

FACTSHEET

TITLE: **CHANGE OF ZONE NO. 15010 HP**
(Historic Landmark Designation)

BOARD/COMMITTEE: Planning Commission

APPLICANT: Madison Avenue Lofts, LLC

RECOMMENDATION: Approval (6-0: Hove, Sunderman, Corr, Cornelius, Beecham, and Scheer voting 'yes'; Lust, Harris and Weber absent).

STAFF RECOMMENDATION: Approval

OTHER DEPARTMENTS AFFECTED: N/A

SPONSOR: Planning Department

OPONENTS: None.

REASON FOR LEGISLATION:

Request for ordinance for Council action on **CHANGE OF ZONE NO. 15010**, for a change of zone to designate the former Nebraska Wesleyan Hospital located at North 48th Street and Madison Avenue, as B-3 PUD with Landmark Overlay (Neighborhood Business District Planned Unit Development with Landmark Overlay).

DISCUSSION/FINDINGS OF FACT:

1. This change of zone request for a planned unit development was heard before the Planning Commission on April 29, 2015.
2. The staff recommendation to approve this landmark designation is based on the "Analysis" as set forth on p.4, concluding that the landmark designation provides the protection of preservation guidelines and review by Historic Preservation Commission of future exterior changes to the historic property. Designation also provides eligibility for certain tax incentives for investing in rehabilitation of historic property. The staff presentation is found on p.8-9.
3. The applicant's testimony is found on p.9. One person testified in support; see p.9.
4. There was no testimony in opposition.
5. The Historic Preservation Commission held public hearing on this application on March 19, 2015, and recommended approval; see p.6-7.
6. The Preservation Guidelines will be attached to the Council ordinance. (See p.11-20)

FACTSHEET PREPARED BY: Geri Rorabaugh, Administrative Officer

DATE: May 4, 2015

REVIEWED BY: David R. Cary, Acting Director of Planning

DATE: May 4, 2015

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LINCOLN/LANCASTER COUNTY PLANNING STAFF REPORT

April 29, 2015 Planning Commission Meeting

PROJECT #: Change of Zone #15010--Landmark Designation--Former Wesleyan Hospital

PROPOSAL: Designation of the property at 2742 North 48th Street as a Landmark, from B-3 PUD (Neighborhood Business District Planned Unit Development) to B-3 PUD with Landmark Overlay (Neighborhood Business District Planned Unit Development with Landmark Overlay).

LOCATION: 2742 North 48th Street, Lincoln

LAND AREA: Less than one acre (3555 sq. ft.)

EXISTING ZONING: B-3 PUD Neighborhood Business District

WAIVER/MODIFICATION REQUEST: None

CONCLUSION: The landmark designation identifies and protects a modest-sized building in a traditional business district constructed as a private hospital and nurses training school. It is a unique resource associated with the development of medical care and nursing education. This request complies with the Zoning Ordinance and is consistent with the Comprehensive Plan.

| | |
|---|----------------------------------|
| RECOMMENDATION FOR CHANGE OF ZONE 15010: | Approval of Landmark designation |
|---|----------------------------------|

GENERAL INFORMATION:

LEGAL DESCRIPTION: Lot 1 and the north half of Lot 2, Baldwins Subdivision, Lincoln, Lancaster County, Nebraska.

EXISTING LAND USE: Vacant.

SURROUNDING LAND USE AND ZONING:

| | | |
|-------------------|--------------------|---------|
| East: | Parking and office | B-3 PUD |
| West: | Vacant land | B-3 PUD |
| North & South | Retail | B-3 PUD |
| Nearby, Northeast | Residential | R-6 |

ASSOCIATED APPLICATION: None

HISTORY:

- 1906** Built as Hotel Cecil (west portion) and Wesleyan Hospital and Nurses Training School (east portion), founded by Charles E. Coffin, M.D.
- 1908** Hospital corporation purchased Hotel Cecil and whole building became a hospital.
- 1912** Hospital & nursing school closed, Johnson Hall (boarding house) opened in building.
- 1916-18** Hospital reopened under various doctors; reverted to boarding house for soldiers studying at Nebraska Wesleyan University during WWI.
- 1926** University Place annexed into City of Lincoln, by mutual consent of voters of both incorporated places.
- 1928** William Seng acquired property, operated apartments in the building.
- Jan. 2009** The City Council approved Change of Zone 08057 to add the Planned Unit Development zoning to the existing B-3 zoning, adjusting parking, land use, and sign requirements.

UTILITIES: Served by all Lincoln utilities.

PUBLIC SERVICE: All Lincoln services, Lincoln Public School district.

ALTERATIVE USES: Landmark designation does not change the permitted uses in the B-3 PUD District.

COMPREHENSIVE PLAN SPECIFICATIONS:

Pg 1.9 - The Future Land Use Map of the Comprehensive Plan designates this area as Commercial.

Pg 4.6, 4.9- "Placemaking" chapter encourages identification and protection of broad range of historic resources, and incentives for maintenance and continued use.

