

GESONDHEIDSJAAR 1979.

BREWELSKLOOF HOSPITAAL.

GESKIEDENIS.

Teriengdienste gelewer in Worcester area
tussen die jare 1933 - 1960
volgens gegewens uit

DIE WORCESTER STANDARD
verkry

met die vriendelike medewerking
van die

WORCESTER MUSEUM.

GEZONDHEIDSDIENSTE

Uit Worcester Standards vanaf 1933 tot Augustus 1940

20 October 1934: Health week in Worcester. Official opening by Dr. F.C. Willmott, Senior Assistant Health Officer for the Union of South Africa. Tribute paid to various societies for efforts to build healthier and happier Communities. (Child Welfare Society, A.C.V.V., and Coloured Nursing Association)

The Mayor conveyed the Council's appreciation to the Child Welfare Society and in particular to Mrs. E.P. Theron, the president for her share and work. I often wonder if we as a community recognize the inestimable value of the Society's work and that of Kindred organizations. Unostentatiously, day in, day out, and without flourish of trumpets the Society pursues its good work. Week in and week out it assists in alleviating pain and suffering, strives to uplift and educate and to build a healthier and happier community.

May 1935: Dr. Carden establishes T.B. Clinic, Funds for fighting T.B., Christmas Stamps.

Mr. C.J.C. Gie starts King's Jubilee Fund: £456 raised.

September 1935: Dr. Carden suggests that a special Medical Officer be appointed to establish clinics at different places in the district. If disease not too far advanced, patients could be sent to Nelspoort. Hopeless cases to be sent to Lazaretto where they receive rations and where a coloured woman is available to cook for those unable to do so. The Lazaretto consists of a few rooms in which different types of infectious diseases are isolated. There is sufficient supervision to prevent sufferers from different diseases mixing. The Lazaretto is not only a blot on Worcester's good name, but is a serious danger to health in that conditions are so unattractive that no sufferer could be blamed for staying away as long as he is able to find a crust of bread elsewhere. An appeal is made to the Divisional Council to take action and to improve this matter.

November 1935: Dr. Schonken said it costs £30 to keep a patient at Nelspoort for 3 months. Of this the Government pays £15 and Municipality £15. After 1935 the patient paid $\frac{1}{4}$ and Municipality and travelling expenses. Mrs. Gie formed a local committee to assist the Coloured Nursing Association T.B. Clinic.

20 June 1936: The Mayoress Mrs. Gie presided at a meeting to deal with the tuberculosis menace in Worcester. Fund raising scheme launched to implement the scheme. T.B. Commission formed.

27 June 1936: Coloured Clinic. Coloured population of town 7,000. There were 51 patients known to be definitely suffering from T.B.

15 Augustus 1936: Worcester Vereniging word met dié van Kaapstad ge-affilieër. Dokters sal gevalle aanmeld. Grootmense sal na Duin-en-Dal en kinders na Sunshine Home in Kaapstad gaan. Kinders gratis.

22 Augustus 1936: Teringbestryding: Omdat Worcester so baie seëls verkoop het, kan hulle gebruik maak van Sunshine Home (plek vir 22). Alle mans kan na Duin-en-Dal tot daar plek is in Nelspoort Sanatorium. Geen plek vir vrouens en kinders nie. Mr. Gie announces that charges at Nelspoort had been increased by 1/- per day.

30 January 1937: Dr. Carden appeals to Worcester Municipality for Co-operation between the Coloured Nursing Association, 45 Parker Street and the Municipality in combatting T.B. among coloureds.

12 June 1937: "Help came too late": A T.B. case sent to Nelspoort Sanatorium by Mrs. Gie improved and returned home, where her condition once more deteriorated, and soon after being re-admitted she died.

4 September 1937: Section Cape West Area of Christmas Stamp fund. Speaking at Worcester, Mrs. W. Steenkamp congratulated Worcester on what was being done to combat T.B. among Non-Europeans. Worcester second highest in all by decimal point to Kimberley. She asked the Committee to express opinion on question whether one central preventorium or preventoria in various parts of country were needed. Mrs. Gie stressed lack of accommodation at Nelspoort. We need homes to which Tuberculosis cases could be sent permanently. Dr. Schonken said a hospital in country district situated at Worcester would be more popular than a big central institution at Cape Town. Patients were reluctant to go far away from home for treatment. Mrs. Steenkamp said strong representation should be made direct to T.B. Board of whom Dr. K. Bremer was chairman - if ground is available here - campaign opens November 15th.

20 November 1937: General Meeting: Mrs. Gie presided T.B. Council Committee. Shortage of funds. Appeal to municipality for grant. 4 December - T.B. street collection.

7 January 1937: 100 Suspected Cases of T.B. said Dr. Carden. Since T.B. Clinic started 1933 - 1960 proven cases were treated. Get hold of early cases and treat them - very poor housing and overcrowding. Coloured Nursing Association anxious to build own head quarters. Sum of £1000 required. £300 promised. Meantime they hope to send 2 early cases to Mission Hospital in Orange Free State - ideal climate.

10 February 1937: Infectious Disease Hospital wanted for Western Province. Local Municipality and Divisional Council, Tulbagh, Wolseley, Ceres - need adopted unanimously.

23 April 1938: Isolation Hospital badly needed. Checking spread of T.B. Local Committee investigate. Mrs. Gie fully determined that some scheme be decided upon. Dr. G. de V. Theron cited few special cases to show very poor conditions under which patients lived. Dr. Walters said the Municipality were moving in matter of getting an isolation hospital.

28 Mei 1938: Isolasie Hospitaal noodsaaklik. Mev. A. Canard - De Dooms

25 June 1938: Urgent help for T.B. cases - Position aggravated by Cold - We need funds, we need a local home - we need willing workers.

30 July 1938: Infectious Diseases Hospital. "Public Conscience Aroused - a moral obligation", Dr. Dommissie - a representative gathering of local authorities - unanimously decided that a central hospital was an urgent necessity. Dr. Dommissie quotes cases to stress urgency.

1 April 1939: T.B. Cases must be isolated. Dr. Hool of Cape Town Health Department. "The care of T.B. cases". Mrs. Gie: Milk and malt etc. had been provided regularly to many patients at their homes but patients had eventually died. Mrs. Hugo Naude was first to agitate for an isolation home. Dr. Hool: "A determined effort was being made by Government to provide hospital treatment" - urgently needed in Cape Town Too.

