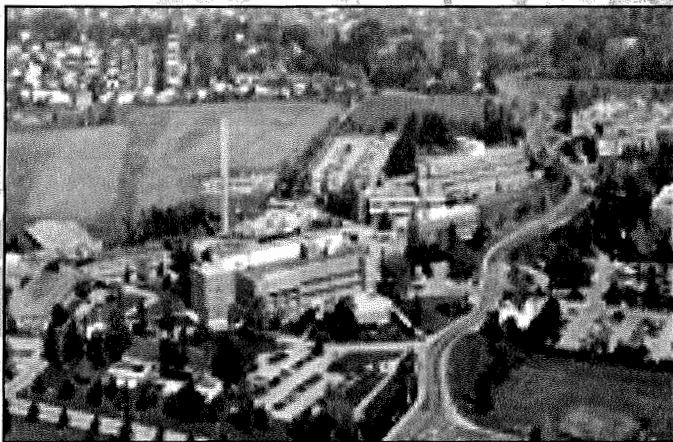


**CULTURAL HERITAGE RESOURCE
ASSESSMENT REPORT**

of the

**BRUCE MEMORIAL BUILDING,
SOUTHAM PAVILION, EVEL PAVILION,
AND BROW SITE**

**CHEDOKE CAMPUS
HAMILTON HEALTH SCIENCES
CITY OF HAMILTON, ONTARIO**



May 2006

**Prepared for:
Chedoke Health Corporation**

**Prepared by:
UNTERMAN McPHAIL ASSOCIATES**
Heritage Resource Management Consultants

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1.0 INTRODUCTION

Chedoke Health Corporation (CHC) retained Unterman McPhail Associates, Heritage Resource Management Consultants, to undertake a cultural heritage resource assessment for the Bruce Memorial Building, the Southam Pavilion and the Evel Pavilion located on the Chedoke Campus, Hamilton Health Sciences (HHS). The three buildings were built as part of the Mountain Tuberculosis Sanatorium in Hamilton. The sanatorium site, developed in the early 20th century, sits on the edge of the Mountain overlooking the City of Hamilton and Lake Ontario (**Figure 1: Location Plan**). Buildings were grouped at the 'Orchard' site on the south end of the property and the 'Brow' site at the north end (**Figure 2: Site Plan**). Civilian patients were housed at the Orchard site while the Brow site became a military sanatorium during World War I. The Bruce, Southam and Evel buildings were constructed at the Orchard site in 1921, 1928 and 1932 respectively.

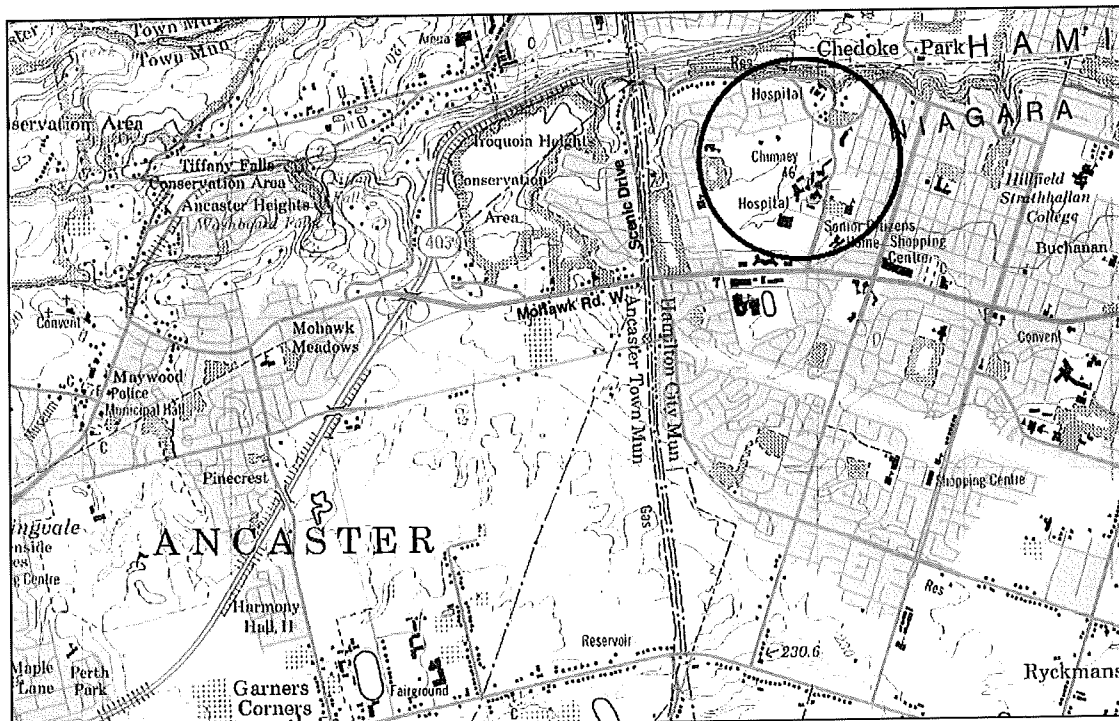


Figure 1. Location Plan of the Chedoke Campus, Hamilton Health Sciences, Hamilton. (National Topographical Series, Hamilton/Grimsby 30 M/4, Natural Resources Canada, 1996).

Unterman McPhail Associates undertook an earlier study of the Brow Site for the Scenic North Secondary Plan in 1999. The study assisted the City of Hamilton to conclude that the Brow Site of the Chedoke Campus cultural heritage landscape was of local heritage significance. This site was listed in the municipal inventory of heritage resources.

The City of Hamilton has requested the completion of the cultural heritage assessment for the Bruce, Southam and Evel buildings as supporting material for the long term planning of the site. The purpose of the assessment is to identify and evaluate cultural heritage

resources that may be affected by development of the property. In addition, it includes planning recommendations to minimize impacts to identified heritage resources. In order fully understand the planning initiatives for the whole HHS Chedoke site we have included the Brow Site history and conclusions to provide a background and context to the full site development potential. An individual cultural heritage assessment has been prepared for each of the three buildings.

A summary of the 20th century historical development of the property is included in Section 2. On-site fieldwork was undertaken on June 23, 2005 for the Bruce, Southam and Evel buildings. Exterior photography of the building was completed at that time. The cultural heritage landscape and the building are described in Sections 3 and 4, respectively. The heritage attributes of the properties are discussed in Section 5 while planning recommendations are found in Section 6. Historical maps, photographs and drawings for the property are included in Appendix A. Cultural heritage landscape photographs are found in Appendix B and photographs relating to the built heritage features are located in Appendix C.

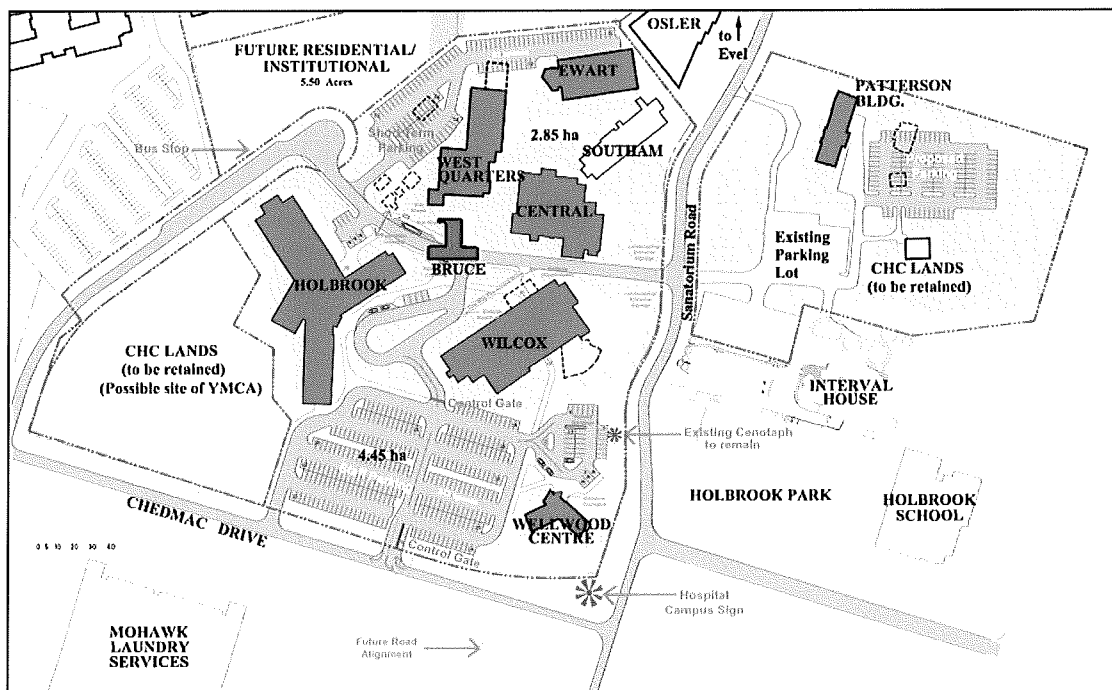


Figure 2: Site Plan.

2.0 HISTORICAL SUMMARY

2.1 Tuberculosis Sanatoria

Tuberculosis was a major cause of death in North America in the 19th century. Both the public and the medical profession firmly believed that it was unpreventable and incurable. As a result, little or no effort was made to isolate tubercular patients or to provide institutional care. With the discovery of the tuberculosis bacterium by German scientist, Robert Koch, in 1882, scientists realized that the disease was contagious. In the following years, the medical profession worked to develop techniques to prevent the spread of the disease.

Early theories on the treatment of tuberculosis emphasized the isolation of patients in a mountainous area with access to exercise and fresh air. The new facilities were based on the earlier model of health resorts or sanitarium. These health resorts were known for the combination of comfortable accommodation, good food and mineral springs for bathing or drinking. Bath in England, Baden-Baden in Germany and later Saratoga Springs in New York are well known examples of such sanitarium. In Canada the first anti-tubercular association used the name 'Sanitarium' in its charter. Early in the 20th century it was felt that a distinction should be made between health resorts and the new hospital for the treatment of tuberculosis. The new word 'sanatorium' was adopted for hospitals dedicated to the treatment of tuberculosis. When the Hamilton Health Association constructed its new facility in 1906, it became known as the Mountain Sanatorium. Most anti-tuberculosis institutions followed Hamilton's lead and used the term sanatorium in their names.

The first tuberculosis sanatoria were developed in Germany and Switzerland. The United States followed shortly afterwards with the construction of a facility in 1885 at Saranac Lake in New York State. Sir William Gage, a Toronto businessman and publisher, was the first Canadian to take an active interest in the fight against tuberculosis. He organized a meeting at the National Club, Toronto, in 1895 to discuss the problem of tuberculosis in Canada and the lack of Canadian treatment centres. The participants resolved to build isolated but accessible sanatoria for consumptives in Canada. The National Sanatorium Association (NSA) was founded in April 1896 to maintain and operate tuberculosis treatment facilities. The NSA opened the Muskoka Sanatorium, the first sanatorium in Canada, near Gravenhurst, Ontario in 1897. The association opened the Muskoka Free Hospital for Consumptives in Gravenhurst in 1902 and the Toronto Free Hospital for Consumptives in Weston in 1904.

The NSA did not construct any facilities in other provinces but set a precedent for the care of tuberculosis that was followed by other provinces. Sanatoria had been built right across the country by 1920. Some early Canadian sanatoria included: Highland View San, Nova Scotia, 1899 to 1903 and replaced by the Kemptville Sanatorium in 1904; King Edward San, Tranquille, B. C. in 1907; Laurentian San, Ste. Agathe, Quebec in 1908; King Edward Hospital, Winnipeg, Manitoba in 1912; Jordan Memorial San, River

Glade, New Brunswick in 1913; Dalton San, Charlottetown, P. E. I. in 1915; Fort Qu'Appelle San in Saskatchewan in 1917; St. Johns San, Newfoundland in 1917; and Bowness San in Calgary, Alberta in 1920. Other early facilities in Ontario included: Mountain Sanatorium, Hamilton in 1906, Royal Ottawa San in 1909, Queen Alexandra Sanatorium, London in 1910 and Queen Mary Hospital for Children, Weston in 1913.

The first sanatoria were located in isolated locales; however, the advantages of locating the facilities closer to centres of population were soon recognized. Such sites would be more convenient for the patients and their families and it would be easier to obtain staff and consultations from nearby general hospitals. As well supplies for the facilities would be more accessible and less expensive to obtain. Subsequently, many sanatoria were built close to the urban centres they served. They offered a supervised diet, exercise and morale boosting diversions.

Some late 19th century hospital design elements and new building technology and materials were incorporated into the sanatoria. They included the military field hospital concept of small, isolated, well-ventilated buildings, relatively inexpensive to build and operate, and visually pleasing in design. The cottage hospital system with its central administration building and numerous smaller residential units was used as well. Open-air verandahs became an integral part of the sanatoria design.

Interior design features adopted for sanatoria included the elimination of hard to clean interior mouldings including baseboards, chair-rails and cornices and the introduction of rounded junctures between floors, walls and ceilings for better dust control and easier cleaning. New non-absorbent and washable surfaces such as fine-graded Portland cement for walls and ceilings, enamel paints and linoleum and terrazzo floor finishes were also incorporated for sanitary reasons.

2.2 Mountain Sanatorium, Hamilton

The Hamilton Board of Health and interested citizens formed the Hamilton Health Association (HHA) in 1905, the first purely local anti-tuberculosis association in Ontario. The HHA was formed with the goals of educating the public about tuberculosis and providing local care.

Mr. Long and Mr. Bisby, local realtors, donated the former William Macklem farm consisting of 96-acres of land in Lot 57, Concession 2, Ancaster Township, for a proposed Hamilton Sanatorium. The *Hamilton Spectator* (1905) described the Mountain site as being above the City of Hamilton with more than half a mile of brow front. The property included a fine brick house, a splendid barn and outbuildings and a large front of wooded land with a stream running through it as well as a fine view of Hamilton and the Lake Ontario from the brow.

The HHA established the sanatorium on the southerly part of the property in the orchard of the former Macklem farm some distance from the brow's edge. His Excellency the

Governor-General Earl Grey officially opened the Hamilton Sanatorium on May 28, 1906. Its first patients were housed in two tents. The HHA built numerous buildings on the Orchard site between 1906 and 1913 including: several patient shacks; doctor's residence/dispensary; Crerar Recreation Hall; Grafton Infirmary; Nurses' Residence; Empire Pavilion; Preventorium to house children with tuberculosis and staff residences. The "San" farm using the Macklem farm buildings was opened in 1914.

Between 1910 and 1914 well-constructed and equipped hospital buildings replaced the inexpensive, temporary, patient shacks initially favoured for sanatoria. The early, optimistic view of the medical profession that tuberculosis could be eradicated quickly, shifted to the promotion of long-term care and treatment as well as surgical remedies. Consequently, sanatoria buildings were modeled after modern hospitals with special provisions for fresh air in all wards.

The City of Hamilton passed a by-law in 1913 to grant \$100,000 to the HHA to build a new, permanent, fireproof, infirmary for 100 tubercular patients at the Mountain Sanatorium. The infirmary was to house all types of tuberculosis patients. Due to the inadequacies of the water supply and sewage system at the Orchard site, the HHA decided to build the infirmary at a new location at the north end of the site. The Brow site as it came to be known was designed as a self-contained facility with all services except for laundry. The infirmary was opened on December 5, 1916 and immediately 75 of its 100 beds were assigned to the Military Hospital Commission (MHC) as a care facility for returned Canadian soldiers with pulmonary tuberculosis. In return, the government agreed to provide funds for an equal amount of beds in temporary extensions to the existing patient shacks on the Orchard site. There was a desire at this time to keep civilian and soldier patients in separate facilities. The civilians remained housed at the Orchard site while the MHC expanded the Brow site for the returned soldiers.

Both the Orchard and Brow sites were connected to city water and sewage systems by the end of 1918. At the same time, the road to the sanatorium sites had been upgraded to a first class macadam roadway and the Dominion Government granted money towards the construction of a road between the Orchard and Brow facilities.

During the 1920s and 1930s the HHA expanded the Mountain Sanatorium facilities principally on the Orchard site. A central heating plant was built in 1935 replacing the individual heating systems in every building. Dr. Holbrook, the Medical Superintendent from 1917-1945, broadened the Mountain Sanatorium catchment area beyond Hamilton and Wentworth County. As free diagnostic clinics expanded in southwestern Ontario, more beds always seem to be in demand. Several buildings were built on the Orchard site between 1920 and 1938 including, Bruce Building (1921), Empire Pavilion (1926), Southam Pavilion (1928), Evel Pavilion (1932), Patterson Building 1 (1932), Moreland Residence (1937), Wilcox Pavilion (1938), as well as kitchen, laundry and staff houses. The last military patients were placed on a civilian list in 1923 and at the Brow site, the HHA only built the Long and Bisby Nurses' Residence and a duplex doctors' residence.

By 1932 the Mountain Sanatorium had become the largest institution in Canada for the care of tuberculosis.

The 1950s saw significant changes in the treatment of tuberculosis. The average stay at the sanatorium in 1949 was 562 days. With the development of successful drug therapies during the late 1940s and early 1950s, this number dropped until in 1968, the average stay was 114 days. The HHA had to find new uses for the empty beds and in 1958 the charter for the HHA was expanded to allow it to operate as a general hospital. At the same time, at the request of the Department of National Health and Welfare, Inuit patients were flown in for treatment for tuberculosis. Between 1958 and 1963, 1,274 Inuit patients were treated at the Mountain Sanatorium. After this time, tuberculosis ceased being the focus of the HHA's mandate. The Holbrook Pavilion providing new children's wards was built in 1951 on the site of the earlier Preventorium; however, during the rest of the 1950s the trend was to renovate existing buildings to meet new uses rather than to construct new facilities. The Wilcox Pavilion was adapted for use as a 226-bed general hospital and re-opened on December 6, 1960 as the Chedoke General and Children's Hospital.

The trend of adaptive reuse continued during the 1960s with the renovation of the Southam and Evel buildings to accommodate new mandates. Of note at this time was the closure of Sanholm Farm in 1968, which had been part of the Sanatorium since the beginning, using the original Macklem farmstead, 37-acres along Mohawk Road exchanged for 18-acres of Brow property in 1912 and 10 acres of the Smith farm purchased in 1913. The farm included a dairy herd, piggery, hennery and an apiary, which provided milk, butter, eggs, honey and meat to the Sanatorium. Hay, oats, wheat and straw were grown as fodder. The farm equipment and livestock were sold at auction in 1969 and the land was redeveloped.

The HHA changed its name in 1971 to Chedoke Hospitals as the operating body of Chedoke General and Children's Hospital, the Mountain Sanatorium, the Brow Infirmary, the Chedoke-McMaster Centre, the Hamilton and District School of Medical Technology, the Hamilton and District School of Radiography and sponsoring the Hamilton and District School of Nursing. As a result of provincial legislation transferring funding for all tuberculosis sanatoria to general hospitals in 1972, the name Mountain Sanatorium was changed to the Respiratory Disease Unit (T. B.). Chedoke Hospitals amalgamated with McMaster University Medical Centre in 1979 to become Chedoke Division of Chedoke-McMaster Hospitals. Chedoke-McMaster Hospitals joined with Henderson Hospital and Hamilton General Hospital in 1995 to form the Hamilton Health Sciences Corporation.

2.3 Bruce Memorial Building

When the Mountain Sanatorium first opened in 1906, there were no dedicated facilities for children with tuberculosis. A separate building for children, named the Preventorium, was constructed in 1910. Originally housing 20 young patients, the two storey, frame Preventorium was enlarged several times and by 1921 had a capacity of 80 patients.

John A. Bruce, owner of J. A. Bruce Seed Co., bequeathed \$100,000.00 to the HHA in 1920 to provide a further expansion to the Preventorium. It was later decided the funds would be used for a separate building that would provide a number of services to support the children's wards. The two-storey building was located beside the Preventorium at its northeast end (*Appendix A*). At the time of construction, one-storey frame patient shacks were situated between the Bruce Building and Sanatorium Road and a water tower was located on the south side of the structure. The building included classrooms, kitchen, dining room and a workshop for the children, an operating room and an office for a visiting dentist. Accommodation for doctors, nurses and teachers who lived on the site was provided on the second floor.

Beckett and Akitt, Architects of Hamilton designed the Bruce Building and Piggott and Healey Construction Company acted as the general contractors. The overall cost was close to \$55,000.00. The building was described at the time as a modern, fireproof structure, using Don Valley brick and terrazzo floors. An architect's rendering and historic photographs indicate that the large ground floor window openings were fitted with five sets of operable sash to maximize ventilation in the classrooms, consistent with the prescribed treatment for tuberculosis (*Appendix A*). Officially designated the Bruce Memorial Building, the building opened on June 17, 1921 at a ceremony with Col. Harry F. Cockshutt, Lieutenant Governor of Ontario, officiating.

The Ancaster School Board took over the work of the Mountain Sanatorium School board in September 1947. The classrooms were converted to offices and the dining room was renovated for use as a staff cafeteria in 1948. At the same time W. H. Cooper, contractor undertook an expansion of the kitchen. The Preventorium was demolished in 1952 to make room for the new Holbrook Pavilion. That same year, the basement of the Bruce Building was renovated for rehabilitation workrooms. The incinerator removed and the chimney taken down to just above the roof line. The Community Psychiatric Hospital took over the building in 1965. Further work was undertaken in 1968 when the building was renovated once again to accommodate the Child and Family Centre's nursery school. Additional renovations were carried out in the 1990s including the replacement of the original wood window sash.

2.4 Southam Pavilion

The Southam Pavilion was constructed in 1928 to provide accommodation for 76 patients, laboratory space and a morgue. All the laboratory work for the sanatorium was done in the basement of the new building. The construction of the Southam Pavilion marked the end of the second era of the Mountain Sanatorium. Shacks, fresh air and good nutrition characterized the first era and rest and bed care the second. With the Southam Pavilion the total beds had grown to 445. The death rate from tuberculosis in Hamilton had dropped from 125.9 per 100,000 in 1906 to 45.5 in 1929, a favourable comparison to the national tuberculosis mortality rate of 68 per 100,000 for the same year.

Mr. and Mrs. William Southam donated more than \$128,000 to build and furnish the pavilion on the occasion of their 60th wedding anniversary in 1927. The Southam family had been supporters of the HHA since its inception and was the primary benefactor of the Southam Home for Incurables constructed in Hamilton in 1910 for the care of advanced cases of tuberculosis. William Southam was a member of the Board of Directors of the HHA from 1906 until his death in 1932. His wife held executive positions with the Ladies Auxiliary Board from 1906 until her death in 1928 and established a fund in 1926 to create diagnostic clinics throughout southwestern Ontario. Portraits of W. J. Southam and Mrs. W. J. Southam were unveiled as the "Southam Memorial" at the opening of the facility.

William Southam was born in Montreal in 1843. He began his career in the newspaper business as a delivery boy and subsequently, an apprentice printer with the *London Free Press*. He became part owner of the *Free Press* in 1867 and, with a partner, gained control of the *Hamilton Spectator* in 1877. William Southam went on to assemble Canada's largest newspaper chain including the *Ottawa Citizen*, *Edmonton Journal*, *Winnipeg Tribune*, and *Vancouver Province*, as well as the Southam News wire service. William Southam lived in Hamilton at 'Pinehurst', 132 Jackson Street West from 1891 to 1932.

W. P. Witton, Architect designed the Southam Pavilion with W. H. Cooper as the general contractor. In his design, Witton used setback verandahs, as advocated by the consultant architect to the Federal department of Soldiers' Civil Re-establishment. Unlike the existing buildings on the Orchard property, the Southam Pavilion was oriented to the southeast to allow for sunshine while protecting the wards from the prevailing winds in the cooler months, improving the comfort of the unheated wards. The Southam Pavilion also used a four-bed unit adopted from the National Sanitarium Association's new infirmary at Gravenhurst. Viscount Willington, Governor-General of Canada, presided over the opening ceremonies of the Southam Pavilion on October 28, 1928.

Both Witton and Cooper were responsible for the design and construction of several buildings at both the Orchard and Brow sites of the Mountain Sanatorium. William Palmer Witton was born in 1871 in Hamilton, Ontario. Educated and trained in Chicago, he returned to Hamilton in 1895. Witton formed an architectural practice with Walter

Wilson Stewart in 1904. Stewart and Witton designed the Brow Infirmary in 1915. After Stewart's death in World War I, Witton joined in partnership with W. J. Walsh and designed the Bisby and Long Nurses' Residence at the Brow. In addition to the Mountain Sanatorium buildings, Stewart and Witton, later Witton and Walsh, were responsible for the design of many local Hamilton and district buildings. The practice of Witton and Walsh undertook a new wing for Central Secondary School, addition to West Avenue Public School (1921), reconstruction of McIlwraith School, George R. Allan School, addition to Lloyd George School (1928) and a large addition to Mount Hamilton Hospital (1931). Witton retired in the mid-1930s and sold the practice to his partner.

