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# **CONTENTS**

Ackno	owledgement	3
ntroc	duction	4
1.	Brislington Medical and Nursing Museum Timeline	5
2.	Brislington Medical and Nursing Museum	8
3.	Dr. Walter Brown of Brislington House	11
4.	Walter Sigismund Brown	14
5.	Keith Sigismund Macarthur Brown	17
6.	Dr. Thomas Robertson	19
7.	Brislington as a Medical Practice	23
8.	The Parramatta Hospitals	27
9.	The Wishing Pool, Parramatta – Centenary Square	53
10	. Papers of Edwin John Brown 1890-1932	56
11.	Gazing on green: The Trees of Parramatta	60
12.	Brislington Garden Fetes and Parties	66
13.	. Hospital Nursing in Parramatta	71
14.	. Brislington: Building and Modifications	82
15.	. The Brislington Brides	84
16.	. Nurses Quarters, 1949 to early 1970s	88
17.	. Judith Brown - Brislington Family	96
18.	. Margaret Gail Davidson	97
19.	. Sister Doreen Hennesy: A 20 Year Journey of Cardiac Rehabilitation	in
	Western Sydney	102
20	). Images	108
ict o	f Deferences	112

### **ACKNOWLEDGEMENT**

This book has been compiled to commemorate 200 years of the Brislington House. In September 2021 is the 200th anniversary of the construction of Brislington House. Brislington Medical and Nursing Museum is the oldest and rare existing dwelling house in the inner City of Parramatta. It has been associated with the medical profession since 1851 having been a doctor's residence and practice and associations with the Parramatta District Hospital. It is located in a gracious Georgian building on the corner of George and Marsden Streets in Parramatta and since 1990s has been a Medical and Nursing Museum for the former Parramatta Hospital.

We would like to acknowledge the Brislington Museum for allowing us to use images from their website to produce this book.

More information and stories on the articles listed in this publication, can be found on our website https://historyandheritage.cityofparramatta.nsw.gov.au/

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We thank everyone who has helped in any way to bring about this book.

### INTRODUCTION

Brislington is the oldest two-storey residence within the city limits of Parramatta. The property has been recognised as being of historical significance due to its association with notable people, playing a major role in colonial and state government in Parramatta. It was resumed by the New South Wales Government who, after letters and requests, finally restored it in the late 1990s to its former glory.

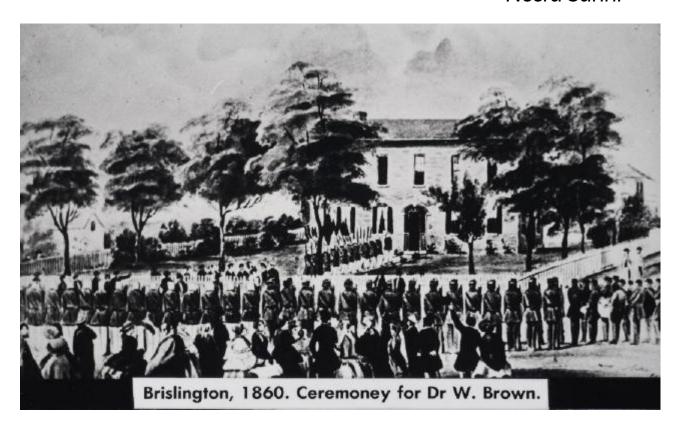
The Medical & Nursing Museum was put together in November 1983 in response to Parramatta Council's request to have a display on medicine. The Board of Directors made funds available for the establishment of the display, and members of the Graduate Nurses Association and other interested locals have been volunteer workers and guides for 30 years.

In September 2021 is the 200th anniversary of the construction of Brislington House. Brislington Medical and Nursing Museum is the oldest and rare existing dwelling house in the inner City of Parramatta.

Neera Sahni

# Brislington Medical and Nursing Museum Timeline

Neera Sahni



<u>Brislington, north-west corner of George and Marsden Streets, Parramatta, view of a ceremony with military figures conducted in front of house, from a sketch, 1860.</u>
Source: City of Parramatta, Local Studies Library Photographic Collection, LSP 00613

1819	Ex-convict John Hodges purchases land where Brislington House now stands. Hodges wins £1,000 in card game at Woolpack Hotel.
1820	Construction of the two storey house is commenced.
1821	The house is completed.

1825	Hodges advertises the house for sale, "a large commodious two storey red brick building comprising four rooms on each floor with a variety of outhouses".
1844	Brislington House sold to Mr. Ryan acting as Chief Constable.
1851	Brislington House sold to Sydney merchant George Rattray. Thomas Robertson resides in the house.
1855	Sir George Wigram Allen purchases the house and property.
1851	Brislington House sold to George Wigram Allen a Sydney solicitor.
1857	Dr. Thomas Parsons sells his medical practice to local doctor Walter Brown which had been recently vacated by Dr. Thomas Robertson. Dr. Brown begins renting Brislington House from Sir George Allen. Dr. Brown names the house, "Brislington", after the suburb in Bristol, England. The Port Jackson Fig tree on the property was there when Brown moved in.
1858	Dr. Brown marries Sigismunda, and they set-up a doctors' surgery in a down-stairs front room.
1887	Dr. Walter Brown finally buys Brislington from George Allen for £1300.
1889	Dr. Walter Sigismund Brown (second son of Walter Dr. Brown) marries Margaret Macarthur and they take over the Brislington residence and practice.
1890	Keith Sigismund Macarthur Brown, (son of Walter and Margret) is born at Brislington.
1897	Dr. Brown dies, wife passes away in 1903.

1915	Dr. Keith Macarthur Brown graduates from Sydney University Medical School.
1916	Dr. Keith Macarthur Brown marries Ayesha Borthwick and they reside in Brislington.
1919	Dr. Keith Macarthur Brown after active service with the A.I.F. returns to Brislington as Dr. K. S. Macarthur Brown.
1947	The Brown family, still in residence, are informed that the Parramatta Hospital will be resuming Brislington for expansion after 92 years of family occupation.
1949	Brislington House becomes part of the Parramatta Hospital, nurses quarters.
1970	White ants and borers create major damage. Plans to demolish the structure are considered.
1977	An estimated \$40,000 to \$50,000 would be necessary to restore the building.
1983	The Heritage Council issues a "preservation order" on Brislington.
1990s	Brislington is saved and is utilised as a Medical and Nursing Museum.

# Brislington Medical and Nursing Museum

Neera Sahni



<u>Brislington, north-west corner of George and Marsden Streets, Parramatta, view of a ceremony with military figures conducted in front of house, from a sketch, 1860.</u>

Source: LSP 00613

John Hodges was transported to the colony in 1806, escaped in 1807 but was recaptured in Timor, and returned to Port Jackson. Subsequently pardoned by Governor Macquarie, he became a landed proprietor and was eventually granted a liquor licence in 1821.

Early Parramatta history has it that one night, ex-convict John, won the sum of £1,000 pounds in a game of euchre at the original Woolpack Hotel, situated on the north-east corner of George and Marsden Streets, in 1821.

The story goes that John, having won the money with the use of the '8 of diamonds' incorporated the '8 of diamond' pattern into a black brick mosaic pattern on the rear wall. This pattern still remains and can be easily seen. The

building is a solid dark brown brick residence set well back on a large raised block of land in about 1½ acres. The entrance being central opposite the small front gate. A very large fig tree shades the dwelling on the southern side. The roof was of galvanised iron, above which brick chimneys appeared towards the rear. A surrounding fence comprised of white painted wooden tapered pickets. The residence comprised of four rooms downstairs and four upstairs, approached by a wooden interior staircase. The floors are of solid wood. The outhouses, kitchen and pantry, servants' quarters and bedrooms, a four stall stable and coach house, and a private water supply from a small well, (one of the first in the town) have all been subsequently demolished. Later a verandah was added on the southern side, replacing the original entrance. When Hodges was found guilty of stealing stones from the Government Quarry amongst other misdemeanours, he was forced to sell the property. The following advertisement appeared in *The Sydney Gazette* on the 14 April, 1825.

'To be sold by private contract, a large and commodious two-storey brick building, situate in George Street, Parramatta, next to Mr. Nash's It comprises four rooms on each floor with a variety of outhouses, consisting of kitchen and pantry, two servant's bedrooms, a four-stall stable and coachhouse, and possessing other conveniences, with one of the first wells of water in the town.

The house is newly built and the site on which it stands, comprising the garden, as near one-and-aquarter acre, stands most eligible for business, and is secured by a perpetual grant and can be viewed any day.

John Hodges, Proprietor.'

The property was purchased by Sir Wigram Allen in about 1855. He later sold it to a Dr. W. S. Brown, a Medical Practitioner in 1873, whose son followed in 1888, and subsequently his grandson, Dr. K. S. Macarthur-Brown who also practiced medicine, while residing in Brislington.

During the mid-1960s the dwelling was utilised by the State Government as a nurses home for the nearby Parramatta Hospital.

Brislington is the oldest two-storey residence within the city limits of Parramatta. The property has been recognised as being of historical significance due to its association with notable people, playing a major role in colonial and state government in Parramatta. It was resumed by the New South Wales Government who, after letters and requests, finally restored it in the late 1990s to its former glory.

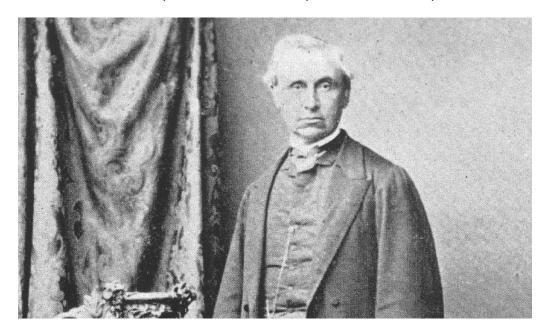
The Medical & Nursing Museum was put together in November 1983 in response to Parramatta Council's request to have a display on medicine. The Board of Directors made funds available for the establishment of the display, and members of the Graduate Nurses Association and other interested locals have been volunteer workers and guides for 30 years.

Brislington Medical and Nursing Museum pays tribute to a by-gone era, shows a "then", and "now" picture of Medical Science and Hospital Care in Parramatta.

# Dr. Walter Brown of Brislington House

### Research & Collection Team

From the unpublished manuscripts of John McClymont



Walter Brown, M.D.
Source: Medical Practice in Old Parramatta

Dr. Walter Brown of Bristol, visited his brothers Alfred and Arthur who had fled England to Australia to escape catching consumption, a terrible disease which had already claimed two of the family. His father, John Brown of Brislington, a suburb of Bristol, was an architect who had hoped that Walter would follow him in that profession but he chose otherwise. At 16, Walter was apprenticed for three years to a reputable surgeon in Bristol, a Mr Brandon, and then studied at the University of Edinburgh where he qualified MRCS in 1843. He twice visited his brothers in Queensland returning to gain his doctorate degree by thesis in 1846, shortly before heading for a new life at Parramatta.

In the spring of 1857, he purchased the practice of Dr. Thomas Parsons. He became a tenant of Sir George Wigram Allen who owned the red brick house, which he named Brislington, in George Street. He was well suited to his vocation as a family physician with his commanding presence, quiet dignity, a fine sense of humour and a fanatical conception of the duty that lay before him. In August 1858, he married Sigismunda, daughter of John Brown of Coulston, of Upper Paterson in the Hunter Valley. Sigismunda, born in Copenhagen, was a fine

horsewoman and attended her husband during their early married life on his calls in the neighbouring towns of Ryde, Liverpool, Windsor and Penrith.



Sigismunda Brown.
Source: Medical Practice in Old Parramatta

With the imminence of war in the Crimea, on 3 September, 1860, the townspeople of Parramatta met to discuss the formation of a Volunteer Corps. By the end of the month 50 men had joined and in November met to discuss the rules of their organisation. At this meeting they elected Dr. Walter as their captain. The first review was held in the Park when the ladies of the town, represented by Miss Bobart, the rector's daughter, presented the Parramatta Rifles with a set of colours, 'a very handsome silk one ... ' with the words 'Defence', their motto, and

the letters 'PVR' embroidered on it. After lunch, the men reformed and marched to Brislington where they presented the colours to their captain. The ladies of the town next worked tirelessly to raise funds for instruments for the Volunteers band.

In the early sixties, Dr. Walter Brown and Dr. George Pringle worked amicably together as honorary medical officers on the staff of the Parramatta District Hospital which was gaining a reputation in the district as a medical establishment, rather than just as a benevolent institution for the aged and infirm. Whereas Dr. Pringle was the leading light in the towns Cricket Club, Brown had formed the Rifle Club and was behind the formation of the Range, located on the north side of town. Brown was also a keen supporter of St John's Church with his family and servants.

In addition to being appointed to The King's School Council, he was appointed official coroner in the town. These tasks, in addition to his normal busy practice and hospital duties, together with his interest in the Volunteer Rifles, made him decide to resign from the latter to conserve his time. The unit petitioned him to stay on and he was so flattered that he tried to have his resignation withdrawn. Army authorities disregarded his letter and accepted his resignation, until pressure from within the unit itself on the army hierarchy, caused the decision to be reversed and promoted Brown to major.

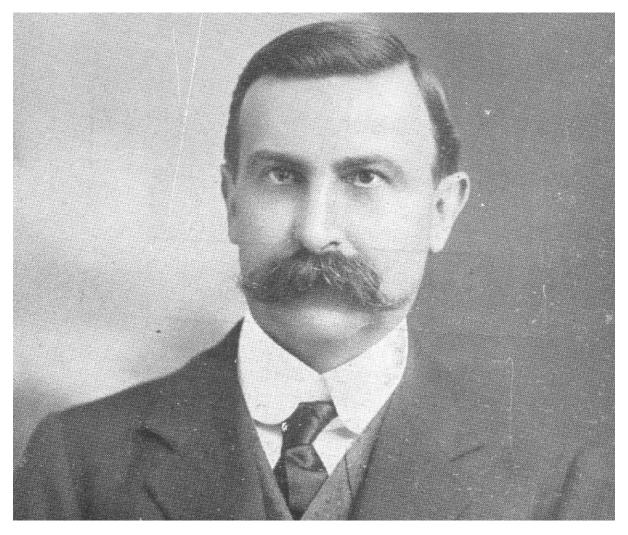
In the field of medicine, Brown had become renowned as one of a few surgeons able to successfully remove ovarian cysts. Known as 'ovarian dropsy', operations generally resulted in high mortality because of the complications of peritonitis, septicaemia or internal haemorrhage. Brown achieved some skill in performing such operations, aided greatly by the use of Lister's newly found carbolic antiseptic and in the use of anaesthetic. The noted case concerned his first attempt, made upon a fifty year old woman of Bowral. The suffering woman was brought to Parramatta in a dray; the operation was conducted in a bedroom at Old Government House, then a fashionable boarding house conducted by a Mrs Abrahams. Infinite trouble was taken in preparing the room to make it antiseptic with carbolic. The operation was successfully undertaken on a mattress placed on two kitchen tables, Brown was assisted by Drs. Rutter and Waugh. One of the end results of this scene was the realisation that operations should be performed in a hospital with skilled nurses assisting, which then became a procedure, followed by Brown, supported by Rutter, urging the hospital Board to build a separate room solely for the use of operations.

Walter Brown was a leader in the move towards a new hospital for Parramatta during the 1880s and although his efforts helped towards the project's success, he died on 16 December 1897, at least seeing the new building almost complete.

# Walter Sigismund Brown

### Research & Collection Team

From the unpublished manuscripts of John McClymont



<u>Dr. W. S. Brown</u>. Source: The Jubilee History of Parramatta

Walter Sigismund was born at Brislington on the 16 March 1861. Known as Sigismund or 'Sig', he attended the King's School (TKS) (1872-1880) beginning the long tradition of his sons and grandsons in attending TKS Parramatta.

Here, he left an unequalled sporting record behind him. While at school he won the All Schools 440 yards championship and in 1876, scored 114 runs in the cricket

match against Southey's School from Mittagong when TKS scored a record 560 runs.

He undertook his medical degree at Guy's Hospital in London and graduated MRCS LSA. While a student here he won a tennis championship in a field of 300 competitors and was captain of Guy's Hospital cricket team for three successive years. He played in the position of three-quarter in the Blackheath Football Club, the then leading Rugby Union Club in London. He played alongside the famous England footballer and cricketer of the day, AE Stoddart.

On his return to Parramatta in 1888, Sigismund played lawn tennis (Brislington once had its own tennis court), golf, and followed his father's love for lawn bowls. His father had been the first president of the Woolpack (Inn) Bowling Club, the private club that developed into The Rosehill Bowling Club in 1880 when Nat Payten junior sold the inn in 1879. Sigismund played golf to relax but became a champion both in tennis and in bowls. He followed Frederick Charles Cox (Parramatta's mayor, 1884) as president of the Rosehill Bowling Club from 1904 - 1919. As president, he 'lifted the game to high repute'.

Margaret Isabella Macarthur was the first daughter (b 21 August 1863) of George Fairfowl Macarthur, headmaster of The King's School and grand-daughter of Hannibal Hawkins Macarthur and Anna Maria King of The Vineyard. When she was seventeen years old, she was courted by Walter Sigismund, one of her father's former pupils. The match appears to have blossomed during a visit to England by Isabel and her mother in 1881. Walter Sigismund, known as Sigismund or 'Sig', was at that time studying at Guy's Hospital, London and preparing to join his father's medical practice at Brislington, Parramatta.

In 1888 when the couple married, Sigismund's parents began a protracted holiday in England and Sigismund took over his father's practice. They lived at Brislington, Parramatta and enlarged it during succeeding years, including adding the Federation styled front verandah and front door. They had seven children – Keith, Marg, Gordon, Ruth, Arthur, George and Isabel.

Walter Sigismund was associated with the Parramatta District Hospital for over 20 years as a doctor, a committee member and as its president in 1904. He knew the aging and inadequate Macquarie hospital of 1818 and helped to fight for the new Sulman hospital 1898, the latter building that was finally demolished in 2005.

When a public meeting was called by Mayor Grahame to form an historical society in Parramatta, amongst the foundation members in 1913 were 'Dr. W.S. Brown, Mrs W.S. Brown, Miss Brown [and] Miss R. Brown ...' and Sigismund was subsequently elected as a vice president. Whereas there is no legacy of Dr. Brown undertaking any papers for the Society, during 1914 the secretary Reverend S. Johnstone, in the Society's first Annual Report (22 March 1915) expressed thanks

to members for preparing papers. This included Mrs W.S. Brown who presented a paper on 'Bungarribee', the attractive historical Colonial Georgian house in Blacktown. This was fortuitous for it was not long before it became derelict and later demolished. In the same volume, the President William Freame wrote:

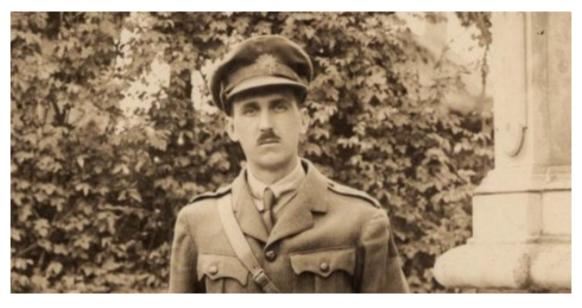
"The Society desires to thank Dr. W.S. Brown and the several ladies and gentlemen whose generous subscriptions have enabled this Journal to be published."

After a year as president, Sigismund Brown was again elected to the Society Council as a vice president.

# Keith Sigismund Macarthur Brown

### Research & Collection Team

From the unpublished manuscripts of John McClymont



Keith Sigismund Macarthur Brown.