20-5-39: Verplegingsdiens vir Kleurlinge: Verslag - weeklikse T.B. kliniek onder Drs. Carden en Theron. 47 T.B. pasiënte op rol.

10-6-39: Home for T.B. Patients. The women's representatives of T.B. Care Committee were anxious to make provision for the accommodation of T.B. patients. They had suggested a house at bottom end of location, but the Health Department objected. It was too close to source of infection. Dr. Allen on a recent visit to Worcester suggested the old golf house until hospital had been built when Department would take over. Health Committee move this recommendation.

7-6-39: £40,000 Infectious Disease Hospital planned.
Free to patients from subscribing districts. State to contribute £35,000. For rural (9) districts. Start building in April. Dr. E. Cluver, Secretary for Public Health - minimum no. of beds - 80. All treatment free for cases from districts which hospital is intended to serve. Fees to be charged for outside patients. Worcester Town Council to pay for 12 beds. Divisional Council to pay £65. Require Matron and 3 Sisters and 4 Nurses and 14 Assistants. Later a Resident Doctor. A health rate for taxation will be levied - suggested 8d in £1.

15-7-39: Support for Infectious Disease Hospital.
Worcester Divisional Council support the founding of Hospital - and fund £650 by raising 2% Health Rate.

16-12-39: Conditions at the Lazaretto hopelessly unhealthy. Appointment of Health Inspector matter of extreme urgency.

30 March 1940: Work on Infectious Disease Hospital will begin in near future. Representative committee appointed.

30 May 1940: Coloured Nurses Association reports. The T.B. clinic under Dr. Carden reported 50 serious and 10 light cases and 10 deaths. Two patients admitted to Nelspoort and 1 to Modderpoort.

10 August 1940 - Infectious Disease Hospital.

Committees amended plan: It was decided to draw up a plan for a T.B. hospital and to reduce the infectious disease side to the bare minimum. Govt subsidies. T.B. to 100% but others 75%. Concentration on T.B. side was advisable.

24 August 1940: Town Council willing to extend plan.

Clinic in addition to Lazaretto. 75 T.B. cases in coloured area - many cases unknown.

12 October 1940: Lazaretto site changed from near the abbatoirs to Grey Street.

9 November 1940: Humans treated worse than animals. Councillor denounces conditions at Lazaretto. Mr. Keyter urges speed up of plans relating to new plans.

16 August 1941: Complaints about new Lazaretto: Divisional Council meeting. Building nearly completed - too near location; site was damp (in water) and undesirable for treatment of Europeans. Caretakers home and hospital have cement floors - certainly not desirable for T.B. or any other patient account to Union Health Department specifications. Municipal councillor explained that it was not cement but a composition of cement, sand and coal and would be covered with malthoid. Divisional and Municipal Council to share expenses. "Abandon hope all who enter here" - !

30-8-41: Building conditions severely criticised by correspondent.
Unprotected windows from sun and rain - no heating.

8-11-41: Isolation Hospital to be isolated.
Drainage of vlei ground. Health Commission recommended that drainage furrows should be sunk on 2 sides of new isolation hospital in Grey Street. Hospital had to be turned into an island by drainage furrows.

13-12-41: Tering onder die Kleurlinge.
Gevare van huidige toestand. Afdelings-Raad Vergadering. Gesondheidsinspekteur gee verslag. Gedurende 12 maande: 94 gevalle van Tering, 56 sterftes. Mees besmette deel langs H exrivier tussen De Doorns en De Wet, baie swak behuising. Mense moet ingelig word - en beter behuising verskaf.

20-6-42: Tering onder Kleurlinge Skrikwekkend.
Te wyte aan ondervoeding en slegte behuising. Van 1 Julie 1941 tot 31 Mei 1942- 753 sterfgevallen in Worcester, daarvan 116 aan tering. Planne vir groot hospitaal vir Aansteeklike Siektes is reeds deur Gesondheids Departement goedgekeur. 40 Beddens vir blankes en 60 vir gekleurdes. Hoewel 'n paar afsonderings afdelings, sal dit hoofsaaklik 'n Tering hospitaal wees. Boukoste - £71,000 - modern ingerig wees. Mnr. Claassens verduidelik dat dit 'n streek van 100 myl in deursnee sal dien. Regering sal 75% van die onkoste dra. Die plaaslike munisipaliteit en Afdelings-Raad sal elk £600 moet waarborg. Die bestaande afsonderings hospitaal in Greystraat maak voorsiening vir 10 beddens. Heeltemal ondoeltreffend wat beddens en fasiliteite betref, tog is die genesing wat voorkom verbasend.

8-8-42: Verslag van Gesondheids-Inspekteur:
Tering Hospitaal - Alvorens die stoep toegemaak word sodat ons beddens daar kan sit, kan ons nie meer as 10 beddens gedurende winter maande by die Nie-Blanke Tering hospitaal inneem nie. Gedurende afgelope kwartaal is 19 pasiënte behandel -6 van Munisipaliteit, 11 van Afdelingsraad. Van hierdie is 8 oorlede.

10-4-43: Tering toestand skrikwekkend.
Staat behoort in te gryp. Mev. D. Grobbelaar (Mosselbaai) lid van Kommissie om die Minister van Binnelandse Sake oor Tering kwessie te spreek. Wagly's Nelspoort 300. Gemiddeld 308 sterftes per jaar in Worcester. 240 aangifte. en 172 oorlede in 4 jaar. In die distrik het gedurende 2½ jaar 134 gesterf terwyl 174 aangemeld is.

17-4-43: Municipal Health Inspector reports:
T.B. Hospital built with 8 beds - In 4 years there were 240 cases, at present 16 beds in hospital. Need for after care hospital - we must feed and house colourds properly if we want to stamp out T.B.

16-5-43: Om tering hospitaal uit te brei (nog 12 beddens by 8)
Afdelingsraad keur planne goed. Beraamde koste £28,000. Wag vir goedkeuring van Departement Volksgesondheid. Instruksies deur Volksgesondheid dat grond waar groot Afsonderingshospitaal gebou gaan word so speedig moontlik afgemeet word.

21-8-43: Good news for T.B. sufferers.
Isolation Hospital now definite. Will house 40 European patients and 60 Coloureds. Work to begin end pf year. Will be situated on 6 morgen north of present hospital and will be biggest and most modern of its kind in Cape Province at cost of £100,000.

