Oliver, Jessie, 1931, Nursing
Anderson, Doris, 1931, Nursing
Coghlan, Mollie (Freemantle), 1932, Nursing
Knobloch, Jack, 1933, Administration
Howse, Florence (Miller), 1933, Nursing
Jones, Gwen (Florance), 1933, Nursing
Hanson, Lou, 1933, Orderly
Norris, Dan, 1934, Medical Staff
Scott, Wai (Kani), 1934, Household/
Nursing
Wadsworth, Joyce (Cotterill), 1934, Household/Nursing
Bell, Arthur, 1934, Medical Staff
O'Connor, Hazel (Power), 1934, Nursing
Pettitt, Nan (Hinman), 1934, Nursing
Hallagan, Frances (Atkins), 1934, Administration
Oliver, Ethel, 1934, Nursing
Cotton-Stapleton, Jean (Hansen), 1935, Nursing
Kyle, Evelyn Ruth (Florance) 1936, Nursing
Bibby, Patricia (Fitzgerald), 1936, Nursing
Staines, Kathleen (Skipper), 1936, Household
Hallett, Joan (Tinney), 1936, Administration
Petersen, Enid (Hansen), 1937, Nursing
Tulloch, Dorothy (Miller), 1937, Nursing
Wharton, Grace (Price), 1937, Nursing
Brooks, Jack, 1937, Administration/
Board Member
Hallagan, Vaughan, 1937, Administration
Taylor, Leila (Condie), 1938, Nursing
Staines, Betty (Green), 1938, Nursing/
Oc. therapy.
Stowe, Kathleen (Sullivan), 1938, Household
Livingston, Joan (Mills), 1938, Nursing
Groves, Betty, (Usherwood), 1938, Nursing

Bliss, Ailsa (Gifford), 1939, Nursing
Buchanan, Mary, 1939, Administration
Wakely, Beatrice (Nicholson) 1939, Nursing
Staines, Joan (Carlton), 1939, Nursing
Neave, Muriel (Giddens), 1939, Household
White, Hine (Hutana), 1939, Nursing
Jones, Mavis, (Hopkins), 1939, Household
Allan, Donald, 1939, Medical Staff

1940 - 1949

Luke, Eric, 1940, Thoracic Surgeon
Fleming, Leny (Werner), 1940, Nursing
O'Sullivan, Stella (Gebbie), 1940, Nursing
Baird, Joan (Caskey), 1940, Nursing
Yardley, Gwenyth, 1940, Nursing
Butler, Irene (Shaw), 1940, Administration
Jones, William, 1940, Orderly/Plumber
Clarke, Margaret (Epps), 1940, Nursing
Hewitt, Pamela (Fisher), 1940, Nursing/
Hostel Supervisor
Trevelyan, Maja (Petersen), 1940, Nursing
Graham, Pamela (McRae), 1941, Administration
Milne, Margaret (Hendry), 1941, Nursing
Annand, Hilda (Price), 1941, Nursing
McKenzie, Colin, 1941, Medical Staff
Giddens, Okeroa (Thompson) 1941, Kitchen/Household
Fleming, Janet (Neilson), 1942, Nursing
Carpenter, Barbara (Fitzgerald) 1942, Nursing
Dragicevich, Joyce (Tucker), 1942, Nursing
Nicholson, Jean, 1942, Nursing
Kohlies, Rae (Nicholson), 1942, Nursing
Hennah, Betty (McRae), 1942, Nursing
von Dadelzen, Mary (Wall), 1943, Administration/Board Member.
Giddens, Ron, 1943, Orderly
Coughlan, Isobel (Johnson), 1943, Nursing
McKinley, Gordon, 1943, Laboratory
Staines, Athol (Kennedy), 1943, Nursing/
Clerical.
Brock, Margaret (Riley), 1944, Nursing
Edgar, Janet, 1944, Nursing
Mulligan, Gwen (Newman), 1944, Nursing
Nepia, Althea (Perry), 1944, Nursing
Quinn, Nora (O'Rourke), 1944, Nursing
Urquhart, Mary, 1944, Administration
Wall, Gretchen, 1944, Board Member
Adrian, Noeline (Sutton), 1945, Nursing
Little, Marion (Turner), 1945, Nursing
Rabone, Shirley (Wright), 1945, Nursing
Cowan, Sarah, 1945, Nursing
Mosheim, Dawn (Fife), 1945, Nursing
Tinney, Diana (Theed), 1945, Nursing
Arnold, Dorothy (Cottingham), 1945, Nursing
McGonagle, Moira, 1945, Nursing
Smith, Mavis (Smith), 1945, Nursing
Wareham, Jacqueline (Plowright), 1945, Nursing
Orr, Dorothy (Gideon), 1946, Nursing
Mullooly, Margaret (Gitzgerald), 1946, Nursing
Curran, Zoe, 1947, Nursing
Waters, Stan, 1947, Grounds
McIvor, Nancy (Proudfoot), 1947, Administration
Middleton, Beth (Waugh), 1947, Nursing
Arnold, Jane (Emerson), 1947, Nursing
Addis, Jean (Littlejohn) 1947, Nursing
St. George, Elizabeth (Rickard), 1947, Nursing
Waterworth, Tua (Stainton), 1947, Nursing
Stoddart, Shirley (McCoskery), 1947, Nursing
McCarthy, Winifred (Burgess), 1948, Nursing
Herbert, Esson (Stoddart), 1948, Nursing
Addis, Nancy (Peterson), 1948, Nursing
Reid, Margaret (Wishart), 1948, Nursing
Hamil, Jessie, 1948, Nursing
Collin, Maggie (Lansdown), 1948, Nursing
Hyde, Roimata (Seavanche), 1948, Household
Welsh, Zena, 1948, Administration
Gammie, Isabella (Leith), 1948, Nursing
Manning, Betty (Giddens), 1948, Household/Kitchen
Gilbertson, Jennifer, 1948, Nursing
Graham, Peggy, 1949, Nursing
Burnet, Colin, 1949, Administration
Elliott, Thelma (Spotswood), 1949, Nursing
Dunlop, Marie (Tong), 1949, Nursing
Harold, Mabel (Syme), 1949, Nursing
Sterland, Maureen (Joll), 1949, Nursing
Hyde, Mervyn, 1949, Medical Orderly
Johnson, Zola, 1949, Nursing
Neave, Brian, 1949, Works
Thelwall, Vanda (Tomic), 1949, Nursing
Tutaki, Rei (Taipana), 1949, Nursing
Slater, Zan, 1949, Nursing
Turnbull, Maryan (Porter), 1949, Nursing
Tomic, Albina, 1949, Linen
Taylor, Joan (Gannaway), 1949, Nursing
Ridgeway, Beatrice (Wells), 1950, Nursing
Clarke, Marjorie, 1950, Central supply
Jones, Maude (MacNicol), 1950, Nursing

