

COLORADO CULTURAL RESOURCE SURVEY

Architectural Inventory Form

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- Date _____ Initials _____
- ___ Determined Eligible-National Register
 - ___ Determined Not Eligible - National Register
 - ___ Determined Eligible - State Register
 - ___ Determined Not Eligible - State Register
 - ___ Need Data
 - ___ Contributing to eligible National Register District
 - ___ Noncontributing to eligible National Register District



I. IDENTIFICATION

- 1. Resource number: **5PE.516.13** Parcel number(s):
- 2. Temporary resource number: **525139004**
- 3. County: **Pueblo**
- 4. City: **Pueblo**
- 5. Historic building name: **Parkview Hospital; Parkview Episcopal Hospital; Parkview Episcopal Medical Center**
- 6. Current building name: **Parkview Medical Center**
- 7. Building address: **400 W 16th Street**
- 8. Owner name: **Parkview Health Systems, Inc.**
- Owner organization:
- Owner address: **400 W 16th Street**
Pueblo, Colorado 81003

44. National Register eligibility field assessment:	<input type="checkbox"/> Individually eligible	<input checked="" type="checkbox"/> Not eligible	<input type="checkbox"/> Need data
Local landmark eligibility field assessment:	<input checked="" type="checkbox"/> Individually eligible	<input type="checkbox"/> Not eligible	<input checked="" type="checkbox"/> Need data

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II. GEOGRAPHIC INFORMATION

9. P.M.: **6th** Township: **20S** Range: **65W**
NE 1/4 of **SE 1/4** of **SW 1/4** of **NE 1/4** of Section **25**
10. UTM reference zone: **13**
Easting: **533909** Northing: **4236955**
11. USGS quad name: **Northeast Pueblo** Scale: **7.5**
Year: **1961 (Photorevised 1970 and 1974)**
12. Lot(s) : **L2-15 B8 BARTLETT&MILLER ADD; & ALLEY IN SD BLK; & 40FT 16TH ST ALG L9-15. ALL B28 BROWNS ADD; & ALLEY IN SD BLK; & 40FT 16TH ST. L2-8 B1 B&M ADD; & 40FT 16TH ST. ALSO N1/2 OF B29 BROWNS ADD; & 40FT 16TH ST. N1/2 ALLEY IN B1 B&M ADD & B29 BROWNS ADD.**
Addition: **Bartlett & Miller Addn; Henry C. Brown's Addn** Year of addition: **1871**
13. Boundary description and justification:
The boundary, as described above, contains but does not exceed the land historically associated with this property.
Metes and bounds exist:

III. ARCHITECTURAL DESCRIPTION

14. Building plan (footprint, shape): **Irregular Plan**
Other building plan descriptions:
15. Dimensions in feet (length x width): **394,712 square feet**
16. Number of stories: **6**
17. Primary external wall material(s): **Brick** Other wall materials:
Stucco
18. Roof configuration: **Flat Roof**
Other roof configurations:
19. Primary external roof material: **Synthetic Roof/Rubber Roof**
Other roof materials:
20. Special features: **Porte Cochère/Porte Cochere**
Chimney
Porch
Window/Oriel
21. General architectural description:
Oriented overall to the southeast, this building rests on a concrete foundation. It consists of an original building and 5-major additions.
1926 ORIGINAL HOSPITAL (WITH 1950 ADDITION)
Oriented to the north, the principal (north) façade of this 4-and-a-1/2-story building consists of a canted, 4-story, front-gabled bay protruding from the center of the elevation, with paired, front-gabled bays at either end of the façade. The walls consist of dark red bricks, set in a 5-over-1 common bond. False halftimbering, with cream-painted stucco and brown-painted timbers, cover everything above the third story. The stucco extends downward to the third story on the protruding, front-gabled bays. The half-timbering features a diamond in all of the gables and quatrefoils in a band separating the central bay's third and fourth

