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AUG 26 2016

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 National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form*. If any 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 certification comments, entries, and narrative items on continuation sheets if needed (NPS Form 10-900a).

1. Name of Property

Historic name Santa Fe Hospital

Other names/site number ATSF Hospital; Memorial Hospital; KHRI #177-5400-01282

Name of related Multiple Property Listing N/A

2. Location

Street & number 600 SE Madison St not for publication

City or town Topeka vicinity

State Kansas Code KS County Shawnee Code 177 Zip code 66607

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 at the following level(s) of significance:

national statewide local Applicable National Register Criteria: A B C D

Patrick Zollner

8-15-16

Signature of certifying official/Title Patrick Zollner, Deputy SHPO

Date

Kansas State Historical Society
State or Federal agency/bureau or Tribal Government

In my opinion, the property meets does not meet the National Register criteria.

Signature of commenting official

Date

Title _____ State or Federal agency/bureau or Tribal Government

4. National Park Service Certification

I hereby certify that this property is:

entered in the National Register determined eligible for the National Register

determined not eligible for the National Register removed from the National Register

other (explain:)

Alexis Abernathy

10.10.16

Signature of the Keeper

Date of Action

Santa Fe Hospital
Name of Property

Topeka, Shawnee County
County and State

5. Classification

Ownership of Property
(Check as many boxes as apply.)

Category of Property
(Check only **one** box.)

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

<input checked="" type="checkbox"/>	private
<input type="checkbox"/>	public - Local
<input type="checkbox"/>	public - State
<input type="checkbox"/>	public - Federal

<input checked="" type="checkbox"/>	building(s)
<input type="checkbox"/>	district
<input type="checkbox"/>	site
<input type="checkbox"/>	structure
<input type="checkbox"/>	object

<u>Contributing</u>	<u>Noncontributing</u>	
<u>1</u>		buildings
		sites
		structures
		objects
<u>1</u>	<u>0</u>	Total

Number of contributing resources previously listed in the National Register

6. Function or Use

Historic Functions
(Enter categories from instructions.)

HEALTHCARE: Hospital

Current Functions
(Enter categories from instructions.)

DOMESTIC: Multiple Dwelling

7. Description

Architectural Classification
(Enter categories from instructions.)

MODERN MOVEMENT: Modern

Materials
(Enter categories from instructions.)

foundation: Concrete
walls: Brick

roof: Synthetic
other: EIFS

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Narrative Description

Summary

The Santa Fe Hospital in Topeka, Kansas constructed in 1930, was built to serve the medical needs of Santa Fe employees. The new hospital was designed to replace the original 1896 hospital which was located at the corner of 6th and Jefferson on the same site but the nineteenth-century building was not demolished until twenty years later as part of a major hospital expansion in 1950. The 1930 hospital is a five-story Modern building that evolved over a period of fifty years with additions in every decade; the last addition built in the late 1970s. The Topeka facility was the largest of Santa Fe's hospitals; the frequently-expanded building reflects the demand for larger and better care caused by rapid medical advancements and the consolidation and closing of other Santa Fe hospitals.

The 1930 hospital is fireproof construction with a brick facade that originally featured ornate stone detailing. It faced north with a two-story entry bay fronting 6th Street. The first major expansion which more than doubled the size of the hospital began in the late 1940s and involved three primary components: 1) Construction of a five-story west wing that would serve as a new outpatient center with an entrance off of Madison Street; 2) Construction of a two-story service wing that included a new kitchen, cafeteria and mechanical plant off the south side of the building; and 3) Demolition of the 1896 hospital building followed by construction of a small five-story east wing. The facade of the 1930 hospital was "modernized" as part of this mid-century expansion. The ornate stone panels detailing the front/north and west facades were replaced by blond brick. The 1960s brought construction of a long-term care facility – a two-story, L-shaped east wing at the northeast corner of the hospital site. The final additions occurred in the 1970s as two separate projects. The first was a new diagnostic and treatment center built as an addition off the south and east sides of the west wing. The second project included three major components: 1) Another addition at the south end of the west wing to serve as the new emergency entrance; 2) Construction of two additional patient floors on the east wing; and 3) Replacement of the 1950 mechanical area with a new energy center at the rear/south courtyard. The 1950s, '60s, and '70s additions all incorporated tan brick facades, each discernible on the exterior. The 1950s and 1960s wings in particular reflect the Modern Movement in architecture; the 1950s incorporating vertical pilasters that created a rhythm on the facade that was similar to the original 1930s building while the 1960s east wing incorporated horizontal banding, broken by vertical bays which provided articulation of the sprawling addition. The 1970s additions add to the complex massing of the hospital but are simple rectangular blocks that do not significantly alter the form of the building from public views or significantly alter its prominent mid-century style. The hospital complex reflects the modern movement in architecture, the original 1930 building having been "modernized" as part of the 1950 expansion. The later alterations included replacement windows and modifications of some openings including closure of the north entrance. The existing complex represents the prominence of Santa Fe's largest hospital, continually expanding to accommodate medical advances and the needs of the company's employees.

Elaboration

Site

The hospital site, like the building, reflects a continuum beginning in 1896 with construction of the first hospital on this site at the southwest corner of 6th and Jefferson (northeast corner of the current block). The new hospital was constructed in 1930 adjacent on the west and the old building was eventually razed. Following numerous expansions, the site now encompasses more than a city block generally bordered by 6th Street on the north and spanning south of the vacated 7th Street on the south. Jefferson is a one-way street south, bordering the site on the east and Madison is a one-way street north bordering the site on the west. A paved parking lot is located on the south half of the site, south of the hospital building. The 1950 Sanborn Map (Figure 2) illustrates that numerous single-family dwellings remained in place on the south half of the block at that time. The homes were acquired by the hospital in the early 1960s and razed for construction of a large parking lot in 1970.

The site was further altered in the mid-1980s with construction of an office building to house physician offices (built by the Hospital Association). Additionally, the City of Topeka vacated 7th Street between Jefferson and Madison to allow more efficient parking on the hospital property.¹ Following closure of the hospital, the office building was sold to the City of Topeka, became the Cyrus K. Holliday Office Building and remains in the function today (not included in the hospital nomination).

¹ The hospital already had parking lots on the north and south sides of 7th Street at the time.

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The Santa Fe Hospital Building, addressed at 600 SE Madison in Topeka, Kansas, is composed of multiple building blocks/additions that form an L-shaped footprint around the perimeter of the north half of the block bordered by 6th, Jefferson, and Madison Streets. Although a short distance from downtown Topeka, the Interstate-70 loop around downtown is located immediately west of Madison Street and provides an imposing visual and physical barrier between downtown and the hospital site. Sixth Street is a busy four-lane route that connects downtown Topeka on the west, with east Topeka and the Oakland neighborhood in northeast Topeka via Branner Expressway.

The hospital site is accessed from the south parking lot or from Madison Street on the west. The west entrance serves as the main building entrance with a shallow circular drive off Madison. Limited angled parking is available on Madison and Jefferson Streets around the hospital site. The former hospital emergency entrance on the south end of building is extant but has not been used since closure of the hospital in 1989. The building occupies approximately half of the site; the balance serves as parking with a small landscaped courtyard between the rear service wing of the hospital and the adjacent office building.

Concrete sidewalks circle the perimeter of the block with a small grass median between the sidewalk and street curb. A shallow grass lawn features mature deciduous trees on the north, east and west sides around the building.

SANTA FE HOSPITAL
Diagram of
Hospital Expansions
B.Spencer 2-20-2016

KEY

- Location of 1896 hospital (razed 1950)
- 1930 "New" Hospital
- 1949-1952 Expansion
- 1964 2-Story East Wing
- 1973 Expansion
- 1978-82 Expansion
- 1984 Physician's Office Bldg bit by Hosp. Assn. now City Office Building
- (2) # of floors

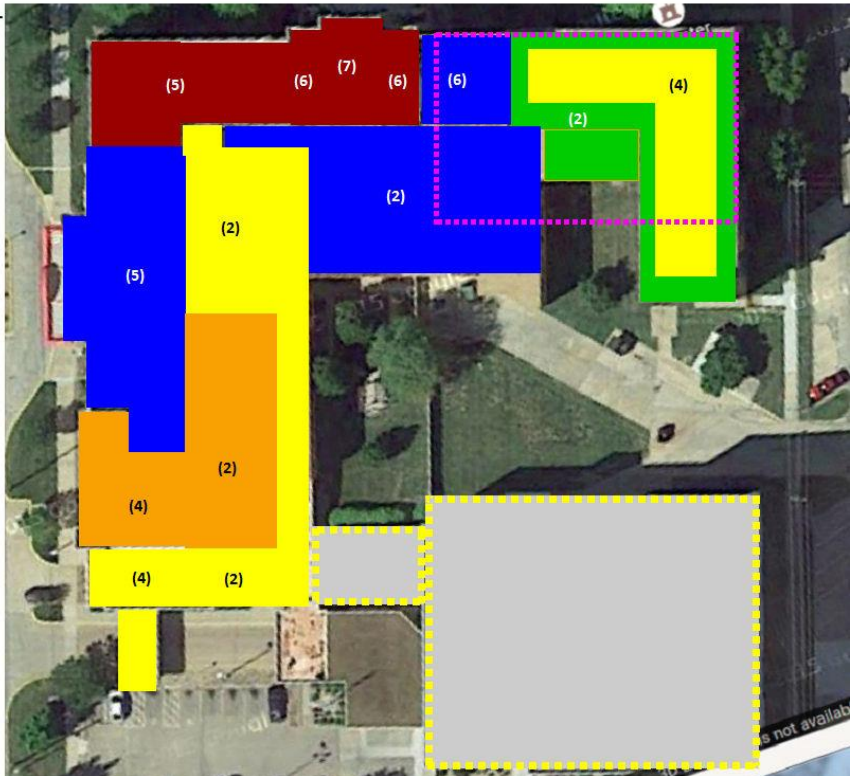


Figure 1 – Diagram of Building Additions

Exterior

The original (1896) hospital was located at the northeast corner of the current site, ultimately replaced by the existing east wing. The "new" hospital (existing building), was constructed in 1930 west of the old hospital facing 6th Street. In the next four decades, multi-story additions were built around the north, east and west perimeter of the north half of the city block. The old 1896 hospital was razed as part of the 1950 expansion. With the addition of the west wing in 1950, a new entrance was created off Madison accessing the new outpatient clinic. This west entrance serves as the main building entrance today. The west wing was expanded on two occasions in the 1970s extending the 1950 wing to the south and east. A two-story addition was built in 1950 off the rear of the 1930 hospital and a two-story addition was built as a new east wing in 1964 (expanded to four-stories in 1979). The two final expansions occurred in the 1970s with additions of two floors on the east wing and further expansion of the west wing.

The existing hospital complex includes the 1930 hospital and the multiple additions in the 1950, 1960s, and 1970s (See Figure 1). The 1930 hospital is a structural clay tile building with brick veneer ranging from five to seven stories with a flat roof and parapet. The 1950 additions are concrete construction with brick veneer and flat roofs with parapets. The west and east wings are five and six stories respectively; the south service wing is two stories. The 1964 east wing is steel construction with brick veneer and a flat roof, expanded to four stories in 1979. The 1974 and 1979 additions at the south end of the west wing are four stories, steel construction with brick veneer, with a flat roof. The 1970 projects also included two-story rear additions.

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The original building and subsequent additions all incorporate tan brick facades with varying detailing. The original 1930 building featured ornate stone detailing, replaced with blond brick as part of the 1950 expansion. The 1950 additions incorporated contrasting brick panels and vertical pilasters compatible with the style and rhythm of the original 1930 hospital. The 1960s wing utilized contrasting brick detailing and vertical bays but due largely to its two-story height, the style of the wing contrasted with the rest of the building given its horizontal orientation accentuated by horizontal bands of windows. The 1970s additions utilized tan brick facades and concrete banding between floors but there was no real attempt made toward compatibility with the earlier wings. The 1979 project also included replacement windows in the 1930 and 1950 north and west wings. The later additions are simple rectangular forms with subtle contemporary detailing. These expansions did not significantly alter the form of the building as viewed from primary facades and the existing hospital complex retains its Modern style achieved with the 1950 and 1964 expansions.

The hospital complex is best described chronologically by the various expansions.

Original 1930 Building

Although expanded on multiple occasions, the 1930 hospital is extant and clearly distinguishable among the varying sections of the existing hospital complex. The "new" hospital was designed to ultimately replace the 1896 hospital but was built as an addition off the west side of the old hospital. This strategy allowed continual operation of the hospital during construction. The architect's original rendering illustrates a symmetrical composition typical of the Progressive Era with east and west wings flanking a central entry bay (Figure 6). What was constructed in 1930 was the "central" entry wing, the west wing, and a small recessed connector to the 1896 hospital on the east side of the entry wing (Figure 7). The new hospital opened in January 1931, completed at a cost of \$275,000.²

In distinct contrast to the nineteenth century hipped-roof, wood-framed hospital, the new 1930 hospital was touted as a fireproof modern facility. It was built of structural clay tile and concrete with brick veneer that was distinguished by ornate stone detailing around the entrance and along the parapet/roofline. The west wing is a long rectangular form, five-stories in height with a basement. Full-height brick pilasters define eleven bays on the north facade and six bays on the west facade of the west wing. Each bay had a pair of 1/1 double-hung windows with a contrasting variegated brick panel between the windows on each floor. This treatment, combined with the wing's five-story height, gave a vertical emphasis to the 115' long west wing.

The entry wing was comprised of three primary bays; the end bays were six stories flanking a seven-story center bay. A two-story bay projected from the north side of the center wing, serving as the main entrance to the new building. Brick pilasters framed windows in each bay which varied on the center wing. The end bays included sets of four 1/1 windows on each floor with contrasting brick panels between. At the center bay, four pilasters framed three bays; the center bay with two windows was wider than the end bays which had a single window. The ornately carved stone parapet contrasted with the tan brick facades in color and intricacy. The top floor of the center bay was distinguished by arched windows that contrasted with the rectangular window openings on the balance of the facade. The ornate stone cap and arched opening were repeated at the two-story entry bay and the name of the hospital was inscribed above the arched stone surround. A split stairway with an ornate carved railing provided access to the central arched entrance (See Figure 8).

The new hospital, with fifty-four patient rooms containing seventy-two beds, was designed to improve service, provide a larger number of private rooms, and to relieve the crowded conditions.³ On the interior, the 1930 hospital reflected new trends in hospital construction, namely the use of hard surfaces that emerged from the Progressive Era as a sanitary solution to combat tuberculosis. Flooring was reportedly black and white terrazzo, walls were colorful tile, and furniture was steel enameled to look like walnut. Glazed tile remains in place on the top floors of the entry wing.

In addition to hard finishes, much had changed in the design and operation of the hospital since 1896 when large wards were designed to hold 30-40 patient beds and a single restroom served an entire floor. Local newspaper articles described specially-designed features of the new hospital.