Source: Beyond 1914: The University of Sydney and the Great War

Keith Sigismund Macarthur Brown was born at Brislington on the 14 April 1890. Keith was educated at the nearby King's School (1900-04) and Sydney University where he studied medicine (1910-1915). In 1916 he joined the AIF Medical Corp with rank of captain and was sent to a hospital in London. Before he embarked overseas he married Ayesha Borthwick of Walcha whom he had met at university. They had four children.

Ayesha joined him in London at the conclusion of the war, and Keith took the opportunity to undertake some postgraduate medical research in Paris. On his return to Parramatta in 1920, he became the third Brown to conduct a medical practice from Brislington. His father Walter Sigismund gratefully retired after having been ravaged by a 'virulent and deadly influenza epidemic in 1919'. Between 1927 and 1938 Keith also maintained a practice in Macquarie Street, Sydney. He was an honorary doctor at Parramatta District Hospital but not as well accepted as his father and grandfather were.

Keith is remembered as the author of *Medical Practice in Old Parramatta* published by Angus and Robertson in 1935. The book is regarded as an authoritative addition to the history of Parramatta in its field. It is understood that he was an honorary lecturer at University of Sydney in this field of the history of early colonial surgeons and physicians.

Keith and his wife eventually moved from the heritage listed Brislington, almost a century after Walter Sigismund began to practice there. It was resumed by the Department of Health for the use as nurse's quarters. When it was no longer required for that purpose, it became a medical museum.



Keith Sigismund Macarthur Brown. Source: Beyond 1914: The University of Sydney and the Great War

## Dr. Thomas Robertson

### Caroline Finlay



<u>George Street, Parramatta, looking west to stone gatehouse, circa 1860s.</u>
Source: LSP 00407

Dr. Thomas Robertson was born in 1823 in Aberdeen Scotland to Robert Robertson and Helen Robertson nee Watt. Dr. Robertson became a long-term resident of Parramatta and is considered to be one of Parramatta's earliest doctors to make his medical profession a full time job. Dr. Robertson married Parramatta born Mary Elizabeth Walker (1826-1883) on the 26 May, 1848 in a Wesleyan Chapel in Parramatta and they raised their family in Parramatta.

Dr. Robertson was to become significant in the formation and success of the Parramatta District Hospital. Having already had a successful medical career which included contributing the main article to the first issue of the Australian Medical Journal in 1846, Dr. Robertson in 1848 alongside Dr. Hill became responsible for the patients at the fledgling hospital. The first committee meeting invited Drs. Hill and Robertson to superintend the hospital and they accepted. When Dr. Hill died in 1850, Dr. Robertson also helped with a bequest of three hundred pounds. Dr. Thomas Robertson acted as an Honorary Medical Officer at Parramatta District

Hospital performing surgeries with a strong emphasis on strangulated hernias. He wrote an extensive article titled "Strangulated Inguinal Hernia" and the first surgery he performed was only the third case of surgery being performed for strangulated hernias in the colony.

The author of the authoritative *Medical Practice in Old Parramatta*, Keith Sigismund Macarthur Brown, said of Dr. Thomas Robertson:

"The Parramatta Hospital survived the many unforeseen dangers and perilous experiences of its early infancy in a manner quite consistent with the times; but it was largely due to the unremitting attention and tender care of Dr. Thomas Robertson that this critical period of its early existence as a public institution was successfully passed without serious detriment to its future growth and development."

#### He continues:

"In spite of its early vicissitudes, the hospital carried on a beneficent work for the sick and suffering poor of a large and populous district. A medical report submitted by Dr Robertson to the first annual general meeting contained a formidable list of diseases which had been treated with success, and a plain statement of fact concerning the unpalatable subject of an exceedingly high rate of mortality which was satisfactorily accounted for, however in the concluding paragraph he stated: It is melancholy to state that very few patients solicit hospital aid until they have derived no benefit from other sources and their disease progressed so far as to render cure impossible; thus making the institution a receptacle for the dead previous to internment."

Two years after the death of John Hodges in 1849 the title and allotment of Brislington was consolidated in 1851 with the purchase by George Rattray. The house was leased to Dr. Thomas Robertson from August 1851 and he used Brislington as both his home and medical practice. Dr. Robertson moved from his quarters from the cottage within the Parramatta District Hospital grounds to Brislington bringing his possessions which included a patient's skeleton that had been donated to Dr. Robertson in gratitude of his care.

Immediately prior to Dr. Robertson moving from his cottage in the Parramatta District Hospital grounds to Brislington the following advertisement was placed in *The Sydney Morning Herald*:

"R. ROBERTSON returns his sincere thanks to the inhabitants of Parramatta, its vicinity, and Liverpool, for the very extensive patronage they have bestowed upon him during the last eight years, and their kind unsolicited offer to patronise him in future.

Dr. R. corresponds regularly with the most celebrated professors of four Colleges and Universities, two in Scotland, one in England, and one in Ireland, from whom he had the pleasure of receiving instruction while a pupil of his late brother and the late celebrated Robert Liston, and has received letters from them requesting him to accept presents of the latest and best scientific works on medicine which they will forward by every opportunity, as a small token of the high esteem and regard they have for his welfare, and to enable him to keep pace with the rapid progression of medical science which is daily taking place throughout the globe.

Dr. R. received the first present by the Hero of London, from Dr. Dickie, Professor of Natural History, Zoology, and Botany, Queen's College and University, Belfast, Ireland.

Dr. R. has removed from the cottage adjoining Dr. Hill's residence, to the one lately occupied by the Rev. John Tait and James Oakes, Esq., George-street, on the left hand going from Mrs. Nash's towards the Government Domain."

#### Keith Sigismund Macarthur Brown noted that:

"It was well that he lived close by, as the institution claimed his attention at all hours of the day and night",

#### and that:

"from the day in August 1851 when Dr Thomas Robertson moved his quarters from the cottage within the hospital grounds to become a tenant of the red-brick house that Hodges built, the old home on the corner came to occupy a warm place in the hearts of the townspeople, and to figure prominently in the medical annals of Parramatta."

A report by the Parramatta Correspondent of the *Herald* not long after Dr. Robertson moved to Brislington offers an insight into the nature of the work that he performed whilst living and working in Brislington:

"Mr. Plunkett, junior, of Dural, having gone into the bush for the purpose of felling a tree, which he completed, when the tree came in contact with another, thereby throwing it aside, and striking Mr. P. on the head which brought him to the ground, breaking the top of his shoulder blade, as he fell on the teeth of a cross-cut saw. His wife went in search of him, and found him senseless, when he was conveyed to Doctor Robertson's."

Dr. Thomas Robertson retired in 1857 due to serious health concerns, and was replaced by the new tenant Dr. Walter Brown. He died at 53 years of age on the 17

June 1877 in Parramatta. Dr. Thomas Robertson is best described by Keith Brown in his book *Medical Practice in Old Parramatta* as having:

"an unusual keenness in attention to detail, as well as an insatiable desire to gain a deeper insight into the aetiology of disease. He knew, therefore, that his humble contribution in the interests in Science would be utilized to the fullest possible extent, and that his internal economy would be the subject of an intensive study which might produce results of inestimable benefits to his future patients and perhaps to the human race."

# Brislington as a Medical Practice

### Emma Stockburn



Brislington. Source: Museums and Galleries of NSW

Brislington was a home and a medical practise for three generations of the Brown family. The house was lived and working in from 1857 to 1949, a total of 92 years.

Over that time the world of the hospital, health care and the profession of doctor and surgeon changed and advanced a great deal.

In the early days of the colony the Colonial Medical Service (CMS) medically served the people of NSW and Australia. Thus the appointment of Colonial Surgeons: 1788-1795 Principal Surgeon John White, 1796-1805 Principal Surgeon William Balmain, 1805-1811 Principal Surgeon Thomas Jamison, 1811-1819 Principal Surgeon D'Arcy Wentworth, 1819-1836 Principal Surgeon (Inspector of Colonial Hospitals) James Bowman, and in-between 1836-1848 Military Rule –Deputy Inspector General of Hospitals, John Vaughan Thompson and William Dawson.

This started to change with the settlement of other parts of the colony and the discovery of gold in 1851. However, because of the small and sparse population private practise developed slowly until the mid-1800s. In NSW there was 284 registered medical practitioners in 1850 but this had increased to 691 by 1892.

The doctors at Brislington, Walter Brown, Walter Sigismund Brown and Keith Brown, three generations of medical professionals were general practitioners, pioneers and a very significant part of the lives of the people of Parramatta. To this, the house at Brislington took on a sanctity, as did the Brown family. To give some of the role and importance of the doctor in Parramatta's past let us turn to a tribute to Walter Brown written in 1897.

"A family physician occupies a peculiar positon in a community. He may be conveniently polite and professionally attentive; but he can't help being if his be worthy of his post at all, bound to hundreds of homes by tender ties connected with births and deaths and with the most sacred times of affliction and anguish....the doctor is a very central figure in a bright picture of hope and.. ...they may be professional giants; they may give days and nights consecutively of toil and study and of the hardest of hard work....that kindly, self-possessed strong spirit that come just when every avenue of relief seemed blocked by despair and coming brought skill and knowledge and confidence...and to the loving watchers, relief."

The Brown family practised at Brislington for ninety-two years. Over that time, there were many changes in their profession, advancements as well as the prevalence of mortality from illness and conditions not seen as much today. In between 1871-1880 in Victoria, there were 6.4 deaths in 1000 live births and still 6.0 in 1901-1905. For a physician like Walter Brown who was believed to have delivered in up to 4000 babies this must have been a present fear. Cancer mortality rates were also high in NSW in between 1856-1860 and later in the 19th century. Doctors like the Browns would treat many of these patients at home. Accidents and acts of violence as well as heart disease, rheumatism, VD and tuberculosis were also problems seen in hospitals. General Practitioners like the Browns who also assisted at Parramatta Hospital, the Gaol and Asylums would see many of these conditions, as well as the need for further care for patients at Brislington. The Browns, particularly Walter Brown rode to rural areas, often in the company of Sigismund, his wife to treat patients in more isolated areas.

Brislington would have been a place that needed to embrace new ways of working, new science as well as the care and kindness the Browns were known for. This included:

 Pioneering work by Doctor Pringle and Walter Brown in the area of Listers antisepsis practises. This lead to more successful operations on female patients who needed ovariotomies. These were carried out at homes, in Brislington and Parramatta Hospital by Dr. Brown. Dr. Walter Brown was considered a pioneer and leader in his field in this area.

- The discovery of antiseptic would have also be revolutionary in everyday medical practise.
- The effects of measles epidemics on the community during the 1860's.
- The compulsory notification of infectious disease cases.
- The early use of vaccines for typhoid and smallpox, as well as contending with outbreaks of those same diseases, plus problems with diphtheria.
- The more common use of Nitric Oxide as an anesthetic.
- The use of salicylic acid and then aspirin in the management of pain.
- The continuing prescription of a healthy diet, exercise and the benefits of clean air and environment.

There had been cases of diphtheria in Parramatta in the late 1890s directly connected to open drains near North Parramatta's school rooms and headmasters home. The headmaster at the time was William Swann and four of the children were made very ill. The care of the doctors at Brislington would have assisted in the recovery of those who were taken sick. The discovery of the connection between hygienic sanitation and disease became better known during the mid-1800s.

## PUBLIC NOTICES.

D. R. W. S. BROWN desires to announce that, early in the new year, his son, Dr. KEITH BROWN, will assist, as a partner, in his practice.

"Brislington,"

George-street, Parramatta,

December 12, 1919.

<u>Advertising</u>. Source: The Cumberland Argus and Fruitgrowers Advocate, January 3 1920

The Browns were also known for the service to the less fortunate in the Parramatta community. As seen here from Walter Brown's obituary:

"Dr Brown's acts of noble charity were preformed silently and unseen of the busy world around him. Hundreds would testify to the kindness and largeness of his heart to the innumerable acts of unrewarded service. His close connection with the Parramatta District Hospital was as it were a connecting link between those

services to the poor and need on his daily round and those who were compelled to see the protection of the public institution."

"how the physician brought to the aid of the suffering weaker ones not only cheer and love but advice when no question of pay was to be thought of, and, in addition to that, medical comforts"

The respect and warmth felt for Walter "Sigi" Brown in his service is also seen in his obituary below:

"To pay a tribute to one who was long and honourably associated with this town, one given to good works; one who in his younger days took a very active interest in everything that concerned the welfare of this district. ...his is one of a generation of men who have ministered to the medical need of this community with distinction, commanding the respect of all."

The Browns practised medicine in Parramatta up into the 1940s. At this time, towards the end of the Browns practise at Brislington what was it like to be a doctor.

Doctors during this era had most likely experienced the First World War, and Keith Brown had. He had been a medical officer in France and spent time working in a hospital in London. He had trained at Sydney University and then in Paris after the war, returning to practise at Brislington and in Macquarie Street, Sydney.

This was the time, "when patients were told what they had to do by the doctor and they were expected to do what they were told". Medical Practitioners lived very busy lives, many working in hospitals, Parramatta hospital for example as well as seeing patients at their surgery and they there was house calls. Not many patients had a motor vehicle or telephones and distances travelled by doctors were still great. Medicines such as penicillin was available in the 1940s but still very expensive. The general practitioner would provide some medicines at their surgeries, as pharmacies were only in large urban areas. It was a time of growing scientific discoveries as well as pressures experienced from the World Wars and the Depression.

# The Parramatta Hospitals

### Research & Collection Team

From the unpublished manuscripts of John McClymont



Staff at Parramatta District Hospital, circa 1890.

Source: LSP 00098

### **Background**

It can be assumed that Principal Surgeon John White planned hospital facilities at the new settlement at Rose Hill in a similar way to those at Sydney Cove on the landing of the First Fleet.

The primary settlement saw about 800 convicts landed, many boarded in poor health from their long imprisonment in the hulks. Outbreaks of dysentery and scurvy, when they were landed required temporary hospital facilities in tents. Within a year however, the incidence of sickness was greatly reduced and a temporary hospital built by 1790.

With the governor's announcement that he intended to form an agricultural settlement at the head of the harbour, White, who was a member of the expedition that had discovered the site, planned his staff and accommodation there. He chose his senior surgeon, William Arndell to be in charge at the settlement.

At Sydney Cove, Phillip's immediate building priorities had been in the erection of store buildings to receive the stores from the ships and a hospital to receive the sick who had been accommodated in tents on the west side of the Cove. Under Henry Brewer, he utilised the twelve convict carpenters and hired the sixteen shipwrights to construct these buildings. The hospital was 84ft by 23ft, of timber, covered with split pine shingles fastened with wooden pegs fashioned by female convicts. It was located in the vicinity of the former Maritime Services Board building and it appears that the same type of building was erected at Rose Hill.

In June 1790, with the arrival of the *Justinian*, a store ship of the Second Fleet, which in addition to a large number of sick and dying convicts, bought their salvation in the form of a portable hospital building purchased by the government from Samuel Wyatt at the cost of £690. Comprising 602 pieces, this moveable hospital measured 84 feet by 20 feet 6 inches and was 12 feet high. It comprised wooden framing in panels, with cross partitions and porches with a roof covered by copper.

#### THE FIRST HOSPITALS



The 'Tent' Hospital at Parramatta, circa early 1790s. Source: State Library of New South Wales

#### The 'Tent' hospital: 1789

The site of the first 'hospital tent' at Rose Hill to accommodate outbreaks of dysentery among convicts would have been on the flat site, east of the Moat Creek, where the convict party was camped. The military guard who required medical attention would have been accommodated in the Redoubt complex. As it was only a few hours downstream to Sydney Cove, problem cases would have been removed to the hospital there. No doubt, the convicts chosen to work at Rose Hill would have been chosen from the strongest and healthiest available, preferably those with some agricultural experience such as James Ruse.

#### Location

The first built hospital at Rose Hill was located on the northern side of the High Street (now George Street), the first formed road at the settlement, approximately between today's Marsden and O'Connell Streets, set back from the original track, which later became the formed street. Traditionally, hospital buildings since that time have occupied this site. It may be seen in the drawing, A View of the Governor's House at Rose Hill in the Township of Parramatta. Fletcher describes the scene in part "To the right of the street were other convict huts, barracks for the military garrison, a store and a hospital". There is evidence that the convict painter Thomas Watling 'had a hand' in sketching the original scene. Helen Proudfoot, who also uses the illustration, claims that there is a likeness to Watling's east view of Port Jackson and Sydney Cove taken from behind the New Barracks, a painting in the British Museum, signed by Watling.

The map of the settlement of 1790 does not locate the hospital by site but gives us two clues that are marked, and confirms Fletcher's observation to its position – Hospital Lane and the Surgeon's House.

### Description

The first description came from Captain Watkin Tench RM in mid-November, 1790:

"A most wretched hospital, totally destitute of every conveniency. Lucky for the gentleman who superintends this hospital [Thomas Arndell] and still more lucky for those who are doomed in case of sickness to enter it, the air at Rose Hill has been generally healthy. A tendency to produce slight inflammatory disorders from the rapid changes [in temperature, between dawn and dusk] of the temperature of the air is most to be dreaded."

Tench goes on to state that on one particular day in summer, that the sick list contained the names of 382 persons. Twenty five adults and two children died during that time. At the end of the year 1788, the thermometer recorded

temperatures of 500 Fahrenheit a little before sunrise, and between one and two o'clock in the afternoon at above 1000 Fahrenheit. The first settlers were experiencing the first drought in the Colony's history:

"The prevailing disorder is a dysentery which often terminates fatally. There was lately one very violent putrid fever which by timely removal of the patient was prevented from spreading."

The hospital comprised two long sheds, built in the form of a tent, and thatched.

It was a roughly built structure, capable of accommodating two hundred patients, the number being confirmed by Tench in December 1791. The hospital probably began as a large tent structure, the sides of which were gradually replaced with timber, and the roof with thatch. It was 80 feet in length and 20 feet wide. Surgeon Arndell was in charge and he was assigned a convict as a personal servant and two convicts to nurse the sick. The hospital could contain 200 patients.

Dr. Keith MacArthur Brown, a descendant of a family of doctors who began private practice in Parramatta in 1857, lectured on the subject of early medical practice in the colony at Sydney University. He described the early medical scene in Parramatta in his book and claims that from the little information handed down to us, that hospitalisation of the sick and suffering in those early days was appallingly crude and incompetent. This is supported by Tench's statement. Brown claims that the hospital was:

"...intended as a dumping ground for afflicted convicts, or a refuge for those settlers, their wives and children, who were known to be without visible means of support'; so that a high standard would not be contemplated in providing for their care and comfort."

Brown then makes the observation that many of the early surgeons were preoccupied with agricultural pursuits and other official duties, as distinct from their professional responsibilities, often making their medical duties of secondary consideration.

### The Second Parramatta Hospital: 1792-1818

In April 1792, Phillip laid the foundations of two new buildings at Rose Hill, a town hall and a hospital. The town hall was planned to include a market place for the sale of grain, fish, poultry and livestock, clothing and any other items that the convicts might wish to buy or sell. The necessity for a new hospital however became a priority and tempered Phillip's plans for his grand square and town hall; he ordered that the hospital be completed first. Planned with two wards, one each for male and female patients, the hospital was built of locally made bricks and was finished in December 1792 when the sick were immediately removed to

it. As Phillip returned to England ill in the same month, plans for his town hall, treasury and public library contained in a great market square went back to England with him as a vision as they never materialised under succeeding administrations.

#### Location

Located a distance away from High Street behind or to the north of the first hospital, the new infirmary was about 100 meters from the river bank, 'convenient to the water', To prevent 'any improper communication with other convicts,' it was enclosed with a paling fence, with space around the hospital 'so that the sick would have every advantage of both air and exercise'. This meant that the two original hospital buildings were within the grounds of the today's hospital perimeter.