29-4-44: We to have haven for Tuberculosis. £125,000 Hospital to be provided.
Construction to start soon. Worcester has been selected as site for hospital owing to its central position and climate. The site will be in the mouth of the Brewelskloof. Dr. Du Pré le Roux, the Secretary for Public Health said that Worcester would be the first of a chain of institutions in South Africa.

29-7-44: New Medical Officer of Health for Worcester.
Dr. A. Wilsen of Kimberley unanimously accepted for post.

27-1-45: Infectious disease block may go to Brewelskloof adjoining the projected new T.B. Hospital.

5-5-45: We were given a big responsibility to control establishment and administration of 2 new hospitals. Cost of Worcester T.B. £125,000 and Infectious Disease Hospital £25,000. T.B. provides for 100 beds with facilities for extension to 300. Infectious hospital will start with 25 beds.

The Worcester Municipality is to act as agent for Union Health Department which will refund in full approved expenditure of buildings and equipment and on the distinct understanding that local authorities throughout the Union will be entitled to order admissions to the Worcester Hospital. Union Health Department will accept 75% of administrative costs of the institution. Local authorities responsible for the rest.

23-5-45: Dr. Wilsen gives some facts about T.B. Hospital Scheme.
Delegation to Cape Town. Mr. Traub and Dr. Wilsen - arranged by P.J. de Wet, M.P., to see Dr. H. Gluckman, Minister of Health.

The original estimates for the hospital was £127,000 for building and other costs have increased and the cost today will be in excess of that extension for Nurses Home £21,000, but the lowest tender received was £45,000. A new estimate for building and equipping entire hospital had been done and architect and quantity surveyors figure now stands at £333,000. After reading this the Minister informed the Department that the estimate of £3,300 for beds exceeded by nearly 50%. The cost of any hospital ever built in South Africa and under present conditions was quite beyond all reason. The Department is compelled to abandon the plans so far approved but it did not mean that the scheme was being jettisoned. The Department was at present preparing an entirely new set of plans which he himself would bring to Worcester within a month. The hospital will definitely be built so that all work connected with access roads, water supplies etc., was to be proceeded with.

27-4-46: T.B. position of grave consequence to Worcester. Medical Officer of Health describes in-roads as staggering.

18-5-46: 173 Died of T.B. in Worcester area in 1944-1945. Nurses desperately needed. Dr. Wilsen emphasised the need for a strong body and said when the T.B. hospital was completed, cases of T.B. would have substantially increased in the town and district. During 1944-1945, there were 173 deaths from T.B. - covering all sections of the community. Actual curing and after care were most important. The purpose of Worcester Regional T.B. Committee will provide services and co-ordinate the working of all other bodies concerned with consumptives and their dependants. The Regional Committee will consist of 2 representatives of Municipality Council and Divisional Council representative and 1 representative of A.C.V.V. Village management Board De Doorns, Rawsonville and Touws River, V.L.V., Boerevereniging, Chamber of Commerce, Hospital Board, Nursing Services, Child Welfare, SAWAS, Medical and Dental Professions and

27-7-46: Nuwe Tering Hospitaal.

Die pas gestigte Sentrale Tering komitee sal op 24 Julie sy eerste vergadering in Munisipale raadsaal hou. Dr. Wilsen sê die bou van groot Tering hospitaal sal in Julie in aanvang geneem word. Die verpleegsters blok sal eerste gebou word deur Wnr. C. Pelteret.

22-11-46: Die Teringmoordenaar moet onder die knie.

Dr. Wilsen maak bekend dat uit 172 gevalle die jaar, 88 gesterf het, 22 in die hospitaal, - 62 op straat. Einddoel is om 'n Gesondheidsstandaard by alle Voedsel-fabrieksarbeiders neer te lê. Geld en volhardende arbeid nodig. Teringfonds gestig.

29-11-46: £1,000 is wanted to fight T.B. by Regional T.B. Council.

20-12-46: Worcester newly founded Regional T.B. Council contemplate establishing a small settlement for chronic T.B. cases of the Coloured Community. Dr. Wilsen most enthusiastic about it. Dr. Dormer, Chief T.B., officer of Union visited Worcester - an authority on the subject of T.B., recently returned from an investigational trip to Europe and America. He was given an insight into all T.B. work done in Worcester and was much impressed. He announced that he had decided to cancel all the constructional plans in the light of knowledge he had gained overseas. Decision does not affect the Nurses Home work.

17-1-47: New hope for the Sick.

Government help promised. Mr. Kushoke (Union Secretary for Social Welfare) advised Worcester to use the building in Grey Street for a house for aged Coloureds. He discussed the proposed Worcester settlement for chronic Non-European families.

18-8-47: Crusade against Tuberculosis - Regional Campaign.

16-5-47: Tering toestand 'n skandaal. Sterftesyfer onder Nie-Blankes is hoogste ter wêreld aldus Dr. B.A. Dormer, hoof tering beampte van Departement van Gesondheid.

27-6--47: Miskien 'n teringnedersetting. Die Teringraad se werk vorder stadig, en daar word tans met die Munisipaliteit en Regering onderhandel oor die stigting van die Teringnedersetting.

8-8-47: Teringlyer-nedersetting in prinsiep goedgekeur, maar die hele skema moet nog deeglik uitgewerk word alvorens dit voor die betrokke departement gelê kan word - Dr. A. Wilsen.

12-9-47: Worcester among Union's worst Tuberculous cases.

The incidence of T.B. in Worcester is dreadful and will be getting worse if housing conditions do not improve.- Dr. Wilsen. Grey Street Hospital now has 35 beds and will soon have 65. It would be adequate for our need if there was an after care home for the treatment of those who were no longer bedridden. Improvements had been ordered to the Mc Carthy hut.

19-9-47: Die Stadsraad en Afdelingsraad, Robertson het besluit geneem dat die Departement van Volksgesondheid dringend versoek word om die Sentrale Tuberkulose Hospitaal te Worcester sonder enige verdere versuim op te rig.

5-12-47: Fight against T.B. under way

During the year the Government established a new division of T.B. control and on the advice of the Department the Brewelskloof Hospital plans were completely revised in the light of overseas information. This had involved the future lay out, the original pavilion system of separate blocks connected by covered ways being replaced by single multi-storied structure. The new plans have not been finalised.

The design of the Nurses Home will remain virtually unchanged and the European Home has been practically completed. In the original plan provision was made for the putting into use of the first ward blocks as soon as they were completed and for adding new blocks gradually. Under the new scheme this will however be possible to use the 2 Nurses homes as a temporary hospital, although there are very many difficulties involved.

