National Register of Historic Places Registration Form



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

1. Name of Property

historic name	Maine Insane Hospital (Boundary Inc	crease)
other names/site number	Augusta Mental Health Institute	
2. Location		
street & number <u>Roughly b</u> city or town <u>Augusta</u>	ounded by Hospital Street and Hospital	<u>Avenue</u> <u>N</u> /A not for publication <u>N</u> /A vicinity
state <u>Maine</u>	code <u>ME</u> county <u>Kennebec</u>	c code <u>011</u> zip code <u>04330</u>
3. State/Federal Agency C	ertification	
□ request for determination Historic Places and meets th □ meets □ does not meet □ nationally ⊠ statewide □ Signature of certifying officia	servation Commission	egistering properties in the National Register of in 36 CFR Part 60. In my opinion, the property property be considered significant
In my opinion, the property		ia. (
State or Federal agency and	bureau	
4. National Park Service C	Certification	
 I hereby certify that this property is: entered in the National Regis See continuation she determined eligible for the National Register. See continuation sh determined not eligible for the National Register. removed from the National Register. other, (explain): 	ster. eet.	Date of Action Slat 9 - 2 - 01

Kennebec, Maine
County and State

5. Classification Category of Property (Check only one box) **Ownership of Property** Number of Resources within Property (Do not include previously listed resources in the count.) (Check as many boxes as apply) \Box building(s) □ private Contributing Non-contributing □ public-local ⊠ district Disconstruction public-State 10 9 □ site buildings □ public-Federal □ structure □ object 1 sites structures objects 9 11 Total Name of related multiple property listing Number of contributing resources previously (Enter "N/A" if property is not part of a multiple property listing.) listed in the National Register N/A 5 6. Function or Use **Historic Functions Current Functions** (Enter categories from instructions) (Enter categories from instructions) Health Care/Hospital Health Care/Hospital Agriculture/Subsistence/Agricultural Outbuilding Government/Government Office Domestic/Single Dwelling Landscape Landscape 7. Description **Architectural Classification** Materials (Enter categories from instructions) (Enter categories from instructions) Greek Revival foundation Stone/Granite walls Stone/Granite Late Victorian Colonial Revival Brick Stone/Slate roof other Asphalt

Narrative Description

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

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MAINE INSANE HOSPITAL (BOUNDARY INCREASE)

KENNEBEC, MAINE

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The Augusta Mental Health Institute occupies an approximately 90 acre site on a hill above the east bank of the Kennebec River. The institution stands across the river from the State Capitol building that is located at the end of a tree-lined mall on the west side of the Kennebec. Bounding the property on the east is Hospital Street, part of the state highway that parallels the Kennebec River. South of the nominated property is a mixture of farmland and scattered homes and businesses. To the north is the former United States Arsenal, a National Historic Landmark. The nominated property consists of a complex of 25 buildings, 16 of which are contributing and 9 are non-contributing, mostly on the periphery of the historic structures. The property also includes large portions of open land and designed landscape that is historically associated with the institution.

Inventory List

Contributing Buildings/Sites

1. Administration and Stone Buildings

The Administration Building, the central building in the complex and the first building erected for the insane asylum. The Stone Buildings are the two female wings (south and southeast) and two male wings (north and northeast). The Administration Building was built in 1836-40, John D. Lord of Hallowell, architect. The south wing was built in 1846-48 and the north wing was built in 1854-55, Henry Sawyer of Augusta, architect. Completing this complex is the northeast wing, built in 1865-66, and the southeast wing, built in 1869-70. Both of these wings were designed by Francis H. Fassett of Portland. This complex also features modifications made at the turn-of-the-century by the firms of George M. Coombs and Coombs & Gibbs, architects, Lewiston. The center section is seven bays wide and constructed of Hallowell granite. It is four stories high with gable roofs masked at each end by stepped end walls. There are six dormers on the roof of the Administration Building, one of which has been enlarged and rebuilt with a shed roof. Two granite chimneys also survive on the west slope of the roof. The windows are wood, six over six double hung sash. A monumental two-story Greek Revival style portico is in the center of the principal facade and is part of the original design. Extending from the entrance beneath this portico is a porte cochere of Concord granite added in 1892. This Romanesque style porte cochere was designed by George M. Coombs.