Confusion existed with earlier historians as to this location of the second hospital and should be clarified. When Watkin Tench recorded in his journal of new buildings being planned in the town, he wrote of a plan east of the Barrack Lane on High (George) Street for a blacksmith's shop, a carpenter's shop and nine covered sawpits. He also mentions the 'wretched' hospital with these improvements but its location has been misconstrued as being nearby. J.F. Campbell, noted surveyor and historian, located the barn-yard of the Government Farm on the spur on which Macquarie's Convict Barracks once occupied on the Barrack Lane between Macquarie and George Streets. Many historians have accepted the myth of the hospital being located here but there seems to be little evidence to support this site. Andrew Houison (1850-1912), one of Parramatta's earliest historians appears to have been the first to record it in 1903 and since then it has been accepted without question. Keith Macarthur Brown, possibly accepting Houison's word, even locates the first hospital to be there, 'on the present site of the Macquarie Street Home'. By this he means the Macquarie convict barracks which became later a hospital for erysipelas patients and the then a refuge for aged men, referred to as the 'Macquarie Street Home'. Perhaps the erysipelas hospital was construed to mean the second hospital.

Logically it would have been ill-conceived here and more likely to have been in the Hospital Lane as shown in the early map. Richard Rouse, giving evidence to Commissioner Bigge in 1821 as Superintendent of Government Works, refers to "patients in liquor lying about the hospital when I was building the new one". The 'new one' was Macquarie's hospital, leaving little doubt that the old hospital was in the vicinity, near the water and not in Macquarie Street.

### Description

The second built hospital at Parramatta was of brick on brick foundations, 80 feet long and 20 feet wide. It comprised a ward at each end with a cross passage between them, the entrances to which were open. The roof was a continuous

gable and thatched until it was tiled with plain hand formed tiles, which were really thin bricks as they were manufactured from the same clay and burned to the same temperature as bricks. There with windows along the walls, of small panes, in timber frames which gradually deteriorated with age. Panes of glass were often replaced with wooden squares and after a time, these could not be repaired as the timber was rotten and would not stand further repair. As the brickwork was bonded with mud mortar due to the lack of lime, it could be expected that life of the building was limited.

Outbuildings such as stores, convict staff accommodation and latrines were close by while the surgeon was provided with a separate house. Hygiene was ignored, leading to putrid smells and odours and no doubt led to further illness and disease of patients. There was no morgue nor constant stack of coffins. The responsibility for their supply was that of the Supervisor of Government Works.

Cooking was done in a separate kitchen. Surgeons reported that there was never sufficient invalid food such as tapioca and portable soup while mostly the ill were supplied with the same rations as other convicts and there were constant reports of theft. Medical supplies and blankets were constantly in short supply, either through a shortage from the medical stores at Sydney Town, or in some instances, neglect by the surgeon in charge to requisition them.

In 1803 Surgeon Balmain drew to the attention of Governor Hunter the "extreme distress of the hospital[s] for the want of medicines, necessaries, bedding, stationery and all kinds of utensils, demands for all of which ... have been pressingly made by me upwards of two years since, and none of them have yet been answered". One can understand that the home government would be tardy in providing hospital necessities for 'dumped' convicts but they were forgetful of the other members of the colony who were reliant on the hospital to cure their 'hurts and sicknesses'. At least Balmain had a new military hospital and dispensary built in Sydney.

#### The organisation

Convicts selected to assist in the hospital were those usually too old or infirm to undertake arduous duties in the normal workforce. Women convicts, for whom tasks in the colony were limited, predominated but sometimes duty at the hospital was used as a punishment for misdemeanours. Deployment of convicts in 1806 show that seven convict men filled the tasks as overseer, wards man, gardener and wood chopper while the roles as nurses were undertaken by seven convict women. No reward was given to them for this work other than their usual living allowances of food. It was Surgeon Major West who first drew to the attention of the administration of the difficulties that he had in getting the convicts to undertake their assigned work at the hospital for unlike others, they would have preferred to work for settlers and officers and gain some remuneration for their extra hours worked. Even the overseer, he claimed, the

most confidential person in the hospital, and clerk received no remuneration. Also, the nature of the staff employed led to constant theft of blankets and bedding, food, and even medical supplies, such as a case later to be exposed during the Bigge Inquiry.

During his term of office, Governor King laid down the functions of the convict hospitals specifying that they were to treat all persons of the civil department, convicts and all government employees. This included the military as well as convicts assigned to settlers. This order made no provision to receive free settlers or specify that surgeons were allowed the right to private practice for fees. This created problems as was recorded about Mileham and Savage who were both court-martialled for not attending settlers. At least, these cases resolved the problem and the administration in London allowed limited right of private practice. Unfortunately this too had its abuses.

Within fifteen years the brick walls of the building showed critical signs of deterioration to the point that the walls were in danger of falling and repairs were of little use. By 1803, Wentworth advised the Principal Surgeon of the dilapidated state of the hospital that "needed complete and speedy repairs".

In 1814 the surgeons petitioned Earl Bathurst on their dissatisfaction with their situation compared to medical officers in the army and navy. They were concerned about their terms of pay, servants, fuel, rations and pensions for their widows but in particular in the lack of an allowance for a horse. They were required to maintain one so as to be able to:

"perform the duties of the respective hospitals ... but to attend, in their own houses, the civil officers, their wives and families, and also the convicts who are distributed to the various settlers, scattered over the country at considerable distances from each other and from the quarters from the different medical officers, without any fee or compensation."

In regards to the conditions in the hospital, Samuel Marsden helped to bring matters to a head by writing to Earl Bathurst direct. He was mainly concerned about reports of debauchery in the hospital but was comprehensive in his letter, claiming:

"This hospital is open night and day for every infamous character to enter, there are no locks or bolts to any of the doors ... There is not so much room as to put dead man or woman in till they can be removed to their grave; but the dead lie in the room with the living patients ... the patients are distressed for weeks and months for the want of common necessaries ... they were frequently without sugar, rice, tea and wine, or any other support than from the King's Store, which consists of wheat and animal food which from sickness many of them could not use. I also observed that there had not been a candle or a lamp for the last two

years to see a patient die. Often when I have been called on to visit the hospital after dark, I have had to grope my way to the sick man's bed. I do not believe that there was ever such a place for want, debaucheries and for every vice as the general hospital at Parramatta."

#### The evidence of the Bigge Report

The evidence of Richard Rouse, Superintendent of Government Works, and Senior Chaplain Samuel Marsden taken from the Bigge Report gives the most factual details of the state of the second hospital. Rouse described in his answers to the Commissioner's questions that the building itself was about 80 feet long and 20 broad. It had been enclosed "a long time ago" but the enclosure had decayed. There was no outside door to the passage but there were doors to each ward, but Rouse could not recall any locks on them. When asked if men and women shared the same wards, Rouse replied that:

"I never saw them together but I always considered the hospital a place of rendezvous for men and women convicts. I have seen them romping together in the yard."

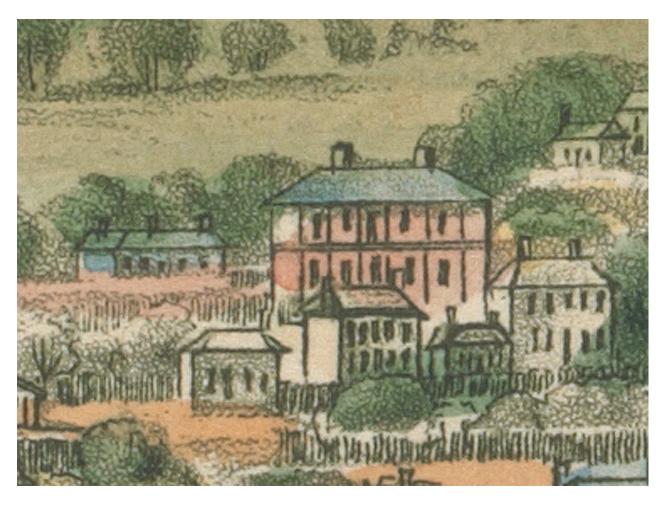
In discussing the state of repair of the hospital, Rouse described that the original windows were glazed but they had to be repeatedly repaired until he decided to replace the panes in some parts of the windows with wooden squares. There were no shutters to the windows. On the question of repairs, he declared that repairs became useless after a time (the timber was so decayed). In reply as to whether Reverend Marsden ever discussed the decayed state of the hospital and repairs with him, Rouse could not recollect this but Governor Macquarie had given him directions on various occasions. When asked if the patients were in a state of suffering and misery Rouse declared that "it was so dirty and the smell so offensive that I could hardly go in". When asked if the convicts complained, he replied that "the convicts would rather have done anything than go into the hospital, they have been carried there often against their will".

He was asked if he had seen any corpses lying in the hospital for the want of coffins to bury them, but he could not recall this. Another important question, coming from Marsden's statement, was, "did he recall patients selling their rations for spirits?" His reply was that he had seen patients lying about the hospital in liquor and I imagine that it was by the sale of their rations. When asked directly did he think that men and women used to resort to the hospital for the purposes of prostitution, he agreed stating that they got exempt from their work. The strongest and youngest of men and women were frequently (there).

It is evident from these remarks that no one seems to have criticised the surgeons of that period, particularly Luttrell, for poor organisation within the hospital. In summing up, Commissioner Bigge reported:

"The ruinous state of the old hospital and the deplorable consequences arriving from it described in the evidence of Mr Rouse, Mr Marsden and Mr West – orders given by Macquarie to Rouse for repairs were either not attended to or by him or were of little benefit on account of the decayed, rotten state of the building. Dead bodies were suffered to be in a passage that separated the male and female wards until coffins were found or prepared for them. Simple precautions of preventing intercourse between sexes appear to have been neglected – convicts of both sexes disposed by habit of licentiousness."

#### THE PARRAMATTA COLONIAL HOSPITAL



The Parramatta Colonial Hospital by Joseph Lycett, 1824. Source: State Library of Victoria

# The Macquarie Hospital, 1815

# Background

Because of the pressure on him by Marsden, Surgeon West and the Colonial Office concerning the state of repair of the old hospital, Macquarie determined it

political to replace it. Lieutenant John Watts, his ADC and honorary architect, had already designed and built a new hospital for the military on Flagstaff Hill (Observatory Hill) in Sydney, picturesquely located on the ridge to the west of the Rocks, overlooking the harbour and the Parramatta River. As Watts' first commission, the new hospital was quickly executed and was virtually completed and partially occupied in July 1815. Morton Herman writes that it was an important building for Sydney as it followed the lines of similar army buildings in tropical countries. A single storey building for the accommodation of the surgeon and his assistant was added in 1821. It was an important building for Parramatta too as it became the model for the town's new hospital.

The Sydney building remains today as the core of the National Trust of Australia (NSW) headquarters. It is now shrouded by Victorian additions added by Mortimer Lewis when the site was given over as the first National Model School in 1849. It remained a co-educational school, known as Fort Street until 1916 when the boys moved to a new school at Taverner's Hill. The girls followed in 1974 and the complex was given to the National Trust.

It was inferred that Macquarie put his own self-interest in building the Government House at Parramatta ahead of the building of a new hospital. This of course is an esoteric question in many ways but Macquarie's explanation to Commissioner Bigge for his reason:

"Parramatta, before commencing the hospital there. I therefore think it proper that you inform yourself of the state of the only Government House that I found there. That [Government House] at Parramatta was in danger of falling, and without immediate repairs and attention it could not have stood."

He also commented that he thought that a person in his position should have a house to live in that was safe and commodious.

# Location and design

John Watts drew a plan and elevation for a new building and these are still available to us where unfortunately those of the Sydney hospital are only reconstructed measured drawings. The hospital was located facing the river, to the east of the second hospital and with access to Marsden Street, which Macquarie had extended from George Street. The site was approximately where Jeffery House stands today. Governor Macquarie approved the plans on 16 April 1817 building was commenced in August and completed by September 1818. Macquarie's description of the hospital read:

"A hospital built of brick, two stories high with an upper and lower verandah all round with all the necessary out offices for the residents and occupation of 100

patients with ground for a garden and for the patients to take air and exercise in, the whole of the premises being enclosed with a high strong stockade."

Both the Sydney Military Hospital and the Parramatta Convict Hospital designs were identical and were standard barrack designs although Parramatta was to a different scale. Both were similar to the Sydney Rum Hospital that had a broad roof of about 50 feet with an almost continuous pitch extending from the ridge to the verandah columns. A shortage of appropriate timbers for large roof members gave way to two small roof structures with a central gully between. The roof of the Military Hospital at Sydney spanned 46 feet whereas at Parramatta, Watts reduced the span to 38 feet making it probably the first large building constructed in the colony with a continuously pitched hipped roof sitting on verandah posts.

Symmetrical Georgian design was all important and sometimes function became secondary, so auxiliary buildings were grouped behind the hospital. At least at Parramatta, Watt introduced separate wards for each sex and included separate staircases in the women's wards for access, to ensure privacy. Nevertheless, Commissioner Bigge was critical of the arrangements sensing promiscuity between patients, no doubt alerted by Marsden. Ground plans indicate that the outbuildings contain a dead room or morgue, an overseers room, and a kitchen. Another building also is designated as a morgue but also make provision for a room for women and a wash-house. There are privies for men and women amongst the outbuildings. Watts and Macquarie obviously made attempts to overcome the shortcomings of the previous hospitals.

Surgeon Major West, in his evidence to Commissioner Bigge, claimed that although he was the resident surgeon at Parramatta, he was not consulted by either the architect or the governor as to the design of the hospital. He claimed that with accommodation for 50 patients it was too small and indeed in the winter of 1819, he had to house 95 patients after an outbreak of a form of typhus. West attributed this outbreak to the fact that convicts were living in huts that were not watertight with only earthen floors and resulted in the occupants being exposed to continual dampness. He further claimed that no provision had been made to completely separate males from female patients in the hospital and that water closets had not been installed in the building, nor was provision made for staff accommodation within the hospital.

In 1817 Macquarie reported that the hospital was being erected by convict artificers and so it can be said that the building was truly convict built. Watts' work was overshadowed always by that of Greenway who practised during the same period. If he lacked Greenway's artistic flair in his architecture, it would be safe to record that his hospital design, like his other buildings showed good sense and a neat, competent command of design, which resulted in clear cut and unhesitant, and useful buildings. Watts' hospital at Parramatta served the town

almost until the end of the century when it was demolished to make way for a new and larger building.

#### Hospital conditions

West was apparently more aware of the benefits of good hygiene of the growing need for better hygiene in hospitals. He reported to Principal Surgeon D'Arcy Wentworth that patient's cleanliness of body and apparel on entering hospital were ill calculated for bestowing attention. His submission caused Earl Bathurst to approve in 1818 an issue to each male or female an entire change of clothing on admission to hospital. Wentworth also recommended that patients' diets should be altered to include fresh animal food [beef, pork, chicken or fish] and bread and vegetables be supplied daily by contractors.

Wentworth resigned in October 1819 and was succeeded by James Bowman as Principal Surgeon. Bowman felt that because of the rise in convict population, a dramatic re-organisation of the hospital system was due and set about implementing the hospitals in a more regular and systematic manner. He recommended the appointment of a second assistant surgeon at Parramatta without success but was able to provide a forage allowance to allow the surgeon to travel to outlying convict stations. Further, to overcome the poor supply of medicines, he initiated a supply calculated to maintain stocks for two years, thus ensuring a continuity of supply. Another successful initiative, advocated by West, and commencing in 1822, was in the payment of hospital attendants. Paid attendants included an overseer, a dispenser and a wards man and cost £39. 15. 0 annually.

The diseases prevalent during the 1820s in Parramatta included inflammation of the eyes, which led to blindness unless treated, consumption and dropsy. Responsible for half the deaths of convicts in Parramatta was dysentery. An influenza epidemic in 1820 was fatal to many infants and the elderly, in 1824 it was mumps, and in March 1828, hooping cough (sic). The latter disease affected the whole colony killing many children, including Governor Bourke's son. Dr. Anderson, who was responsible for the health of a convict stockade on the Cox's River had to deal with a severe outbreak of scurvy there which he felt was partly due to inattention to cleanliness, deficiency of clothing and a scarcity of blankets. As no means of transportation to hospital was available, seventeen convicts died. Anderson reported the matter and as a result received approval for the use of a cart to transport patients to hospital.

Governor Darling undertook many reforms in the hospital system including raising surgeon's salaries and improving conditions. He also determined that settlers pay for the hospitalisation of convicts assigned to them, which was considered an unpopular move by settlers, many of whom refused to pay and so convicts were not reassigned to them. Darling started to close the smaller convict hospitals in

the colony, a movement that gathered momentum once it was determined to cease transportation in 1840.

Dr. Patrick Hill, a compassionate medico, advised the Colonial Secretary that the hospital was faced on occasions with emergency cases, mainly from convicts who had served their sentences, but now were paupers and unable to support themselves. Hill found them suffering from ailments such as dropsy, general debility, broken limbs, old age and infirmity. Their numbers continued to grow during the 1840s and in 1844 for example, a total of 34 paupers were admitted to Parramatta Hospital. In January and February of 1845 alone there were 28 admitted. This prompted the governor to look at admissions carefully and comment that it is distinctly understood that the government hospitals are maintained for the use of convicts and not for paupers. Nevertheless, he felt that until the establishment of a hospital for paupers, supported by the contributions of the charitable, paupers would have to be admitted into the hospital, but such admissions would require written permission from the Colonial Secretary. This outlook foreshadowed the establishment of the Benevolent Asylum in Parramatta.

An alternative given to Dr. Hill was that he could admit private patients at the cost of three shillings a day but the returns for the hospital did not show any voluntary private patients being treated during 1841 at this inflated cost. In 1846, convict patients only allowed the use of the hospital unless an order was made by Local Government that was made responsible for the payment of one shilling and three pence per day for each patient. This was subsequently reduced to one shilling per day that was regarded as being the average cost to maintain a patient at the Parramatta hospital. This included the cost of food, medical care, medication and clothing which, when costed out, amounted to only nine pence a day. These figures apparently costed in the ancillary staff which now included nine male and four female attendants, an overseer and a dispenser.

# The cessation of transportation to New South Wales

With the recommendation in 1840 of the Molesworth Committee in England to cease transportation, the head of the medical service in New South Wales, Dr. Thomson, submitted his plans to the governor. He planned to close the hospital at Parramatta at the end of 1843 and treat future and existing patients at the Female Factory, a move that would save the government up to £2000 per annum. Dr. Hill resisted the planned re-organisation stating to the governor that:

"The Parramatta Hospital consists of four wards, three of which are appropriated for the reception of females and one for males. It contains fifty bedsteads the average number (of patients) daily during the years 1841 and 1842 has been above sixty and on some occasions amounting to seventy rendering it necessary to make up beds on the floor ... while ... the hospital at The Factory consists of three

small apartments capable at the utmost of containing nineteen bedsteads... and is chiefly for midwifery cases."

Dr. Hill also thought that Dr. Thomson had never visited the Female Factory and had only been to the Parramatta Hospital once, and was out of touch with the situation. Hill pointed out that there were 600 inmates at the Factory and felt that the medical arrangements there should be maintained. He raised the possibility of what would happen if a contagious disease broke out, and of course, what was going to be the fate of the male patients, the female assigned servants and the ticket of leave persons? Not wishing to oppose his Head of Department, the governor decided to leave the matter in abeyance. He must have been relieved when he was fortunately advised to remove Dr. Thomson from his current office on the grounds of neglect of duty. He was replaced from England by Dr. Dawson who saw Hill and his other doctors as highly professional and skilled in their duties. The governor reported in late 1844 that since Dawson's arrival, the Medical department had gone smoothly and well. This harmony continued until the inevitable break-up of the convict medical establishment and the subsequent closure of the Colonial Hospitals.