1950 - 1959

Lawrence, Thelma (O'Brine), 1950, Nursing.
Spencer, Robert, 1950, Farm
Wong, Charlie, 1950, Medical Staff
Mita, Pat, 1950, Nursing
Rodda, Noeline (Baker), 1950, Nursing
Hanson, Rene, 1951 Household
Hill, Maureen (Porter), 1951, Nursing
Waldin, Mary (Kynoch), 1951, Laboratory
Hikawai, Noeline (Smith), 1952, Nursing
Quinn, Tony, 1952, Medical Staff
Armstrong, Noel, 1952, Administration
Yeo, Beverly (Davis), 1952, Nursing
Walker, Shirley (Mansell), 1953, Nursing
Hikawai, Ben, 1953, Orderly/Laundry
Marra, Grace (White), 1953, Household/
Nursing
Harbord, Margaret (Henderson), 1953, Nursing
Birdsall, Maxwell (McKenzie), 1954, Nursing
Grant, Josephine, 1954, Nursing
Smith, Mary (Littlejohn), 1954, Nursing
Burne, Mary (Stoddart), 1954, Nursing
Fox, Joan (Richards), 1954, Nursing
Jensen, Ann (Donnelly), 1955, Laboratory
Fergusson, Jocelyn (Higgins), 1955, Nursing
Potts, Florence (Burgess), 1956, Nursing
Tiller, Robert, 1956, Orderly
Colwell, Ernestine, 1956, Nursing
Larsen, Marie, 1956, Nursing
Larsen, Tom, 1956, Medical Staff
Holder, Gillian (Grant), 1956, Nursing
Fleming, Ian, 1957, Medical Staff
Gaston, Jacki, 1957, Nursing
Bennett, Patricia (Jeffery), 1957, Nursing
French, Margaret (Cooper), 1957, Nursing
Gillespie, Allan, 1957, Administration
Gillespie, Barbara (Large), 1957, Nursing
Oliver, Cherrie (Houia), 1957, Nursing
Sloan, Shirley (Wallace), 1958, Nursing
Giblin, Marion (Scott), 1958, Nursing
Tatiana, Punu, 1958, Nursing
Pimm, Tatiana (Tutaki), 1958, Nursing
Shaw, Freda, 1958, Nursing
Oswald, Diane (Riach), 1958, Nursing
Hewitt, Pat, 1958, Nursing
Horsham, Fay (Drower), 1959, Nursing
Nesbitt, Molly, 1959, Board Member
McLeod, Gwyneth (Ferguson), 1959, Administration
Condiffe, Tom, 1959, Orderly
Giddens Noeline, 1959, Nursing
Witherington, Lucy (Wong), 1959, Nursing