Specific areas of the hospital received special acoustical treatment for sound deadening. The modern fireproof construction included interior detailing such as interior fire escapes (stair towers) and a fire hose on each floor. The fifth floor housed two major operating rooms and one minor operating room, each equipped with lighted frames for x-ray reading and lighting with emergency back-up batteries. Suction tubes carried medical waste directly to the basement incinerator. Sterilizing vaults were conveniently located for all equipment and supplies;

² "New Santa Fe Hospital Open for Inspection," *Topeka State Journal*, 23 January 1931.

³ "Add to Hospital," *Topeka State Journal*, 31 August 1929.

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the main sterilizer for bedding and mattresses was located in the basement as were the mechanical and supply rooms. The first floor housed administrative and staff offices, living quarters for the two physicians that were always on duty, a library and staff room, and a special examining room in addition to the x-ray developing room and records storage area. The main entrance was on the north, off 6th Street where the entry lobby served as the main waiting room. Elevators were located off the north lobby and at the west end of the west wing. The second, third, and fourth floors contained patient rooms, each with its own toilet and lavatory, a cloak room and sterilization facilities. The patient floors included a diabetic kitchen; the main kitchen remained on the fourth floor of the old building. The penthouse was specially designed for x-ray storage and housed the elevator equipment.⁴

George Senne of Topeka was the contractor who built the new hospital. The 1930 design by Amarillo architect Guy A. Carlander was typical of many institutional buildings of the Progressive Era reflecting simple, symmetrical rectangular massing with flat roofs and parapets which contrasted with the peaked roofs of their nineteenth-century counterparts. Also typical of the period however, the hospital incorporated applied ornamentation in the form of the carved-stone parapet and detailing at the front entrance. Changes to the exterior of the 1930 hospital occurred with many of the subsequent expansions. The first major expansion after the building's construction was a phased project that spanned from 1949 to 1952. The various components of this project are detailed below but the project included significant changes to the exterior of the 1930 hospital namely removal of the ornate stone parapet and replacement of some windows.⁵ These changes were undoubtedly implemented in an attempt to blend the new 1950 additions with the original building. The stone panels were replaced with a simple blond brick parapet and simplified brick detailing at the front entry (Figure 11).

Today the original 1930 building is intact and generally reflects the 1950 expansion and modifications. Two subsequent alterations occurred in the 1970s during which HVAC upgrades involved installation of through-wall PTAC (Packaged Terminal Air Conditioner) units and replacement windows on the north and west facades and the north entrance was abandoned including removal of the exterior steps at the former front entry. Aside from these alterations, the original 1930 hospital retains its original massing and the articulation of the facade defined by brick pilasters framing the windows in each bay, as well as the contrasting brick panels between windows on each floor.

1950 Expansion

By the fall of 1947, the Hospital Board announced expansion plans that would double the size of the hospital, a project that included razing the 1896 structure.⁶ Kansas City, Missouri architects Archer, Cooper and Robison⁷ were hired to design the expansion which was estimated to cost more than one million dollars. In December 1949, hospital officials announced plans to make Topeka's Santa Fe Railway Hospital one of the finest industrial hospitals in the nation. The expansion was to include three new hospital wings (See Figure 9).

- A five-story, 114' west wing facing Madison, to house a new outpatient department, new x-ray equipment and laboratory, examining rooms, and a dentist office as well as additional patient rooms;
- A two-story service wing measuring 98' x 68' on the south side of the 1930 hospital to include a new kitchen, cafeteria and snack bar, laundry, and new heating plant; and
- An expansion of the surgical department to be housed in a 31 x 43' east wing on 6th Street following demolition of the old hospital (1896) building.⁸

M.M. Watson of Topeka was selected as the general contractor, while Sheahan and Degan, plumbing and heating, and Thatcher Co., electrical contractors also were named. Twenty-four months later construction was completed on the west and south wings and work shifted to the final phase of the \$1.3 million project – demolition of the 1896 hospital and building the new east wing. The surgical pavilion was expanded into the east wing creating a total of five operating rooms; the entire area was air-conditioned and featured humidity control.⁹

Like construction of the 1930 hospital, the 1950 expansion was designed to provide the latest in modern medical care. In addition to expanded services, state-of-the-art features included two-way communication between nurses and patients and a pneumatic tube system that eliminated the need for a messenger service making possible deliveries throughout the hospital in a matter of seconds. Many of the functions that had been housed in the 1896 building were relocated to the

⁴ "Add to Hospital," and "New Santa Fe Hospital Open for Inspection."

⁵ Glass block was installed in the original window openings at the operating rooms/surgical suite on the top floors of the entry wing.

⁶ "New Hospital on Present Site in Santa Fe Plans," *Topeka State Journal*, 11 October 1947.

⁷ Firm was later renamed Cooper, Robison and Carlson.

⁸ "Expand Santa Fe Hospital," *Topeka Daily Capital*, 2 December 1949.

⁹ "Landmark Being Razed," *Topeka Daily Capital*, 30 November 1951.

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new west wing providing space for approximately 100 patients along with diagnostic and specialty departments. An outpatient clinic was located on the first floor of the west wing with a new entrance off Madison where a spacious lobby also served as the waiting room. Other first-floor spaces include examination and treatment rooms, an emergency treatment room, nurses' station, pharmacy, physical therapy department and pathological laboratory, in addition to a registration desk and records room. A new x-ray department was located on the second floor of the new west wing which featured photo timing designed to reduce human error and spot filming that made possible taking films during fluoroscopic examinations.¹⁰

South of the 1930 hospital was the new service wing housing the dietary department where meals were prepared for hospital patients and employees. The kitchen included walk-in refrigerators and freezers, food preparation areas, and a dishwashing and sterilization unit. The hospital used a decentralized form of food service in which electrically-heated food conveyors were used to transport prepared food to the floor kitchens where the food was placed on individual patient trays. In addition to patient meals, the new cafeteria served 5,000-6,000 meals to employees each month.¹¹

The 1950 hospital expansion was constructed with a tan brick exterior to match the 1930 building. Also similar to the original building, the new east and west wings utilized vertical brick pilasters to define each bay with a pair of windows on each floor. Different from the 1930 building, the pilasters were a contrasting dark red brick and included a single window on each floor (later infilled at west wing but remaining at east wing). The east wing is six stories, matching the height of the original central entry bay. It was built off the east side of the 1930 building and connected to the original hospital with a recessed connector bay (See Figure 11).

The west wing is five stories in height and was built off the south side of the west wing, abutting the original hospital (See Figure 10). In historic photographs, the windows in the west wing appear to be paired 2/2 double-hung units with screens (since replaced). Today the east and west wings remain intact; the primary exterior alterations being the replacement of windows and installation of through-wall PTAC units beneath some window openings. A smooth stucco coating was formerly installed on two of the brick pilasters and over the brick walls in the center bays above the entry. A one-story concrete entry bay remains today at the center of the west wing, built in 1950 as the entrance to the new outpatient clinic. The entry bay featured rounded columns, a wide ribbed cornice band framing the entrance and a curved wall of glass block inside the vestibule; these details all remain in place. A shallow hipped canopy has been installed on the west side of the concrete entry bay; this entrance now serves as the main building entrance. At the south end of the west wing, the end bay was setback from the west facade. This recessed bay had unique design features that distinguished it from the rest of the building. Tapered buttresses framed the south side of the bay with a round porthole window over a ground-floor entry on the west facade. Cantilevered roof planes defined the upper floors creating a series of horizontal lines between ribbons of windows that featured glass block at the corners. This bay was obscured by a later four-story addition to the south however; the 1950 end bay is extant and visible on the fifth floor with the glass block window located inside an apartment.

As noted above, the 1950 expansion included major alterations or "modernization" of the exterior of the 1930 hospital. Expansion of the surgical suite into the new east wing also involved installation of glass block at windows in the operating rooms, including the arched window on the fifth floor of the central wing above the north/front entry. The 1949 drawings also indicated installation of a simple stone coping at the parapet cap.¹² A c.1950s postcard (Figure 11) clearly illustrates that the ornate stone detailing on the front facade of the 1930 hospital was replaced by blond brick c.1950 prior to the addition of the two-story east wing in 1964.

Little documentation has been found on the design of the south service bay, built in the 1950 expansion. Early plans illustrate brick exterior walls with ribbons of aluminum windows on each floor. The two-story bay included a new kitchen, cafeteria and laundry and new power plant. The former cafeteria area remains today housing community and recreation rooms with the former exterior brick walls of the 1930 hospital visible on the interior. The 1950 power plant and laundry were replaced by a new energy center in the 1979 expansion. Exterior walls are now contemporary stucco board panels visible only from the rear courtyard area.

¹⁰ "Santa Fe's Prepaid Hospitalization and Medical Care Program Covers 40,000 Employees, Operates Hospitals in Two States," *Topeka Daily Capital*, 23 March 1952.

¹¹ "Solace for Sufferers!" *The Santa Fe Magazine* (December 1953), vol. 47, no. 10, 8-17.

¹² Available 1949 drawings titled "Hospital Building" Topeka, Kansas for the AT&SF Hospital Association by Archer, Cooper, and Robison of Kansas City, Missouri include only three sheets illustrating early proposed elevations; the design and scope was clearly later revised as the drawings illustrate construction of a large east wing, similar to the original west wing. The drawings do not accurately reflect the 1950 east wing as it was constructed and remains today.

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Two additional interior improvement projects occurred in the decade following the 1950s expansion. In 1956 the entire hospital was air-conditioned, a \$100,000 contract awarded to McElroy Refrigeration & Heating Co. of Topeka. In 1960, George Senne of Topeka (who was contractor for the 1950 expansion) was awarded a \$75,000 contract for construction work necessary for the installation of new surgical and x-ray equipment.

1964 Expansion

The east wing, constructed as the final phase of the 1950 expansion, did not resemble the original design which presented a symmetrical composition with two symmetrical wings flanking a raised central entry wing. In 1962, a new wing was planned to be built on the site of the original 1896 hospital off the east side of the 1950 east wing. The Hospital Association announced the construction of a \$500,000 long-term care facility in the fall of 1962.¹³ Designed by Cooper, Robison, and Carlson, the Kansas City architectural firm responsible for the 1950 expansion, construction began in November 1962 with Bowers Construction Co. of Topeka serving as the general contractor.

The new wing was a two-story L-shaped configuration at the northeast corner of the site. It has a tan brick facade closely matching the 1950 east wing and spans five bays by six bays along 6th and Jefferson Streets. Vertical pilasters that rose above the flat roofline defined the bays which varied in width and composition. The style of the 1964 addition differed significantly from the 1930 and 1950 portions of the building. First and foremost, the wing was constructed as a two-story addition (two stories were added in the 1979 expansion) and was dwarfed by the adjacent six-story east wing and original hospital. The two-story height and its sprawling L-shaped configuration provided a strong horizontal orientation, reinforced by horizontal bands of windows with contrasting dark brick between the floors. The lines created by the horizontal bands of brick and windows were broken by vertical bays, detailing that is common among 1960s modern architecture. The new wing also featured "safety windows," fixed-light aluminum windows with pivoting hopper panels at the lower sash. The windows were designed so that no one could fall or jump from the window and had the added bonus that the pivoting sashes that could be washed from the inside.¹⁴ See Figures 12-13. Available drawings for the 1962 project illustrate that the scope of the project included remodeling of the kitchen and snack bar area (constructed as the south wing in 1950) which connected to the new east wing on the south.¹⁵

The new long-term care wing opened in February 1964 designed to accommodate 70 patients in double rooms that featured built-in wardrobes and bathroom facilities. The addition was air-conditioned and had piped-in oxygen. The wing provided visitor waiting rooms, nurses' stations, and treatment rooms including x-ray, cobalt (radiation) and physical therapy, as well as special features to accommodate patients in wheelchairs.¹⁶

The 1964 east wing is extant and clearly visible today. Two floors were added to the L-shaped east wing in the 1979 expansion. The additional stories are discernible by the contrast in brick color but the addition closely matches the original 1964 construction. One prominent distinction is that the upper floors incorporated single and paired windows in contrast to the band of multiple windows on the lower floors. The windows on the upper floors are aluminum-framed two-light sashes with operable hopper units, similar to the 1964 windows on the lower floors however; the 1979 units are insulated glass where the 1964 units are single pane units. The east wing was not included in the 2002 apartment conversion and is the only area of the building that retains a high degree of interior integrity reflecting its original design and function as a hospital. Two stair towers served the east wing, each consisting of metal stairs with vinyl tile flooring and aluminum railings. The stairs remain intact with original finishes. The wide corridors were equipped with nurses' stations on each floor and patient rooms are intact with built-in wardrobes and private bathrooms and wide maple slab doors. Original finishes included vinyl tile flooring and acoustical tile ceilings in corridors and patient rooms with ceramic floor tile and wainscoting in the bathrooms and the first-floor kitchen. All of these finishes remain in place today, the wing clearly reflecting its original design and construction.

The 1950s and 1960s expansions resulted in significant physical changes in the hospital site with demolition of the 1896 hospital at the northeast corner of the block and construction of new east, west, and south wings. The hospital expansion as well as the post-war rise in popularity of the automobile, created an increased demand for parking at the hospital. The Hospital Association was able to purchase all but five of the residential properties in the block located south of the hospital building (seen on 1950 Sanborn Map, Figure 2). A 1970 drawing by Cooper, Robison, and Carlson illustrates construction/expansion of a new large parking lot south of the hospital.

¹³ "Santa Fe's Hospital Due Expansion," *Topeka State Journal*, 15 October 1962.

¹⁴ "Santa Fe Hospital Long-Term Care Addition near Completion," *Topeka State Journal*, 27 December 1963.

¹⁵ Cooper, Robison and Carlson, Architects and Engineers, "Additions & Alterations to ATSF Hospital" Architectural Drawings, June 1962.

¹⁶ "Santa Fe Hospital Long-Term Care Addition near Completion."

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1970s Additions

The late 1960s and early 1970s brought significant organizational changes to the hospital but by the mid-1970s, the practice of regular building expansion and modernization resumed. The first addition was initiated in 1972 – a diagnostic and treatment center located in the west wing. The expansion housed new outpatient facilities including an emergency room, x-ray area, offices and a surgical suite at the south and east sides of the west wing. Additionally the laboratory, located at the northwest corner of the original 1930 building, was remodeled. The work included infill and alteration of ground-floor window openings in this area.

The 1972 addition incorporated a tan brick facade similar to the adjacent west wing but was distinctly different in overall style. The rectangular bay, built on the south end of the 1950 west wing, was four stories in height compared to the five-story original wing. Limited documentation has been found on this addition but it was clearly built around the recessed end bay at the south end of the west wing; the former recessed bay is extant at the fifth floor only. The west facade of the addition is asymmetrical with punched window openings and features a concrete belt course between floors. A stair tower at the south end of the addition is distinguished by a vertical band of spandrel glass. The addition is clearly distinguished from the 1950 wing by its style and fenestration. It was designed by Cooper, Carlson, Duy, & Ritchie, Inc. (formerly Cooper, Robison and Cooper) and completed in 1974.