ANALYSIS:

Lincoln Municipal Code, section 27.57.120 provides for designation of landmarks that are *"Associated with events, person, or persons who have made a significant contribution to the history, heritage, or culture of the City of Lincoln, the County of Lancaster, the State of Nebraska, or the United States."*

1. In the early 20th century, St. Elizabeth Hospital was the only general hospital in Lincoln or surrounding communities. Many doctors operated small private hospitals, often in their own homes or in converted residences, and several offered training for nurses, relying on students as a key part of the nursing staff. Wesleyan Hospital was a purpose-built small hospital and training school in the town of University Place and is now a rare surviving example of that building type.
2. The Historic Preservation Commission unanimously recommended the designation of the former Wesleyan Hospital as a landmark on March 19, 2015. Excerpts from the meeting record are attached.
3. The proposed preservation guidelines for 2742 North 48th St. (also attached) are based on typical guidelines for Lincoln Landmarks.
4. Designation of the former Wesleyan Hospital as a landmark provides the protection of preservation guidelines and review by Historic Preservation Commission of future exterior changes to the historic property. Designation also provides eligibility for certain tax incentives for investing in rehabilitation of historic property. The owner intends to rehabilitate the building for residential use, a purpose it has served since the 1920s.

Prepared by:

Ed Zimmer, 441-6360, ezimmer@lincoln.ne.gov
Historic Preservation Planner
April 3, 2015

APPLICANT: Madison Avenue Lofts, LLC
6501 Park Crest Drive
Lincoln, NE 68506
(402)429-3114
brettonharris@aol.com

OWNER: Same

CONTACT: Brett Harris
Same as above

Excerpt from
MEETING RECORD

NAME OF GROUP: HISTORIC PRESERVATION COMMISSION

DATE, TIME AND PLACE OF MEETING: Thursday, March 19, 2015, 1:30 p.m., Conference Room 214, 2nd Floor, County-City Building, 555 S. 10th Street, Lincoln, Nebraska

MEMBERS IN ATTENDANCE: Jim Hewitt, Jim Johnson, Berwyn Jones, Liz Kuhlman, Jim McKee and Greg Munn; (Tim Frances absent).
Also Ed Zimmer, and Amy Hana Huffman of the Planning Department; Kevin Abourezk from the *Lincoln Journal Star*.

STATED PURPOSE OF MEETING: Regular Historic Preservation Commission Meeting

APPLICATION BY BRETT HARRIS FOR DESIGNATION OF 2742 N. 48TH ST., THE FORMER WESLEYAN HOSPITAL AND NURSES TRAINING SCHOOL, AS A LANDMARK.

PUBLIC HEARING: **March 19, 2015**

Members present: Hewitt, Johnson, Jones, Kuhlman, McKee and Munn; Francis absent.

Zimmer stated this is the landmark request on this building and support of the rehabilitation of the building and conversion to apartments. There is a plan in place. It was built in 1906. Other than loss of windows and a coat of paint, there is good preservation on the exterior, including all of its pressed metal cornice and finials. It did lose its "1906" date plaque from the west cornice. The division of the building originally corresponded to the front portion being Hotel Cecil, and the back portion being Wesleyan Hospital. The hotel only lasted a year, then the entire building was the hospital, which operated until 1912. The month it closed, it reopened as a boarding house with rooms for two, four, or six. Only the windows may reflect some of the character of the two original uses. The high basement level has cast concrete foundation and ample light from garden-level windows. A rear door has been filled in but overall, the exterior has a good state of preservation. It is only 5 feet from property south of it.

The interior has been apartments since at least the 1920s. It was once owned by William Seng, who also built other apartments in University Place. The 1st floor is situated high above the sidewalk. The interior was gutted out by the preceding owner and so is stripped.

There are two staircases, seemingly one to the hospital and one to hotel, in the original configuration. Dr. William Coffin, who was previously the superintendent of the insane asylum, who opened this as a hospital and nurse training school. His house in on the other end of the block from this.

After nursing schools began to be regulated by the state, small nursing operations fell into disfavor as the larger hospitals became predominant training schools. Wesleyan Hospital's rapid demise is indicative of the changes going on with hospitals and training at the time. The applicant, Brett Harris, would also like to get it on the National Register for the Federal tax credits. There is question whether the interior question will block that.

Local landmark designation gives Harris potential for state credits. He is not saying that the project is dependent on these, but they are parts of the financing he is trying to put together as a project. He would redo it as apartments again. This is in support of creating the opportunities.

Zimmer are arguing its eligibility on the basis of hospital and nurse training history, noting that there is no interior to show what it looked like as a hospital. So the local designation and its benefits may be as far as this project can go. McKee noted that there is such a rich history with this building and encouraged attempting a National Register nomination. McKee stated that he thinks this is one of the key buildings in this community.

Zimmer said there were very good research sources with multiple public announcements about the stages the original hospital project went through. There are many very rich and detailed accounts of the events of the building. He cited the work of his planning colleague Stacey Hageman on this project.

ACTION:

Johnson moved approval for the designation of 2742 N. 48th Street, the former Wesleyan Hospital, as a landmark; seconded by Jones. Motion for approval carried 6-0: Hewitt, Johnson, Jones, Kuhlman, McKee and Munn voting 'yes'; Francis absent.