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stories. The half-timbered portions of the building protrude outward from the brick walls beneath them. Spanning from the 3rd to the 4th stories of the paired, front-gabled bays at either end of the façade are 3-sided oriels. A small, rectangular bay, hosting 3 windows, protrudes from the second story of the central bay. Crowning it is a wood cross. The original windows are 4- to 6-over-1-light, double-hung sash, with brown painted wood frames. The 1950 addition has similar windows, but with steel frames. The oriels in this addition have steel-frame, 5-light casement windows, with transoms. Many of the original windows have been replaced in the 1926 building and its 1950 addition. Replacements vary from 1-over-1-light, double-hung sash, with vinyl or aluminum frames, to 10-light casements, also with aluminum frames. The principal doorway into this portion of the building opens east of the center bay. It hosts plate-glass sliding doors. Other doorways also host plate-glass doors. Red-gray asphalt shingles cover the cross-gabled roof, and the rafter and perlin ends are exposed. The gable of the center bay hosts bargeboards.

1961/1966 SOUTH WING

Oriented to the south, this portion of the building is located between the 1926/1950 original building, to the north, and the later 1992 and 2002 additions, to the south. Only the upper 3 stories of the east end of the south elevation are still visible from street level. The walls consist of red brick in a 5-over-1 common bond. Windows are generally 4-light, with the smaller, bottom lights opening as hopper windows. They have brushed aluminum frames. Surrounding the top and sides of each window are concrete hoods. The top floor hosts a band of plate-glass windows and other window openings sheltered with heavy, concrete hoods. This portion of the building has a flat roof.

1970/1984 ADDITION

Oriented to the east, this single and 2-story addition extends southward from the rest of the hospital and houses the emergency department. The walls of the older, single-story portions of this addition are comprised of red brick, set in a 5-over-1 common bond. The newer, 2-story portions of the building are of concrete curtain-wall construction. The concrete panels comprising the walls are brown and have a coarse aggregate. This portion of the building has a flat roof.

1992 ADDITION

Oriented to the south, this addition is 4 stories with a large mechanical structure protruding as a 5th story. A red, raked-brick veneer, set in a 5-over-1 common bond, clads almost all of the exterior walls. However, a buff-white brick covers the mechanical structure and descends in a band along the west side of this addition's principal entrance. Windows host dark-tinted plate glass, with black aluminum frames. Most of the windows are 4-light, with the upper right light opening as a casement window. Spanning the 3 stories above the principal entrance, in a curved shaft appearing to float outward from the plane of the elevation, are bands of blue-tinted, plate-glass windows. The entrance hosts plate-glass doors. The northwest corner of this addition shelters the hospital's receiving docks. This portion of the building has a flat roof.

2002 ADDITION

Nearly identical to the 1992 addition, particularly the red, raked-brick walls and the windows, the 2002 addition is oriented to the southeast. Dominating the northeastern end of the elevation is the hospital's principal entrance. It consists of a flat-roof porte cochère, resting on brick piers. Spanning from the roof of the porte cochère to the roof of the building is a curved shaft of dark-brown glass. It hosts bands of plate-glass windows corresponding to each story. A glass-covered walkway and bridge extends eastward from the roof of the porte cochère and connects to the Parkview Medical Office Building, directly across Grand Avenue, at 1600 North Grand Avenue (5PE.5961). The principal doorway hosts automatic, sliding, plate-glass doors. This portion of the building has a flat roof.

22. Architectural style: **Other Style**
Modern Movements
Late 19th And 20th Century Revivals/Tudor Revival

Other architectural styles: **Postmodern**

Building type:

23. Landscape or special setting features:

This property is located on terrain sloping downward from southwest to northeast, with an elevation of around 4,700 feet above mean sea level. The neighborhood features towering medical office and residential buildings as well as modest and large residential structures. Most landscaping is limited to narrow strips along the roads (particularly along North Greenwood Street) and in isolated planting areas.