1960 - 1969

Robertson Yvonne, 1960, Nursing
Gibson, Marion (Marsh), 1960, Nursing
Rickey, Sue (Anderson), 1960, Physiotherapy

Tarasiewicz, Aleksandra, 1960, Nursing
Barlow, Rene, 1960, Central supply
Kittow, Fay (Parkinson), 1961, Nursing
Watts, Judith (Grant), 1961, Nursing
Ruffell, Ian, 1961, Dispensary
Campbell, Colvin, 1961, Laboratory
Carter Helen, 1961, Household/Kitchen
Owen, Gay (Marsh), 1962, Nursing
Harrison, Jim, 1962, Board Member
Hanna, Sue (Caton), 1962, Nursing
Tipene Ernestine, 1962, Board
Boyle, Russell 1962, Laboratory
Evans, Pam (Taylor), 1962, Nursing
Evans, Bob, 1962, Laundry/Ambulance
Pelosi, Shona (Williams), 1962, Nursing
Campbell, Margaret, 1962, Nursing
Bushett, Margaret (Scott), 1962, Nursing
Hartwell, Gretchen (Cranby), 1963, Administration
Larkin, Riria, 1963, Supervisor/Household
Ward, Julie (Spotswood), 1963, Nursing
Henderson, Alana (Williams), 1963, Nursing
Holmes, Gay (Campbell), 1963, Nursing
Allen, Pauline, 1963, Oc. Therapy
McDonald, Laura (Knight), 1964, Nursing
Ruffell, Margaret, 1964, Nursing
Ritchie, Maureen, 1964, Sewing
Orr, Pat (Ritchie/Brough), 1964, Physiotherapy
Barrett, Katie (Benson), 1964, Physiotherapy
Hoogenboom, Mary, 1964, Nursing
Bibby, Alison (Samuels), 1965, Laboratory
Rayner, Reg, 1965, Grounds
Ross Helen, 1965, Nursing
Anderson, Betty, 1965, Nursing
Catley, Mary Ann, 1965, Nursing
Condliffe, Betty, 1965, Sewing
Barnett, Nancy, 1965, Oc. Therapy
Barnett, Allan, 1965, Engineering
Narain, Tuhiao (McDonald), 1965, Nursing
Gibson, Marion (Marsh), 1965, Nursing
Peacock, Vivienne (Hewitt), 1966, Administration
Hartwell Norman, 1966, Medical Staff
Connolly, Chris, 1966, Nursing
Higgins Kevin, 1966, Administration
Pedersen, Betty, 1967, Nursing
Shepherd, Eva, 1967, Nursing
Cole, Naida, 1967, Nursing
Mann, Peter, 1967, Medical Staff
Fletcher, Yvonne (Bergin), 1967, Nursing
Reid, Jane (Spencer), 1967, Nursing
Stowe, Ray, 1967, Works
Thomson, Rose, 1967, Nursing
Marriott, Kevin, 1968, Medical Staff
Hunter, Paul, 1968, Board Member
Horsham, Dave, 1968, Orderly
Robertson, Jack, 1968, Grounds
Reid, Joy, 1968, Physiotherapy
Barclay, Ruth, 1968, Administration

Douglas, Betty, 1969, Administration
Hessey, Jack, 1969, Board Member
Brun, Grace (Giddens), 1969, Household/
Kitchen
Scarlett, Liz, 1969, Nursing
Bayly, Dorothy, 1969, Nursing
Greatorex, John, 1969, Nursing
Haldane Joyce, 1969, Administration
Young, Sidney, 1969, Medical Staff.

