

United States Department of the Interior
National Park Service

AUG 13 2015

AUG 28 2015

by SHPO Nat. Register of Historic Places
National Park Service

National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in *How to Complete the National Register of Historic Places Registration Form* (National Register Bulletin 16A). Complete each item by marking "x" in the appropriate box or by entering the information requested. If an item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials and areas of significance, enter only categories and subcategories from the instructions. Place additional entries and narrative items on continuation sheets (NPS Form 10-900a). Use a typewriter, word processor, or computer, to complete all items.

1. Name of Property

historic name St. Joseph Hospital Historic District

other names/site number _____

2. Location

street & number 312 East Alta Vista Avenue & 317 Vanness Avenue [N/A] not for publication

city or town Ottumwa [N/A] vicinity

state Iowa code IA county Wapello code 179 zip code 52501

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended, I hereby certify that this nomination request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60. In my opinion, the property meets does not meet the National Register criteria. I recommend that this property be considered significant nationally statewide locally. see continuation sheet for additional comments).

Steve King 18 AUG 2015
Signature of certifying official/Title Date

State Historical Society of Iowa
State or Federal agency and bureau

In my opinion, the property meets does not meet the National Register criteria. (See continuation sheet for additional comments.)

Signature of certifying official/Title Date

State or Federal agency and bureau

4. National Park Service Certification

I hereby certify that the property is:

entered in the National Register.
 See continuation sheet.

determined eligible for the National Register.
 See continuation sheet.

determined not eligible for the National Register.

removed from the National Register.

other, (explain:)

Signature of the Keeper

Edson H. Beall 10-13-15
Date of Action

St. Joseph Hospital Historic District
Name of Property

Wapello County, IA
County and State

5. Classification

Ownership of Property
(Check as many boxes as apply)

- private
- public-local
- public-State
- public-Federal

Category of Property
(Check only one box)

- building(s)
- district
- site
- structure
- object

Number of Resources within Property
(Do not include previously listed resources in the count.)

Contributing	Noncontributing	
<u>2</u>		buildings
		sites
<u>1</u>		structures
		objects
<u>3</u>		Total

Name of related multiple property listing
(Enter "N/A" if property is not part of a multiple property listing.)

N/A

Number of contributing resources previously listed in the National Register

1

6. Function or Use

Historic Functions
(Enter categories from instructions)

HEALTH CARE/Hospital

EDUCATION/College

Current Functions
(Enter categories from instructions)

WORK IN PROGRESS

7. Description

Architectural Classification
(Enter categories from instructions)

LATE 19TH & EARLY 20TH CENTURY REVIVALS/

Classical Revival

MODERN MOVEMENT

Materials
(Enter categories from instructions)

foundation CONCRETE

walls BRICK

LIMESTONE

roof SYNTHETIC/Rubber

other _____

Narrative Description

(Describe the historic and current condition of the property on one or more continuation sheets.)

St. Joseph Hospital Historic District
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8. Statement of Significance

Applicable National Register Criteria

(Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

- A** Property is associated with events that have made a significant contribution to the broad patterns of our history.
- B** Property is associated with the lives of persons significant in our past.
- C** Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.
- D** Property has yielded, or is likely to yield, information important in prehistory or history.

Criteria Considerations

(Mark "x" in all the boxes that apply.)

Property is:

- A** owned by a religious institution or used for religious purposes.
- B** removed from its original location.
- C** a birthplace or grave.
- D** a cemetery.
- E** a reconstructed building, object, or structure.
- F** a commemorative property.
- G** less than 50 years of age or achieved significance within the past 50 years.

Narrative Statement of Significance

(Explain the significance of the property on one or more continuation sheets.)

9. Major Bibliographical References

Bibliography

(Cite the books, articles, and other sources used in preparing this form on one or more continuation sheets.)

Previous documentation on file (NPS):

- preliminary determination of individual listing (36 CFR 67) has been requested
- previously listed in the National Register
- previously determined eligible by the National Register
- designated a National Historic Landmark
- recorded by Historic American Buildings Survey # _____
- recorded by Historic American Engineering Record # _____

Areas of Significance

(Enter categories from instructions)

HEALTH/MEDICINE

ARCHITECTURE

Period of Significance

1926 – 1965

Significant Dates

1926

1945

1960

Significant Person

(Complete if Criterion B is marked above)

Cultural Affiliation

Architect/Builder

Brielmaier, E. & Sons

Morgan, D.D. (Dane)

Primary location of additional data:

- State Historic Preservation Office
- Other State agency
- Federal agency
- Local government
- University
- Other

Name of repository: _____

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10. Geographical Data

Acreeage of Property 10 Acres

UTM References

(Place additional UTM references on a continuation sheet.)

1	[115]	[5150131919]	[41514311719]	2	[115]	[5150161018]	[41514311719]
	Zone	Easting	Northing		Zone	Easting	Northing
3	[115]	[5150161018]	[415142191913]	4	[115]	[5150131919]	[415142191913]

See continuation sheet

Verbal Boundary Description

(Describe the boundaries of the property on a continuation sheet.)

Boundary Justification

(Explain why the boundaries were selected on a continuation sheet.)

11. Form Prepared By

name/title Molly Myers Naumann, Consultant mollynaumann@outlook.com
organization For Walker Coen Lorentzen date February 2015
street & number 167 West Alta Vista telephone 641-777-3318
city or town Ottumwa state IA zip code 52501-1437

Additional Documentation

Submit the following items with the complete form:

Continuation Sheets

Maps

A **USGS map** (7.5 or 15 minute series) indicating the property's location.

A **Sketch map** for historic districts and properties having large acreage or numerous resources.

Photographs

Representative **black and white photographs** of the property.

Additional items

(Check with the SHPO or FPO for any additional items)

Property Owner

(Complete this item at the request of SHPO or FPO.)

name Blackbird Investments LLC
street & number 3450 160th Street telephone 515.710.9495
city or town Urbandale state IA zip code 50323

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C. 470 et seq.).

Estimated Burden Statement: Public reporting burden for this form is estimated to average 18.1 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Chief, Administrative Services Division, National Park Service, P.O. Box 37127, Washington, DC 20013-7127; and the Office of Management and Budget, Paperwork Reductions Projects (1024-0018), Washington, DC 20503.

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St. Joseph Hospital Historic District
Wapello County, IA

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NARRATIVE DESCRIPTION:

The St. Joseph Hospital Historic District (1926, 1945, 1960) at 312 East Alta Vista, occupies ten acres in the northeast section of Ottumwa, the county seat of Wapello County. Wapello County is the second county north of the Missouri state line, and the fourth county west of the Mississippi River. (Figure 1, page 28) The grounds are bounded by East Alta Vista Avenue on the north, Ash Street on the west, Vanness Avenue on the south, and on the east by the rear lot lines of the houses on the west side of North Elm Street. It was built and operated by the Sisters of the Humility of Mary. The hospital is a key building in the early twentieth century Vogel Place Historic District (NRHP) on the west, there are mid-twentieth century houses to the east, with the Ottumwa Country Club golf course on the north. (Figures 2 & 3, pages 28 & 29) With the exception of the hospital buildings, this is a residential neighborhood. At the time of construction, Alta Vista Avenue was the northern city limits of Ottumwa. The St. Joseph historic district contains three buildings (St. Joseph Hospital, the Nurses' Residence, and a deteriorated garage) plus one structure, the circular driveway on the west side of the hospital at the end of Vogel Avenue. (Figure 4, page 30) St. Joseph Hospital is a Y-shaped building with the top of the Y opening due west toward Vogel Avenue, with the wings extending to the northwest and southwest. The "leg" of the Y points east toward Elm Street. The "new" 1960 wing is located on the north side of the original building, extending to the northeast. The brick garage is located immediately east of the hospital, and the Nurse's Residence is located to the southeast, facing Vanness Avenue (317 Vanness Avenue). All three buildings are of brick construction. In addition to the circular drive, large concrete parking lots are located on both the north and south sides of the hospital, with entrances off of East Alta Vista and Vanness.

St. Joseph Hospital

The 1926 hospital was designed by E. Brielmaier & Sons of Milwaukee in a rather subdued Classical Revival style. (Figure 5, page 31) The original building consists of a five story central block with two four story wings at the southwest and northwest corners. The front entrance was centered on the west elevation of the central block, facing Vogel Avenue. When the addition by Brooks & Borg of Des Moines was constructed on the northeast in 1960, it consisted of two sections, a four story wing that attached directly to the original part of the hospital, plus a single story section in front that housed the new main entrance, facing Alta Vista. The 1960 addition was constructed at a lower grade, requiring the floors of the original hospital to be renumbered. Thus, the original main floor became the second floor, etc.

Exterior:

The 1926 hospital building is on a high (three foot) foundation allowing space for piping and storage in the seven foot high basement. The building is composed of four sections: A rectangular central block measuring approximately 138 feet by 50 feet with a north/south axis; two wings (one at

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each end of the main block) set at 45 degree angles (SW and NW), each measuring approximately fifty feet by forty-two feet; and, a rear wing centered off the east side of the main block measuring approximately ninety-five feet by thirty-eight feet. (Figure 6, page 32) The building is of reinforced concrete construction, with hollow tile curtain walls faced with striated tapestry brick of charcoal, brown, reddish brown, orange, and tan. It is laid in a modified Flemish bond, with six stretcher courses between each of the header/stretcher courses. Both the brick and the tile were locally produced at Morey Clay Products. Large limestone quoins are located on the corners of the two wings, and two vertical rows of quoins define the center section of the main block. A limestone belt course provides the sills of main floor windows, while windows on the other floors have individual limestone sills. The top of the fourth floor is defined by a limestone belt course, and a stone cornice caps the top of the main block above the fifth floor. The brick parapet is broken in the center by a limestone balustrade with four classical stone urns. This stone balustrade has fallen backwards, but appears to be intact on the roof. The front entrance is centered in the main block. A single story limestone pavilion extends toward the driveway, with steps leading up to the entry doors. The limestone steps have low curved side walls and the pavilion is capped by a stone parapet. Above this parapet (at the second floor level) a limestone surround capped by a limestone cross highlights the two center windows.

The windows feature double hung wood sash throughout the original portion of the building with the exception of arched windows in the east wing. Those on the primary façade (west elevation) are all the same height, but are of three different widths. At each end of the wings are the broadest windows (size 1). Those at the very end are paired as these are in the solariums on floors two through four. The pattern in each wing is two separate size 1 windows, followed by a pair of slightly narrower windows (size 2), then two pair of much narrower windows (size 3), then two individual windows of the broadest size. This pattern is repeated on each floor. The windows on central section are all size 2. The ends of the wings have a band of windows on three sides due to the location of the solariums and stairwells.

The south elevation consists of several different planes: the diagonal of the southwest wing with size 2 windows, the flat end of the main block with a triple size 3 window and a single size 1, and the east wing which contains the chapel on the third floor where there are large round arched windows. The non-arched windows on all chapel elevations appear to be size 2. Although built at the same time as the hospital, the chapel is not Classical Revival in design, but Romanesque, a style more in keeping with its purpose, complete with rectangular brick buttresses with limestone caps. A two story stone portico along the south elevation of this wing, and a three story rectangular section at the southeast corner indicate areas dedicated for use by the Sisters of Humility and the chapel priest. At the east end of the chapel wing a massive exterior brick chimney rises a full story above the roofline.

The east elevation is rather confusing, as this is not only the location of the chapel wing, but the northeast corner is the location of the 1960 addition. Viewing this area from the northeast, a seven story rectangular brick tower containing the elevator shafts and staircase links the old and new sections

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together. A single story area at the base of this tower housed the ambulance entrance and emergency rooms for the new wing.

The north elevation features the 1960 wing extending to the northeast from the main block. It is a four story brick rectangle measuring approximately eighty-six feet by fifty-one feet, with a single story section along the north elevation that measures approximately ninety-eight feet by fifty-one feet. (Figure 6, page 32) Like the original portion of the hospital, this is a reinforced concrete structure with curtain walls of hollow tile and face brick. The exterior brick is similar in color to the tapestry brick of the original section, but is somewhat lighter in tone and does not have the striations of the older brick. It is laid in the same modified Flemish bond with six stretcher courses between the header/stretcher courses. A very simple limestone cornice caps the single story section. A brick screen pierced by narrow vertical openings provides a decorative element on the front of the new entrance wing. This screen is broken at the west end by floor to ceiling windows and a brick portico that extends twelve feet to the north. This portico repeats the diagonal piercings of the screen and contains two sets of double glass entry doors. A curving canopy extends to the parking area. Large metal sliding windows are used throughout the four story portion of the 1960 addition, including the stairwell at the northeast end. The northwest wing of the original hospital is identical to the southwest wing in material and design. Both sections of the hospital have flat roofs covered by rubber membrane.

Interior: Original 1926 Hospital

The original front entrance on the west elevation is flanked by simple Doric columns. A limestone parapet with balustraded sides caps this entrance and a small vestibule is contained within this portico with a narrow window on each side looking along the front of the building. Looking due west from this entrance you see the twenty foot wide circular concrete driveway and a view straight up Vogel Avenue to Court Street over two blocks away. The terrazzo floors and baseboard found throughout the original portion of the hospital begin in this vestibule area. All levels of the original hospital feature a central hallway (approximately eight feet wide) in the main block and both the northwest and southwest wings. All original walls are plaster on lath, window sills are terrazzo, and all floors featured ten foot ceilings. Dropped ceilings have been added in 99% of the rooms and halls. The basement was originally used only for storage. A section under the north wing was remodeled for additional storage and offices when the northeast wing was added in 1960. (Figure 7, page 33)

The main floor of the original hospital (now second floor) was used primarily for meeting rooms, administrative offices, and class rooms for the nursing students. (Figure 8, page 34) On this floor the hall and rooms on the west side have retained a relatively high degree of integrity. Immediately to the right (south) of the entrance is the parlor with fireplace and original oak woodwork. Several other rooms along this side retain built-in oak cabinetry. The terrazzo floor has been carpeted. Rooms along the east side of the hall have been altered to some degree. A terrazzo staircase with terrazzo handrail is located at the end of both wings. The main block of this floor contains several

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smaller rooms, an elevator and stairs, and the east wing houses several small rooms plus a large area that was used as a kitchen. The north wing was altered several decades ago when it was converted from hospital use into a suite of offices for a private medical practice. At that time, the central hall was removed and a series of small rooms built down the middle, thereby creating two much narrower hallways. The original terrazzo staircase remains at the north end of the wing.

The second floor (now considered the third) retains the original floor plan with patient rooms opening off the central hallway in both wings, plus some additional patient and larger rooms in the main block. (Figure 9, page 35) The southwest wing has carpeted floors and a dropped ceiling, but it retains the original recessed doors to each room, and the solarium on the south end. The northwest wing has also been carpeted and has a dropped ceiling, but the room doors are flush with the hallway. This is true on floors two through four. In addition, the stairway railing at the north end is of simpler design than that in the south staircase. The reason for both of these changes was discovered during research that shows the north wing was not completed when the hospital opened in 1926, and appears to have been finished over a decade later. The solarium is located adjacent to the north staircase. Terrazzo floors are found in many of the patient rooms on this floor, and the original small closets remain in the rooms.

The third and fourth levels (now fourth and fifth) of the original building followed the same basic floor plan, though some changes have occurred over the years, primarily the carpeting and dropped ceilings, with some new walls added. (Figures 10 & 11, pages 36 & 37) The original fifth floor was the surgical department with several operating rooms, sterilization rooms, etc. (Figure 12, page 38) These changed in use over the years and the floor plan was changed in some areas. The upper story windows to the west provide another view of the Vogel Place Historic District.

Although completed in 1926 with the rest of the hospital, the four story east wing differs in many ways. The function of this wing was not medical. On the main floor this wing features a large open space with full height ceilings that was used as a kitchen. Behind the kitchen are several smaller storage rooms. A covered porch extends across the south elevation. The second floor was the living space for the Sisters of the Humility of Mary. It included small sleeping rooms as well as larger communal rooms at the east end. Along the south side of this level is the concrete porch that provided outdoor space for the sisters. The third floor housed the St. Joseph Chapel, with two rooms at the east end: the sacristy and storage space. A narrow hallway connecting these two rooms has a set of pull down steps leading to the attic area above the chapel. The two story chapel features a coffered ceiling and triple arches at the altar end. The narrow side arches are blank while the broad central arch opens to the altar. Decorative plasterwork is seen in the classical bracketed and denticulated cornice, simple classical cornice above the windows, the elaborate hybrid capitals on the pilasters, and the arched windows themselves. The chapel was renovated with new carpet and paint, and rededicated in 1985. The original stained glass windows were removed and replaced with the present plain glass, and the pews were removed after 2007.

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Interior: 1960 Addition

This addition, designed by Brooks and Borg of Des Moines, consists of two new areas constructed at the northeast corner of the hospital. The new wing was designed and built to connect with the basement of the original hospital building, thereby causing the renumbering of floors in the original section to correspond with the new section.

At ground level (Figure 7, page 33), a single story section on the north contained the new main entrance, large lobby, several offices, and a large room most recently used as a gymnasium. Alterations in this single story area include reorganization of space through the removal and addition of walls in several areas. The large glassed-in vestibule with two sets of glass doors, plus the original glass doors leading into the lobby remain. A pony wall now divides the lobby into two smaller spaces. The date of the ceiling tiles has not been established. One of the most interesting features of this area is the room immediately east of the lobby which has the brick screen with narrow vertical windows as it's outside wall. The original use of this room has not been determined. Behind (to the south) this single story entrance section is the first floor of the new four floor wing. The southwest corner is the elevator tower which contains two elevators and a staircase that links the floors of both sections of the hospital. This level also contains the emergency room (entrance in the corner by the elevators), outpatient rooms, x-ray department, etc. On all floors, the floors are concrete covered by asphalt tile, and the walls are of plaster over wire mesh.