William Henry Cooper, contractor, was born in 1875 in England. A bricklayer by trade, he formed the Cooper Construction Company at the start of the 20th century. Initially the firm operated as a brick and masonry yard working mainly in residential construction. The company moved onto larger projects, including many of Hamilton's notable buildings including the Normal School, Maternity Hospital, Melrose United Church, Lobby-Owens glass Company, N. Slater Company, Mercury Mills, Proctor and Gamble, T. H. & B. railway station, Hamilton Hydro office and several buildings at McMaster University. At the Mountain Sanatorium, Cooper Construction Company worked on the Long and Bisby Nurses' Residence, Holbrook Pavilion, and additions and repairs to several buildings including Bruce Memorial Building and Evel Pavilion.

With the decreasing demand for beds dedicated to the care of tuberculosis, the Southam Pavilion was extensively renovated in 1960 to accommodate new uses. The building was modified to house a fully integrated laboratory for all units of the Mountain Sanatorium. Matthew B. Dymont, Ontario Minister of Health, officially re-opened the renovated Southam Pavilion in February 1963 and members of the Southam family inspected the renovations. The Annual Report of the HHA (1963) reported that:

"The changes inside the building are so profound as to render it almost unrecognizable even by those quite familiar with its former contours. The entire top floor has been rearranged and equipped to accommodate the Hamilton and District School of Medical Technology. This part of the renovation was rushed to completion in advance of other areas and the school was able to begin its tenancy as early as Nov. 1962. The middle floor has been re-designed to contain the main divisions of clinical pathology viz: microbiology, biochemistry, haematology and blood bank. The ground floor was reconstructed to provide suitable rooms for morbid anatomy, museums and out-patient laboratory services. At the end of this level a very fine medical library and reading room has been established. The furnishings for the latter were the donation of Mrs. J. H. Lee in memory of Dr. Joseph Lee, a member of San staff for many years. This library, which subscribes to 44 medical journals and possesses a goodly number of medical books, is for the use of all doctors on active or courtesy staffs of the Hamilton Health Association hospitals."

The Hamilton and District School of Medical Technology required additional space by 1965 to increase its enrollment from 78 to 125 students. Preliminary plans proposed a three storey additional at the rear of the Southam Pavilion. The resulting expansion was accommodated in a stand-alone structure connected by a three storey walkway to the Southam Pavilion. The Hamilton and District School of Medical Technology, opened in 1968, was renamed Ewart Building in 1999.

2.5 Evel Pavilion

The Evel Pavilion was constructed in 1932 at a cost of \$240,000. The federal and provincial governments provided financial assistance to the project through the unemployment relief programmes established during the Great Depression. Based on the experience gained at the Southam Pavilion, a four storey building oriented to the southwest with the distinctive setback verandahs was constructed to provide accommodation for 155 patients. Later expansions increased bed capacity to 185. The building initially housed all the admission services for the Sanatorium on the ground floor. The second and third floors were devoted to four patient ward units along the southeast side of the building with offices and treatment rooms along the northwest side. The top floor contained the first operating rooms for the department of chest surgery.

The building was named after the late James Joseph Evel, one of the founding members of the HHA and president for 24 years. Evel was born in Plymouth, England in 1849 and apprenticed there as a cabinetmaker and builder before immigrating to Canada. He arrived in Hamilton in 1871 and worked briefly in the Great Western Railway shops before returning to his trade. Evel went into business making caskets and entered into partnership with Arthur Wellesley Semmens to provide undertakers' supplies. By 1902, Semmens and Evel employed over 100 people at their factory on Florence Street. Evel founded the Evel Casket Co. in 1908. He died in Hamilton in 1932.

Hutton and Souter, Architects were responsible for the design and construction of the Evel Pavilion. Gordon Johnston Hutton was born in Hamilton in 1881. He attended Hamilton Collegiate Institute and served an apprenticeship with Charles Mills in Hamilton. Hutton worked with Frost and Granger in Chicago from 1902 to 1905 before rejoining Mills' firm. He became a partner in 1908 and the firm was known as Mills and Hutton until Mills retired in 1914. Hutton worked alone until 1921 when the firm of Hutton and Souter, Architects and Engineers was created with William Russell Souter, a former apprentice of Mills. Projects of the firm included many notable industrial commissions such as plants and offices for the Chrysler Corporation of Canada in Windsor and Chatham, General Motors of Canada factory in Oshawa, H. J. Heinz office and plant in Leamington, National Steel Car Limited, Otis-Fenson Elevator Co. expansion, Steel Co. and west end plant of Westinghouse of Canada. The firm designed well-known public buildings in Hamilton, such as the Basilica of Christ the King, Post Office and Royal Connaught Hotel. After Hutton's death in 1942, Souter carried on the firm, later partnering with John T. Bell and C. J. Howard in 1947 and with his son, William C. Souter in 1963.

With the advent of drug treatments for tuberculosis in the 1950s, long-term isolation for patients was no longer required. The Evel Pavilion was selected as the temporary site for the Chedoke General and Children's Hospital while the Wilcox Pavilion was under renovation. The Chedoke General and Children's Hospital officially started operation on March 6, 1960. The decision to launch the general hospital in the Evel Pavilion allowed the hospital to assemble the staff required for the hospital while permitting general hospital procedures to be developed with a relatively small number of patients.

The Evel Pavilion in 1960 featured 232 beds, of which 80 were reserved for children. The admitting room, emergency operating theatres, X-ray department and administrative facilities were located on the ground floor. The children's wards were assigned to the second floor while the third floor contained a mixture of private rooms, two-bed wards and four-bed wards. The operating rooms, recovery rooms and surgical bed accommodation were located on the top floor.

By February 1963 the Wilcox Pavilion was operating fully as the Chedoke General and Children's Hospital. At that time the Evel Pavilion was closed for renovations to convert the space for use as a rehabilitation facility. Husband and Wallace, Architects, Hamilton and Robertson-Yates Corporation Limited carried out the work. The building reopened in January 1964 as the Hamilton and District Rehabilitation Hospital. An entry vestibule with open concrete frame entrance porch with glazed brick panel and enclosed stairwells at both ends of the building were added at this time. The ground floor contained physiotherapy and occupational therapy, gymnasium, small pool, doctors' offices as well as a chapel. Accommodation on the second floor included wards, nursing station, conference room, craft room and treatment room. The third floor retained the old operating rooms in addition to occupational therapy and treatment rooms. The Hamilton and District Rehabilitation Hospital moved into the Holbrook Building in 1967. The Evel Pavilion then became the maternity ward for the general hospital. It has also housed the respiratory diseases unit and the Alcohol and Drug Addiction Foundation and was the base for the Child and Family Centre.

2.6 Brow Site:

Initial Development

Southam Home at the City Hospital was providing care for advanced cases of tuberculosis in Hamilton by 1910. However, patients with advanced cases continued to go to the Mountain Sanatorium. As a result, the City of Hamilton passed a by-law in 1913 to grant \$100,000 to the Hamilton Health Association to build a new, permanent, fireproof, infirmary for one hundred tubercular patients at the Mountain Sanatorium. The infirmary was to house all types of tuberculosis cases.

Due to its inadequate water supply and sewage systems at the Orchard site the HHA decided to build the new infirmary on a different location. The HHA selected the present Brow site for its new infirmary principally for its view and proximity to the stair access

up the Mountain. The brow site was designed as a self-contained facility with all services except the laundry. After some study in the United States, Hamilton architects Stewart and Witton incorporated the ward plan used at the Metropolitan Life Sanatorium, Mount MacGregor, New York, into the new infirmary design.

The ground for the infirmary was broken on May 15, 1915, and it was opened December 5, 1916. When built it faced southeast for maximum sun exposure rather than towards the view from the Brow. Two-storeys in height, the infirmary building was built of reinforced concrete and hollow tile a buff brick facing. The design allowed for a future third storey if needed. The distinctive feature of the infirmary was its ward arrangement with inner rooms heated in winter and separated by folding doors from the balconies. Each ward, except the isolation ward, had a balcony and a bed on castors. The ground floor had twenty-two beds and twenty-eight on the second floor. The ground floor also had two isolation wards while the second floor had five. Each balcony had a double hung window sash, sliding shutters and wire screens that could be lowered below the sill when conditions permitted. The shutters, when opened upward, permitted free airflow while keeping out the sun, wind or rain.

The ground floor also contained a nurses' room, examining room, waiting room and pharmacy to the right of the main entrance vestibule and offices, the medical superintendent office and a laboratory to the left as well as the main kitchen, storeroom, staff dining rooms. A diet kitchen and serving rooms and bed and sitting rooms with a sleeping porch for the doctors were located on the second floor.

Immediately upon completion, the Hamilton Health Association assigned seventy-five of its one hundred beds to the Military Hospital Commission as a care facility for returned Canadian soldiers with pulmonary tuberculosis. In return, the government agreed to provide funds to add an equal amount of beds in temporary extensions to the existing patient shacks on the Orchard site.

World War I

The high incidence of infection from pulmonary tuberculosis in the Canadian military forces during World War I created a demand for treatment beds that could not be met by existing Canadian sanatoria. The privately-owned or provincially run sanatoria were generally too small with inadequate bed space.

The Military Hospitals Commission (MHC) took over the co-ordination of the medical care needed for Canadian soldiers suffering from pulmonary tuberculosis in August 1915. Under the MHC, the Department of Soldiers Civil Re-establishment had the task of finding treatment facilities for the returning soldiers with tuberculosis. Initially the existing sanatoria accepted soldiers as patients where beds could be found. Then the Department of Soldiers Civil Re-establishment arranged to use sections of existing sanatoria exclusively for the soldiers. Finally, after much discussion, the MHC decided to provide capital financing to expand existing sanatoria rather than build its own

permanent facilities. This building programme greatly increased the tuberculosis care facilities across Canada.

The Department built its first Ontario extensions at the Mowat Sanatorium, Kingston. Then it built two, thirty-two bed pavilions (East and West Pavilions), a patient dining room and a vocational workshop, designed by the Chief Architect's Branch, at the Brow site of the Hamilton Mountain Sanatorium Hamilton in 1917. The former Engineers' Double Cottage was built in the same year by Stewart and Witton for the HHA.

The East and West Pavilions comprised two storey red brick buildings with a small basement area off the north elevation, concrete foundation walls and footings. The wards in the pavilions were located across the front or south elevation of the two storey buildings. Large windows provided ample sunlight and fresh air. Service areas and offices were located on the north elevation or back of the building. A two storey bay window projection was located in the centre of the front elevation while an entrance door was found at each end of the elevation. Stucco panels accentuated the bay projection. The Brow pavilions were similar in design and exterior detailing to those built by the Department at the Byron Sanatoria.

By the end of 1918 the Orchard and Brow sites were both connected to city water and sewage systems and the road to the sanatorium sites had been upgraded to a first class macadam roadway. The Dominion Government granted money towards the construction of a road between the Orchard and the Brow facilities in 1918. The last military patients at the Mountain Sanatorium were placed on a civilian list in 1923.

Built in haste, the military buildings at the Brow did not conform to the HHA's original design concept for a compact institution. As a result, after the war, the HHA's abandoned its plans for an extended, complete unit at the Brow in favour of expanding the Orchard site.

Intermediate years: 1920-1960

During the 1920s the HHA expanded the Mountain Sanatorium facilities principally on the Orchard site. At the Brow, the HHA built only the Long and Bisby Nurses' Residence (1920), named for its benefactors, Mr. W. D. Long and Mrs. George H. Bisby, and a duplex doctors residence (1921). Hamilton architect W. H. Witton designed the Long and Bisby Nurses' Residence while local contractor W. H. Cooper supervised the construction. Hamilton citizens, societies and commercial institutions donated its interior furnishings. The duplex was designed by architects Witton and Walsh and built by W. H. Cooper. It was not until 1937 when the Moreland Residence, a dormitory building for male employees, was built that the Brow site underwent any further changes. The East Pavilion was renovated for a Rehabilitation Centre in 1952. In 1953 the Cross of Lorraine was erected on the brow. This illuminated double barred cross was built to serve as a constant reminder of the tuberculosis campaign and the hospital site. Residences 17, 18 and 19 were built to house married doctors in 1953. In 1958-59 the Brow Infirmery

was converted by Frid Construction Co. Ltd., to a hospital for convalescent and chronically ill patients.

1960-Present

The Insurance Plan (1960) depicts the following buildings on the Brow site: Houses No. 17, 18 and 19 at the main site entrance, double houses No. 13 and 14 and double house No. 15 and 16 with garages, the Long-Bisby Residence, the Brow Infirmary (No. 1); the East pavilion (No. 2), the West Pavilion (No. 2), the Vimy Ridge Pavilion (No. 4), the Occupational Therapy Building (No. 5), the Dining Room (No. 6) and the Moreland Residence (No. 11). The same year, the Pavilion was leased to the Institute of Physical Medicine and Rehabilitation. The Dining Room was converted to a staff cafeteria in 1960. The School of Medical Technology was moved into the West Pavilion in 1962. The Doctor's Residence/Nurses Residence/Business Managers Office at the Brow was demolished in 1964.

Renovations for a Substance Abuse Treatment and Education Centre were undertaken in 1978. The Long and Bisby Building housed the Cool School, an alternative high school from 1973-1983. From 1983 to present the Day Care Centre for Employee's Children has occupied the building.

The name of Mountain Sanatorium changed to Chedoke Hospitals in 1971. The Brow Infirmary name became the Chedoke Continuing Care Centre two years later. The Chedoke Hospitals amalgamated with McMaster University Medical Centre to become Chedoke Division of Chedoke-McMaster Hospitals in 1979.

Architects

The Brow Infirmary was designed and built by the Hamilton architectural firm of Stewart and Witton. Stewart and Witton, later Stewart and Walsh, was responsible for the design of numerous buildings at the Brow and Orchard sites of the Mountain Sanatorium between 1914 and the 1920s.

Walter Wilson Stewart, born in the United States, moved to Toronto in 1872 at one year of age. The family moved to Hamilton in 1885 where Walter took up his architectural studies. He joined his father's firm as part of Stewart and Stewart and then practiced in Cleveland, Ohio, in the early 1900s. He returned to Hamilton in 1904. William Palmer Witton was born in 1871 in Hamilton, Ontario. Educated and trained in Chicago he returned to Hamilton to practice architecture in 1895. Witton and Stewart formed an architectural practice in Hamilton in 1904. The firm built schools in Brantford, Paris, Galt and Dunnville under the name Stewart, Witton and Taylor in Brantford.

Stewart and Witton were responsible for designing and building many local Hamilton and district buildings apart from the Mountain Sanatorium facilities from 1904 to 1917. They included: collaboration on a new facade and addition for the James Street Armouries; the

Galt Collegiate Institute, Wentworth Street School addition, additions to Picton Street School and Sophia Public School, King George School, Picton Street School addition and Earl Kitchener School; the Herkimer Baptist and St. Giles churches; and the I.O.O.F Temple, the Otis-Fensom (elevator) factory, the Orange Hall, and Merrick Street theatre, Mary Street Police Station, Home for the Incurables and Isolation Hospital.

Col. Stewart was killed in action during World War I. Witton joined in partnership with W. J. Walsh in 1920 and was responsible for the Bisby and Long Nurses Residence at the Sanatorium as well as a large addition to the Mount Hamilton Hospital in 1931. Witton retired in the mid 1930s and died in June 1947.

3.0 CULTURAL HERITAGE LANDSCAPE

3.1 Area Context Orchard Site

The former sanatorium site sits on the edge of the Niagara Escarpment, known locally as the Mountain, overlooking the City of Hamilton and Lake Ontario. Prior to its acquisition in 1905, the 96-acre, relatively flat property was in agricultural use. The property was selected for sanatorium use as it was close to the City of Hamilton but at the same time physically removed. Its position on top of the Mountain provided access to fresh air felt to be beneficial to the treatment of tuberculosis.

The Mountain Sanatorium is comprised of two distinct grouping of buildings: the Orchard site to the south used for civilian patients from 1906 on and the Brow site to the north developed for military use during World War I. The Bruce Building, Southam Pavilion and Evel Pavilion form part of the Orchard site, so named, as the early buildings were located in the orchard of the former farmstead. The Orchard site is a campus of institutional buildings set within a landscape of planned gardens, open space and woodlots. A curvilinear road connects the Orchard and Brow sites.

The first patients were housed in two tents at the Orchard Sanatorium. The tents were replaced by simple, one storey, wood frame buildings referred to as 'shacks'. The shacks were generally oriented east to west or north to south around the edges of the apple orchard, leaving an open space in the middle. Staff residences, administration buildings and service structures were placed to the outside of the shacks.

Brick replaced wood as the predominant building material after 1920. Buildings constructed from 1920 to 1926, such as, the Bruce Memorial Building, Laundry and Kitchen, were relatively small scale, two storey brick buildings. They retained the same orientation as the earlier buildings on the site. It was at this period that Sanatorium Road was constructed between the two sanatorium sites. This curvilinear roadway contrasted with the linear pattern of the surrounding fields, treelines and concession roads. It became the major thoroughfare through the site with buildings located on either side and facing

the roadway. It retains this role today leading to buildings and parking lots and allows bus service along the road.

The construction of the Southam Pavilion in 1928 provided a new approach to the siting and scale of buildings at the Orchard Sanatorium. Set to the north of the existing buildings, the two storey building was oriented southeast to maximize exposure to the sun with patient sleeping porches lined up along this side of the building. The Evel Pavilion constructed in 1932 followed a similar orientation and layout although the building incorporated three floors of patient rooms. The appearance of the Orchard Sanatorium changed significantly with the construction of the Wilcox Pavilion in 1938. It follows the same orientation as the Southam and Evel Pavilions but it was placed in the middle of the orchard. It dwarfed the surrounding buildings and resulted in the removal of some of the earlier shacks and much of the orchard vegetation.

Historical photographs depict the open grounds beside the buildings being used for functions, such as bands, for the entertainment of the patients.

In the intervening years, the City of Hamilton has developed to the sanatorium site. The agricultural lands that initially surrounded the Mountain Sanatorium have been redeveloped in recent years for residential use. When the Sanholm Farm was closed in 1968, the land was declared surplus to the requirements of the hospital and sold. Only 60 acres of the earlier land holdings currently remain part of the hospital site. The Hamilton Health Sciences Corporation is currently developing a master plan that will result in the disposal of additional sections of the site.

Photographs of the cultural heritage landscape are contained in Appendix B.

3.2 Site Description Bruce Memorial Building

The Bruce Memorial Building is located on the north side of a short drive that runs west from Sanatorium Road. It was sited originally to provide easy access from the adjacent Preventorium. The drive accesses both the Bruce and the Wilcox Buildings. A turning circle is located in front of the Bruce Building. A service drive at the east end of the building leads to the rear and connects with Central Building and West Quarters. A concrete sidewalk in front of the building leads the Holbrook Pavilion to the southwest. A square concrete curb defines the roadway, parking and sidewalk.

The Bruce Building is oriented east to west with a one storey wing extending north from the rear wall. A walkway leads from the sidewalk to the front entry, set midway along the south (front) elevation. A grass yard borders the front and sides of the building with clipped hedge along the south elevation and individual tree plantings to the east and west. The site slopes away gradually to the north. A fenced playground is set beside the northwest corner of the building while parking is provided at the northeast corner. In

terms of siting, design, materials, size and age, the Bruce Building relates to the original parts of the Central Building and West Quarters.

3.3 Site Description Southam Pavilion

The Southam Pavilion is located on the west side of Sanatorium Road. At the time of its construction in 1928, it stood by itself in an open landscape at the north end of the Orchard San. While the older buildings to the south were oriented north to south and east to west, the Southam Pavilion was dramatically shifted to face southeast. The Evel Pavilion (1932) and the Wilcox Pavilion (1938) followed the siting established at the Southam Pavilion.

The site slopes gently downwards to the northwest so that the two storey building extends three storeys along the northwest wall. The narrow front elevation faces northeast with an entrance porch at the northwest corner. A drive from Sanatorium Road formerly led into the site at the north end and extended around to the main entry. The drive was likely removed at the time of construction of the Ewart Building in 1968. Views south along Sanatorium Road to the front elevation of the Southam Pavilion have been obscured with the introduction of the Osler Building. Asphalt walkways run from the main entry to the sidewalk along the Sanatorium Road and to the Ewart Building. A triangular piece of land between Sanatorium Road and the Southam Pavilion has been landscaped with grass lawn interspersed with individual and grouped plantings of deciduous and coniferous trees and ornamental plantings. Historical photographs indicate that the lawn with plantings was initially graded up to the edge of the ground floor verandahs (*Appendix A*). A three storey walkway connecting the Ewart Building and the Southam Pavilion meets the northwest wall of the Southam at an angle and blocks portions of this wall. Land to the south of the link is paved for parking. An above-grade tunnel connecting the Southam Pavilion to the Central Building is located at the southwest end of the building.

3.4 Site Description Evel Pavilion

The Evel Pavilion is located on the west side of Sanatorium Road. At the time of its construction in 1932, it stood with the Southam Pavilion in an open landscape at the north end of the Orchard San. While the older buildings to the south were oriented north to south and east to west, the Evel and Southam Pavilions were dramatically shifted to face southeast. The Wilcox Pavilion (1938) followed the siting arrangement.

A drive from Sanatorium Road leads into the site at the north end and accesses the main entry of the Evel Pavilion located midway along the northwest wall. The drive continues around the back of the Evel Pavilion and connects with Ewart, Southam, Central, Holbrook and West Quarters buildings. The area between the drive and the Evel Pavilion is paved for parking. This roadway initially extended around the southwest end of the building and joined with the drive from Sanatorium Road to the Southam Pavilion. This road network was modified with the construction of the Ewart Building in 1968.

The land to the north of the building is landscaped with grass lawn edged with conifers. A two storey residence was located in this area until the 1960s. A large, asphalt parking lot is situated to the west. Historical photographs indicate that the triangular piece of land between the Evel Pavilion and Sanatorium Road was maintained as a flat grass lawn overlooked from the verandahs above (*Appendix A*). The introduction of the Osler Building has severely compromised the integrity of the siting of the Evel Pavilion. It blocks views to and from the building, notably obscuring the distinctive stepped back profile of the verandahs. An enclosed, one storey walkway located on the southwest wall connects the Evel Pavilion with Ewart Building and ultimately to the Southam Pavilion and Central Building.

3.5 Site Description Brow Site

The former Brow Infirmary site of the Scenic North Secondary Plan study area sits on the edge of the Mountain overlooking the City of Hamilton and Lake Ontario. The main entrance to the site is by a paved road off North Scenic Drive. It is a discrete group of buildings both physically and visually separate from the principal hospital site to the west. Residential subdivisions have been built up to its boundaries. The Brow site comprises a campus of institutional buildings and structures set within a cultural landscape of planned gardens, open space, an ephemeral watercourse, woodlots and connected by a curvilinear road network. Three 1950s residences sit at the entrance to the site.

4.0 BUILT HERITAGE FEATURES

The following is a brief architectural description of the Bruce Memorial Building, Southam Pavilion and Evel Pavilion. Photographs are found in Appendix C.

4.1 Bruce Memorial Building

The Bruce Memorial Building was opened in 1921 to provide accommodation for a number of services to support the children's wards located in the neighbouring Preventorium, notably classrooms. The building has been used for a variety of uses over the years, most recently for infant, parent, pervasive development disorders and early childhood programmes.

Bruce Memorial Building: Exterior

The Bruce Memorial Building is considered a good example of a 1920s institutional architecture with materials and construction techniques typical of the period. In design the building loosely follows the tenets of the Beaux Arts style including the balance of the principal façade with central frontispiece and classical detailing with heavy cornice, parapets, rectangular openings and decorative swag panels. Aspects of the design that

relate specifically to the building's use by tuberculin patients within the sanatorium site are of particular interest.

The Bruce Building is T-shaped in plan with a two storey front section measuring roughly 25-ft. north to south by 92-ft east to west. A one storey wing measuring 27-ft. east to west by 50-ft. north to south extends to north from midway along the rear wall. The *Condition Assessment Report* for the Bruce Building prepared by Physical Planning Technologies Inc. in 1998 indicates that the foundation walls, footings and ground floor slab are poured concrete. Wood joists are used for the second floor. The exterior walls are hollow tile clad in a yellow-brown rug brick with artificial stone detailing at the foundation, window sills, cornice and parapet. The flat roof is covered with tar and gravel. Door and window openings are rectangular shaped throughout the building. The main entry retains the original wood frame and double multipane wood doors; however, the rest of the exterior doors are hollow metal. The original six over six wood window sash were replaced in 1993 with double glazed units and bottom opening vents in aluminum frames. Historical photographs suggest that the woodwork was originally painted a putty colour similar to the artificial stone detailing (*Appendix A*).