24. Associated buildings, features or objects: **No associated buildings identified.**

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IV. ARCHITECTURAL HISTORY

25. Date of Construction: Estimate: Actual: **1926 (original)**
 Source of Information: **McLeod, Paul J. "Comprehensive List of the Projects of Walter DeMordaunt, Architect, with a Brief Biography." Ms (photocopy). Special Collections, Robert Hoag Rawlings Public Library, Pueblo.**
Read, Marvin. "Parkview gala notes 75 years." Pueblo Chieftain, 1 September 1998.
26. Architect: **Wm. Stickney(1926); Walter DeMordaunt(1950, 61-65)**
 Source of information: **Rotary Club of Pueblo. Resolution naming William W. Stickney a posthumous honorary member, May 1958.**
27. Builder: **unknown**
 Source of information:
28. Original Owner: **Parkview Hospital**
 Source of information: **Read, Marvin. "Parkview gala notes 75 years." Pueblo Chieftain, 1 September 1998.**
29. Construction history:
The original hospital building was completed in 1926 and consisted of all of the Tudor Revival-style building except for the westernmost pair of front-gabled bays and the wing that extends behind them. While this portion of the building is nearly identical to the original structure, it is actually a 1950 addition. The next major addition occurred in 1961, with the construction of the 3-story "south wing," which spanned the entire south elevation of the 1926/1950 building. This addition moved the principal entrance from West 17th Street to West 16th Street. The hospital constructed an additional 3 stories to the south wing in 1966. The 1970 addition was a single-story wing extending southward from the 1961/1966 addition. In 1984, this wing was enhanced with a 2-story portion. The 1992 addition filled in the southwest corner of the hospital property with a 4-story building and improved the main entrance at West 16th Street and North Grand Avenue. The 2002 addition joined the 1992 addition to the main entrance, spanning the area with a 4-story block set at an angle . This project also again enlarged and improved the principal entrance.
30. Location: **original** Date of move(s):

V. HISTORICAL ASSOCIATIONS

31. Original use(s): **Hospital**
32. Intermediate use(s): **Hospital**
33. Current use(s): **Hospital**
34. Site type(s): **Medical Center**
35. Historical background:
Parkview Medical Center began as a response to one of the worst disasters to ever beset Pueblo, the great flood of June 1921. As the Arkansas River raged and left its banks, it cut off victims on the north side of the city from the area's only two hospitals, St. Mary's and Corwin, which were both located on the south side of the city. This convergence of geography and a natural disaster ultimately cost lives. But in 1923, a group of 6 Pueblo physicians established their own medical facility in Pueblo's North Side neighborhood, Parkview Hospital.
The hospital opened on March 17, 1923, in a converted house on the southwest corner of West 17th Street and North Grand Avenue. Not surprisingly, its board of directors largely consisted of the North Side neighborhood's most prominent men, including Mahlon Thatcher, Raymond Thatcher, Robert S. Gast, E.I. Crockett, Thomas A. Duke, and Sumner W. Pressey.
In 1926, Parkview completed a formal, four-story, 28-bed hospital building immediately west of the old house, along West 17th Street. While the new, L-shaped building was of modern, fireproof construction, architect William W. Stickney chose to decorate the building in the Tudor-revival style. By 1948, subsequent alterations expanded the bed capacity to 100.
The first major addition to the hospital was completed in 1950, just two years after the Episcopal Diocese of Colorado

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purchased Parkview. Designed by Stickney's successor, architect Walter DeMordaunt, the addition extended the original building to the west, but masterfully maintained the same proportions and Tudor style. This L-shaped building then turned the entire facility into a U, with the spine parallel to West 17th Street. This wing added another 50 beds to the facility.

DeMordaunt also designed the next major addition to the hospital, a three-story, 72-bed facility extending across the entire south elevation of the original hospital building and its 1950 addition. Completed in 1961, this addition, known as the south wing, was minimalist in style and moved the principal entrance from West 17th Street to West 16th Street. The most interesting architectural feature of this building were the concrete hoods over each of the windows. DeMordaunt designed this wing to accommodate additional stories and, in 1965, another three stories were added, including a top-floor solarium.