1970 - 1979

Burnet, Ruth, 1970, Administration
Jamieson, Jim, 1970, Board Member
Norrgrove, Alf, 1970, Nursing
Andersen, Allan, 1970, Medical Orderly/
Works
Hall, Aileen, 1970, Nursing
Mason, Penny (White), 1970, Nursing
McLean, David, 1970, Administration
Rose, Gwynne, 1970, Nursing
Sangster, Keith, 1970, Engineering
Andersen, Priscilla (Eagle), 1970, Household
Eagle, Ian, 1971, Orderly
Hamilton, Gavin, 1971, Board Member
Douglas, Kathleen (McKee), 1971, Nursing
Holes, Raita, 1971, Nursing
Power, Geraldine, 1971, Administration
Pickett, Louise, 1971, Oc. Therapy
Bird, Frances, 1972, Physiotherapy
Delaney, Nancy, 1972, Oc. Therapy
Budd, Ann, 1972, Nursing
Winchcombe, Margaret, 1972, Nursing
Kiwai, Rayeyleyn (Pussell), 1972, Nursing
Miller, Gail, 1972, Laundry/household
Mason, Tim, 1973, Medical Staff
Oakley, Barbara, 1973, Nursing
Rendall, Suzanne (Bannister), 1973, Nursing
Rendall, Fenton, 1973, Nursing
Ford, Betty, 1973, Administration
Gavin, Pam, 1973, Laundry
Pene, Pearl, 1973, Nursing
Reddiex, Karen (Spencer), 1974, Administration
Train, Andrew, 1974, Board Member
Wright, James, 1974, Nursing
Taylor, Mary, 1974, Nursing
Tutaki, Olive, 1974, Administration
Brun, Allan, 1974, Orderly
Karaitiana, Pam, 1974, Nursing/Oc. Therapy
Giddens, Missy, 1974, Kitchen/Administration
Newton, Gillian, 1975, Nursing
Karaitiana, Geoff, 1975, Medical Orderly
Hughes, Fiona (Matheson), 1975, Nursing
Kuru, Marie, 1975, Nursing
Wellman, Raywin (Townsend), 1975, Nursing

Burne, Brent, 1976, Engineering
 McLean, Jackie, 1976, Household
 Greene, Wendy, 1976, Nursing
 Amner, Jeanna (Gray), 1976, Nursing
 Hulena, Ruth, 1976, Nursing
 Souter, Susan-Gae, 1976, Nursing
 Warren, Penny, 1976, Nursing
 Hoffman, Jeanette, 1976, Oc. Therapy
 Seymour, Anne, 1976, Nursing

King, Marae, 1977, Nursing
 Cooper, Lorraine, 1977, Kitchen
 White, Patricia, 1977, Board Member
 Beckmann, Naomi, 1977, Nursing
 Hamilton, Mary, 1977, Board Member
 Ritchie, David, 1977, Board Member
 Bean, Michael, 1978, Administration
 Torrance, Eion, 1978, Administration
 Reynolds, Garry, 1978, Administration

Reynolds, Jan, 1978, Nursing/ Oc.
 Therapy
 Keeling, Jean, 1978, Kitchen
 McBurney, Lily, 1978, Kitchen
 Weenick, Peter, 1978, Board Member
 Eade, Cheryl, 1978, Kitchen
 Cooper, Jennifer, 1978, Kitchen
 Bean, Judith, 1979, Kitchen
 Wilson, Derek, 1979, Works
 Barnes, Dorreen, 1979, Kitchen

Apologies

Hickey, Isabelle Nursing
 Parker, Margaret (Henderson), Administration
 Omundsen, Margot (Evans), Nursing
 Martin, Joan, Nursing
 Williams, Phillippa, Nursing
 Adcock, Raye (Miller), Nursing
 Gray, Rene, Nursing
 Lemon, Mr. L., Administration
 Lemon, Mrs. V.L.,
 Knight, Beverly, Nursing
 Thomson, Janet, Nursing
 Oldfield, Patricia (Wall), Nursing
 Botting, Jean, Nursing
 Banks, A.W., Medical
 Davidson, F. (Foster), Physiotherapy
 Mayman, Delia (Cadman), Nursing

Eastwood Maureen (McLaren), Nursing
 Trezise, John, Medical
 Rose, E.A., Nursing
 Davey, Lillian, Nursing
 Cameron, Mick (Simpson), Physiotherapy
 Addis, Jocelyn (Krebs), Nursing
 Harvey, Nancy (King), Nursing
 Verco, Doris, Nursing
 Fisher, Mrs. Peggy
 Murdoch, Margaret (Clark), Nursing
 Sinton, Catherine (Dew), Nursing
 Powell, Ann (Davis), Nursing
 Jones, Alice, Nursing
 Nicholls, Hilda (Nelson),
 Bell, Margaret (Eyre-Walker), Household
 Supervisor.
 Ferguson, Rose, Nursing

Official Guests

Sir Hallam & Lady Dowling — *Chairman, Hawke's Bay Hospital Board*
 Mr. & Mrs R.A. Knight — *Chairman, Dannevirke Hospital Board*
 Mr. & Mrs. W.A. Sutherland — *Chairman, Cook Hospital Board*
 Mr. & Mrs. L.H. Tangaere — *Chairman, Waiapu Hospital Board*
 Mr. & Mrs. J.R. Falloon — *M.P., Pahiutua*
 Mr. & Mrs. J.R. Nairn — *Chairman, Waipukurau District Council*
 Mr. & Mrs. K. Addis — *Chairman, Waipawa District Council*

APOLOGIES

Mr. & Mrs. J.R. Harrison — *M.P. Hawke's Bay*
 Mrs. M. Inkster — *Chairman, Wairarapa Hospital Board.*