The Administration Building and the Stone Building wings reflect the prevailing theories for the design of insane asylums in the nineteenth century. The original asylum, consisting of the central block and two parallel wings, was the traditional institutional design for public institutions, such as hospitals and poor farms. At this stage in the evolution of theories for the treatment of the insane the basic objective was to provide for clean, sanitary accommodations. The two sets of wings added in the 1850s and 1860s reflect improvements made in response to the hope that patients could be put on the road to recovery by improving their care. Rooms with taller ceilings to provide more light and ventilation, dining areas, wash rooms and sitting rooms with balconies were the principal changes. There were also bedrooms for staff in the attic to facilitate twenty-four hour care. These changes, and the construction of the wings so that they are stepped-back from the central block, were part of what was known as the "Kirkbride plan," named after Dr. Thomas Kirkbride whose hospital in Pennsylvania was considered a model for the treatment of the insane.

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The interior finishes of the Administration and Stone Buildings retain elements of many of the changes made over the years. Sections of the 1840 central block have rooms with Greek Revival style woodwork. Much of the interior finishes in this section, however, date from the late 1880s and early 1890s when the administration area was remodeled under the direction of architect George M. Coombs. Of particular note is the central staircase and the rooms for the principal hospital administrators which have oak woodwork in the Colonial Revival style. All of the wings, including the two completed in 1840, were entirely gutted in the early 1900s for new steel and concrete floors, walls and ceilings designed by George Coombs and his partner Eugene Gibbs.

The Coombs firms designed several changes to the exterior as well during the period 1890-1914. Three story granite bay windows on all of the wings, metal roof ventilators, and granite secondary entrance porticos were added as part of the extensive interior renovations. The wood sleeping porches on the east side of the northeast male wing were added in 1914, Harry S. Coombs, architect.

2. Central Building

The Center Building is joined to the Administration Building via an underground tunnel and by a second story level enclosed corridor. Initially constructed in 1875-76 as a combined chapel, amusement hall and central kitchen, the building was designed by Francis H. Fassett of Portland. This building was renamed Coburn Hall in 1887 after it was enlarged and remodeled with a hip roof by George M. Coombs. Subsequent additions were made in 1909-10, Coombs & Gibbs, architects, and in 1958, Bunker & Savage, architects. The additions made by the Coombs firms provided for expansions to the kitchen and bakery on the ground floor, the amusement hall on the second floor, and dormitory space for employees on the third floor. Constructed of brick with granite trim, the building is a mixture of round arched and square headed windows that reflect different stages of construction. The original design was High Victorian Gothic, while the Coombs additions are Romanesque in character although harmonious in terms of scale and materials. Less sympathetic to the historic architecture are the 1958 extensions which are one and two stories with flat roofs and large multi-pane steel windows.

The interior was extensively remodeled in 1958 and 1981. There are, however, two rooms with original finishes. The chapel/amusement hall on the second floor dates from the original building with an extension made in 1887. This space includes the stage, ceiling trusses and balcony. The library also contains historic woodwork, stained dark in imitation of mahogany, and the six windows with colored art glass. The finishes in this room appear to date from the 1920s.

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3 & 4. Female and Male Pavilions

These two structures reflect the efforts to develop a "pavilion plan" for the hospital in which patients would reside in smaller residential scale units that created a more home-like environment. Attempts to build a new hospital based on this concept beginning n 1864, and a master plan designed by Francis Fassett was prepared in 1874. Lacking funds to build an entirely new hospital the trustees eventually constructed two pavilions, one for females and one for males. Both were designed in 1879 but the plans had to be scaled back due to budget constraints. By the time the Female Pavilion was built in 1881-82 and the Male Pavilion in 1883-84, architect Fassett had taken on John Calvin Stevens as a partner. Both were designed in the High Victorian Gothic style.

The two buildings are brick with mansard roofs having ornamental wood dormers. The bay windows and stair towers have steeply pitched hipped roofs with decorative iron cresting. The buildings have corbelled brick cornices and granite foundations. They are linked by second story level enclosed brick corridors supported by iron columns, which are original. Each were designed for 42 patients requiring minimal supervision. Both pavilions had parlors with bay windows to encourage visits by friends and relatives. Brick partitions and concrete floors contributed to the fire-proofing of the buildings. In keeping with the theories of the pavilion plan (also called "cottage plan"), the two buildings were linked by covered walkways to each other and to the administration building via the Central Building.

Major alterations to the exteriors of the pavilions consist of the construction of Tyson Hall to the north in 1920 and Elkins Hall to the east in 1949. The wood verandas were also removed. On the south side of the Male Pavilion is a one story brick gymnasium joined by a small connector and built in 1988. It is connected to the Male Pavilion at the northeast corner. Elements of original woodwork survive in the Female Pavilion.

Tyson Hall is a Georgian style structure designed by Harry S. Coombs. The three-story building is a rectangular wing extending from the Female Pavilion, although there is no stylistic similarity between the two sections. Tyson has multi-pane sash and belt courses marking the second and third floor levels. At the north end is a three-story sleeping porch. Originally designed with open wards, this wing was recently renovated for offices.