South (front) elevation

The primary elevation facing south is the most detailed although dense vines and hedges currently obscure portions of the wall. The focal point of the front elevation is a centre pavilion projecting 3-ft. 6-in. from the main wall plane. The stepped parapet of the frontispiece is decorated with square and diamond panels. The length of the building is accented with the horizontal lines of the foundation, continuous window sills, cornice and parapet finished in artificial stone to contrast with the brick walls. The masonry units (2 1/2-in. high by 3 3/4-in. wide by 8 1/2-in. long) are laid in a common bond with headers every 6th row. The stretcher units feature horizontal striations while the headers have vertical markings. The tops of the window openings are finished in a soldier course.

The frontispiece features a centrally located, one storey square entry porch with metal railing on the second floor and two shallow stone steps leading to a quarry tile porch and the main entry. Pilasters and transom with decorative medallion surround the multipane double entry doors. A historical photograph indicates the porch posts were originally circular with large square lattice enclosing the sides of the porch and that the entry doors with brass kick plate and door hardware were natural wood (*Appendix A*). The wall to either side is set back slightly from the main entry and has a large window on each floor with a decorative swag panel outlined in brick and artificial stone set between the openings. Basement window wells are located below the ground and second floor openings.

When the building opened in 1921, large window openings set off the ground floor at each end and marked the location of the classrooms. Mullions divided the large openings into five equal spaces that were each fitted with two window sash, which pivoted outwards to maximize classroom ventilation. These openings have been modified with

the introduction of three contemporary window sash and green glazed tiles to close in the intermediate openings. Three window openings are regularly spaced above the classroom windows on the second floor.

East elevation

The east elevation retains some of the detailing of the front wall. The second floor window sill line, cornice and parapet detailing are carried around onto the east elevation of the main building but the foundation is clad in brick. A second floor window located midway along the wall has been modified to a door that opens onto a metal fire escape. Vines largely obscure the detailing of the ground; however, a large panel with decorative brick border is discernible. A raised brick cross is located in the centre of the panel. The introduction of a window on the ground floor cut into the bottom of the cross. In addition, signage partially covers this feature.

North (rear) elevation

The north elevation retains little of the detailing of the front elevation. The decorative brickwork at the top of the second floor windows and above the cornice extends to this elevation but there are no artificial stone accents. The top of the parapet is finished in terra cotta coping. The ground floor windows are set within the masonry wall with no decorative header or soldier course.

The rear wing covers the centre section of the north wall at the ground floor level. A bay featuring three windows with an additional window to either side is located on the second floor of the main building, overlooking the roof of the rear wing. The east end of the north wall has three windows on the ground floor in line with three windows on the second floor. A historical photograph indicates that the chimney located along this section of the wall has been reduced in height. Stairs at the east end of the wall lead down to a basement entry. A basement window with multipane metal sash is located beside this doorway. The west end of the north wall has two windows on the ground floor and three windows on the second floor. As the site slopes to the northwest, the basement opens up at grade at this end of the wall. A doorway accessing the playground and three window openings are located at the basement level.

West elevation

Like the north elevation, the west elevation retains little of the detailing of the front elevation. The decorative brickwork at the top of the second floor windows and above the cornice carry around the corner but none of the artificial stone accents extends to this end wall. The top of the parapet is finished with terra cotta coping similar to the north elevation. A door and porch has been added at the south end of the wall at the ground floor level. A window is located midway along the wall on the second floor.

Rear wing

The rear wing is a one storey, flat roof structure constructed in a similar manner to the main building. It is simply detailed with the top of the parapet finished in terra cotta coping. It is believed that the rear wing originally housed the dining room with the kitchen at the north end. The east and west walls have a similar pattern of window openings on the ground floor, namely, single, paired, single, paired. The replacement window sash are smaller than the original sash, resulting in a metal panel at the top of the unit. A historical photograph shows a fireplace at the north end of the dining room at the wall shared with the kitchen but no chimney is visible from the ground. A series of basement window are located on the east and west walls. The centre portion of the north wall of the rear wing has been stuccoed. A door leading into the basement is located in the middle of the wall.

Bruce Memorial Building: Interior

Access to the interior of the building was limited to the entry vestibule and stairwell. The original layout consisted of a centre hall on the ground floor with classrooms to either side and a dining room with fireplace and kitchen at the north end of the hall. The staff accommodation on the second floor included kitchen, lounge, bedrooms and washrooms. The basement contained offices and workshops. Historical photographs indicate that the floors in the classrooms and dining room were finished with wood.

An appraisal report of the Bruce Building (1968) indicates that the entrance lobby and basement corridors had terrazzo floors. The main staircase was steel with terrazzo treads and wood banisters and railing. The upper level had wood floors. Generally the walls and ceilings were plastered although acoustic ceiling tiles had been installed in most of the office spaces. Portions of the basement, possibly the rear wing, had concrete walls and floors. Steam heating was provided from the main power house.

By the 1998 as noted in the condition report, most of the floors were a carpeted with vinyl tile on the central stairs. Acoustic 2-ft. by 2-ft. ceiling tiles on tee-bar grid were used through much of the building. The interior walls were a combination of the original hollow clay tile back up with painted plaster finish and contemporary drywall partitions. The report noted that the window sash were replaced throughout the building in 1993. Most of the interior doors were identified as wood doors in wood frames although part of the ground floor to the east of the main entrance had hollow metal doors and frames. The interior of the Bruce Building appears to have been extensively altered with significant renovations carried out in 1968 and 1995. The entry vestibule and original main staircase are retained. The main entry doors and the wood interior doors also date from the period of construction. Original materials may survive beneath current finishes. It is not known whether the fireplace remains in the former dining room.

4.2 Southam Pavilion

The Southam Pavilion was opened in 1928 to provide accommodation for tuberculosis patients on two floors with a laboratory and morgue in the basement. The patients were housed on the southeast side of the building with offices and services areas to the northwest. The building was extensively altered in 1960 when it was no longer required for patient care. The Southam Pavilion was modified to accommodate a fully integrated laboratory for all units of the Mountain Sanatorium on the lower two levels with the Hamilton and District School of Medical Technology on the top floor. The building was officially re-opened in February 1963.

Southam Pavilion: Exterior

The Southam Pavilion is considered a very good example of institutional building displaying a distinctive style of sanatorium architecture. It was first of three buildings at the Orchard San to be oriented to the southeast to allow for sunshine while protecting the wards from the prevailing winds in the cooler months, improving the comfort of the unheated wards. It was the first building at the site to use setback verandahs, as advocated by the consultant architect to the Federal department of Soldiers' Civil Re-establishment. The Southam Pavilion implemented a four-bed unit, adopted from the National Sanitarium Association's new infirmary at Gravenhurst. These innovations were used in the Evel Pavilion (1932) and the Wilcox Pavilion (1938). The materials and construction techniques are typical of the period.

The Southam Pavilion is a long, narrow building measuring approximately 44-ft. 6-in. northwest to southeast by 168-ft. 3-in. northeast to southwest. The ground and second floors are set back from the main foundation walls. Exposed two storeys on the southeast side, the building extends three storeys along most of the northwest wall. The *Condition Assessment Report* for the Southam Pavilion prepared by Physical Planning Technologies Inc. in 1998 indicates that the foundation walls, footings and some of the interior basement walls are reinforced concrete. The structural beams, columns and joists use a combination of reinforced concrete and structural steel. The reinforced concrete floor slabs are finished with a terrazzo topping. The exterior walls are clad in a red rug brick with common brick backing and concrete detailing at the foundation, window sills, cornice, coping and top of the piers. The masonry units (2 1/2-in. high by 4-in. wide by 8 3/8-in. long) are laid in a common bond with recessed mortar joint, header course every second row and some decorative brick detailing. The door and window openings are rectangular shaped. Several door and windows have been closed in, notably along the southeast wall. The original double hung wood window sash and exterior paneled wood and glazed doors have been replaced.

The flat roof is covered with tar and gravel. A large penthouse for mechanical systems located roughly midway along its length was added *circa* 1960.

Northeast (front) elevation

The focal point of the northeast wall is a two storey pavilion with stepped corners, 23-ft. wide and projecting 20-ft. from the northeast wall. The centre of the pedimented parapet is highlighted with decorative concrete detailing. A French window with Juliet balcony and metal railing is set in the middle of the wall on the second floor. Smaller window openings are located to either side. Three window openings on the ground floor are set directly below the openings on the second floor. An entrance porch, 20-ft. 6-in. by 10-ft. 10-in., to the right of the centre pavilion balances the asymmetrical composition of the northeast wall. The entrance porch is set off from the rest of the building with arched openings with radiating brick voussoirs. 'Southam Pavilion, 1928' are carved in a decorative panel over the arched openings to the entry porch. A Lorraine Cross, adopted as the symbol of the global fight against tuberculosis at an international conference on tuberculosis in Berlin, Germany in 1902, forms part of the composition.

Southeast elevation

The long southeast wall facing Sanatorium Road is the most distinctive feature of the Southam Pavilion. The setback profile initially accommodated verandahs accessible from the adjacent wards. Brick pilasters topped with decorative concrete caps extending above the parapet divide the length of the building into nine bays. The bays at either end of the wall feature a pedimented parapet with additional concrete detailing at the peak, similar to the northeast wall. Concrete coping and cornice run between the pilasters with decorative brickwork under the cornice. Each bay originally comprised a centre entry fitted with double French doors and large window openings to either side. Historic photographs indicate that the large doors permitted the patient beds mounted on castors to be rolled out onto the verandahs (*Appendix A*). Retractable striped awnings could be lowered to provide protection from direct sunlight. The ground floor and second floor verandahs were staggered to permit exposure to the sun from each floor. The ground floor verandah extended to the edge of the foundation wall. The upper verandah projecting slightly over the ground floor is supported with paired wood brackets in line with the brick pilasters. A metal railing on the upper verandah features a raised arch section in line with the pilasters.

The large window openings and doorways that formed an important aspect of the composition of this elevation have been altered. Most of the bays have been bricked and incorporate a small window set high in the wall or occasionally an opening fitted with a steel door and with a window to either side. The floor of the lower verandah has been extended at the northeast end of the wall into formerly landscaped areas. The pavilion at the northeast end of the building has a French window on the second floor with metal balcony. A large window directly below on the ground floor has been bricked in.

Southwest elevation

The southwest wall has been extensively altered with the construction of a three storey enclosed brick stairwell that blocks much of the original exterior wall. A tunnel connecting the Southam Pavilion with the Central Building is also located on this wall. The balance of the wall is simply detailed with a single window opening on each of the ground and second floors.

Northwest elevation

The northwest wall is divided into two distinct sections. The two storey section to the northeast is defined by the entrance porch and is detailed in a similar manner to the northeast wall. Two French windows on the second floor with metal balconies are located directly above two large windows on the ground floor. The area to the southwest is three storeys in height and is simply detailed. The length of the wall is broken with a bay projecting 4-ft. from the wall with a pedimented parapet. Two storey bays with a stepped parapet are situated towards either end of the wall, the one to the northeast located at the entrance porch. The concrete coping is retained on this wall but the cornice is reduced to a simple band at the southwest end. A series of window openings are located on the basement, ground and second floors. Generally the windows are regularly spaced, directly above one another. Several openings have been closed in. This elevation has been modified with the widening of the centre bay, the addition of an elevator tower in the 1950s and the three storey walkway to the Ewart Building in the 1960s.

Southam Pavilion: Interior

The interior of the Southam Pavilion was not accessible. It is known from the historical record that the interior was extensively altered in the renovation, 1960-63.

4.3 Evel Pavilion

The Evel Pavilion was opened in 1932 and initially housed all the admission services for the Sanatorium on the ground floor. The second and third floors were devoted to four patient ward units along the southeast side of the building with offices and treatment rooms along the northwest side. The top floor contained the first operating rooms for the department of chest surgery. The building was extensively altered in 1963 when it was converted to use as a rehabilitation facility. Additional renovation work was undertaken in 1968 and 1978.

Evel Pavilion: Exterior

The Evel Pavilion is considered a good example of institutional building displaying a distinctive style of sanatorium architecture. The innovations developed at the Southam Pavilion in 1928, namely the southeast exposure, setback verandahs and four-bed units were applied on a larger scale at the Evel Pavilion. These details were further refined in

the Wilcox Pavilion, constructed in 1938. The materials and construction techniques are typical of the period.

The four storey Evel Pavilion is a long, narrow building measuring approximately 55-ft. 6-in. northwest to southeast by 225-ft. 4-in. northeast to southwest. The second, third and fourth floors are set back from the ground floor to form the balconies. The *Condition Assessment Report* for the Evel Pavilion prepared by Physical Planning Technologies Inc. in 1998 indicates that the foundation walls, footings, beams, columns and floor slabs are reinforced concrete construction. There is some steel framing around the elevator shaft. The verandahs are reinforced concrete finished with built-up roofing. The floor slabs contain a variety of finishes including carpet, vinyl tile, sheet flooring in addition to the original terrazzo. The exterior walls are clad in a red rug brick with common brick backing. The masonry units (2 ³/₈-in. high by 4-in. wide by 8 ⁵/₈-in. long) are laid in a common bond with recessed mortar joint. The walls are accented with concrete accents, concrete coping and decorative brickwork. The door and window openings are rectangular shaped. Several door and windows have been closed in, notably along the southeast wall. The original double hung wood window sash and exterior paneled wood and glazed doors have been replaced. The flat roof of the main building and the verandah floors are covered with tar and gravel

Northwest elevation

The northwest wall marks the main entry to the building. The long wall is broken into three sections. The two shallow end pavilions originally featured high, stepped and pedimented parapet, a design carried around to the northeast and southwest end walls and the end bays of the southeast wall. The centre section of the wall appears to have featured a penthouse set close to the edge of the roof, constructed in brick with concrete accents. A vertical feature was set at the northwest corner of the penthouse. The vertical line extended down the wall to the ground, possibly marking the main entrance. The overall effect was similar to a tower. The balance of the walls features a pattern of rectangular window openings on all four floors. Stairwells with doorways at the ground level are distinguished with windows located at the landings between the floors levels.

The northwest wall was significantly altered in 1964 with a five storey addition housing elevator and stairwell, entry vestibule and large concrete frame canopy with glazed brick wall. The penthouse appears to have been replaced at that time. The parapet at either end of the wall has been lowered and the design simplified. Along the main length of the wall, several of the window openings have been closed in.

Northeast elevation

The narrow northeast wall originally provided an interesting shape with four story vertical wall at one end and stepped back profile for the verandahs at the other end. The parapet was detailed in a similar manner to the end bays on the northwest and southeast

walls. This wall has been modified with the addition of enclosed stairwell that extends above the roofline. The parapet has been lowered.

Southeast elevation

The southeast wall facing Sanatorium Road is the most distinctive feature of the Evel Pavilion. The setback profile initially accommodated verandahs accessible from the adjacent wards. The long wall is broken into three sections: two solid end bays and an open centre section. High, stepped and pedimented parapets with decorative concrete panels similar to the northwest wall originally defined the two end bays. The window openings in the end bays are rectangular, outlined with a brick border and concrete sills. The centre section of the building is divided into eight bays with brick pilasters topped with decorative brickwork and concrete caps extending above the parapet. Concrete coping and wood cornice run between the pilasters. The parapet is stepped in the middle of each bay and features a concrete diamond and decorative brickwork. The pilasters on the ground floor initially extended through to the second floor verandah to form piers for the metal railing. Each of the centre bays on the upper floors originally comprised a centre entry fitted with double French doors and large window openings to either side. The large doors permitted the patient beds mounted on castors to be rolled out onto the verandahs. Retractable striped awnings could be lowered to provide protection from direct sunlight. The second, third and fourth floor verandahs were staggered to permit exposure to the sun from each floor. The second and third floor verandahs project slightly over the floor below and are supported with paired wood brackets in line with the brick pilasters. The downspouts and eavestroughs are copper.

The parapets at the ends of the wall have been lowered and simplified in design and use metal rather than concrete coping. The large window openings and doorways that formed an important aspect of the composition of this elevation have been altered. The centre bays have been bricked in with two windows incorporated into each bay. The original metal railings on the verandahs have been removed. The verandahs have been used to carry various mechanical systems including air ducts. One of the bays on the ground floor was modified to incorporate a pair tall slender windows fitted with stained glass for the chapel that was added in 1964.

Southwest elevation

The southwest wall is similar in design to the northeast wall. A four storey enclosed stairwell has been added to this wall. A one storey enclosed walkway to the Ewart Building also obscures portions of the wall.

Evel Pavilion: Interior

The interior of the Evel Pavilion was accessible on the ground floor. It is known from the historical record that the interior has been extensively altered in renovations undertaken in 1963, 1968 and 1978.

The Ellen Wanless Ewart Memorial Chapel was installed as part of the 1963 work. It is no longer in use as a chapel and currently forms part of the resource centre. Members of the Ewart family donated the stained glass windows in the former chapel.

5.0 CULTURAL HERITAGE RESOURCE ASSESSMENT: BUILT HERITAGE FEATURES

5.1 Bruce Memorial Building

The Bruce Memorial Building was opened in 1921 to provide accommodation for a number of services to support the children's wards located in the neighbouring Preventorium, notably classrooms. The building has been used for a variety of uses over the years, most recently for infant, parent, pervasive development disorders and early childhood programmes.

Historical/Associative Value

The Bruce Memorial Building is associated with the development of the Mountain Sanatorium that opened in 1906 for the treatment of tuberculosis. The Bruce Building was built beside the children's wards, known as the Preventorium, and accommodated classrooms and other services for children with tuberculosis housed at the Sanatorium. Opened in 1921, the building relates to the construction of permanent brick structures at the site. The local Hamilton architecture firm of Beckett and Akitt designed the Bruce Building. It is one of the oldest remaining buildings on the Mountain Sanatorium site as a whole and the oldest remaining structure on the Orchard site. The building is named in memory of John A. Bruce, owner of J. A. Bruce Seed Company whose legacy to the Sanatorium covered the cost of construction.

Design/Physical Value

The Bruce Memorial Building is considered a good example of a 1920s institutional architecture with materials and construction techniques typical of the period. In design the building loosely follows the tenets of the Beaux Arts style including the balance of the principal façade with central frontispiece and classical detailing with heavy cornice, parapets, rectangular openings and decorative swag panels. Aspects of the design that relate specifically to the building's use by tuberculin patients within the sanatorium site are of particular interest.

Notable architectural attributes of the Bruce Memorial Building include, but are not limited to:

- Symmetrical design of the south (front) elevation with projecting frontispiece;
- Flat roof with parapet increasing in height at the centre of the building;
- Horizontal bands of artificial stone detailing including the foundation, window sills, cornice and parapet.

- Rug brick laid in a common bond with soldier course above the ground floor windows and decorative banding above the second floor windows and at the cornice level;
- One storey square entry porch with metal railing on the second floor and two shallow stone steps leading to a quarry tile porch and the main entry;
- Main entry with pilasters, transom with decorative medallion and multipane double entry doors with brass kick plates and handles;
- Regularly spaced rectangular shaped window openings and notably former large classroom windows on the south side of the ground floor;
- Two decorative artificial stone swags bordered in brick and artificial stone on the south wall
- Brick panel with cross on the east wall;
- Centre hall plan with vestibule and rooms opening off to either side and to the north end; and
- Centre steel staircase with wood balusters and railing.

Contextual Value

The Bruce Memorial Building is part of a campus of buildings that relate to the Orchard site of the former Mountain Sanatorium. The Wilcox, Holbrook, Central and West Quarters buildings are in close proximity. The historic linkage with the Preventorium that the Bruce Building initially supported was lost when the Preventorium was demolished in 1952. In terms of siting, design, materials, size and age, the Bruce Building relates to the original parts of the Central Building and West Quarters.

It is set on the north side of cul-de-sac extending west from Sanatorium Road. A concrete sidewalk runs along the front of the Bruce Building with a straight walkway to the front entry. The front and sides of the building are set within a grassed lawn accented with hedges and trees. The lands to the rear of the building are paved for service areas and parking.

Summary of Heritage Value

The Bruce Memorial Building is considered to be of local heritage interest. It relates to the development of the Mountain Sanatorium and is the oldest building surviving on the Orchard portion of the site. The building is associated with the John A. Bruce family and local architects, Beckett and Akitt. The institutional building is well designed with a number of notable features. It is in good condition with most of the original exterior detailing and materials retained. It contributes to the campus of individual health-related buildings set in landscaped grounds.

5.2 Southam Pavilion

The Southam Pavilion was opened in 1928 to provide accommodation for tuberculosis patients on two floors with a laboratory and morgue in the basement. The patients were housed on the southeast side of the building with offices and services areas to the northwest. The building was extensively altered in 1960 when it was no longer required for patient care. The Southam Pavilion was modified to accommodate a fully integrated laboratory for all units of the Mountain Sanatorium on the lower two levels with the Hamilton and District School of Medical Technology on the top floor. The building was officially re-opened in February 1963.

Historical/Associative Value

The Southam Pavilion is associated with the Mountain Sanatorium that opened in 1906 for the treatment of tuberculosis. It was constructed in 1928 to provide accommodation for 76 patients, laboratory space and a morgue. All the laboratory work for the sanatorium was done in the basement of the new building. The Southam Pavilion is named after its benefactors, Mr. William J. Southam, renowned newspaper baron and his wife. The local architecture firm of W. P. Witton designed the Southam Pavilion with W.H. Cooper as the general contractor. Both Witton and Cooper were responsible for the construction of several buildings at the Mountain Sanatorium as well as many notable structures in Hamilton and the surrounding region.

Design/Physical Value

The Southam Pavilion is considered a very good example of institutional building displaying a distinctive style of sanatorium architecture. It was first of three buildings at the Orchard San to be oriented to the southeast to allow for sunshine while protecting the wards from the prevailing winds in the cooler months, improving the comfort of the unheated wards. It was the first building at the site to use setback verandahs, as advocated by the consultant architect to the Federal department of Soldiers' Civil Re-establishment. The Southam Pavilion implemented a four-bed unit, adopted from the National Sanitarium Association's new infirmary at Gravenhurst. These innovations were used in the Evel Pavilion (1932) and the Wilcox Pavilion (1938). The materials and construction techniques are typical of the period.

Notable architectural attributes of the Southam Pavilion include, but are not limited to:

- Rug brick with recessed mortar joints laid in a common bond, stepped at the corners of the building and decorative brick banding, lintels and surrounds at the second floor windows.
- Concrete detailing including cornice, coping, pilaster caps, corner details and window sills.
- One storey entrance porch with arched openings, decorative plaque including name date and Lorraine cross and wood beam ceiling.

- Southeast wall with setback verandahs, metal railing and paired wood brackets supporting the second floor verandah.
- Nine bay division of the southeast elevation with pilasters with decorative concrete caps extending through the parapet and pedimented parapet at each end bay.
- Northeast pavilion with pedimented parapet, concrete detailing and large openings fitted with French windows and metal railings.
- Northwest wall with bays at either end of the wall with stepped parapet and a middle bay with pedimented parapet.

Contextual Value

The Southam Pavilion is part of a campus of buildings that relate to the Orchard site of the former Mountain Sanatorium. The Southam Pavilion was the first of three buildings at the Orchard San to be sited to face the southeast, followed by the Evel Pavilion in 1932 and the Wilcox Pavilion in 1938.

The Southam Pavilion is set on the west side of Sanatorium Road. A walkway extends from the road to the Southam Pavilion and Ewart Building. The original drive leading to the main entry was removed with the construction of the Ewart Building. Views to the front elevation of the building were obscured with the introduction of the Osler Building. The front and southeast sides of the building are set within a grassed lawn accented with individual and grouped plantings. The lands to the southwest and northwest are paved for service areas and parking.

Summary of Heritage Value

The Southam Pavilion is considered to be of local heritage interest. It relates to the development of the Mountain Sanatorium and conveys a distinctive architecture response to the care and treatment of tuberculosis. The building is associated with the William J. Southam family, local architect W. P. Witton and local contractor, W. H. Cooper. The institutional building is very well designed with a number of notable features, specifically its orientation and setback verandahs. It is in good condition with much of the original exterior detailing and materials retained. It contributes to the campus of individual health-related buildings set in landscaped grounds. It was the first of three buildings at the Orchard San to be oriented to the southeast to maximize exposure to the sun.

5.3 Evel Pavilion

The Evel Pavilion was opened in 1932 and initially housed all the admission services for the Sanatorium on the ground floor. The second and third floors were devoted to four patient ward units along the southeast side of the building with offices and treatment rooms along the northwest side. The top floor contained the first operating rooms for the department of chest surgery. The building was extensively altered in 1963 when it was

converted to use as a rehabilitation facility. Additional renovation work was undertaken in 1968 and 1978.