In 1970, Parkview expanded the single-story emergency department, extending from the main building's south elevation, to include also the surgery department. This addition required the hospital to permanently close West 16th Street between North Grand Avenue and Greenwood Street. With the simultaneous completion of the North Annex, on the northeast corner of West 17th and Greenwood streets, the hospital expanded its capacity to 350-beds, which it maintains today.

Parkview broke ground on another expansion to the emergency and surgery departments in 1984, adding a two-story structure to the existing single-story wing.

In the late 1980s, the Episcopal Diocese of Colorado leased the hospital to the Parkview Episcopal Hospital Association, which in turn contracted Parkview Health System to operate the facility. The diocese eventually began selling its interests in the hospital directly to Parkview Health System. Around 1992, Parkview Health System completed a four-story addition to the west end of the south elevation, providing a major entrance from North Greenwood Street, as well as a new lobby at North Grand Avenue and West 16th Street. In April 1997, the diocese sold its remaining interest in the hospital—the original Tudor-Revival building—to the health system for \$838,000.

The most recent addition was completed in 2002 and obscured almost all but the upper stories of the east end of the 1961/1965 addition. The 2002 addition was four stories and spanned at an angle (from southwest to northeast) the 1992 addition to a remodeled and expanded lobby. This project also provided better access to the pedestrian bridge connecting the main hospital to the Parkview Medical Office Building, at 1600 North Grand Avenue.

Today, Parkview is the region's only locally governed medical facility and is a leader in acute medical care and behavioral medicine. The facility provides cardiac and neurological surgery as well as a Level I trauma center. The hospital's service area includes Pueblo and 27 additional counties, covering 45,432 square miles or 43 percent of the entire state of Colorado. Parkview is the largest private sector employer in Pueblo with 1,950 employees.

36. Sources of information:

Brownell, Ada. "Episcopal diocese sells last hospital stake to Parkview." Pueblo Chieftain, 24 April 1997.

Golkin, Randie. "Parkview starts \$5 million expansion project." Pueblo Chieftain, 19 October 1989, p. 5A.

"Ground is broken on Parkview jobs." Pueblo Chieftain, 8 September 1984.

Hickman, Jeanne. "Work Nears Completion on Parkview Addition." Pueblo Chieftain.

McCain, Earl C. "Pueblo has full complement of modern hospitals." Undated article in the "Hospitals" file, Special Collections, Robert Hoag Rawlins Public Library, Pueblo.

"Parkview Episcopal Hospital Completing New Wing In 1949." Pueblo Star-Journal and Sunday Chieftain, 2 January 1949.

"Parkview Episcopal Hospital Expansion Project Readied." Pueblo Chieftain, 2 July 1969.

Read, Marvin. "Parkview gala notes 75 years." Pueblo Chieftain, 1 September 1998.

Sword, Loretta. "Parkview opens its doors to show off new 'home.'" Pueblo Chieftain, 12 June 2002.

Sword, Loretta. "Parkview poised for expansion." Pueblo Chieftain, 2 June 2000, p. 1A.

Vigil, Karen. "Parkview opens new lobby entrance Monday." Pueblo Chieftain, 15 March 2002.

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VI. SIGNIFICANCE

37. Local landmark designation: Yes No

Designation authority:

Date of designation:

38. Applicable National Register criteria:

- A. Associated with events that have made a significant contribution to the broad pattern of our history.
- B. Associated with the lives of persons significant in our past.
- C. Embodies the distinctive characteristics of a type, period, or method of construction, or represents the work of a master, or that possess high artistic values, or represents a significant and distinguished entity whose components may lack individual distinction.
- D. Has yielded, or may be likely to yield, information important in history or prehistory.
- Qualifies under Criteria Considerations A through G (see manual).
- Does not meet any of the above National Register criteria.