Facilities for Out-patients' Treatment.

The accommodation and installation being planned at the time of my last annual report have been provided. These include:

- (a) 2 waiting rooms
- (b) General clinic rooms containing personal scales, sterilizer, blood sedimentation rate tubes and dispensary.
- (c) Pneumothorax theatre containing couch, viewing box, pneumothorax apparatus and filing cabinet, for records and X-ray plates.
- (d) X-ray room with 30 M.A. Kelekett Mobile unit with fluoroscopy screen and dark room. This clinic is staffed by the Medical Officer of Health, the Clinical Medical Officer, Matron of the Isolation Hospital and the voluntary Health Visitor serving the Worcester Regional T.B. Council in a temporary capacity.

This latter worker is to be replaced by a full time official during the latter part of 1947. The full clinic has been in use for only the last 4 months of the year under review and the greater part of the work tabulated below was carried out during that period.

The Regional T.B. Council represents the following local authorities and organisations: Worcester Municipal Council, Worcester Divisional Council, Village Management Board De Doorns, Village Management Board Rawsonville, A.C.V.V. Child Welfare Society, Worcester Boere Vereniging, Vroue Landbou Vereniging, Chamber of Commerce, Coloured Social Service Association, Medical Profession, S.A.W.A.S., Union of Jewish Women, Medical Officer of Health, Coloured District Nursing Service. The Council has functioned for nearly a year in more or less experimental manner and most of the initial difficulties have been overcome. The major undertakings planned are:

- (a) Appointment of a full time T.B. Health Visitor.
- (b) Establishment of a settlement for Non Tuberculous and their families.
- (c) The establishment of a workshop for sheltered employment.
- (d) The publishing of a periodical pamphlet for health education and public information.

The Council has been affiliated to the Cape Province T.B. Council and has applied for affiliation to the S.A. National T.B. association.

13-2-48: T.B. Hospital.

The Secretary for Health has given authority that the recently built Nurses Home in Brewelskloof can be used as a temporary tuberculosis hospital. An announcement to this effect was made to Worcester Divisional Council by Dr. A. Wilsen, Medical Officer of Health.

13-8-48: Tering neem toe op Worcester.

Kwartaalike Rapport - Worcester Streekteringraad: 11 gevalle opgeneem in Graystraat, 8 oorlede. 53 Nuwe gevalle aangemeld. 215 Persone wat tering het woon kliniek by. Altesaam 25 sterftes die kwartaal. Daar is besluit dat die Teringblad, Die T.B. Courier, genoem sal word en dat die Tering hospitaal die Bruwelskloof Sanatorium genoem sal word. Opening sal eersdaags deur Dr. A.J. Stals, Minister van Gesondheid, waargeneem word.

20 August 1948: Worcester's new hospital ready for occupation.

30 - 40 T.B. beds will soon be filled. The first block of buildings of the £500,000 Brewelskloof Sanatorium for Tuberculosis in the Brandwag foothills at Worcester, is now out of the hands of the builders and its 30 - 40 beds will soon be occupied by European patients. Dr. A.J. Stals, Minister of Health, has been invited to perform the official opening in the near future. The building, now completed, has cost £45,000. Administrative control, for the time being at least, will rest with Dr. A. Wilsen, Medical Officer of Health for Worcester. All the modern equipment for the hospital is being supplied free of cost by the Union Government, which will also be responsible for maintenance costs, except for 1/8, of cost which to be recovered from local authorities. Brewelskloof will serve all the country areas surrounding Worcester. The final scheme, which will take several years to realise, will provide for 410 beds for Tuberculosis, plus a probable additional 50 for other infectious diseases.

The builders of the 1st block were Mr. C.A. Pelteret Pty Ltd., of Worcester, who have also been awarded the £54,000 contract to build the home. European Nurses Home to serve the whole hospital when finally completed. The Non European Home provides for 60 bedrooms and facilities and amenities almost identical with those provided in the first block. The first block contains 36 bedrooms, Matron's flat, sitting rooms, library, dining room etc. Until the Laboratory is completed, Non European patients will be provided for at the Grey Street Hospital, where the Worcester Municipal is about to provide for expansion.

1-10-48: Saturday 25-9-48 is a day surely unique and the most memorable in the 128 years of Worcester's eventful history. On that day a galaxy of the distinguished men of South Africa came to Worcester to participate in important public functions. The highlight being the opening of the Karoo Gardens by Governor, the Right Honourable G.Brand van Zyl. This followed a brilliant public lunch given by the Mayor and Mayoress of Worcester, Mr. and Mrs. J. Theron and the Town Council, in honour of the distinguished guests including Dr. T.E. Dönges, Minister of Posts and Telecommunications, Dr. A.J. Stals, Minister of Education, Health and Social Welfare and General Smuts, leader of the opposition. Apart from the Karoo Gardens' opening there was the opening of the Brewelskloof Sanatorium and a Play Production Course at the Hugo Naudé Art Centre.

10 Oktober 1948: Dr. A.J. Stals open Brewelskloof Tering Sanatorium.
 Dr. A.J. Stals, Minister van Gesondheid het verlede Saterdag die eerste blok van die Brewelskloof hospitaal geopen. Die Sanatorium sal veral Tering Pasiënte opneem, maar ook gevalle van ander aansteeklike siektes en sal Worcester en om- liggende dorpe bedien. Die Sanatorium is gebore uit die samewerking van plaaslike owerhede in die platteland om gesondheid te bevorder en lyding te versag. Die Sanatorium lê veral klem op die bestryding van Tering en Veneriese siektes. Daar is ook ander siektes wat die onmiddellike aandag van die staat, sowel as die volk, vercis. Die gedagte aan Tering is sorgwekkend. Die getalle vir 1947 was tussen 19,000 en 20,000 met 1,200 gevalle onder blankes. Die sterfte syfer in 1947 was 7,000. Hy het die publiek aangemoedig om gesond te lewe en die wat siek is te behandel. Hy het die hoop uitgespreek dat die gebou mag dien tot die uitroeiing van aansteeklike siektes. Dr. Stals is bedank deur Mnr. N.C. Krone, Voorsitter van die Worcester Streeksteringraad, wat gesê het dat die Sanatorium een van die mooiste was wat vir die doel gebou is - daar is niks gespaar nie - slegs die heel beste was goed genoeg. Hy het die verskeie hoofde van die stadsraad bedank, asook Dr. A. Wilsen, Mediese Gesondheidsbeampte, deur wie se ywer en bemoeiing veel tot stand gebring is - in die bestryding en vroeë diagnose van Tering en wat hom ook uitermate beywer het vir die oprigting van 'n Sanatorium.