Historical/Associative Value

The Evel Pavilion is associated with the Mountain Sanatorium that opened in 1906 for the treatment of tuberculosis. It was constructed in 1932 with financial assistance from the unemployment relief programmes established by the federal and provincial governments during the Great Depression. The Evel Pavilion provided accommodation for 155 patients, administrative services for the sanatorium as a whole and the first operating rooms for the department of chest surgery. The Evel Pavilion is named after local businessman, James Joseph Evel (1849-1932), one of the founding members of the HHA and president for 24 years. The local architecture firm of Hutton and Souter designed the Evel Pavilion as well as many notable structures in Hamilton and the surrounding region.

Design/Physical Value

The Evel Pavilion is considered a good example of institutional building displaying a distinctive style of sanatorium architecture. The innovations developed at the Southam Pavilion in 1928, namely the southeast exposure, setback verandahs and four-bed units were applied on a larger scale at the Evel Pavilion. These details were further refined in the Wilcox Pavilion, constructed in 1938. The materials and construction techniques are typical of the period.

Notable architectural attributes of the Evel Pavilion include, but are not limited to:

- Rug brick with recessed mortar joints laid in a common bond, brick window surrounds and decorative brickwork such as, checkerboard pattern on the end walls and detailing on parapets and pilaster on the southeast wall.
- Concrete detailing including coping, pilaster caps, parapets and window sills.
- Southeast wall with setback verandahs and paired wood brackets supporting the third and fourth floor verandahs.
- Three part division of the southeast elevation with two solid end bays and open centre section. The centre section of the building is divided into eight bays with brick pilasters topped with decorative brickwork and concrete caps extending above the parapet. The windows openings of the end bays are rectangular, outlined in a brick border with concrete sills.
- Stepped back profile of the end walls.

Contextual Value

The Evel Pavilion is part of a campus of buildings that relate to the Orchard site of the former Mountain Sanatorium. The Evel Pavilion was the second of three buildings at the Orchard San to be sited to face the southeast, built after Southam Pavilion in 1928 and followed by the Wilcox Pavilion in 1938.

The Evel Pavilion is set on the west side of Sanatorium Road. A drive from the road leads into the site at the north end and accesses the main entry of the Evel Pavilion. The triangular piece of land between the Evel Pavilion and Sanatorium Road was maintained as a flat grass lawn overlooked from the verandahs above. The introduction of the Osler Building has severely compromised the integrity of the siting of the Evel Pavilion. It blocks views to and from the building, notably obscuring the distinctive stepped back profile of the verandahs.

Summary of Heritage Value

The Evel Pavilion is considered to be of local heritage interest. It relates to the development of the Mountain Sanatorium and conveys a distinctive architecture response to the care and treatment of tuberculosis. It was the second of three buildings at the Orchard San to be oriented to the southeast to maximize exposure to the sun. The building is associated with the James Joseph Evel family and the local architecture firm of Hutton and Souter. The institutional building is well designed with some notable features, specifically its orientation and setback verandahs. It is in good condition with some of the original exterior detailing and materials retained. It contributes to the campus of individual health-related buildings set in landscaped grounds.

6.0 CULTURAL HERITAGE RESOURCE ASSESSMENT: BROW SITE ***(Excerpted from the Scenic North Secondary Plan 1999)***

6.1 Built Heritage Features

The following built heritage features and structures located within the Scenic North Secondary Plan study area are considered to be of heritage interest. They are:

- Continuing Care Facility (former Brow Infirmary);
- East Pavilion;
- West Pavilion (now removed);
- Long and Bisby Building;
- Moreland Residence
- Lorraine Cross; and,
- hose and reel house.

The former patient's dining room and vocational building (1917) behind the Continuing Care Facility have been severely compromised by additions and alterations.

Of the above identified built heritage features in 1999, the City of Hamilton Local Architectural Conservation Advisory Committee (LACAC) included the Long-Bisby Building on its "Inventory of Buildings of Architectural and Historical Interest".

6.2 Cultural Heritage Landscapes

The Scenic North site, originally the Brow Infirmary site of the Mountain Sanatorium, forms a discrete cultural landscape unit within the larger hospital site. It is physically separated from the larger Chedoke-McMaster HHS hospital site by Scenic Drive, which bounds the study area on three sides. The north boundary is the distinctive Brow edge. Features of heritage interest within the cultural landscape unit include:

- remnants of the designed garden complete with a pedestrian bridge and pathways southeast of the East Pavilion;
- remnants of a stone retaining wall along the side of the Sanatorium Road and the brow edge between the Long & Bisby and Continuing Care buildings;
- the traditional walkways between the Brow buildings and around the site; and,
- the original roads network.

7.0 PLANNING RECOMMENDATIONS

The Chedoke Campus of the Hamilton Health Sciences Corporation has a significant history as the site of the former Mountain Sanatorium, important in the fight against tuberculosis from the early to the middle of the 20th century. The property developed in two sections: the Orchard site to the south for civilian use and the Brow site to the north for military use. The two sections have distinct but parallel histories. The site has continued to evolve with new buildings being constructed; existing buildings being renovated and old buildings being demolished. Much of the physical history of the site in respect to its architectural heritage has been lost or extensively altered through these changes. It is encouraged that an overall strategy for the commemoration of the Mountain Sanatorium be developed including assessment of significant landscape features, building and structures, artifacts, records and oral histories.

The Brow and Orchard sites will evolve in the next ten-year period through change in land-use and in hospital treatment and servicing. The North Scenic Drive Secondary Plan for the Brow Site will witness the development of the lands from the primarily institutional use to low profile, multi storey residential use with associated open space and pathway linkage through the site. The TB Lorraine Cross will be preserved and the Long and Bisby Building (former Nurses Residence) will remain in-situ for future adaptive re-use. The designed garden landscape will be recreated.

Over the past decade hospital treatment and the delivery of services has undergone significant change in the City of Hamilton affecting all local hospitals. The Orchard Site is experiencing change in the delivery of treatment and services and will continue in the future. The primary institutional nature of the Orchard Site will not change. However, some buildings will become redundant due to physical conditions and the cost to upgrade the facilities. New infrastructure plans will also bring physical change to the Orchard Site. Both the 1932 Patterson Building and the Residence 37 will remain in situ along with

eight acres of land. No changes are proposed for the Wilcox, Holbrook and Ewart buildings. This area will comprise some 25 acres of land.

Within this context, the following planning recommendations are made for the Bruce Memorial Building, Chedoke Campus, Hamilton Health Services:

- The Bruce Memorial Building may be considered for preservation in situ with adjoining landscape grounds if a continuing use for the building is available.
- However, a new bus transportation route to better facilitate improved access to medical services at the Orchard site is being considered by the HHS and the City of Hamilton which will displace the heritage resource.
- If displacement occurs then a photographic documentation of the building is required. The documentation report should include historical summary, exterior and interior black and white photographs with captions, photographic key plan, architectural drawings documenting the original layout and renovations and overall dimensions. The report would be prepared by a qualified heritage consultant and submitted to the municipality.

The following recommendations are made with respect to the preservation of the building if it remains in situ:

- Consideration should be given to restoring the windows to their original appearance particular the ground floor windows on the south elevation to their original appearance.
- The hedges should be removed along the front wall of the building as they retain moisture and debris against the wall and obscure important architectural features.
- The vines should be removed from the building as they damage the bricks and mortar and obscure important architectural features. The brick panel on the east wall with cross should be restored.
- The condition report (1998) recommended the replacement of the metal fire escape with an enclosed stairwell. The preferred location for the stairwell would be the north wall rather than the east wall.

The following planning recommendations are made for the Southam Pavilion, Chedoke Campus, Hamilton Health Services:

- The Southam Pavilion may be considered for preservation in situ with adjoining landscaped grounds.
- However, the cost to rehabilitate the building to deliver new medical services and use within the new HHS plan makes the building redundant within the proposed master plan. This action will displace the heritage resource.
- Prior to the removal of the Southam Pavilion, a documentation report of the institutional building, with particular reference to the physical evolution of the building should be prepared. The documentation report should include historical summary, exterior and interior black and white photographs with captions, photographic key plan, architectural drawings documenting the original layout and renovations and overall dimensions. The report would be prepared by a qualified heritage consultant and submitted to the municipality.

In addition, the following recommendations are made with respect to the preservation of the building if it remains in situ:

- Consideration should be given to restoring the distinctive southeast elevation with the original pattern of door and window openings and early landscaping.
- The two trees along the northeast (front) wall of the building should be removed as they obscure important architectural features.
- The vines should be removed from the building as they damage the bricks and mortar.
- Modifications should be developed to minimize the visual impact of the penthouse, particularly from Sanatorium Road.

The following planning recommendations are made for the Evel Pavilion, Chedoke Campus, Hamilton Health Services:

- The Evel Pavilion may be considered for preservation in situ with adjoining landscaped grounds.
- If, however, the future of the Southam Pavilion is to be considered, then the removal of the Evel Pavilion may be considered. Prior to the removal of the Evel Pavilion, a documentation report of the institutional building, with particular reference to the physical evolution of the building should be prepared. The documentation report should include historical summary, exterior and interior black and white photographs with captions, photographic key plan, architectural drawings documenting the original layout and renovations and overall dimensions. The report would be prepared by a qualified heritage consultant and submitted to the municipality.

If the Evel Pavilion is retained, the following recommendation is made with respect to the preservation of the building:

- Consideration should be given to restoring the distinctive southeast elevation with the original pattern of door and window openings.

Within this context, the following planning recommendations are made for the Brow site, Chedoke Campus, Hamilton Health Services:

- That the remnants of the designed garden complete with a pedestrian bridge and pathways southeast of the East Pavilion be considered for incorporation into the new development plan;
- That the remnants of a stone retaining wall along the side of the Sanatorium Road and the brow edge between the Long & Bisby and Continuing Care buildings be preserved and incorporated into the new development;
- That the Long & Bisby building be preserved and formally designated under Part IV of the Ontario Heritage Act,
- That every effort be considered to preserve the curvilinear original road network.
- That the Lorraine Cross be restored to working order.

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In addition, the following recommendations are made with respect to the documentation and commemoration of the Brow site.

- That a commemorative plaque or interpretive panel be erected on public park or trail lands describing the evolution of the site and the importance to the City of Hamilton's medical and social history.
- That the site history and associated photographic and mapping records be assembled and presented to the McMaster University Archives.

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Aerial view of Wilcox Pavilion with Preventorium and Bruce Memorial Building to rear. *Circa* 1938.

“Aerial View.” Murray Laws Photographer, Hamilton. *Circa* 1951 (after Holbrook Pavilion constructed and before Preventorium demolished).

“Aerial.” *Circa* 1966 (Ewart Building under construction).

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“View taken from the Air of the Orchard Portion of the Mountain Sanatorium.” Jack Elliot Air Service Ltd., Hamilton. *Circa* 1925 (after Bruce Building constructed and before Southam Pavilion).

Buildings

Bruce Building, perspective of southeast corner, Beckett and Akitt, Architects. *Circa* 1920.

Bruce Building, northeast corner during construction.

Bruce Building, south elevation at the west end. No date.

Bruce Building, main entry. No date.

Evel Pavilion with verandahs. *Circa* 1932.

Evel Pavilion with marching band. No date.

Southam Pavilion from Sanatorium Road. No date.

Southam Pavilion showing the open-air verandahs. No date.

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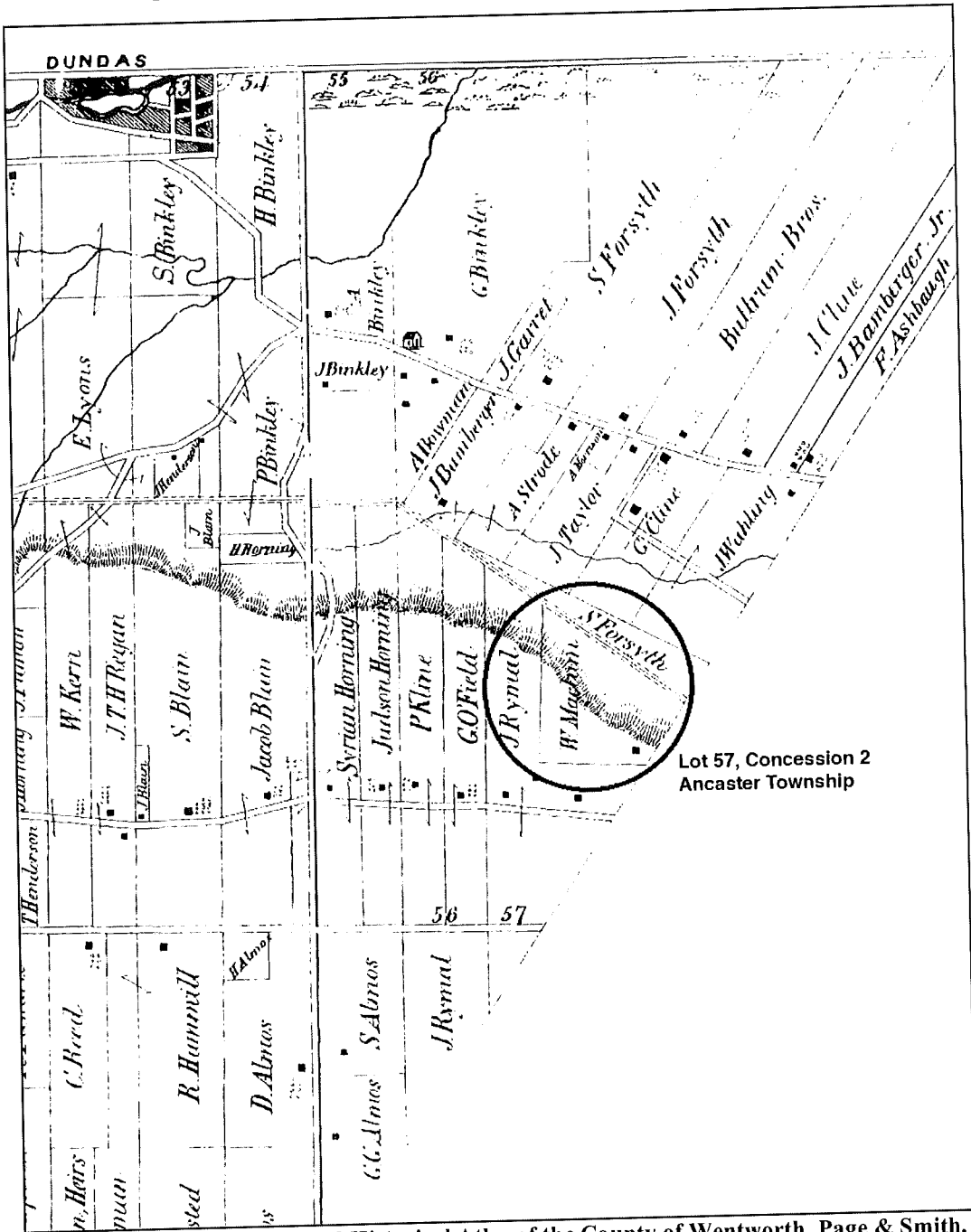
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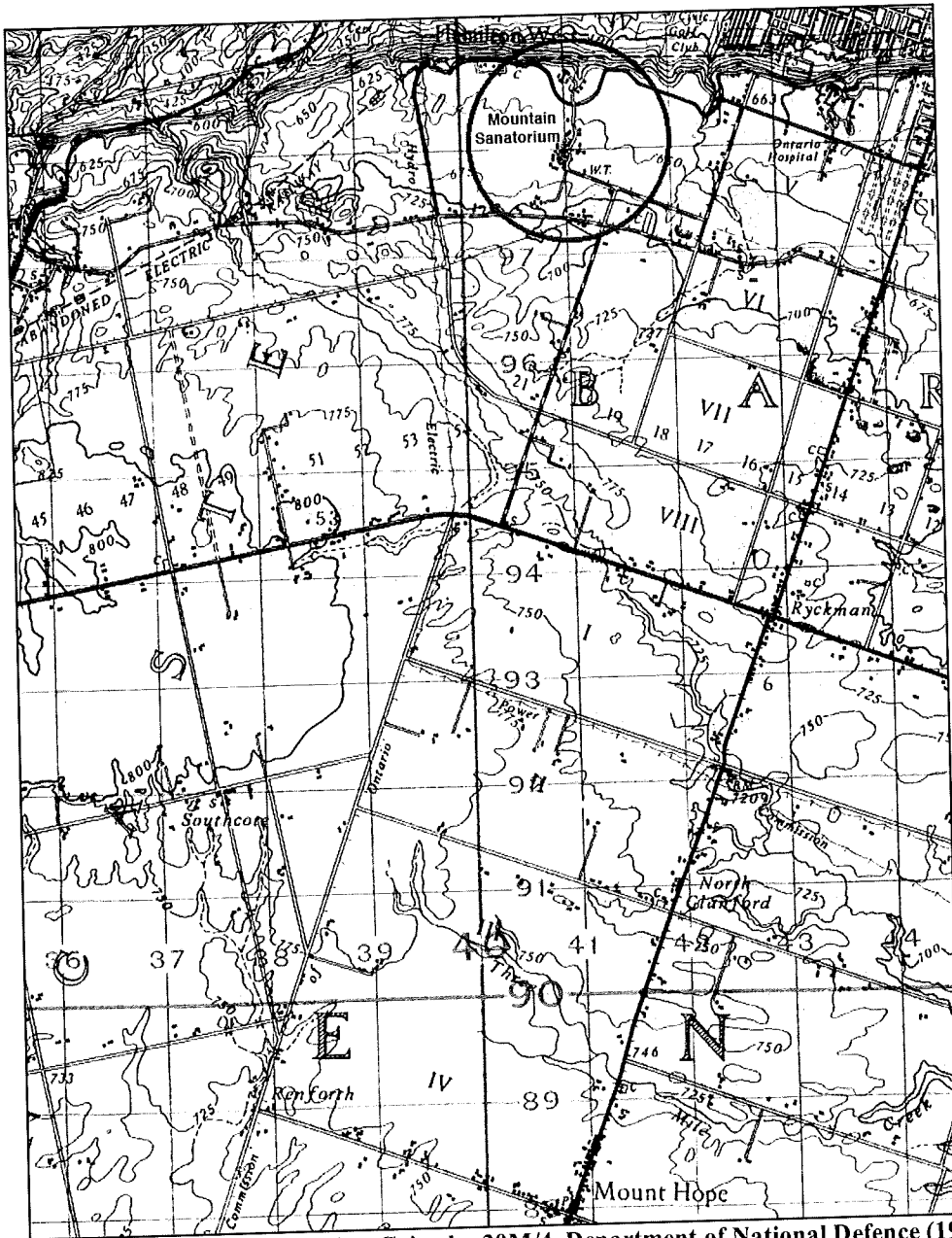
**APPENDIX A:
HISTORICAL MAPS AND PHOTOGRAPHS**