Pueblo Standards for Designation:1a. History Have direct association with the historical development of the city, state, or nation; or1b. History Be the site of a significant historic event; or1c. History Have direct and substantial association with a person or group of persons who had influence on society.2a. Architecture Embody distinguishing characteristics of an architectural style or type; or2b. Architecture Be a significant example of the work of a recognized architect or master builder, or2c. Architecture Contain elements of architectural design, engineering, materials, craftsmanship, or artistic merit which represent a significant or influential innovation;2d. Architecture Portray the environment of a group of people or physical development of an area of the city in an era of history characterized by a distinctive architectural style.3a. Geography Have a prominent location or be an established, familiar, and orienting visual feature of the contemporary city, or3b. Geography Promote understanding and appreciation of Pueblo's environment by means of distinctive physical characteristics or rarity; or3c. Geography Make a special contribution to Pueblo's distinctive character.Not Applicable Does not meet any of the above Pueblo landmark criteria.39. Area(s) of Significance: **Health/Medicine**
Architecture40. Period of Significance: **Architecture, 1926, 1950; Health/Medicine 1926-1956**41. Level of significance: National: State Local

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42. Statement of significance:

This property is historically significant under National Register Criterion A (Pueblo Local Landmark criterion 1A) for its association with the evolution of healthcare in Pueblo and with the development of the North Side Neighborhood. The hospital was created as a response to the great flood of 1921, when residents north of the Arkansas were cut off from hospitals south of the river. As well, the hospital building, particularly the original portion, is architecturally significant under National Register Criterion C (Pueblo Local Landmark Criterion 2A) as an intact example of the Tudor Revival applied on a massive scale. Similarly, it is significant under Local Landmark Criterion 2B (architect) for its association with master Pueblo architect William W. Stickney and his protégé Walter DeMordaunt. The property is significant under Local Landmark Criterion 3A as a major geographic feature, providing a point of orientation in the North Side. While the levels of architectural and historical significance, combined with physical integrity, for the entire building complex are not to the extent that this property would qualify for individual listing in the National Register of Historic Places, the original 1926 hospital building (administration building) and its 1950 addition could be eligible for individual listing in the Colorado State Register of Historic Places and as a City of Pueblo Landmark. The 1926/1950 portion could be considered a contributing resource within a potential historic district, but the remainder of the complex would be noncontributing.

43. Assessment of historic physical integrity related to significance:

Constructed in 1926 and modified many times since that date, overall this hospital exhibits a low level of physical integrity relative to the seven aspects of integrity as defined by the National Park Service and the Colorado Historical Society: location, setting, design, materials, workmanship, feeling, and association. The building has had several very major additions and modifications, many of which have obscured principal facades and fundamentally altered the massing of the building. However, the original 1926 building, considered on its own, retains moderate physical integrity. The only addition visible from the principal elevation is compatible in design and historic in its own right. Most of the major additions are contained behind (south of) this original building.