Attached to the rear (east) of the Male and Female Pavilions is Elkins Building. Built 1949-50 as a medical building for surgery and laboratories, Bunker & Savage were the architects. It is a three story brick building, flat roof, metal windows, cast stone trim that is now used for offices.

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National Park Service

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5. Harlow Pavilion

The increase in patient population made the concept of a hospital based upon the pavilion plan less economical. A compromise between the pavilion plan and the Kirkbride plan was settled upon with the construction of large sized patient dormitories that were free-standing with their own resident staff rather than multiple wings built around a central administration building. The first two structures added to the Augusta Insane Asylum that were built along these lines were Harlow Pavilion and the now demolished Sanborn Pavilion. Both were designed by George M. Coombs. Harlow was built in 1889-90, a three story brick building with a hip roof. Designed to accommodate 100 patients with staff sleeping quarters in the attic, it was linked to neighboring structures with elevated brick corridors. Harlow is a Romanesque style structure with sandstone trim. Romanesque style features include four-story pedimented pavilions with round arched windows marking the upper floor. Enclosed pedimented entrance porticos have doorways surmounted by round arched lunettes. At either end of the rectangular structure are three story polygonal bays.

Copper aprons and ventilators were added to the roof in 1904. In 1905 the fire escapes were added, and in 1913 the sleeping porches were constructed on the east elevation, Harry S. Coombs, architect. The interior was extensively remodeled in 1968-70.

6. CETA Building (Nurses Home)

Plans for the construction of a residential building for the nurses date from 1919-20, Harry S. Coombs architect. This increased professionalism of nursing staff led to the need for moving them out of third floor attic rooms to separate modern quarters. The building was not erected until 1927, by which time the plans were revised so that what was built is a less ornate example of Georgian Revival style design than what was originally conceived. The building has the appearance of a college dormitory with two wings, each having separate entrances and common rooms. It is three stories high with a low pitched hip roof and six over six double hung sash. There are two entrances on the sixteen bay west elevation, each framed by pilasters and a pediment. Directly above each entrance is a tall round arched stair hall window.

7. Ray Building

The Ray Building is the last of the major dormitory structures built for the Augusta Insane Asylum. Designed in 1935, it is the work of John Calvin and John Howard Stevens. Although designed in the Georgian Revival style, the exterior is similar in character to its closest neighbor, the Harlow Building. Designed in an H-shaped plan, there is a rectangular central section and two perpendicular wings, all of which have hip roofs. At each end of the building are three story bay windows.

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8. Warehouse

The warehouse was built in two sections, the oldest being the coal pocket for the boiler house. The coal pocket was built in 1897, Coombs, Gibbs & Wilkinson, architects. It is a one-story structure built below grade with a large entrance on its south side facing the road between the hospital and the former arsenal complex. Attached to the north side of the coal pocket is a brick structure that was erected as a warehouse in 1922, Bunker & Savage, architects. This building is concrete below grade and two stories with a flat roof and large multi-pane metal windows above grade. A one story wing extends from its east end adjacent to the former boiler house.

9. Engineering Building

The Engineering Building was built as the power house for the hospital in 1897, Coombs, Gibbs & Wilkinson, architects. It replaced an 1861 powerhouse and a 1879 gasometer on this site. The building consists of three sections, the boiler house, the engine room, and room for pumps and machinery. There were also rooms for "mechanical departments". Architecturally the building is in two sections, the west half being a one story brick building with a hip roof and monitor. On the north side is a tall round brick smokestack. The east half is a two story brick structure with a hip roof. Both sections have six over six double hung sash and flat stone lintels and sills. On the east side of the building is an enclosed pedimented portico in the Queen Anne style.

10. Carpentry Building

This one story brick building has a basement level partially above grade which gives the building an additional half story. Built in 1906-07, Coombs & Gibbs, architects, it has a hip roof sheathed in slate. At each end of the rectangular structure is a gable roof wall dormer with a round arch and two segmental arch windows. The basement level windows are segmental arch, as are the double doors accessed down a slopping drive. The windows on the body of the building are square headed with stone lintels.

11. Paint Shop

Built for plumbing, paint and upholstery repairs, this structure completes the group of utilitarian structures designed by Coombs & Gibbs in 1907. It is a one story brick building with a hip roof and windows with flat stone lintels.

12. Greenhouse and Headhouse

The greenhouse is rectangular with a brick foundation built on the site of earlier greenhouses. Attached to the north end is a one-story granite structure with a hip roof and six over six double hung sash. The greenhouse was built in 1909 and the granite headhouse in circa 1910.