The second through the fourth floors feature a central hallway which leads from the hall by the two elevators to a staircase at the north end. The second floor (Figure 8, page 34) contains small rooms along the south side of the hall, with larger rooms along the north side. The original function was as laboratory and physical therapy space. There appear to be relatively few alterations that are not reversible.

The third floor was designed as the surgical department. (Figure 9, page 35) Here all walls are of glazed tile, both in the hallway and operating rooms, and in the accessory rooms and recovery area. The operating rooms feature coffered ceilings to contain the special lighting needed. The walls contain metal shelved cabinets for supplies, and various gauges for gases and sterilizing machines are built-in. Although the hall walls have rectangular tile, those in the rooms are smaller square green tile similar to that found in residential bathrooms.

The fourth floor was designed specifically for patient rooms. (Figure 10, page 36) The central hallway is carpeted and the room doors are flush with the hall. There are fourteen patient rooms, most double occupancy, each with its own sink and toilet. Closets were built into the corner of each room. These closets and the room doors are the only wood found in this wing. Flooring varied, some rooms being carpeted and others tile. However, the toilet rooms had terrazzo floors.

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Circle (Heart-shaped) Drive

The circular drive in front of the main entrance was part of the 1926 design. It began at the east end of Vogel Avenue and Ash Street, and curved outward and then around, passing the front entrance, and back to the beginning. (Figure 4, page 30) Newspaper articles of the time described this as being "heart-shaped," probably because the entrance from the street appears to come to a point. This concrete driveway is twenty feet wide with a four foot sidewalk along the outside edge. It measures one hundred eighty-six feet from Ash Street to the front entrance, and is one hundred thirty-three feet wide at the broadest point north and south. The only alteration to this drive appears to be an asphalt curb that was put in place at an unknown date. This does not detract from the original design and the drive retains an unusually high degree of integrity.

Nurses' Residence

Exterior:

The Nurse's Residence (1945) at 317 Vanness Avenue was designed by architect Dane Morgan of Burlington. It is located southeast of the hospital and faces Vanness Avenue. It is a two story rectangular brick building with flat roof, with a single story section on the south end. (Figure 13, page 39) The narrow end of the rectangle faces Vanness. The two story section measures approximately one hundred thirty-five feet by thirty-nine feet. The single story section is approximately thirty-two feet by forty-eight feet plus a fifteen by twenty-four foot canopied porch on the southeast corner. Like the hospital, this is a reinforced concrete structure with curtain walls of hollow tile faced with brick. The brick selected for the exterior reflects that used for the hospital, being charcoal, deep orange, and light orange in color laid in common bond. This brick is not striated.

The single story front section of the building is representative of mid-century modern simplicity of design. It features two bands of six windows near the southwest corner. These tall windows create a horizontal feeling that is repeated in the shape of the building itself, with the horizontal stone coping across the top. Originally these windows had a flat awning or canopy above, but this has been replaced by curved awnings. To the right of these windows on the façade are three tall slender individual windows with a simple limestone cross set in the brickwork. A brick screen with cross-shaped openings projects to the south. This screen serves as a support for a roof over a fifteen foot by twenty-four foot porch in-set into the southeast corner. At the rear of the single story section, there is a wide brick chimney with limestone trim. The roof of both sections is covered with rubber membrane.

The two story main block continues the brick exterior, but adds square limestone panels near the roof line which serve as the only decorative element. There are two rows of these stone panels across the top of the side elevations, but on the ends of the building there are four rows of panels, extending down to the level of the second floor window sills. Double hung wood windows are used throughout this building, with most arranged in pairs, creating a square light source. The windows have

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stone (or cast concrete) sills. Each pair of windows represents a dormitory room. A rhythmical pattern of paired windows has been established along the side elevations, broken only by a single exit door on each side, and at the north end where the interior arrangement changes and a stairwell is located. The north elevation of this building has been altered by the enclosure of a small porch that originally had a low brick wall instead of a railing. This area accessed by a single door on the north side.

Interior:

The single story front section contains a large lobby or gathering space along the west side that is lighted by the two bands of six windows. This large area of glass is an important part of mid-century design, often seen in public buildings or public spaces. The back (north) wall of the lobby is of brick and contains a recessed fireplace with a large stone cross imbedded in the wall above. A narrow wood mantelpiece extends across almost the full width of the brick wall, and is repeated in two shorter sections to the right of the cross. Two restrooms are located to the right of this brick wall. The eastern part of the front section contains three smaller rooms, probably intended as offices. There is one noteworthy design element: Three cross-shaped openings are found in the side (hallway) wall of the rear office. Floors are concrete covered by asphalt tile. Doors separate this front section of the building from the dormitory space to the rear.

The two story addition is purely functional in design with a central hall running the length of the building. A set of stairs is located at each end. Each floor contained sixteen double occupancy dormitory rooms with built-in closets and dressers. The room doors are flush with the walls and all wood trim has been given a warm finish. Originally the concrete floors were covered with asphalt tile, but this has been replaced in some areas with carpeting. All walls are plaster over lath. A large communal room is found at each end on both floors, and communal shower and toilet rooms are located in the middle of the west side of the building. There have been minimal alterations to this building, most occurring when the Head Start program was housed in it. On the main floor walls have been removed in the southernmost rooms on the west side to provide activity space. It is believed that the dormitory originally contained some class room space, but this has not been verified. The basement level, accessed by the stairs in the northeast corner, now contains at least one large classroom, in addition to housing the heating and cooling systems. It is unknown if this was original.

Garage

The small single story brick building located immediately east of the hospital (Figure 4, page 30) is an unknown entity at this point. It measures approximately thirty-two feet by twenty-six feet and has a small brick addition at the northwest corner measuring approximately thirteen feet square. The exterior is of orange-red brick laid in running bond. It has a flat roof that slopes to the east, with brick parapets on the north, west and south sides. A modern double garage door is located on the west elevation facing the hospital. The south elevation contains a window covered with plywood and a

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narrow entrance door. The east elevation is blank, and a small garage door is found on the north elevation. The little addition has a door on the east elevation and a cage-like area on the north. Original plans called for the heating plant to be located behind the hospital, but nothing is shown on the 1925 Sanborn map. However, the 1948 Sanborn map shows this as an auto garage, which explains the doors. The actual function has not been determined and entry was not allowed due to the deteriorated condition.

INTEGRITY:

A historic district must possess a sense of time and place, have relatively few intrusions, and not have been altered to a high degree. In all cases, the most important integrity consideration is that the building(s) retain sufficient elements of the original design, materials, and setting that the builder/original owner would recognize it. There is no doubt that the Sisters of Humility of Mary, E. Brielmaier & Sons, Brooks & Borg, and Dane Morgan would all recognize their efforts. The St. Joseph Hospital Historic District meets all seven aspects of integrity.

- **Location.** The St. Joseph Hospital Historic District remains on the location selected by the Sisters of Humility of Mary in 1924.
- **Setting.** At the time this ten acre lot was purchased, there was a residential neighborhood to the west, the County Club golf course on the north, and open land to the east and south. East Alta Vista was the north city limits and a major street leading out of town to the east. The city limits have been extended far to the north, and houses have been built on the open land, but the basic setting remains a quiet residential neighborhood.
- **Design.** The original designs of all three architectural firms involved with the development of this complex are highly visible. Brielmaier's simplified Classical Revival design of tapestry brick with stone balustrades and quoins remains the image that is seen from Vogel Avenue. Morgan's simplified modern design for the Nurses' residence has stood the test of time, with the only real alteration being not an architectural one, but a decorative one...the new awnings on the façade. This same simplicity of modern design was used by Brooks and Borg in the 1960 wing, and it remains unaltered today.
- **Material.** The selection of tapestry brick with limestone trim for the initial building was carried over successfully into each new design, with the only major change being the style of the design. These materials have survived over time, and the fact that this was locally produced brick and tile remains a point of pride.
- **Workmanship.** The quality of the workmanship on both the interior and exterior is shown by the current condition of the buildings, with the only areas of deterioration being those that

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have been impaired during remodeling. The plasterwork of the chapel and the beauty of the terrazzo floors throughout are representative of the workmanship involved.

- **Association.** The buildings in this complex have always been directly related to health care in Ottumwa, and even more so to the Sisters of Humility of Mary. Although the complex was sold over 25 years ago to another hospital, and ultimately closed within the past decade, those associations remain strong within the community.
- **Feeling.** The ten acres surrounding these buildings remain an expanse of green, a quiet peaceful space anchored by the solid brick buildings in the center. This was built as a place of quiet and healing, and that feeling has not changed.

LIST OF RESOURCES

RESOURCE	NRHP	CONTRIBUTING	NON-CONTRIBUTING	DATE
St. Joseph Hospital	X			1926
Circle Drive		X		1926
Garage		X		C.1940
Nurses' Residence		X		1945



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ARCHITECTS/BUILDERS (Cont.)

Brooks & Borg
Immel Construction Company
Langman & Sons
Weitz Company

STATEMENT OF SIGNIFICANCE:

The St. Joseph Hospital Historic District (1926, 1945, and 1960) is locally significant under Criterion A as a mission of the Sisters of Humility of Mary to provide for the medical needs of the people of the Wapello County area, including a School of Nursing as well as the hospital. It has local Criterion C significance as a good architect-designed example of simplified Classical Revival design, and two architect-designed examples of the simplified modern style of the mid-twentieth century. Each resource in the district was state of the art at the time it was built. Although owned by a religious order, the district meets Criteria Consideration A due to its primary significance as a health care and education facility. The period of significance is from 1926 (the date of construction) to 1965, which meets the 50 year requirement.

CRITERION A:

Brief History of the Sisters of Humility of Mary in Ottumwa

Father John Kreckel arrived in the young town of Ottumwa in 1853 to serve the Roman Catholics of a thirteen county area. In 1860-61 he oversaw the construction of a limestone church, St. Mary of the Visitation, at the corner of Fourth and Court Streets in Ottumwa, and the following year he induced the Sisters of Visitation to establish a school in Ottumwa. (Meagher & Munsell, p 41) A few years later he encouraged another order to come to Ottumwa.

Being ever alive to the local interests of the church, Father Kreckel was instrumental in the coming to Ottumwa in August, 1877, of the Sisters of Humility of Mary, then at St. Joseph, Missouri, the object of the order being, among others, to establish hospitals. The sisters founded St. Joseph's and at once opened a sanitarium [also known as the Talley Hospital in honor of its benefactor, Mary Talley] in a rented house, located on North Court Street, where it remained for a number of years. (Figure 14, page 40) Eventually the Sisters of Humility of Mary bought the convent building of the Sisters of Visitation and after expending about twelve thousand dollars on the property, in the way of remodeling and renovation, opened the doors of the building to the public on the 23rd day of February, 1914. (Waterman, Vol 1, p 236)

The St. Joseph Hospital that opened in 1914 was located on Fourth Street, next door to St. Mary

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of the Visitation. (Figure 15, page 41) The newly remodeled interior contained offices, waiting rooms, four wards, dispensary, bath rooms, dining rooms and twenty-three private rooms for patients. This was not the only hospital in Ottumwa at that time. The Ottumwa Hospital and Training School for Nurses had been established in 1894 in a building on East Main Street that soon proved to be inadequate. In 1904 a new Ottumwa Hospital Building was constructed on East Second Street between College and Union streets. (Figure 16, page 42) In these early decades of the twentieth century the city of Ottumwa had a population of about 22,000, large enough to support two hospitals.

The Sisters of Humility of Mary (CHM) established a School of Nursing as part of the hospital in 1914. The Sisters had opened a day and boarding school for girls in Ottumwa in 1890, the St. Joseph Academy. In 1913 the Academy moved into a large new facility on the north side of Ottumwa at the east end of Grandview. This facility contained the convent, academy classrooms, and housing for boarding students. (Figure 17, page 43) When junior college classes were added in the 1930s, it became known as Ottumwa Heights College. Ottumwa Heights was destroyed by fire in October 1957. Construction on a new facility began almost immediately, opening in 1960. Today that campus has become Indian Hills Community College.

St. Joseph Hospital

The Sisters of Humility became aware of how small and inadequate the hospital facilities on Fourth Street were by the early 1920s and began making plans for a new hospital. They chose ten acres on the far north side of Ottumwa as the site of the new building. This location was very close to the St. Joseph Academy, the two properties being separated only by the Country Club golf course. (Figure 18, page 44)

A 1924 article on the front page of the *Ottumwa Courier* announced

CITIZENS PLAN TO MEET CALL FOR \$100,000
Needed on New St. Joseph Hospital to Cost About \$300,000
181 Bed Building Is Ultimate Idea

An enthusiastic public meeting, at the Chamber of Commerce, attended by about fifty of the leading business and professional men of the community, today gave unanimous approval of plans of the Sisters of the Holy Humility of Mary, for the erection of a large, new, modern hospital, on a ten-acre plot of ground near the northern edge of the city, which was recently purchased by the sisters.

The plans of the organization are for a hospital to cost about \$300,000. The organization has asked the community to contribute \$100,000 and give assurance that no more will be asked for the maintenance of the institution. As expressed by a number of men who spoke, it is an opportunity to obtain a hospital at one-third its costs and no further expense on the part of the community. The meeting unanimously passed a motion to assure the sisters that so far as they were concerned, everything possible would be done to raise the

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amount asked for, and that hearty moral support will be given.

.....
Plans for the proposed structure and an explanation of the proposition were placed before the committee by Dr. J.F. Herrick. The specifications call for a building to face Vogel Avenue. It will be built in a "Y" shape and the main section will be five stories in height. The portion, which it is planned to erect now, will accommodate ninety-three beds. Two proposed wings, which it is planned to add in the future, and for which provision is made in the plans, would increase the capacity to 181 beds.

It was declared, by doctors who were present, that the structure, as planned, would give Ottumwa the best constructed and safest hospital in the state of Iowa. The physicians also emphasized the drastic need for better hospital facilities. (*Ottumwa Courier*, March 9, 1924, p 1, c 3)

The Sisters of Humility had selected the architectural firm of E. Brielmaier & Sons of Milwaukee to design the hospital and the architects had drawings of the proposed building ready to show the fund-raisers. The *Courier* printed the elevation and plan of the building to give their readers an idea of what was being proposed. (Figure 19, page 45) The hospital was to be a substantial brick building with Classical Revival details, including a stone balustrade with classical urns at the top of the building above the main entrance, and stone quoins defining the corners of the wings, and the central portion of the main block. It is interesting to note that the plan (top right of drawing) shows four wings plus the rear wing in the center, and the drawing shows another diagonal wing at the rear (left side of drawing). Although it is difficult to determine from the news article exactly how much of the drawing was planned for immediate construction, we know that the center section and wings to the southwest and northwest were under construction in 1925. The community-wide fund drive continued through the month of March 1924, but it appears that the total \$100,000 was not reached.

Although there was a solid Roman Catholic community in Ottumwa, it was not a predominately Catholic community like Dubuque. For that reason, it was explained in more than one news article that, even though the hospital was to be owned and operated by the Sisters of the Humility of Mary, that it was in no way connected with the Catholic church, and that "not a dollar is received from the church." When the elevation drawing was published the *Courier* noted,

St. Joseph's has been, and will continue to be, free to persons of every race and creed. It has been, and will be, the policy of its management to admit every deserving person without regard to race, religion or church affiliations. In past years the hospital has done much charitable work and this will be continued, for it has been the policy never to turn away the deserving sick because of their inability to pay. All the members of the order of the Holy Humility of Mary, are of the Catholic faith, but the Catholic church, as an institution, is in no way connected with the corporate order. All of the property is held by the corporation and no part of it given by the church or in any way belongs to the church. (*Ottumwa Courier*, March 14, 1924, p 11, c 1-5)

Another point that was repeated often during the fund-raising and construction phases was that "Ottumwa Products and labor will be used in the construction of the building, as much as possible."

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(*Ottumwa Courier*, March 9, 1924, p 2, c 1) In October 1924, as work was ready to begin on the foundations for the hospital, Leo A Brielmaier announced that bids would be advertised shortly and "that it is his opinion that practically all of the material and labor can be secured locally." He visited the Morey Clay Products plant to discuss the face bricks and tile to be used in the construction of the hospital.

Brielmaier's visit prompted the *Courier* to provide a detailed description of exactly how the building was designed.

The building will be built in a Y shape with three wings. In the center of the two front wings and facing the termination of Vogel avenue will be the main entrance. The structure in the center portion will be five stories in height, and the wings will be four. Alternate bids will probably be allowed on Bedford stone or terra cotta trimming, Mr. Brielmaier said. The main facing will be face brick over the entire exterior of the building.

The top or fifth floor will be the surgical department. On that level will be three major and two minor operating rooms, the anaesthetic room, obstetrical room, nurses' room, doctors' room, cardiograph room, routine laboratory, waiting room, radiograph room, work room, plaster room, dark rooms, cystoscopic room, therapy room, flour room, a porch and baths and washrooms.

On the fourth floor will be private rooms, two sun porches, another porch, nursery, work room, isolation department, utility rooms, serving room, nurses' room, surgical dressing room, storerooms, toilets and baths and the gallery to the chapel.

On the third floor will be private rooms, two sun parlors, one porch, toilets and bathrooms, one double bedroom, serving room, nurses' rest room and station, the chapel auditorium and storerooms.

The second story will contain private rooms, two sun parlors, one double bedroom, serving rooms, utility rooms, toilets and baths, one porch, community room, sewing room, sisters' porch, sisters' quarters and store rooms.

On the ground floor will be the chaplain's study and rooms, the internes' (sic) rooms, record room, private and general offices, main entrance lobby, parlor, drug room, nurses' training room, nurses' dining room, demonstration room, lecture room, library, internes' (sic) dining room, chaplain's dining room, domestic science department, emergency operating room, consulting room, supply and help rooms and the sisters' refectory.