VII. NATIONAL REGISTER ELIGIBILITY ASSESSMENT

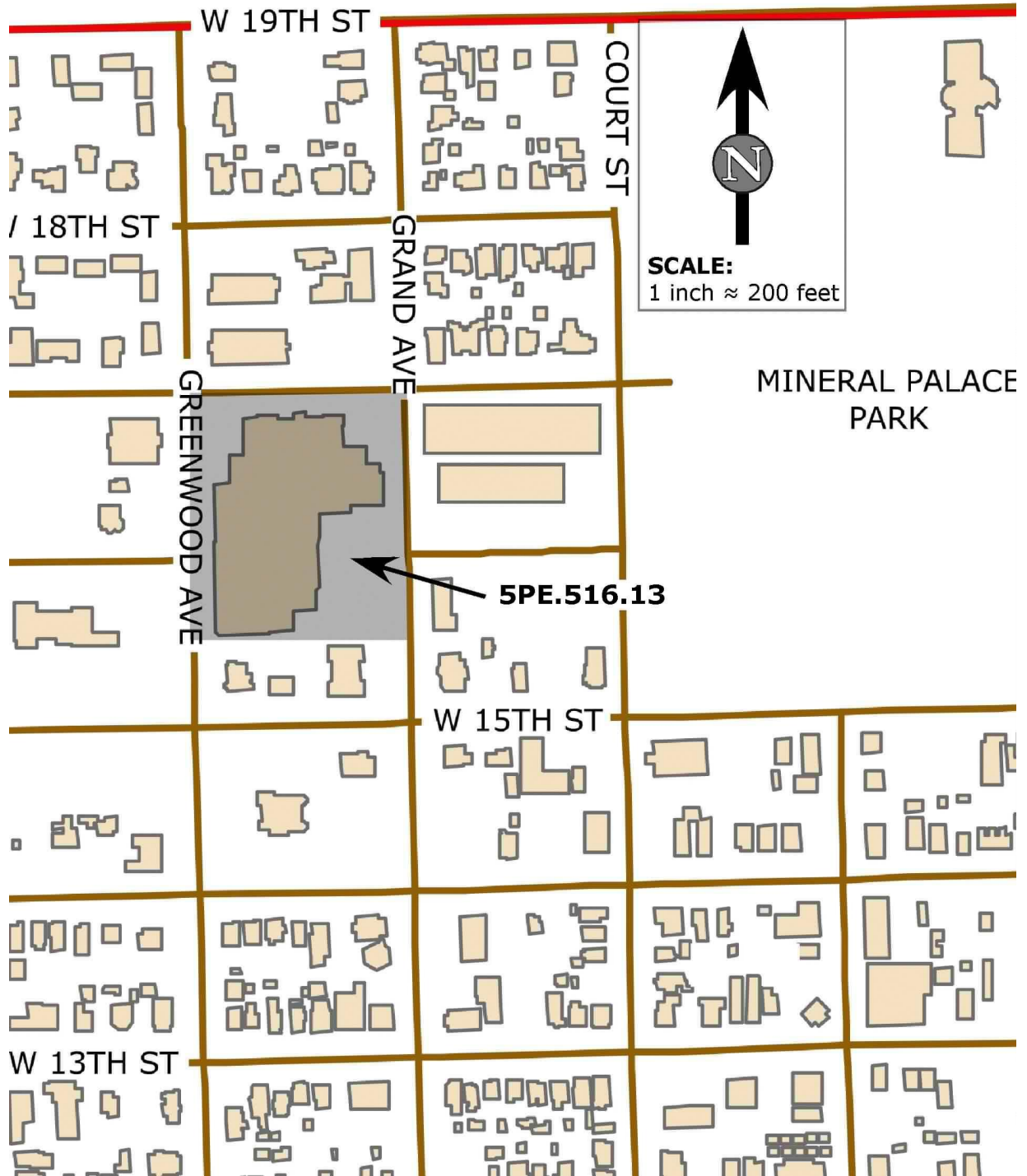
44. National Register eligibility field assessment: Individually eligible Not eligible Need data
Local landmark eligibility field assessment: Individually eligible Not eligible Need data
45. Is there National Register district potential? Yes No
- Discuss: **Pueblo's North Side Neighborhood represents the evolution of the city's professional middle and upper classes. Its diversity of architectural styles and forms directly represents the city's changing economic and cultural climates. As well, the neighborhood is distinctive because it appears to have evolved independently of the area's dominant industry, steel manufacturing.**
- If there is National Register district potential, is this building contributing: Yes No N/A
46. If the building is in existing National Register district, is it contributing: Yes No N/A

VIII. RECORDING INFORMATION

47. Photograph numbers): **CD-ROM Photo Disc: North Side Photos**
File Name(s): 16thstw400
- Negatives filed at: **Special Collections**
Robert Hoag Rawlings Public Library
100 East Abriendo Avenue
Pueblo, CO 81004-4290
48. Report title: **Pueblo North Side Neighborhood Survey**
49. Date(s): **11/06/06**
50. Recorder(s): **Adam Thomas**
51. Organization: **Historitecture, L.L.C.**
52. Address: **PO Box 419**
Estes Park, CO 80517-0419
53. Phone number(s): **(970) 586-1165**