CHANGE OF ZONE NO. 15010

**CHANGE OF ZONE NO. 15010, TO DESIGNATE
THE FORMER NEBRASKA WESLEYAN HOSPITAL
AS A LANDMARK, CHANGING THE ZONING DISTRICT
FROM B-3 TO B-3 WITH LANDMARK OVERLAY, ON PROPERTY
GENERALLY LOCATED AT NORTH 48TH STREET AND
MADISON AVENUE.**

PUBLIC HEARING BEFORE THE PLANNING COMMISSION:

April 29, 2015

Members present: Hove, Beecham, Scheer, Corr, Cornelius, and Sunderman; Lust, Harris, and Weber absent.

Staff Recommendation: Approval of Landmark Designation.

There were no ex parte communications disclosed on this item.

Staff presentation: **Ed Zimmer of the Planning staff** provided an overview of this application for the Wesleyan Hospital and Nurses School building, which was built in 1906. The structure has had a number of uses, including that of a private doctors'-owned hospital until 1912, at which time it became a boarding house and private hospital, and was then converted to apartments in the 1920s. The structure is now under rehabilitation, and the application has been reviewed by the Historic Preservation Commission, which recommended approval to the Planning Commission as a landmark designation.

Staff Questions

Hove asked if the units will be rented. Zimmer stated that they are proposing 12+ units on three floors which will be rental units.

Beecham commented that the interior of the structure does not appear to have much of its original character maintained. Zimmer stated that this is true and indicated that some rehab was started by the previous owner. Zimmer noted that at one time, the front of the structure was a hotel and the back was used as the hospital. The uses were then combined and noted that the two separate staircases are likely related to the separate uses.

Hove asked what the landmark designation will provide to the structure. Zimmer explained that it provides protection so that the exterior of the structure will remain as it is. It also provides the applicant an opportunity to seek some State of Nebraska tax incentives. Zimmer noted that the Historic Preservation Commission will also seek a national register nomination. The local process provides for a little more flexibility, noting that the interior of the structure may impact that nomination. This nomination would provide the possibility of

a federal income tax credits, which would be very significant in supporting the project. They will make the best case that they can for the national register nomination. There are now two State of Nebraska possibilities as well, which should be open to the applicant with the local landmark designation.

Proponents:

Brett Harris, 6501 Park Crest Drive, Lincoln, NE 68506, the applicant, stated that they are seeking the landmark designation to protect the building and also to make it eligible for some of the tax incentives that might be available for rehabilitation of an historic structure.

Opponents: None.

Staff Questions: None.

ACTION BY PLANNING COMMISSION:

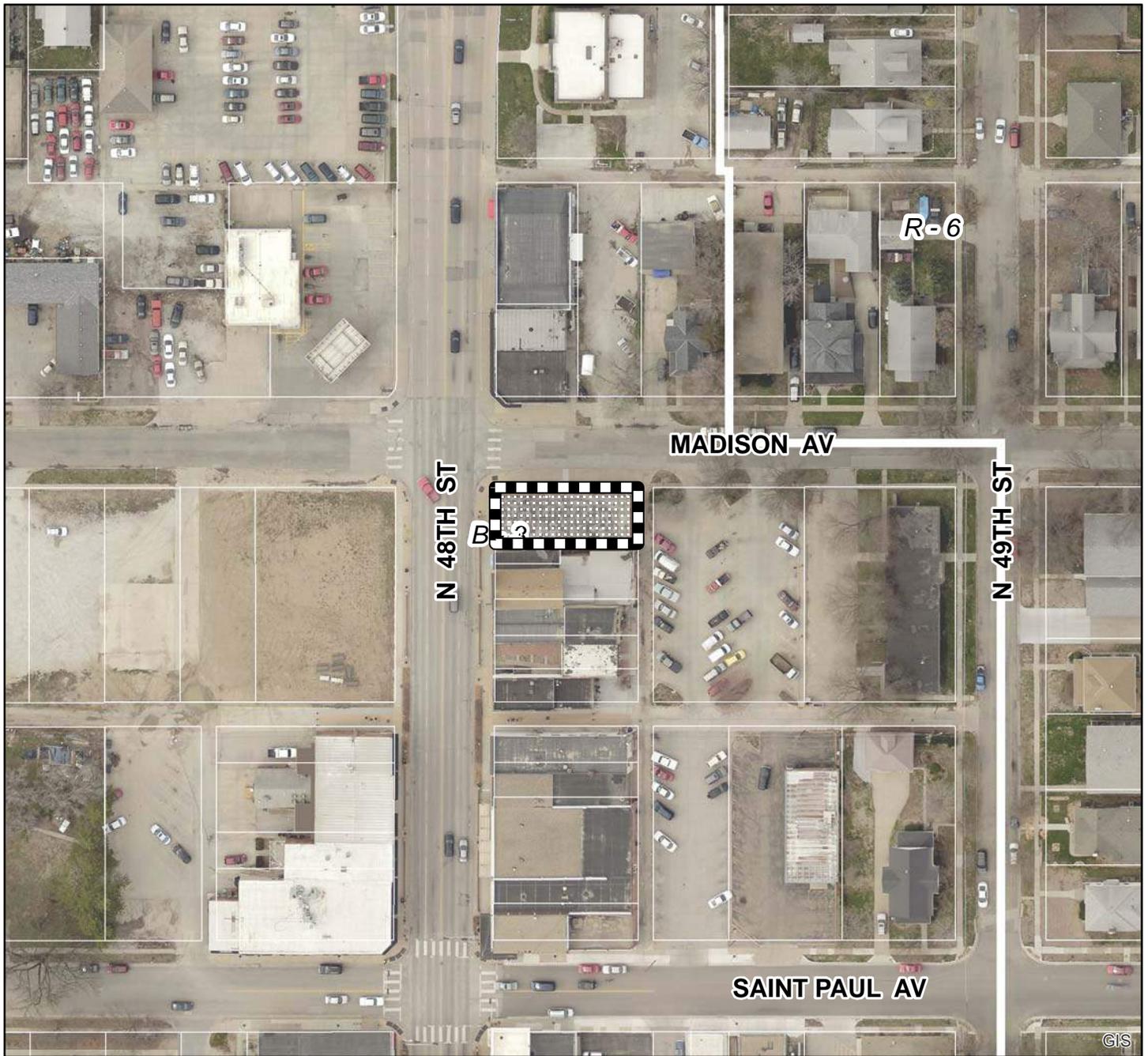
April 29, 2015

Beecham moved to recommend approval of the landmark designation; seconded by Scheer.

Beecham thanked Mr. Harris and his partners. She is delighted to have the opportunity vote for a project that helps preserve our heritage in Lincoln. She supports the application.

Corr stated that she agrees with Commissioner Beecham's comments, noting that she appreciates people who take the time to rehab these types of structures, as it oftentimes is more expensive to rehab these structures– she appreciates that.

The motion for approval of the landmark designation carried 6-0; Hove, Beecham, Scheer, Cornelius, and Sunderman: Corr and Cornelius absent.



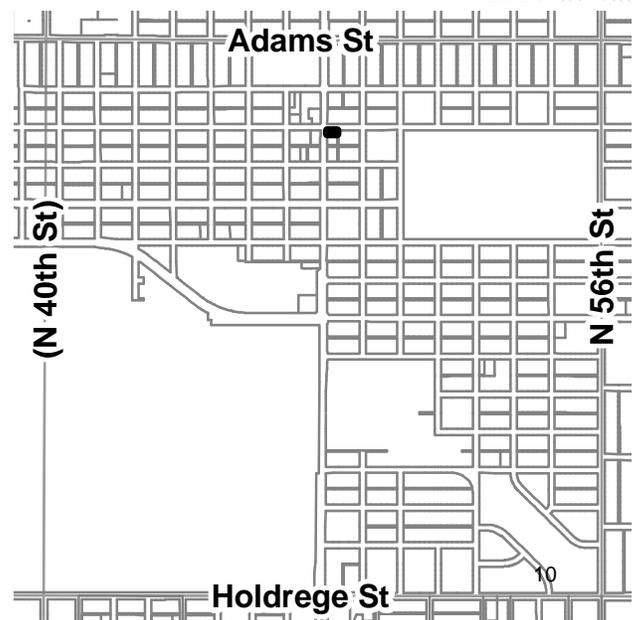
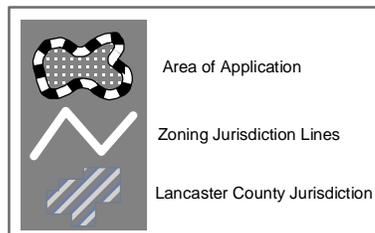
2013 aerial

**Change of Zone #: CZ15010
N 48th St & Madison Ave**

Zoning:

- R-1 to R-8 Residential District
- AG Agricultural District
- AGR Agricultural Residential District
- O-1 Office District
- O-2 Suburban Office District
- O-3 Office Park District
- R-T Residential Transition District
- B-1 Local Business District
- B-2 Planned Neighborhood Business District
- B-3 Commercial District
- B-4 Lincoln Center Business District
- B-5 Planned Regional Business District
- H-1 Interstate Commercial District
- H-2 Highway Business District
- H-3 Highway Commercial District
- H-4 General Commercial District
- I-1 Industrial District
- I-2 Industrial Park District
- I-3 Employment Center District
- P Public Use District

One Square Mile:
Sec.17 T10N R07E



Approved:

City Council _____
(date)

PRESERVATION GUIDELINES FOR
Former Wesleyan Hospital
2742 N. 48th Street, Lincoln, NE

1. Architectural Review of Landmark:

- a. Photographs: On file in Planning Department.
- b. Important architectural features:
 - Exterior:** Two-story on high basement, concrete foundation and brick walls, flat roof, decorative pressed metal cornice and finials;
 - Interior:** Gutted for rehabilitation as apartments.
- c. Important landscape features: narrow space to south includes stairs to basement
- d. Architectural style and date: late-nineteenth/early-twentieth century commercial, 1906
- e. Additions and modifications: windows have been altered, date plaque (1906) has been removed from west cornice, exterior brick painted, windows replaced.