10-12-48: Brewelskloof Hospitaal ontvang eerste pasiënte.

Die eerste 3 pasiënte het Vrydag hulle intrek geneem, 2 is manspersone uit die distrik wat tot dusver in die hospitaal vir aansteeklike siektes op Stellenbosch verpleeg was. Hulle is Vrydag per ambulans gehaal. Vanaf hierdie week sal meer pasiënte toegelaat word, maar daar sal net voorsiening vir die dringendste gevalle gemaak kan word, tot die hospitaal heeltemal ingerig is. Die nuwe Matrone, Suster C. de Goede, doen 'n beroep op die publiek om ou tydskrifte en boeke aan die hospitaal te skenk. Dr. P. Koch wat as hospitaal arts aangestel is, het ook Vrydag sy intrek in die nuwe inrigting geneem.

17-12-48: Greystraat se hospitaal sal vergroot word. Dr. Wilsen het op Afdelingsraad Vergadering gesê dat dit wenslik sal wees om vir nog 70 beddens by Greystraat hospitaal tydelik voorsiening te maak tot tyd en wyl die Brewelskloof hospitaal voltooi is oor 5 jaar. Dit sal £20,000 kos en die Afdelingsraad is gevra om bereid te wees om deel van rente en delging jaarliks te dra. 'n Deputasie sal na Munisipaliteit gaan om te vra dat ondersteuning verleen word vir die voorgestelde vergroting aangesien Brewelskloof eers oor 5 jaar pasiënte kan inneem. Dit sal Munisipaliteit en Afdelingsraad elk £1,500 per jaar kos.

7-11-49: T.B. Council Executive meets at new hospital. The staff at Brewelskloof Sanatorium were welcomed by the Executive of the T.B. Council in the beautiful dining room of the first completed block of the big T.B. Sanatorium which was officially opened by Dr. A.J. Stals, Minister of Education, Health and Public Welfare in September. The first 3 patients had gone in at beginning of December. The Medical Officer of Health, Dr. Wilsen reported that there were more applications than could be accommodated but that 21 additional patients would be taken in shortly - most of them from Worcester district. Mr. Krone, the chairman, introduced the Matron, Sister de Goede and Staff sisters Van der Merwe and Basson. The Executive were very much impressed with the beauty of the completed block and expressed their appreciation of the amount work already done towards furnishing and general working conditions of the sanatorium. The nurses live in town when not on duty. Only Dr. Koch, Resident Doctor, lives in building.

21-11-49: A remarkable personality in the battle against T.B. In Worcester a T.B. Council is tackling the T.B. Menace under many aspects. A close organisation has been built up by our Medical Officer of Health. A T.B. Health visitor has been appointed and mobile clinics travel throughout the district. Dr. Paul Sykes visited Worcester last week and told the local T.B. Council something of his own remarkable life and work for the T.B. settlement outside Durban.

14-10-49: Tering Sanatorium vir Kleurlinge; skema vorder baie bevredigend. Dr. Wilsen het op vergadering van Afdelingsraad, lede op hoogte gebring van die jongste ontwikkelinge. Dr. Wilsen sê die Stadsraad is voornemens om 'n sub-ekonomiese behuisingskema vir Nie-Blankes aan te pak en is bereid om 30 wonings meer te bou met die oog op afsonderingshuise.

23-12-49: Geselligheid in Brewelskloof Sanatorium gehou. Die program was 'n verrassing vir gaste. Die hele konsert deur pasiënte. Baie genoeglike aand deurgebring.

19-5-50: Teringbestryding in Worcester. Dr. Wilsen kry verlof van Worcester Streekteringraad om 'n hout-hut langs Robertson pad vir teringgesinne op te rig. Vergadering besluit om permanente Sekretaris teen £7/10/- per maand aan te stel. Radio toestelle vir £80 is gekoop vir Brewelskloof hospitaal. £25 gespandeer vir Kersonthaal.

16-6-50: Besluite op Worcester konferensie geneem.

Afgevaardigdes van Pretoria en 13 dorpe om Worcester gekom en besoek aan die twee hospitale gebring. Dr. Wilsen is geluk gewens met die opstel van agenda. Alle liggame moet verteenwoordig word op die tering bestrydings komitee.

6-10-50: Entertainment for T.B. Patients. The Worcester Regional T.B. council has been making great efforts to provide entertainment for the T.B. patients at Brewelskloof Sanatorium and the Grey Street Isolation hospital, as the staff cannot find time to organize entertainment, which is necessary.

27-10-50: School for T.B. patients opened. The Tredeaux School at the Grey Street hospital was officially opened by Mrs. P.R. de Villiers. Dr. Wilsen gave a short resumé of the history and origin of the school which was started as a centre for occupational therapy essential, as a part of the T.B. treatment. The ages of patients range from 8 - 15. The name of this school is a tribute to a world renowned doctor who gave much to fight T.B.

5-10-50: Noodoperasie met handsaag by Brewelskloof! Luisterryke verskeidenheidskonsert is in 'n kleurvolle saal in vrolike atmosfeer deur pasiënte van Brewelskloof Sanatorium aangebied. Dr. Wilsen bedank deelnemers en spreek die hoop uit dat hulle almal volgende konsert gaste in stede van pasiënte sal wees.

16-11-51: Brewelskloof patients will exhibit their work. Occupational Therapy Department is still in its infancy and has been financed jointly by the T.B. Council and Worcester Rotary Club.

29-2-52: Worcester Regional T.B. Council meets - annual report adopted and office bearers elected. 92 Houses will be used as a settlement as soon as new native location is ready for occupation. Dr. Wilsen moved note of thanks to Sister Murray.

25-4-50: Vrae in Volksraad i.v.m. Brewelskloof: Werk het begin; 2de helfte van 1946. Hoofgebou moet nog voltooi word. Waarde van kontrakte:

- (1) Hoofgebou
 - (2) Tehuis - Blanke Verpleegsters, £45,300
 - (3) Tehuis vir Nie-blankes, £56,000.
- Finansiële reelings betreffende kapitaal en instandhoudingswerke van geboue plus $\frac{5}{8}$ van goedgekeurde instandhoudingskoste kom in aanmerking vir terugbetaling deur Departement van Gesondheid en Worcester Munisipaliteit
Kaapse Provinsiale Administrasie $\frac{1}{4}$ van instandhoudingskoste aan Munisipaliteit terug betaal.