The dimension from wing tip to wing tip will be 240 feet by 200 feet.

There will be ninety-six rooms, accommodating 100 beds. There will be no wards. The architect stated that the tendency in hospitals is away from wards and they are not so satisfactory as private rooms. Four rooms on each of three floors will have private toilet and bath rooms. An elevator will run to all stories.

The main structure floor level is three feet above the ground, and beneath that there is a seven foot basement for piping and storage. The heating plant will be in a separate building to the rear.

One of the principal features of the building, according to the architect is that there is no patient's room that does not at some time of day receive the sunlight. The artificial lighting will be the latest design of electrical equipment for hospitals. In the

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operating rooms the lights will be on a double circuit to prevent darkness by fuses being blown out, and there will be emergency gas lights. There will also be emergency gas lights in other portions of the building.

The structure will be as nearly fireproof as modern building science can make it, it was declared. It will be supported by steel re-enforced concrete, and the walls and floors will be concrete and hollow tile. The floors and stairways will be of terraza (sic).

It is also planned to beautify the grounds with landscaping and make the site attractive, as well as practical. (*Ottumwa Courier*, October 3, 1924, p 1, c 2&3)

Later that month the ground-breaking ceremony was held, and work started on the foundation. It was estimated that it would take about a year to complete the " \$400,000 hospital." Note that the total cost had already risen by \$100,000 even before ground was broken. The Immel Construction Company of Fond du Lac, Wisconsin had been awarded the contract for the project. It appears that Immel often worked with the Brielmaier firm on projects. One interesting fact in the *Courier* article about the ground breaking (October 22, 1924, p 1, c 3) is that there was a separate ground breaking that day for the chapel.

By late fall in 1925 the work had progressed to the point that local suppliers were using the hospital in their newspaper ads (Figure 20, page 46) and a date of completion was being discussed.

According to the superintendent of construction at the new St. Joseph hospital, the south wing of the new building will be ready for occupancy on or about December 15.

All the plastering has been completed on this wing. The cabinet and wood work is now being finished. It was said that the lighting fixtures were expected within the next few days.

Plasterers are now going over the chapel in the rough. It was said today that it was not planned originally to complete the chapel this year. However, later developments proved favorable and it is expected to have this room finished within the course of the next few weeks.

The north wing has been shut off temporarily from the rest of the building and work on this end has slackened to permit a concentration of efforts on the south end.

Work on the driveway, which skirts the front of the building, was discontinued today on account of the low temperature. The drive connects with Vogel avenue and is in the shape of a heart. A temporary surfacing is being laid with a cinder base and gravel top....The back entrance drive which connects with Alta Vista avenue has been put to grade and will be surfaced in the same manner as the front driveway. (*Ottumwa Courier*, November 28, 1925, p 17, c 6)

This article contains several interesting facts. Its placement on page 17 shows that the new hospital was no longer considered "front page news." Also, this is the first specific mention of a back entrance, although an ambulance entrance in an unidentified location had been briefly noted in an early article. It appears that the ambulance entrance off of East Alta Vista leading to the northeast corner of the building, in use until the building closed, was part of the original plan. The description of the front driveway as heart shaped was consistent with earlier references. The information that the north wing had been closed off and was not being finished at this time is noteworthy. This may explain why some of the finishes in that wing differ from those in the rest of the building.

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The December 31, 1925 *Ottumwa Courier* front page announced "The St. Joseph Hospital Opens Sunday" accompanied by the usual drawing of the building and a page long column stating that the building would be open to the public on Sunday, January 3 from 1:30 until 7:00 o'clock. The building was described as "fireproof, being built of reinforced concrete, brick and tile, with terrazzo floors and stairs. No wood is used except in doors, windows, cabinets and shelving." Although the article repeated much of the information found in previous articles, it explained more about the finances of the project, making note that the community fund drive to raise \$100,000 did not meet its goal, raising only \$78,000. Although the initial cost for the hospital was set at \$300,000, it was decided that a "larger and better building would be more in conformity with the sisters' ideals..." and the cost rose to over \$400,000. The paper noted that about thirty patients' rooms in the north wing were being left unfinished for want of funds. If those rooms were complete, the cost would have risen to almost \$450,000.

The enlargement of the original plans and the increased cost of the hospital, together with the fact that the amount secured in the campaign for subscriptions was not so great as it was hoped it would be, has thrown a heavy burden of debt on the sisters. It can be met only by hard work and careful management on their part.

Anyone who has not contributed and wishes to help in the completion of this community asset will be given an opportunity to help in the furnishing of a room or aid in the purchase of additional necessary apparatus.

Despite the fund raising problem, the article did include some good news for the local economy.

At the time the drive for funds was made, it was promised that so far as possible, Ottumwa labor and material would be used. Just how those in charge have complied with this promise is shown by returned checks of more than \$150,000 which has been paid to labor, and by far the greater part of this amount to Ottumwans.

The following local firms have held contracts and furnished material for the building: Ottumwa Mill and Construction Co., Morey Clay Products Co., Ottumwa Sand Co., Haw Hardware Co., Harper-McIntire Co., Hawkeye Lumber Co., Wormhoudt Lumber Co., Poling Electric Co., C.W. Langdale, Ward Steel, Randall & Sons, Ralph Brady, C.E. McDaniels and Thomas F. Keefe.

The building that Ottumwans toured for the first time on January 3 was very different from both of the old St. Joseph and the Ottumwa hospital. It was an impressive multi-story building, immediately visible as you turned off of Court Street onto Vogel Avenue. Resting in the middle of a large open space, the outspread wings of the building were welcoming, and the circle drive provided a majestic entrance. (Figure 21, p 47) The January 4, 1926 *Ottumwa Courier* gave front page coverage to the Grand Opening of the hospital with three headlines,

THRONGS SEE NEW HOSPITAL HERE SUNDAY
In Spite of Bad Weather 2,500 Pay Visit to St. Joseph's Hospital
Building Last Word in Design

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This article contained the usual descriptions of each floor, but went into more detail in some areas, such as the entrance.

The main entrance is located in the center of the main section. One enters a small lobby and is then ushered into the main lobby and office room. To the right of the main office as one enters the building is located the reception room. The walls within the structure are all done in spotless white, with the baseboard and floor finished in terrazzo. The reception room contains a fireplace of brick and pebble dash finish. The sisters' dining room, trunk room, kitchen, dietitians' room and a drug room are located on the main section of the entrance floor.

Another important part of the new hospital facilities was the School for Nurses. The St. Joseph Hospital nursing program had grown from the original five students in 1914, to a point where additional space was needed for classrooms, dining and dormitory rooms for the students. This additional space was built into the plans for the new hospital.

The south wing of the entrance floor contains the special nurses' dining room, a modernly equipped demonstration room and a lecture room. It was explained by those in charge that regular classes of nurses will be held, and this branch of hospital activity will be known as the school of nursing. One year of high school is necessary to a candidate, but, according to St. Joseph hospital authorities, the school of nursing will endeavor to encourage as many high school graduates as possible to enroll for the three year course. A new class of nine candidates was to have been enrolled in the new hospital today.

Few of the articles make more than passing comment on the rear wing of the new hospital. Although the first floor of this wing housed the main hospital kitchen, the rest of the wing was given over to non-medical purposes. The second floor contained private quarters for the sisters, with a community room for them in the small rectangular wing at the southeast corner. Stairs in this small wing connected all three floors, leading down to the sisters' dining room on the main level and up to the sacristy on the third level. The chapel was located at the east end of the third floor. (Figures 22 & 23, page 48) This chapel was used on a daily basis by the sisters, with mass being celebrated by the hospital chaplain, a priest who did not live on-site, but was shared with the convent and perhaps one of the parishes. Many hospital nurses regularly attended mass, and the chapel was the location of the School of Nurses' capping ceremony. It became common for Roman Catholics living in nearby neighborhoods to attend an evening mass on the weekends or Sunday morning mass in the hospital chapel.

Based on the numbers from the old hospital in 1925, the new hospital expected to treat over 1,000 patients in the coming year. It has not been determined exactly when the unfinished north wing was completed, but an article in the *Ottumwa Courier* from February 1, 1940 announced the formal opening of the new pediatrics department at the hospital and said "The segregated department is located on the third floor, in the recently completed northeast wing." Since there was no northeast wing at that point, it was probable that it was the northwest wing. The pediatrics department was

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designed to accommodate fourteen children between the ages of infancy to twelve years, and included an isolation room, four private rooms, and one semi-private room. Apparently the completion of the unfinished wing was done slowly, on a floor by floor basis.

An aerial photograph from the 1950s shows the hospital with a well landscaped lawn and cars parked not only on the circle drive, but also along Ash Street. (Figure 24, page 49) An undated *Courier* article from 1951 or 1952 described the improvements that had been made to St. Joseph Hospital since World War II, totaling over \$400,000. There were fifteen major improvements including remodeling the basement into fireproof, centralized storage, the installation of a second elevator (and adding an elevator door that opened into the pediatrics department), moving obstetrics and nurseries to the third floor, enlarging the laboratory (Figure 25, page 50), new x-ray equipment, a new emergency room next to the ambulance entrance, and installation of acoustic tile ceilings in all of the hallways. The newspaper wrote,

St. Joseph's has been Ottumwa's large hospital. It has been approved by the American College of Surgeons since its opening. Through war years and in the postwar period, St. Joseph's remodeling has pointed up for Ottumwans the serious problem of keeping a hospital plant up to date with advances in science.

The sisters were well aware of the need to stay up to date or be passed by the other hospital in town. As early as 1945 there had been talk of building a new, modern Ottumwa Hospital. The old facility was located across from the high school in the 500 block of East Second Street. There was no room for expansion and the dated building was not conducive to "the practice of modern medicine." A multi-year fund drive was established, with hopes for federal funding as well. However, it was 1950 before ground was actually broken. The new Ottumwa Hospital opened in April 1951 at its new location, the 1000 block of East Pennsylvania Avenue. Designed by Burlington architect Dane Morgan, the building is of buff-colored brick with stone trim. The long, low design was set at an angle, far back on the lot. (Figure 26, page 51) This created a feeling of spaciousness, but also allowed ample room for additions.

Another important medical facility was also on the drawing board in 1945. The main building at Sunnyslope, a tuberculosis sanitarium, had burned in December 1944. There was a great need for such a facility, and like the hospital board, the Sunnyslope Board contracted with architect Dane Morgan of Burlington to prepare plans for a new building. Discussion would continue for several years, with bond issues and rejected bids creating problems before the sanitarium (non-extant) finally opened in November 1949. (Figure 27, page 51) When Sunnyslope was no longer needed for tuberculosis patients it was used as a nursing home and later as a women's shelter before it was finally demolished around 2005. Subsidized housing units now occupy the site.

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By the late 1950s the Sisters of Humility realized the need for major expansion. The returning World War II veterans and their young families needed additional medical services. The sisters once again turned to an outside architectural firm to design their new wing, Brooks and Borg of Des Moines. Construction began in 1959 on a new four story wing that would extend out from the northeast corner of the 1926 building, much like the original architectural drawing and floor plan by Brielmaier's office. (Figure 19, page 45) The most noticeable departure from the original Classical Revival design was the long, single story wing in front of the four story section. It was designed to house the new entrance, lobby, and offices. (Figure 28, page 52) The main hallway led back to where the new wing joined the old, the location of the elevator tower. The ambulance entrance and emergency room were also located in this same area. The ground floor of the four story wing housed the new x-ray department, medical records, and doctors' lounge. The second level was devoted to an expanded laboratory and physical therapy department. The third floor was the surgical suite with the halls, operating rooms, and recovery area all tiled, floor and walls, for maximum cleanliness. The top floor was filled with patients' rooms for a total of twenty-eight beds.

Million Dollar Hospital Wing Ready for Public Inspection

Beginning Sunday, the public will enter the hospital by the new main entrance off East Alta Vista avenue. A parking lot accommodating more than 100 cars is ready for use at that point. The old drive and entrance will be strictly for doctors in the future.

The new wing's exterior is of brick and stone, similar to that used in the original section. A permanent canopy extends from the doorway out to the driveway. *Ottumwa Courier*, October 28, 1960, p 19, c 1-4)

The news article explained that the new surgery suite would allow the top floor of the original building to be converted into a new maternity department. That in turn, would allow the pediatric department to be expanded. The new wing and alterations were funded by public subscription, and with money from the federal Hill-Burton Act (aka The Hospital Survey & Construction Act). This 1946 legislation provided federal grants and guaranteed loans to improve the physical facilities of hospitals across the county, allowing many small town and rural hospitals to expand to meet growing needs.

Nurses' Residence

The face of Ottumwa changed during World War II with the construction of the U.S. Naval Air Station about five miles north of town. Some naval personnel lived in town rather than the base, especially if their family followed them to Iowa. Among the training programs offered by the Navy were some in the medical field. The availability of a School of Nursing, was a boon to the government's programs. Both medical corpsmen and cadet nurses received training at St. Joseph. These additional students created a housing shortage, with students living both on and off hospital grounds. A two story residence shown on the 1925 Sanborn map southeast of the hospital was evidently used as a nurses' residence in the early years, but was destroyed by fire 1928. (No information has been located on this

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residence except for the Sanborn map and a brief reference in the news article found below.) Because of the number of students from the Naval Air Station that were being trained, the hospital applied for federal funding for a new nurses' dormitory.

The first announcement of federal funding came from the office of Iowa congressman Karl M. LeCompte in April 1944. The government grant was \$45,600 toward the total estimated cost of \$75,000. New information was released rapidly in the following days. An article in the *Courier* noted the original estimated cost for the building was approximately \$97,000, but changes to the plans brought the proposed cost to well over \$100,000.

Two-story Building

The new building, which is to be two stories high and completely fireproof, will be placed south and somewhat east of the hospital and will face on Vanness avenue. Plans for the structure were prepared by D.D. [Dane] Morgan, Burlington architect, who has specified brick and concrete construction throughout.

The structure will have living accommodations for 64 nurses. It will also be equipped with classrooms, recreation rooms, lounge and reception room. Its location coincides with the former nurses home at the St. Joseph hospital which was destroyed by fire in 1928.

In making application for the federal grant the hospital authorities pointed out that the building is needed for the accommodation of cadet nurses, and "to train additional nurses for the armed forces and stricken civilian areas and to relieve the hospital shortage existing in the Ottumwa district.

In 1941 there were 37 student nurses in residence at the St. Joseph hospital, while today there are 60, most of whom are housed on the third floor. It is also pointed out that the removal of these student nurses to a new home will materially increase the hospital's guest capacity.

The war production board has approved the project in conjunction with the FWA (Federal Works Agency), which, local builders say, will expedite the securing of all needed priorities. Morgan, the architect in charge, has estimated that it will require about three months to complete the building. (*Ottumwa Courier*, April 7, 1944, p 1, c 3)

When bids were received on this project in June, the *Courier* used a much lower figure than had been talked about in April, only \$73,324. The building was described as a 32 bed, single story building. The federal dollars were to be approximately sixty per cent of the total, so the plans must have been drastically scaled back. In February, 1945, the *Courier* reported that the government had allocated an additional \$21,600, bringing the total grant to \$67,200. (Figure 30, page 53)

A big part of the work on the first floor of the building on the hospital grounds has been completed and the home will be ready for occupancy soon with beds for 32 members of the U.S. cadet nurses corps.

Hospital authorities said that the Langman & Sons Construction Co., of Rock Island, ILL., now on the job, will continue work on the second floor area which will afford room for an

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additional 32 beds. (*Ottumwa Courier*, February 15, 1945, np, nc)

It appears that the cadet nurses and the regular student nurses were two separate groups though they shared the same classes, etc. In January 1945 fifteen young women were admitted to the cadet program in Ottumwa and another cadet class was to start in June or September. The new nurses' residence was badly needed. Nation-wide there were 12,144 cadet nurses corps students in early 1945.

The need for nurses did not end when the war ended. There was a continued need in the military to care for wounded soldiers and sailors, and the veterans returning home increased the need for medical services in their home communities. In July 1949 a *Courier* headline read

Many Beginning Nurse Training But More Needed

The St. Joseph School of Nursing, the only nursing school in Wapello County, will admit approximately 25 girls to the annual freshman class.Girls who qualify will start training September 6 and will be housed in the St. Joseph nurses' home. Room, board and tuition are free and the girl's only expenses are uniforms and books. ... The program offered at the hospital takes 36 months...

The hospital here does not find it necessary to place its graduates for most girls have positions waiting for them. Any graduate is eligible to stay on at the hospital however. Commissions are offered in the armed forces for graduate nurses and today Sister Suzanne received a bulletin from the navy reporting the need for more nurses. Hospitals throughout the country are in urgent need of nurses and by 1960 it is estimated, an additional 40,000 nurses will be needed to serve the understaffed hospitals. (*Ottumwa Courier*, July 26, 1949)

In addition to the School of Nursing, St. Joseph also offered training in x-ray technology, graduating over two dozen x-ray technicians. It has not been determined when St. Joseph ceased training nurse cadets, but changes in the nursing profession led to declining enrollment in small nursing programs like St. Joseph's, and in 1971 a *Courier* headline read,

St. Joseph Hospital Final Nursing Class to Graduate Sunday

Eleven students from St. Joseph Hospital School of Nursing will graduate at ceremonies Sunday afternoon at 3 o'clock in the Ottumwa Heights College Auditorium.

The nurses have completed the three-year program of the hospital's school of nursing with courses in the biological, physical and social sciences and English at Ottumwa Heights College and an affiliation in psychiatric nursing at Clarinda Mental Health Institute.

The St. Joseph Hospital School of Nursing admitted its first class of five students in 1914 and will close with the graduation of the Class of 1971 on Sunday.