The final hospital expansion was a multi-phased project announced in 1977. The Topeka firm of Ekdahl, Davis, Depew and Persson were named the architects (See Figure 14 for architect's rendering). The project was delayed by more than a year when the Department of Health, Education and Welfare questioned the need for the expansion given the number of hospital beds serving Topeka.¹⁷ The conflict was resolved and a construction contract awarded to B.B. Andersen Construction Co. in December the following year. The \$6.4 million project included several components:

- The addition of two floors on the east wing (built in 1964) to provide additional patient rooms;
- Another expansion of the west wing to include a new emergency entrance with a drive off of Madison Street. The addition on the south and east sides of the west wing housed a new lobby, auxiliary gift shop, expanded admissions and outpatient services and a new public corridor leading from the south entry to the elevators and patient rooms in the existing building.
- A new energy center located in the rear service area to provide new central heating and air-conditioning for entire facility; and
- General remodeling of existing patient floors in the 1930 hospital building and 1950 west wing which included installation of new windows on the north and west facades as well as a new elevator. A new critical care unit and a cardiac telemetry unit were provided on the fifth floor. New waiting rooms were provided on each floor and the nurses' stations were expanded. The project involved general "modernization" of the old building. "Floors and walls in the older sections were repaired and freshened with colorful, easy-to-clean surfaces."¹⁸

Ground was broken in January 1979 and patients moved into the new rooms on the fourth floor of the east wing in February 1980. The entire project was completed in 1982.

The 1979 west addition is four stories in height and constructed of tan brick. The upper floors are setback from the adjacent west facade and have no windows on the west or south facades; the south facade features horizontal concrete bands on the upper facade. The west facade has a wide band of decorative concrete block across the second and third floors. The first-floor included a recessed entry at the north end of the west facade and a band of four fixed-sash windows adjacent on the south end. A one-story flat metal canopy provided a covered drive at the new emergency entrance on the south facade. A c.1980 photograph of the new emergency entrance illustrates a concrete screen (matching the decorative concrete block on the upper west facade) which has been removed (See Figure 15). The new power plant was a two-story rear brick addition with few openings. The south and east facades of the two-story rear bay now have stucco board panels, installed in 2002 and the exposed concrete on the south and west wings has been painted.

Although not completed as part of the 1979 expansion, it was first announced in 1979 that hospital administrators were proceeding with plans for construction of an office building at the corner of 7th and Jefferson.¹⁹ The project arose again in 1983 and construction ultimately began in 1984. The building, now known as the Cyrus K. Holliday Office Building (City of Topeka) and not included in this nomination, was designed by Ekdahl, Davis, Depew and Persson Architects of Topeka,

¹⁷ HEW had the authority to review the hospital's loan guarantee due to an agreement the hospital signed with the Federal Housing Authority, an agency of the Department of Housing and Urban Development. "Hospital Contract Let," *Topeka Capital*, 19 December 1978.

¹⁸ "Memorial Hospital ready to show new look," *Topeka Capital Journal*, 14 January 1981, 34.

¹⁹ "Neighborhood Looks Up," *Six Hundred Madison Memorial Hospital Newsletter*, (February 1979), vol. 2, no. 1, 4.

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the same architects who designed the final hospital expansion.²⁰ In addition to the new building, the hospital site was expanded with additional parking during this same period. A parking lot was acquired by the hospital at the southeast corner of 7th and Jefferson. The hospital already had parking on the north and south sides of 7th Street and asked the City of Topeka to vacate 7th Street between Madison and Jefferson to allow more efficient use of the area. These changes which all took place by the mid-1980s generally brought the site to its existing configuration (except the office building was later sold to the City of Topeka and separated from the hospital property).²¹

1980s - Present

The hospital continued to expand or modify its services in the 1980s but these changes did not result in major physical alterations. The hospital added inpatient and outpatient psychiatric care and an ophthalmic lab. Despite extensive efforts to reposition themselves as a public hospital and provider of comprehensive outpatient services, Memorial Hospital filed bankruptcy and finally closed its doors in 1989 after serving the medical needs of employees of the Santa Fe Railroad for nearly 100 years. The building was converted to low-income housing in 2002 and renamed Santa Fe Place Apartments.

The contemporary apartment conversion resulted in few exterior modifications already mentioned above. The project generally involved converting patient and treatment rooms in the four- and five-story north and west wings into one- and two-bedroom low-income apartments. Circulation patterns and corridors were retained but some of the multiple stairways and elevators were abandoned. As noted above, the north hospital entrance was abandoned when the new emergency entrance was constructed in 1979. Apartments are located in the original second-floor entrance bay in the north wing. The primary building entrance today is located in the center of the west wing, constructed to serve the outpatient center in 1950. This entry retains its original design with a one-story concrete bay and glass block at the entry vestibule although the doors have been replaced and a flat mansard canopy was installed in front of the concrete bay. The emergency entrance at the south end of the 1979 addition and the entire emergency department on the first floor of the west wing (south and east sides of the wing) are extant but were not included in the apartment conversion. This area has been partitioned off pending viable reuse. The exposed finishes in these apartment areas (north and west wings) are contemporary gypsum board, carpet, and suspended acoustical tile ceilings. With the exception of the corridor configuration and multiple original stairways, few historic features are exposed.

The existing stairways reflect original circulation patterns and the historic finishes of the varying construction periods including terrazzo and marble in the original 1930 hospital and metal stairs with aluminum railings in the 1950 and 1964 additions. The top floors in the central entry wing of the 1930 hospital and in the 1950 east wing were not included in the apartment conversion. These floors retain historic finishes including original tile from the 1930 and 1950 construction as well as plaster walls and ceilings. Likewise, the east wing, constructed in 1964 and expanded in 1979, was not included in the apartment conversion and retains a high degree of historic and architectural integrity. The original hospital configuration, original interior finishes and built-in features remain in place.

The exterior of the building retains a moderate degree of historic integrity generally reflecting the 1950s-1960s hospital expansions that included modernization of the 1930 hospital. The 1970s additions did not significantly alter the form of the hospital as viewed from primary facades and the existing hospital complex retains its Modern style achieved with the 1950 and 1964 expansions. The building reflects its long-term function as a hospital representing Santa Fe Railroad's commitment to the health and wellbeing of its employees.

²⁰ "Trustees OK Building Plans," *Topeka Capital Journal*, 25 August 1984, 2.

²¹ "Hospital to add space for parking," *Topeka Capital Journal*, 10 May 1981, 2.

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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 old or achieving significance within the past 50 years.

Areas of Significance

Healthcare/Medicine

Period of Significance

1930-1966

Significant Dates

1930, 1950, 1964, 1966

Significant Person

(Complete only if Criterion B is marked above.)

Cultural Affiliation

N/A

Architect/Builder

Guy A. Carlander, architect 1930

Cooper, Robison, and Carlson, architects

1950, 1964 & 1974 expansions

Period of Significance (justification)

The period of significance begins with the building's construction in 1930 and ends with the advent of Medicare in 1966 which resulted in "company hospitals" opening to the public in order to receive/utilize patients' Medicare benefits. Opening of the hospital to the public never proved successful despite multiple modernization and reorganization attempts. Renamed Memorial Hospital in 1972, the hospital closed its doors in 1989.

Criteria Considerations (justification)

N/A

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Narrative Statement of Significance

Summary

The Santa Fe Hospital at 600 SE Madison Street in Topeka, Shawnee County, Kansas has statewide significance under National Register Criterion A in the area of Healthcare. The nominated property – the “new” hospital building - occupies the site where Topeka’s first Santa Fe Hospital was built in 1896 and stood until 1952 when it was razed for expansion of the 1930 building. The Santa Fe Hospital Association, founded in 1884 built the existing hospital in 1930 to replace the outdated and overcrowded building. The Association owned and operated the hospital(s) representing one of Santa Fe’s industry-leading employee benefits.²² Topeka’s Santa Fe Hospital exemplifies the commitment Santa Fe made to its employees to provide quality medical care, a fact borne out by its almost constant efforts at modernization. The 1930 hospital was expanded in the 1950s, 1960s, and 1970s not only accommodating medical advancements but broadening its services to include outpatient and long-term care for the company’s employees. The hospital complex reflects its period of construction and expansion and continues to convey associations with its original function.

The largest of the railroad’s hospitals, the Topeka hospital not only provided patient care but also served as home to Santa Fe’s Hospital Association, the railroad’s chief surgeon and the medical dispensary. The hospital signifies Santa Fe’s commitment to the capital city and is a physical reflection of the shared history of Topeka and Santa Fe as the railroad and city grew. The building’s period of significance spans from the building’s construction in 1930 to 1966, reflecting the date of federal legislation creating Medicare and the hospital opening its doors to the public. Renamed Memorial Hospital in 1972 the hospital closed in 1989 after filing for bankruptcy; the last of Santa Fe’s seven hospitals to do so.

Elaboration

Railroad Healthcare

The second industrial age (c.1830-1870) heralded the expansion of railroads across the United States while at the same time increasing the number of traumatic injuries requiring medical care and surgery. By the 1880s medical care remained rudimentary at best in much of the United States; especially as rail expanded into rural areas and small towns in the West.²³ While hospitals had existed on the East Coast for more than a century, in the vast western states and territories many towns had no doctor or hospital.²⁴ One historian noted that a person traveling between St. Louis and El Paso could go over 1300 miles without passing a single hospital.²⁵ The average railroad worker was single, ate in restaurants and slept where available; when he became sick or injured there was no place for him to turn. Even in Emporia, KS, nearly 25 years old when the railroad reached it, the sick were cared for in hotels.²⁶

In virtually every industry an injured or sick worker had to pay for his own medical care. As Dr. Robert Gillespie explained, “Railroads developed into an exception to this rule, in part due to the inordinate number of injuries sustained by employees, passengers and bystanders. In 1900 the Interstate Commerce Commission reported that 1 of every 28 railroad employees was injured on the job, and 1 in 399 was killed.”²⁷ Initially the Atchison Topeka and Santa Fe (AT&SF) Railroad formed a medical department which contracted with doctors and surgeons along rail lines. It was quickly determined that more was needed; building hospitals was deemed necessary to maintain a steady workforce and ensure profitability.

On April 7, 1884 the Atchison Railroad Employees’ Association was formed as a benevolent and charitable corporation distinct from the railroad. The association began with \$55,000 capital from AT&SF. Four hospital buildings were authorized for immediate construction with AT&SF Railroad providing the land as well as manpower and materials for

²² In 1966 when the hospital opened to the public it was no longer directly owned by the AT&SF Hospital Association. The Association contracted with the hospital to provide medical & surgical services to its members.

²³ William H. Ducker, *Men of the Steel Rails*, (Lincoln, NE: University of Nebraska Press, 1983) 45.

²⁴ The first American hospitals were Pennsylvania Hospital in Philadelphia (1756), New York Hospital (1791) and Massachusetts General Hospital in Boston (1821); Guenter B. Risse, *Mending Bodies, Saving Souls: A History of Hospitals*, (New York: Oxford University Press, 1999), 341-408.

²⁵ Robert S. Gillespie, MD, MPH, *The Train Doctors: Detailed History of Railway Surgeons*, 2006, access on 20 February 2016 at <http://railwaysurgery.org/HistoryLong.htm>.

²⁶ Ducker, 45. Author cites *Emporia News* and *Ration Guard* (an industry newspaper) as his sources.

²⁷ Ira Rutkow, “Railway surgery: traumatology and managed health care in 19th-century United States.” *Arch Surg* (1993) vol. 128 no. 4, 458-63 as quoted by Robert S. Gillespie, MD, MPH, *The Train Doctors: Detailed History of Railway Surgeons*, 2006, access on 20 February 2016 at <http://railwaysurgery.org/HistoryLong.htm>.

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construction. The first hospital opened in Las Vegas, NM on October 11, 1884 followed by a second in La Junta, CO in November of the same year. Hospitals in Ottawa, KS and Fort Madison, IA followed in 1888.

By the late 1880s Topeka was the center of the Santa Fe empire, due in large part to the efforts of Cyrus K. Holliday. Not only was Topeka a crossroads for the major lines, it was the location of Santa Fe's principal offices and shops. It was therefore, the logical location for the largest hospital and headquarters of the Hospital Association. Santa Fe employees in Kansas complained about the distance required to travel for healthcare and in 1892, 2,300 Santa Fe employees petitioned for a facility to be built in Topeka.²⁸

In 1896 Santa Fe broke ground on the first Topeka hospital located at 6th and Jefferson Street, the northeast corner of the current site. The railroad donated the land and gave \$30,000 toward hospital construction.²⁹ The hospital opened its doors on June 22, 1896 providing 100 beds for Santa Fe Railroad employees. In 1897 the hospital treated 341 patients; a number that climbed to 461 the following year.³⁰ In addition to the grand size of the hospital it was home to the largest staff of consultants and specialists, the primary dispensary staffed with trained pharmacists, and the purchasing agent with a distribution center for the entire company's pharmaceutical needs.³¹ The Chief Surgeon and his assistants had offices in the new hospital; as did the Hospital Association and the mechanical staff that maintained all the Association properties.³² The existing hospital was built in 1930; throughout its history, the Topeka hospital would serve as Santa Fe's largest hospital and center of the company's medical services.

Santa Fe – A Leader in Employee Benefits

Provision of hospital services had not been the norm in the late 1800s. Santa Fe set an industry standard for quality and a national standard for employment benefits. As noted in the *Parsons Katy Hospital National Register Nomination*:

By pooling their resources through hospital associations, railroad employees reaped health benefits in times before employer-subsidized health insurance and consistent institutionalized hospital care. Railroad companies were dedicated to assisting with such programs which benefited employees who risked death and injury carrying out work along the line. Such health benefits became standard for railroads to compete for quality laborers.³³

The AT&SF Employee Association, established in 1884, was managed by a five-member board of trustees who included the general manager, general solicitor and chief surgeon of the railway. Two additional members were appointed by the railway president, chosen from the mechanical and transportation departments. The Association's primary role was operation of the company's hospitals. Their rules stated that subscribers to the program were eligible to receive treatment as long as they were employees of the railway. Treatment could be performed by any surgeon employed by the association, but employees having "protracted injury or sickness" must go to one of the association hospitals. Four months of hospitalization was the maximum coverage. Ex-employees and family members were excluded from coverage. The initial rates were based upon employee monthly salary: \$0.25 (\$30 or less), \$0.35 (\$60 - \$80), \$0.50 (\$80 - \$100), \$1.00 (Above \$100). The rates remained stable into the 1930s.³⁴

The subscription paid for all types of medical care: hospital, doctor and medicine. Transportation to and from the hospital was free to patients on the railroad; special trains were even dispatched for transport in grievous cases. Free transport was also provided for doctors who worked in or consulted for the company hospitals.³⁵

The name of the hospital/employees association was changed to the Santa Fe Railway Employees Association³⁶ on July 17, 1887 and the scope of the work enlarged to include Texas, California and Arizona. In the same year, Dr. John Kaster became the company's chief surgeon, a job he held for 40 years. When he died in 1938, he had worked for Santa Fe for

²⁸ Ducker, 46.