A Dr. William Dawson arrived in February 1848 who had been appointed as the new head of the Medical Department. In 1847, the British Government had decided to place the remainder of the serving convicts in Van Diemen's Land and the remaining doctors with them. The only exception was Dr. Hill who was to remain in New South Wales as the Inspector and Consulting Physician to the Lunatic Asylum and Gaols and other colonial medical establishments and offices at a salary of £520 per annum. The Colonial Hospital at Parramatta closed on 31 March 1848 but opened the following day as the Parramatta District Hospital. These events are related in the history of Dr. Mathew Anderson, (who was also the Warden of the Parramatta District Council) who aided by Dr. Hill successfully negotiated on behalf of the citizens of Parramatta to have the hospital ceded to them. On 15 June, 1848, this transfer was ratified by the Legislative Council. The Parramatta Hospital entered a new phase of its history as the Parramatta District Hospital.

#### THE PARRAMATTA DISTRICT HOSPITAL



<u>Parramatta District Hospital circa 1940</u>.

Source: LSP 00157

# The Macquarie Hospital: 1848 – 1897

A public meeting was held on 28 March 1848, because of the rumours that were circulating that the hospital was to be handed over to the Benevolent Society. Gilbert Eliott, the Police Magistrate presided and it was moved by James Byrnes and carried that:

"This meeting, having heard that the Colonial Hospital at Parramatta is about to be discontinued by the Government, it is resolved that a petition be presented to His Excellency the Governor [Sir Charles Fitzroy] praying for the use of the same for the inhabitants of this town and district."

At a public meeting on 6 May 1848 a favourable reply was read and the following members of the community were elected to manage the hospital – George Eliott Esq., Hannibal H. Macarthur Esq, Dr. Mathew Anderson Esq, John Blaxland Esq, George Suttor Esq., Nelson Lawson Esq. (pastoralists), Messrs. James Edrop (pastoralist), James Houison (architect and businessman), James Byrnes (flour miller and businessman), George Oakes (pastoralist), John Hamilton (flour miller), M. McKay (publican) and Solomon Phillips (storekeeper). These names were submitted to the governor and accepted. It has been commented upon that it

was hoped that the governor was not too upset over the ratio of six gentlemen to seven others. The governor on the recommendation of Police Magistrate Eliot appointed many of the same gentlemen, on the formation of the District Council. Like that committee in its first year, many of the gentlemen lost interest in the hospital and attended irregularly and as a result, were not elected during the following year. Dr. Anderson was appointed the President, James Houison Treasurer and Solomon Phillips, Secretary. A further meeting held in August 1848 appointed Nelson Lawson Esq., Nathaniel Payten (stonemason and businessman), George Oakes, George Suttor Esq. and Gilbert Eliot as Trustees and James Houison as treasurer to the trustees.

The Parramatta Benevolent Society, founded in March 1838 had as its object affording relief to the poor and distressed and therefore discouraging vagrancy and to encourage industrious habits amongst the indigent. During the 1850s, the Society used the upper floor of the hospital for the relief of female paupers. This was income for the establishing hospital but the committee from time to time resisted suggestions that the two organisations should combine. The medical staff clearly saw their objective as a hospital and not as aged care establishment.

The first committee meeting invited Drs. Hill and Robertson to superintend the hospital and they accepted. An advertisement was placed for a matron and Henry Williams and his wife were appointed as overseer and matron at £17.10 shillings per annum and their board. During 1848 a cook and general servant (John McDermot), a nurse and washerwoman (Margaret Farquhar) were appointed at £12 per annum each. A wards man (McLeavy) was paid annually at the rate of £3 4 shillings and keep but his wages were increased to ten shillings a month and an allowance of two shillings for shaving the patients.

The year 1873 saw the introduction of gas for lighting and heating when the Parramatta Gas Company began connecting mains throughout the town. For some reason, probably financial, the Committee decided against lighting the hospital but altered its decision in 1879. In December 1876, tenders were called for two bathrooms, one for each sex together with a force pump to supply water to them. New fencing was built and flower gardens were laid out. Drs. R. Bowman and Isaac Waugh joined the staff in 1874.

The vocation of nursing was a lowly paid, lowly regarded one where nurses, mostly women, had no training, little wages and were regarded as little better than general housemaids. With the advances in and complexities of medicine however, the need for skilled assistants arose who could interpret the necessity for cleanliness and orderliness and undertake the routine daily medical instructions required by the medical staff. The first training school for nurses commenced at Sydney Hospital in 1868, eight years after Florence Nightingale began training nurses at St Thomas's Hospital London. Lucy Osborn and five trained nursing sisters arrived in Sydney in March 1868 at the invitation of Premier

Sir Henry Parkes where Lucy Osborn was appointed as Superintendent. The first Nightingale trained nurse to be appointed matron at Parramatta was a Mrs Pearson who commenced duty on 1 March 1876 at a monthly salary of £6. 5. 0 and board. In 1877 she was given the authority to suspend any employee under her charge and was appointed Hospital Superintendent.

In 1880, there was a strong reminder by the medical staff to the Committee for the provision of a separate room, promised a year ago, in which to perform operations, detailing an amputation case for which they had to use the table:

"The patients dine at, which is not an agreeable sight when stains of blood are left on it and the loss of blood staining the floor and clothes is a sickening sight."

They also requested the committee to pressure the government for a place to nurse infectious and contagious persons.

### The first operating theatre 1882

Some years earlier, the committee had made overtures to the government to have the hospital land dedicated but this was not gazetted until 11 March 1881. In 1882, the committee began moves to have water reticulated from the Hunt's Creek Dam, connected to the hospital. No mention is made of the fact that that it was Dr. Mathew Anderson, their first President, who was responsible with two other Trustees, James Houison and Nathaniel Payten, for the erection of the dam in 1850-51. It had taken 30 years for the water supply to be piped to the town! In the same year, 1882, it was reported that the operating theatre was almost ready for use. In the following year, funds even allowed for an ice chest. In January 1883, Drs. Brown and Waugh retired as honorary doctors.

## A dispensary opened 1884

A separate dispensary was set-up for the first time in 1884 under the care of the matron, who was now called the superintendent and responsible for much of the administration of the hospital. On 5 March 1884 the medical officers were asked by the committee for their views on the building of a new hospital and they were in favour. Typhoid cases were increasing (64 during the year) and the need for a separate infectious area had become urgent. In 1885, with the building of Prospect Reservoir close by, it was found that many of the 271 treated for the disease were from the makeshift town nearby Prospect. This work force caused extra medical problems and the Committee asked the government in 1886 for a special grant of £500 towards dealing with the extra demands on the hospital. The grant was eventually granted but the typhoid was only slow in diminishing in numbers and was still prevalent in 1887. The government's answer to the need for an infectious diseases building was to suggest that that the hospital staff deal

with the Prospect patients at Prospect, in their own homes. In January 1889, Dr. W. S. Brown was appointed to the staff.

#### A hospital secretary appointed 1888

As extra funds became available from a bequest, it was decided in 1888 to appoint a secretary to care for the daily administration and thus allow the matron to supervise the internal management of the hospital, the nurses and other hospital staff. The year 1892 saw the gardens being refurbished and the gardener's shed renovated and refurbished for the use as an infectious diseases ward. The government made a special grant of £130 towards this end. A hospital ball raised £75 and this was used towards the provision of a dining room. Gas heating was installed in 1894 and a boiler which allowed provided running hot water. Typhoid was still prevalent in 1895.

The 1890s saw stringent economies throughout the hospital due to the financial depression of the times. In 1892 Matron Greenwood reduced the dispensary drug bill considerably and was highly praised in the Annual Report. In the 1896 Annual Report by the committee, Chairman J.A. Oakes, reported that in conjunction with Messrs. Sulman and Powers, architects, plans had been drawn up for a new hospital at an estimated cost of £4000. The Hospital Committee was hopeful in having the building opened in 1898 to celebrate the jubilee of the 1798 hospital.

During 1896 Nurse Rutter was appointed Matron and brought the profession into great respect through her managerial and medical skills. When in 1906, she was praised for the thoroughness of her work, the Board of Directors recorded that the doctors regarded her as equal in ability to a resident surgeon. Matron Rutter retired after 16 years in the position.

It is assumed that the old hospital was not removed until the Cottage Hospital, which was built in two stages, was not demolished until 1898-9 when the new hospital was completed and occupied. In August 1901 the old stables, old cottage [doctor's residence?] and the smoking shed, the remains of the 1815 hospital, were removed, ending another era.

## The Cottage Hospital: 1897-1943

On the 24 January 1896 Viscount Hampden, Governor of NSW, laid the foundation stone of the first section of the new building. Finished by December of that year, the cost was approximately £1200 and comprised two new wards and an infectious ward and was occupied in January 1897. It was necessary to maintain the 1815 hospital until the new building was completed, which required time and funding. £1500 was required to complete the hospital. The AGM reported that they hoped to complete the remaining work by 1898 and that they were hoping to receive £3000 subsidy from the government and the government

were willing to discuss the matter. In 1899 the Premier visited the hospital and promised funding, reporting in 1900 that £2000 had been placed on the estimates. On the strength of this, the Committee proceeded with the building programme.

A contract was let with A. E. Gould for £3075. 19. 3 for completion in seven months. Accordingly, the old buildings were pulled down to make room for the new and the Foundation Stone of the new block was laid. In 1902 it was announced that the new building had been complete, free of debt but that money would be required for maintenance.

#### The hospital

The red brick hospital was located to the west of the old hospital, facing the river, in a composition of three blocks built in the Federation Queen Anne Style. The central block was two-storeyed with a hipped roof of Marseilles pattern terracotta tiles, on the ridge-line were two massive chimney each with six terracotta chimney pots. The block was three bayed, louvres to the upper windows and on each side which were spaciously verandahed. The verandah columns were of timber with simple timber capitals. The front entrance was emphasised by a semi-circular arch on slightly larger verandah columns which were paired with the nearby columns. The verandahs ran down the side of the building to meet the cross corridor of the single-storeyed buildings which led to the gabled pavilions on either side. All of the buildings were connected by the verandahs that gave hospital a domestic or cottage appearance. Tall Federation chimneys in white spatterdash were located on the corridor buildings. The minutes recorded the following description:

"A hospital up-to-date in every respect... large and commodious wards (male and female surgical, male and female (medical) – an infectious ward – private wards – an excellent operating theatre – also a splendid administrative block, well-furnished throughout. The grounds and operating theatre are not yet in order and it will remain for the incoming committee to add the finishing touches, such a laying out the grounds and making a more suitable entrance."

#### New kitchen facilities 1900

While the new building was in the making, a new kitchen range with a built in boiler and a new hot water system was installed. During June 1902 the grounds between the hospital and the river were being laid out and a 1906 photograph of the front of the building shows a circular driveway and lawns.

#### Introduction of X- Ray equipment and sewerage connected 1910

During 1905 X-ray equipment was purchased and in 1910, a government grant of £532 allowed the sewerage to be connected. Electrification was installed and turned on in March 1914 and during that year, a government allocation of £1500 was made towards a new nurses quarters. During the war years several of the medical staff applied for leave to join the Army Medical Corps. By 1915, with the continued population growth of the district, the hospital beds could not cope with admissions. Whilst the government talked of a new district hospital, the Board widened verandahs and, made them into wards, permanently in-filling some of them. A new nurse's quarters was planned with a grant of £1500. 1919 saw an influenza epidemic but the hospital could only allocate ten beds for such patients, suggesting that the overflow be directed to Lidcombe State Hospital.

#### Nurse's accommodation 1923 and 1924

Brislington had been rented from the Brown family for temporary additional nurses accommodation but more accommodation was required. Plans were made in 1923 with the Public Works architect to build two-storey accommodation for 28 nurses. Designed with verandahs twelve feet wide, it included a dining room, sitting room, kitchen, toilets and bathrooms. The estimated cost was £13500 but in 1924 a quote for £9050 (final cost £9177.17.2) was accepted, a third of which the government was prepared to advance. These quarters were located to the west of the hospital.

It was clear that the hospital, only 28 years old, required enlarging and the succeeding years saw numerous alterations and additions. In 1926 a casualty room, a staff dining room and accommodation for the matron and the resident medical officers were added while there was need for a new laundry, a children's ward, domestic quarters, a waiting room for out-door patients and a laboratory, all estimated to cost about £6,000. The government reply was favourable to the request to place the amount on the estimates. In 1925 the nurses home was opened by Dr. Kearney and in 1926, £1500 was received from the Fairfield Committee towards the cost of the Children's Ward, approval for which was given by the government in early 1927, and this building became the focus of the Board's attention but had to be delayed because of coming economic events.

#### A children's ward 1934

The 1930s saw the depression years resulting in curtailing of costs, building, wages and salary cuts. Notwithstanding, requests came to the Board for a new maternity wing and additional work in the out patients department. By 1933, the building of the children's ward had begun and was completed by the end of 1934. Unfortunately it could not be opened until housing was built for the additional nurses required to staff the ward that planned for seventeen beds. This was all

accomplished by January 1935 when the children's ward was opened by the Minister of Health. By this time, on the staff, were fourteen honorary medical officers, seven honorary consulting surgeons, five honorary dental surgeons and one honorary consulting dermatologist. A new X-Ray building was complete by 1936.

## Jeffery House: 1938-1943

In 1937, the Board recommended to the Hospitals Commission that a new hospital was needed and plans were prepared. The problem was that the community would have to raise half the finance of the estimated cost of £60,000. By the end of 1938, plans were revealed to erect a four-storey building to accommodate 140 patients and it was hoped to begin as soon as the Health Commission agreed; the Board became exasperated when this approval was continually delayed.

#### Effects of World War II 1938-1945

As the war spread, many of the medical and nursing staff were drafted. The foundation stone of the new hospital was laid on 10 October 1941 by Lord Wakehurst the governor. Construction by the Public Works Department was slow because of a brick strike which paralysed supply and allowed many bricklayers engaged on the job to be absorbed into other defence projects, delays and difficulties in the delivery of sand, cement, bricks and metal due to petrol restrictions and difficulties by the contractor to maintain a working force because of call ups. The contractor was not held to fault. During 1943 Dr. J. A. H. Jeffery was appointed Senior Resident Medical Officer but was later called up for war service. The Board agreed with the Government Architect's plan to recondition the old hospital building for administrative purposes while in July, some male patients were transferred to the new building. Doctor Leslie P. H. Jeffery was appointed the first Medical Superintendent during September who announced that supplies of the new drug penicillin were now available for hospital use. The new block, as yet unnamed was officially opened by the Minister for Health, Hon. C. A. Kelly on 5 November 1943.

Jeffery House: 1944 - 1990s



<u>Parramatta Hospital, Exterior of Jeffrey House and gardens, lateral view circa 1970.</u>
Source: Community Archives Collection ACC002/040/001

Although officially opened, the new hospital block could not be used due to a lack of nursing staff and funds to furnish the wards. In January 1944, the new operating theatre was opened. By April new equipment had been received but there was a lack of staff due to ongoing call ups for war duties. At the AGM it was reported that the cost of the new building had risen to £105,000 and was not yet fully functional because of staff shortages. There were 105 beds in use and 52 waiting to be used as soon as accommodation could be found for the additional 24 nurses and 4 sisters required.

In early 1945 the Board began discussing with the Hospitals Commission the necessity for a maternity block and the Minister for Health gave assurances that a new block to house 80 to 100 beds would be built. The board now wanted a master plan prepared to incorporate a main hospital of 350 beds, a children's ward of 40 beds, a convalescent home, a maternity block of 100 beds as well as ancillary ante and post-natal units and an outpatients department. They also asked that additional land be resumed.

# Nurse's conditions and appointments, married and male nurses 1940-1953

During the war years, married nurses were welcomed to the staff because of shortages. A Mr Shaw applied for the position of male nurse in 1945, the first recorded in the hospital minutes. This was approved and it was determined that he had to pass the usual nursing examinations. In 1946, nurses' hours were reduced to 40 per week, and, by 1967, it was decided that nurses were no longer required to 'live-in'. This was of mutual benefit to the administration and to the nurses.

In 1946 Dr. Richard Phipps Waugh resigned from the staff after 41 years' service as an Honorary Medical Officer and sometime President of the Board; his father, Dr. Isaac Waugh had joined the hospital in 1874 and served until his death in 1911. Dr. R. P. Waugh died in April 1948. This record was only surpassed by the three generations of the Drs. Brown of Brislington. In 1946, approval was given by the Hospitals Commission for the Board to acquire required property for extensions. By August 1946, 114 beds were in use and because of constant interruptions to the electricity supply during 1948 (due to lack of coal caused by striking miners), the hospital was required to purchase emergency lighting plant. Following upon the resignation of Dr. L. Jeffrey as Medical Superintendent to return to private practice, Dr. Dorothy Conchae (later Lady Macarthur Onslow) was appointed in his stead. At the AGM in 1948, the Chairman, Mr Jeffrey commented that there was now sufficient staff to allow 126 beds to be used and that the Board had continued to urge the Minister to implement the promise of a new hospital but it was evident by 1949 that here was no possibility of a new hospital or another two or three years. However, negotiations were still pursued for a new maternity hospital.

## New maternity ward 1955

The new hospital planned was estimated to cost £2 million and, considering the expanded population of the district, would require some 700 beds. The Minister, despite advising that funds had been set aside to convert the top floor of the new block of Jeffery House as a maternity ward, promised a prefabricated maternity hospital and in 1954 tenders were accepted for the erection a of a new nurses home and maternity unit for £79,442. By August work was under way and the first baby was born in the unit in November 1954; the unit was officially opened by Hon. G. C. Gollan, Minister for Health and local member in November 1955. It had taken eight years to become a reality.

The Board still insisted that another 400 beds were still required. In 1955, the Commission offered £10,000 towards the cost of a new out-patients department. In November 1955 the pre-fabricated Maternity Unit was opened by the Premier,

J.J. Cahill. The unit cost £150.000 and equipment and furniture another £30000. In September 1956, Mr PH Jeffery, who had been chairman of the board for 26 years, did not seek re-election. In April 1957, the Board resolved to call the main building Jeffery House after the loyal and untiring service of P. H. Jeffery. In December, the Board had to re-open the temporary maternity services in Jeffery House due to increased demand.

It was proposed in early 1968 that the hospital seek affiliation with Sydney University that would enable the hospital to provide some degree of teaching facilities, and the University responded positively. The Secretary, now designated the Chief Executive Officer, was investigating computer systems. A public meeting was held at the Parramatta Town Hall on 1 July 1968 that passed a resolution:

"This meeting deplores the inhuman activity of the Government of NSW in the past 25 years in regard to the provision of adequate public hospital facilities for decent and proper attention to the needs of over a quarter of a million long suffering but apparently forgotten people, requests that the government honour the promises by the Minister and an immediate start be made on a new hospital on the present site."

#### The new hospital for Parramatta

Mr Jago, the Minister for Health, attended the August Board meeting and announced that:

"(1) The building of a major teaching hospital for the University of Sydney on a site of about 100 acres at Westmead. It was to be of 800-1000 beds and would cost approximately 40-50 million dollars. (2) The ultimate closing down of Sydney Hospital on its present site. (3) The ultimate closing down of Parramatta Hospital on its present site. He stated further that the work would take eight to ten years to complete."

The Board expressed their agreement and resolved that a list of certain facilities be drawn up to serve the hospital during the immediate period. The National Trust advised that they had classified Brislington; they opposed its demolition and recommended restoration, as a result the Commission granted money for urgent roof repairs and painting of £7500 by Public Works department.

With the interim period waiting for a new hospital, which was estimated to be available in 1976, action was taken in 1969 to add another storey to Jeffery House and enclose the verandahs of the old hospital. With other minor works, the estimates were £931, 000 which the Commission agreed to fund.