During the past 57 years the school has graduated over 700 nurses who are now residing in 40 different states and several are serving in military and missionary posts in foreign lands. Over half of them still live in Iowa and furnish a big share of the nursing care

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provided by hospitals and health agencies of Ottumwa and surrounding areas.
(*Ottumwa Courier*, June 25, 1971, p 14, c 5-7)

CRITERION C:

The St. Joseph Hospital Historic District was designed by three significant Midwestern architectural firms during two important periods of Ottumwa's development: the 1920s and the post-World War II period.

E. Brielmaier & Sons

The selection of E. Brielmaier & Sons in 1924 as the architects for the new St. Joseph Hospital by the Sisters of Humility was a logical one. The Brielmaier firm was well-known within the Catholic community. Erhard Brielmaier, the senior member of the firm, came to this country from Germany as a child, ultimately settling in Milwaukee. He started as a carpenter and altar maker, and eventually became a major architect in the area. Three sons followed him into the business and various sources say that the firm was responsible for over one thousand Catholic churches, schools, hospitals and other buildings in this country and Canada. Although Erhard died in 1917, the sons continued the firm for several decades and the Ottumwa building is one of many from this later period. The Milwaukee area has a wealth of churches designed by the Brielmaiers, including St. Josaphat and St. Anthony of Padua. (Architecture Firms Based in Wisconsin, np) Their work was not limited to Catholic projects however, as they also designed the Mayo Clinic Hospital in Rochester, Minnesota and collegiate buildings for Marquette University.

Their decision to use the Classical Revival style for the Ottumwa building was a conservative choice, in keeping with the conservative values of the church, and one that many other established firms were making for institutional buildings. Classical Revival allowed them to design a straight-forward, functional building with a minimum of decorative elements but impressive with its solid symmetrical façade. The design of St. Joseph Hospital fits this pattern. One of the most interesting features of their design was the flexibility to build only as much as was currently needed, with the option of adding additional wings at a later date. This became very important in Ottumwa thirty-five years later. The materials selected, the rich tapestry brick and limestone of the exterior and terrazzo floors and built-in wooden cabinets on the interior, were selected for their durability, but there is also a richness to these materials that is appropriate for this building. The architect's placement of patients' rooms, allowing each to receive direct natural light during some part of the day was a relatively new feature of hospital design at the time and remains important today.

In the 1920s the physical appearance of Ottumwa was changing rapidly. Many of the nineteenth century buildings downtown were being replaced or remodeled, and there were many non-commercial buildings under construction as well. The Minneapolis architectural firm of Croft & Boerner was selected to build the 1923 Ottumwa High School (Tudor Revival) and the 1924 Young Women's

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Christian Association building (Renaissance Revival, NRHP). They are also believed to have been the architects for the 1921 Young Men's Christian Association building (Renaissance Revival). The Egyptian Revival *Ottumwa Courier* building from 1921 was designed by the Davenport firm Claussen and Kruse. The new Classical Revival St. Joseph Hospital fit very well into this group.

D.D. (Dane) Morgan

Morgan was a founding partner in the Burlington, Iowa firm of Morgan-Gelatt & Associates that was established in 1940. He had received his B. Arch from Carnegie Institute of Technology in 1935 and studied under Mies van der Rohe at the Illinois Institute of Technology in 1939-40. (Shank, p 117) It is easy to see how the simple modern style for which he was recognized developed out of this training. The St. Joseph Nurses' Residence from 1945 illustrates his use of simple ashlar blocks of stone in his designs, creating a visual interest in contrast to the charcoal and orange tapestry bricks of the walls. The materials and the size of the nurses' building reflected those of the hospital building, but the image created was much different. Morgan's use of large areas of glass is a new idea, and his pierced walls with the crosses provide an interesting surface break on both the interior and exterior. Although the Brielmaier firm, and many other established offices were comfortable continuing to work with revival styles, it appears that all of Morgan's work was in the modern style of the mid-twentieth century. The materials themselves provided the decorative elements without the need for classical details. Not long after his design for the Nurses' Residence, Morgans' firm designed the first hospital built in Iowa under the federal Hill-Burton Act in Fairfield. Wesley Shank noted that the firm became "quite skilled in this type of work in the 1950s." (Shank, p 117) The two later Ottumwa projects designed by Morgan (Sunnyslope Sanitarium and the Ottumwa Hospital) fall into this category.

Post-World War II Ottumwa experienced a "building spurt" to meet the needs of the returning servicemen and their families. Not only were new medical facilities needed, but new schools, churches, and commercial buildings. The simplicity of design seen in the Nurses' Residence was repeated in those building types, along with supermarkets, auto garages and banks as commercial development moved out of downtown to the "suburbs."

Brooks and Borg

Architect John Woolson Brooks and engineer Elmer Borg were partners in Iowa's legendary architectural firm, Proudfoot and Bird. The firm had gone through several partnerships before becoming Proudfoot, Bird, Rawson, Brooks & Borg in the early 1930s. (Shank, pp 27 and 31). Following World War II the firm became Brooks-Borg, Architects-Engineers in 1945. Brooks wrote of the firm in the 1970s saying, "The character of the firm has changed little in the sixty-odd years which I have observed it. The main objective has been to produce Architecture in the unlimited sense of beauty, utility, and commodity: unlimited in that none of the three properties was allowed to predominate; none was neglected." (Shank, p 30)

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The 1960 addition to St. Joseph Hospital is a good example of this approach. Although the firm was known for being conservative stylistically, it approached the new wing with a modern view and with an eye on the 1926 design. The plan of the wing fits into the original design of the hospital, extending the wing to the northeast at the same angle used for the two original wings. The exterior materials are also quite similar, being tapestry brick with limestone trim. In this case, the brick is not striated, so the texture of the walls is different. Like Morgan's design, there are tall glass windows in the lobby area, glass becoming major wall material. On the interior, the functional central hall plan was followed, with all rooms having ample natural light. It is a straight forward functional design, with the materials providing the visual interest. The pierced walls that Morgan used in the Nurses' residence reappear here, but the openings are tall vertical openings rather than cross-shaped. The use of the single story entrance wing to draw the eye to the new four story wing is interesting, and the horizontal aspect of that wing is repeated with the large paved parking lot. Only one element is out of place in this addition, and that is a clumsy connection at the ground level between the old and new parts of the building. Although the new wing is built at a lower level than the original, there is still the need for a ramped area connecting downward to the elevators and ambulance/emergency room entrance. The elevator shaft was enlarged to accommodate two elevators in addition to a set of stairs, providing access to all levels of both the original and 1960 addition.

ST. JOSEPH HOSPITAL HISTORIC DISTRICT TODAY:

In 1987 the Sisters of Humility sold St. Joseph Hospital and its grounds to the Ottumwa Regional Health center. Although it remained in operation, many specific functions changed. It became a health and rehabilitation center, with long-term care, physical therapy, a mental health unit and a drug and alcohol recovery center. Several doctors moved their offices into the building. Later, Hospice House moved into the second floor. The nurses' residence had not served as a dormitory since the early 1970s, housing instead, the Wapello County Nurse's Office, the Wapello County Ambulance Service and the University of Iowa Maternity and Infant Care Center. Finally, all offices and services were closed. In 2012 it was announced that the buildings were to be demolished. The public got one last chance to walk through the buildings, and then a chain link fence was erected.

Today, in 2015, there is renewed hope that St. Joseph will be saved. Rehabilitation plans are being made for the re-use of both the hospital itself, and the nurses' residence. The "heart-shaped" circle drive is recognized as an important part of the design and will be preserved. The single story brick garage east of the hospital is in gravely deteriorated condition and no information has been located explaining its purpose or age. At this point, it is considered marginally contributing to the historic district due to date of construction, but is not included in the rehabilitation plans.

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CONCLUSION:

The St. Joseph Hospital Historic District is a cluster of medically related buildings situated on a ten acre plot of green space, surrounded by residential neighborhoods and the open space of the Country Club golf course. Little has changed about the site in the nine decades since the hospital it was built. It is a landmark in the community, recognized as a major commitment by the Sisters of the Humility of Mary to the people of Ottumwa. Although the mother house of the congregation moved to Davenport years ago, the spirit (and a small handful of sisters) remains in the community.

The four resources in this district are locally significant under Criterion A due to their association with the Sisters of Humility of Mary, and the hospital and nurses' residence have additional significance because of the major role both buildings played in the medical history of Ottumwa. These buildings not only provided medical care, but were part of the St Joseph School of Nursing. The school provided training for over 700 nursing students over the years, the last of whom are still practicing today. This building complex stands as a symbol of the dedication of the Sisters of Humility and the nurses they trained. The district is impacted by Criteria Consideration A because although it was owned by the Sisters of Humility of Mary, not the Roman Catholic church, and its primary use was for medical, not religious, purposes, the building included a chapel with religious services held there on a regular basis.

The St. Joseph Hospital Historic District has local Criterion C significance as a good example of early to mid-twentieth century institutional design by three important architectural firms: E. Brielmaier & Sons; D.D. (Dane) Morgan; and, Brooks and Borg. Each of these buildings was the most modern and up-to-date medical facility that could be built at the time. The styles of the buildings represent the most popular styles at the time of construction, and there is a strong unifying factor in all of the buildings. The scale and proportion of each of the buildings is sympathetic to the others, and they were all constructed of tapestry brick manufactured in Ottumwa with limestone trim. The period of significance is 1926 (date of construction) to 1965 (the fifty year requirement).

The importance of this complex was stated in a photo caption on the front page of the *Ottumwa Courier* on December 31, 1925:

**This beautiful new building represents years of arduous labor
on the part of the Sisters of Humility of Mary, in Ottumwa, and will serve
as a monument to that organization in its service to this community.**

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Newspapers

- Ottumwa Courier.*
- "Citizens Plan To Meet Call For \$100,000" Mar 9, 1924, p 1, c 3
 - "Hospital is Near \$50,000" Mar 14, 1924, p 1, c 2
 - "Proposed New St. Joseph Hospital For Which Drive Is Now Being Conducted" Mar 14, 1924, p 11, c 1-5. Elevation drawing and floor plan.
 - "New Hospital Now Assured" Mar 22, 1924, p 1, c 1
 - "Foundation Work On New Hospital To Go In This Fall; Doctors See Plans" Oct 3, 1924, p 1, c 2-3
 - "New Hospital Excavations Are Starting" Oct 22, 1924, p 1, c 3
 - Ad for Morey Clay Products Co. "The New St. Joseph Hospital" Oct 5, 1925, p 8, 3 c drawing of new building
 - "New Hospital Ready Soon" Nov 28, 1925, p 17, c 6
 - "The St. Joseph Hospital Opens Sunday" Dec 31, 1925, p 1, c 3-5. Three column Drawing plus one column article running the length of the page
 - "\$45,000 U.S. Grant For A Nurses Home" Apr 6, 1944, p 19, c 4
 - "May Begin Construction of Nurses' Home in June" Apr 7, 1944, p 1 c 3
 - "Ready for Bids on Nurses' Home in May" Apr 14, 1944, p 13, c 2
 - "Begin Building \$73,324 Nurses Home Next Week" Jun 17, 1944, p 13, c 1-2
 - "St. Joseph Nurses Home Given Additional Grant of \$21,600" Feb 15, 1945, np, nc
 - "Hospital Opens New Department" Jul 1, 1940, np, nc. Pediatrics department
 - "St. Joseph School of Nursing" Jul 26, 1949, np, nc
 - "New Nurse Class One of Largest In Years" Sept 10, 1949, np, nc
 - "Improvements At Saint Joseph's Exceed \$400,000" Undated article probably from April 1951 when the new Ottumwa Hospital opened
 - "Work To Begin On New St. Joseph Addition" Apr 2, 1959, p 10, c 3-4
 - "Million Dollar Hospital Wing Ready For Public Inspection" Oct 28, 1960, pp 17-28. Many photographs and articles about the various new departments and the new equipment.
 - "At St Joseph Hospital Final Nursing Class to Graduate Sunday" Jun 25, 1971, p 14, nc

Historic Photographs

Michael W Lemberger Collection

Fred Zesiger Collection

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GEOGRAPHIC DATA:

Legal Description:

City of Ottumwa: Auditor's Subdivision SE Sec 18-72-13. Auditor's Lot 11 (339.6' x 641') and Auditor's Lot 12 (339.6' x 641').

Boundary Justification:

This is the parcel of land purchased by the Sisters of Humility of Mary in 1924 as the location for their new St. Joseph Hospital.

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Figure 1

Map of Iowa showing location of
Wapello County

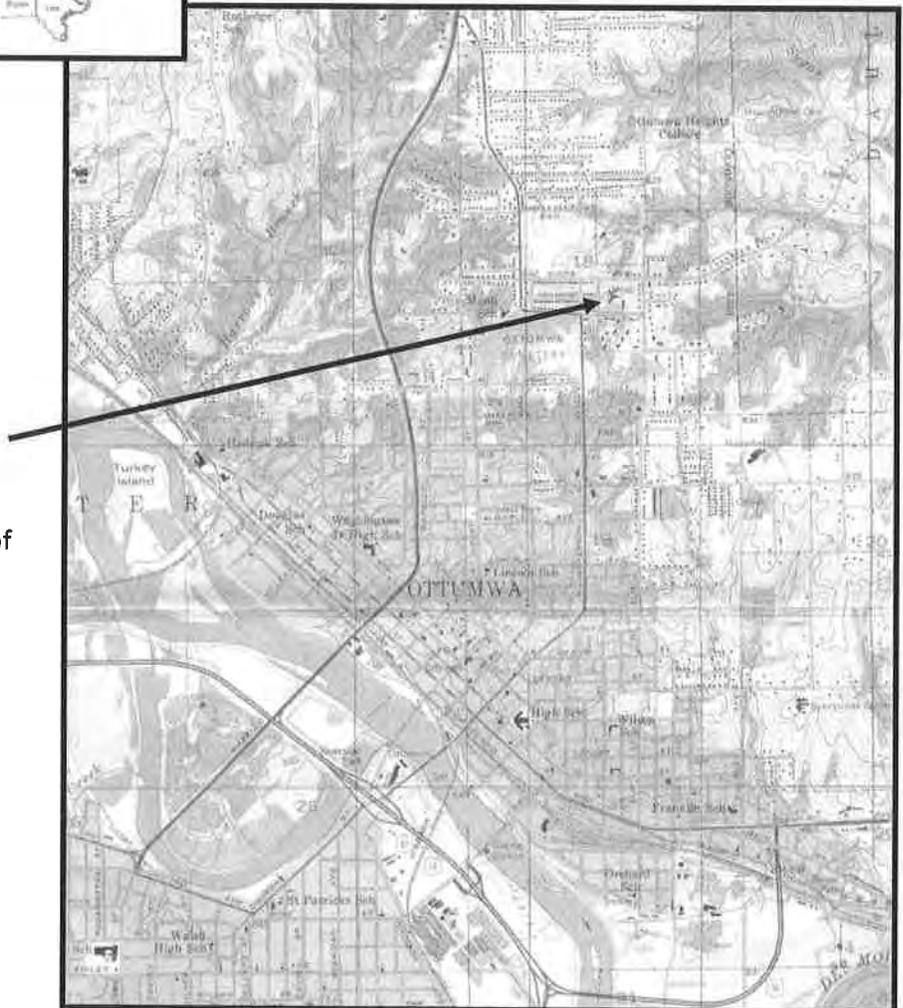


Figure 2

USGS map (1976) showing location of
St. Joseph Hospital Complex

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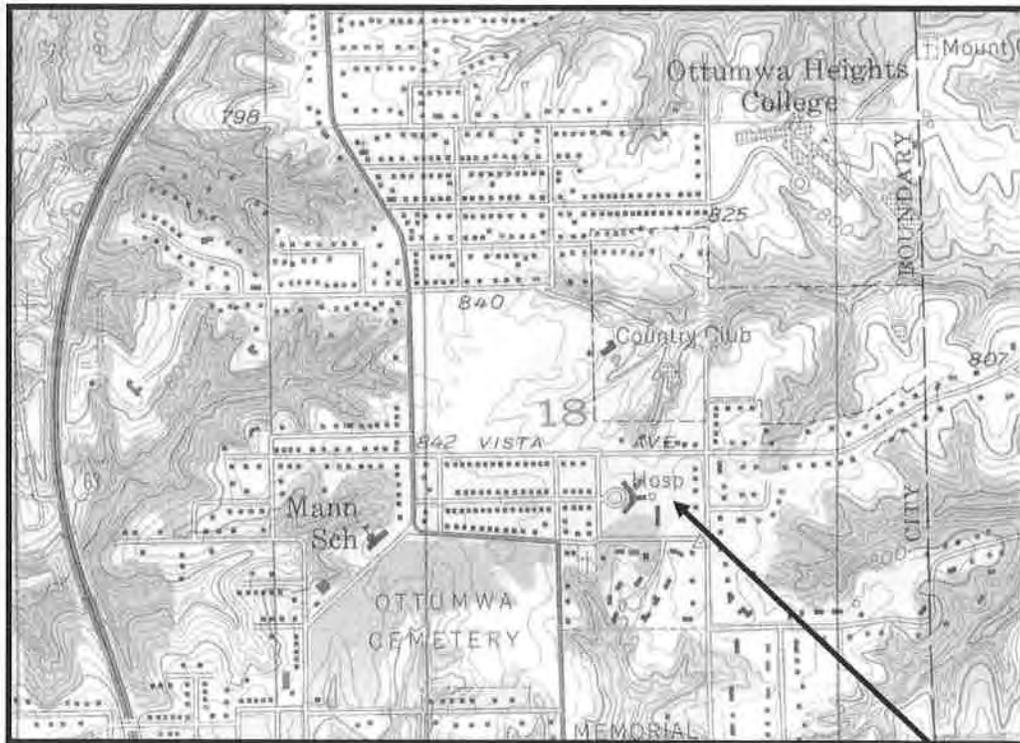


Figure 3

USGS map (1976) showing relation of St Joseph Hospital to the Vogel Place Historic District immediately to the west, the Country Club Golf Course to the north, and residential development to the east