²⁹ "Fifty Years of Santa Fe History," *The Santa Fe Magazine*, (January 1923), vol. 17, no. 2, 33.

³⁰ Stannie Anderson, "The Third Hospital," *Topeka Capital Journal*, 6 March 1977.

³¹ "More about Our Hospital Association," *Santa Fe Magazine*, (May 1934), vol. 28, no. 6, 8.

³² *Ibid.*, 8.

³³ Christy Davis, *Parsons Katy Hospital, Labette County, KS National Register Nomination*, 2007, 8.

³⁴ These same rates are quoted in 1932 and 1934 sources respectively with the only change to the top tier from \$1 to \$1.25.

The *Amarillo Globe-Times*, 14 March 1932 and "More about Our Hospital Association."

³⁵ "The Third Hospital."

³⁶ The name of the hospital/employee organization changed several times from Atchison Employees Assn (1884) to Santa Fe Railroad Employees Assn. (1887) to Santa Fe Hospital Assn. (1891) and later the Employee Benefits Assn. (1966). In 1966, adding naming confusion, the Santa Fe Hospital Assn. separated from what would be named Memorial Hospital. The AT&SF Hospital Assn. owned the land and the building, but spun off the management and operation of the hospital when the facility was opened to the public. For clarity, the name "Hospital Association" will be used in the text.

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more than 50 years.³⁷ Kaster, who worked out of Topeka, exerted significant influence on the health services provided by the Santa Fe hospitals. The two areas that interested him the most were the use of x-ray technology and the prevention of disease through proper sanitation. Under Kaster's tutelage the Association developed a reputation for excellence in medical care and expanded the Association's facilities including the new hospital in Topeka (1930).³⁸ In addition to new hospitals Kaster increased the quality and number of consulting doctors and dentists along the line and expanded their offerings to include eye specialists, laboratories and x-ray facilities. Kaster's influence could be felt for years after his passing due to his determined commitment to technological advancement and maintaining proper sanitation not only at the medical facilities but also on trains and other workplaces. According to a 1934 *Santa Fe Magazine* article Kaster had been "steadily increasing the efficiency of our medical department by adding the new things that the medical profession has produced to combat disease."³⁹

As the railroad expanded to vast new areas it was clear that the Hospital Association would have difficulty overseeing the day to day operations of several hospitals that were geographically disparate. Thus, on October 17, 1891 the trustees divided the jurisdiction to three regional organizations. The AT&SF Hospital Association (hereafter called the Hospital Association) would be responsible for Kansas, Iowa and Missouri. Two new organizations were formed: the Gulf, Colorado and Santa Fe Hospital Association would cover Texas, Colorado and New Mexico, and the Southern California Hospital Association would be responsible for the California and western territories. The three charitable corporations continued to be funded by voluntary AT&SF employee subscriptions.

By 1896, thirteen railroad companies operated 25 hospitals nationally, treating over 165,000 patients each year.⁴⁰ Several of the Santa Fe hospitals had some degree of specialization. The Las Vegas hospital focused on treating tuberculosis while La Junta was known for its dry, healthful climate. Topeka's original hospital (1896) had a small refrigerated ward on the second floor for those suffering from typhoid.

In addition to medical care, Santa Fe offered other varied benefits to its workers. In its early years Santa Fe promoted YMCA organizations along its routes to provide the men a clean place for recreation away from saloons. By late 1898 Santa Fe chose to provide its own facilities by expanding its "reading rooms" situated along the line that were supplied with books, baths and recreation facilities from bowling alleys and billiard rooms to gyms and swimming pools. By 1909 the company had invested \$250,000 on the facilities and was spending \$75,000 a year to operate them.⁴¹ By 1923 the investment had risen to \$450,000.⁴²

Santa Fe established a monthly publication, *The Santa Fe Magazine*, to share information about the company with its employees. At its peak circulation the magazine reached 80,000 copies. In 1906 a company-funded pension plan was established that offered retirement benefits to any employee aged 65 who had at least 15 years of continuous service or in the case of on-the-job disability.⁴³ In 1916 a death benefit was added for Santa Fe employees who had more than two years of continuous service.⁴⁴

Throughout, Santa Fe's healthcare and hospital system was foremost among its employee benefits.⁴⁵ In 1896 the Santa Fe hospital system received high praise throughout the rail industry. The *Railroad Trainsmen's Journal* stated that Santa Fe was "everywhere acknowledged as the best hospital system of any railroad in the United States."⁴⁶ *The Santa Fe Magazine* explained that no man could complain about the fact that a single hospital stay for an operation could cost him \$480; yet a Santa Fe employee paying \$1 per month would require 40 years of service to the railroad to spend an equal sum.⁴⁷

³⁷ "More about Our Hospital Association," 7.

³⁸ Jack W. Traylor, "Chief Surgeon John P. Kaster and the Santa Fe Hospital Association," Shawnee County Historical Society Bulletin, no. 57, (Topeka, KS: Shawnee County Historical Society, November 1980) 87.

³⁹ "More about Our Hospital Association," 9.

⁴⁰ *The Railway Surgeon* 1896; 3(2): 46 as quoted by Robert S. Gillespie, MD, MPH, *The Train Doctors: Detailed History of Railway Surgeons*, 2006, accessed on 20 February 2016 at <http://railwaysurgery.org/HistoryLong.htm>.

⁴¹ Keith L. Bryant Jr., *History of the Atchison, Topeka and Santa Fe Railway* (New York: Macmillan Publishing, 1974) 237.

⁴² "Fifty Years of Santa Fe History," 39.

⁴³ Bryant, 236.

⁴⁴ "Fifty Years of Santa Fe History," 40.

⁴⁵ Medical care was limited to employees until 1966 when it was extended to retirees and spouses.

⁴⁶ Ducker, 47.

⁴⁷ "More about Our Hospital Association," 11.

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Topeka, Santa Fe and the Building of a Modern Medical Institution

As detailed in the *AT&SF Motive Power Building National Register Nomination (Topeka, KS)*, Cyrus K. Holliday played a significant role in the establishment of Topeka and the Santa Fe Railroad.⁴⁸ One of the initial founders of the capital city, Holliday would go on to represent the town in the territorial and state legislature as well as being voted mayor of Topeka three times. Holliday wrote, introduced and promoted passage of an 1859 bill to incorporate the Atchison and Topeka Railroad. He lobbied Congress for the provision of federal land on which to build the railway then turned to the people to rally their support. In October 1868, nearly ten years after the granting of the first charter, the work building the road was begun.⁴⁹ Holliday continued to support Topeka and the railroad. He got the city to issue \$100,000 in bonds for AT&SF in return for the railroad agreeing to keep its general offices and shops in Topeka in perpetuity. This action is credited with Santa Fe's long-term relationship with the capital city, a commitment still strong today. The first locomotive of the Santa Fe Railroad was named the "Cyrus K. Holliday" after the man who had envisioned the greatness of Topeka and the railroad that made it so.

The rail business and Santa Fe specifically, was booming in the late nineteenth century and extremely competitive. By the end of 1882 Santa Fe Rail Company lines comprised 2,620 miles in Missouri, Kansas, Colorado, New Mexico, Texas, Arizona and Sonora, Mexico. Santa Fe had 97 locomotives with gross annual earnings of \$14,770,000, an increase of \$2,200,000 over the previous year.⁵⁰ While Santa Fe bought up several smaller rail companies, much of the expansion was virgin line requiring great effort to build not only the tracks but also the associated buildings. Through at least the 1920s Santa Fe used an in-house group of architects to design the company's depots and other railway facilities.⁵¹ With the vast technological and medical advancements Santa Fe could not rely solely on their in-house team to address the requirements of a modern hospital. Instead the company reached out to architects with experience in hospital design. Like their depots and other rail facilities, designers combined modern stylistic trends with local and regional motifs.

Guy Anton Carlander was one such example of a Santa Fe employee who later made a name for himself with his architectural designs across the south. By the time he designed Topeka's new Santa Fe Hospital in 1930, Guy Carlander had designed three other medical facilities for the railroad and had his own architectural firm. Born in Pratt, Kansas, in 1888, Carlander attended Ottawa University and University of Kansas until 1911, when he left Kansas to attend the Art Institute of Chicago, where he enrolled in night school classes in draftsmanship in 1913-1914. Carlander enlisted with the U.S. Army for a year of service during World War I. Between graduation and Army service, Carlander worked on an intermittent basis for AT&SF as a draftsman and inspector. He traveled throughout the southwest supervising construction projects of several railroad stations he designed in the Spanish/Mission Revival and Mediterranean Revival styles.⁵² Following his Army service, Carlander rejoined AT&SF in Chicago and then moved with the architectural department to Amarillo in 1919. In 1920, Carlander opened his own practice in Amarillo while still designing for AT&SF. Carlander was considered one of the most important figures in Amarillo in the 1920s and 1930s and clearly made a name for himself throughout the south.⁵³ A number of his buildings are listed in the National Register of Historic Places including the Fisk Medical Arts Building (1928), the Amarillo College Administration Building and Gymnasium (1925), the Northwest Texas Hospital School of Nursing (c. 1925), the Garza County Courthouse (1923), and Llano Cemetery National Historic District in Amarillo (c. 1933).⁵⁴ In addition to the 1930 Topeka Hospital, Carlander designed the Santa Fe hospitals in Albuquerque (1926) and Los Angeles.⁵⁵

By 1930, hospitals were the nation's third-largest industry.⁵⁶ With medical advances, more-efficient and better-educated staff, as well as improved buildings, Americans' image of hospitals improved. Nathaniel W. Faxon explained:

The last thirty years have witnessed the most spectacular building of hospitals by a hopeful people that has ever taken place in the world's history. Instead of being dreaded, hospitals are now looked at with confidence and even affection as places wherein most can be done to cure disease and alleviate suffering.⁵⁷

⁴⁸ Brenda Spencer, *ATSF Motive Power Building National Register Nomination*, Kansas State Historical Society, 2010.

⁴⁹ William G. Cutler, *History of the State of Kansas*. (Chicago, IL: A.T. Andreas, 1883).

⁵⁰ "Fifty Years of Santa Fe History," 40.

⁵¹ Judy Wright, *Atchison, Topeka, and Santa Fe Railroad Station (Claremont Depot) National Register Nomination*, 3.

⁵² Donald R. Abbe, *Garza County Courthouse National Register Nomination*, Texas Historical Commission, 2000.

⁵³ *Amarillo Historic Building Survey*, (Amarillo, TX: Amarillo Historical Preservation Foundation, 1981) 27.

⁵⁴ John T. Campo, Jr., *Fisk Medical Arts National Register Nomination*, 1 August 2012, 11.

⁵⁵ Carlander could not have been responsible for the original design of the LA hospital as it opened in 1905; he likely designed additions or changes to the original building. John T. Campo, Jr., *Fisk Medical Arts National Register Nomination*, 1 August 2012, 11.

⁵⁶ *Mending Bodies, Saving Souls: A History of Hospitals*, 471.

⁵⁷ *Ibid*, 471

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Rapid technological advances in the medical and construction industries fostered specialization among design professions. For the mid-century expansions of the Topeka and Albuquerque hospitals, Santa Fe chose the Kansas City architectural and engineering firm of Archer, Cooper and Robison who had the American Hospital Association stamp of approval denoting a firm's qualification for hospital construction.⁵⁸

The Archer, Cooper and Robison firm was a partnership between well-known Kansas City architects Arthur Ward Archer (1883-1950), Cecil E. Cooper (1901-1991) and Emmitt M. Robison.⁵⁹ In the early 1930s Cooper worked with the architectural firm of Archer and Radotinsky sharing their appreciation of Modern design. Later Cooper's firm designed the Greyhound Bus Terminal (1941), Kansas City Kansas Fire Stations 2, 3, & 7 and the addition to the Harry S. Truman Library (1967).⁶⁰ Renamed Cooper, Robison and Carlson after Archer's death, the firm designed an addition to the Lawrence Memorial Hospital (1955).⁶¹ Moreover, they designed three new terminal buildings for the Kansas City Municipal Airport (1960-64) and are perhaps best known for their award-winning modern curved and cantilevered roof design of the Trans World Airlines airframe overhaul hanger (1970) at the Kansas City International Airport.⁶²

The final expansion of Topeka's Santa Fe Hospital occurred in 1979 and brought a change in designers, ending the era of railroad and hospital architects in favor of a local firm. The Kansas City architectural firm of Archer, Cooper, and Robison had served Santa Fe for nearly thirty years, designing the major additions to both the Topeka and Albuquerque hospitals throughout the late-1940s to the mid-1970s.⁶³ Reorganized, newly opened to the public, and renamed Memorial Hospital in 1972, the hospital turned to architects Ekdahl Depew, Davis and Persson of Topeka for the design of the hospital expansion and remodeling in the late 1970s.

Modernization – the Driving Force behind Hospital Expansion

The Santa Fe Hospital Association emphasized state-of-the-art healthcare from its inception. Even in the early twentieth century, in order to keep up with medical care demands of its employees, Santa Fe built a larger, more modern facility in La Junta, CO (1907) and added new hospitals in Mulvane, KS (1913), Clovis, NM (1915), and Albuquerque, NM (1926). In 1916 the Hospital Association was operating seven hospitals used exclusively for the care of its members with more than 57,000 cases treated in the previous year with only 49 deaths.⁶⁴ Forty thousand Santa Fe employees contributed to the Association and therefore, had access to the hospitals and associated medical care.

As of June 1916 the railroad had spent \$178,428.33 on the land, original cost of building and improvements of the Topeka hospital.⁶⁵ The Topeka Santa Fe Hospital and the Hospital Association had earned credibility and trust leading to a dramatic increase in patients and members. Even with the seven geographically dispersed facilities, Topeka often was operating far beyond its intended capacity throughout the 1920s.

As with many other hospitals designed in the 1880s to early 1900s medical and scientific advancements made Topeka's Santa Fe Hospital 1896 design out-of-date. Large open wards filled with 30-40 beds and a single bathroom evolved into private or semi-private patient rooms with individual bathrooms and corridors with centralized nurses' stations on each floor. In order to accommodate patient expectations and modern medical requirements, the old Topeka Santa Fe Hospital would have to undergo significant change. In 1929 the board voted to proceed with a modern expansion to ease congestion in the existing facility and according to the *Topeka Capital Journal*, to provide "a much larger number of private rooms for patients seriously ill."⁶⁶ In December 1930 the new hospital was opened. The five-story facility was state-of-art with a new surgical department, private patient rooms, medical library, and doctor's offices as well as a lab and x-ray

⁵⁸ Journal of the American Hospital Association, (1949) vol. 23 accessed on Google Books on 17 February 2016.

⁵⁹ 1935 Kansas City, MO City Directory, Ancestry.com. *U.S. City Directories, 1822-1995* [database on-line]. Provo, UT, USA: Ancestry.com Operations, Inc., 2011; Brenda Spencer and Christie Davis, *St. Thomas Hospital, Colby, KS Kansas Historical Society, 2012*; and Brenda Spencer, *Historic Public Schools of Kansas MPDF*, Kansas State Historical Society, 2005.