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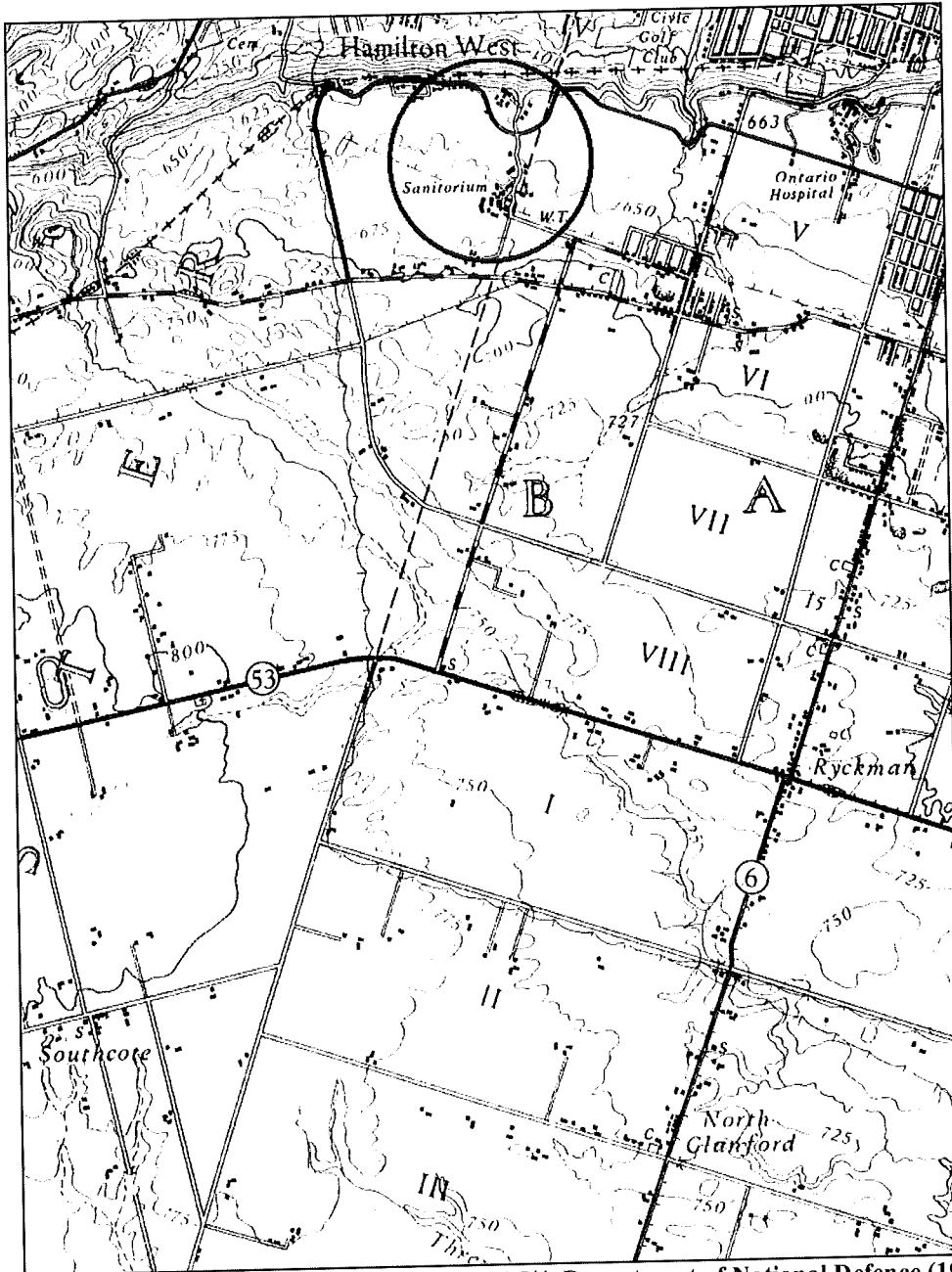
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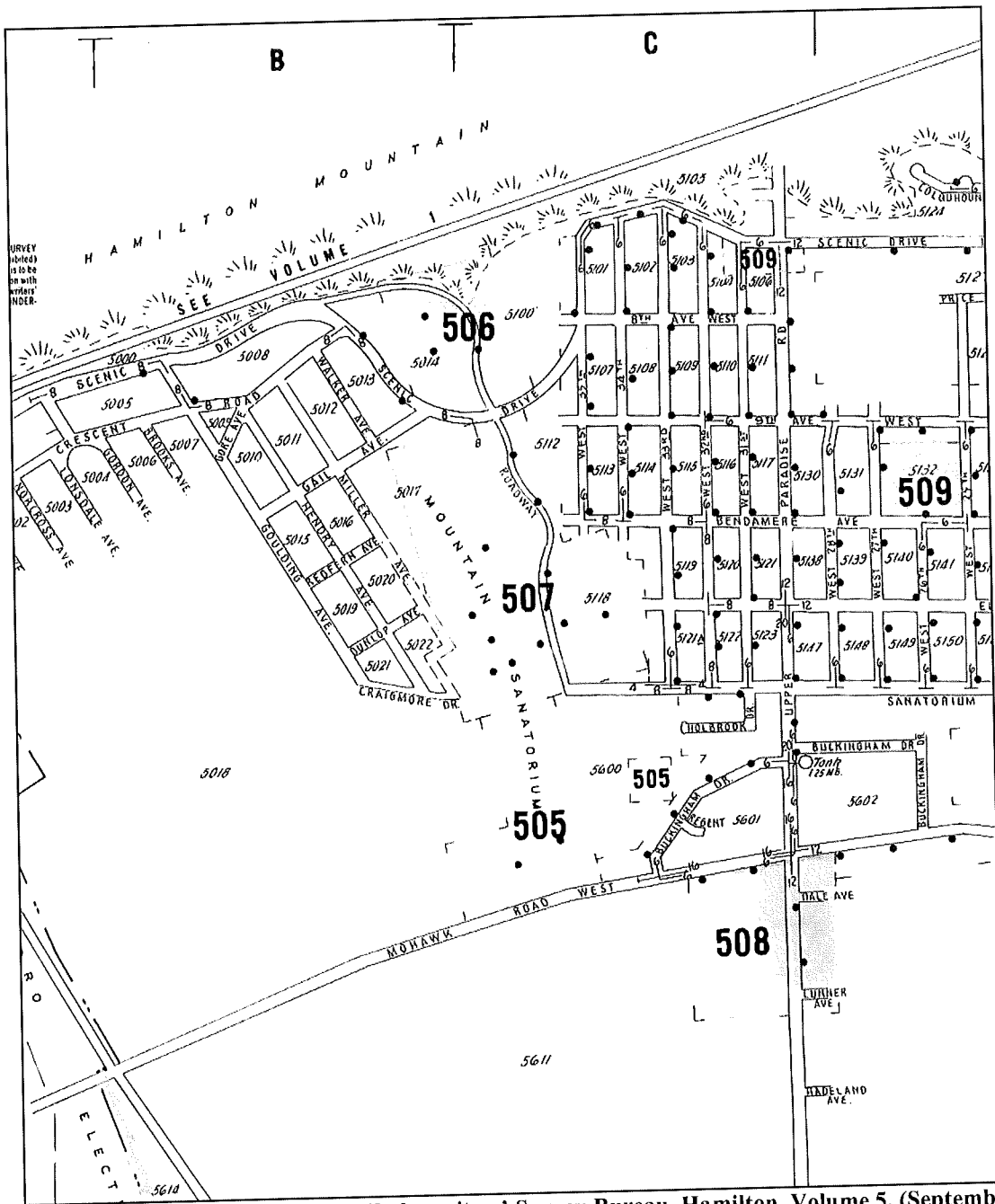
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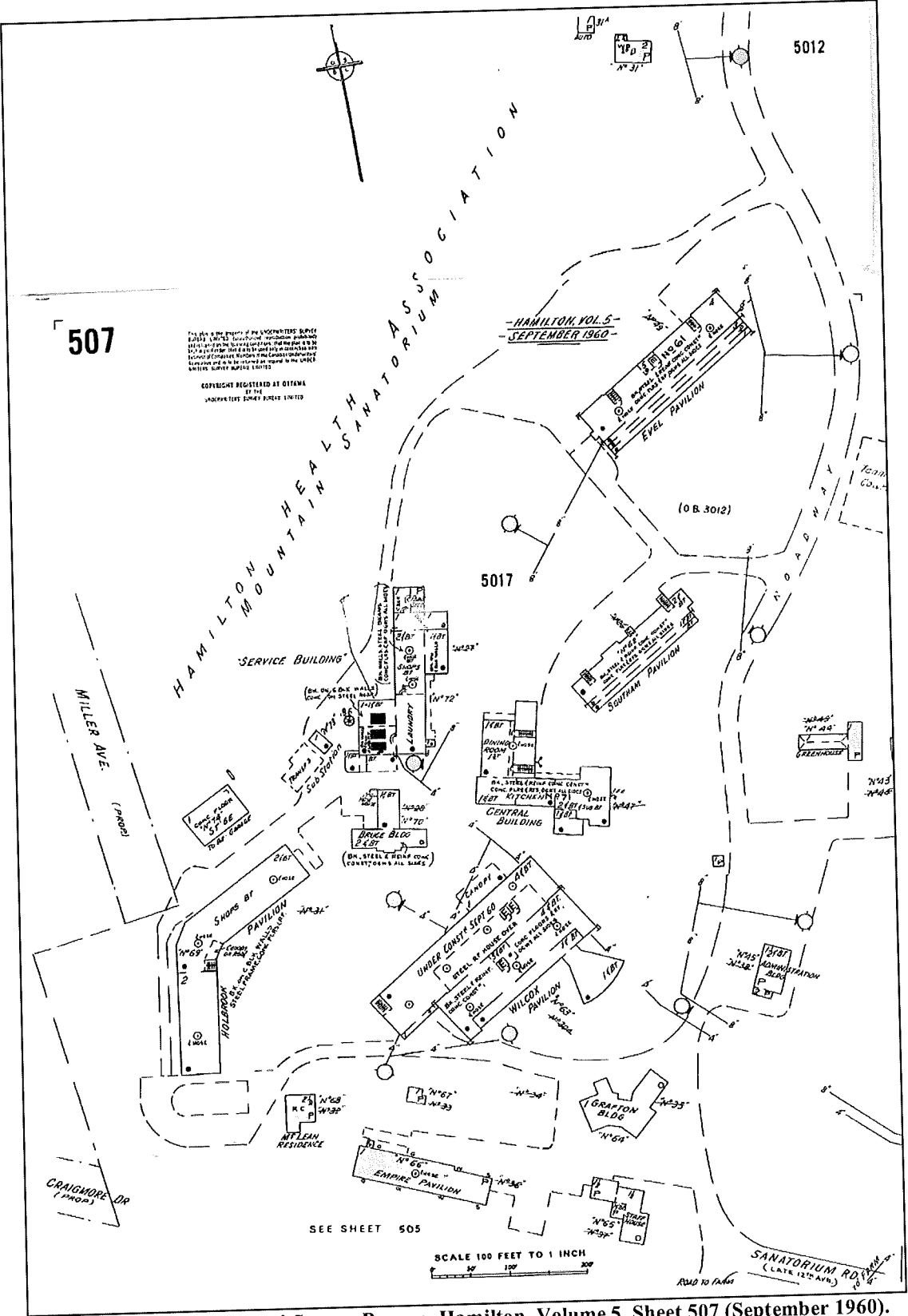
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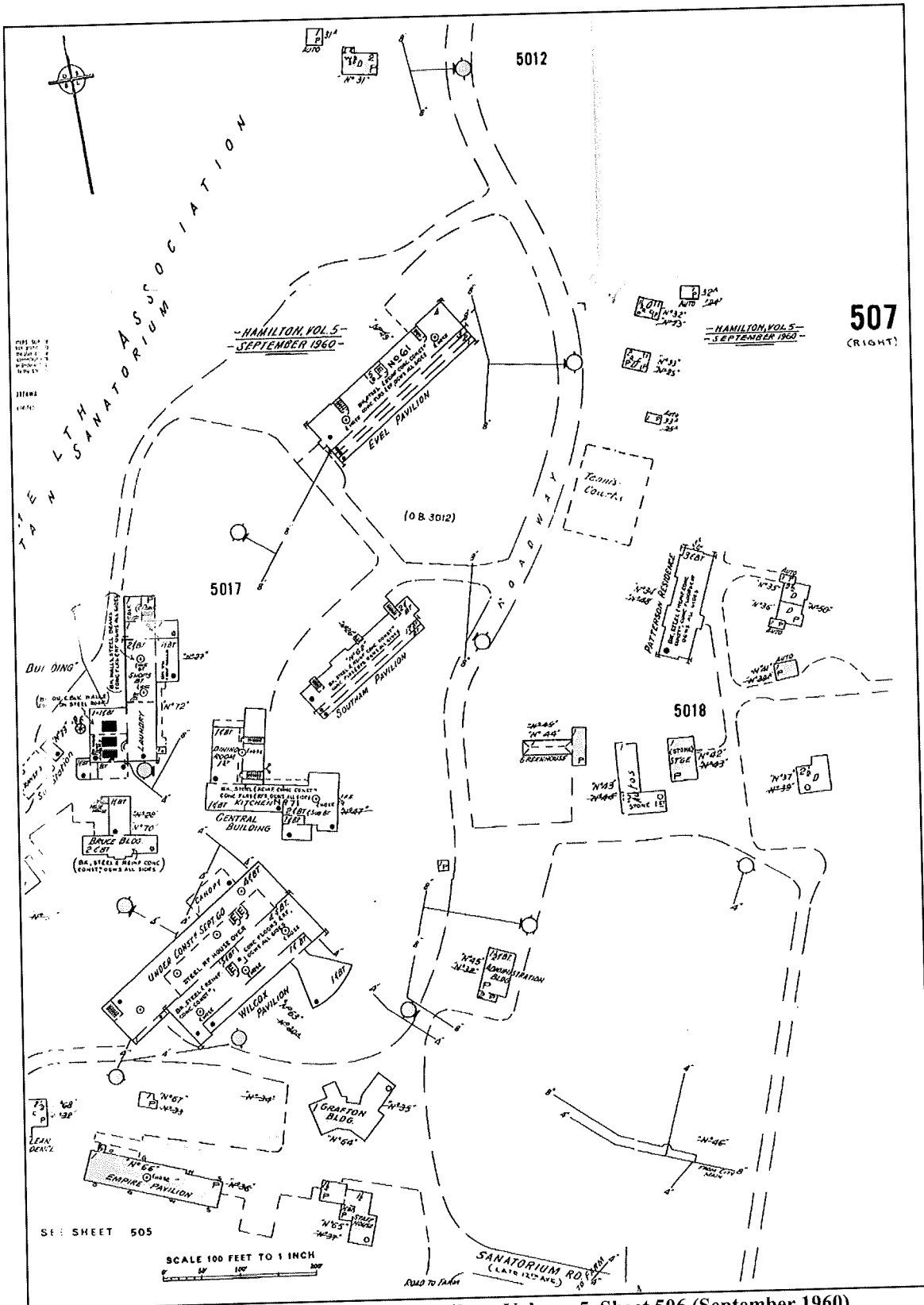
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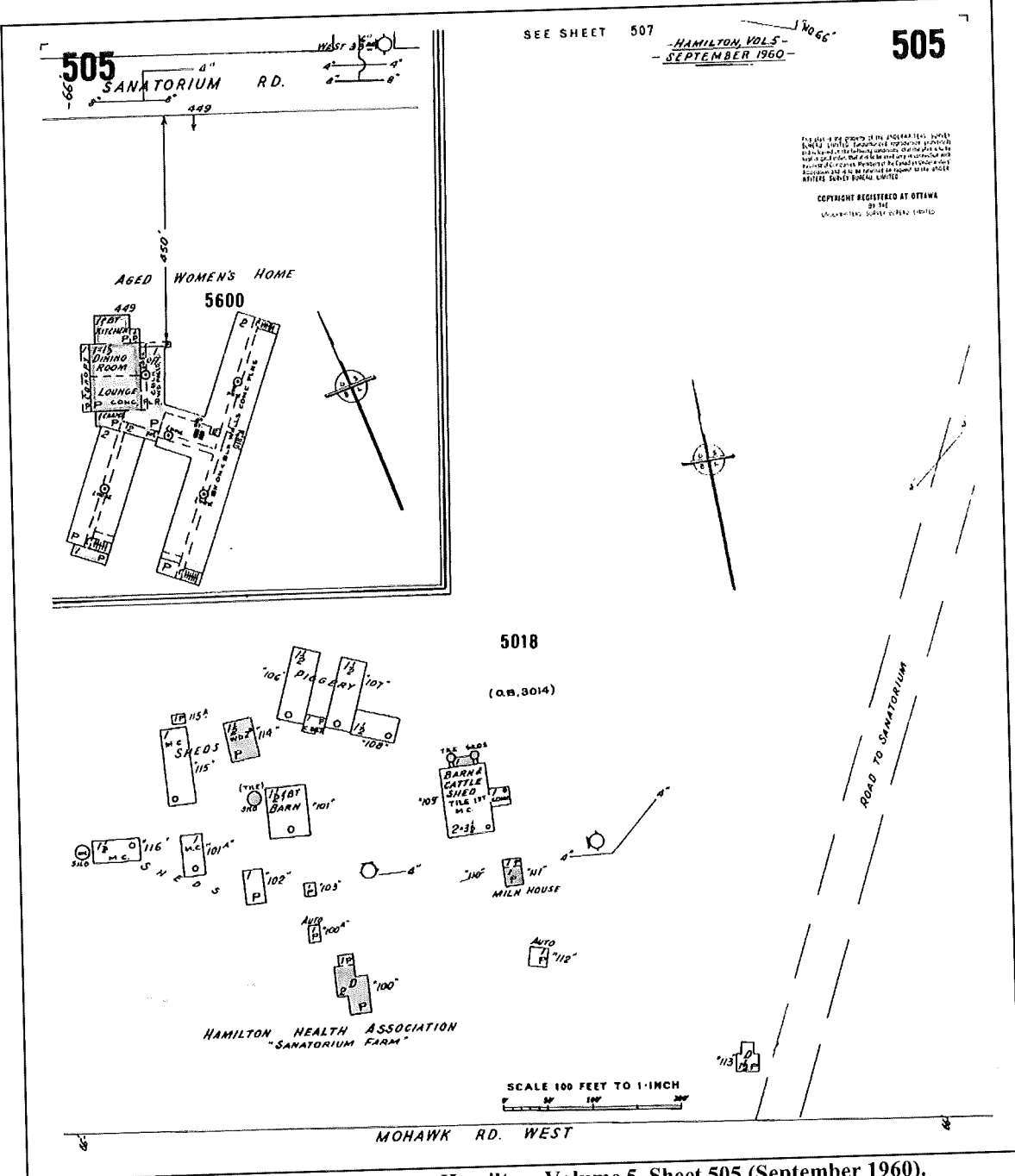
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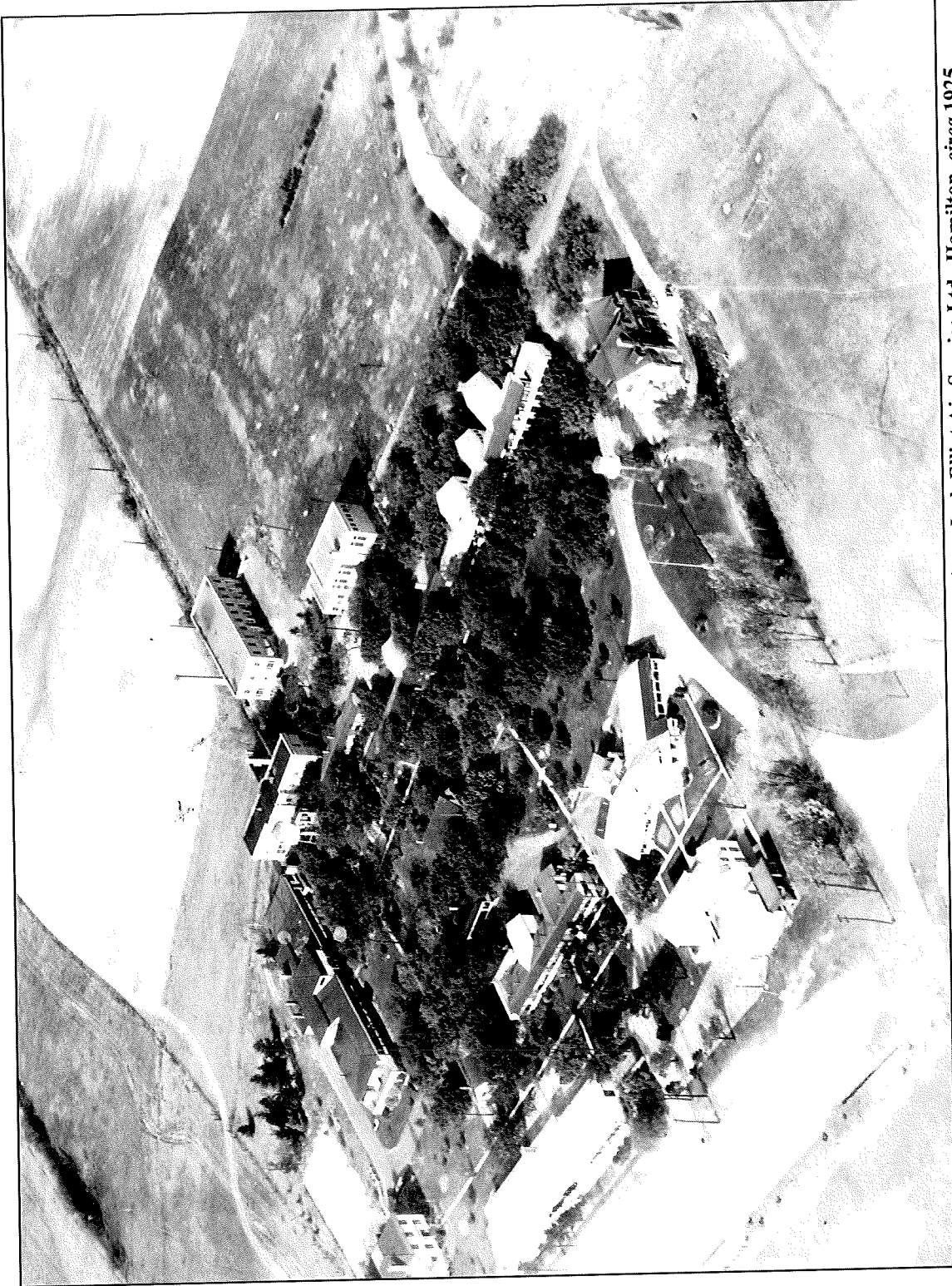
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View taken from the Air of the Orchard Portion of the Mountain Sanatorium. Jack Elliot Air Service Ltd., Hamilton, circa 1925
[Health Sciences Library, McMaster University, Hamilton].

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Heritage Resource Management Consultants

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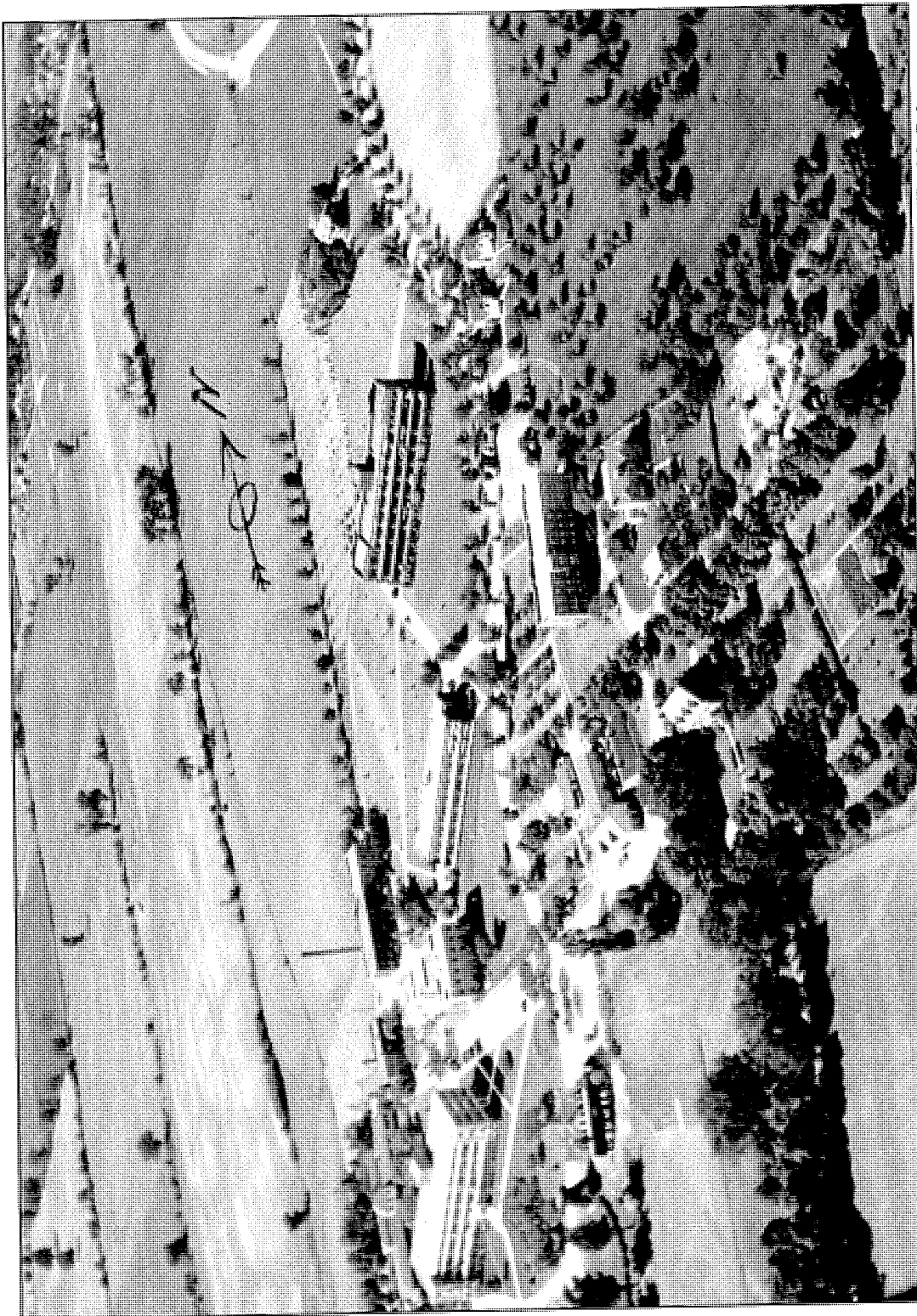
Air map of Sanatorium taken from north end of the grounds. Annual Report, 1936 [Health Sciences Library, McMaster University, Hamilton].

Unterman McPhail Associates
Heritage Resource Management Consultants

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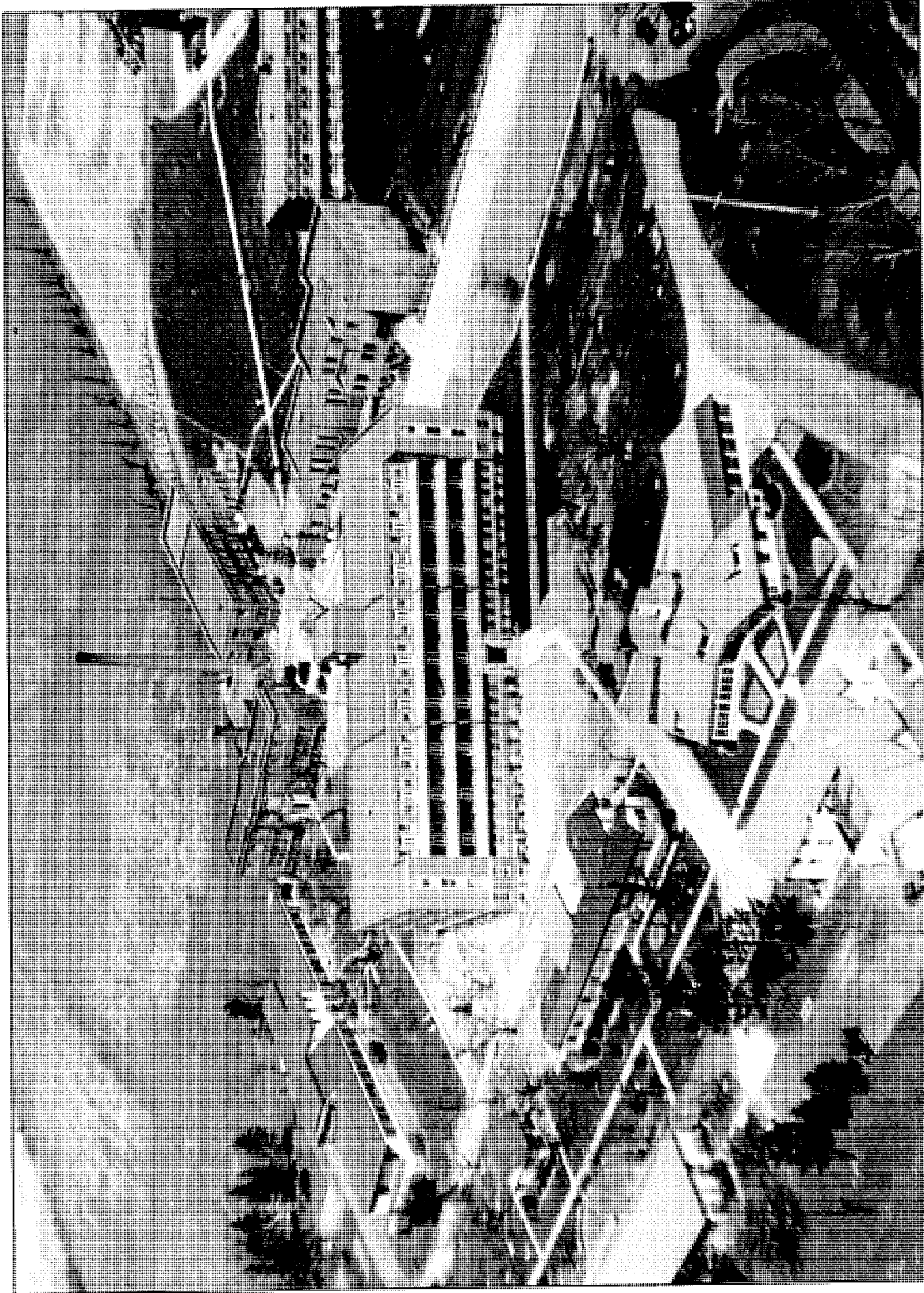
Aerial photograph of 'Orchard' San buildings and grounds. Cunningham Photography, Hamilton, Ontario. 1936 [Health Sciences Library, McMaster University, Hamilton].