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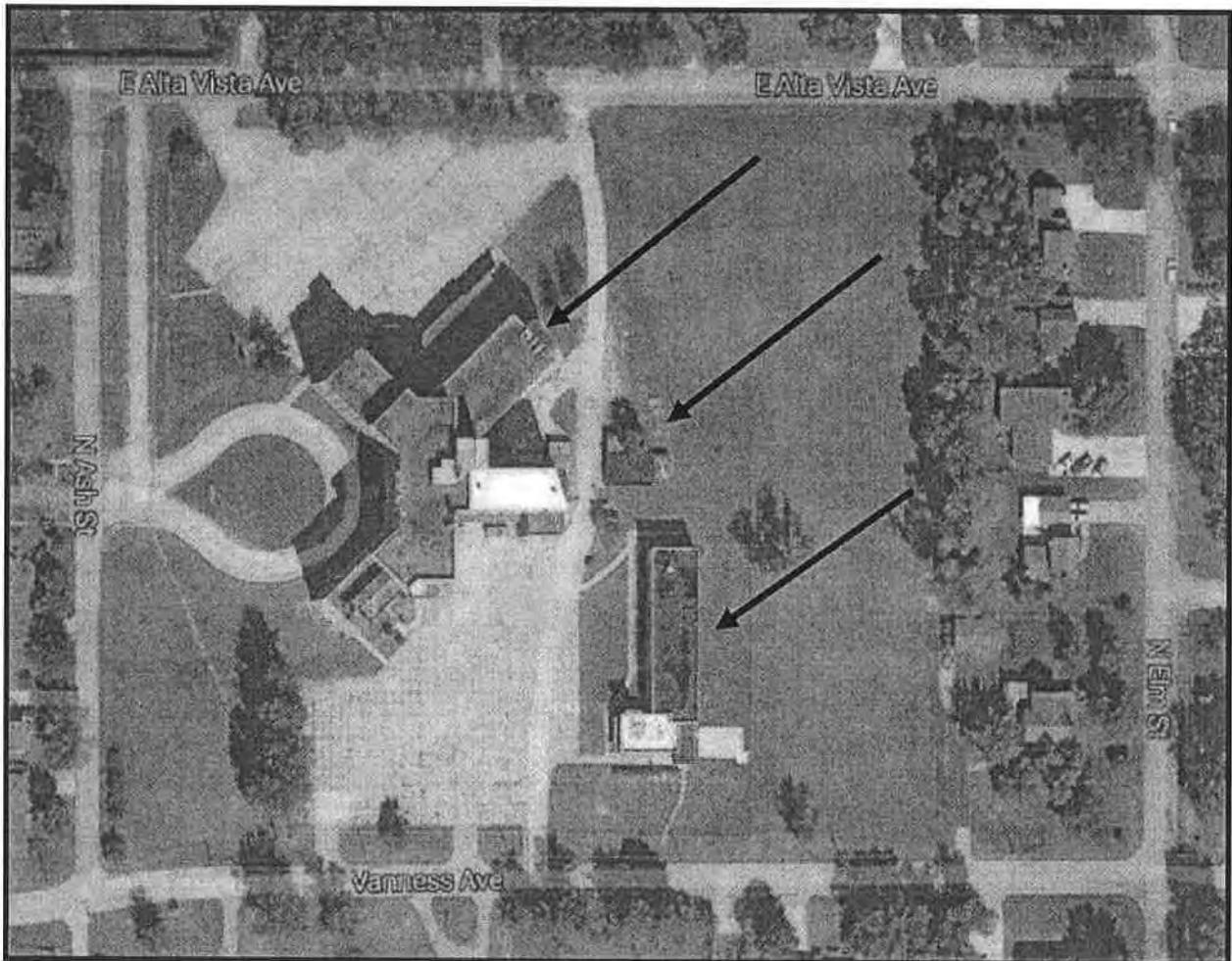


Figure 4

2014 aerial photograph showing St Joseph Hospital with circle drive to the west
Arrows indicate (top to bottom):
1960 Addition
Garage
1945 Nurses' Residence
(2014 Google Map)

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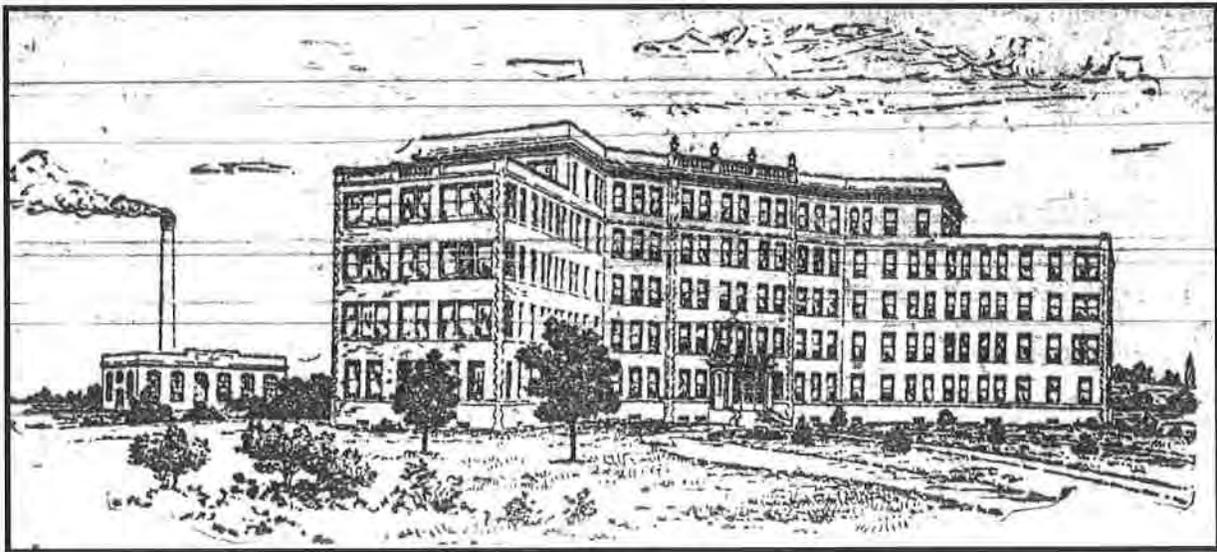


Figure 5

Drawing by E. Brielmaier & Sons of façade looking southeast
(This particular drawing was the stock image used by the *Ottumwa Courier*
throughout 1925 for articles on the progress of the hospital construction)

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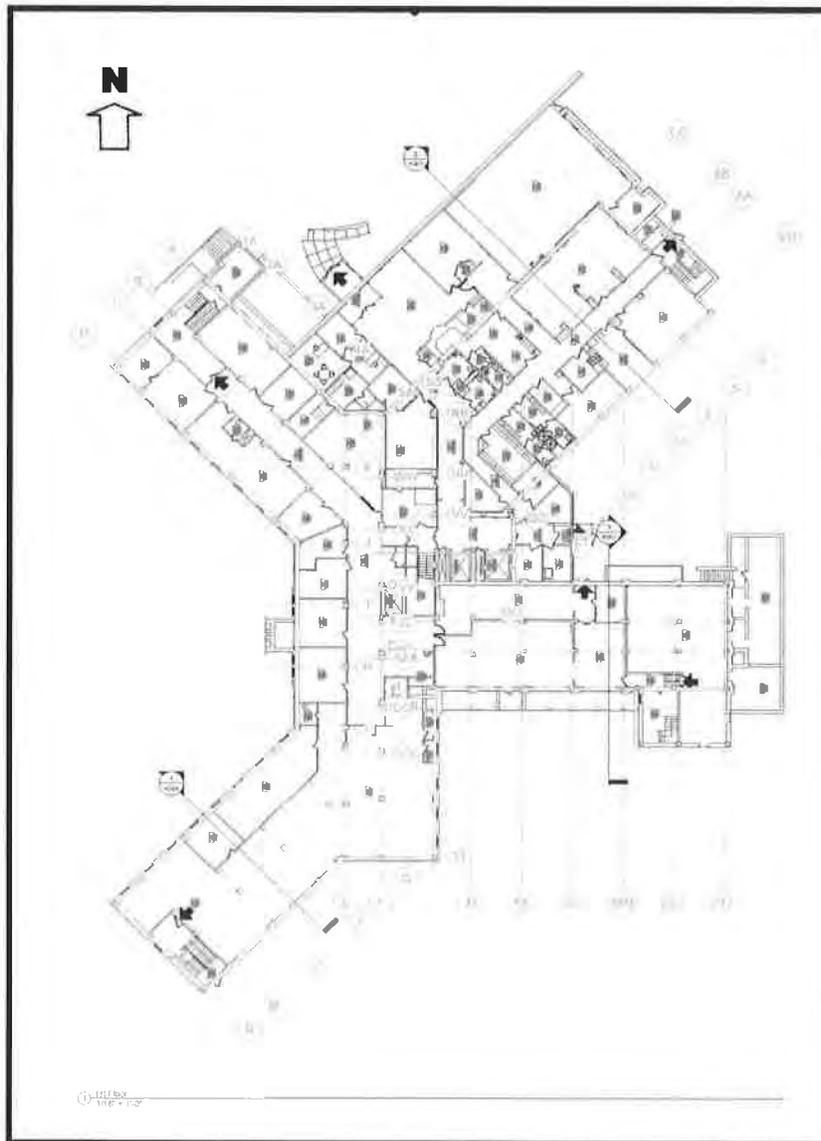


Figure 7

Plan of 1926 basement level and first floor 1960 addition
(Walker Coen Lorentzen 2014))

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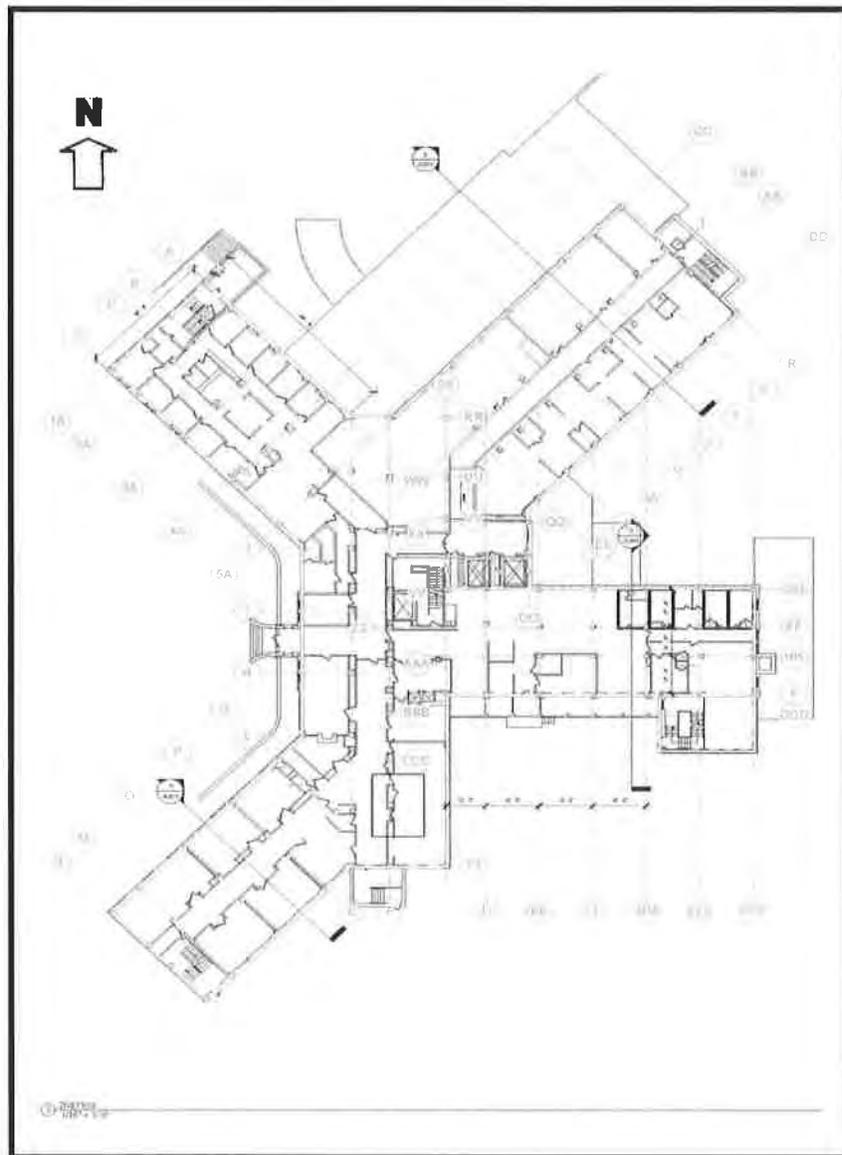


Figure 8

Plan of 1926 main floor and 1960 second floor
(Walker Coen Lorentzen 2014)

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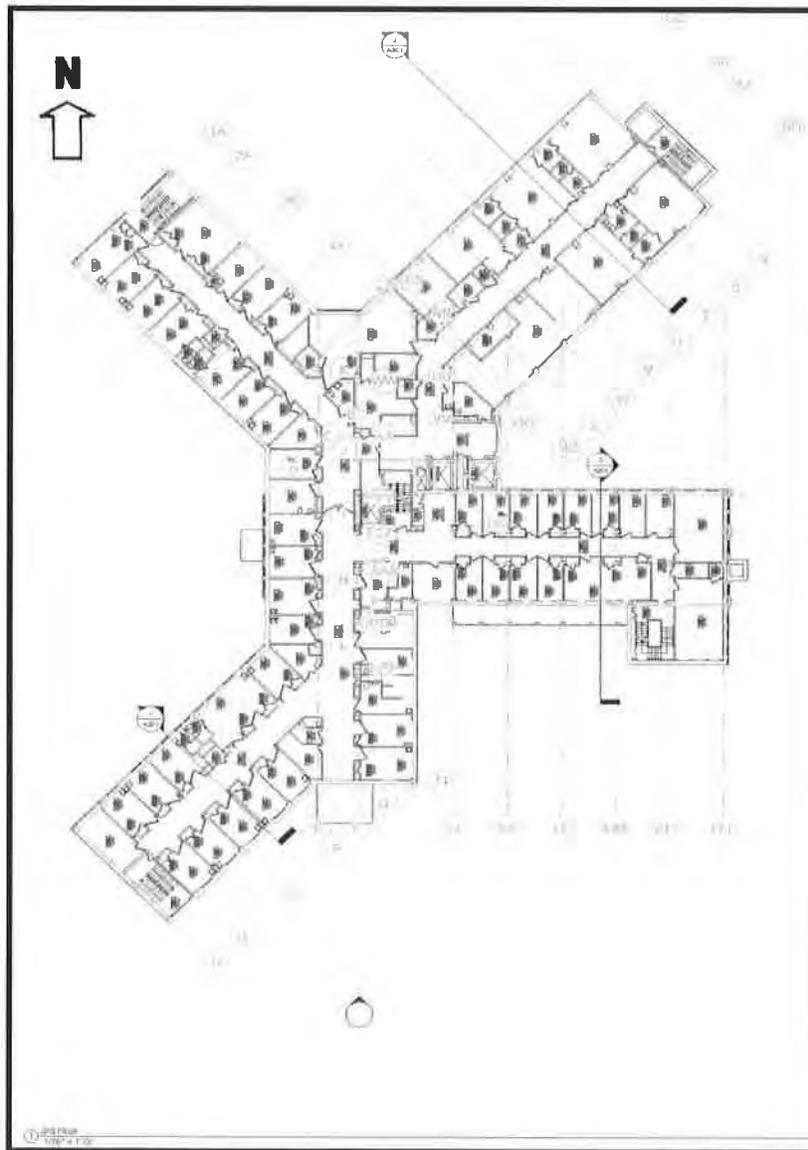


Figure 9

Plan of 1926 second floor and 1960 third floor
(Walker Coen Lorentzen 2014)

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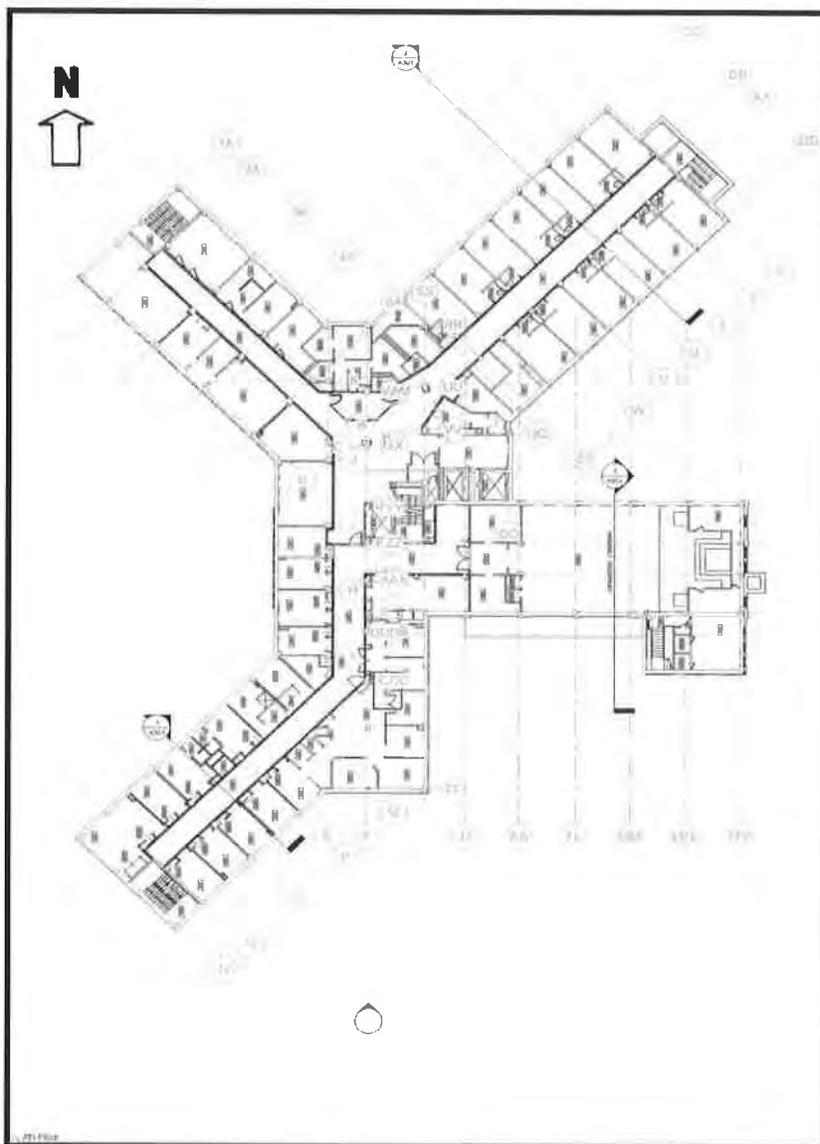