⁶⁰ Cydney Millstein, *Westheight Manor Historic District Survey Phase 3*, Kansas State Historical Society, 2013, 57, and M.A. Solomon, B.A. Claybaugh and Bernd Forester, *Independence MO Historical Survey*, 1975.

⁶¹ City of Lawrence, KS City Clerk Minutes online at <http://lawrenceks.org/assets/city-clerk/minutes-archives/1950s/1954/08-03-1954.pdf>.

⁶² Kansas City Municipal Airport, Boxes 58A-59A; MVC-SAH Architectural Records Collection (K0006); The State Historical Society of Missouri Research Center-Kansas City (SHSMO-KC) accessed on 26 February 2016 at <http://shs.umsystem.edu/manuscripts/kansascity/k0006.pdf> and the *Westheight Manor Historic District Survey*, 57.

⁶³ Archer, Cooper, and Robison, later became Cooper, Robison and Carlson from 1950 to 1972, then Cooper, Carlson, Duy and Ritchie Inc. from 1972 to 1992, and CDR Rodriguez Inc. thereafter.

⁶⁴ "Great Work of the Three Hospital Associates on the Santa Fe," *The Santa Fe Magazine*, (June 1916), vol. 10, no. 7, 38.

⁶⁵ Ibid, 33.

⁶⁶ "Add to Hospital," *Topeka State Journal*, 31 August 1929.

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department.⁶⁷ The spacious new waiting rooms had modern amenities; nurse call buttons were installed in patient rooms and a sterilization vault was added.⁶⁸ As the second largest hospital in the city, the Santa Fe Hospital provided care for the 5,000 Santa Fe employees that called Topeka home.⁶⁹

The new facility only added to the popularity of the hospital and as early as 1947 there was a call for further expansion that would triple capacity and add new services including dental care, updated laboratory and operating rooms.⁷⁰ Most notable was the addition of an outpatient clinic which was opened in 1950 as a new west wing, providing patients with the ability to have minor surgery and other procedures without a hospital stay. In 1952, the new east wing was completed following demolition of the 1896 building. The new outpatient clinic saw 100 patients a day by October of the same year. The new physical therapy department featured whirlpool baths, infra-red therapy, and diathermy for treating joint problems, as well as a mobile x-ray unit. The five-room state-of-the-art surgical suite was equipped with the latest surgical furniture, lights, conductive floors, explosion-proof electrical outlets, air-conditioning and humidity control.⁷¹ The expanded pharmacy filled 2,400 prescriptions every month.⁷² The project featured modern amenities throughout including a pneumatic tube system, dumb waiter and service elevator expediting transportation of drugs, equipment, records and staff. The hospital was staffed with highly trained personnel including registered technicians for x-ray and lab, a radiologist, registered nurses and pharmacists.

By 1953, Santa Fe's 40,000-member Hospital Association's facilities had been reduced to only two hospitals; only the hospitals in Topeka and Albuquerque remained open. The facility in Albuquerque, while also modernized and expanded, had a 76-bed capacity, less than a third of the size of the one in Topeka.⁷³ The Topeka Santa Fe Hospital seemed to be in continuous growth and modernization. In 1962 the Hospital Association announced it would add long-term care. A new two-story east wing opened two years later. Santa Fe employees had a choice and in 1963 only 900 out of 28,000 opted-out of the company's Hospital Association participation. The hospital was able to keep its costs low, thereby continually giving excellent, yet economic care. A 1963 article noted that the Santa Fe Topeka hospital's costs were \$6 a day under the national average of \$36.83.⁷⁴

The End of the "Company Hospital"

In 1966, Topeka's Santa Fe Hospital opened its doors to the public bringing an end to the seventy-year period in which the hospital exclusively served employees of the Santa Fe Railroad. The hospital opened to the public in response to the nationwide changes in health care for Americans over the age of 65 as Medicare became law. This was not the first time the Santa Fe hospital had treated the public. The hospital had been utilized as surge capacity in times of emergency in Topeka. Examples include the power plant explosion in 1943, mass food poisoning in 1949 and the flood of 1951.⁷⁵

Also in 1966, the Hospital Association severed itself from direct ownership and management of the hospital. The Association then signed a 99-year contract with a newly-created Hospital Board to provide medical and surgical care for the Hospital Association members in the building owned by the Association.⁷⁶ On February 1, 1972 the institution changed its name to Memorial Hospital.

A *Topeka Capital Journal* article on March 6, 1977 detailed the journey from Santa Fe company hospital to public institution. The hospital was known for its outstanding care, but struggled to compete with convention, even with a name change, the institution was not readily accepted by Topekans including those in the medical community.⁷⁷ When Santa Fe dropped its requirement for its employees to use company hospitals; Memorial Hospital saw a significant drop in business that continued throughout the 1970s. In 1975 the hospital had a daily average of only 135 Santa Fe employee inpatients; a number that dropped to 108 in 1976. However, the outpatient clinic saw a 40 percent increase in business over the same

⁶⁷ "More about Our Hospital Association," 9.

⁶⁸ "New Santa Fe Hospital Open for Inspection," *Topeka State Journal*, 31 January 1931.

⁶⁹ "Topeka is Well-Equipped with Hospital Service," *Topeka State Journal*, 15 August 1931.

⁷⁰ "New Hospital on Present Site in Santa Fe Plans," *Topeka State Journal*, 10 October 1947.

⁷¹ "Solace for Sufferers!," 16.

⁷² *Ibid*, 12.

⁷³ "Santa Fe Hospital Long-term Care Addition near Completion," *Topeka State Journal*, 27 December 1963.

⁷⁴ "Cost of Santa Fe Hospital Care Low," *Topeka Daily Capital*, 19 September 1963.

⁷⁵ "Santa Fe's Prepaid Hospitalization and Medical Care Program Covers 40,000 Employees, Operates Hospitals in Two States," *Topeka Daily Capital*, 23 March 1952.

⁷⁶ Barbara Joseph, "After 93 Years, Memorial Hospital Closes," *Topeka Capital Journal*, 13 May 1989 and Maggie Mason, "Update on Association of Memorial Hospital and the Santa Fe System," 10 October 1980, *Santa Fe Hospital Clippings*, Kansas State Historical Society.

⁷⁷ "The Third Hospital."

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period. On July 1, 1977 Memorial Hospital opened a new 20-bed inpatient psychiatric ward; an area of profitability for the next 12 years. In 1977 the hospital had a capacity of 222 inpatients; but the outpatient services saw over 4,000 each month.⁷⁸ In 1979 a \$6.4 million dollar renovation was completed, expanding the outpatient facility and emergency services. One year later the number of private citizens surpassed Santa Fe employees as first-time hospital patients.⁷⁹

The hospital's success, however, was short lived. In 1983 Santa Fe closed the hospital in Albuquerque; while in Topeka, Memorial Hospital struggled to survive. On November 16, 1988 Memorial Hospital's board (separate from the Santa Fe Hospital Association since 1966) announced an end to medical and surgical care; the hospital stating that it would focus on behavioral disorders. At that time, forty percent of Memorial's inpatients were AT&SF Hospital Association members.⁸⁰ The Santa Fe Hospital Association considered the change as a breach of contract and openly sought other options. Memorial Hospital filed for bankruptcy in February 1989 and on May 12, 1989 the hospital closed its doors.

Conclusion

With the advent of the interstate highway system that began in 1954 Kansans began to choose road over rail, resulting in a loss of passenger revenues and forcing the discontinuation of many local passenger trains. In October 1967, the federal government took all the mail off the railroads, moving it to the airlines. The resulting loss of revenues forced further reduction in passenger service. The trend was irreversible. The Atchison, Topeka & Santa Fe Railway discontinued all passenger trains on April 30, 1971, after 102 years of serving the traveling public.

The evolution of transportation and industry changes in the provision of medical services and government-subsidized benefits ensured the eventual demise of Topeka's Santa Fe Hospital. The AT&SF Railroad had been the front-runner in the rail industry creating the gold standard of employee care. The Santa Fe Hospital in Topeka played a significant role in the lives of Santa Fe employees by providing a trusted source of state-of-the-art medical care for 93 years; many of whom were Topeka residents. It also had provided Topeka a "safety value" of medical care when the city's three other hospitals were overwhelmed with patients. The confluence of events that began in 1966 with the passage of Medicare which required medical facilities to be open to the public in order to receive program reimbursements was the beginning of the end for Santa Fe's hospitals. Concurrent with the decline of the passenger service, the operation of company hospitals was no longer the most effective way for Santa Fe to meet the healthcare needs of its employees. The largest of Santa Fe's hospitals, Topeka was the last to close its doors in 1989.

After the hospital closure, building sat vacant until 1997 when the property was purchased by a Topeka-based development firm for \$10,000. In December 2001 it was announced that construction had begun to transform the space into independent living apartments for senior citizens. The building continues in that function today.

⁷⁸ "The Third Hospital."

⁷⁹ Memorial Hospital Annual Report October 1, 1980 – September 30, 1981.

⁸⁰ Vickie Griffith Hawver, "Hospital Not Closing, Trustee Says" *Topeka Capital Journal*, 15 November 1988.

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9. Major Bibliographical References

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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 # _____
- recorded by Historic American Landscape Survey # _____

Primary location of additional data:

- State Historic Preservation Office
 - Other State agency
 - Federal agency
 - Local government
 - University
 - Other
- Name of repository: Kansas Historical Society

Historic Resources Survey Number (if assigned): _____ n/a _____

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10. Geographical Data

Acreege of Property 3.83

Provide latitude/longitude coordinates OR UTM coordinates.
(Place additional coordinates on a continuation page.)

Latitude/Longitude Coordinates

Datum if other than WGS84: _____
(enter coordinates to 6 decimal places)

1	<u>39.049994</u>	<u>-95.669101</u>	3	_____	_____
	Latitude:	Longitude:		Latitude:	Longitude:
2	_____	_____	4	_____	_____
	Latitude:	Longitude:		Latitude:	Longitude:

Verbal Boundary Description (describe the boundaries of the property)

The site is located in the Holliday Addition to the City of Topeka, Shawnee County, Kansas, S32, T11, R16. It is comprised of two tracts which generally encompass the building footprint in the north half of the block bordered by 6th Street on the north, Madison Street on the west and Jefferson Street on the east EXCEPT the parcel of land addressed at 620 SE Madison and located in the SE quarter of the block which is known as the Cyrus K. Holliday Office Building owned by the City of Topeka. Parcel map and legal description are provided under 'Additional Documentation' at the end of the nomination – Figure 5.

Boundary Justification (explain why the boundaries were selected)

The boundary above reflects the site currently affiliated with the hospital property minus the parking on the south. The office building, built by the Hospital Assn. as a Medical Arts Building for physicians' offices in the mid-1980s is now the Cyrus K. Holliday Office Building (City of Topeka) and is no longer affiliated with the nominated property and therefore not included in the legal description. The parking lot(s) south of the building were also excluded from the nominated property because those properties were assembled and added to the original site generally in the period between the 1960s and 1980s.

11. Form Prepared By

name/title Brenda R. Spencer, with Michelle L. Spencer

organization Spencer Preservation date 26 February 2016

street & number 10150 Onaga Road telephone 785-456-9857

city or town Wamego state KS zip code 66547

e-mail Brenda@spencerpreservation.com

Property Owner: (complete this item at the request of the SHPO or FPO)

name Madison Street Apartments, LLC. ***

street & number 404 SW 9th Street telephone 785-232-1122

city or town Topeka state KS zip code 66612

***Sale of property is pending; Madison Street Apartments LLC has the property under a purchase contract but has not closed. The current owner: Jefferson-Madison Building, L.P. 600 SE Madison Street, Topeka, KS 66607, is aware of the buyer's intention to nominate the property and to apply for Historic Tax Credits for the rehabilitation.

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.460 et seq.).

Estimated Burden Statement: Public reporting burden for this form is estimated to average 100 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 Office of Planning and Performance Management, U.S. Dept. of the Interior, 1849 C. Street, NW, Washington, DC.

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Additional Documentation

Submit the following items with the completed form:

Photograph Log

Name of Property: Santa Fe Hospital

City or Vicinity: Topeka

County: Shawnee County State: Kansas

Photographer: Brenda R. Spencer

Date Photographed: 13 January and 24 February 2016

Description of Photograph(s) and number, include description of view indicating direction of camera:

#	Direction	Description
1 of 30	SW	East and North facades
2 of 30	S	North facade (1930 hospital w/ 1950 east wing on left)
3 of 30	W	Looking W along original front entry in center of north facade
4 of 30	SE	North facade
5 of 30	SE	West facade (1950 addition of west wing south of 1930 building – right)
6 of 30	S	1950 entry on west facade now serves as main building entry
7 of 30	NE	West facade, from south end
8 of 30	E	End bay of 1950 west wing, extant on 5 th floor, above 4-story 1970s additions
9 of 30	N	View of hospital complex – south facade – from rear parking
10 of 30	NE	Overview of building form/massing from west room, showing 1930 hospital on left and 1964 east wing on right with 1950 rear service bay (2-story) in foreground
11 of 30	NW	Rear view of hospital complex including rear courtyard, from Jefferson Street on east side of site
12 of 30	SW	East wing, constructed in 1964; upper two floors added in 1979, from 6 th & Jefferson
13 of 30	N	Original glass block wall at vestibule inside west entrance
14 of 30	W	Lobby/resident lounge inside west entry, first floor
15 of 30	N	First-floor corridor in west wing, looking N
16 of 30	E	Stairway in 1950 west wing
17 of 30	S	Apartment at south end of west wing (1950), 5 th floor
18 of 30	S	Detail of windows in 5 th floor apartment located at former tower on south end of 1950 west wing
19 of 30	S	Typical corridor, 2 nd floor west wing looking S
20 of 30	N	Second-floor apartment located above entrance in center wing of 1930 hospital
21 of 30	E	One of two stairways extant in 1930 hospital – terrazzo stairs with plaster half-wall railing with marble cap; looking E down from 6 th floor in center wing
22 of 30	E	Original glazed wall tile (and 2" black floor tile) extant in surgical room of 1930 hospital – plaster walls and ceilings extant, 6 th floor center wing
23 of 30	NE	Former surgical room in NE corner of 1950 east wing, 6 th floor – with 1950s ceramic tile, plaster walls and ceiling extant
24 of 30	N	Stairway at NE corner of East Wing (1964/1979), looking down from 3 rd floor – original aluminum railings extant (Metal stairs with vinyl tile and gypsum board walls)
25 of 30	S	Looking S in 3 rd floor corridor of East wing (1979) with nurses station on east
26 of 30	NE	Hospital room in NE corner of East Wing, 3 rd floor (1979) with original finishes including suspended acoustical tile ceilings, gypsum board walls, vinyl tile, and aluminum windows with gray marble sills
27 of 30	E	Looking E in 2 nd floor corridor of East wing (1964) from W end of corridor
28 of 30	SE	Typical hospital room on 2 nd floor east wing with original features and finishes including built-in metal wardrobe, aluminum windows, suspended acoustical tile ceiling and gypsum board walls
29 of 30	E	Detail of original aluminum windows with red marble sill, typical on 2 nd floor East Wing (1964)
30 of 30	W	Patient bathroom/shower on 2 nd floor East wing with original tile floor and ceramic tile wainscoting

Figures: Include GIS maps, figures, scanned images below.