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13. Farm Managers House

Purchased by the hospital in 1890, this house was probably constructed between 1830-1850. The Greek Revival style house is one-and-one-half stories high constructed of brick with flat granite lintels. It is five bays wide and has a gable roof and three wood gable roof dormers on its principal (east) facade. The building is L-shaped with a brick wing that features a gable roof parallel with the main roof, creating paired gable ends on the south facade. This wing was added in 1902 when the house was remodeled. It contained a kitchen and dormitory space for employees. The wood ell that extends from the south side of the brick ell is an nineteenth century woodshed and carriage barn wing, now covered in vinyl siding. It was moved back to accommodate the 1902 addition.

14. Campbell Barn

The Campbell Barn replaced the barn that was acquired with the Farm Managers House in 1890. The Campbell Barn is a horse barn erected in 1903, the last of a series of farm buildings designed for the hospital by Coombs & Gibbs. The timber frame barn is traditional construction with a brick foundation partially above grade. The superstructure has clapboard siding and a slate roof with a brick chimney and three metal ventilators. The front of the barn faces east and has two small horse doors and a large hay door with transom lights interspersed with windows for the horse stalls. At the north end of the barn is the tack room with a door flanked by windows. Double doors in the south gable end were probably part of the conveyor device for manure removal.

15. Norton House

This house appears to have been built in the nineteenth century as a one story dwelling. In 1894 it was enlarged by a story-and-one half and used for a gardener's residence.

16. Hospital Grounds

At its peak the institution consisted of approximately 566 acres of land extending from the Kennebec River east across Hospital Street. A large percentage of the land, approximately 400 acres, was on the east side of Hospital Street and consisted of woods, pasture, cultivated fields a small quarry and a reservoir. On the west side of the road with all of the buildings was approximately 125 acres, a mixture of pasture land, cultivated fields and landscaped land. The land in the nominated property was a mixture of pasture land extending down to the river where elements of the original granite wharf survive. The fields on the north side of the buildings, now partially lost due to parking areas, were traditionally pasture land that was part of the open space of the institution. Immediately adjacent to the contributing buildings is graded and landscaped land with walks and pathways added as early as the late nineteenth century. Opposite the entrance to the Administration Building is a wood gazebo built in 1955 to replace a nineteenth century gazebo.

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The following buildings and structures are non-contributing.

17. Laundry

The laundry was erected in 1958, Bunker & Savage, architects, on the site of a smaller laundry built in 1906-07, Coombs & Gibbs, architects. It is a one-story brick building with large multi-pane windows attached to the north side of the Engineering Building.

18. Greenlaw Building

Built 1955, three stories, brick with cast stone trim and flat roof. Constructed in a modified Y-shape with a central block and two wings. Originally built as a geriatric nursing home. The architects were Bunker & Savage.

19. Marquardt Building

Built of brick and concrete in 1959, Bunker & Savage, architects. Designed as a 160 bed ward for acutely psychotic patients.

20. Deering Building

Built of brick and concrete in 1957, Bunker & Savage, architects. Designed as an 80 bed isolation ward.

21. Activities Building

Constructed in 1988 for a gymnasium, this building is brick veneer, one story high, with a flat roof. Allied Engineers, architects.

22-25. Four Doctor's residences

Wood frame single family homes constructed in 1955-58 on hillside at north boundary of hospital adjacent to former Arsenal grounds.

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.
- \Box **C** a birthplace or a grave.
- D a cemetery.
- □ E a reconstructed building, object, or structure.
- \Box **F** a commemorative property.
- □ G less than 50 years of age or achieved significance within the past 50 years.

Narrative Statement of Significance

(Explain the significance of the property on one or more continuation sheets.) ____Lord, John D.

<u>_____</u>

County and State

Kennebec, Maine

Areas of Significance (Enter categories from instructions) Architecture Health/Medicine Landscape Architecture **Period of Significance** 1836-1951 Significant Dates N/A Significant Person (Complete if Criterion B is marked above) N/A **Cultural Affiliation** N/A Architect/Builder Fassett Francis H.

9. Major Bibliographical References

Bibliography

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

Previous documentation on file (NPS):

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

Primary location of additional data:

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

Name of repository:

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The Maine Insane Hospital (now known as the Augusta Mental Institution) is significant as one of the oldest and most architecturally intact nineteenth century mental health institutions in the country. With an original section having been built in 1835-40, the nominated property includes several additions and alterations that reflect the latest advances in thinking for the treatment of the mentally ill. The structures that make up this complex include a variety of ward buildings erected in the nineteenth and early twentieth centuries, as well as a largely intact power plant and support facilities. There are also structures representing the important agricultural components of the institution that provided income and therapeutic work for the patients. Moreover, the entire institution retains important aspect of its nineteenth century setting and grounds, particularly its commanding location above the Kennebec River nearly opposite to the historic State Capitol and Mall on the opposite side of the river. The semi-rural character of the buildings in this setting were considered an integral part of the treatment of the mentally ill in the nineteenth century. It is the intent of the boundary increase to recognize the significance of support facilities, early twentieth century features of the campus, and its landscape context.