Figure 10

Plan of 1926 third floor and 1960 fourth floor
(Walker Coen Lorentzen 2014)

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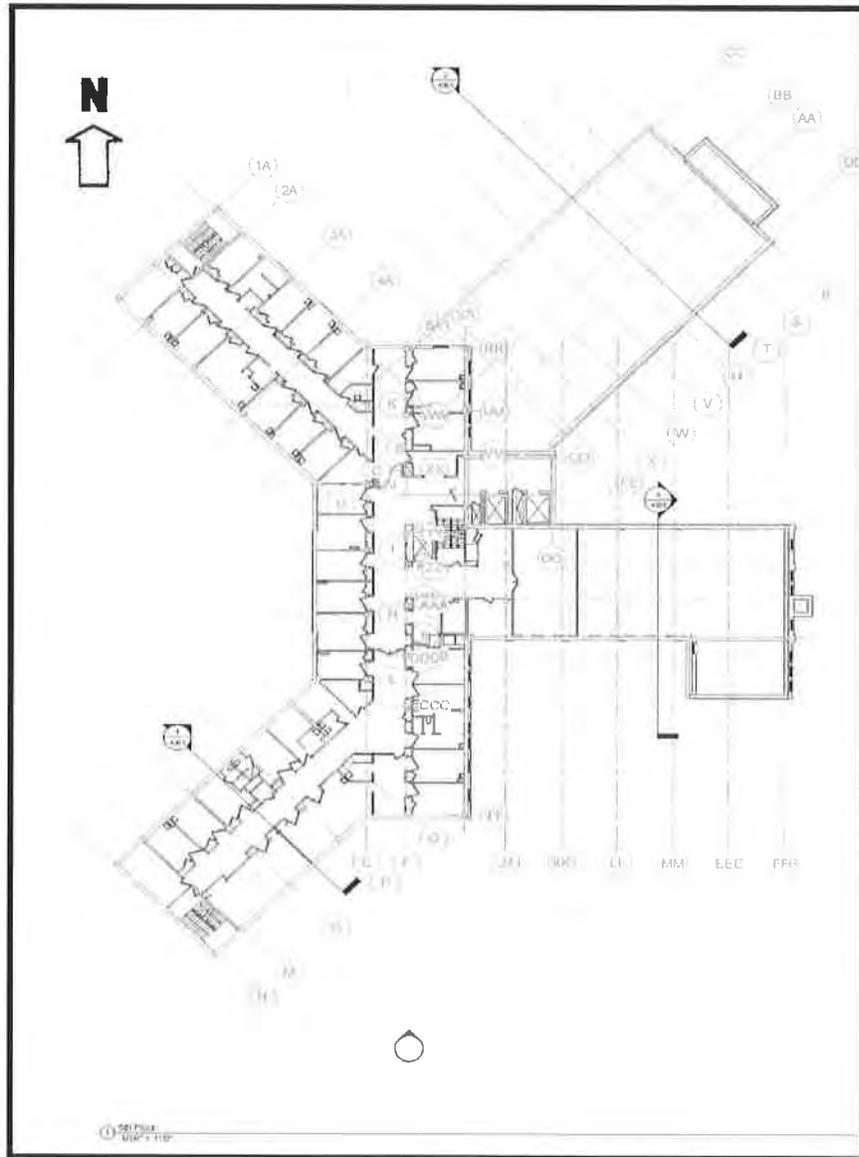


Figure 11

Plan of 1926 fourth floor
(Walker Coen Lorentzen 2014)

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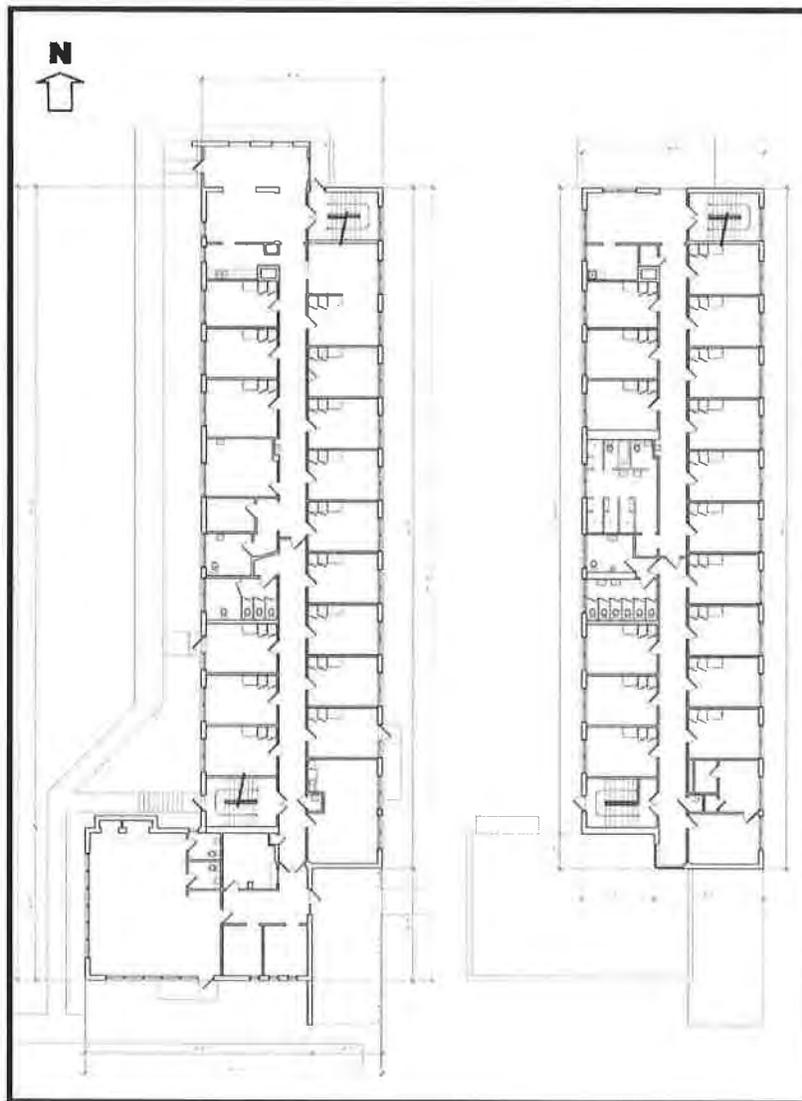


Figure 13

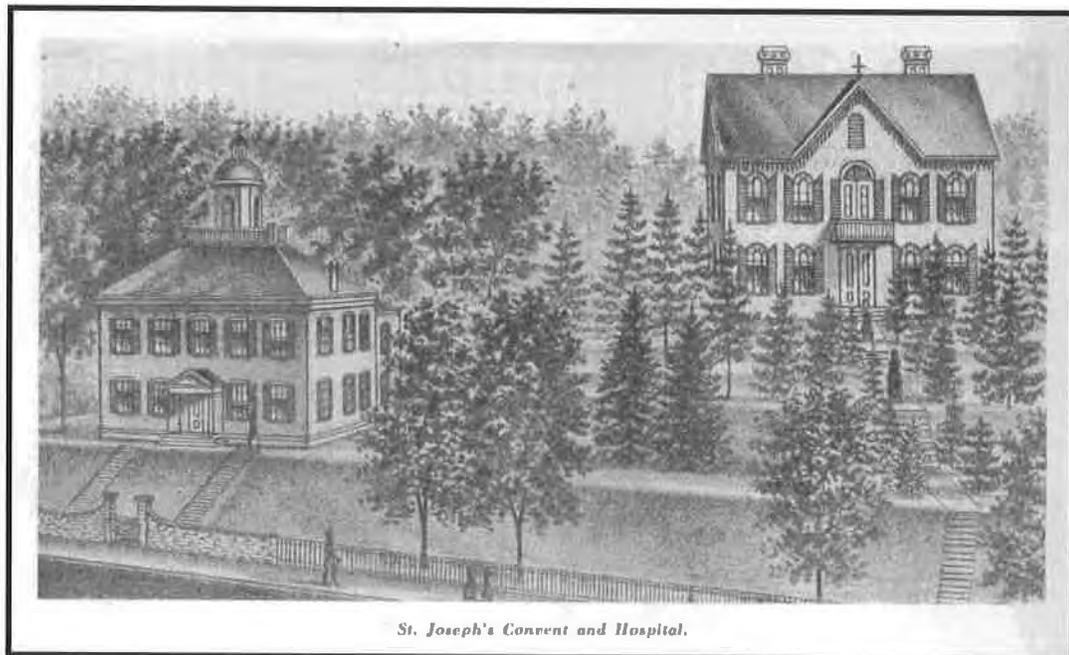
Plans of Nurses' Residence
First floor on left, second floor on right
(Walker Coen Lorentzen 2014)

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St. Joseph's Convent and Hospital.

Figure 14

St. Joseph's Convent and Hospital (aka Talley Hospital) in the 400 block of North Court Street
(Portrait and Biographical Album of Wapello County, Iowa, p 269)

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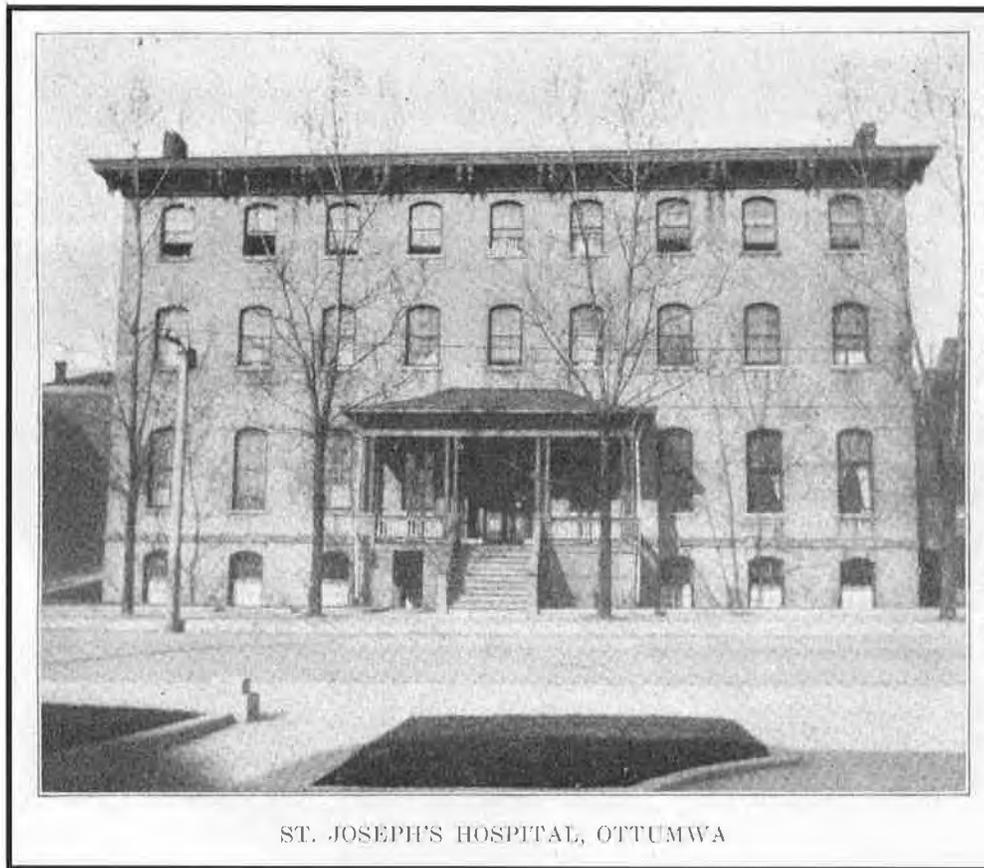


Figure 15

St. Joseph's Hospital opened in 1914 in this building on Fourth Street next to St. Mary of the Visitation Church.

The building was constructed in the 1860s by the Sisters of the Visitation to serve as a school and later as their convent.

(Waterman, History of Wapello County, Iowa, Vol 1, facing p 236)

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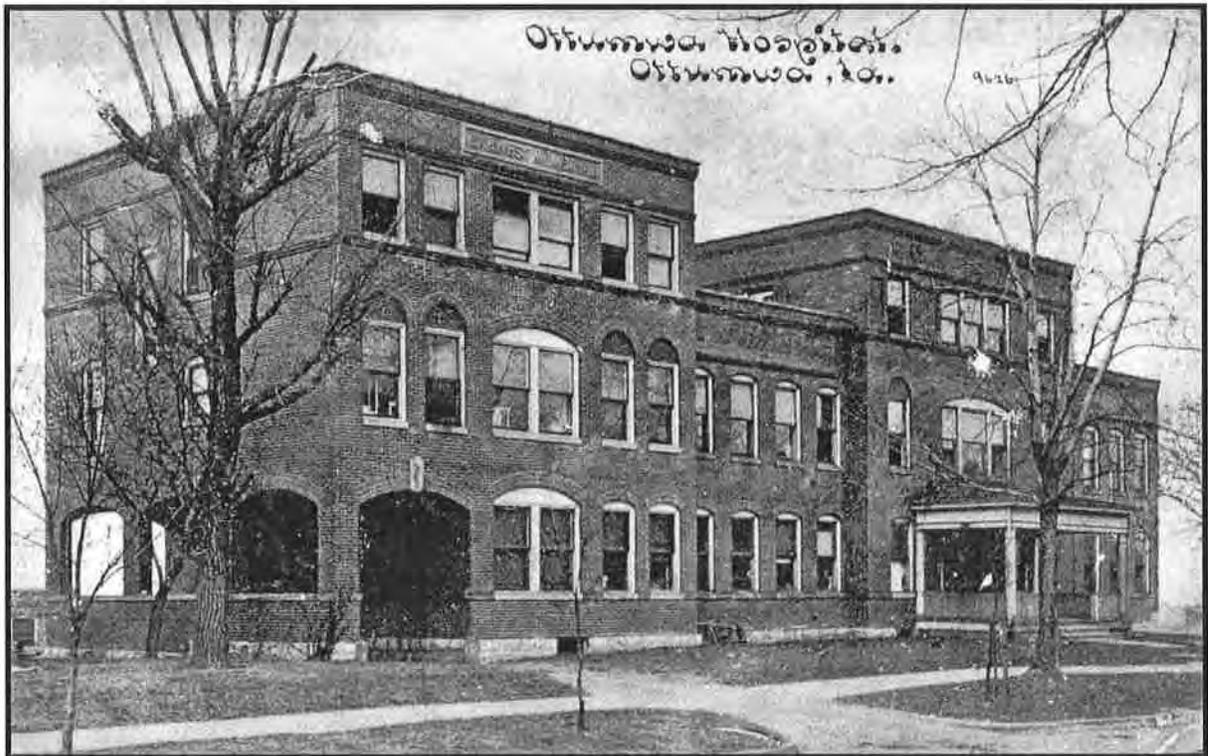


Figure 16

Ottumwa Hospital on East Second between College and Union streets.
Built in 1904

(Historic postcard owned by David Longdo, courtesy of Michael W Lemberger Collection)

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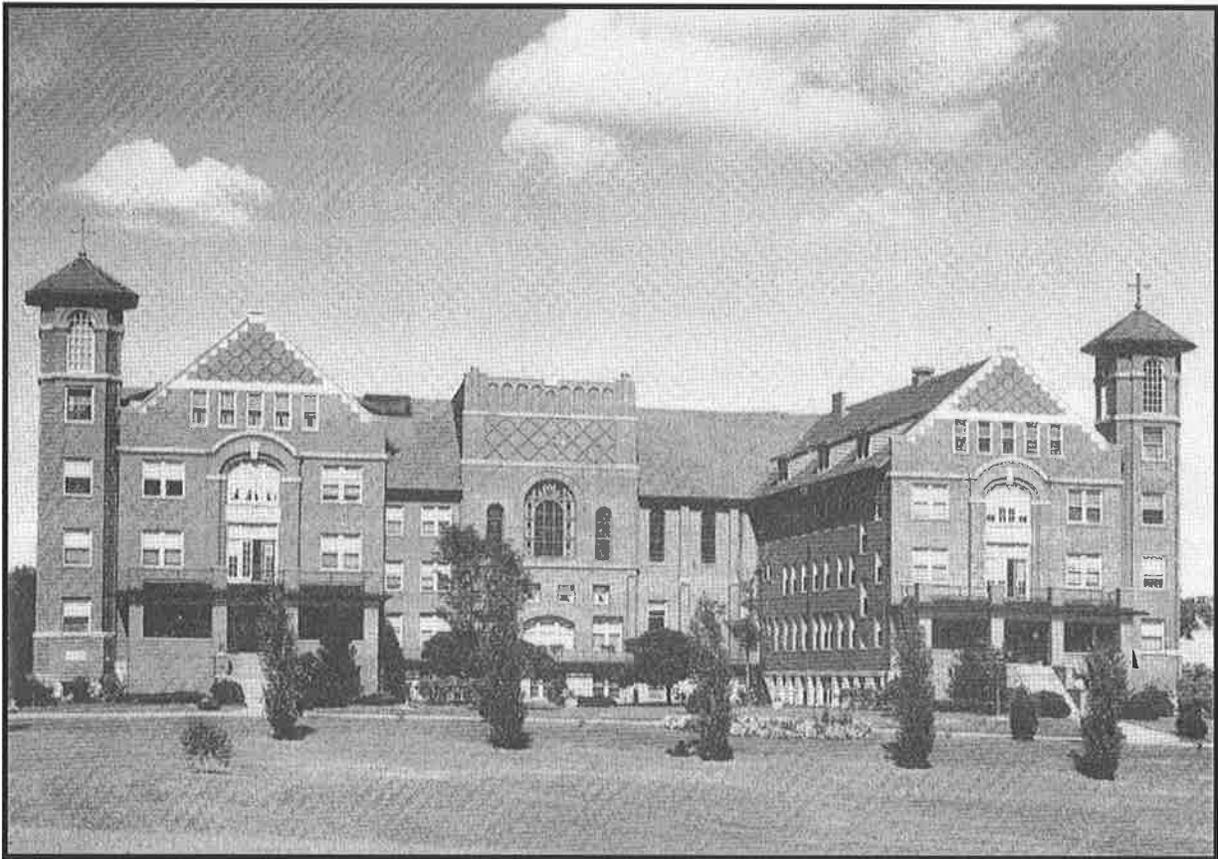


Figure 17

St. Joseph Academy and Convent (1913)
East end of Grandview

When the academy was expanded to include a junior college, this became
known as Ottumwa Heights College.