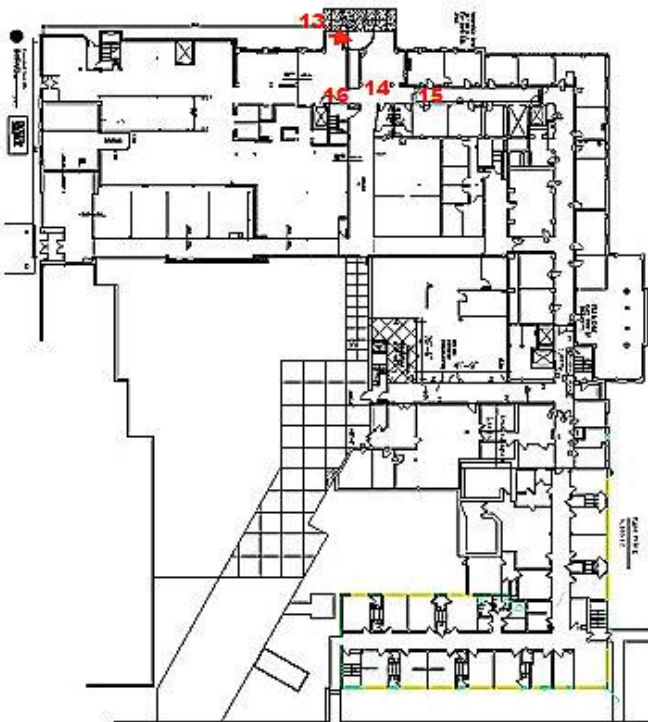
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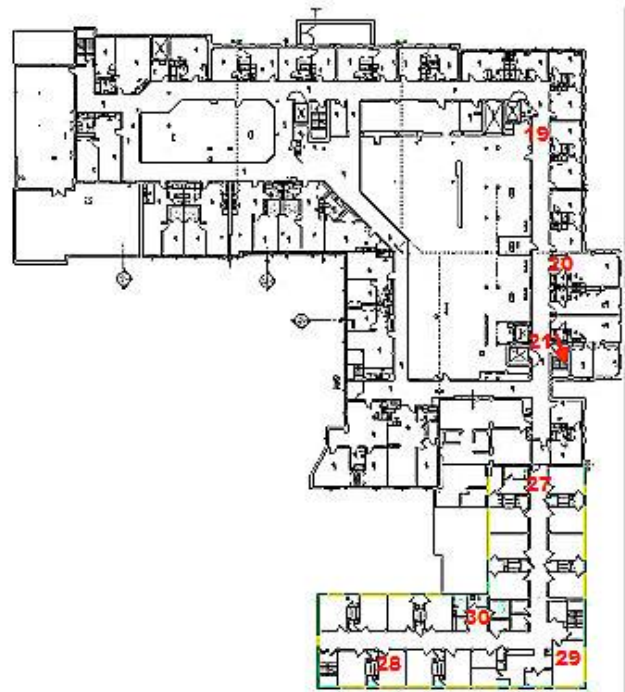
PHOTO KEY



Baseplan downloaded at Google.com 2016



FIRST FLOOR



SECOND FLOOR

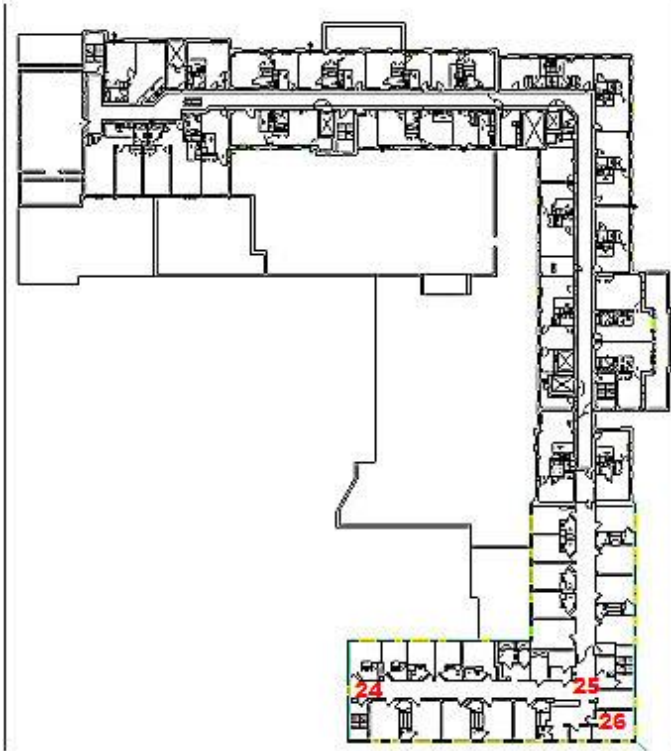
PHOTO KEY

Base plans are preliminary existing plans provided by Architect One

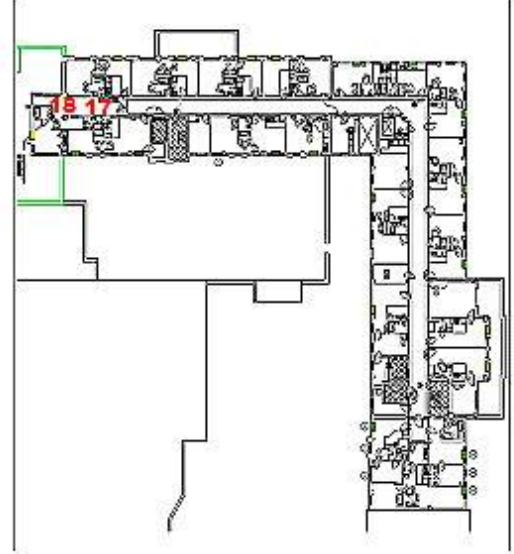
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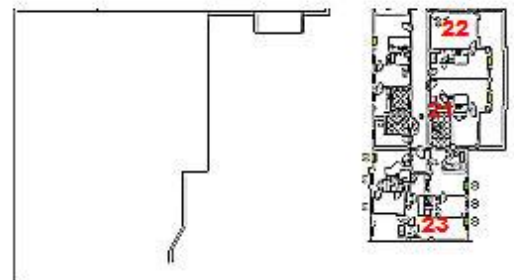
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THIRD FLOOR



FIFTH FLOOR



SIXTH FLOOR

 **PHOTO KEY**

Base plans are preliminary existing plans provided by Architect One

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ADDITIONAL DOCUMENTATION - MAPS

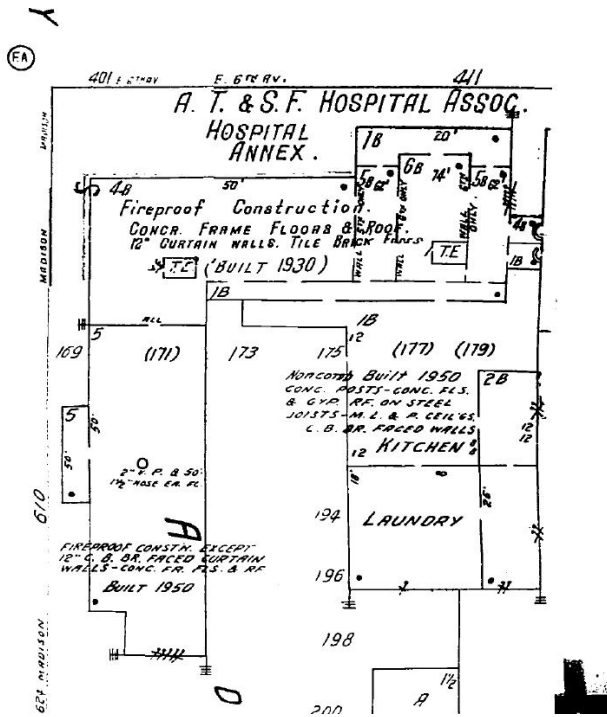


Figure 2 – Hospital Site as shown on Sanborn Fire Insurance Map Excerpt from Sheet 38, August 1950 update of 1913 Map showing original 1930 building and 1950 expansion in place.

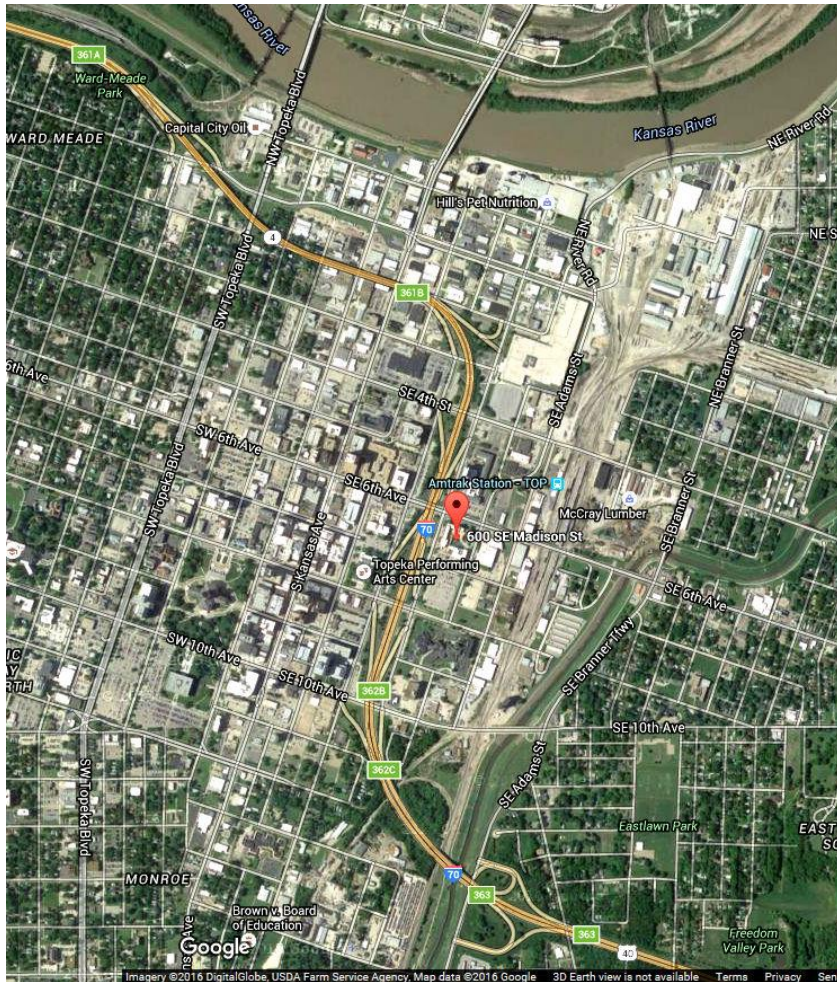


Figure 3 - Aerial View of Context from Google.com 2016
Santa Fe Hospital at 600 SE Madison, Topeka
Shawnee County, Kansas
Latitude/Longitude: 39.049994, -95.669101
Datum WGS84

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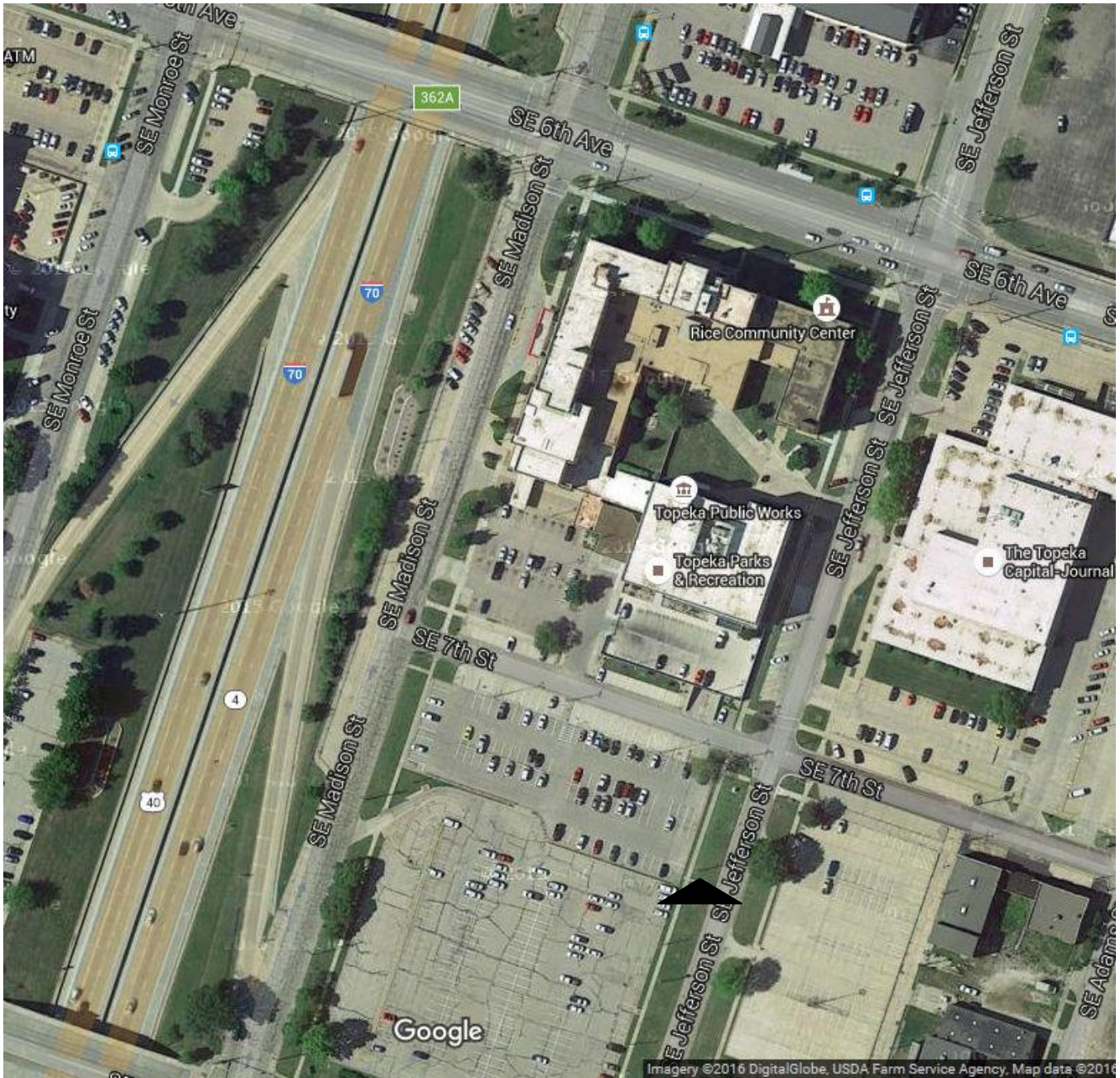