The construction of the State Insane Asylum in Augusta followed shortly after the completion of the similar asylum for Massachusetts in the City of Worcester. Having been formerly part of Massachusetts until 1820, Maine's development of state institutions often followed precedents established by the Bay State. The capitol was located in Augusta in 1829, the same year that the State of Massachusetts issued a report on the need for a centrally located public institution for its mentally sick citizens. The hospital erected in Worcester in 1830-32 (demolished) served as a model for the design of the hospital in Augusta. Indeed, the Maine State Legislature specifically authorized Hallowell architect John D. Lord to construct a hospital based upon the Worcester institution, which he had visited along with ones in Charlestown and Hartford, Connecticut. In March 1834 \$20,000 was authorized from the sale of public lands to pay for the hospital. The land was purchased in 1835 and consisted of a 75 acre farm on the east bank of the Kennebec River south of the newly completed capitol building on the west bank. Both buildings were erected of Hallowell granite. The original complex was built in 1835-1840, following John D. Lord's plans. Lord himself supervised construction from November 7, 1835 to January 1, 1839 with final construction undertaken by another experienced architect-builder, Charles Keene. The completed hospital contained rooms for 126 patients.

The construction of both the Worcester and Augusta hospitals reflected major changes in thinking concerning the care and treatment of the insane. The rapid rise in population due to immigration and the increased mobility of the population over-burdened the private hospitals in the early nineteenth century. These private hospitals did not even include the traditional "care" that all too-often consisted of people keeping their sick relatives chained in prison-like conditions at home. The new theories of treatment of the mentally sick advocated by reformers such as Dorthea Dix called for the maintenance of the insane in conditions of both physical and moral purity. Moreover, patients were to be kept busy doing work for its therapeutic value. In practical terms this meant the patient rooms were to be clean and sanitary. Equally important, the grounds of the hospitals were to be open and convey a natural setting with a mixture of pasture lands and cultivated fields.

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In Worcester the original hospital consisted of a four story central block flanked by three story wings. This plan was also employed for Augusta as Lord had only existing precedents to follow for his design. The theoretical concepts behind the design of hospitals for the insane achieved a consensus in the work of Dr. Thomas Kirkbride and his Pennsylvania Hospital for the Insane of 1840. What quickly became known as the "Kirkbride Plan" played a major role in the early additions to the Augusta hospital, which were the south wing of 1846-48 and the north wing of 1854-55. Dr. Kirkbride advocated a hospital layout in which there was centralized administration building with wings stepped back from the central block to maximize natural light and ventilation. The administration section contained the offices for the physicians, medical facilities, kitchen and chapel. The patients, separated by sex, were located in the wings that contained rooms off long hallways. The Massachusetts hospitals at Taunton (1851) and Northampton (1855) were built following the Kirkbride plan.

In Augusta the growth in the number of patients led to the construction of additional male and female wings. Architect Henry Sawyer built the South Wing for men in 1846-48, and the North Wing for women in 1854-55. Although these granite wings appeared to mimic Lord's original design, there were several important modifications that reflected progressive theories in the treatment of patients. For example, additional light and improved ventilation in the rooms was obtained through higher ceilings. However, since the height of the new wings had to correspond to the existing building only the upper floor benefitted from these improvements, which was accomplished by placing the ceiling beams above the cornice line. In the new wing there was a kitchen in the basement with dining rooms directly above on each floor. Washrooms in the basement were directly below the sitting rooms added for each floor. There were also added what were called "verandas", but which were actually large windows with balconies and glazed folding doors with iron guards. Steam heat was also added, including in the main building. The improvements made were dealt a setback by a fire on December 4, 1850, which gutted the two male wings.

The reconstruction following the fire in 1851-52 allowed for further improvements. Dr. James Bates, the former supervisor of the asylum, consulted the directors of McLean Hospital near Boston and Kirkbride's Pennsylvania Hospital. According to a newspaper source, he also consulted with Philadelphia architect Samuel Sloan. The improvements made included a kitchen in the central block of the building that was large enough to accommodate future expansion, the construction of staff bedrooms in the attic level, and the creation of day rooms for patients. Also, six rooms in the rebuilt south wing were converted into suites for paying patients. The dining hall was also enlarged and fire-prevention measures taken, such as the construction of two large cisterns outside the male and female wings and hydrants in the wards.