2. Notice of Work Needing Certificate:

- A. A Certificate for Certain Work can be granted by the Preservation Commission or, in certain instances, by the Director of Planning. The application for the Certificate can be obtained from and should be filed with the Building and Safety Department. The following work to be conducted on the Landmark requires the procurement of a Certificate for Certain Work:
 1. Exterior work requiring a Building Permit as defined in the Lincoln Building Code. Before conducting exterior work, check with the City Building and Safety Department to determine whether a Building Permit is necessary;
 2. Demolition of a structure or portion of a structure as defined in the Lincoln Building Code;
 3. Work involving:
 - a. Replacement of exterior material and trim;
 - b. Cleaning and maintenance of exterior masonry;
 - c. Replacement of doors, storm doors, door frames, windows, storm windows, and screens (excluding seasonal) on north and west facades;
 - d. Addition of awnings;
 - e. Placement of mechanical systems, such as but not limited to, window air conditioners, solar collectors, etc visible from N. 48th or Madison Streets.;
 - f. The addition or replacement of signs;
 - g. Moving structures on or off the site;
 - h. Installation of electrical, utility, and communications services on principal north or west facades;
 - i. Placement of high intensity overhead lighting, antennae, and utility poles within the areas of the west or north facades.
- B. The following work to be conducted on the Landmark does not require the procurement of a Certificate for Certain Work:
 1. Changes involving routine maintenance and repair for the general cleaning and upkeep of the

- building but which include no direct physical change in design or material;
- 2. Interior changes involving no exterior alteration.

C. The penalty upon conviction for conducting work which requires a Certificate for Certain Work without procuring the Certificate or for doing work contrary to an issued Certificate is a fine not to exceed \$100.00. Each and every day that such violation continues after notification may constitute a separate offense. The City of Lincoln may also pursue the remedies of injunction, mandamus, or other appropriate action to correct a violation.

3. **Standards for Owner and Preservation Commission:**

The following standards serve as a guide to the Landmark property owner in the preservation of their building. It is also intended that these Standards will aid the Commission in making decisions regarding issuance or denial of a Certificate.

When a decision on issuing or denying a Certificate is requested, the more definitive the presentation by the applicant, the easier it will be to convey and comprehend the effect of the proposed change. The owner or representative should plan to attend the public hearing to discuss the proposed work. When an application is being reviewed, it will be the responsibility of the applicant to demonstrate that the new work is compatible with these Standards.

A strict interpretation of these guidelines may be waived by the Preservation Commission if the applicant develops a design solution which meets the spirit and intent of the Historic Preservation Ordinance. In addition, although the owner of the landmark must receive Certificates for work identified above, a broader interpretation of the Guidelines for this property may be allowed by the Preservation Commission.

The Secretary of the Interior's Standards for Rehabilitation of Historic Buildings

1. Every reasonable effort shall be made to provide a compatible use for a property which requires minimal alteration of the building, structure, or site and its environment, or to use a property for its originally intended purpose.
2. The distinguishing original qualities or character of a building, structure, or site and its environment shall not be destroyed. The removal or alteration of any historic material or distinctive architectural features should be avoided when possible.
3. All buildings, structures, and sites shall be recognized as products of their own time. Alterations that have no historical basis and which seek to create an earlier appearance shall be discouraged.
4. Changes which may have taken place in the course of time are evidence of the history and development of a building, structure, or site and its environment. These changes may have acquired significance in their own right, and this significance shall be recognized and respected.
5. Distinctive stylistic features or examples of skilled craftsmanship which characterize a building, structure, or site shall be treated with sensitivity.

6. Deteriorated architectural features shall be repaired rather than replaced, wherever possible. In the event replacement is necessary, the new material should match the material being replaced in composition, design, color, texture, and other visual qualities. Repair or replacement of missing architectural features should be physical, based on accurate duplications of features, substantiated by historic, physical, or pictorial evidence rather than on conjectural designs or the availability of different architectural elements from other buildings or structures.
7. The surface cleaning of structures shall be undertaken with the gentlest means possible. Sandblasting and other cleaning methods that will damage the historic building material shall not be undertaken.
8. Every reasonable effort shall be made to protect and preserve archeological resources affected by, or adjacent to any project.
9. Contemporary design for alterations and additions to existing properties shall not be discouraged when such alterations and additions do not destroy significant historical, architectural or cultural material, and such design is compatible with the size, scale, color, material, and character of the property, neighborhood or environment.
10. Wherever possible, new additions or alterations to structures shall be done in such a manner that if such additions or alterations were to be removed in the future the essential form and integrity of the structure would be unimpaired.

**GUIDELINES FOR APPLYING
THE SECRETARY OF THE INTERIOR'S STANDARDS FOR REHABILITATION
THE ENVIRONMENT**

Recommended

Retaining distinctive features such as the size, scale, mass, color, and materials of buildings, including roofs, porches, and stairways that give a neighborhood its distinguishing character.