16-5-52: 150 Deaths in Worcester in one year - Tuberculosis; The Brutal Killers. Op hierdie tydstip is 'n voltydse Mediese Beampte in diens geneem. 75 Hospitaal beddens vir T.B. vir alle rasse - buitepasiënte - Kliniek met moderne ^{met} X-straal en laboratorium fasiliteite en 'n totale personeel van 50 wat uitsluitlik persoonlike gesondheidsdienste te doen het. Raad besluit om 92 huise in huidige natuurlike lokasie aan Worcester Streekteringraad beskikbaar te stel.

28-8-52: Brewelskloof Hospital Plans amended. Authorities favour purely Non-European institution. Dr. Wilsen explained that, owing to tremendous rise in building costs, it would not be possible to complete the scheme on the funds which had been voted. For this reason it was agreed that the Non-European Nurses Home, which serves as European Hospital now, be converted into a permanent hospital for Europeans.

The plans will be amended accordingly. It was proposed to build a Non-European Nurses Home on austerity lines and to omit the outpatient department from the proposed hospital. The existing municipality's out-patient department would be utilised for this purpose.

20-2-53: Only £500,000 for Brewelskloof. The Union Government Division of Public Works has signified that under no circumstances must the total cost of the Brewelskloof Infectious Diseases hospital exceed £500,000. The balance of the project still to be completed, is estimated to cost £300,000, which will also provide for a 150,000 gallon reservoir. The Non-European Nurses Home built at a cost of £65,000 is still unoccupied without essential services, after being completed more than 18 months. The Brewelskloof architect has been the Town Clerk of Stellenbosch, Mr. W.F. Blersch.

7-5-53: Dr. Wilsen for Geneva T.B. Course. A singular honour has come to Dr. A. Wilsen who has been selected, together with only 3 other S.A. Medical men to attend a study course on Tuberculosis - organised by World Health Organisation in Geneva.

15-5-53: Nursing of T.B. patients requires deep human understanding - Brewelskloof Matron.

31-7-53: Teringhospitaal sal 'n £½ miljoen kos. Tegnieuse moeilikhede is nou opgelos i.v.m. besit neem van die 2de gebou in Brewelskloof. Daar sal £30,000 spandeer word - geen elektrisiteit of water. Dit is ontwerp om Nie-Blanke verpleegsters te huisves. Nou sal dit klaargemaak word om sowat 60 blanke tering pasiënte te herberg. Blanke Verpleegsters sal dan woon in gebou wat nou as hospitaal gebruik word. Owerheid het £½ miljoen bewillig vir hospitaal vir Nie-Blanke èrens tussen die 2 geboue. Dit sal glo die laaste gebou wees wat onder die ou plan, wat subsidies betref, opgerig sal word.

6-11-53: Brewelskloof-plan vorder nou. Moeilikhede met argitektheit eindelijk opgelos. Nou dat moeilikhede wat betref aanstelling en besoldiging van argitektheit oorkom is, is die planne wat al 10 jaar bestaan vir die oprigting van 'n 400 bed hospitaal te Brewelskloof vir Teringlyers nog 'n stap nader aan verwesenliking.

Die Munisipale Owerhede het so pas aangekondig dat die Regering toegestem het om aan Mnr. W.F. Blersch, Stadsklerk van Stellenbosch, £16,500 te betaal in sy private hoedanigheid as raadgewende argitek tot 4 jaar gelede van die skema. Mnr. Blersch het die som as algehele vereffening van alle eise aangeneem.

In hierdie stadium is beide verpleegsters-tehuis vir Blankes en Nie-Blankes al opgerig teen koste van £100,000. Op 25 September 1948 het wyle Dr. A. Stals as Minister van Gesondheid die amptelike opening van die hospitaal waargeneem. Hierdie gebou is in 'n hospitaal vir teringlyers omskep en sedertdien was daar nog altyd omtrent 40 pasiënte in die tydelike hospitaal vir behandeling. Die tehuis vir Nie-Blanke verpleegsters wat £54,000 gekos het is in 1950 voltooi maar het nog altyd leeg gestaan, behalwe die gedeelte wat deur Dr. Wilsen, Mediese Gesondheidsbeampte, gebruik is.

Alle planne wat betref die uitbreiding van die hospitaal het omtrent 3½ jaar stilgestaan, terwyl onderhandeling tussen die Stadsraad en Mnr. Blersch in verband met sy status en besoldiging aangeknoop is.

'n Geregistreerde Argitek is sedertdien aangestel om die hele hospitaalskema te voltooi. Die Regering het £500,000 vir hierdie doel goedgekeur. Planne is voltooi vir omskepping van nuwe tehuse vir Nie-Blanke verpleegsters wat sedert 1950 nog nie in gebruik geneem is nie, in 'n 60 bed hospitaal vir Blanke T.B. lyers. Die bestaande hospitaal sal dan gebruik word vir die doel waarvoor dit oorspronklik opgerig is, naamlik huisvesting vir Blanke verpleegsters. Daar word tans gewerk aan planne vir die middelblok wat die administratiewe kantore sal bevat, sowel as 340 beddens vir Nie-Blanke Teringlyers en huisvesting vir Nie-Blanke verpleegsters. Op die oomblik word Nie-Blanke Teringlyers in Greystraat opgeneem en behandel.

16-3-55: Brewelskloof Sanatorium reaches final stage.

With the awarding of contract No. 4, last week, for building of water supply reservoirs, domestic staff quarters, Resident Engineers Residence, only the contract for the final section remains to be awarded for the Brewelskloof Sanatorium to be completed. Dr. Wilsen said that the last contract, for which tenders should be invited shortly, would be for the main block which would provide 320 to 240 beds for Non Europeans. The European block, containing 80 beds, is already completed. Construction of the main block will be a major undertaking and may take 2 years to complete at a cost of £200,000. It should be completed during 1957.

15-7-55: Gebou in 1956 eindelijk in gebruik.

Hierdie tweede blok van Brewelskloof Sanatorium wat bedoel was as woonplek vir verpleegsters is nou in 'n permanente hospitaal met 75 beddens vir Blanke Teringlyers omskep. Gebou staan leeg sedert dit voltooi is, het £65,000 gekos en verandering van £35,000 is pas aangebring - 2 hysers ingebou. Gehoop dat hospitaal binne 'n maand in gebruik geneem sal word.