A swimming pool for the nurses was opened in March 1971 and this was heated in the following year. In 1972 the University of Sydney granted status as a teaching hospital to Parramatta. Stage 1 of the additional floor to Jeffery was begun, adding fifty-two beds and the 30 beds to the children's ward. Available beds now numbered 270 and the staff numbers had risen by 100 to 646. Brislington was to be fully restored in 1973 at a cost of approximately \$22,000 and it was proposed that it be converted to a kiosk. National Trust however was hoping that it may be converted for the use as a museum. In April 1975 \$400,000 was received for further work on Brislington and the City Council received \$100,000 to beautify the corner.

The Health Commission came into being as an amalgamation of the Hospital Commission and the Department of Public Health in April 1973. Parramatta fell into the Western Metropolitan Region and recognised as a health scarcity area. The Minister gave assurances that the Parramatta Hospital would not close with the opening of Westmead. It was decided in early 1976 to establish a coronary care unit which was later followed by a cardiac rehabilitation unit. A visit by Dr. G. R. Andrews, the Regional Director of Health, was made to discuss with the Board's fears of a possible closing of the hospital with Westmead's opening. A new medical library was established. By April, the construction of the Accident and Emergency Centre was completed – a portent of things to happen!

#### The Granville train disaster

On 18 January 1977, Australia's worst train disaster occurred at Granville when a carriage from an early morning train from the west struck a support of the Bold Street overhead traffic bridge. As a result, 83 people died and 34 were hospitalised at the Parramatta District Hospital. A letter was sent from the Health commission:

"Thanking the medical teams for the way in which they responded and also individual staff members for the high degree of dedication displayed. In March a letter was received from the Minister of Health the Hon Kevin Stewart who expressed very sincere and deep gratitude to all the medical and nursing staff involved with the tragic accident at Granville, especially those personnel on the site because the conditions under which they worked with such skill at grave risk to their own personal safety."

In April, the Commissioner for Personal Health Services, Dr. Andrews, addressed the Board on the future role of the Parramatta Hospital. He stressed that there would be no reduction of services to the people of Parramatta and that the hospital's role would be to complement that of Westmead's role. By November 1977, 299 beds were available. The hospital was given full accreditation by the Australian Council of Hospital Standards for three years. In October, the Medical Education Centre was opened for Sydney University students in Community Medicine were able to attend lectures. Westmead was progressing to schedule and Dr. B.J. Amos had been appointed as Chief Executive Officer.

#### WESTMEAD HOSPITAL



<u>Aerial view of Westmead Hospital with some buildings under construction.</u>
Source: Community Archives Collection ACC002/061/001

The Minister for Health, Mr Stewart announced in February 1978 that Parramatta would be fully integrated with Westmead Hospital and that the Board of Directors would comprise three from the Parramatta Board, three from Sydney University and six from the general public. It was planned to continue Parramatta as an acute general hospital for at least five years and keep all facilities operating. It was announced that the name of the integrated hospitals was to be the Parramatta Hospitals. On 4 October 1978 the last Board meeting of the Parramatta District Hospital met and was reconstituted on 6 October as the Board of Directors, the Parramatta Hospitals. At this time, the Parramatta Hospital had 314 beds available, a staff of 908 and had expended over \$112 million during the previous year.

Westmead Hospital accepted its first patient on 1 November 1978, beginning a new era in health care for the people of Western Metropolitan Sydney. On the 10 November, the Premier of NSW, Neville Wran QC, officially opened the hospital.

# The Wishing Pool, Parramatta – Centenary Square

Research & Collection Team



The Wishing Pool on the right in relation to the Centennial Fountain, 1962. Source: Parramatta City Council Cultural Collection ACC002\_032

Recently, while looking at early images of Church Street near the Parramatta Town Hall, I came across an image showing a structure I had not seen before. Long-time residents of Parramatta would be familiar with the structure, located on what was once a small park on Church Street on which the Centennial

Fountain is situated. Intrigued by what it could represent I found, on further investigation, it to be a wishing pool.

The wishing pool, dedicated to Dr. James Kearney of Parramatta, was opened in August 1935 to help raise funds for Parramatta District Hospital. The wishing pool was paid for by E. A. Box a close friend of Dr. Kearney.



<u>Dr. James Kearney</u>. Source: The Jubilee History of Parramatta

Dr. Kearney had provided Parramatta and the local hospital with many years of service. He was a household name in the area and well respected for his diagnostic skills. He arrived in Parramatta in 1891 and commenced work at the Woolpack Hotel. Shortly after he established a surgery in Phillip Street before purchasing St John's Lodge at the corner of Macquarie and Marsden Streets.

It was predominately through his 40 years of dedication to the Hospital, as a patron, board member, and senior medical officer that the hospital grew and improved. President of Parramatta District hospital at the time, Alderman P. H. Jeffery said, "that the death of Dr. Kearney was the most severe blow that could have been dealt to the institution. Practically his whole interest was centred on the hospital and he was ever aiming to improve its standard." Mr G. C. Gollan M.L.A. on unveiling the memorial said "I feel sure as you pass this spot you will be a well-wisher like Mr Box, and make a contribution in aid of the hospital..."

The plaque on the wishing pool read:

"Presented by E. A. Box Esq., to the Parramatta District Hospital and erected in memory of Dr. James Kearney, an unselfish worker for this Hospital, who practised his profession in this town for nearly 50 years, and whose qualities of heart and mind endeared him to the people."

In its first month the wishing pool yielded more than £20 for the hospital. Over time that figure declined and in 1936 the Hospital reported it had raised from the pool £32 for the financial year.

The lure of cash in a public place was just too much temptation for some people with the lock of the pool broken and money stolen on a number of occasions. In one incident two young boys were spotted removing money out of the pool by using a bicycle pump with chewing gum stuck on the end.

In March 1975 the pool was removed by Council when it closed Centenary Avenue to traffic to create Centenary Plaza. Parramatta hospital requested that the wishing pool be relocated to either Brislington House or the main entrance to Jeffery House. It was agreed that it be relocated to Brislington House.

While it is not the original pool, there now stands a wishing well at Brislington house with the original plaque dedicated to Dr. Kearney.

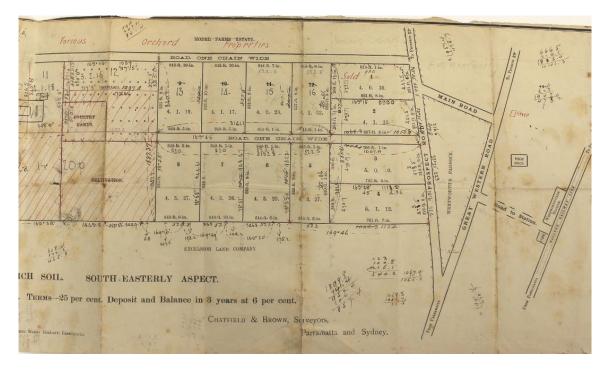


The original 1935 plaque dedicating the wishing pool to Dr Kearney. Source:

Peter Arfanis

# Papers of Edwin John Brown 1890-1932

# Research & Collection Team



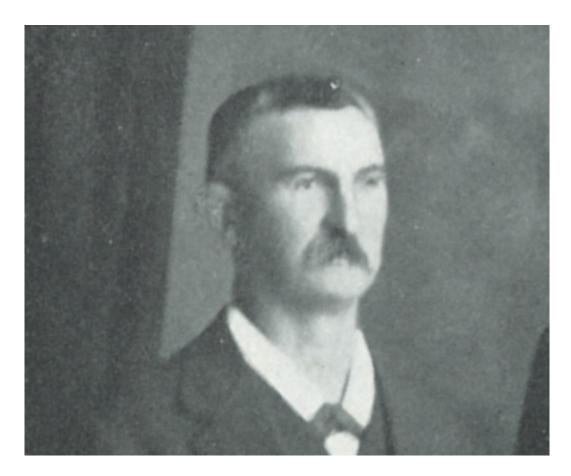
Papers of Edwin John Brown. Source: Community Archives Collection ACC108

This recently catalogued collection of papers relate predominately to the work and activities of Edwin John Brown, a licensed surveyor based in Parramatta. The papers consist of a variety of notifications, correspondence, advertisements, meeting notices, and other ephemera from societies and businesses in the Parramatta area, many associated with Brown. The reverse side of many of these papers were actually reused to write down surveying calculations and notes, most probably by Brown. Even though Brown was in partnership with Samuel Chatfield it appears that these notes may belong to Brown since most of the recycled papers used to prepare the notes relate to activities that Brown himself was associated with at a personal level. Some subdivision plans and correspondence in this collection are in the name of the firm Chatfield and Brown.

Also in this collection are a small amount of land sales posters, where another well know Parramatta local, R H Mathews, was the surveyor.

To view a list of the items in the collection, enter the following URL link:

https://historyandheritage.cityofparramatta.nsw.gov.au/sites/phh/files/wp-images/2014/06/acc108.pdf



Edwin John Brown. Source: The Jubilee History of Parramatta

# A Short Biography of E J Brown

Edwin John Brown was born in 1859 at "Brislington" house, George Street, Parramatta. He was the son of Dr. Walter Brown, highly respected Parramatta Physician and the first captain of the Parramatta Volunteer Rifles formed in 1850. Brown was educated at King's School. He showed himself to be a competent sportsman excelling in football, boxing and of course rifle shooting.

He started work at the Lands Department, serving his apprenticeship under the late Surveyor, Mr Milne, mostly in the Oberon district. He qualified as a Licensed Surveyor in 1884 but shortly after left the public service to start a private business as a surveyor. In 1885 he formed a partnership with another licensed surveyor, Samuel Chatfield, with whom he formed the well know firm Chatfield and Brown based in Sydney and Parramatta.

Samuel Chatfield himself had close ties with Parramatta, his grandfather being Captain Lamb of Parramatta. Chatfield was also on a member of the Parramatta Licensing Bench. He died in 1906.

Brown's father's love for shooting was passed onto his son who held the position of Chairman of the National Rifle Association for 24 years. His valuable service to the Rifle Association earned him an Order of the British Empire in 1929.

As well as being a licensed surveyor Brown also ran a business in Parramatta which advertised his services as property auctioneer, valuator, financial and insurance agent and arranger of mortgages. His office was located in the Hatte's Buildings, Church Street, Parramatta.

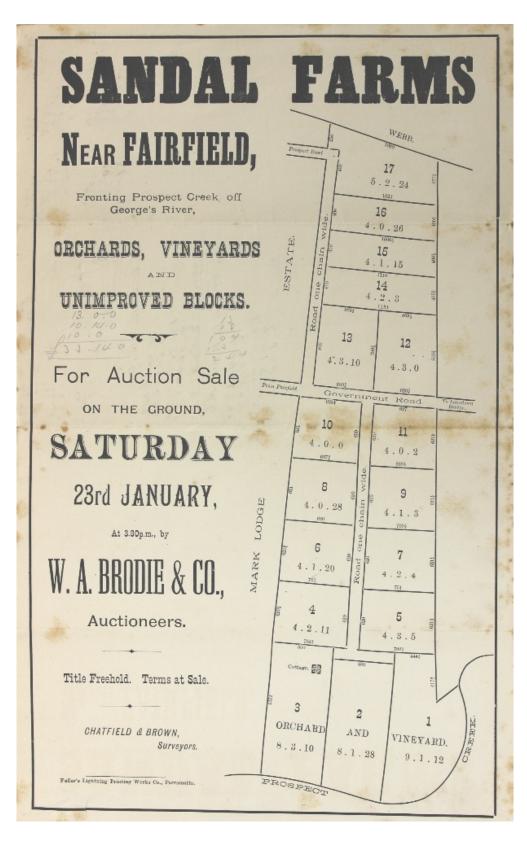
For many years Mr Brown was one of the most popular man in the Parramatta district. He was a multi-talented individual who was involved in a number of societies including the Parramatta and District Philharmonic Society and Parramatta District Liedertafel. He had a talent for singing and on occasion performed in public.

He was elected an alderman for Parramatta in February 1900 and was returned on every subsequent election until February 1928. With his expertise in surveying he played a valuable role on the Council's Building Committee. He was also Trustee of Parramatta Park for 40 years.

Mr Edwin John Brown O.B.E. died on the 28th July 1932 at his home in Granville.



Papers of Edwin John Brown. Source: Community Archives Collection ACC108



Papers of Edwin John Brown. Source: Community Archives Collection ACC108

# Gazing on green: The Trees of Parramatta

# Research & Collection Team



A spectacular tree in Parramatta Park. Source: City of Parramatta Council, 2012

Trees across the Parramatta area make our surroundings more attractive and pleasant. They provide relief from heat and glare, improve the quality of the air we breathe, and help retain precious rainwater in our soil. Trees frame our memories and identity. For the traditional custodians of this land, the Darug people, trees hold particular cultural and spiritual relevance.



Ochre-painted tree in Parramatta Park, NAIDOC Week, 2012. Source: City of Parramatta Council

Parramatta is a densely populated, urban environment. Despite this, the area is also home to a surprisingly large number of trees. The lushly-wooded UNESCO World Heritage-listed Parramatta Park sits as the glorious green centrepiece of our local government area, complemented by the many small, leafy parks and reserves nestled within our neighbourhoods. Across the Parramatta area, there are also pockets of remnant bushland that "tell of life in Parramatta on the Cumberland Plains before Colonial settlement" in 1788.

The variety of trees in Parramatta is extensive and broad, encompassing fine ancient native specimens as well as magnificent, introduced European trees. Parramatta also features significantly in the fascinating early history of Western botanical sciences in Australia.

What comes to mind when you think of trees in Parramatta? A silent, towering giant? A favourite shade tree in a local park? Perhaps a tree you planted in your own back yard? Listed below are some of our favourites:

#### Parramatta Palms

An imposing colonnade of Canary Island date palms stands in Parramatta's heritage-listed Prince Alfred Square. Lining the Square's pathways, the palms serve as navigational markers of this urban oasis, as well as lending a touch of tropical glamour to the northern entry to our city.

Another species of palm, once a common regional vegetation around the Parramatta area, is the cabbage palm tree. With glossy green leaves spanning 3 metres, and a trunk reaching a height of up to 30 metres, the colossal cabbage tree palm is one of the tallest Australian native plants. Cabbage tree palms have featured in the City of Parramatta Council Crest since it was first adopted in 1861.



The City of Parramatta Council crest design has featured cabbage tree palms since its inception in the 1860s. Source: City of Parramatta Council

#### Fabulous Figs

Following the establishment of a Colonial settlement in Parramatta in 1788, formal gardens were laid out in the grounds of many residences. The gardens usually featured introduced European species – reminders of distant homelands.

A handful of intact Colonial gardens still exist in Parramatta, in the grounds of our historic buildings. In other "remnant gardens" sometimes only a lone tree has survived, designating the location of a lost residence of historical distinction. Some of the trees surviving from the Colonial era have been granted official Heritage status.

Many of the Colonial survivors are magnificent fig trees. An aged Port Jackson fig stands, with an impressive range of other historic trees, in the grounds of Hambledon Cottage. Another enormous fig stands beside Brislington House, spreading its dense, cool shade across the corner of George and Marsden Streets. An impressive Moreton Bay fig stands a stone's throw from the Old King's School, and a huge, folded specimen proudly dominates the pavement outside Perth House at 85 George Street (it is believed this tree grew from seeds planted by a First Fleeter).

#### The Concrete Jungle

Within the frenetic urban environment of modern Parramatta, many thousands of trees co-exist on our streets and in our public spaces.

Centenary Square, in Parramatta's city centre, is framed by a handful of fine European oak trees, survivors of the Colonial era. However, the majority of trees in this space and its surrounds have been planted in much more recent times. These urban trees soften the man-made streetscapes, providing relief from the heat and glare of summer, and brightening the grey bleakness of a city winter.



<u>Specimen tree in Church Street Mall, Macquarie Street, looking towards St. John's</u>

<u>Church, circa 1980s.</u> Source: LSP 00991

#### Trees of Suburbia

Of course, the City of Parramatta local government area expands well beyond the city's central business district, and trees abound in our neighbourhoods. The tree-lined suburban streets provide a network of sheltered and shady ways of passage, navigated by local residents going about their daily lives. The many popular neighbourhood parks and reserves (including Duck River Reserve in Clyde and Oaks Reserve in Toongabbie) provide calming pockets of green for exercising and relaxation (as well as vital habitats for local wildlife).



Surprisingly green – residential area, Parramatta Local Government Area, circa 1990s.

Source: Community Archives Collection ACC002/100/01

#### **Commemorative Trees**

Due to their longevity, trees are often selected as markers of memorialisation. In Parramatta Park, an obelisk next to an oak tree commemorates the accidental death of the Governor's wife, Lady Fitzroy, when her runaway carriage struck a tree in 1847 (the current oak in the memorial enclosure, planted in 1996, is the third tree to stand there).

Meanwhile, Red Gum Walk, in Epping's picturesque Boronia Park, is dedicated to the memory of the popular and respected Parramatta Town Clerk, Alfred Kay, who passed away suddenly and unexpectedly in 1951.



<u>Lady Mary Fitzroy memorial site of carriage accident, Parramatta Park near the Tudor</u>

Gatehouse, undated, Source: LSP 01014

More happily, it is believed that the historic Bunya pines still standing in the grounds of Elizabeth Farm were planted to commemorate the birth of John and Elizabeth Macarthur's sons, more than 200 years ago.

#### The importance of trees

Trees in the Parramatta area are important and symbolic, generously enhancing our shared spaces and connecting us with the natural world. Some of Parramatta's trees are ancient survivors of long-lost landscapes. Some, such as the scarred trees in Parramatta Park, hold particular significance for Parramatta's first peoples. Other trees are recent additions, just beginning their journey as markers of space and time.

Vast numbers of trees in the Parramatta area have been removed over past generations. Initially cleared for towns and agriculture, then transacted as a commodity of the timber trade. More recently trees have given way to accommodate spreading urbanisation. Even the cabbage tree palms, once so strongly associated with the Parramatta area they were incorporated into the Council Crest, have now all but disappeared from the local environment.

However, the strong value placed on trees by City of Parramatta Council and its local residents is reflected by many proactive initiatives introduced over recent years. National Tree Day in 2018 saw more than 9,000 trees, shrubs and groundcovers planted across the Parramatta area. Every weekend, dedicated Bush Care groups volunteer their time to protect and renew our green spaces. Also, in a fitting acknowledgement of the past, a grove of cabbage tree palms features in plans for the greening of Parramatta Square, which is currently undergoing development in the heart of our city.



Trees feature in the public walkway design for Parramatta Square, 2017. Source: City of Parramatta Council

Do you have a much-loved tree in Parramatta? Let us know the details, and we may add it to our list of favourites!

# Brislington Garden Fetes and Parties

# Caroline Finlay



Brislington, North West corner of George and Marsden Streets, Parramatta, view of front and left exterior, and a group of adults and children beside the property's fence, circa 1878. Source: LSP 00616

Brislington has a long history of fetes and social gatherings being held in its garden. These events are often of a charitable nature, helping to raise funds and awareness for a significant local cause.

Dr. Walter Sigismund Brown's wife, <u>Margaret Isabella Brown</u> nee Macarthur - who was the first daughter of George Fairfowl Macarthur, headmaster of The King's School, and grand-daughter of Hannibal Hawkins Macarthur and Anna Maria King of The Vineyard - was instrumental in organising and ensuring the success of many charitable garden events at Brislington whilst she and her husband lived and worked at their Brislington family home. Many of the newspaper reports described her as the "life and soul" of these events. In 1899 it was reported that:

"Brislington was en fete on Wednesday afternoon, the occasion being a children's fair, arranged by Mrs. W. S. Brown, on the grounds, Brislington. The proceeds were in aid of the Parramatta District Hospital. Mrs. Jas. Burns, of Gowan Brae, performed the opening ceremony in the presence of a splendid gathering. Dr. W. S. Brown introduced Mrs. Burns, and then asked her to declare the fair open, which she did, taking advantage of the occasion to congratulate the young workers on the noble character of their efforts. Business then began briskly, and in the few hours that the fair remained open the sum of £13 3s was netted. Mrs. W. S. Brown, on whose shoulders the bulk of the work fell, was supported by Matron Rutter, Misses B. Todhunter, Maud Rutter, Pigott, Mary Burnell, Wilson, Waugh, and Mr. Manton. Miss Lulu Brown was in charge of the tea stall, and was assisted by Misses Waugh, Lamb, N. Pigott, and Wickham. Mister Keith Brown was in his element. He ran the lolly stall, and did a great trade. Miss Margy Brown presided over the doll's stall, and Miss Enid Lloyd supervised the dips. The afternoon was not a very enjoyable one, but once in the cool seclusion of Brislington grounds, and all discomfort disappeared. The affair was a great success from start to finish, and: it should be an incentive to other large-hearted ladies to do something for the Hospital."