Retaining landscape features such as parks, gardens, street lights, signs, benches, walkways, streets, alleys and building set-backs that have traditionally linked buildings to their environment.

Using new plant materials, fencing, walkways, street lights, signs and benches that are compatible with the character of the neighborhood in size, scale, material and color.

Not Recommended

Introducing new construction into neighborhoods that is incompatible with the character of the district because of size, scale, color, and materials.

Destroying the relationship of buildings and their environment by widening existing streets, changing paving material, or by introducing inappropriately located new streets and parking lots that are incompatible with the character of the neighborhood.

Introducing signs, street lighting, benches, new plant materials, fencing, walkways and paving materials that are out of scale or inappropriate to the neighborhood.

BUILDING SITE

Recommended

Identifying plants, trees, fencing, walkways, outbuildings, and other elements that might be an important part of the property's history and development.

Retaining plants, trees, fencing, walkways, street lights, signs, and benches that reflect the property's history and development.

Not recommended

Leaving plant materials and trees in close proximity to the building that may be causing deterioration of the historic fabric.

Recommended

Basing decisions for new site work on actual knowledge of the past appearance of the property found in photographs, drawings, newspapers, and tax records. If changes are made, they should be carefully evaluated in light of the past appearance of the site.

Providing proper site and roof drainage to assure that water does not splash against building or foundation walls, nor drain toward the building.

Not Recommended

Making changes to the appearance of the site by removing old plants, trees, fencing, walkways, outbuildings, and other elements before evaluating their importance in the property's history and development.

BUILDING: STRUCTURAL SYSTEMS

Recommended

Recognizing the special problems inherent in the structural systems of historic buildings, especially where there are visible signs of cracking, deflection, or failure.

Undertaking stabilization and repair of weakened structural members and systems.

Replacing historically important structural members only when necessary. Supplementing existing structural systems when damaged or inadequate.

Not Recommended

Disturbing existing foundations with new excavations that undermine the structural stability of the building.

Leaving known structural problems untreated that will cause continuing deterioration and will shorten the life of the structure.

BUILDING: EXTERIOR FEATURES

Masonry: Adobe, brick, stone, terra cotta, concrete, stucco and mortar

Recommended*

Retaining original masonry and mortar, whenever possible, without the application of any surface treatment.

Repointing only those mortar joints where there is evidence of moisture problems or when sufficient mortar is missing to allow water to stand in the mortar joint.

Duplicating old mortar in composition, color and texture.

Duplicating old mortar in joint size, method of application, and joint profile.

Repairing stucco with a stucco mixture that duplicates the original as closely as possible in appearance and texture.

Cleaning masonry only when necessary to halt deterioration or to remove graffiti and stains and always with the gentlest method possible, such as low pressure water and soft natural bristle brushes.

Repairing or replacing, where necessary, deteriorated material with new material that duplicates the old as closely as possible.

Replacing missing significant architectural features, such as cornices, brackets, railings, and shutters.

Not Recommended

Applying waterproof or water repellent coatings or surface consolidation treatments unless required to solve a specific technical problem

that has been studied and identified. Coatings are frequently unnecessary, expensive, and can accelerate deterioration of the masonry.

Repointing mortar joints that do not need repointing. Using electric saws and hammers to remove mortar can seriously damage the adjacent brick.

Repointing with mortar of high Portland cement content can often create a bond that is stronger than the building material. This can cause deterioration as a result of the differing coefficient of expansion and the differing porosity of the material and the mortar.

Repointing with mortar joints of a differing size or joint profile, texture or color.

Sandblasting, including dry and wet grit and other abrasives, brick or stone surfaces; this method of cleaning erodes the surface of the material and accelerates deterioration. Using chemical cleaning products that would have an adverse chemical reaction with the masonry materials, i.e., acid on limestone or marble.

Applying new material which is inappropriate or was unavailable when the building was constructed, such as artificial brick siding, artificial cast stone or brick veneer.

Removing architectural features such as cornices, brackets, railings, shutters, window architraves and doorway pediments.

Masonry: Adobe, brick, stone, terra cotta, concrete, stucco and mortar-----Continued

Retaining the original or early color and texture of masonry surfaces, including early signage wherever possible. Brick or stone surfaces may have been painted or whitewashed for practical and aesthetic reasons.

Removing paint from masonry surfaces indiscriminately. This may subject the building to damage and change its appearance.

*For more information consult Preservation Briefs: 1: “The Cleaning and Waterproof Coating of Masonry Buildings” and Preservation Briefs: 2: “Repointing Mortar Joints in Historic Brick Buildings.” Both are available from Technical Preservation Services Division, Heritage Conservation and Recreation Service, U. S. Department of the Interior, Washington, D.C. 20240

Wood: Clapboard, weatherboard, shingles and other wooden siding

Recommended

Retaining and preserving significant architectural features, whenever possible.

Repairing or replacing, where necessary, deteriorated material that duplicates in size, shape and texture the old as closely as possible.

Not Recommended

Removing architectural features such as siding, cornices, brackets, window architraves, and doorway pediments. These are, in most cases, an essential part of a building’s character and appearance that illustrates the continuity of growth and change.