29-6-56: Nedersetting binne 2 maande voltooi.

Dr. A. Wilsen het die Afdelingsraad meegedeel dat die tering nedersetting oor 2 maande gereed sou wees. Daar sal 200 beddens wees met 'n verdere 156 in Brewelskloof en dan sal die Tering hospitaaltjie in Greystraat gesluit word.

March 1957: T.B. Hospital to be completed.

The 400 bed Brewelskloof T.B. Hospital which was planned about 18 years ago, and of which 2 wings build some years ago, are already in use, is still awaiting completion. It has now been officially stated that tenders for the final block will be called for within 2 or 3 months. The hospital will make provision for about 65 European patients, the rest being for Non-Europeans. Meanwhile the T.B. settlement for Coloured families, Santa Weide, has been fully occupied and the authorities all have difficulties in removing from the settlement healthy children of patients. At present there are 18, the youngest are destined for the Sunshine Home, Bellville, while care and employment are sought for the older ones.

18 October 1957: £50,000 to be spent on final blocks at T.B. Hospital.

Accommodation and Staff to be almost trebled. The Worcester Municipal Council last week awarded the contract for the completion of the Brewelskloof Hospital Local Contractor, Mr. P. de Kock who tendered a price of £287,727. The contract comprises the erection of a 5 storey ward block for Non-European, Administrative Offices, X-ray, Theatre Blocks, Dispensary and Kitchen premises. Work which will take approximately 2½ years to complete, will bring to fruition the original scheme, which allows for a total of 508 beds in the hospital, of these 40 for Europeans and 468 for Non-Europeans. The amount of approximately £33,000 is being allocated for the equipment of the premises, and £6,000 for site works, such as fencing etc., £30,000 for architects, quantity surveyors and consultants fees. The completed scheme will have cost £570,000.

"The awarding of this contract brings to an end negotiations between the local authorities, the Government for the establishment of a regional T.B. Hospital in Worcester, a period of 15 years" said Dr. Wilson.

22-11-57: Worcester's Great T.B. settlement

The official opening ceremony of the Santa Weide T.B. Centre took place last Friday by Mr. Norman Reeler, Under-Secretary for Health. The purpose of the settlement is to provide recuperative treatment and an opportunity of convalescence for T.B. patients who had completed their time in hospital, but whose health was not yet such as to permit them to return to their homes.

28-5-59: T.B. Hospital Posts to be advertised.

Skeleton Staff of 52 for opening in 1960. Salary scale of Department range from £136 for lift operator to £2,100 for Senior Medical Officer. Dr. Wilson told The Worcester Standard that although the main block of the hospital is expected to be completed by the end of the year it will not be ready for occupation until well into next year.

24-6-60: Municipality takes over T.B. Hospital.

A scheme that saw its beginning more than 20 years ago and cost £570,000 reached its completion last Wednesday. On that eventful day the T.B. Hospital was taken over from the builders by the Municipality. During the past week patients have been moved into the hospital. The official opening will take place later. The hospital will serve as a training centre for nurses. European Staff comprising 350 members will work under Dr. Wilson who has been Superintendent. There will be 10 doctors on the staff. Training will encompass all races.

Whole institution consists of 3 buildings and cost more than £500,000 to build and contains 508 beds. It is hoped that it will be officially opened in July.

GESONDHEIDSJAAR 1979.

BREWELSKLOOF HOSPITAAL.

RELIKE OPENING van die Hoofgebou is op 1960.08.20 deur sy Edele Dr. Eben ges, Minister van Finansies in sy hoedanigheid as Parlements lid vir Worcester, rgeneem. Gaste was deur die Mediese Superintendent Dr. A. Wilsen en die rone Mej. B.C. Murray onthaal en die hospitaal aan die belangstellendes oopgestel besoek.

HOSPITAAL HET TOE BESTAAN UIT:

BLOK 1: Vir Blanke pasiënte, ge-open 25.9.1948 deur Dr. A.J. Stals, Minister van Gesondheid.

BLOK 11: In gebruik geneem gedurende 1956 na die sluiting van Greystraat hospitaal. Hierdie gebou was gebruik vir Nie-Blanke pasiënte tot 1960, en na die in gebruikneming van Blok 111 (Hoofgebou) slegs vir Nie-Blanke Vroulike Teringlyers.

BLOK 111: (Hoofgebou) ge-open soos bo gemeld. Bestaan eindelik uit 4 vloere vir behandeling van pasiënte, plus 'n vyfde verdieping vir opleiding van Ingeskrewe verpleegsters, en 'n Ontspanningssaal vir die pasiënte.

Op die grondvloer is die Kinderafdeling en die volgende:-

Administratiewe afdeling
Radiologiese " "
Operasiekamer, Apteek, Hoofkombuis
Eetkamers vir personeel

Die Magasyn, Werkswinkel, Was en Linnekamers is ook in hierdie gebou ingesluit.

Die hospitaal het baie aandag en belangstelling geniet van die plaaslike publiek besoekers van elders.

Die meeste studente van Universiteit Kaapstad, Universiteit van Wes-Kaaplandse Universiteit, en basiese Verpleegstudente van Stellenbosch en Kaapstad was ook deur hulle mediese personeel na die hospitaal gebring vir praktiese onderrig.

Die meeste mediese en Borskas-snykundiges van Kaapstad het die hospitaal gereeld besoek om pasiënte te ondersoek, behandeling aan te beveel en "as nodig" te reël vir operatiewe behandeling in stedelike hospitale.

Die meeste in gebruikneming van Blok 111 is die opleiding van Nie-Blanke Hulpverpleegsters mee begin.

Hoewel die hospitaal eintlik bedoel is om TERING pasiënte te behandel, is ander ernstige Siektes soos, byvoorbeeld Witseerkeel, Meningokokkale Meningitis, Tuberkulose (Ingewandskoors) ens., ook hier opgeneem vir behandeling.

Die meeste pasiënte is gedurende een nag meer as 120 gevalle van Ingewandskoors opgeneem. Die meeste pasiënte was met 'n konvooi Munisipale en Weermag ambulanse vervoer vanaf Port Elizabeth (ongeveer 650km). Halfweg het die konvooi by Nelspoort gestop, en die pasiënte is skoongemaak en gevoed en daarna is die rit na Worcester voortgesit.

MAL HET HERSTEL.