(Taylor, Ottumwa 100 Years a City, p 37)

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Figure 18

1930s aerial photograph shows proximity of St. Joseph Hospital (bottom arrow)
to the St. Joseph Academy and Convent to the north (top arrow)
Note roadway (middle arrow) connecting the two through the Country Club golf course
(Iowa Geographic Map server, <http://ortho.gis.iastate.edu>)

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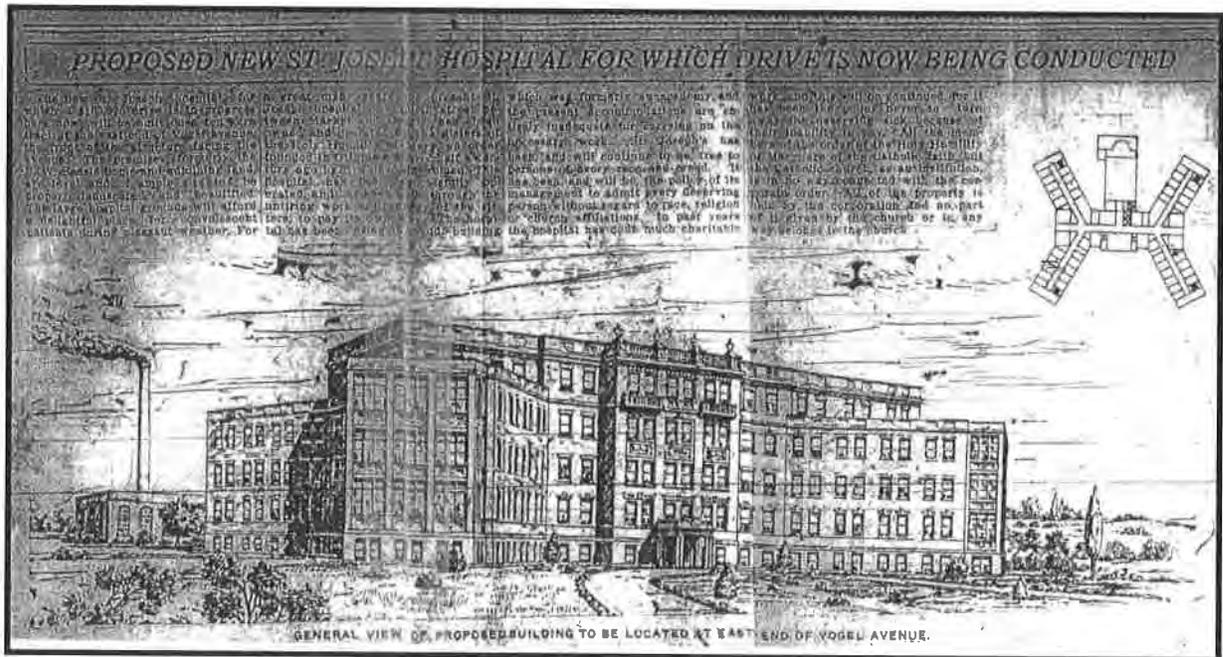


Figure 19

Elevation and plan for proposed St. Joseph Hospital
E. Brielmaier & Sons, Architects

Note the presence of wings at the rear of the building as well as the front.
(Ottumwa Courier, March 14, 1924, p 11, c 1-5)

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The New St. Joseph Hospital

now being completed in Ottumwa—fireproof and permanent. The 450,000 brick and the 1,500 tons of fire-proofing tile used in this building will not be affected by fire, frost or time.

Manufactured by

Morey Clay Products Co.

Ottumwa, Iowa

While Building
BUILD

Figure 20

Advertisement from the *Ottumwa Courier*
(October 5, 1925, center of page 8)

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Figure 21

Postcard showing the façade of the new St. Joseph Hospital
Undated, but within five years of construction
(Fred Zesiger Photograph Collection)

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Figure 22

Chapel interior with
original altar, crucifix,
and Stations of the
Cross

(Both photographs from the Michael W. Lemberger Collection)

Figure 23

Nurses at prayer in the
chapel, 1950s



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Figure 24

Aerial photograph of the St Joseph Hospital Complex looking east.
Note heart-shaped driveway
Ash Street in lower part of photo, East Alta Vista on the left, Vanness on the right,
North Elm at top.
Photographed between 1945 and 1959.
(Michael W. Lemberger Collection)

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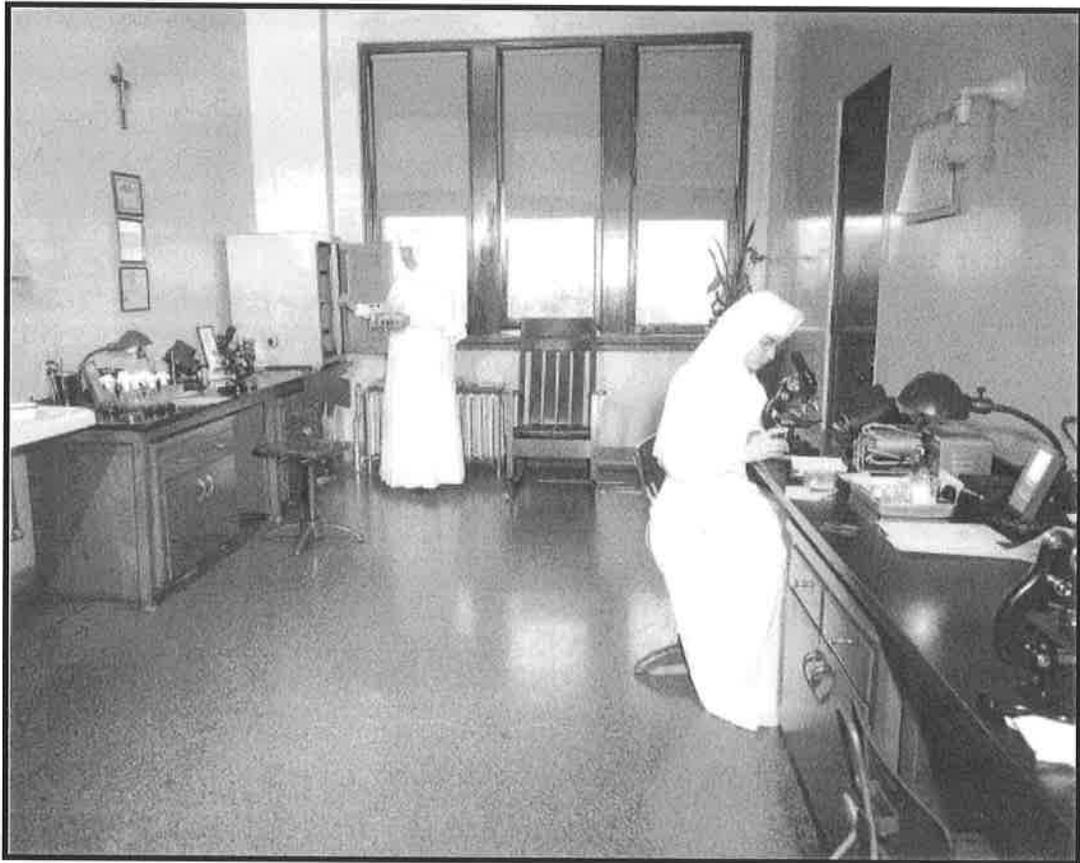


Figure 25

Sisters working in the laboratory on the top floor of the hospital, 1950
(Michael W. Lemberger Collection)

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Figure 26
New Ottumwa Hospital, c. 1952 postcard
(Fred Zesiger Photograph Collection)

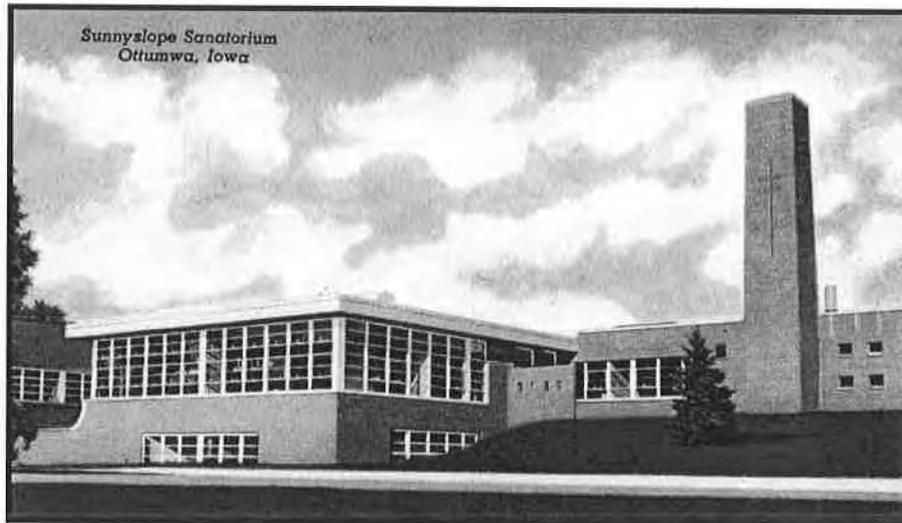


Figure 27
Sunnyslope Sanitarium, c. 1950 Postcard
(Fred Zesiger Photograph Collection)

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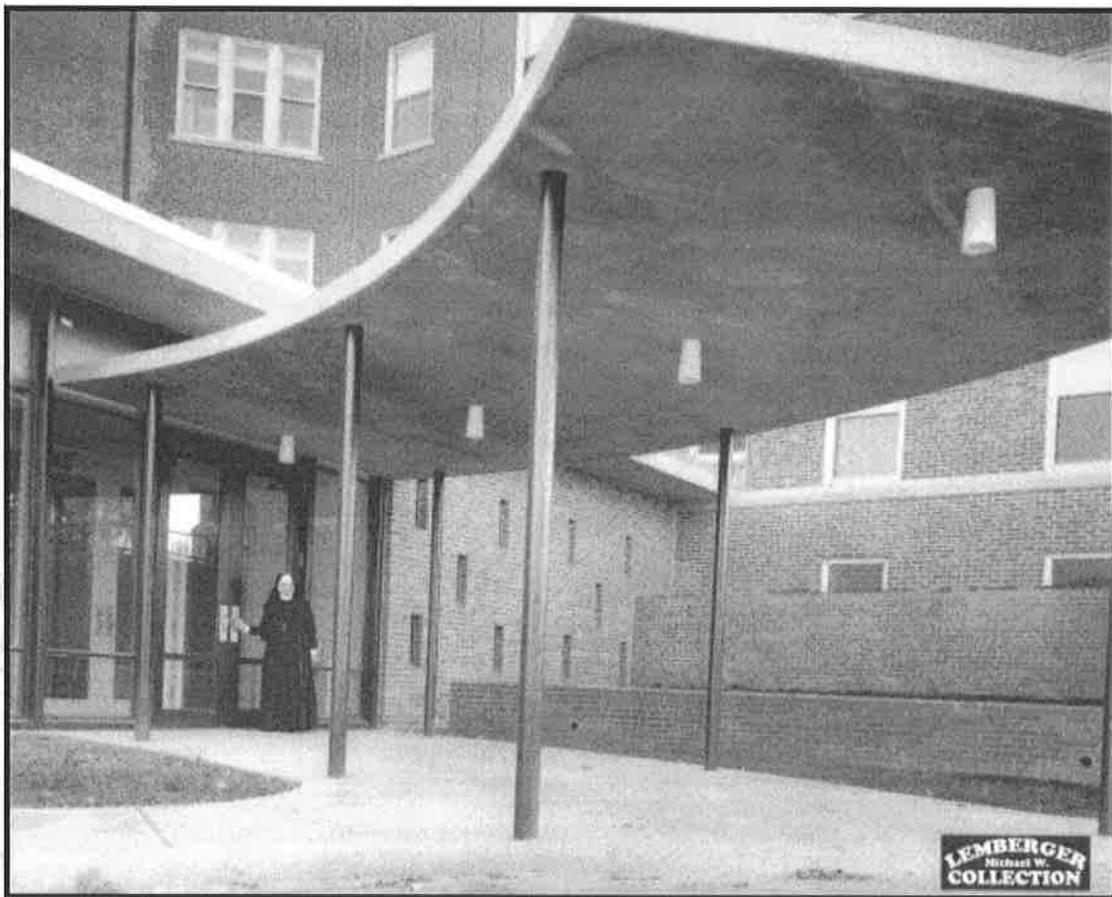


Figure 28

Hospital Administrator Sister Mary Pauline Curry, CHM, at the new
main entrance and sheltering walkway, November 1, 1960
(Lemberger, Saint Joseph Hospital, p 15)

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Figure 29

Pin awarded to graduates of the St. Joseph School of Nursing at the completion of their course of study. (Michael W. Lemberger Collection)



Figure 30

St. Joseph Nurses' Residence
1948 photograph
(Taylor, One Hundred Years a City, p 71)

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The photographs submitted with this nomination were taken by Molly Myers Naumann in Spring 2014 and were captured in RAW format and have been converted to tiff images. They are printed on HP Premium Plus Photo Paper using HP Viverna inks.

0001	Façade (west elevation), main block with NW & SW wings, looking E
0002	South elevation with SW wing, main block, and east (chapel) wing, looking N
0003	Rear elevation with E (chapel) wing on left, elevator tower, & NE (1960) wing on right, looking WSW
0004	NE elevation with E wing on left, 1960 wing & one story section, NW wing in background, looking SW
0005	1960 wing on left with original section in center. Note single story area with new entrance. Looking SW from north parking lot.
0006	NW wing with solarium windows & west elevation, looking SSE
0007	Detail: Original entrance centered on west elevation, looking E
0008	View from original entrance looking across "heart-shaped" drive due west down Vogel Avenue
0009	Interior: Pebble-dash and brick fireplace in main floor reception room looking SW
0010	Interior: Built-in bookcase and storage cabinet, main floor SW wing, looking SW
0011	Interior: 3 rd floor hallway SW wing, note recessed room doors, looking SW
0012	Interior: Solarium on third floor, NW wing, looking NW
0013	Interior: Terrazzo stairs at SW end of SW wing, looking E
0014	Interior: Third floor hallway in NW wing, note room doors are not recessed, looking SE
0015	Interior: Chapel on fourth floor, looking due E toward altar
0016	Interior: Chapel on fourth floor, decorative plasterwork capitols, dentils, acanthus leaves, coffered ceiling on south wall
0017	1960 wing, main entrance on north elevation of 1960 wing, looking SE
0018	1960 Interior: Front entrance and lobby, looking NW
0019	1960 Interior: Room immediately E of lobby with pierced wall, looking N
0020	1960 Interior: 3 rd floor surgical area, tiled hallway looking NE
0021	1960 Interior: 3 rd floor operating room with tiled wall, coffered ceiling, looking SW
0022	Nurses' Residence, Façade and west elevation, looking NE
0023	Nurses' Residence, façade and east elevation, looking NW. Note hospital in background
0024	Nurses' Residence, east elevation and rear (north) elevation, looking SW
0025	Nurses' Residence Interior: Lobby looking SW
0026	Nurses' Residence Interior: Lobby fireplace (north) wall looking N
0027	Nurses' Residence Interior: Hallway wall pierced with crosses, looking NW
0028	Nurses' Residence Interior: Main floor central hallway looking N
0029	Nurses' Residence Interior: Second floor dormitory room with built-in closet and dresser, looking NW

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0030	Nurses' Residence on left, hospital in background, single story garage in center, looking W
0031	Garage façade (west elevation) looking NE
0032	Garage north elevation with small addition & wood shed, looking SW