The improvements to the rebuilt male wings were subsequently added to the female wings in 1854-55. Enlargements followed with the construction of the northeast wing of 1865-66 and the southeast wing of 1869-70. With an increase in patient population a chapel/amusement hall with a large new kitchen was constructed behind the Administration Building in 1875-76. Now known as the Central Building, this structure and the two new wings were designed by Francis H. Fassett of Portland, then Maine's leading architect. All of these changes, however, corresponded with the "Kirkbride Plan" of centralized administration for the patients.

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The grounds of the hospital were from the beginning considered an important aspect of the location of the institution. In the trustees report of 1840 the following statement was made:

"The spot is capable of being rendered one of the most delightful on earth. The prospect of the river, with the romantic scenery and beautiful villages, with which the banks are lined, is surpassingly beautiful. Let but the grounds of the hospital correspond to the scenery of the neighborhood, and few spots could compare with it."

This was reiterated in the report for 1848 when it was stated that the open land around the hospital contributed to the health of the patients. For this reason the land down to the river was kept open. The hospital wharf, first constructed in 1861, was located up river near the boundary with the Kennebec Arsenal. The actual grading and planting of trees adjacent to the Administration Building began in 1849. The trustees also early on obtained funding to acquire farmland adjoining the hospital. As early as 1840 patients were set to work in the fields with the justification that, "Employment of some kind is essential to the recovery of the insane, and even to keeping of a well person sane." Moreover, income derived from the sale of agricultural goods helped to defray the costs of operating the hospital.

Beginning in the years following the Civil War new theories of hospital design began to supplant the concepts of the Kirkbride Plan. The new theory was based upon the "Cottage Plan" consisting of small dispersed structures for the patients which tended to suggest a more domestic or home-like environment. At the same time there was a more refined approach to the hospital grounds, which were typically to be designed with numerous made-made improvements. In Massachusetts, and the country, the first full- blown example of this type of dispersed plan was the McLean Hospital in Belmont, begun in 1875. In Maine the trustees of the Augusta Hospital for the Insane began to consider this approach as early as 1864. There were actually two variations, the "cottage system" and the "pavilion plan". The former consisted of clusters of small freestanding buildings, while the latter had buildings linked by covered walk-ways could have the required light and ventilation that goes with a more domestic environment, yet benefit from improved economies of scale in terms of the number of structures built. Frances Fassett produced a report for a complex in the pavilion plan in 1874, which makes it contemporary with the Belmont hospital.

Improvements to the grounds also continued to be a major concern of the trustees. As early as 1863 in a report it was stated that, "The desire has long been in our heart, that the spacious ground in front, extending to the riverside, might be scientifically laid out and ornamented with trees and shrubs, walks and drive-ways, terraced hedges." Preliminary steps to achieve these improvements were not taken until 1868 when G. L. Vose of Paris, Maine, was hired to prepare a topographic survey of the grounds. In the following year Robert Morris Copeland of Boston, one of the leading landscape gardeners in the country, was hired to prepare a report for improvements to the grounds. The text of this report survives appended to the trustee's report of December 1, 1869. His recommendations included a main avenue twenty-five feet wide. This was presumably what is shown in a lithographic view published in 1892 as a tree-lined road running along the north side of the complex from Eastern Avenue to where it circles in front of the main building. The report recommended that the grounds in front of the hospital should be kept open

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with permanent lawn. Trees, shrubs and flowerbeds in many varieties were also called for, although the locations are not documented and the plans do not survive. The lost plans showed the suggested locations for a kitchen garden, greenhouse, conservatory and hothouse, as well as the relocation of the barns and improvements to culverts, etc.

Without Copeland's plans it cannot be clearly established how many of his recommendations were carried out. The trustees report of 1870 noted that, "The improvement of the grounds contemplated in the Copeland plan, we trust will from time to time continue to go forward as opportunity offers, till the place is made what it is designed to be, a most picturesque and attractive spot for the unfortunate class of community who need such influences for their comfort and restoration." The 1871 report established that the shade trees in front of the hospital, which are visible in early photographs, were taken out in conformance with Copeland's proposed open lawn. In the report of 1873 it was recorded that a "pleasant driveway" leading to the farm buildings had been completed, although its direction was somewhat altered from the Copeland plan. Concrete walks began to be constructed in 1880, and the road linking the asylum to the Arsenal was built in 1884.