The charitable spirit learnt by the children from their parents expressed itself in charitable initiatives that they took responsibility for:

"Some time ago the Brislington children were caught with the idea that they could do something for the Hospital, and so they set about getting together all sorts of knickknacks with a view to having an afternoon's sale. Miss Pigott was taken into their confidence, and invitations were sent out. In response, there was quite a large gathering at Brislington on Wednesday afternoon and the youngsters did real good business. In addition to 'dips' all sorts of games were instituted, and Master Keith Brown ran a special show in a tent, while one of the other youngsters brought the family pony into requisition, and made a charge for the privilege of having a ride on the steed. Altogether the afternoon was a really profitable one, and both young and old thoroughly enjoyed themselves. Mrs. W. S. Brown was happy to see her young family interesting themselves so in the cause of charity, but she modestly disclaimed any share of the kudos. The children ran it solely on their own, and may their shadows never grow less. The Hospital netted by the effort nearly £8."

One unfortunate disadvantage of a garden fete is that the event is subject to the vagaries of the weather. In one example of a garden fete organised by Dr. Walter Sigismund Brown and his wife Margaret, a storm broke out over the entire Parramatta district a few minutes after the event began, but everyone in attendance quickly adapted:

"However, whatever may have been the height of the morning's hopes, there was, admittedly, a good crowd of visitors; and when the rain showers began to descend, it was not easy to accommodate all under shelter, in the large tents and booths on the ground. In the largest of these, afternoon tea was served, Mrs. Brown's arrangements being carried out by a bevy of young lady helpers. A band discoursed sweet music at intervals, and Lieut. Colonel Cox, C.B., exhibited his collection of interesting Boer curios in another part of the grounds. At the main gates, members of the Lancer Regiment assisted, taking up the "entrance fees". The monetary result of the garden party should be a generous little lift to the funds of that deserving institution, the Parramatta District Hospital. Unfortunately, the rain spoilt the effect of the venture, so far as the costuming was concerned; for promenading was soon out of vogue, and cloaks and umbrellas were in requisition. In connection with the event, the help of Mr. G. T. Erby and Mr. A. E. Marsden, in the negotiation of much of the hard work (in relation to the decorations, etc.), is gratefully spoken of by Mrs. W. S. Brown. To Dr. Williamson and to Mrs. Lockwood, who worked in connection with the catering, thanks are due also; for the loan of the tents, in which the guests of the day were accommodated, during afternoon-tea period, and otherwise...The garden party on Thursday realised £10 in aid of the Parramatta Hospital."

One of the most significant and emotional events that has been celebrated in the Brislington garden was the welcoming home party for the two returning soldier sons of Dr. Walter Sigismund Brown and his wife Margaret on the Monday 10 November 1919:

"Dr. W. S. Brown's two soldier sons, Dr. Keith Brown and his brother, Captain Gordon Brown, returned home to Parramatta at midday on Monday. The grounds of 'Brislington' had been attractively decorated for the occasion. On the outside of the main portal wore emblazoned the words 'Welcome Home.' The cock-a-doodle-dooing of trains announced to those of Parramatta who knew that returning that day were the two sons of one of Parramatta's oldest and most respected families, that 'the boys' would soon be home again, and the hooting of motors in the main streets was a little later heard as Mr. L. W. Pye's car, beautifully dressed out with gay flags and military favours, swung round the Old Courthouse corner westwards to the front of the historic red brick pile at the Marsden-street corner. There was quite a large family house party awaiting the return of the two young Australian officers; and the returned men were most enthusiastically received. Mr. F. W. Todhunter's car was in the procession from the Parramatta station bearing brother Arthur as Lord High Guardian of the baggage and of the various 'train-bearers' of the 'home coming' welcome party."

<u>Keith Sigismund Macarthur Brown</u> who was born at Brislington on the 14 April 1890 became the third Brown to conduct a medical practice from Brislington after his return from the war. His father Walter Sigismund retired after having been ravaged

by a virulent and deadly influenza epidemic in 1919. Keith married Ayesha Borthwick and together they continued the long tradition of charitable and compassionate events held in the Brislington garden. In 1926 it was reported that Dr. Keith and his wife were to host a fete for the Minden Church of England Home for Boys:

"Many residents of Parramatta and district have formed themselves into an independent committee, to provide comforts for Minden Church of England Home for Boys, at Carlingford. Mrs. R. Phipps Waugh is president; Miss May Davies honorary secretary; and the Mayor Ald. W. P. Noller honorary treasurer. On October 23, a garden fete will be held at Brislington Parramatta, the residence of Dr. Keith Brown."

After the fete the newspaper *The Labor Daily* described the day in detail:

"The grounds of Brislington Parramatta, the home of Dr. and Mrs. Keith Brown, were beautifully decorated and illuminated, when the Parramatta committee for the Church of England Homes at Carlingford held a garden fete to aid the homes comfort fund. Mr. A. Bruntnell performed the opening ceremony, and Miss Lylie Brown presented Mrs. Bruntnell with a bouquet. Following were the stall-holders: Refreshments Mesdames Keith Brown, G. Cowper; W. Morley and J. Noller; cake stall Mesdames Phillip Waugh, Cedric Whiting, J. J. Miller, Edwin Brown, and Miss Dor. Miller; sweets Mesdames Hawthorn Pearce, W. Meg Harvey and H. Douglas; work stall Mrs. H. Doyle and Miss Small; fancy stall Mesdames F. Robinson, T. Franks Catt and Miss Fox; penny stall Mrs. Fairfax-Ross, Misses Barbara Ross and Hilda Cowper; ice cream Mrs. Rupert Cooke and Miss Sattler; produce Mrs. Butcher and Messrs. W. F. Noller, Garland Franks. F. Robinson Douglas and Miss Davies."

Mayor William Peter Noller who also attended the fete welcomed Mr. Bruntnell before asking him to officially declare the fete open. The Mayor then expressed his thanks by saying:

"to all who had so willingly come forward to assist and help towards the necessary replenishing and furnishing of Minden Home, and very grateful thanks to the generous public for their donations."

Mr. Bruntnell in his opening remarks thanked the mayor and described the importance of the Church of England Home for Boys and the influence it would have in their preparation as future citizens of the state.

The scale of the collaboration required to organise such a significant event and the number of distinguished guests in attendance highlights the importance of this event. It also serves as one example of many of the role of Brislington and its

garden in the preservation and conservation of the district's community health and future.

# Hospital Nursing in Parramatta

## Research & Collection Team



Staff at Parramatta District Hospital, circa 1890.

Source: LSP 00098

The concept of 'nursing' is fluid. Many Indigenous societies, including the traditional custodians of the Parramatta area, the people of the Darug Nation, do not separate out the role of the 'nurse' in their holistic approach to health. In Western societies, the term 'nurse' has been used historically to describe a range of caring occupations, including uncertified midwives and those employed to care for healthy young children.

The term 'nurse' also has a gendered history, with a feminisation of the role occurring during the nineteenth century, perhaps most potently illustrated by the declaration of pioneering British nurse Florence Nightingale that 'every woman is a nurse'. Of course, reintroduction of men to the nursing profession was well underway by the mid-twentieth century.

The specific focus of this article, drawing from the late local historian John McClymont's *Medical History in Parramatta*, is the historical context of nursing care provided in medical hospitals in Parramatta.

#### The 'Tent' Hospital 1789 – 1792



The 'Tent' Hospital at Parramatta, circa 1790s. Source: State Library of New South Wales

In November 1788, the primary settlement of Parramatta, known as 'Rose Hill' until 1792, was established upstream from Sydney Cove, under the Colonial rule of Governor Arthur Phillip. The settlement saw about 800 convicts land, many of whom were in poor health from their imprisonment in Britain prior to transportation, and their long journey to the Colony.

Within a year of settlement, a temporary 'tent' hospital, comprising of two long sheds with an overarching thatched roof had been constructed. The hospital was built primarily to treat outbreaks of dysentery among convicts (members of the military who fell ill were treated in their barracks).

The 'tent' hospital was a roughly-built structure, 80 feet long and 20 feet wide, capable of accommodating two hundred patients. The hospital's 'tent' structure was probably gradually replaced with timber walls and a thatched roof.

Conditions in the 'tent' hospital were desperate, and hygiene standards were almost non-existent. Indeed, Captain Watkin Tench recorded in mid-November, 1790:

"A most wretched hospital, totally destitute of every conveniency. Lucky for the gentleman who superintends this hospital, and still more lucky for those who are doomed in case of sickness to enter it, the air at Rose Hill has been generally healthy."

It was on this site that the story of hospital nursing began in the new colony with the doctor in charge, Surgeon Arndell, being assigned convicts to nurse the sick. At this early stage, male attendants supervised male patients, and female attendants supervised female patients.

### The Second Parramatta Hospital 1792-1818



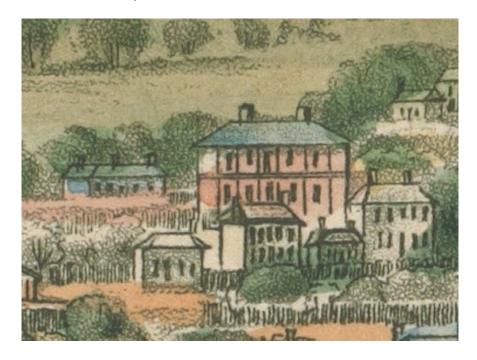
Government Farm at Rose Hill, view from road looking towards the building, circa.
1790s. Source: LSP 00050

By 1792, it was apparent that the conditions in the 'tent' hospital were so dire that a new hospital structure was required and in the April of that year Governor Phillip laid the foundations for a new hospital. Comprising two wards, one each for male and female patients, the hospital was 80 feet long and 20 feet wide, built of locally made bricks. In December 1792 patients from the 'tent' hospital were transferred into the new building.

Located to the north of the first hospital, the new infirmary was about 100 meters from the Parramatta River Bank, "convenient to the water". To prevent "any improper communication with other convicts" it was enclosed with a paling fence, with space around the hospital "so that the sick would have every advantage of both air and exercise".

Convicts selected to assist in the hospital were usually those too old or infirm to undertake arduous duties in the normal workforce. Deployment of convicts in 1806 show that the roles of nurses were undertaken by seven convict women. No reward was given to them for this work other than their usual living allowances of food.

### Parramatta Colonial Hospital, 1818 – 1848



The Parramatta Colonial Hospital, by Joseph Lycett, 1824. Source: State Library of Victoria

Less than twenty years after its construction, the second Parramatta Hospital was in a very poor state of repair and Governor Macquarie came under pressure to provide more appropriate medical services. Macquarie commissioned a new Colonial Hospital, which was completed by September 1818. The hospital was located facing Parramatta River, to the east of the second hospital.

Governor Macquarie's own written description of the hospital reads:

"A hospital built of brick, two stories high with an upper and lower verandah all round with all the necessary out offices for the residents and occupation of 100 patients with ground for a garden and for the patients to take air and exercise in, the whole of the premises being enclosed with a high strong stockade."

The Colonial Hospital consisted of four wards, three of which were for female patients, and one for males. It contained fifty beds, although it was recorded the average number of patients during the years 1841 and 1842 was between sixty and seventy, making necessary to make up beds on the floor.

Convicts continued to be selected to provide nursing care at the hospital. 'Midwifery cases' were at this time cared for at the hospital within the Female Factory in North Parramatta.

### The Macquarie Hospital, 1848 – 1897



Staff at Parramatta District Hospital, circa 1890. Source: LSP 00098

When the transportation of convicts to the Colony ceased in 1848, the hospital transferred from Colonial administration to management by a local committee. The first committee meeting appointed two well-known local doctors to superintend the hospital. An advertisement lead to the successful placement of a hospital matron, who undertook administrative, rather than patient care duties. During 1848 a cook, a wardsman, and a nurse and washerwoman were appointed.

In the 1860s, the Macquarie Hospital was described as having comfortable, cool rooms, with high ceilings. A library of books for was available for patients to browse, and games of draughts were played with the patients by the master of the hospital.

At this time, the vocation of nursing was poorly paid and low status. Nurses, regarded as little more than general housemaids, underwent no formal training. With the advances in medicine however, the need arose for skilled assistants who could interpret the necessity for cleanliness and orderliness and undertake the routine daily medical instructions required by medical staff.

The first training school for nurses in Australia commenced at Sydney Hospital in 1868, eight years after Florence Nightingale began her renowned training of nurses at St Thomas's Hospital, London. The first Nightingale-trained nurse to be appointed Matron at Parramatta was a Mrs Pearson, who commenced duty on 1 March 1876. In 1877, Matron was given the authority to suspend any employee under her charge and manage the administration of the hospital.

With the health needs of Parramatta continuing to increase, in 1882 a new twostorey wing was added to the Macquarie Hospital, and in 1884 a separate pharmaceutical dispensary was established under the care of the matron.

In 1888, when extra funds became available for the hospital following a bequest, it was decided to appoint a secretary to care for the daily administration and thus allow the matron to focus on supervising management of the nurses and other hospital staff.

By 1891, the hospital had two wards for male patients, one ward for female patients, a private ward and nurses' quarters. However, the financial downturn during the 1890s saw stringent economies throughout the hospital due to the financial depression of the times. In 1892 Matron Greenwood is recorded as having reduced the dispensary drug bill considerably, and she was highly praised in that year's hospital Annual Report.

In 1896, Nurse Rutter was appointed Matron and brought the profession into great respect through her managerial and medical skills. When in 1906, she was praised for the thoroughness of her work, the Board of Directors recorded that the doctors regarded her as equal in ability to a resident surgeon. Matron Rutter retired in 1912, after 16 years in the position.

### Parramatta District Hospital 1897-1943



Parramatta District Hospital, circa 1940s. Source: LSP 00157

Medical care needs in the Parramatta area continued to grow and on 24 January 1896 Viscount Hampden, Governor of NSW, laid the foundation stone of the first section of the new Parramatta District Hospital building. This section was completed by the December of that year at a cost approximately £1,200, and comprised of two large medical wards and an infectious isolation ward. Patients

were transferred from the old Macquarie Hospital to the new building in January 1897.

The second section of Parramatta District Hospital was completed in 1898-9 and it is assumed that at this time the old hospital was demolished. In August 1901 the final remains of the 1818 hospital, the old stables, doctors' residence and smoking shed were removed, bringing to an end the long era of the Macquarie Hospital.

The Parramatta District Hospital building was located to the west of the old hospital, also facing Parramatta River, in a composition of three blocks built in the Federation Queen Anne Style. The central block was two storeys, with a hipped roof of Marseilles pattern terracotta tiles, and on the ridge-line were two massive chimneys, each with six terracotta chimney pots. The block was three-bayed, with louvres to the upper windows and on each side there were spacious verandahs. A contemporary description reads:

"A hospital up-to-date in every respect... large and commodious wards... male and female surgical, male and female (medical) – an infectious ward – private wards – an excellent operating theatre – also a splendid administrative block, well-furnished throughout."

From as early as 1910, there were plans for the construction of additional living quarters for the nurses at Parramatta District Hospital. Nearby Brislington House had been rented from the Brown family for nurses' accommodation, but over time this provision became increasingly insufficient. Plans were made in 1923 with the Public Works architect to build two storeyed accommodation for 28 nurses, located to the west of the hospital. Designed with verandahs twelve feet wide, it included a dining room, sitting room, kitchen, toilets and bathrooms, in 1925 the nurses' accommodation was finally opened.

Over coming years, Parramatta District Hospital required enlarging and the succeeding years saw numerous alterations and additions. In 1926 a casualty room, a staff dining room and accommodation for the matron and the resident medical officers were added. The 1930s saw the depression years resulting in the curtailing of costs with building, wages and salary cuts.

### Jeffery House 1943-1990s



<u>Parramatta Hospital, Exterior of Jeffrey House and gardens, lateral view.</u> Source: Community Archives Collection ACC002/040/011

A multi-storey building, in the 'modern' style, to accommodate increasing health service's needs, was opened on the Parramatta District Hospital site in 1943.

By 1945 the Parramatta District Hospital Board began discussing with the Hospitals Commission the necessity for improved maternity services. Consideration was given initially to the conversion of the top floor of the new building into a dedicated maternity ward. However, it was finally agreed that a separate prefabricated maternity hospital wing would be constructed, which was eventually opened by opened in November 1955.

In September 1956, Mr P.H. Jeffery, who had been chairman of the Parramatta District Hospital Board for 26 years, did not seek re-election. In April 1957, the Board resolved to call the main building Jeffery House in honour of his loyal and untiring service.

Complementing the modernised buildings of the hospital, this period also saw significant changes to the conditions for nurses at the Parramatta District Hospital. The employment of married nurses, which had been introduced during the Second World War due to staff shortages, was continued. In addition, male nurses began to be employed, with Board minutes of 1945 recording the successful application for employment as a nurse of a Mr Shaw. In 1946, nurse's hours were reduced to 40 per week, and, by 1967, it was decided that nurses were no longer required to 'live-in'.

### The Parramatta Hospitals 1978 – 1990s



<u>Aerial view of Westmead Hospital with some buildings under construction</u>. Source: Community Archives Collection ACC002/061/001

The increasingly complex health care needs of the growing Western Suburbs of Sydney led to the announcement in the early-1970s that a state-of-the-art teaching hospital would be constructed in the Parramatta local government area suburb of Westmead. The Westmead Centre accepted its first patient on 1 November 1978, and was officially opened on 10 November, by the Premier of New South Wales.

In February 1978, it was announced that Parramatta District Hospital would be fully integrated with the Westmead Centre, and the Board of Directors would comprise three from the Parramatta Board, three from Sydney University and six from the general public. By the end of 1978, all acute health services had been relocated to the Westmead Centre, and the old Parramatta District Hospital building began accommodating rehabilitation services.

### Westmead Hospital 1990s onwards



Westmead Hospital, circa late 1990s. Source: Community Archives Collection

In 1991, all health services were moved out of the old Parramatta District Hospital building. In 1995 the building was decommissioned and redeveloped into the Parramatta Justice Precinct. The Parramatta Community Health Centre, located in Jeffery House, still operates on part of the original site.

In 2016, a major \$1.1 billion upgrade of Westmead Hospital was announced. The Westmead Redevelopment Project, now nearing completion, will transform the precinct into an innovative, contemporary and integrated centre which will continue to deliver high quality healthcare for decades to come.

Nurses and midwives at Westmead Hospital continue to provide world-class professional health care services for the people of Parramatta, and the wider Western Sydney community.

#### The Nurses of Parramatta



Nurses on duty in Westmead Hospital's Emergency Department circa 2019. Source: wsldh.nsw.gov.au

The nursing profession traces a fascinating history through the medical hospitals of Parramatta. From the unnamed men and women who worked in the dismal conditions of the first 'tent' hospital, and the untrained midwives delivering babies at the Female Factory, through to the professional nurses and midwives of today, providing specialist care in increasingly complex medical settings.