Resurfacing frame buildings with new material that is inappropriate or was unavailable when the building was constructed such as artificial stone, brick veneer, asbestos or asphalt shingles, and plastic or aluminum siding. Such material can also contribute to the deterioration of the structure from moisture and insects.

Architectural Metals: Cast iron, steel, pressed tin, aluminum, zinc

Recommended

Retaining original material, whenever possible.

Not Recommended

Removing architectural features that are an essential part of a building’s character and appearance, illustrating the continuity of growth and change.

Architectural Metals: Cast iron, steel, pressed tin, aluminum, zinc ----- Continued

Cleaning when necessary with the appropriate method. Metals should be cleaned by methods that do not abrade the surface.

Exposing metals which were intended to be protected from the environment. Do not use cleaning methods which alter the color, texture, and tone of the metal.

Roofs and Roofing

Recommended

Preserving the original roof shape.

Retaining the original roofing material, whenever possible.

Providing adequate roof drainage and insuring that the roofing materials provide a weather-tight covering for the structure.

Replacing deteriorated roof coverings with new material that matches the old in composition, size, shape, color, and texture.

Preserving or replacing, where necessary, all architectural features that give the roof its essential character, such as dormer windows, cupolas, cornices, brackets, chimneys, cresting, and weather vanes.

Windows and Doors

Recommended

Retaining and repairing existing window and door openings including window sash, glass, lintels, sills, architraves, shutters, doors, pediments, hoods, steps, and all hardware

Not Recommended

Changing the essential character of the roof by adding inappropriate features such as dormer windows, vents, or skylights.

Applying new roofing material that is inappropriate to the style and period of the building and neighborhood.

Replacing deteriorated roof coverings with new materials that differ to such an extent from the old in composition, size, shape, color, and texture that the appearance of the building is altered.

Stripping the roof of architectural features important to its character.

Not Recommended

Introducing new window and door openings into the principal elevations, or enlarging or reducing window or door openings to fit new stock window sash or new stock door sizes.

Windows and Doors ----- Continued

Duplicating the material, design, and the hardware of the older window sash and doors if new sash and doors are used.

Installing visually unobtrusive storm windows and doors, where needed, that do not damage existing frames and that can be removed in the future.

Using original doors and door hardware when they can be repaired and reused in place.

Altering the size of window panes or sash. Such changes destroy the scale and proportion of the building.

Installing inappropriate new window or door features such as aluminum storm and screen window insulating glass combinations that require the removal of original windows and doors.

Installing plastic, canvas, or metal strip awnings or fake shutters that detract from the character and appearance of the building.

Discarding original doors and door hardware when they can be repaired and reused in place.

Entrances, Porches, and Steps

Recommended

Retaining porches and steps that are appropriate to the building and its development. Porches or additions reflecting later architectural styles are often important to the building's historical integrity and, wherever possible, should be retained.

Repairing or replacing, where necessary, deteriorated architectural features of wood, iron, cast iron, terra cotta, tile, and brick.

Not Recommended

Removing or altering porches and steps that are appropriate to the building's development and style.

Stripping porches and steps of original material and architectural features, such as handrails, balusters, columns, brackets, and roof decoration of wood, iron, cast iron, terra cotta, tile and brick.

Enclosing porches and steps in a manner that destroys their intended appearance.

Exterior Finishes

Recommended

Discovering the historic paint colors and finishes of the structure and repainting with those colors to illustrate the distinctive character of the property.

Not Recommended

Removing paint and finishes down to the bare surface; strong paint strippers whether chemical or mechanical can permanently damage the surface. Also, stripping obliterates evidence of the historical paint finishes. Repainting with colors that cannot be documented through research and investigation to be appropriate to the building and neighborhood.

NEW CONSTRUCTION

Recommended

Keeping new additions and adjacent new construction to a minimum, making them compatible in scale, building materials, and texture.

Designing new work to be compatible in materials, size, scale, color, and texture with the earlier building and the neighborhood.

Using contemporary designs compatible with the character and mood of the building or the neighborhood.

Protecting architectural details and features that contribute to the character of the building. Placing television antennas and mechanical equipment, such as air conditioners, in an inconspicuous location.

Not Recommended

Designing new work which is incompatible with the earlier building and the neighborhood in materials, size, scale, and texture.

Imitating an earlier style or period of architecture in new additions, except in rare cases where a contemporary design would detract from the architectural unity of an ensemble or group. Especially avoid imitating an earlier style of architecture in new additions that have a completely contemporary function such as a drive-in bank or garage.

Adding new height to the building that changes the scale and character of the building. Additions in height should not be visible when viewing the principal facades.

Adding new floors or removing existing floors that destroy important architectural details, features and spaces of the building.

Placing television antennas and mechanical equipment, such as air conditioners where they can be seen from the street.

MECHANICAL SYSTEMS: Heating and Air Conditioning, Electrical, Plumbing, Fire Protection

Recommended

Installing necessary mechanical systems in areas and spaces that will require the least possible alteration to the structural integrity and physical appearance of the building.