Improvements to the grounds were frequently in conflict with the expansion of the facilities. The alteration of the road design mentioned above was in response to the construction of the 1871 chapel (demolished). By the late 1870s there was a debate about building a new hospital following Fassett's 1874 plan. In the end it was decided to construct new buildings behind the existing complex following the concept of the pavilion plan. Fassett, and his new partner John Calvin Stevens, designed the Female Pavilion in 1881-82 and the Male Pavilion in 1883-84. Designed in a High Victorian Gothic style, these structures were picturesque in character and thereby contrasted to the austere granite buildings. These two buildings constituted the extent of the pavilion plan at the Augusta hospital. Increases in patient population, which led to the construction of a large new facility in Bangor on the Kirkbridge plan, compelled the trustees to adopt a compromise between the congregate Kirkbride Plan and the dispersed pavilion plan. The new structures would be separate entities, but much larger than the pavilions. This compromise reflected the steady increase in patient population, which rose from an average of ninety in 1850 to an average of over 700 in 1900.

The next two buildings constructed for patients were Harlow and the now demolished Sanborn, erected in 1889-90. The architect, George M. Coombs of Lewiston, had begun a long association with the Augusta Insane Hospital in 1887 when he was hired to remodel the chapel and dining hall wing, which was renamed Coburn Hall. The Harlow and Sanborn Pavilions provided accommodations for 100 patients. The buildings featured the latest heating and ventilating systems, large circular bays for patient siting rooms, and the standard attic accommodations for staff. Both were designed in the fashionable Romanesque style. The Coombs firm, which later became Coombs & Gibbs, designed a number of improvements to the facilities over the next twenty years. In addition to remodeling the original portion of the institution, they designed a boiler house and coal pocket, a blacksmith shop, a laundry, and a carpenter shop.

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MAINE INSANE HOSPITAL (BOUNDARY INCREASE)

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KENNEBEC, MAINE

The Lewiston architects also supervised major expansions to the agricultural complex of the institution. From the beginning the ability to grow produce was considered an integral part of the institution. The justification was both to provide therapeutic value to the patients who would work in the fields, and to generate income to contribute toward self-sufficiency. Farmland on both the east and west sides of Eastern Avenue was acquired over the years. The large portion of what was left of the Hoyt Farm, consisting of over 21 acres adjacent to the hospital on the south side had been acquired in 1878. Major improvements to the institution's agricultural complex began with the acquisition of the Hoyt Farmhouse and four acres in 1890. This brick Greek Revival style house that dates from the 1830s or 1840s was assigned as a residence for the farm manager. The Coombs firm made significant improvements to the agricultural facilities with a hay barn and cow barn in 1895, a piggery and silo in 1896, and finally a horse barn in 1903. Most of these structures were replaced by various utilitarian buildings in the late twentieth century. Only the horse barn (Campbell Barn) is included in this nomination. A second residence, Norton House, dates from the nineteenth century. Reports of the trustees indicate that it was renovated for the assistant gardener with a second floor added in 1894.

In 1927 the tradition of allocating attic space in the ward buildings for medical staff was abandoned with the construction of the Nurses Home designed by Harry S. Coombs. This building was also located away from the main complex toward the old Arsenal property. Coombs, who had succeeded his father as the principal architect for the asylum, was first hired to prepare plans in 1919 but construction of this building was delayed for eight years. Coombs also designed the large Tyson Wing to the Female Pavilion in 1920, and major changes to the Harlow Pavilion.

The last major building for patients constructed prior to World War II was the Ray Building, erected in 1935 from designs by John Calvin and John Howard Stevens. This completed the series of separate ward buildings erected behind the original complex that began with the Male and Female Pavilions of the early 1880s. The Ray Building was designed in a Georgian Revival style that was compatible with the Nurses Home and Tyson Wing, and the 1917 remodeling of Harlow.

Masonry buildings added in the post-war period were constructed north of the Female Pavilion and the Harlow and Ray buildings. This area had historically not been allocated for any specific uses. These were the Marquardt Infirmary (1949), the Greenlaw Nursing Home (1955), and the Deering TB Building (1957). North of this group on the historic boundary between the asylum and the arsenal five doctor's residence were built. This completed the major construction at the hospital and reflected its period of peak population, which was 1,840 in 1956. Since that period the institution, first renamed the Augusta State Hospital in 1913, and finally the Augusta Mental Health Institute (AMHI) in 1973, declined to its numbers prior to the Civil War.

As a consequence to the decline in patient population a gradual process of conversion of buildings for governmental offices has occurred. Only the original core of pre-Civil War buildings are still used by AMHI. It is anticipated that these buildings will eventually also be converted for office space and a new mental hospital constructed near this site.