Figure 4 - Aerial View of Site from Google.com 2016
Santa Fe Hospital at 600 SE Madison, Topeka
Shawnee County, Kansas
Latitude/Longitude: 39.049994, -95.669101
Datum WGS84

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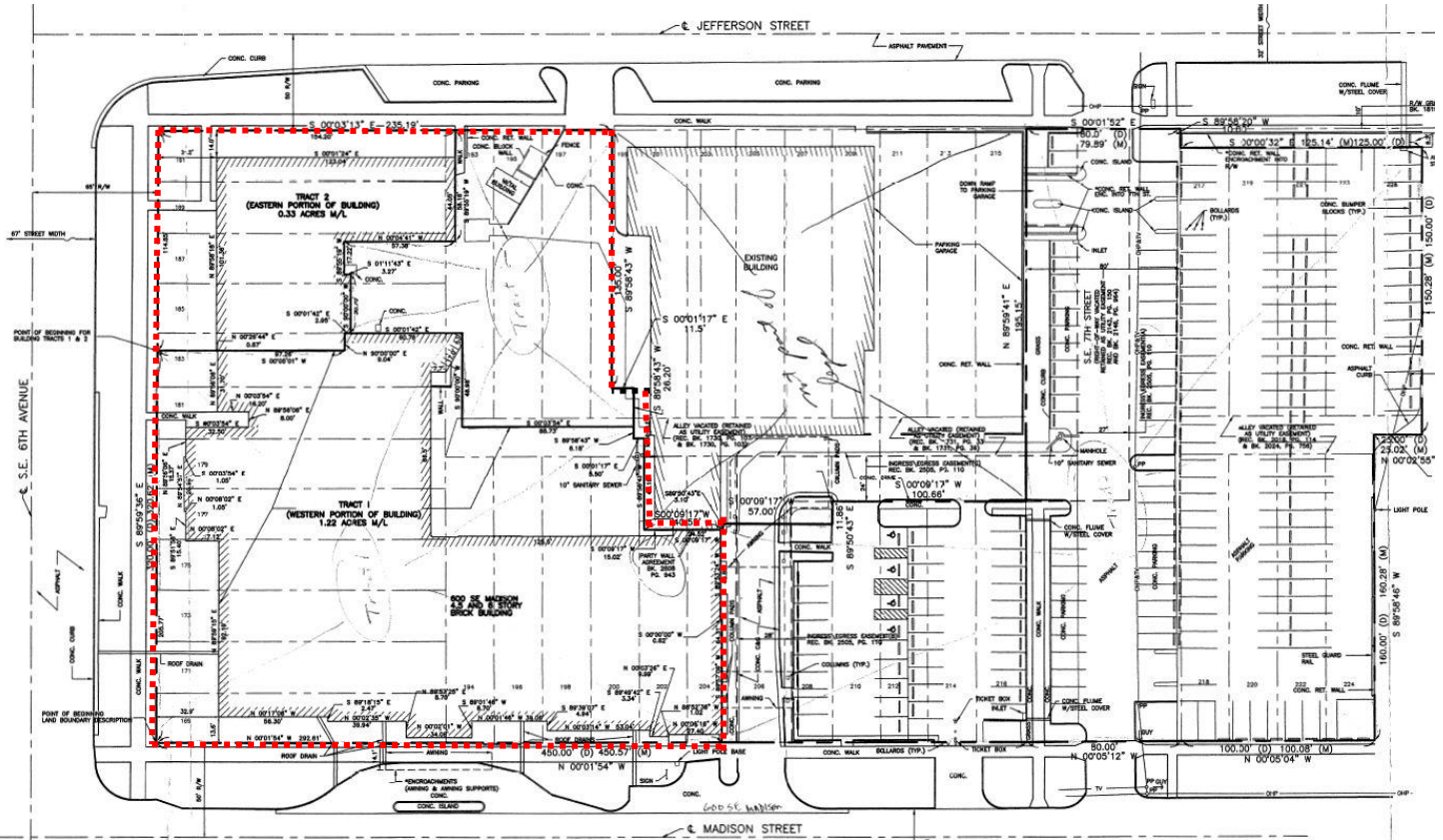


Figure 5 - Site Survey/Parcel Map indicating property boundary
Diagram from 2001 site survey by Schmidt Engineering provided by Lawyers Title of Topeka, Inc.
Dotted line indicates approximate site boundary; The nominated property is represented by Tracts 1 & 2 in the following legal description:

TRACT 1: A tract of land in Holliday's Addition to the City of Topeka, Shawnee County, Kansas, in the block bounded by 6th Avenue and 7th Street and Madison and Jefferson Street, more particularly described as follows: Commencing at the Northwest corner of Lot 169 on Southeast 6th Avenue in said Holliday's Addition; thence East along the North line of Lots 169, 171, 173, 175, 177, 179, 181, and 183, on a bearing of South 89 degrees 59 minutes 36 seconds East, a distance of 205.77 feet; thence South along an outside building wall and wall extended, on a bearing of South 00 degrees 05 minutes 01 second West, a distance of 97.26 feet to the North line of a building wall; thence East along the North line of a building wall, on a bearing of North 90 degrees 00 minutes 00 seconds East, a distance of 9.04 feet to the East line of a building wall; thence South along the outside East line of a building wall, on a bearing of South 00 degrees 01 minute 42 seconds East, a distance of 60.78 feet to a building corner; thence West along an outside building wall, on a bearing of South 90 degrees 00 minutes 00 seconds West, a distance of 48.98 feet; thence South on a bearing of South 00 degrees 03 minutes 54 seconds East, a distance of 88.73 feet; thence West on a bearing of South 89 degrees 58 minutes 43 seconds West, a distance of 6.18 feet; thence South on a bearing of South 00 degrees 01 minute 17 seconds East, a distance of 5.50 feet; thence West on a bearing of South 89 degrees 58 minutes 43 seconds West, a distance of 48.18 feet; thence South on a bearing of South 00 degrees 09 minutes 17 seconds West, a distance of 15.02 feet to a seam between the building walls; thence continuing South along said building wall on a bearing of South 00 degrees 09 minutes 17 seconds West, a distance of 24.52 feet to an outside building wall; thence West along an outside building wall, on a bearing of South 89 degrees 53 minutes 24 seconds West, a distance of 46.89 feet to a building corner; thence South along an outside building wall, on a bearing of South 00 degrees 00 minutes 00 seconds West, a distance of 0.62 feet to a building corner; thence West along an outside building wall and wall extended, on a bearing of South 89 degrees 57 minutes 09 seconds West, a distance of 64.31 feet to the East line of Madison Street; thence North along the East line of Madison Street, on a bearing of North 00 degrees 01 minute 54 seconds West, a distance of 292.61 feet to the point of beginning.

TRACT 2: A Tract of land in Holliday's Addition to The City of Topeka, Shawnee County, Kansas, in the block bounded by 6th Avenue and 7th Street and Madison and Jefferson Street, more particularly described as follows: Commencing at the Northwest Corner of Lot 169 on Southeast 6th Avenue in said Holliday's Addition; thence East along the North Line of Lots 169, 171, 173, 175, 177, 179, 181 and 183, on a bearing of South 89 degrees 59 minutes 36 seconds East, a distance of 205.77 feet; thence South on a bearing of South 00 degrees 05 minutes 01 second West, a distance of 97.26 feet to the North Line of a building wall; thence East along the North Line of a building wall, on a bearing of North 90 degrees 00 minutes 00 seconds East, a distance of 9.04 feet to the East Line of a building wall; thence South along the East Line of a building wall, on a bearing of South 00 degrees 01 minute 42 seconds East, a

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distance of 2.95 feet to the outside wall of a building for the point of beginning; thence East along the outside wall of a building, on a bearing of North 90 degrees 00 minutes 00 seconds East, a distance of 30.70 feet to a building corner; thence North along a building wall, on a bearing of North 01 degree 11 minutes 43 seconds West, a distance of 3.27 feet to a building corner; thence East along a building wall, on a bearing of North 89 degrees 55 minutes 19 seconds East, a distance of 17.22 feet to a building corner; thence South along a building wall, on a bearing of South 00 degrees 04 minutes 41 seconds East, a distance of 57.38 feet to a building corner; thence East along a building wall and said wall extended, on a bearing of North 89 degrees 55 minutes 19 seconds East, a distance of 58.16 feet to the West Line of Jefferson Street; thence South along the West Line of Jefferson Street, on a bearing of South 00 degrees 03 minutes 13 seconds East, a distance of 80.99 feet; thence West on a bearing of South 89 degrees 58 minutes 43 seconds West, a distance of 135.00 feet; thence South on a bearing of South 00 degrees 01 minute 17 seconds East, a distance of 11.50 feet; thence West on a bearing of South 89 degrees 58 minutes 43 seconds West, a distance of 20.02 feet; thence North on a bearing of North 00 degrees 03 minutes 54 seconds West, a distance of 88.73 feet to an outside building wall; thence East along an outside building wall, on a bearing of North 90 degrees 00 minutes 00 seconds East, a distance of 48.98 feet to a building corner; thence North along an outside building wall, on a bearing of North 00 degrees 01 minute 42 seconds West, a distance of 57.83 feet to the point of beginning.

ADDITIONAL DOCUMENTATION – HISTORIC VIEWS



Figure 6 – Architect’s rendering of new hospital, *Topeka State Journal*, 31 August 1929.



Figure 7 – Postcard illustrating 1930 Hospital built adjacent to original 1896 hospital (Source: *Postcard History of the Early Santa Fe Railway* by Don Harmon).

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Figure 8 – c.1930 Photos of “new” 1930 hospital built adjacent to 1896 building (later razed) (Source: Kansas State Historical Society, ATSF Railroad Hospital Photographs).

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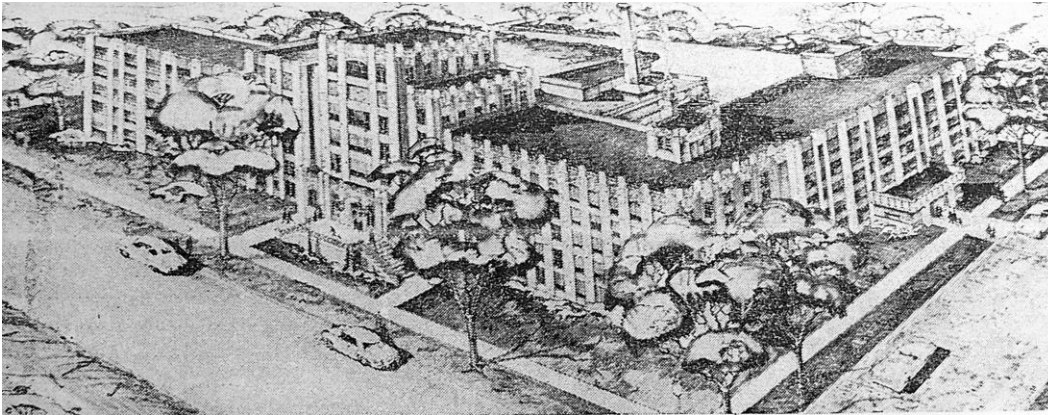


Figure 9—Rendering by Architects Archer Cooper & Robison illustrating proposed expansion, Topeka State Journal, 15 September 1949.



Figure 10- c.1950 view of West Wing from Madison Street shortly after construction (Source: Kansas State Historical Society, ATSF Railroad Hospital Photographs).



Figure 11 – 1950s Postcard illustrating 1930 Hospital with new east wing (on site of old hospital building). View is prior to construction of east wing constructed in 1964 and clearly shows replacement of original carved stone panels on front facade. (Source: Postcard History of the Early Santa Fe Railway by Don Harmon).

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Figure 12 – c.1970 view of 2-story east wing constructed in 1964 (prior to 1979 addition of two floors) Downloaded at website railwaysurgeons.org 2 February 2016.

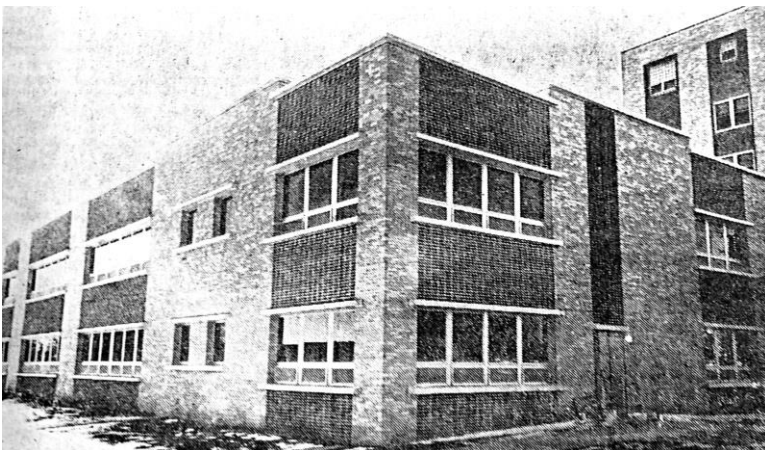


Figure 13 – View of new Long-Term Care facility near completion, the new east wing, Topeka State Journal 27 December 1963.



Figure 15 – c.1982 view of last building addition – new Emergency entry at south end of west wing (Undated Memorial Hospital Brochure, Topeka Public Library).

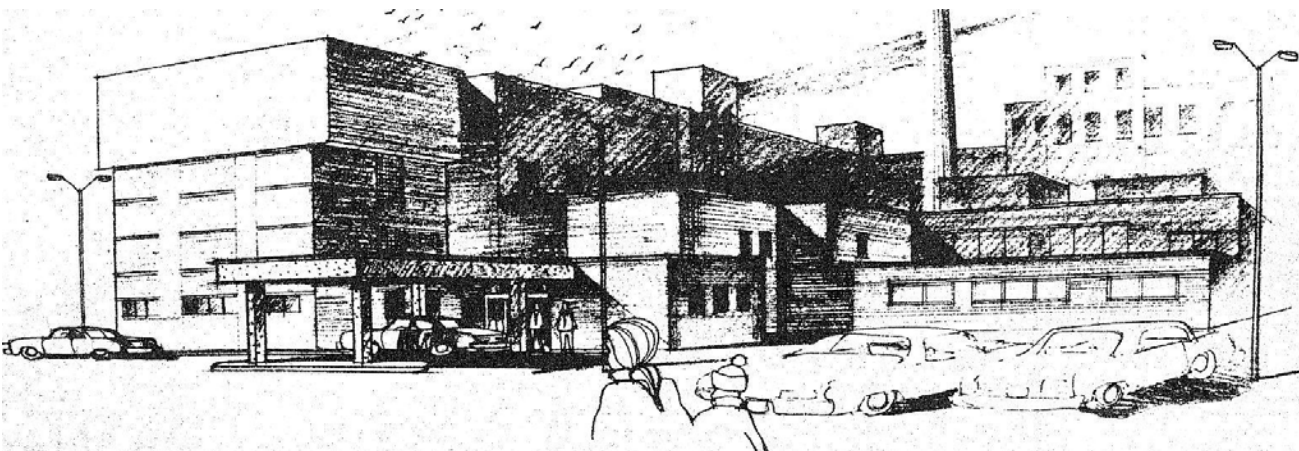


Figure 14 – Architect's rendering of proposed hospital south expansion by Ekdahl, Davis, Depew, Persson – looking NW from south of hospital building (Topeka State Journal, 27 July 1977)





Santa Fe Place
School Apartments
and 1st Unit
SANTA FE PLACE, S.F. DISTRICT
• Construction - 1978
• Original District and Santa Fe
University Staff Property



Office of the
President
University of
North Carolina
at Greensboro
100 University Center
Greensboro, NC 27402
(336) 334-2000
www.uncc.edu



Notice of Sale
The Board of Trustees of the
University of North Carolina
at Chapel Hill, North Carolina
will sell the following property
located in the City of Chapel Hill,
North Carolina.