The International Year of the Nurse and Midwife celebrated in 2020, a year that saw the most significant public health event for more than one hundred years in the COVID-19 virus pandemic, is an appropriate time to reflect on the fascinating history and significant contributions of nurses in hospitals within the Parramatta local government area, and beyond.

## Brislington: Building and Modifications

### Neera Sahni



Brislington Medical and Nursing Museum. Source: Neera Sahni

Brislington Medical and Nursing Museum is the oldest and rare existing dwelling house in the inner City of Parramatta. It has been associated with the medical profession since 1851 having been a doctor's residence and practice and associations with the Parramatta District Hospital. It is located in a gracious Georgian building on the corner of George and Marsden Streets in Parramatta and since 1990s has been a Medical and Nursing Museum for the former Parramatta Hospital.

The building was constructed in 1821 for ex-convict John Hodges as a condition of his application to Governor Macquarie for a Liquor License. To build the Brislington, he used money won in a card game at the nearby Woolpack Inn. To commemorate his win of 1000 pounds in gold with the eight of diamonds card, Hodges had the convict workers incorporate the diamond pattern into the rear wall in darker brick.

Building and Modifications of Brislington:

**1820**: Construction of the two-storey house is commenced.

**1821:** The house is completed.

**1857:** The Port Jackson fig tree (Ficus rubiginosa) which predates 1857, still growing in the remnant front garden is probably the oldest tree on the Parramatta Hospital site. Its geographic location relates directly to the formal symmetry of the house's façade.

**c.1910:** Ground floor verandahs added, with stumpy brick <u>pier</u> posts, twin timber posts, heavy timber <u>brackets</u>, and gabled entrance <u>bay</u>.

**c.1910:** Two storey eastern bay is another addition. Some internal alterations made.

**c.1930:** Front verandah added to (southern elevation) house, facing George Street.

**1949:** Resumed by Parramatta District Hospital for health-related uses and nursing home.

**1970s:** Redevelopment of the adjacent Parramatta District Hospital with a new Accident & Emergency wing directly north of Hambledon, three stories tall.

**1982:** Restoration by Parramatta Hospitals, Parramatta City Council and NSW Heritage Council involved demolition of two rear wings (one two storey to the east, one storey to the west) on the recommendation of National Trust.

1983 - : Brislington Medical and Nursing Museum

Brislington was listed on the New South Wales State Heritage Register on 2 April 1999 - The place is important in demonstrating the course, or pattern, of cultural and natural history in New South Wales.

The association of the building and site with notable people like John Hodges, an early *character* of New South Wales, Brown family, from whom the name *Brislington* is derived and who occupied the home as a residence for over ninety years.

The building retains elements of its original fabric including sash windows, doors, fanlight, elements of the stair, cellar details and chimneys. The date of the building makes the bricks and flagstones extremely rare especially in an in-situ domestic urban setting.

# The Brislington Brides

## Caroline Finlay



Sigismunda Brown. Source: Medical Practice in Old Parramatta

A number of women related to the Brown family who had a close association to Brislington at the time of their marriage were affectionately called the "Brislington Brides".

Their marriages reinforced the central role Brislington played in the social life of Parramatta for successive generations by uniting famous families with the history of Brislington and Parramatta.

The first of the Brislington Brides was Miss Sigismunda Brown who married Dr. Walter Brown in 1858, marking the beginning of the history of the Brown family and Brislington. Sigismunda, who was an excellent horsewoman travelled on horseback with Walter for 150 miles from Colstoun Upper Paterson where they had married, to Brislington Parramatta to begin their married lives together. Together she and Walter had nine children. Sigismunda, the daughter of John Brown and Charlotte Dowling, was born 9 March 1837 in Denmark and is buried at St John's Cemetery Parramatta. A stained glass window in the Church of St John, Parramatta reads: "Blessed are the pure in heart" in memory of Sigismunda of "Brislington".

The second of the Brislington Brides was Mrs Mildred Lloyd, the eldest daughter of Dr. Walter Brown, who married Charles J. Lloyd in 1886.

#### The Cumberland Mercury reported:

"A fashionable marriage was consummated in St. John's Church on Thursday afternoon, when the nuptials of Mr. Charles J. Lloyd, C.P.S. at Tamut, and Miss Mildred Brown; eldest daughter of Dr. Brown, of Brislington, Parramatta, were celebrated. The ceremony was performed by the Rev. Canon Gunther, assisted by the Rev. G.JF. Macarthur, in the presence of a large assemblage of relatives, friends, and sightseers. Some exquisitely made, and sweet-smelling bouquets decked many of the pews of the edifice, and lent a pretty effect. The service was prefaced by "The Angel's Chorus" played by Mr. A. Massey, organist of St. John's, the service proper being commenced by the singing of a wedding hymn. The service began at 3.30, Dr. and Mrs. Brown and members of their family being assembled in the chancel, and Mr. T. L. Docker, manager of the Commercial Bank at Granville, acting as best man. The bride was plainly attired in a dress of brown satin, trimmed with the new golden brown; a bonnet to match having trimmings of the same material. There were two petite bridesmaids, Misses Lula and Lila Brown, youngest sisters of the bride, and they were prettily dressed in cream, trimmed with old gold, having in their hands tiny baskets filled with radiant flowers. The choir sang the chant proper to the occasion, and the service being completed Mr. Massey pealed out the strains of the joyous "Wedding March" as the happy couple proceeded down the aisle, amidst the smiles and congratulations of a host of friends. The wedding breakfast took place at Dr. Brown's residence, the grounds of which were gaily decorated with bunting. Mr. and Mrs. Lloyd left by train the same evening on their honeymoon tour."

Mildred and Charles had three children: John E.F. Lloyd manager of the Parramatta Branch of the Commercial Banking Company of Sydney in the 1940s; Walter B. Lloyd and Enid Lloyd.

Miss Edith Brown, the third daughter of Dr. Walter Brown, became the third Brislington bride when she married Mr. Harrington Burrough Cowper at St. John's Church on the Wednesday 10 June 1891. There were seven bridesmaids and the ceremony was performed by the Dean of Sydney, grandfather of the bridegroom. The church was decorated with a horseshoe of white camellias and blush roses were suspended from the arch where the ceremony took place. The bride was given away by her father. After the wedding service the guests were entertained at Brislington. Edith and Harrington had six children together. Two of their children Arthur Macquarie and William saw active service in World War One.

On the 10 February 1917 Margaret Macarthur Brown, the daughter of Walter Sigismund Brown and Margaret Isabella Brown married Keith Brougham Docker at St John's Church. The marriage was a very quiet one as Margaret's mother had just died a few weeks' earlier on the 21 January 1917. It was the dying wish of her mother that the wedding proceed as planned. The bride was given away by her father. Margaret and Keith had three daughters: Ruth Brougham Docker, June Margaret and Patricia Macarthur.

On the 20 December 1919 *The Cumberland Argus and Fruitgrowers Advocate* reported on Miss Ruth Macarthur Brown of Brislington, the second daughter of Dr. Sigismund Brown, marrying Mr Frederick Wharton of North Queensland, who had just recently returned from 4 1/2 years' active service. They were married on a Wednesday evening on the 17 December at St John's Church:

"The bride, who was given away by her father, wore a beautiful bridal gown of ivory satin, the court train and draping held in place with sprays of orange blossom...Four bridesmaids were in attendance, Miss Isabel Brown (bride's sister), Miss Millicent Wharton (bridegroom's sister), Miss Grace Sheppard (bride's cousin), and Miss Vera Sacklier...After the ceremony a reception was held at Brislington. Mrs Keith Docker (bride's sister), as hostess received the guests. The reception rooms were beautifully arranged with choicest flowers, in shades of pink, and the electric lights with rose coloured shades. The wedding supper was served in a large marquee on the croquet lawn, where Leabeater's orchestra played all the evening. The supper tables were decorated with mauve and pink flowers...The usual toasts were honoured, speeches being made by the Rev. S.M. Johnstone, who proposed the health of the bride and bridegroom; followed by speeches from the bridegroom, Mr J.D. Ritchie, who proposed the toasts of the "Bride and Bridegroom's Parents", to which Dr. Brown and Mr. Wharton replied. A display of beautiful wedding presents was made in one of the reception rooms."



Miss Lylie Macarthur-Brown. Source: The Sun

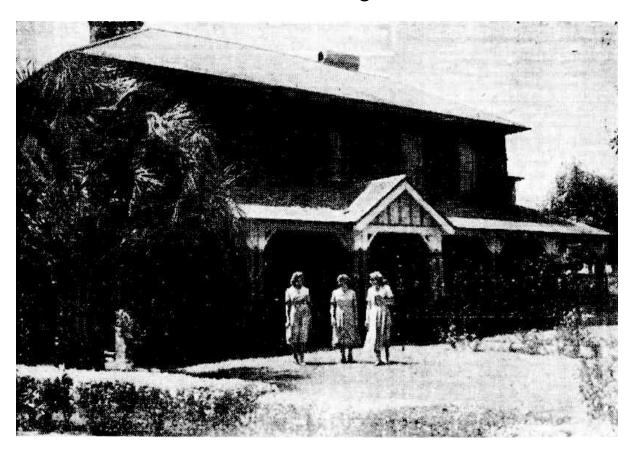
The last of the Brislington Brides was Miss Lylie Margaret MacArthur Brown, daughter of Mr and Mrs Keith Macarthur Brown and great-grand-daughter of Dr. Walter Brown and Sigismunda Brown, who married Mr Bruce Wauch at St John's Church Parramatta on the April 9 1947. *The Cumberland Argus* reported that Lylie's hand-made veil was made of point lace and her wedding gown was made of exquisitely woven Limerick lace, which was lent by her cousin whose great-great aunt wore it at her wedding 100 years earlier.

The reception with 180 guests was held at Brislington.

Together Lylie and Bruce had one daughter named Susan, who unfortunately died in her childhood.

# Nurses Quarters, 1949 to early 1970s

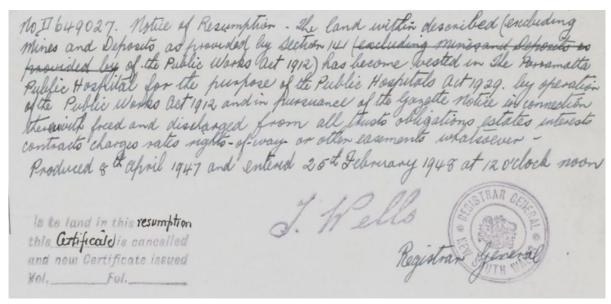
## Anne Tsang



Brislington as the Parramatta District Hospital Nurses' quarters. Source: Smith's Weekly, 4 March 1950, page 16

In 1949, Dr. Keith Sigismund Macarthur Brown vacated Brislington House ending a 92 year family legacy of using the two story Georgian cottage as the Brown family residence and medical practice.

The land had been resumed in 1947 by the Parramatta District Hospital (PDH) for the purpose of the Public Hospital Act 1929 and Public Works Act 1912 to expand the premises of the hospital.



NSW Certificate of Land Title for Walter Sigismund Brown of Parramatta, Volume 3905 folio 45. Source: NSW Land Register Services, Historical Land Record Viewer

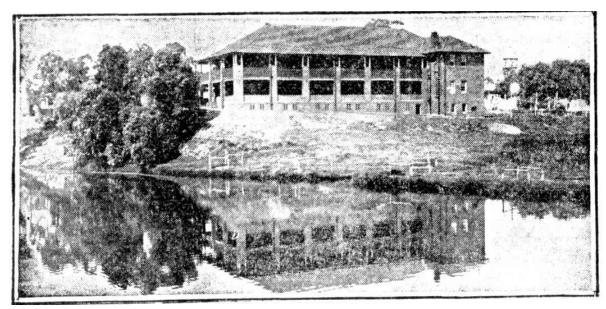
In the year to follow, the building would be used as the Nurses Quarters (also known as the Nurses' Home) until the early 1970s when white ants and borers create major damage which led to the historical house almost being demolished.

### **Previous Nursing accommodation**

Nursing grievances led to Brislington being used during World War One as a temporary nurses' accommodation. This was at a time when discussions commenced by the Parramatta District Hospital Board regarding the construction of a more permanent nurses' home. The Government paid the rent of 35 shillings per week from September 1915 for the nurses who stayed there with the Brown family (equivalent of \$183 AUD in 2020). In October 1920, however, Dr. Brown ended this arrangement, stipulating that he needed Brislington by the end of that year.

No purpose-built nurses' accommodation had even been settled, let alone constructed until 1923. Plans were made by the Public Works Architect for a two storey accommodation for 28 nurses. Designed with verandahs 12 feet wide, it included a dining room, sitting room, kitchen, toilets, and bathrooms. The estimated cost was initially £13,500 but in 1924 a quote for £9,050 (final cost £9,177.17.2) was accepted, a third of which the government was prepared to advance. These quarters were located to the west of the hospital.

### Kearney House 1925-1949



The new nurses' home at the Parramatta District Hospital. It was opened during the week. Source: Sunday Times, 29 March 1925, p. 12

On the afternoon of Wednesday 25 March 1925, Kearney House was officially opened in front of a large crowd as the new nurses' home by <u>Dr. James Kearney</u>. The new building was named after Dr. Kearney, then Parramatta District Hospital president and cost £11,000.

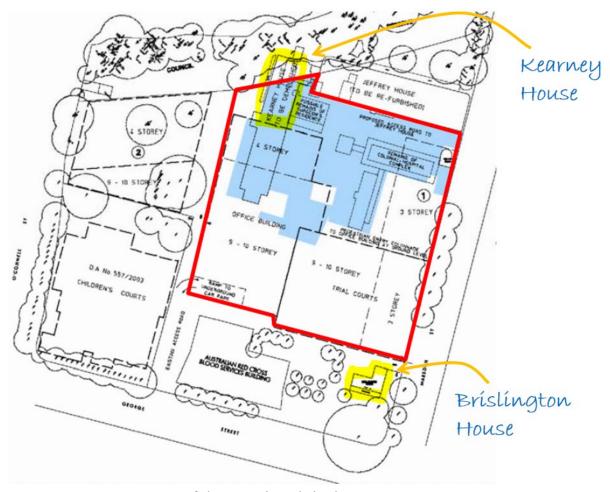
#### Dr. James Kearney



Dr. James Kearney (1868-1934) was born at Ballymoon, County Carlow, Ireland, graduated at Trinity College and the Royal College of Surgeons in Dublin. In 1889, he migrated to Australia and eventually settled in Parramatta, where he quickly established a medical practice in Macquarie-street. He was associated with many charitable organisations; a member of the Parramatta District Hospital Board of management, and was president for several terms. At the time of his death he was senior medical officer and patron of the board of the hospital. He was deeply interested in the work and welfare of the Convent of Mercy, Parramatta,

Westmead Boys' Home, and St. Gabriel's School for Deaf and Dumb Boys, Castle Hill. One of his brothers was the late Dr. Gerald Kearney, of Western Australia, and another was Reverend Father John Kearney of Ireland. He was survived by his wife Mrs Kearney.

Kearney House was described as a "magnificent home", "two-storey structure standing on the western side of the main building, and consists of thirty bedrooms, nurses' sitting-room, sewing-room, writing-room, and vestibule. Also kitchen, bathroom, laundry, etc.".



Location of the now demolished Kearney House.

Source: Casey & Lowe, 2005, courtesy of Ross Gunthorpe, Commerce

# HONORING OUR NURSES

## MAGNIFICENT HOME OPENED AT PARRAMATTA

### BUILDING COSTS £11,000-BUT IS ALREADY PAID FOR-"THE FINEST WOMEN IN THE LAND," SAYS PRESIDENT-FETE REALISES £500

IN THE PRESENCE OF A VAST GATHERING OF CITIZENS, DR. J. KEARNEY, PRESIDENT OF PARRAMATTA DISTRICT HOSPITAL, OFFICIALLY OPENED A MAGNIFICENT BUILDING, ERECTED AS A NURSES' HOME, IN THE HOSPITAL GROUNDS ON WEDNESDAY AFTERNOON. THE BUILDING IS AN ORNAMENT TO THE TOWN, AND WORTHY OF THE OBJECT FOR WHICH IT IS INTENDED.

Prompted by the sentiment conveyed in those lines of Scott, a thousand residents of the district paid tribute to the noble work of the hospital on Wednesday.

Representatives of every corner fore-gathered, and among the assemblage were many who had special reason to acknowledge the splendid efforts of the nursing

All had come to join in the ceremony of opening the nurses' new quarters.

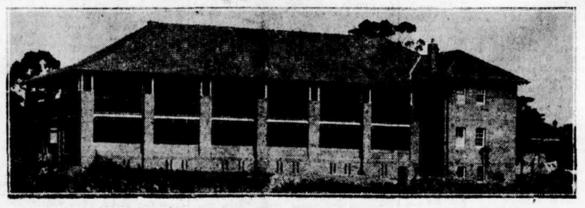
The afternoon was made one of gaiety. and with flags fluttering and bands play-

The plans, which were drawn in the Government Architect's office, reflect the greatest credit upon those responsible for their preparation, and in the carrying out of the work, the contractors, Messrs, Jeffrey and Bartlett, have given something nore than satisfaction. The contract price was a little more than £10,000, but the installation of a water service and other extras have increased the total cost to approximately f11,000

But there is no need to worry over the money. It is already paid.

"When pain and anguish wring the brow, and vestibule. Also kitchen, bathrooms, be paid the committee was one which A ministering angel thou." | laundry, etc. | came from Mr. Donald, secretary of Sydney Hospital. When shown over the home with its fine accommodation, he remarked: "I hope the day will come when we are able to erect something similar for the nurses connected with our hospital. is really wonderful."

> Associated with the president at the opening ceremony on the main verandah were the following officers of the institu--Dr. W. S. Brown, Dr. R. Waugh, Dr. E. C. Hall, Dr. Keith Whit-ing, Dr. T. A. Daly, Monsignor O'Gorman, Messrs, G. T. Erby, R. J. Sherlock, L. W.



#### THE NEW NURSES' HOME.

ing lively airs the scene was invested with the carnival spirit.

And so it was intended, for was not a fete being held in aid of the institution.

A committee of ladies had established stalls nearby, and judging by the animated aspect of each, a splendid business was being carried on. In addition, a popular alderman with assistants manipulated a chocolate wheel to some purpose, and few Were permitted to escape the net.

As a result of the effort, a sum of £500

will go to swell the institution's finances.

After the Nurses' Home had been duly declared open, it was inspected by nearly the whole of the visitors, and words of praise were freely showered upon those responsible for its construction.

It is a two-storey structure standing on the western side of the main building, and consists of thirty bedrooms, nurses' sitting-room, sewing-room, writing-room,

Dr. Kearney conte aurprised his hearers when he made the announcement, and it is unnecessary to say that the statement was warmly applauded.

If all Parramatta were inspected, a prettier spot for the building could not be selected. Standing on an eminence, it selected. Standing on an overlooks a scene equal to anything por-trayed by the artist's brush. Almost beneath the balcony is the beautiful fresh water portion of the river, with its drooping willows and carpets of green, while on the northern side are the well-kept grounds of the King's School.

Each bedroom opens on to a wide verandah, and for those who prefer sleeping out there is ample opportunity. and ventilation have been specially studied, and, in the opinion of those competent to express judgment, it is the best nurses' home in the State.

Perhaps the best compliment that could

Fye, J. H. Graham, J. H. Davies, T. P. C. Burstall, F. C. Dunn, J. McRitchie, P. H. Jeffrey (hon. treas.), and J. A. Manton (hon. sec.), P. Morgan (trustee), Also present were Mr. E. K. Bowden, M.H.R., and the Mayor of Parramatta Alderman W.

Noller,
Apologies were received from Hon, Albert Bruntnell (who was present earlier in the day, but had to leave to attend Parliament), Rev. S. M. Johnstone, Mr. H. B. Cowper, Dr. Crowe, and others.