Gedurende 1965-68 was daar 'n groot epidemie van Meningokokkale Meningitis in Wes-Kaapland en daar was selde minder as 60 gevalle op 'n slag van hierdie siekte in hierdie hospitaal. Etlike honderde gevalle van hierdie siekte word gewoonlik jaarliks hier behandel. As gevolg van die verbeterde Openbare Gesondheidsdienste word steeds meer babas en kinders teen Polio en Witseerkeel betyds ge-immuniseer. -Gevolglik het die voorkoms van hierdie siektes baie afgeneem en dus die opname van sulke gevalle in hierdie hospitaal baie verminder.

Masels met komplikasies, bly egter sorgwekkend met 'n hoë sterfte-syfer onder kinders onder 5 jaar. Alhoewel Masels as sulks nie 'n aanmeldbare siekte is nie, is daar ten alle tye van die jaar gekompliseerde gevalle van Masels in hierdie hospitaal vir behandeling.

Met die nuwe benadering van tuis-behandeling van vroeë ontdekte gevalle van Longtuberkulose, het die getalle wat toegelaat word verminder, tot diegene met gevorderde of gekompliseerde siekte; gebrek aan toesig vir goeie tuis-behandeling en diegene met ongewenste sosio-ekonomiese toestande. Die hospitaal speel nog 'n groot rol in die behandeling van hierdie ongelukkige gevalle. Baie word weer in die gemeenskap en die arbeidsmark teruggeplaas.

Op die tweede vloer van Blok 3 het Brewelskloof 50 beddens tot beskikking van Eben Dönges Hospitaal gestel, waarheen mans, vrouens en kinders vir verdere behandeling oorgeplaas word terwyl daar 'n tekort aan bedde by die Algemene Hospitaal is.

Etlike studies/navorsing is waargeneem, byvoorbeeld :-

- (a) Die waarde van Widal reaksie in die diagnose van Tifoïed Koorse was deur Drs., H. Peisach en L. van Ieperlein nagevors.
- (b) Dr. A.C. Pilkington het toetse op die asemhalingstelsel gedoen.
- (c) Dr. J.H.C. Clarke het etlike geneesmiddelle getoets, bv., Rifampicin vir die behandeling van Tuberkulose op versoek van Dr. Donner 1972.
- (d) In 1973 het hy die uitwerking van Bactrim (Septrin) op 30 gevalle van vasgestelde Ingewandskoors bepaal.
- (e) In 1974, op die versoek van die "Medical Research Council, London" is die invloed van Tiasetasoon op long-tuberkulose vasgestel.

BETROKKENHEID:

Alhoewel dié aard van die hospitaal-bedrywighede verander het, geniet die pasiënte nog baie vriendelike welwillendheid van liefdadigheids, -en kerk organisasies sowel as private weldoeners. Hierdie samewerking en belangstelling ek dieselfde gees by die personeel en word van harte waardeur.

PERSONEEL.MEDIESE SUPERINTENDENTE.

Dr. A.A.J. Wilsen was vanaf 1944 Mediese Gesondheidsbeampte van beide Munisipale en Afdelingsrade, die hoof van Greystraat Hospitaal, Santaweide en later ook Mediese Superintendent van Brewelskloof hospitaal. Vanaf oomame deur die Departement Staatsgesondheid, was hy voltyds Mediese Superintendent totdat hy in 1967 na Windhoek met bevordering oorgeplaas was.

Dr. A.C. Pilkington het hom as Mediese Superintendent opgevolg; 'n pos wat hy beklee het met sy oorlyde op 5 April 1975.

Dr. J.H.C. Clarke, C.B.E., M.B.Ch.B., D.P.H., D.I.M & H., het Dr. Pilkington opgevolg tot sy aftrede in 1977.

Dr. T. Coetzee, M.B.Ch.B., ChM., F.R.C.S., F.C.S., M.D., M.R.C.P., D.P.H., D.I.H., was die 4de voltydse Mediese Superintendent vanaf 1.8.77 tot 31.12.78.

Dr. A.J.B. Viljoen neem waar vanaf 1 Januarie 1979.

MATRONES.

Mevr., C. de Goede was Matrone van Blok 1, Greystraat en later Santaweide vanaf Desember 1948 - Maart 1956.

Mej. N. Crighton het haar pos aangeneem en was deur Mej. B.C. Murray opgevolg met die ingebruikneming van Blok 3 in 1961 en behou haar pos tot aftrede 31.12.73.

DIE OPLEIDING VAN VERPLEEGSTERS.

Deur die ywer van Dr. A. Wilsen, Mej. B.C. Murray, die Voorsitter van die Munisipale gesondheidskomitee is verlof van die Departement van Gesondheid verkry om hulpverpleegsters volgens vereistes van die Suid Afrikaanse Verpleegstersraad op te lei. Mevr. H. de Villiers was die eerste dosente.

Alhoewel die omstandighede, benaminge verander het, word daar steeds Ingeskrewe Verpleegsters en Ingeskrewe Verpleegassistentie opgelei. Etlke plaaslike Opgeleide Verpleegsters het verdere studies suksesvol aangedurf en sommige het dubbeld gekwalifiseerd terugekom om hul tuisdorp te dien.

ERE ROL.

Met die verloop van tyd het etlike van die personeel die tydelike verwissel en sommige nadat hulle die diens verlaat het maar met wie die geval van kameraadskap nog bestaan het.

Mev. Herrer
 Mnr. Stanbridge X
 Mnr. Lesch X
 Joseph Morris
 Emsie Soyizwapi X
 Jacob Jephtha X
 Dr. A.C. Pilkington (6 April 1975)
 Mnr. G. van Breda (Aug. 76)
 Sr. M.N. Ndiki (30.5.77)
 Mnr. L. Erasmus (1.6.77)
 Karel Bosch (23.8.77)
 Dick Mfengu (4.77) X
 Mnr. J. van der Merwe X
 Dr. ~~Sonachan~~ X ~~D.R. STRACHAN~~ X
 Mnr. Thys Loubser X
 Mev. Sampson X
 Mej. C. Groenewald X
 Mnr. Singleton X
 Dr. Villet X
 Mnr. Theron
 Mnr. Bamard
 Mnr. de Villiers
 Mnr. du Preez X
 Mev. Lucas X
 S/V. Dreyer X
 Dr. Hugo X
 Juliana Titus X
 Liesbet Sibeko
 Freddie Heyns
 Mnr. S.J. le Roux
 Mnr. Gerber
 Dr. Smit X

X (Oorlede nadat hulle diens verlaat het).