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Heritage Resource Management Consultants

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Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
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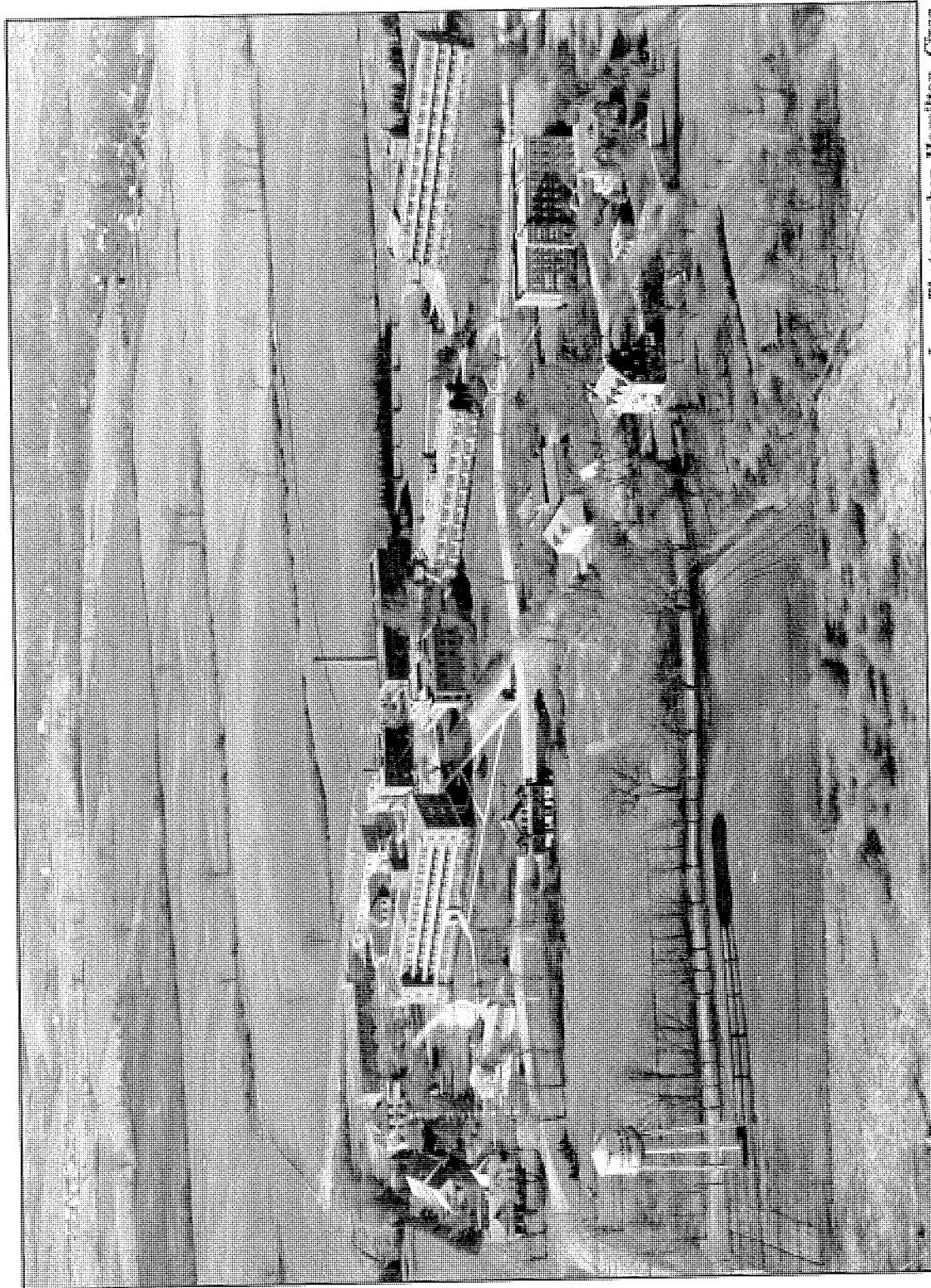
Aerial view of Wilcox Pavilion with Preventorium and Bruce Memorial Building to rear. Circa 1938 [Health Sciences Library, McMaster University, Hamilton].

Unterman McPhail Associates
Heritage Resource Management Consultants

May 2006

Appendix A

Cultural Heritage Resource Assessment Report
Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
Chedoke Campus, Hamilton Health Sciences, City of Hamilton, Ontario



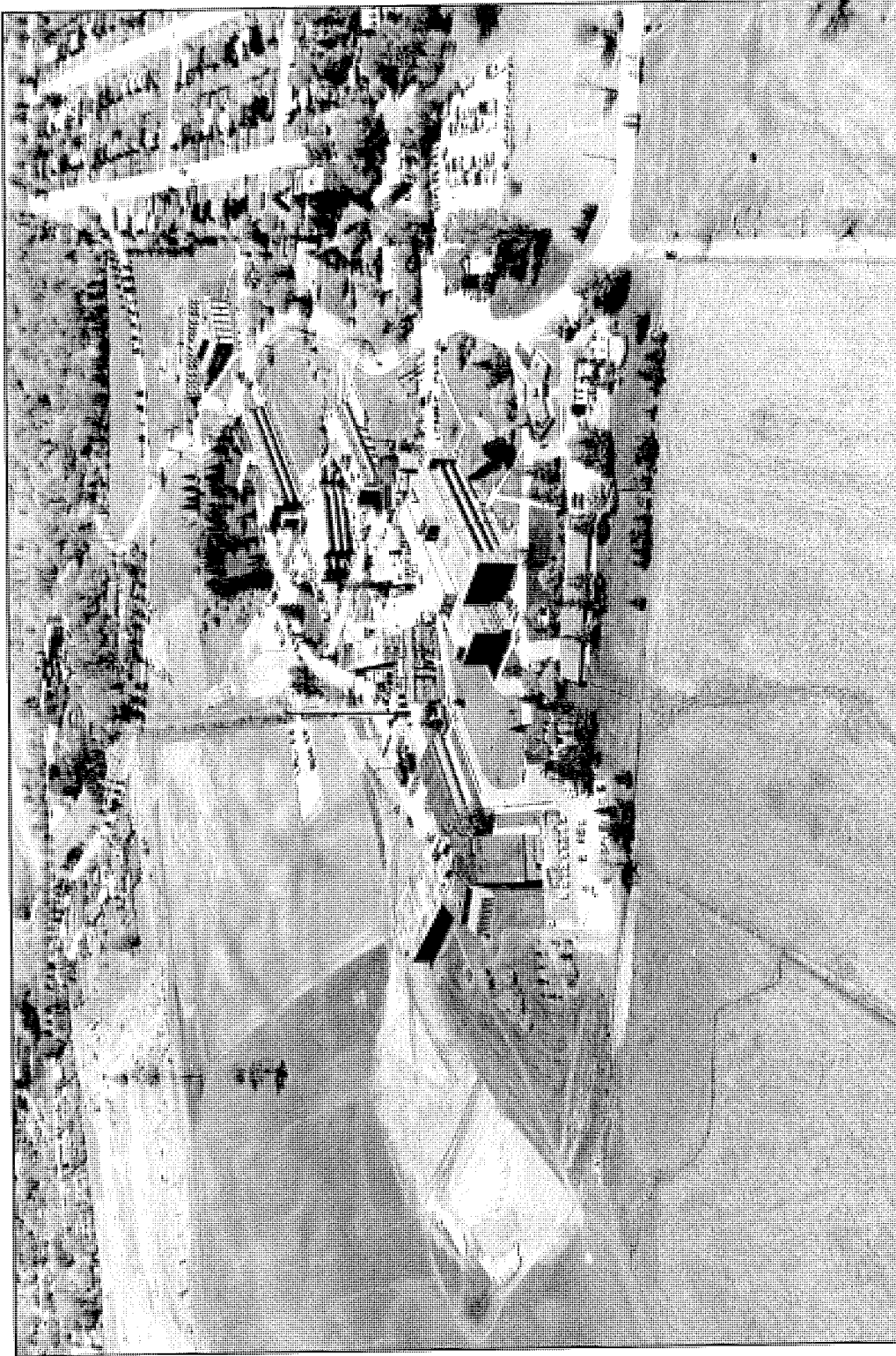
Aerial view showing left to right Wilcox, Southam and Evel Pavilions oriented southeast. Murray Laws Photographer, Hamilton. Circa 1951 [Health Sciences Library, McMaster University, Hamilton].

Unterman McPhail Associates
Heritage Resource Management Consultants

May 2006

Appendix A

Cultural Heritage Resource Assessment Report
Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
Chedoke Campus, Hamilton Health Sciences, City of Hamilton, Ontario

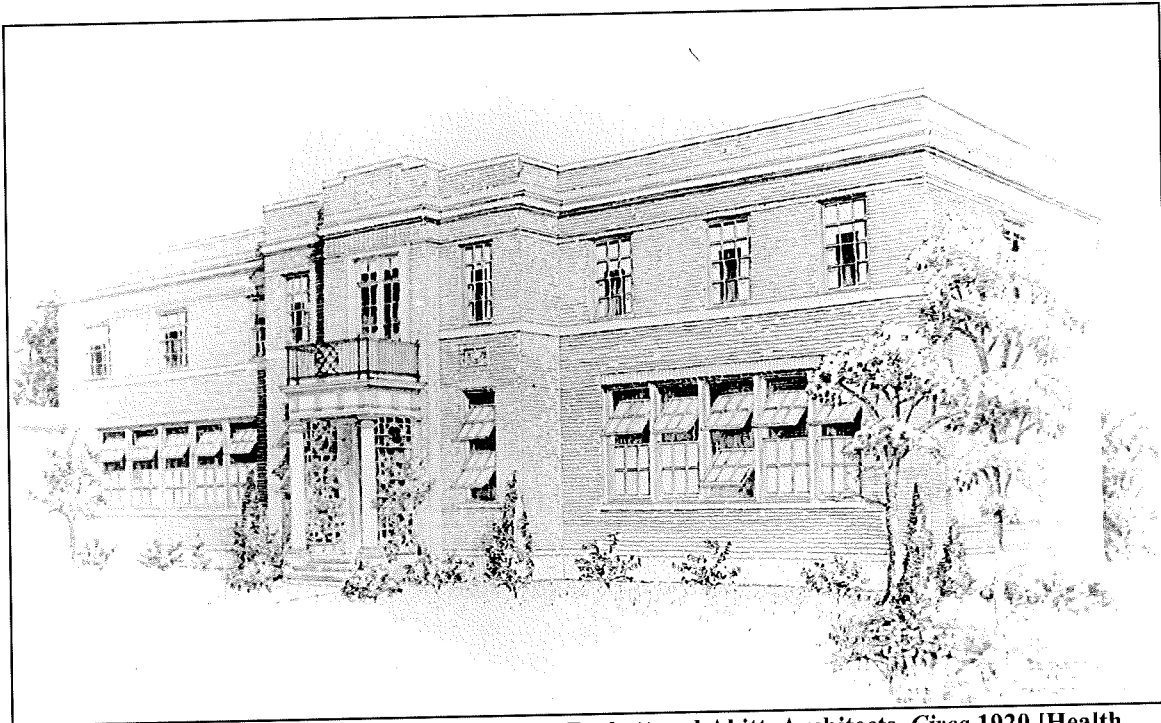


Aerial view north to 'Orchard' San. Circa 1966 [Health Sciences Library, McMaster University, Hamilton].

Unterman McPhail Associates
Heritage Resource Management Consultants

May 2006

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Bruce Building, perspective of southeast corner, Beckett and Akitt, Architects. Circa 1920 [Health Sciences Library, McMaster University, Hamilton].

Bruce Building, northeast corner during construction. Circa 1920. [Health Sciences Library, McMaster University, Hamilton].



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Bruce Building, south elevation at the west end [Health Sciences Library, McMaster University, Hamilton].

Bruce Building, main entry. Note original wood window sash [Health Sciences Library, McMaster University, Hamilton].



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Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
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Appendix A



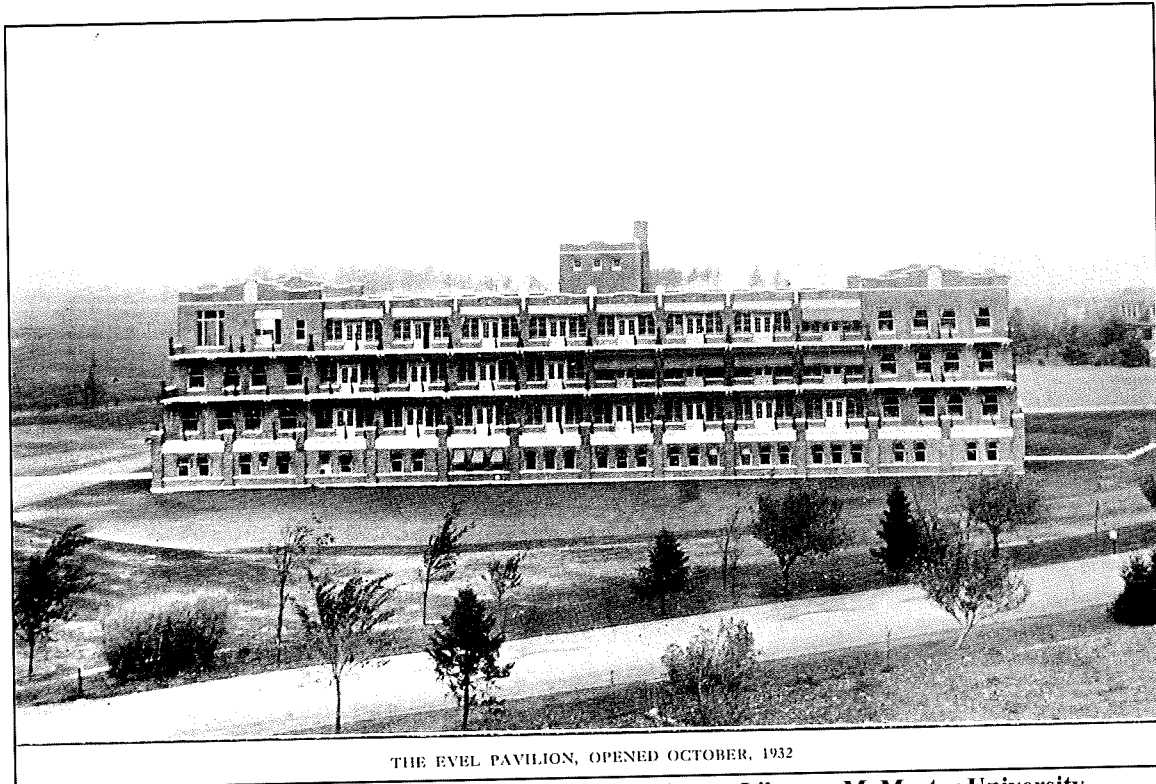
Southam Pavilion from Sanatorium Road [Health Sciences Library, McMaster University, Hamilton].

Southam Pavilion showing the open-air verandahs [Health Sciences Library, McMaster University, Hamilton].



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Appendix A



THE EVEL PAVILION, OPENED OCTOBER, 1932

Evel Pavilion at the time of completion in 1932 [Health Sciences Library, McMaster University, Hamilton].

Evel Pavilion with marching band for entertainment for the patients [Health Sciences Library, McMaster University, Hamilton].



Unterman McPhail Associates
Heritage Resource Management Consultants

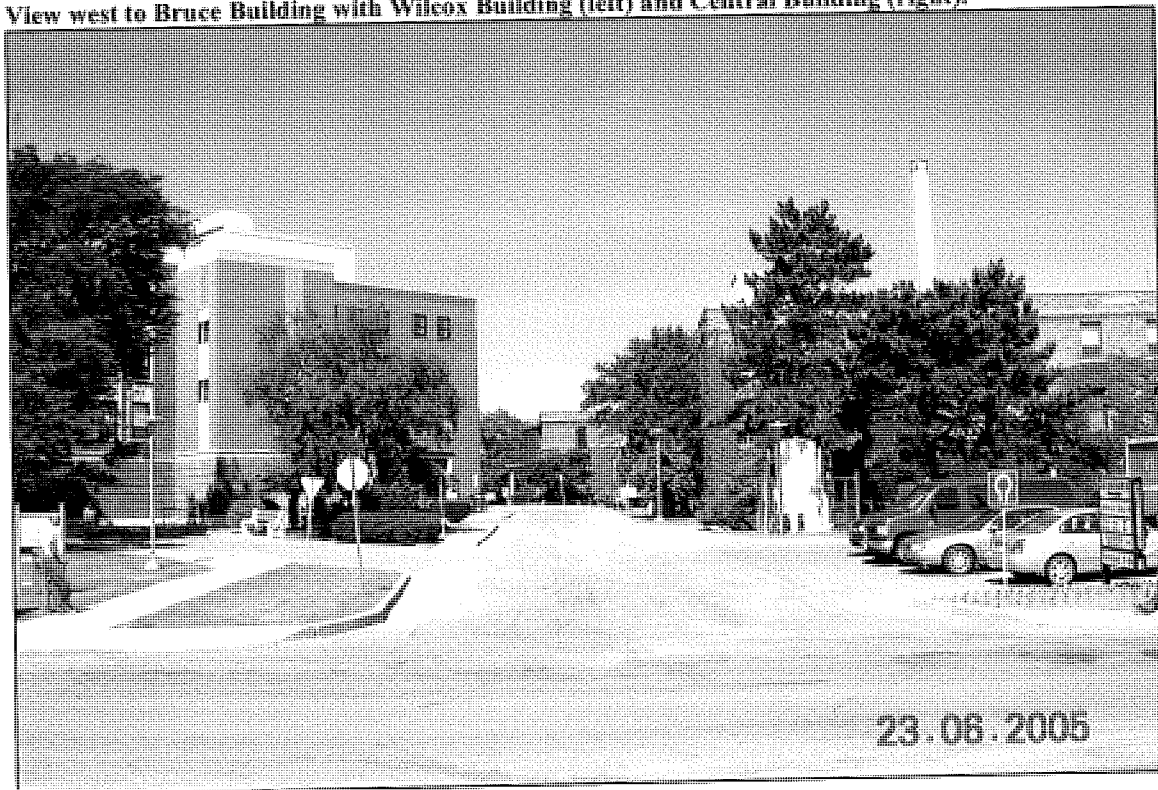
**APPENDIX B: PHOTOGRAPHS
CULTURAL HERITAGE LANDSCAPE**

Cultural Heritage Resource Assessment Report
Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
Chedoke Campus, Hamilton Health Sciences, City of Hamilton, Ontario

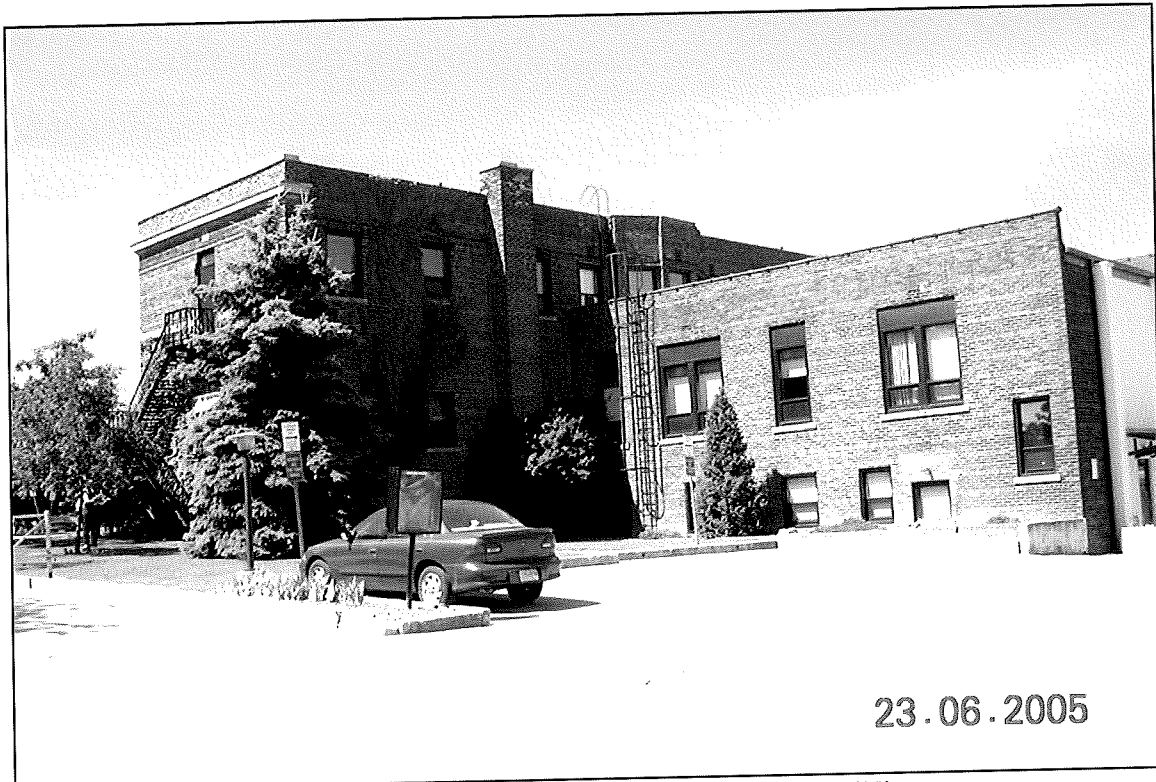


View east from Bruce Building along drive towards Sanatorium Road.

View west to Bruce Building with Wilcox Building (left) and Central Building (right).

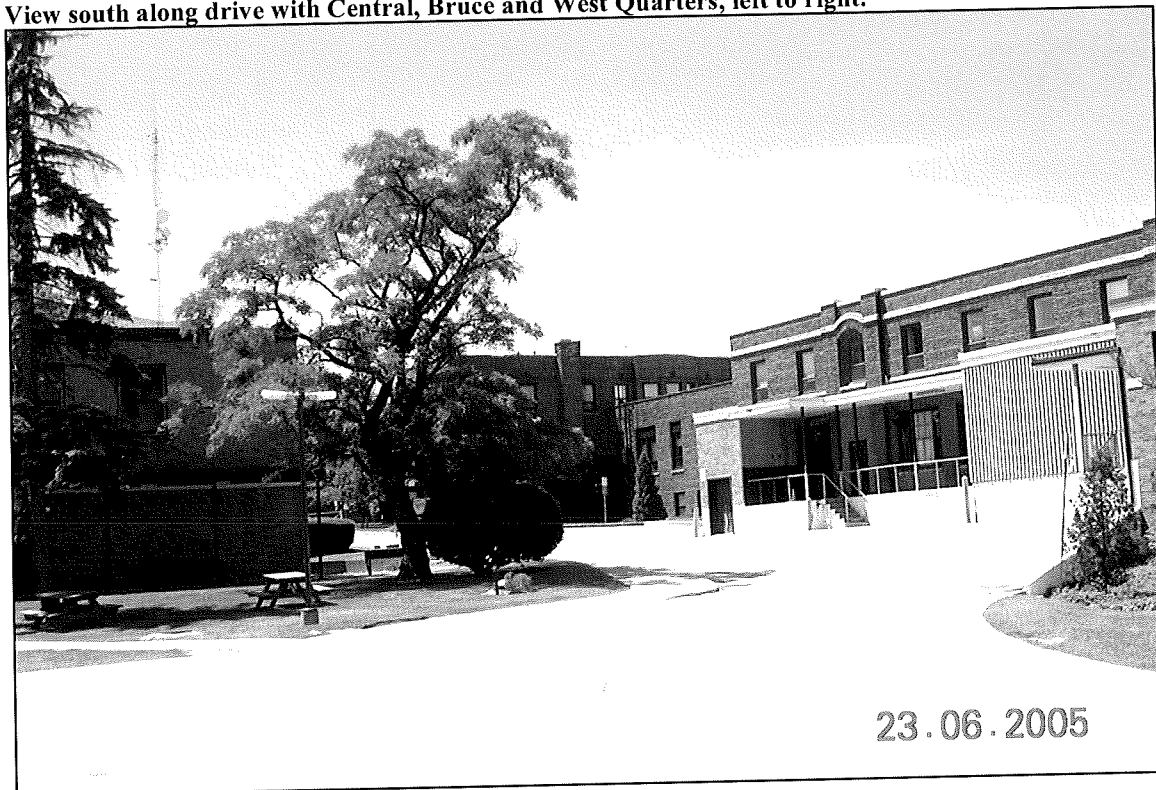


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View southwest showing landscaping and parking at the east end of the building.

View south along drive with Central, Bruce and West Quarters, left to right.



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Appendix B



View across Sanatorium Road to Southam Pavilion, similar to historic photograph.

View south to grounds between Sanatorium Road and Southam Pavilion.