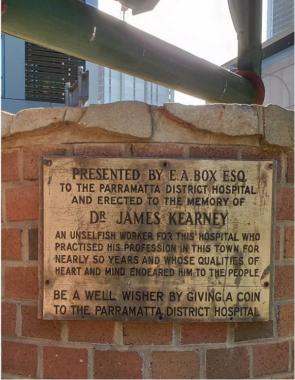
Dr. Kearney said that a honour had devolved upon him in being privileged to officially open the splendid building, which had been erected as a nurses' home. In carrying their project to completion, the committee had had a most strenuous struggle, and only those associated in it could realise the difficul-

CONTINUED ON PAGE 2.

Honoring our nurses. Source: The Cumberland Argus and Fruitgrowers Advocate, 27 March 1925

However, by 1949, Kearney House was considered inadequate. It was later demolished. In memory of Dr. James Kearney's medical service to the Parramatta community for nearly 50 years, a <u>wishing well</u> was erected near Brislington House on 7 February 1935.





### **Brislington House**

Foreseeing the need for more land to expand and grow, the Hospital Board in 1947, enacted a notice of the resumption of land under the Public Hospital Act 1912 to resume the whole property of Brislington and its neighbouring houses for its use. The Brown family who had been there since 1852.

After 92 years at Brislington, the last Dr. Brown moved to new medical practices in Hunter Street in 1949 and was working there until he passed away in 1962.

Plans were considered for the demolition of Brislington to make way for new accommodation for its nurses. Luckily, due to funding issues and eventual plans to make Brislington heritage listed, demolition was scrapped.

Brislington officially became the nurses' quarters in 1951. 22 nurses were reported to have stayed in residence there on the upper floor.

At the time, the matron of the hospital was Matron Edith White who was appointed to the role from 1945 as Acting Matron following the sudden death of Matron Rose Butler. The next year, she was officially appointed the role of Matron until she retired on 27 March 1966, aged 65.

### List of nurses who stayed at Brislington

Below is a list of some of the nurses who are supposed to have resided at Brislington House in Parramatta while working at the Parramatta District Hospital. The list is based on the NSW electoral rolls for the Parramatta District, with the following nurses having been listed as residing at Nurses' Home or Nurses' Quarters, District Hospital.

- Beryl May Corby
- Pauline Mary Page
- Loretta Grace Gibson
- Gloria Leoni Reseigh
- Helen Marie Hack
- Lynette Margaret Cronin
- Salme Ann Thacker
- Catherine May Morgan

By the early 1960s, however, the building was suffering from 'termite damage and general deterioration', which raised the possibility of demolishing the rare, historically significant building to make way for a new Diagnostic Services Building.



Nurses' fear of dank dingy cellar. Source: The Cumberland Argus, 9 November 1960

However, the National Trust classified Brislington as highly significant and recommended its restoration in 1968. This helped save Brislington from destruction.

By 1980, the PDH annual reports mention repairs completed and that medical staff were using the premises. After the landscape for Brislington was completed it was turned over to the Archives Committee for both Parramatta and Westmead Hospitals in 1983. The Committee was established to preserve the history of the hospital which began operating Brislington as the Brislington Medical and Nursing Museum housing a medical and nursing display for public viewing.

# Judith Brown - Brislington Family

## Emma Stockburn



The University of Sydney. Source: The University of Sydney

Judith Brown, the niece of Brislington doctor Keith Brown has carried on the family tradition of medicine. Judith's great grandfather is Walter Brown who was a prominent and well-respected doctor who started practising in Parramatta in the 1850's at the house Brislington and Parramatta Hospital.

Ms Brown attended Sydney University and graduated in 1950 with second class honours.

"Dr. Keith Brown said: "She's done extraordinarily well and we're all proud of her. "She met tough competition and came through with flying colours. In fact, I think she has better academic conditions than most of us."

## Margaret Gail Davidson

## Caroline Finlay

Margaret Davidson, in response to interview questions, 2020



Margaret Telfer receiving The Rose Butler Award Memorial Prize, Parramatta Psychiatric Centre, 5 June 1972. Source: Margaret Davidson

Margaret Gail Davidson is a trained midwife and nurse. She is now a volunteer at Brislington Medical and Nursing Museum. Thank you Margaret for agreeing to share your memories.

#### Can you tell us about yourself?

I was born Margaret Gail Telfer in 1946 at King George V Hospital in 1946. My older sister Jan was also born in the same hospital in 1944. My mother had lost her first daughter after a prolonged and badly managed delivery. From what my mother told us – the first daughter had severe brain damage, too severe to survive. My father had to arrange to have the baby buried, as mum was still in

hospital recovering! Told to go home and forget this episode in her life – that's how it was managed in her day.

### Where did you grow up?

My father who was a carpenter and cabinet maker built our house in Rydalmere, which was the third house in the street. It was all bush at Rydalmere when I was 3 or 4 years old. Mum had a son named Stuart five years after my birth who was the joy of her life.

What inspired you to become a nurse and midwife, and were you ever involved in any other professions and why?

We grew up in the area and attended school in the church hall at Dundas whilst our local school was being built. I finished high school at Macarthur Girls High School, and wanted to become a nurse. I had been influenced by our next door neighbour who had been a nurse, and she encouraged me to start my training at Parramatta District Hospital (P.D.H.). My parents were proud that I had chosen this course, which I started on the 13 March 1963. I was at that time a cadet nurse and only 16 ½ years old. I went into lectures with the older nurses and stayed in that unit until I became very anxious about being in charge of the 'Burns unit' on night duty. I resigned from nursing on the 24 March 1965.

I passed the government test for "typing" and became a Repatriation Department Clerk at the King York building in Sydney deciphering medical records from World War One and Two for claims for pensions – quite interesting work. I enjoyed the freedom of not having to work weekends, evening duty and night duty, but missed my old workmates and the atmosphere of being "on-duty". I returned to nursing in 1969! Thus I had to do another 4 years of training at P.D.H., which I was prepared to do as I was now more mature and enjoyed my second bite at nursing.

How do you feel about the education and training that you received?

I was awarded The Rose Butler Award for general proficiency during my training years, plus I earned a credit in my final exams.



Margaret Telfer receiving her Midwifery Certificate, 1976. Source: Margaret Davidson

Which other hospitals have you worked in?

I had planned to go to England to do my midwifery training, but on arriving in England I met up with a group of girls from P.D.H. and planned to go travelling instead of studying. After having a marvellous time travelling in the summer I was advised to get a job in a large hotel, the Strand Palace Hotel in London. I applied for the position of staff sister when the position became available and I was successful in gaining that position. It meant a private flat overlooking the Convent Garden's flower market and access to opera and symphony performances. I was on a 12 hour shift in the hotel covering Occupational Health and Safety – checking that the kitchens and the staff and hotel guests' medical attendance were properly supervised.

What are your memories of the supervision of the nurses? Was it rigid or hierarchical?

I then came back to Australia to do my midwifery training at P.D.H. after having visited more countries on the way home including Nepal and Indonesia. Back to work at P.D.H. again – first in general nursing as a sister in the wards until the new course for midwifery started in about 3 months. Boy how had things changed – instead of the army discipline regime I had been used to, it was much more liberated for the nurses, even the pay was better! I didn't have to live in the nurses home, and was allowed to live at home. I bought my first car and learnt how to drive – how liberating that was!



Margaret Telfer outside Brislington, 1965. Source: Margaret Davidson

What did you feel was the community's perspective on nurses?

During training for the general nursing certificate, because you had to work so hard for a very low wage, you were respected by the patients and the general public.

What was the most difficult part of nursing?

The supervision of trainee nurses was very rigid; seniority was strictly adhered to. I think the most disliked shift was the split shift which started at 06:30 until 09:30 and then 15:00 to 20:00. You were on the ward for the busiest times – showers, bed changing, meal times and dressings.

What is your proudest moment in nursing?

My proudest moment was when I was awarded The Rose Butler Award – totally unexpected!

What do you think of the current training that nurses receive, and how would you compare nursing today to previous periods?

I feel sorry for the trainee nurses who are educated off ward – they don't know how to approach the patients; assess their condition; support and educate patients. In midwifery, the care given to the patients was totally different. The normal delivery patient was kept in hospital for 7 days, the babies were showered and changed by the nurses and brought out to the mother for feeding and then returned to the nursery where they stayed overnight. They were only given complimentary bottles if needed through the night. The mothers were allowed to rest, and were taught how to bath and feed their babies. Lower segment Caesarean section (LSCS) mothers were kept in hospital for 2 weeks to be given time to recover from surgery. Times have changed so much.

Have you stayed in touch with any other nurses?

I still keep in touch with a lot of the girls I trained with. We can take up where we left off after so many years!

Even after your retirement you have maintained a relationship with Brislington. How would you describe your connection with Brislington?

I volunteer as a guide at Brislington to explain the history of the building and show the medical instruments. When I first started nursing in my second year training, I was allowed to live in Brislington Nurses Home. I lived on the ground floor side of Brislington – opposite the Old Police Station's Court House. No Home Sister to control us, we were 'trusted trainees' and had our own laundry and kitchen.

# Sister Doreen Hennesy: A 20 Year Journey of Cardiac Rehabilitation in Western Sydney

## Neera Sahni



Sister Doreen Hennesy. Source: Clipping from her interview

Sister Doreen Hennesy's experience and 20 Year Journey of Cardiac Rehabilitation in Western Sydney. She was working as a nurse in Westmead Hospital. This interview was recorded in early 1990s.

Sister Doreen has spent decades supporting Brislington as a volunteer and as Chairperson of the Brislington Volunteers.

#### A 20 Year Journey of Cardiac Rehabilitation in Western Sydney

Cardiac disease affects many Australians each year. Before the seventies the condition, for most, spelt the end of a productive life. Today, with the advances of medicines, surgical techniques, monitoring and cardiac rehabilitation the disease is under far greater degree of control.

#### **Cardiac Facts**

Australia has one of the highest incidents of cardiac disease worldwide. New South Wales is ten percent higher than the national average and Western Sydney twenty percent higher than State average. Western Sydney is referred to by some, as the 'Cardiac Capital of the World'. Towards the end of the seventies, Parramatta Hospital was to develop revolutionary cardiac rehabilitation program that was to change the face of cardiac care. The sister in charge of this unit was Sister Doreen Hennesy.

#### Sister Doreen Hennesy

"I became involved in an era of cardiac treatment when the coronary care unit first came to vogue and this was in the late sixties or early seventies. Prior to this patients were nursed in large medical wards and they were kept in bed for 6 to 8 weeks in the early sixties when I started my training. When a patient got out of bed, they collapsed and mostly died because when you are in bed for 6 to 8 weeks and someone gets you out of bed your heart rate goes up and your blood pressure falls and they obviously go into a shock situation.

In 1972 when I became the Sister-in-Charge of the Coronary Care Unit at Parramatta, cardiac monitoring and this type of thing was very new and exciting and we so conquered the cardiac arrest situation in many ways by treating the arrhythmias and this type of thing. So a lot more patients were living that would of died.

However, they weren't living. They were 'wrapped in cotton wool, they were scared, they were terrified. So I started an education program of the patient while they in hospital, explaining what the heart attack was to them in lay terms. Dr David Cody who was the honorary director the Unit and I started early ambulation in 1975 where we were getting patients out of bed within 2 days of their admission. This was unheard of! And some people used to look at us as if we were from 'another planet'. A few months after that were found out that the earlier they got up, the quicker they got better. Some of these patients were living in units on the third floor, so I thought well why not? Make them walk up two flights of a stairs before the go home so they know that they will not get the chest pain when they walk up the two flights of stairs to their unit.

So this became a regime. So the patients had to do two flights of stairs without chest pain, their pulse was taken before, their pulse was taken after. So this was a form of cardiac rehabilitation, but it was not documented as such."

In 1977 Sister Hennesy applied for and won a scholarship to study cardiac care in other countries. Whilst in Canada she visited the Cardiac Institute at Edmonton. The institute was supervised by cardiologist Dr. Televi and was built by the people of Edmonton with the aim of helping cardiac patients return to a normal life. In the months to follow her return, Sister Hennesy uses this experience as a model to help set up the cardiac rehabilitation program in Parramatta Hospital

"In the late seventies, in 1978 we exercised the first patient, ten days after an 'infa' (infarction). It was exciting. It was everything that I ever wished to do. It was also very frightening. Although, I had seen it all working in Canada and knew it was safe, the first patient was exercised in front of doctors from the Heart Foundation, the medical directors and physicians from Parramatta Hospital and I was just there with one bike and a little machine. That first patient did well and lived until 1997.

So within two months, I had about forty patients and I was just one staff. Then it grew and then I got more staff, more patients, at some stage we had 65 patients a day, just in a session in the evening where we used run the cardiac gymnasium. It was also really a lot of fun, the nursing staff did it in their own time and we used the hospital's equipment. Sometimes, we had up to 80 patients in an evening, just coming in skipping rope, bench stepping using some of the equipment, calathletics, all this was done by these cardiac patients."

Twenty Years after the establishment of the Cardiac Program, the original patients met at an anniversary dinner to reminisce, renew acquaintance and share twenty years of life after cardiac treatment.

#### **Patient Testimonials**

"When I had the heart attack, I thought the end of the world had come. With the cooperation of Doreen and the people down there, I realised it wasn't the end of world."

"My thing about the clinic and those day was the confidence it gave you to things that you were never quite sure of."

"It was the single most important thing to make me realise I was not totally useless after the operation. Arrived at the exercise clinic, you have no confidence in yourself at all. They wire you up and put on the treadmill and you realise after walking about 10 minutes, they push you quite hard as well, you realise you are not so totally useless after all there is air left in you."

"Having a heart attack is a very shattering experience. When I started to go to the clinic I got confidence doing the exercises that Doreen recommended. I am very grateful to her for that."

"I think it is a big saviour to people who have had heart attacks and my heartfelt thanks to Doreen and Libby."

### Dr Paul Russell, Cardiologist

"I have been in cardiology practice for 20 years and there is no doubt that over that time, I have seen some quite amazing development in the treatment of myocardial infarction and the return to work and normal activities of these patients who previously were likely to have suffered major problems. There is no doubt that over that period of time the incidents of coronary artery disease, the incident of death from coronary artery disease has declined but people still are still suffering quite frequently infarction, unstable angina, requiring admission to hospitals. There is still a strong social and psychological stigma to suffering myocardial infarction, great concern to the patient and the family and the work force. It does not matter if the patient has been in hospital for a sort period time or long period of time, it still takes considerable time and effort to have these people return to their normal levels of activity."

An important feature for treating people with myocardial infarction is to try and treat them as early as possible. The earlier the treatment is started, less likely there is be large arears of damaged muscle. As a result, the outlook for the patient is much better, complications less and the chances of the patient returning to a normal lifestyle is that much greater. The treatment of patient after a heart attack generally involves several procedures. The procedures range from invasive surgery to the use of clot dissolving drugs.

"With the use of thrombolytic drugs, the size of the myocardial infarction has decreased. One of the problems, however, is that with dissolving the clot in the artery which will happen in about 60, 70 per cent of patients there is still the underlying coronary disease. Therefore, the patient would normally have a coronary angiogram, the state of the arteries is assessed and more often than not one finds a culprit artery that is responsible for the infarction that maybe partially narrowed, 60, 70, 80 per cent narrowed. That artery is then opened with a balloon that is passed into the artery and at the site of the plaque, the balloon is inflated, the artery generally improves quite considerably with the positioning the balloon. The treatment now, is generally not only to perform the balloon but also to place a stent in that artery. It is a small, metal, lattice-like structure which is implanted at the site of the plaque. Results are considerable better with a stent being placed in the artery. The chances of restenosis of the artery are considerably less in the next six months. It is a very, very effective way of being able to deal with myocardial ischemia following myocardial infarction."

In the angiogram shown here, dyes injected into the blood vessel of the heart, the constriction of the blood vessel can be quite easily seen. Following the angioplasty and the placement of the stent, the flow is restored to the blood vessel.

### Dr Hugh Patterson, Cardiac Surgeon

"Ischemic heart disease is a very common condition, particularly in Australia and coronary artery bypass surgery is a very common operation in the management of ischemic disease. The operation for coronary artery surgery itself, we simply get a spare bit of pipe from somewhere in the body, either some vein from the leg or an artery from behind the sternum, the breast bone and we sew that onto the coronary artery before the narrowing and then onto the coronary artery after the narrowing that bypasses the narrowing and so we call it a bypass graft. Because it is the coronary artery we call it a coronary artery bypass graft. We do that for as many narrowing there are".

#### **Stress Tests**

After a cardiac procedure carried out, the stress test will confirm the success or whether other procedures are indicated. The stress tests occur at the direction of the cardiologist. This generally happens three days after release from hospital following an infarction or five to six weeks after bypass surgery

#### Sister Doreen Hennesy

"This is the ECG machine that keeps a 12-lead ECG on the patient at risk before they start their exercise test. During the exercise test, they are fully monitored on 3 leads throughout the time. The reason this is done is because if the patient has a cardiac problem, the first thing we are looking for is ST segment changes on the ECG on the three lead. As well as that we are looking for arrhythmias. This the treadmill that the patients walk on. We always use the Bruce protocol which is an international protocol that was made up by Bruce from Seattle in the early 1970s. The patient starts off walking at a very slow pace. At each 3 minutes, I increase the pace and inclination of the treadmill until the patient reaches his predicated maximum heart rate if it is a diagnostic test or until the patient becomes fatigued or stressed and is just feeling himself I will stop the test. This is the blood pressure machine which is necessary during a stress test to take blood pressure at rest and each minute during the test. If the patient should develop cardiac symptoms of any kind, their blood drop and the test would be terminated. It is important so I take the blood pressure every minute.

The test is not a pass or fail thing, it is really to see that the patient can cope with exercise levels. If I terminated a test it would be due to hopefully fatigue, but could be ST segment depression on the cardiograph, it could be due to a drop in blood pressure, it could be due to the patient developing chest pain or due to an arrhythmia. If any of things this occur the test is terminated and appropriate steps are taken such as the patient is referred straight to their cardiologist who in turn if the patient had ST segment depression and chest pain at the stress test at any level throughout their program over 2 years, they would be referred to their

cardiologist and in turn he would have an angiogram and either an angioplasty, stent or coronary artery bypass. In some cases just be treated with different medication."

After cardiac treatment, depending on the results of the stress test a patients are ready to join the cardiac rehab program.

# **Images**

Courtesy of Brislington Medical and Nursing Museum. <a href="http://www.brislington.net/">http://www.brislington.net/</a>



Volunteers of the Year 2017



Brislington volunteers Christmas Luncheon 2019



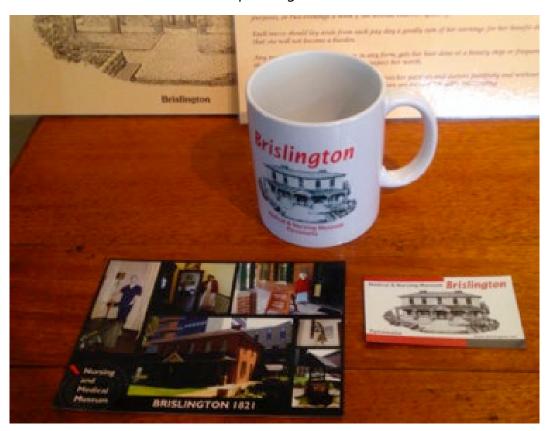
Medical Science and Hospital Care in Parramatta



The Ward



The Operating Theatre



Souvenirs



Heritage Festival 2016



Dr. Macarthur Brown's visit

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Chapter 18: Margaret Gail Davidson

Chapter 19: Sister Doreen Hennesy: A 20 Year Journey of Cardiac Rehabilitation in Western Sydney