NOW LEASING

Santa Fe Place
Apartments
1000 S. 10th St.
Tulsa, OK 74106



Leasing Office


Santa Fe Place
Apartments

600 MADISON



NOW LEASING


Santa Fe Place
Apartments
800-645-2000

PAMADA





Administration Building







NO
PARKING





CLOSE DOOR COMPLETELY WHEN ENTERING OR LEAVING

NO SMOKING



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UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES
EVALUATION/RETURN SHEET

REQUESTED ACTION: NOMINATION

PROPERTY Santa Fe Hospital
NAME:

MULTIPLE
NAME:

STATE & COUNTY: KANSAS, Shawnee

DATE RECEIVED: 8/26/16 DATE OF PENDING LIST: 9/23/16
DATE OF 16TH DAY: 10/11/16 DATE OF 45TH DAY: 10/11/16
DATE OF WEEKLY LIST:

REFERENCE NUMBER: 16000708

REASONS FOR REVIEW:

APPEAL: N DATA PROBLEM: N LANDSCAPE: N LESS THAN 50 YEARS: N
OTHER: N PDIL: Y PERIOD: N PROGRAM UNAPPROVED: N
REQUEST: N SAMPLE: N SLR DRAFT: N NATIONAL: N

COMMENT WAIVER: N

ACCEPT RETURN REJECT 10.11.16 DATE

ABSTRACT/SUMMARY COMMENTS:

*Excellent remaining example of
a RR run Hospital*

RECOM./CRITERIA _____

REVIEWER *Abernathy* DISCIPLINE _____

TELEPHONE _____ DATE _____

DOCUMENTATION see attached comments Y/N see attached SLR Y/N

If a nomination is returned to the nominating authority, the nomination is no longer under consideration by the NPS.



UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

OMB Approved
No. 1024-0009
Form 10-168
Rev. 2014

HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 1 - EVALUATION OF SIGNIFICANCE

NPS Project Number 33977

Instructions: This page must bear the applicant's original signature and must be dated. The National Park Service certification decision is based on the descriptions in this application form. In the event of any discrepancy between the application form and other, supplementary material submitted with it (such as architectural plans, drawings and specifications), the application form takes precedence. A copy of this form will be provided to the Internal Revenue Service.

1. Property Name Santa Fe Hospital

Street 600 SE Madison Street

City Topeka County Shawnee State KS Zip 66607-1162

Name of Historic District NA

- National Register district certified state or local district potential district

2. Nature of request (check only one box)

- certification that the building contributes to the significance of the above-named historic district or National Register property for rehabilitation purposes.
 certification that the building contributes to the significance of the above-named historic district for a charitable contribution for conservation purposes.
 certification that the building does not contribute to the significance of the above-named district.
 preliminary determination for individual listing in the National Register.
 preliminary determination that a building located within a potential historic district contributes to the significance of the district.
 preliminary determination that a building outside the period or area of significance contributes to the significance of the district.

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NATIONAL PARK SERVICE CULTURAL RESOURCES
TAX INCENTIVE PROGRAM

3. Project Contact (if different from applicant)

Name Brenda R. Spencer Company Spencer Preservation

Street 10150 Onaga Road City Wamego State KS

Zip 66547-9584 Telephone (785) 456-9857 Email Address brenda@spencerpreservation.com

4. Applicant

I hereby attest that the information I have provided is, to the best of my knowledge, correct. I further attest that [check one or both boxes, as applicable] (1) I am the owner of the above-described property within the meaning of "owner" set forth in 36 CFR § 67.2 (2011), and/or (2) if I am not the fee simple owner of the above-described property, the fee simple owner is aware of the action I am taking relative to this application and has no objection, as noted in a written statement from the owner, a copy of which (i) either is attached to this application form and incorporated herein, or has been previously submitted, and (ii) meets the requirements of 36 CFR § 67.3(a)(1) (2011). For purposes of this attestation, the singular shall include the plural wherever appropriate. I understand that knowing and willful falsification of factual representations in this application may subject me to fines and imprisonment under 18 U.S.C. § 1001, which, under certain circumstances, provides for imprisonment of up to 8 years.

Name Richard D. Kready Signature Richard D. Kready Date 02/29/2016

Applicant Entity Madison Street Apartments, LLC. SSN _____ or TIN _____

Street 404 SW 9th Street City Topeka State KS

Zip 66612-1603 Telephone (785) 232-1122 Email Address rick.kready@pioneergruopinc.com

NPS Official Use Only

The National Park Service has reviewed the Historic Preservation Certification Application - Part 1 for the above-named property and has determined that the property:

- contributes to the significance of the above-named district or National Register property and is a "certified historic structure" for rehabilitation purposes.
 contributes to the significance of the above-named district and is a "certified historic structure" for a charitable contribution for conservation purposes.
 does not contribute to the significance of the above-named district.

Preliminary Determinations:

- appears to meet the National Register Criteria for Evaluation and will likely be listed in the National Register of Historic Places if nominated by the State Historic Preservation Officer according to the procedures set forth in 36 CFR Part 60.
 does not appear to meet the National Register Criteria for Evaluation and will likely not be listed in the National Register.
 appears to contribute to the significance of a potential historic district, which will likely be listed in the National Register of Historic Places if nominated by the State Historic Preservation Officer.
 appears to contribute to the significance of a registered historic district if the period or area of significance as documented in the National Register nomination or district documentation on file with the NPS is expanded by the State Historic Preservation Officer.
 does not appear to qualify as a certified historic structure.

Date 5/5/16

National Park Service Authorized Signature [Signature]

NPS comments attached

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UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

COMMENTS SHEET
Historic Preservation Certification Application

Property name: Santa Fe Hospital

Project Number: 33977

Property address: 600 SE Madison St., Topeka, KS

These comments respond to the Historic Preservation Certification Application --

Part 1 Part 2 Request for Certification of Completed Work .

The National Park Service (NPS) has reviewed the Historic Preservation Certification Application -- Part 1 for the property cited above, and has determined that the property appears to meet the National Register Criteria for Evaluation and will likely be listed in the National Register of Historic Places if nominated by the State Historic Preservation Officer.

The Santa Fe Hospital is eligible for the National Register at the local level under Criterion A for Health Care/Medicine, with a period of significance of 1930-1966.

The Santa Fe Hospital is the sole remnant of the Health Care system provide by the Atchison, Topeka and Santa Fe Railway. Despite alterations in recent years, there is sufficient integrity from the period of significance of 1930-1966. The hospital is eligible for the National Register under Criterion A, for the area of significance Health Care.

The period of significance ends in 1966 because this is when Medicare comes into existence and the end of the railroad's role of the running the hospital.

The Santa Fe Hospital is rare because it is a remnant of when Business's took care of their employee's, especially health care. It's rarity as the lone surviving railroad hospital is important. Any additional loss would be a risk. The remaining old Emergency room, the remaining hallways, remaining stairways, remaining tile work, etc that are from the period of significance is important.

This determination is preliminary only. These buildings will become "certified historic structures" only when the property is listed in the National Register of Historic Places.

The same regulations also require NPS to review the rehabilitation work under your ownership as a single overall project, and to issue rehabilitation certification on the merits of the overall project rather than for each structure. Consequently, the submitted Part 2 of the application, the Description of Rehabilitation Work, must describe all proposed work on the property, although the 20% investment tax credit is based only on costs for the rehabilitation of "certified historic structures"

The National Park Service has reviewed and approved the submitted application noted above. These comments must be addressed in future submissions related to this project.

5/9/16
Date


National Park Service Signature

802/354/2236
Telephone Number

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JUN 03 2016

CULTURAL RESOURCES

HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 1 – EVALUATION OF SIGNIFICANCE

Property name Santa Fe Hospital NPS Project Number _____

Property address 600 SE Madison Street Topeka Shawnee KS 66607-1162

5. Description of physical appearance

See attached draft National Register nomination.

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Date(s) of building(s) 1930 Date(s) of alteration(s) 1950, 1964, 1974, 1979

Has building been moved? no yes, specify date _____

6. Statement of significance

See attached draft National Register nomination.

7. Photographs and maps. Send photographs and map with application.

Kansas Historic Resources Inventory: www.kshs.org/khri

Like us on Facebook (<https://www.facebook.com/KSHPO>) Follow us on Twitter (@kansashistory)

—Attachments:—

Santa Fe Pioneer Group Consent for Part 1 2-29-16.pdf

27 bytes

February 16, 2016

Ms. Amanda Loughlin
National Register Coordinator
Kansas State Historical Society
6425 SW 6th Avenue
Topeka, KS 66615-1099


re: Certification of fee simple owner relating to applications for certifications of historic significance and of rehabilitation

Pioneer Group, Inc. is currently negotiating a contract for the purchase of 600 SE Madison Street, Topeka, KS; commonly known as Santa Fe Apartments, and formerly known as the Santa Fe Hospital together with all improvements located thereon (the "Santa Fe Hospital") from Jefferson-Madison Building, L.P. Before closing Pioneer Group will assign the contract to Madison Street Apartments, LLC a single purpose entity that will develop, own and operate the Property which will undergo a historic rehabilitation and will continue to be used for affordable housing.

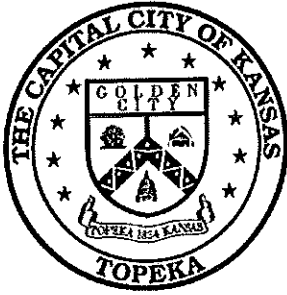
Pursuant to 36 CFR § 67.3(a)(1) the undersigned as the fee simple owner of the Property is aware of the Historic Preservation Certification Application Part 1-Evaluation of Significance and the National Register nomination as well as the Historic Preservation Certification Application Part 2-Description of Rehabilitation and has no objection to the applications for certifications.

Jefferson-Madison Building, L.P.

By: _____

By:  _____

Lisa Williams
Senior Vice President



CITY OF TOPEKA

PLANNING DEPARTMENT
620 SE Madison Street, Unit 11
Topeka, Kansas 66607-1118
Tel.: (785) 368-3728

Bill Fiander, Director
Email: bfiander@topeka.org
Fax: 785-368-2535
www.topeka.org

July 18, 2016

Patrick Zollner, Director
Cultural Resources Division
Kansas State Historical Society
6425 SW 6th Avenue
Topeka, KS 66615-1099

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JUL 28 2016
CULTURAL RESOURCES

Dear Patrick:

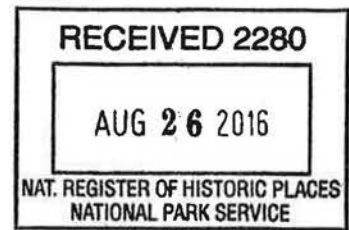
At their regularly scheduled meeting on Thursday, July 14, 2016, the Topeka Landmarks Commission reviewed the National Register Nomination for the Santa Fe Hospital, located at the southeast corner of SE 6th Avenue at SE Madison Street in the City of Topeka, Kansas. At that meeting, the Commission, by official action, recommended the nomination be approved.

The Commission also wished to convey the simultaneous provision of health care services by Security Benefit Group to company employees, also located here in the City of Topeka, during the same time period as those actions made by the Santa Fe Railroad Company. The Landmark Commission feels that both businesses helped to establish the employer-based health-care model that would later spread for use in the rest of the nation.

Thank you for the opportunity to comment.

Sincerely,

Timothy Paris
Planner II



6425 SW 6th Avenue
Topeka KS 66615

phone: 785-272-8681
fax: 785-272-8682
cultural_resources@kshs.org

Sam Brownback, Governor
Jennie Chinn, Executive Director

August 18, 2016

Paul Loether, National Register Chief
National Register of Historic Places
National Park Service
1201 Eye Street, NW (2280)
Washington, DC 20005

Re: National Register documents

Dear Mr. Loether:

Please find enclosed the following National Register documents:

- **Santa Fe Hospital, Topeka, Shawnee County, Kansas** (new nomination)
 - Physical, signed copy of the nomination's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination, copy of Part 1 approval, copies of letters of support & ownership consent;
 - 1 CD (disk #2) with photographs

- **Knightley's Parking Garage, Wichita, Sedgwick County, Kansas** (new nomination)
 - Physical, signed copy of the nomination's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination, copy of letter of support from CLG;
 - 1 CD (disk #2) with photographs

- **Rosberg-Holmgren-Clareen Block, Lindsborg, McPherson County, Kansas** (boundary expansion; amendment)
 - Physical, signed copy of the amendment's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination, copy of ownership consent;
 - 1 CD (disk #2) with photographs;
 - This amendment expands the boundary of the National Register-listed Clareen/Peterson Restaurant Building (listed 04/22/2009)

- **Fourth & Broadway Historic District, Pittsburg, Crawford County, Kansas** (new nomination)
 - Physical, signed copy of the nomination's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination, copies of ownership consent;
 - 1 CD (disk #2) with photographs

- **Donahue's Santa Fe Trail Segment, Durham vicinity, Marion County, Kansas** (new nomination)
 - Physical, signed copy of the nomination's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination, a redacted PDF of the nomination; a .KMZ file with property boundary
 - 1 CD (disk #2) with photographs
 - Please note that this nomination's address is restricted
- **Weigle Barn, Burden vicinity, Cowley County, Kansas** (new nomination)
 - Physical, signed copy of the nomination's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination;
 - 1 CD (disk #2) with photographs
- **Brungardt-Dreiling Farmstead, Victoria vicinity, Ellis County, Kansas** (new nomination)
 - Physical, signed copy of the nomination's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the nomination, a .KMZ file with property boundary;
 - 1 CD (disk #2) with photographs
- **Amelia Earhart Historic District, Atchison, Atchison County, Kansas** (additional documentation)
 - Physical, signed copy of the documentation's first page;
 - 1 CD (disk #1) with a PDF of the true and correct copy of the additional documentation, a .KMZ file with property boundary;



If you have any questions about these enclosed items, please contact me at 785-272-8681 ext. 216 or aloughlin@kshs.org.

Sincerely,

Amanda K. Loughlin
National Register Coordinator

Enclosures