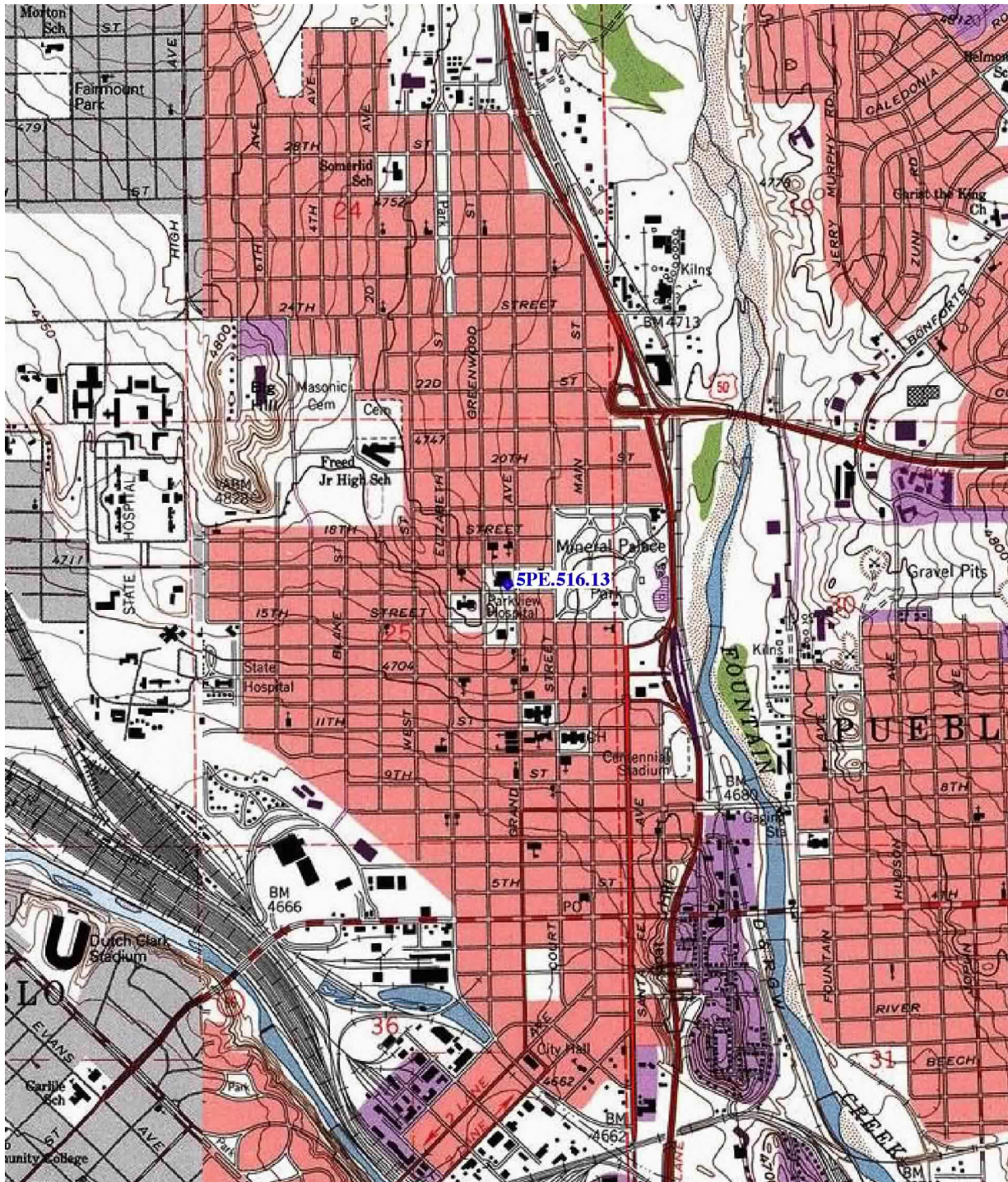
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SITE SKETCH MAP



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LOCATION MAP



Source: U.S. Geological Survey 7.5' Northeast Pueblo topographic quadrangle - 1961 (Photorevised 1970 and 1974)