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MAINE INSANE HOSPITAL (BOUNDARY INCREASE)

Kennebec, Maine

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Bibliography

- Fuller, Margaret E., and Howard, Millard A. A History of the Augusta Mental Health Institute. Maine Vermont Longitudinal Research Project, 1988.
- Original architectural plans on file at the Augusta Mental Health Institution, Augusta.
- Report of the Commissioners of Investigation of the Insane Asylum, Made to the Governor and Council by Order of the Legislature, January, 1868. Augusta: Stevens & Sayward, Printers to the State, 1868.
- Reports of the Trustees and Superintendent of the Maine Insane Hospital. Augusta: Sprague, Owen & Nash, Printers to the State. Various Years.

Maine Insane Hospital (Boundary Increase) Name of Property	Kennebec, Maine County and State	
10. Geographical Data		
Acreage of Property <u>Approximately 90</u>		
UTM References (Place additional UTM references on a continuation sheet.)		
1 1 9 4 3 8 9 6 5 4 9 0 5 8 9 0	3 1 9 4 3 8 0 6 0 4 9 0 5 2 2 0	
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2 $\begin{bmatrix} 1 \\ 9 \end{bmatrix} \begin{bmatrix} 4 \\ 3 \\ 8 \end{bmatrix} \begin{bmatrix} 8 \\ 8 \\ 2 \\ 0 \end{bmatrix} \begin{bmatrix} 4 \\ 9 \\ 0 \\ 5 \\ 0 \\ 5 \end{bmatrix} \begin{bmatrix} 0 \\ 5 \\ 0 \end{bmatrix} \begin{bmatrix} 5 \\ 0 $	4 $\begin{bmatrix} 1 \\ 9 \end{bmatrix} \begin{bmatrix} 4 \\ 3 \\ 8 \end{bmatrix} \begin{bmatrix} 3 \\ 6 \\ 0 \end{bmatrix} \begin{bmatrix} 4 \\ 9 \\ 0 \end{bmatrix} \begin{bmatrix} 6 \\ 0 \\ 3 \\ 0 \end{bmatrix}$ See continuation sheet	
Verbal Boundary Description (Describe the boundaries of the property on a continuation sheet.)		
Boundary Justification (Explain why the boundaries were selected on a continuation sheet.)		
11. Form Prepared By		
name/title Roger G. Reed, Architectural Historian C	onsultant	
organization <u>Maine Historic Preservation Commission</u>	date October, 2000	
street & number _55 Capitol Street, 65 State House Station	telephone 207/287-2132	
city or town <u>Augusta</u> , state <u>Ma</u>	ine zip code04333-0065	
Additional Documentation		
Submit the following items with the completed form:		
Continuation Sheets		
Maps A USGS map (7.5 or 15 minute series) indicating the property	's location.	
A Sketch map for historic districts and properties having large acreage or numerous resources.		
Photographs		
Representative black and white photographs of the property	/.	
Additional items (Check with the SHPO or FPO for any additional items)		
Property Owner		
(Complete this item at the request of SHPO or FPO.)		
name		
street & number	telephone	
city or town	state zip code	

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

United States Department of the Interior

National Park Service

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MAINE INSANE HOSPITAL (BOUNDARY INCREASE)

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KENNEBEC, MAINE

Verbal Boundary Description

See map.

Boundary Justification

The boundary is drawn to enclose the entire campus of buildings that formed the Maine Insane Hospital, with the exception of an area to the south/southwest that was originally associated with the farm operations. This area has been substantially altered through the removal of several historic buildings and the addition of parking lots and new buildings. A portion of this area is also projected to be the site of a new mental health facility that will replace the existing historic campus. Those portions of the hospital which were not part of the original nomination, but are within the area of the boundary increase include several historic support buildings and the grounds, among which is the large swath of open space on the north side of the property that abuts the Kennebec Arsenal (NR 8/25/70, NHL 2/16/00).

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MAINE INSANE HOSPITAL (Boundary Increase) Section number _____ Page _____

KENNEBEC CO., ME

PHOTOGRAPHS

1 of 3 Kirk F. Mohney June, 2001 Maine Historic Preservation Commission View looking N, Ray Building to left

2 of 3 Kirk F. Mohney June, 2001 Maine Historic Preservation Commission View looking W, Ray Building to right

3 of 3 Kirk F. Mohney June, 2001 Maine Historic Preservation Commission View looking SE near Kennebec Arsenal boundary, CETA Building to left, powerplant and main complex to right

MAINE INSANE HOSPITAL (Boundary Increase) Augusta, Kennebec Co., Maine

Area of proposed boundary increase shown in cross hatching.