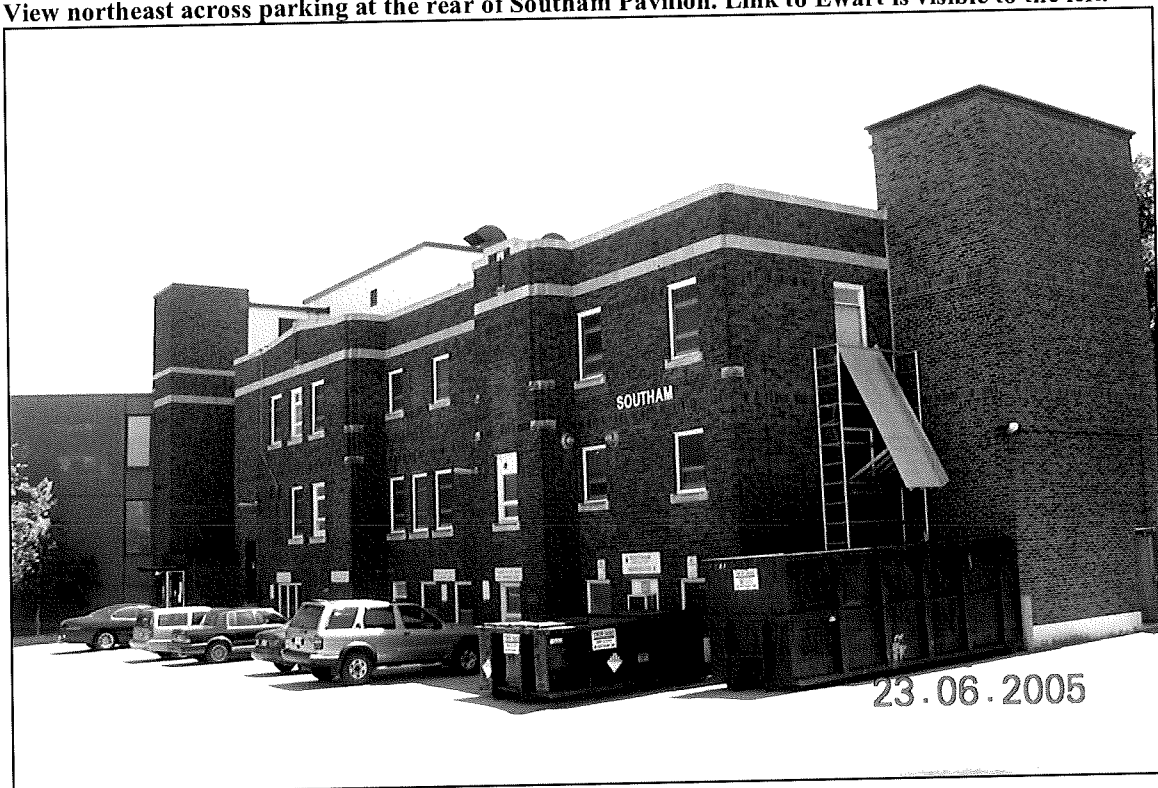
Cultural Heritage Resource Assessment Report
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Appendix B



View east from Ewart Building to Southam Pavilion.

View northeast across parking at the rear of Southam Pavilion. Link to Ewart is visible to the left.



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View west across Sanatorium Road to Evel Pavilion.

View north along Sanatorium Road at the Evel Pavilion towards the Brow site.



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Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
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Appendix B



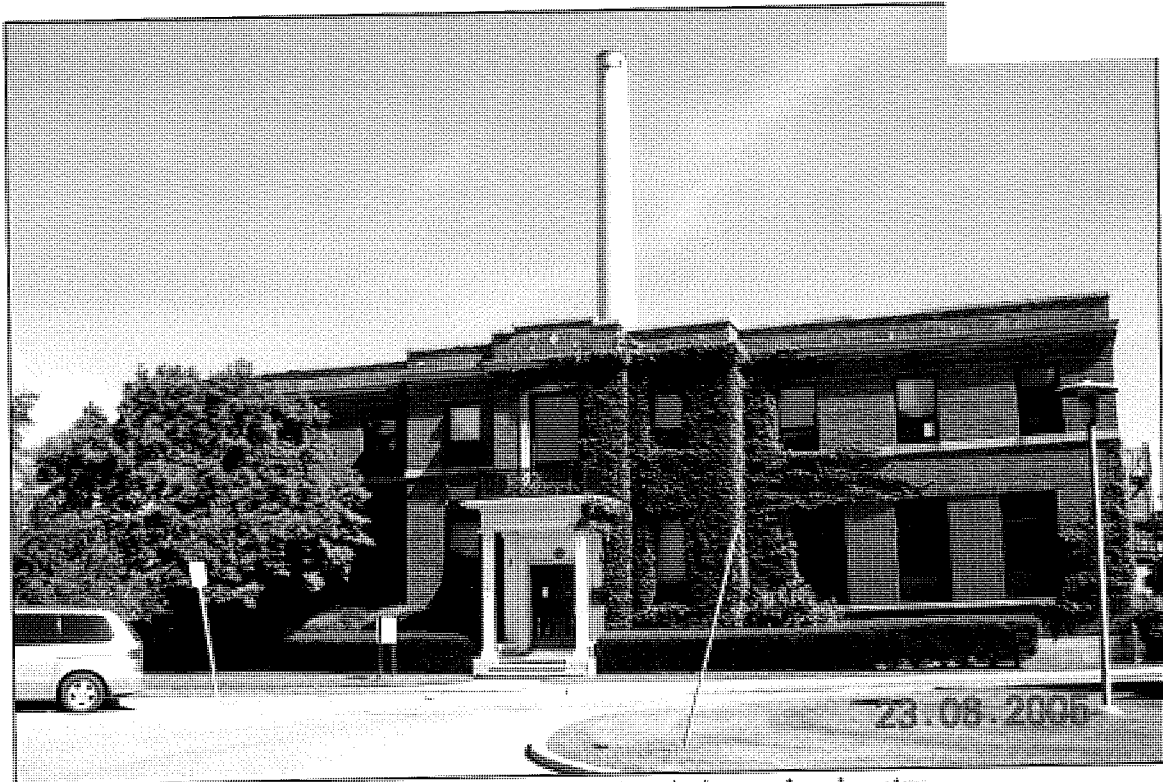
View west along drive to parking adjacent Evel Pavilion with treed grounds to the north.

View east along drive to Sanatorium Rd. with Evel Pavilion to the right and treed grounds to the left.



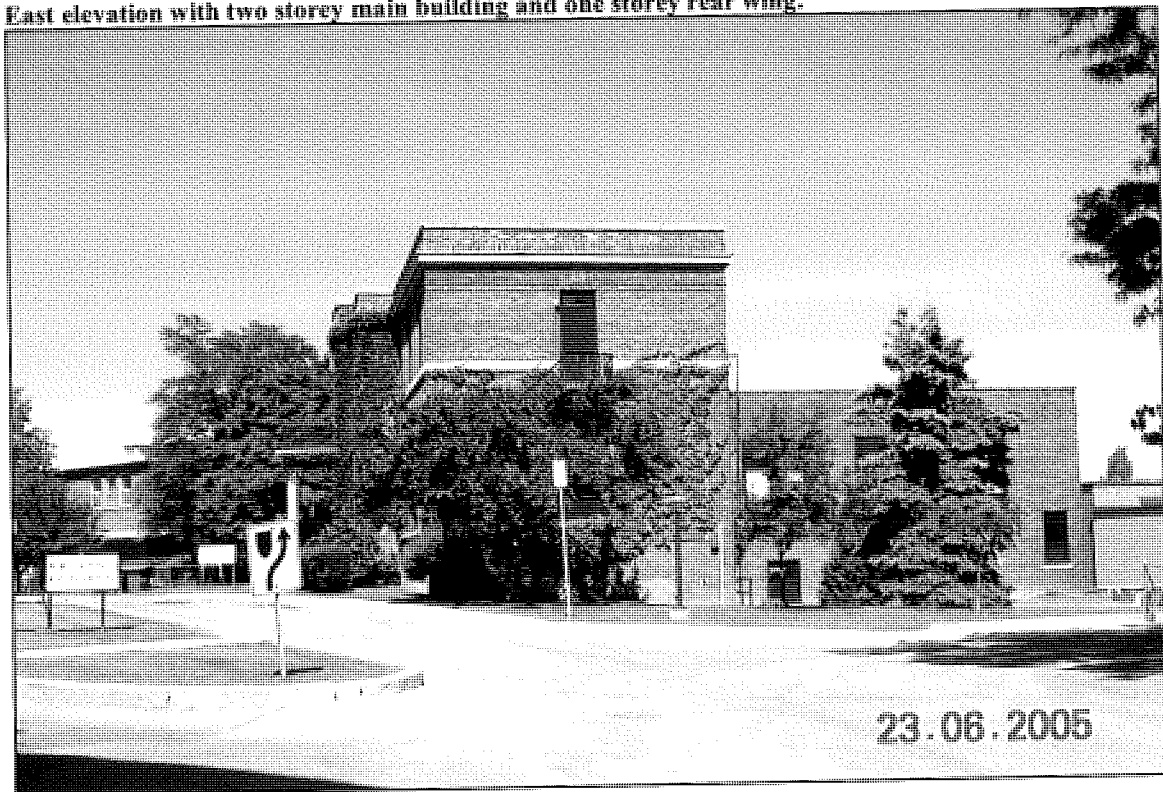
**APPENDIX C: PHOTOGRAPHS
BUILT HERITAGE FEATURES**

Cultural Heritage Resource Assessment Report
Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
Chedoke Campus, Hamilton Health Sciences, City of Hamilton, Ontario



Symmetrically arranged south (front) elevation with frontispiece and main entry.

East elevation with two storey main building and one storey rear wing.

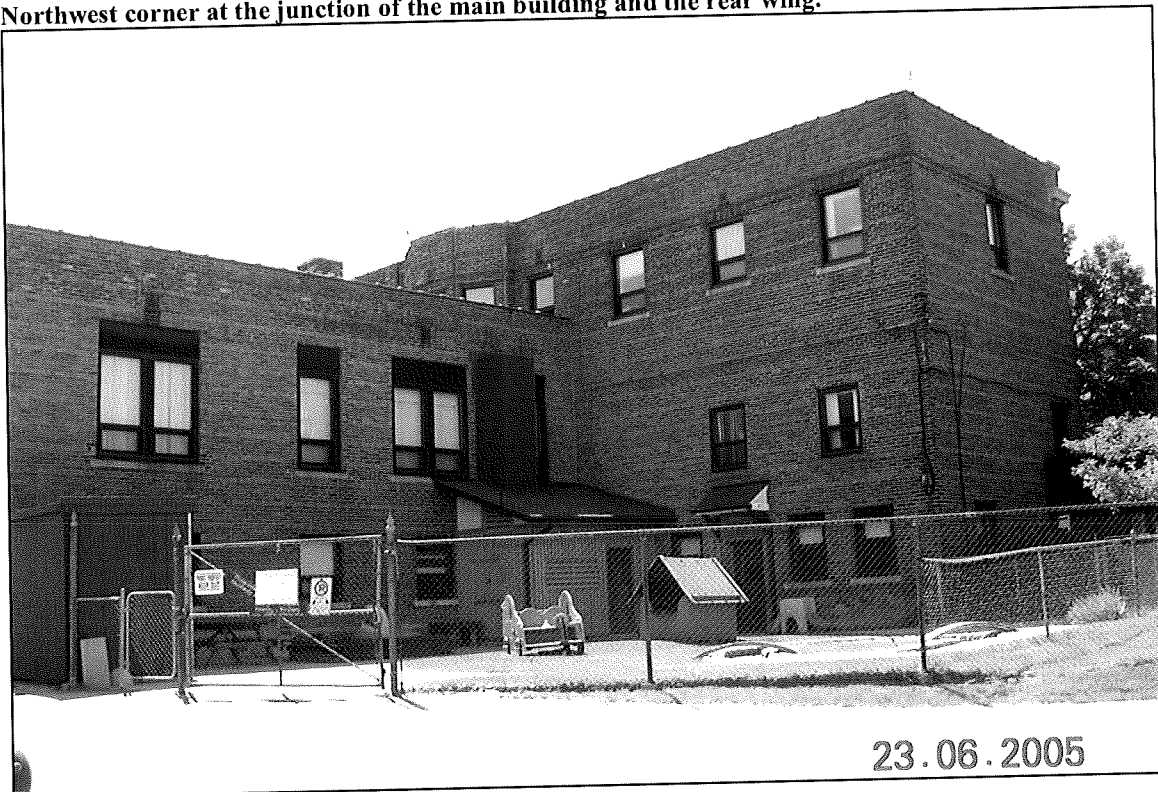


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North (rear) elevation at the east end. Note the lack of decoration on this wall.

Northwest corner at the junction of the main building and the rear wing.



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Appendix C



Detail of the centre frontispiece featuring the main entry.

The former classroom windows are located on the ground floor of the south wall.



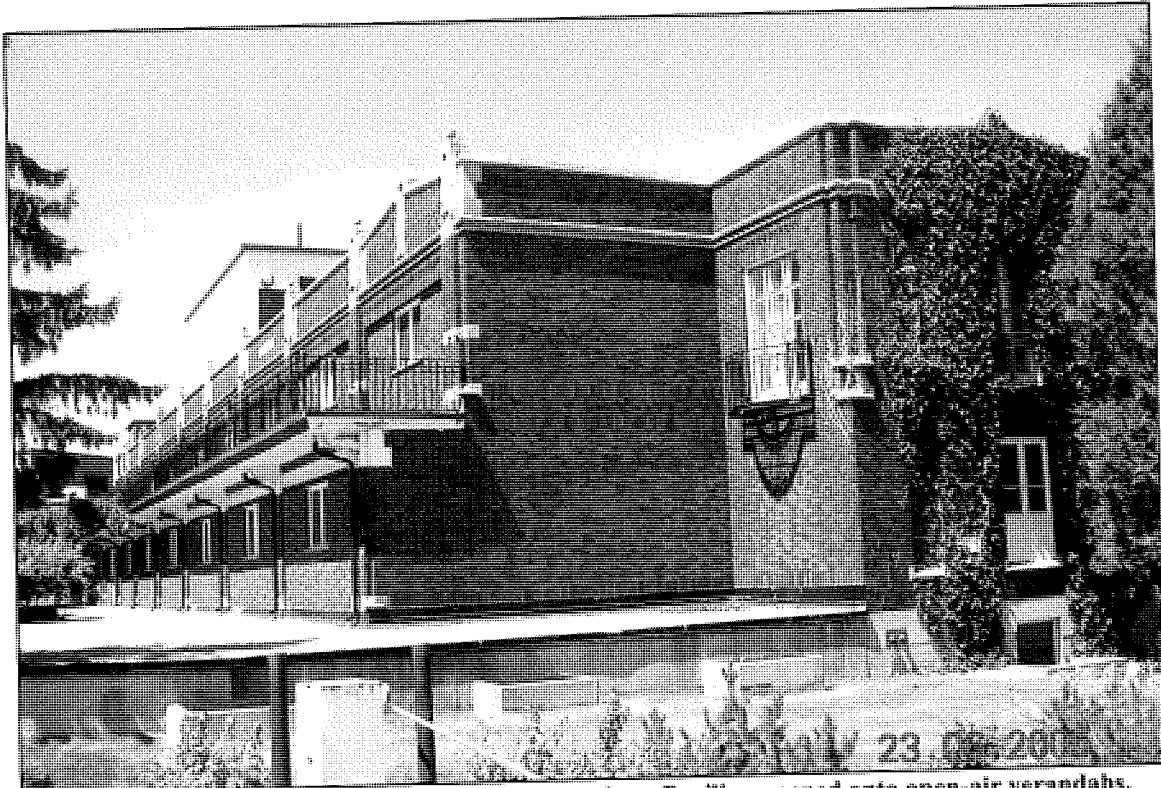


Detail of the decorative swag bordered with brick and artificial stone.

East elevation. Part of the brick cross is visible above the 'Bruce Building' sign.

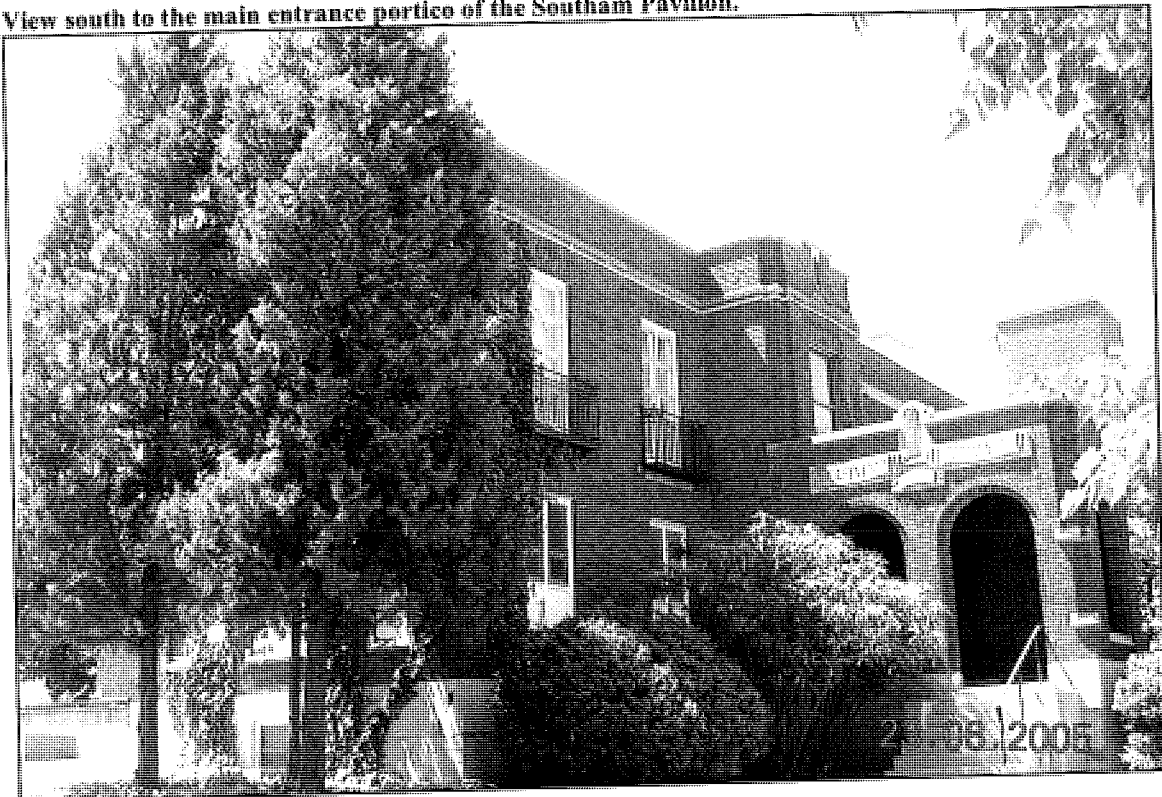


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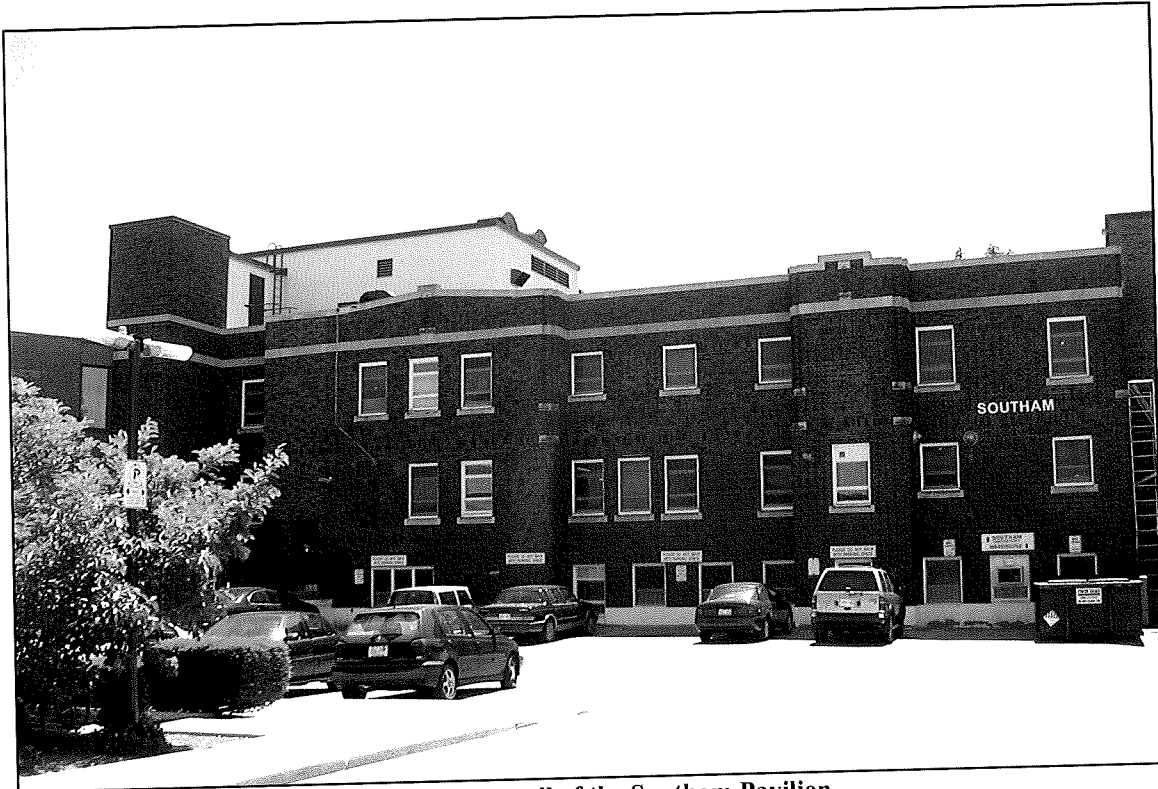


The patient rooms along the southeast wall the Southam Pavilion opened onto open-air verandahs.

View south to the main entrance portico of the Southam Pavilion.

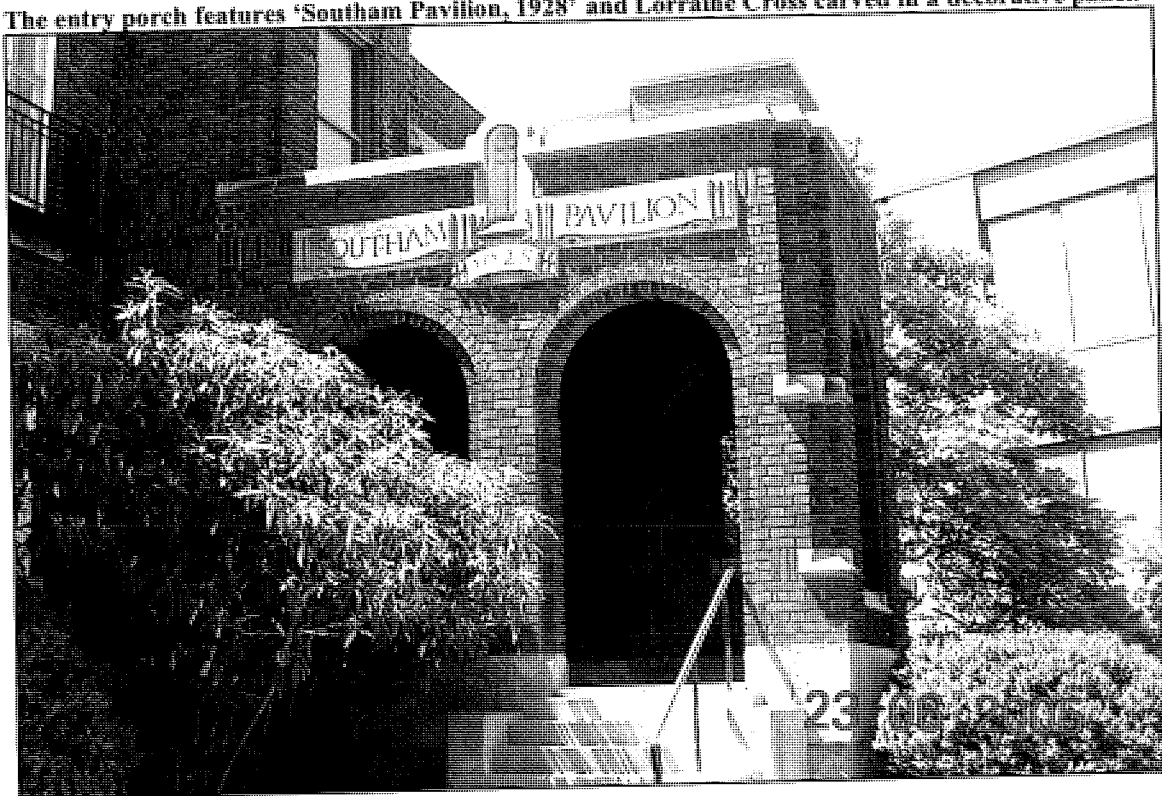


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Offices were arranged along the northwest wall of the Southam Pavilion.

The entry porch features 'Southam Pavilion, 1928' and Lorraine Cross carved in a decorative panel.



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A pedimented parapet with concrete detailing highlights the end bays of the southwest wall.

Paired wood brackets support the upper verandah.