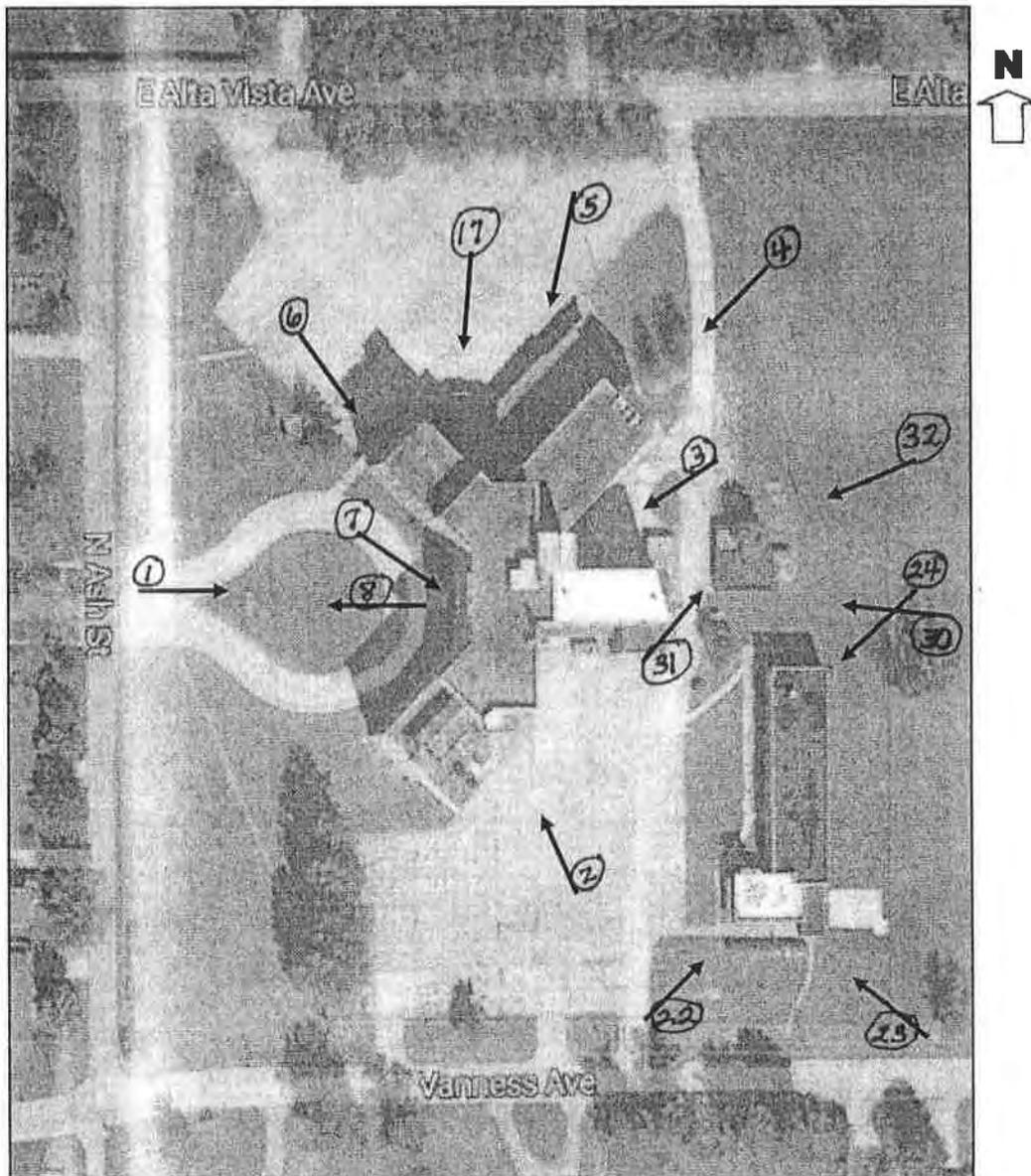


Photo Key - Exterior

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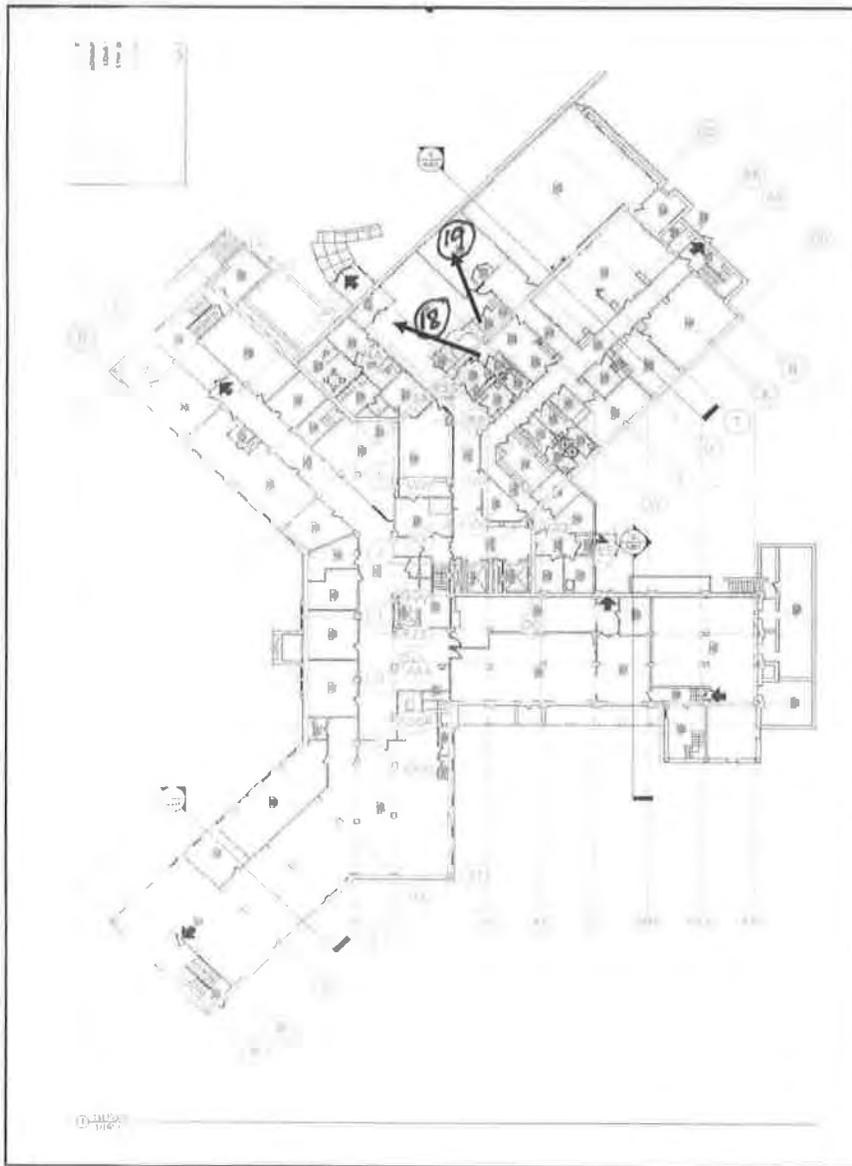


Photo Key – Current 1st floor

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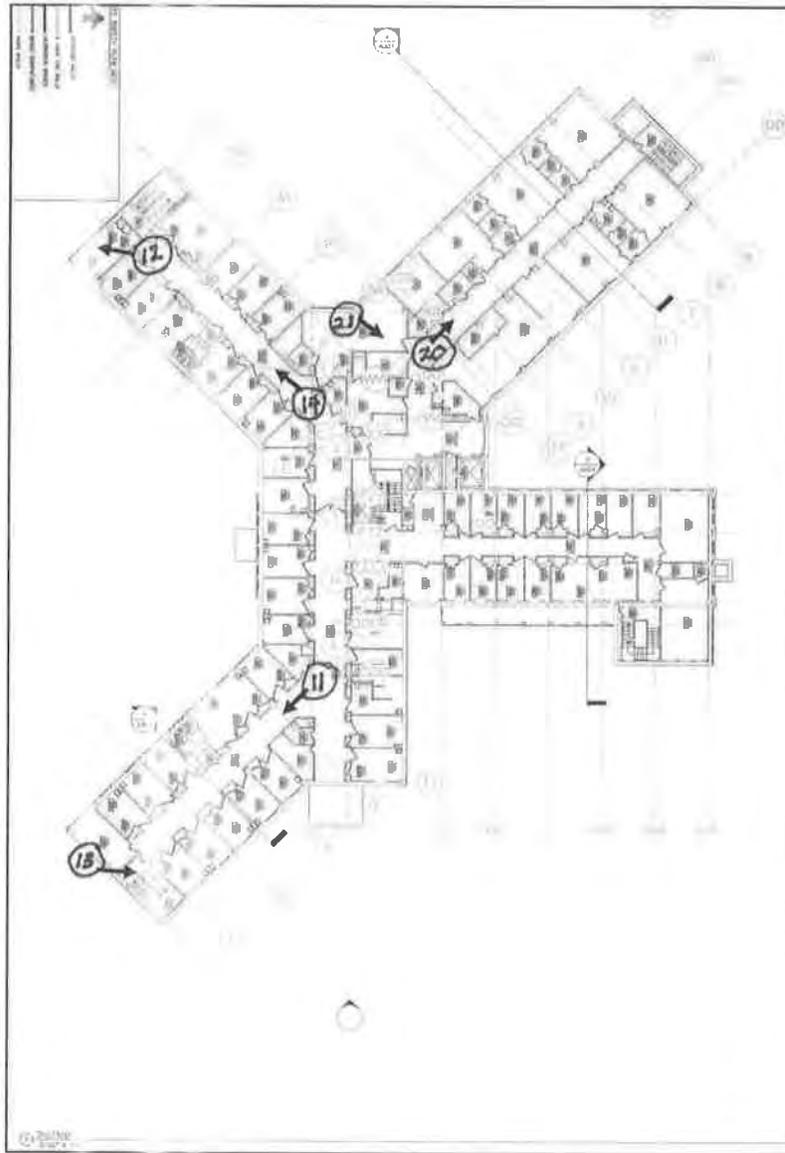


Photo Key – Current 3rd floor

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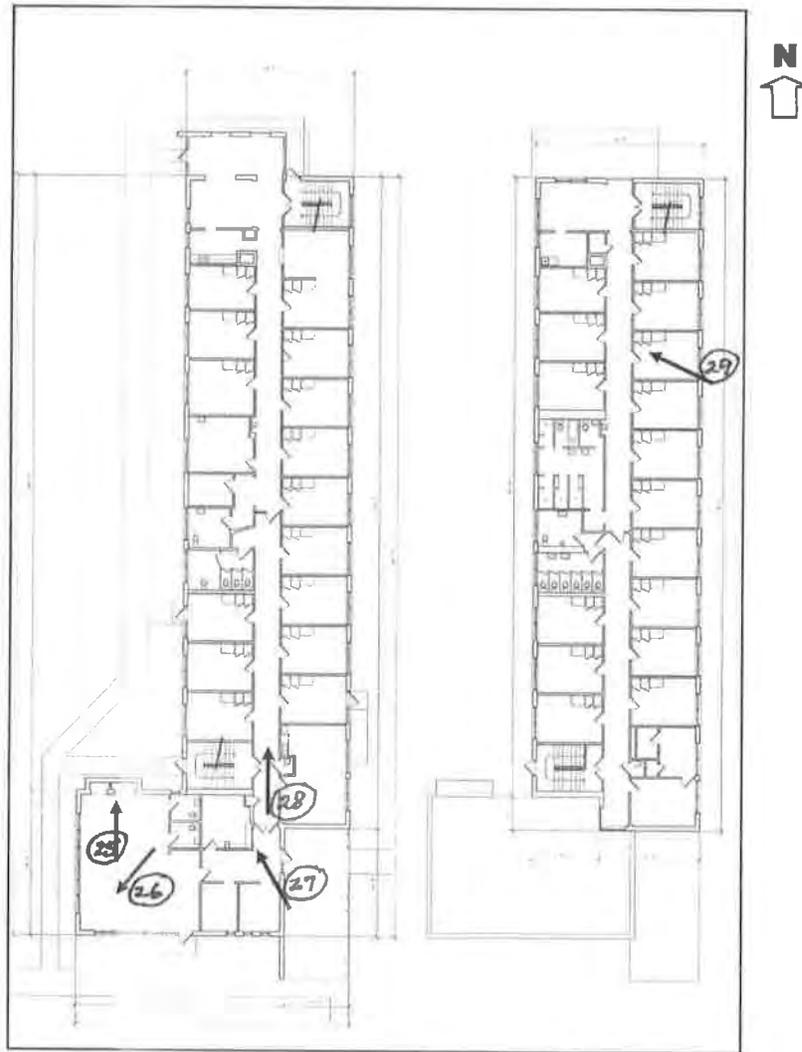
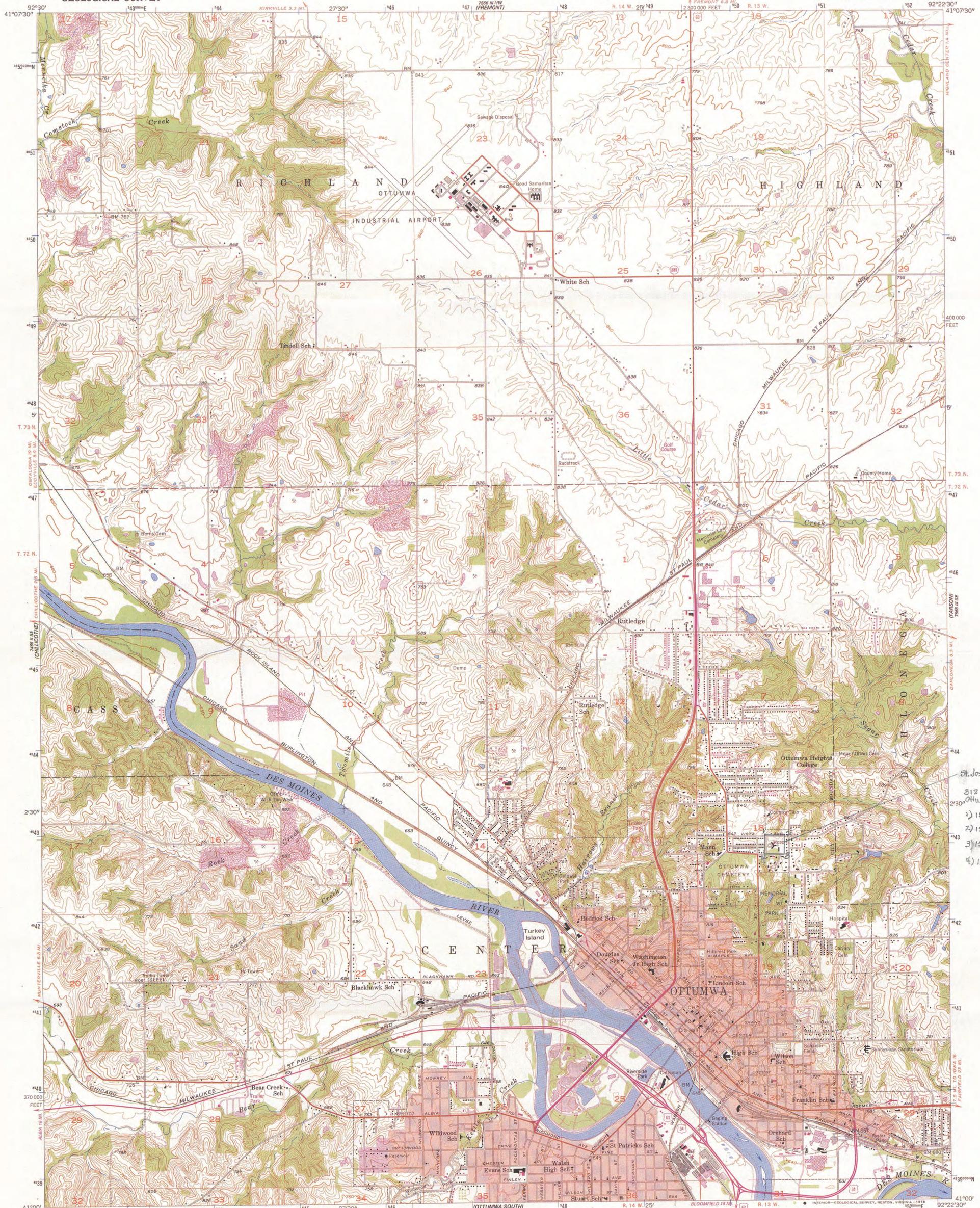
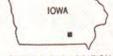
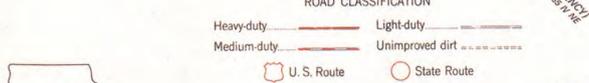
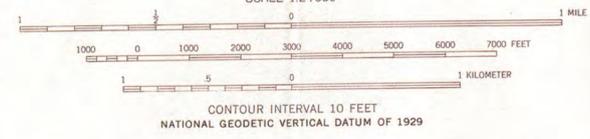


Photo Key – Nurses' Residence



St. Joseph Hospital Historic District
312 E Alta Vista 317 Venness
Ottumwa (Wapello Co.) IA
1) 15 550399 4543179
2) 15 550608 4543179
3) 15 550608 4542993
4) 15 550399 4542993

Mapped, edited, and published by the Geological Survey
Control by USGS and USC&GS
Topography from aerial photographs by photogrammetric methods
and in part by City of Ottumwa. Aerial photographs taken 1955
Field check 1956
Polyconic projection, 1927 North American datum
10,000-foot grid based on Iowa coordinate system, south zone
1000-meter Universal Transverse Mercator grid ticks,
zone 15, shown in blue
Red tint indicates areas in which only
landmark buildings are shown
Revisions shown in purple compiled from aerial photographs
taken 1976. This information not field checked
Purple tint indicates extension of urban areas



USGS
Historical File
Topographic Division

OTTUMWA NORTH, IOWA
SW/4 OTTUMWA NORTH 15' QUADRANGLE
N4100—W9222.5/7.5
1956
PHOTOREVISED 1976
AMS 7506 III SW—SERIES V876

JUL 31 1978

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 OTTUMWA
REGIONAL
HEALTH CENTER

GO TO MAIN HOSPITAL
at 1001 E. PENNSYLVANIA AVE.

Don't Smoke Here
No Smoking









EXIT







EXIT











EXIT



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PUSH

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SIEDA PARENTS AS TEACHERS













EXIT