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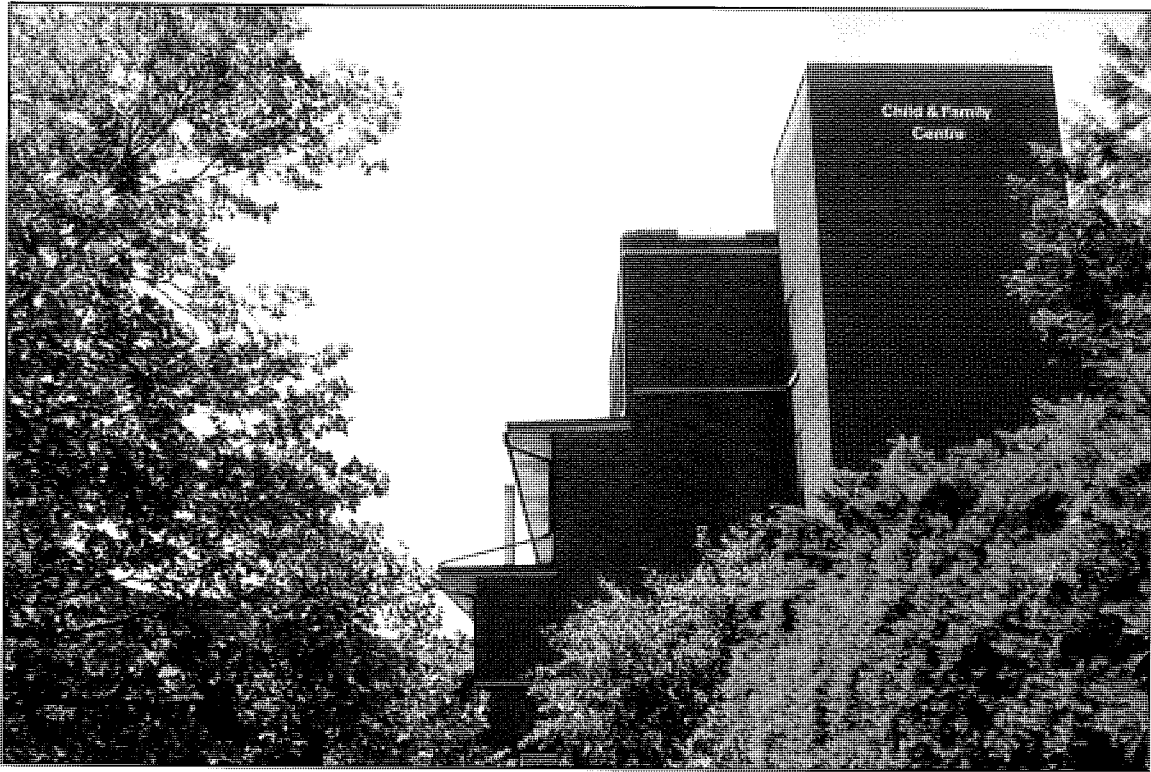
Appendix C



The main entry, offices and treatment rooms were located on the northwest wall of the Evel Pavilion.

An addition housing entry, elevator and stairwell was added to the northwest wall in 1964.





The upper floors were stepped back to form balconies accessible from the adjacent wards.

The patient rooms along the southeast wall the Evel Pavilion opened onto open-air verandahs.



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Detail of the checkerboard brickwork located on the southeast wall.

The Ellen Wanless Chapel installed in 1963 currently forms part of the Resource Centre.



**APPENDIX B: PHOTOGRAPHS
CULTURAL HERITAGE LANDSCAPE**

Cultural Heritage Resource Assessment Report
Bruce Memorial Building, Southam Pavilion, Evel Pavilion and Brow Site
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View east from Bruce Building along drive towards Sanatorium Road.

View west to Bruce Building with Wilcox Building (left) and Central Building (right).



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View southwest showing landscaping and parking at the east end of the building.

View south along drive with Central, Bruce and West Quarters, left to right.



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View across Sanatorium Road to Southam Pavilion, similar to historic photograph.

View south to grounds between Sanatorium Road and Southam Pavilion.



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View west across Sanatorium Road to Evel Pavilion.

View north along Sanatorium Road at the Evel Pavilion towards the Brow site.





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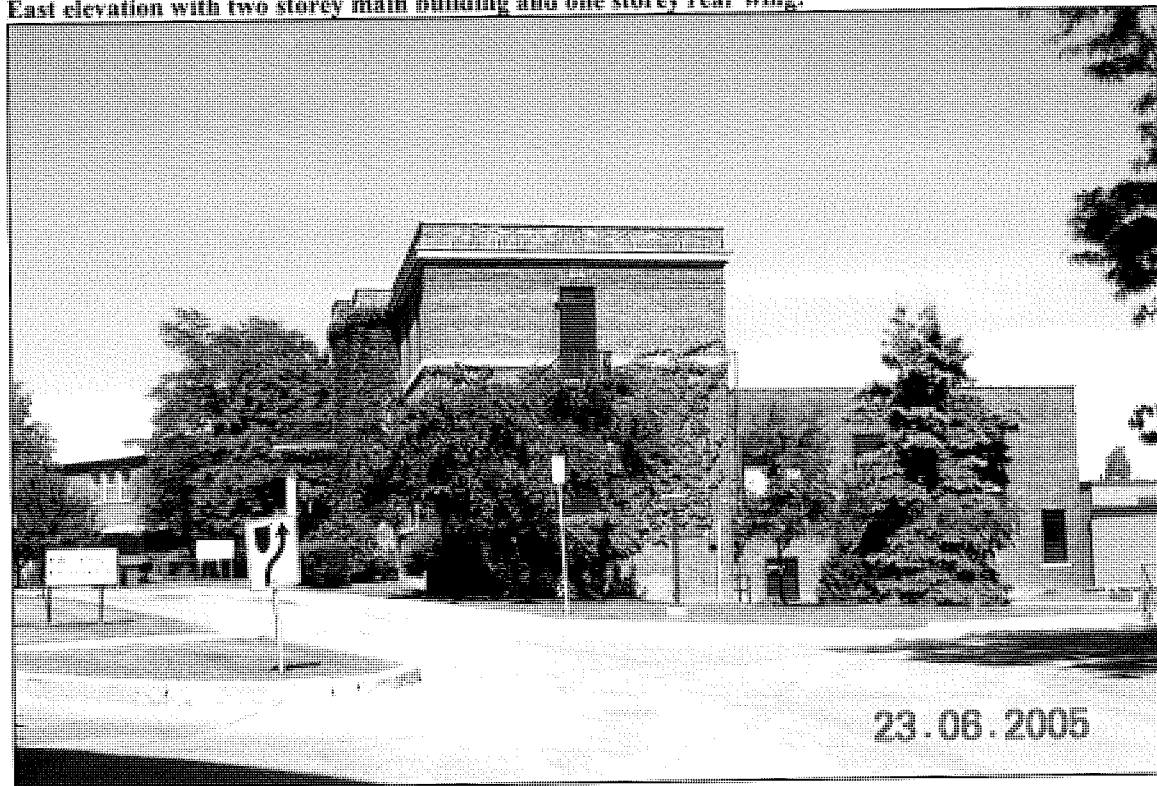
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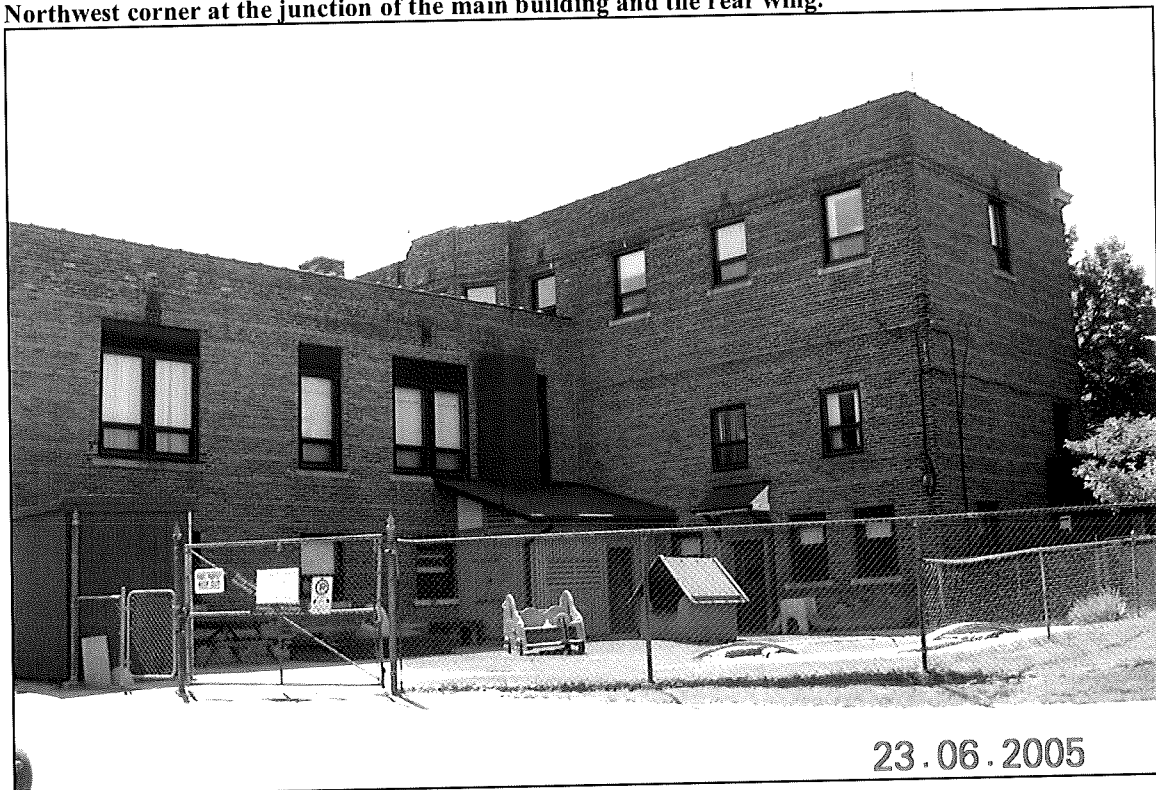


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North (rear) elevation at the east end. Note the lack of decoration on this wall.

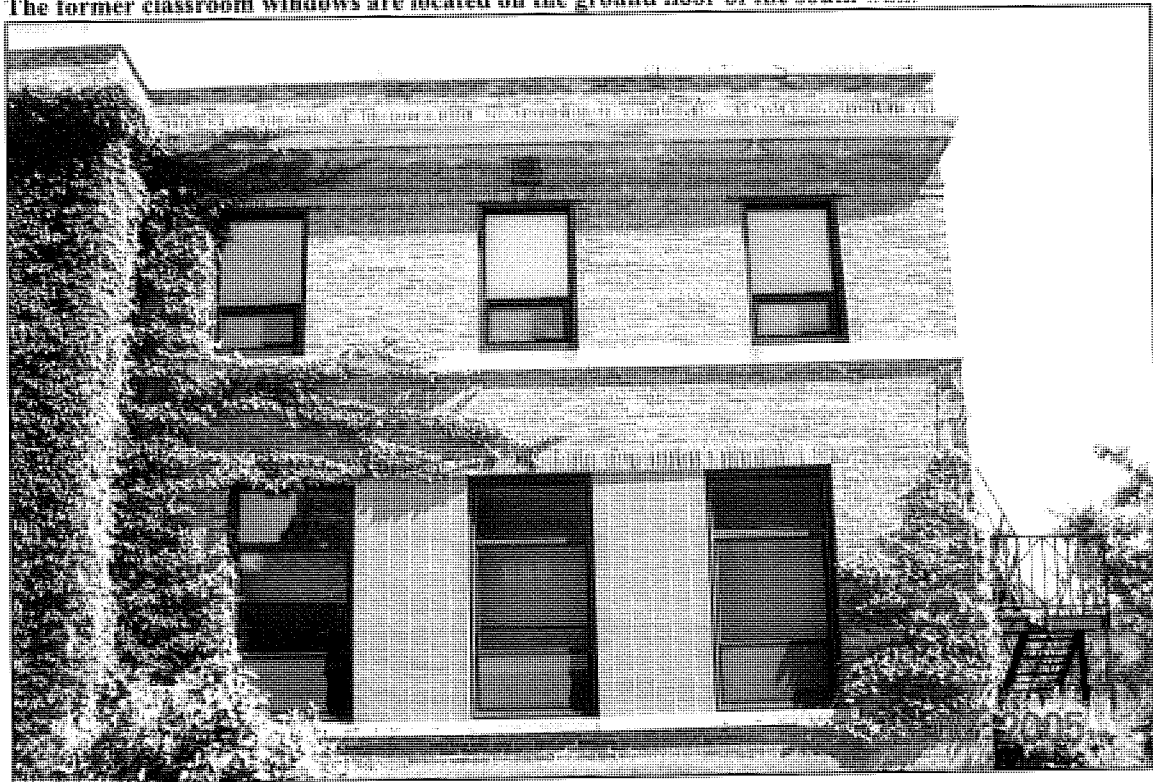
Northwest corner at the junction of the main building and the rear wing.





Detail of the centre frontispiece featuring the main entry.

The former classroom windows are located on the ground floor of the south wall.



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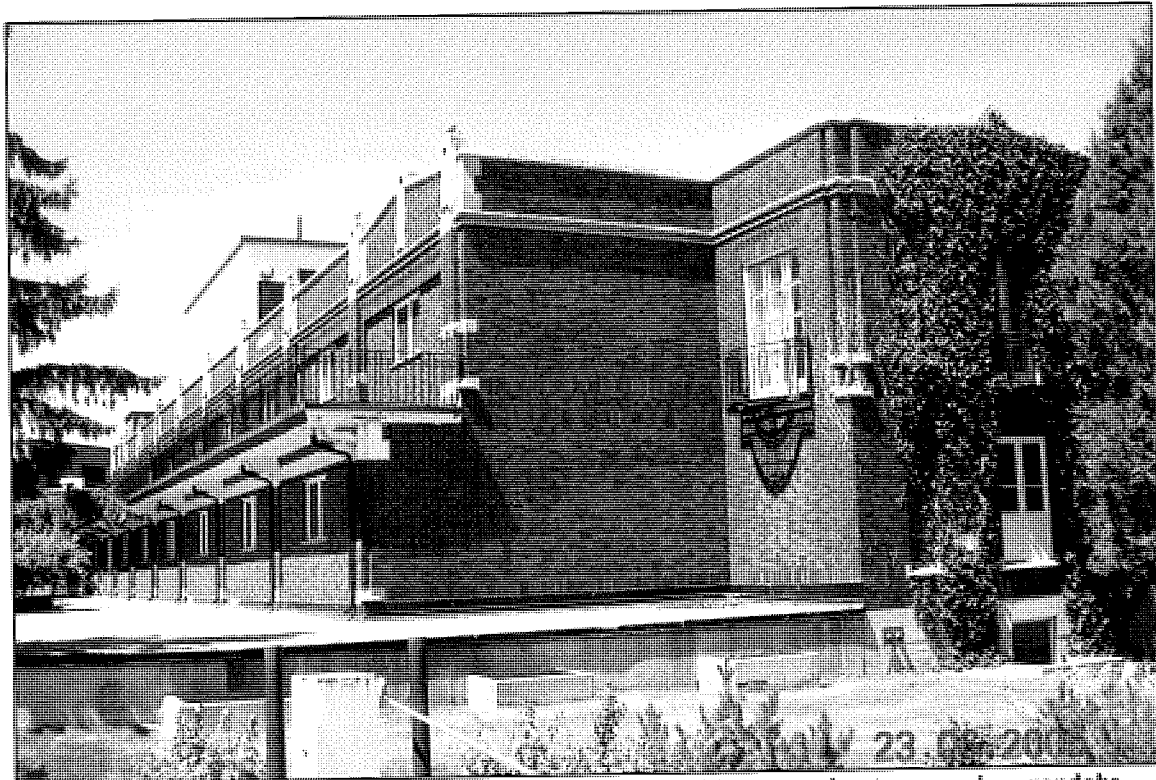
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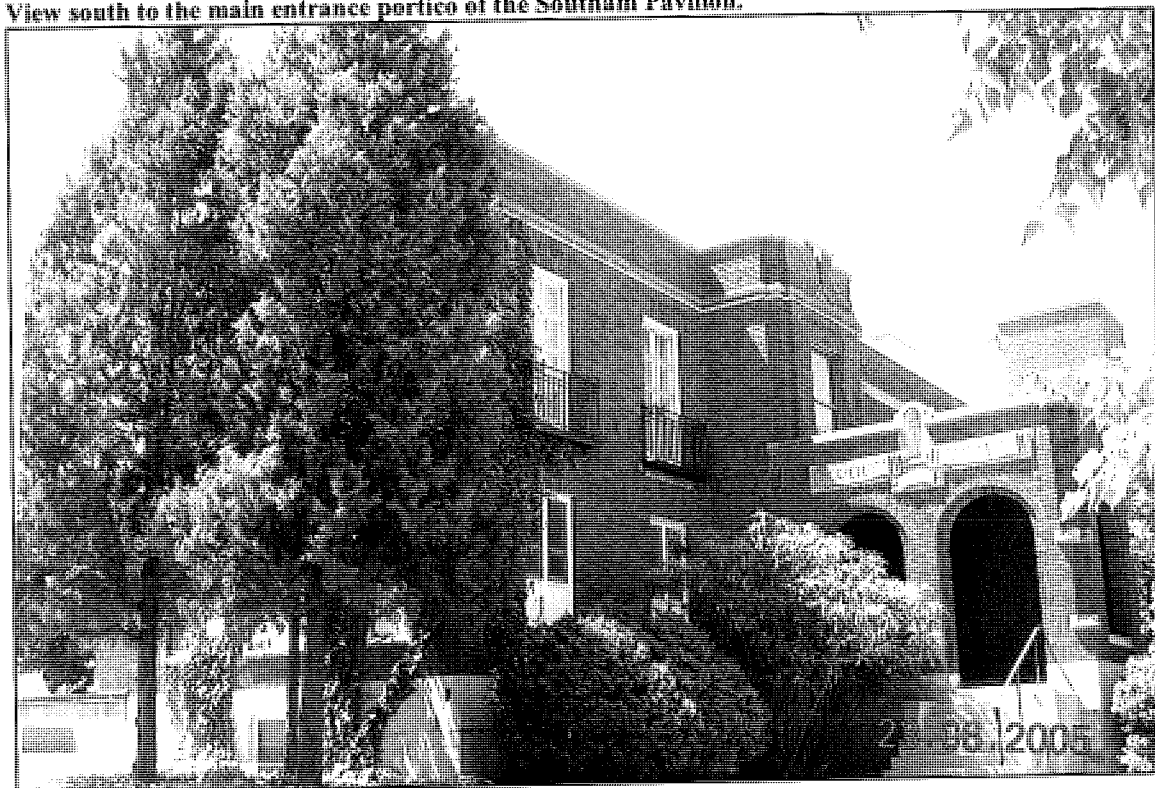
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Appendix C



The patient rooms along the southeast wall the Southam Pavilion opened onto open-air verandahs.

View south to the main entrance portico of the Southam Pavilion.



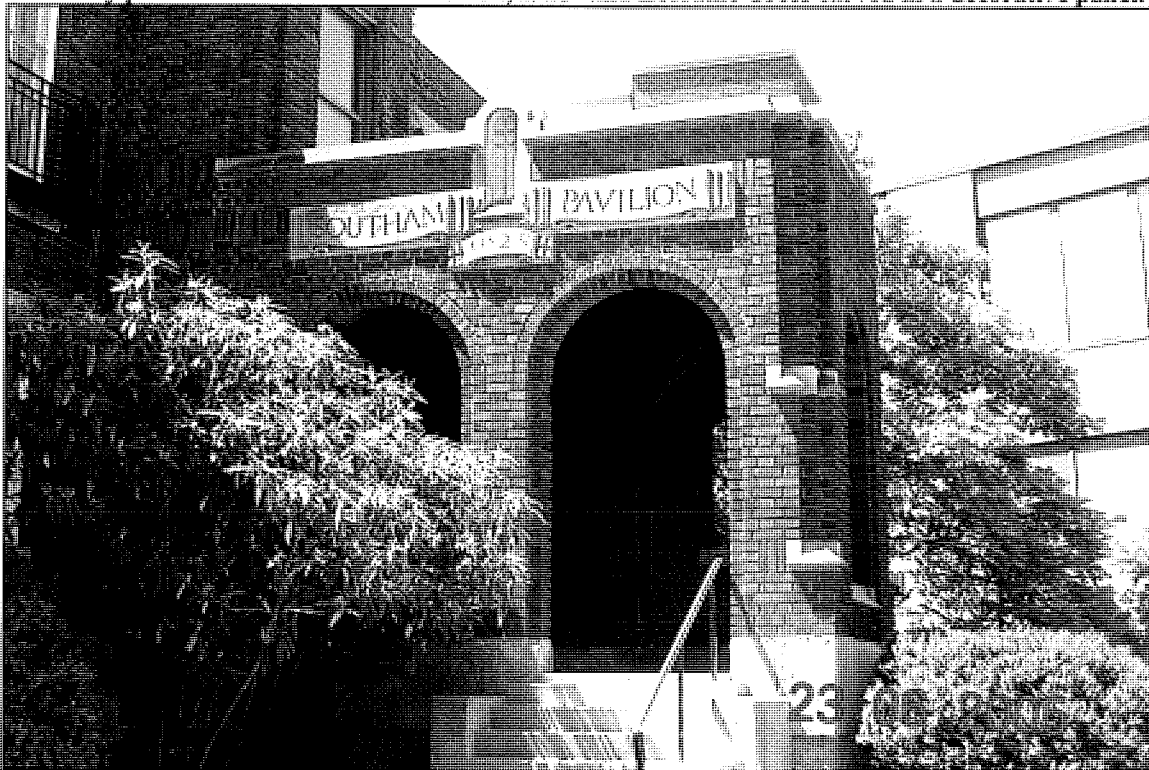
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Appendix C



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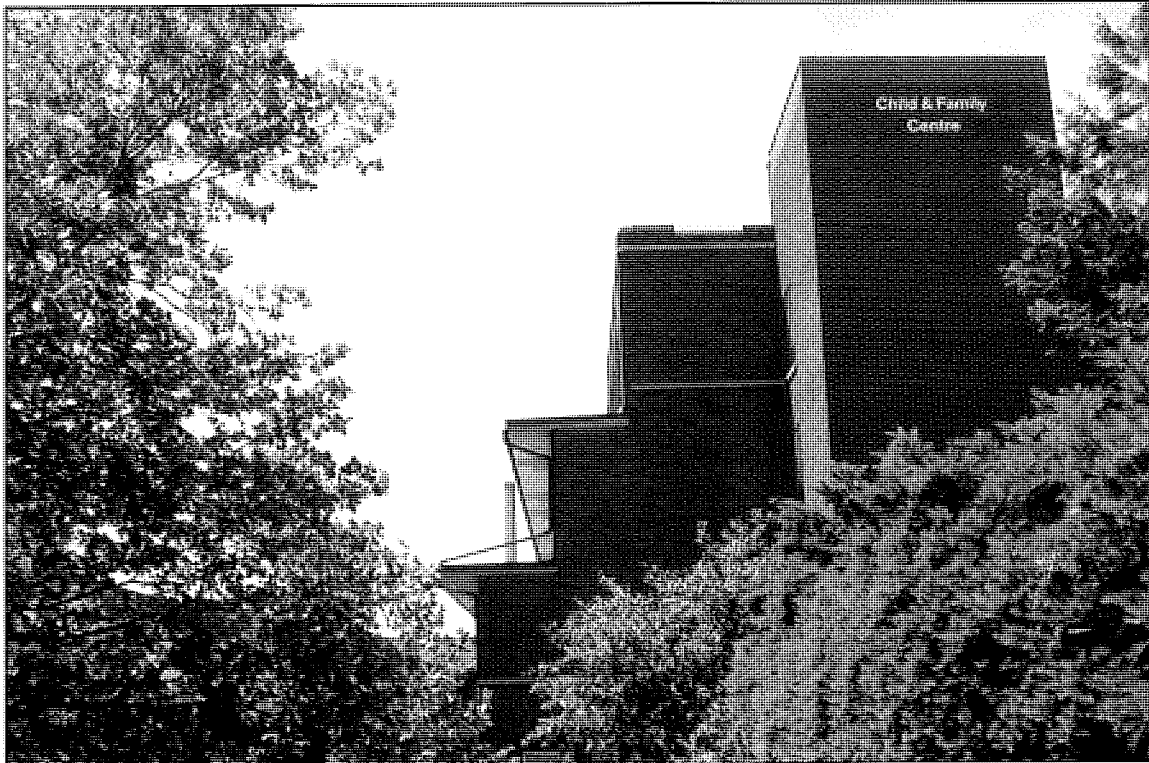
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