Utilizing early mechanical systems, including plumbing and early lighting fixtures, where possible.

Installing the vertical runs of ducts, pipes, and cables in closets, service rooms, and wall cavities.

Insuring adequate ventilation of attics, crawlspaces, and cellars to prevent moisture problems.

Installing thermal insulation in attics and in unheated cellars and crawlspaces to conserve energy.

Not Recommended

Causing unnecessary damage to the plan, materials, and appearance of the building when installing mechanical system.

Attaching exterior electrical and telephone cables to the principal elevations of the building.

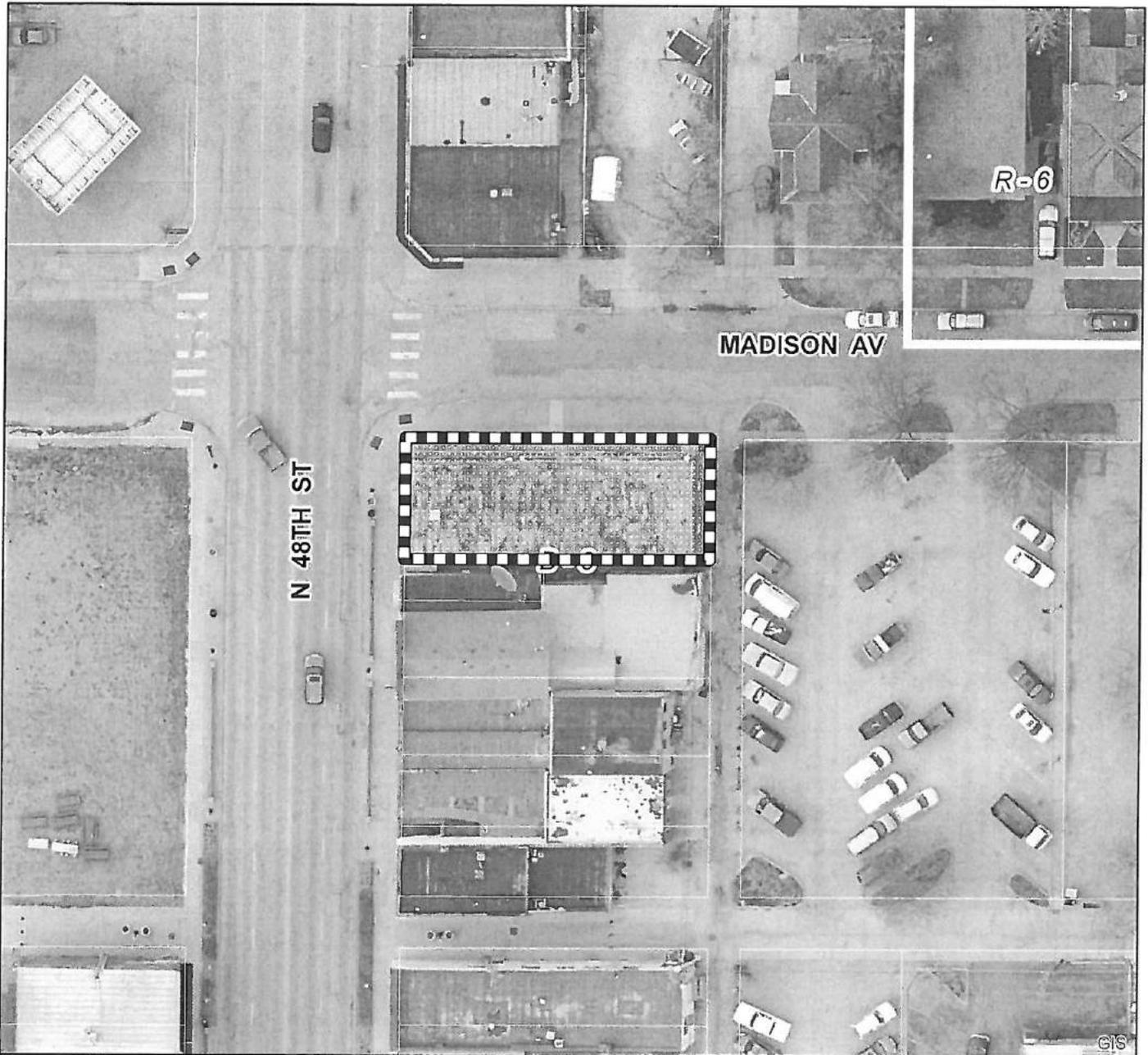
Installing the vertical runs of ducts, pipes, and cables in places where they will be a visual intrusion.

Concealing or “making invisible” mechanical equipment in historic walls or ceilings. Frequently this concealment requires the removal of historic fabric.

Installing “dropped” acoustical ceilings to hide mechanical equipment. This destroys the proportions and character of the rooms.

Installing foam, glass fiber, or cellulose insulation into wall cavities of either wooden or masonry construction. This has been found to cause moisture problems when there is no adequate moisture barrier.

F:\LongRange\Historic\Landmarks\LMARKS\GDLINES\GuideWesleyanHospital.doc



Change of Zone #: CZ15010
N 48th St & Madison Ave

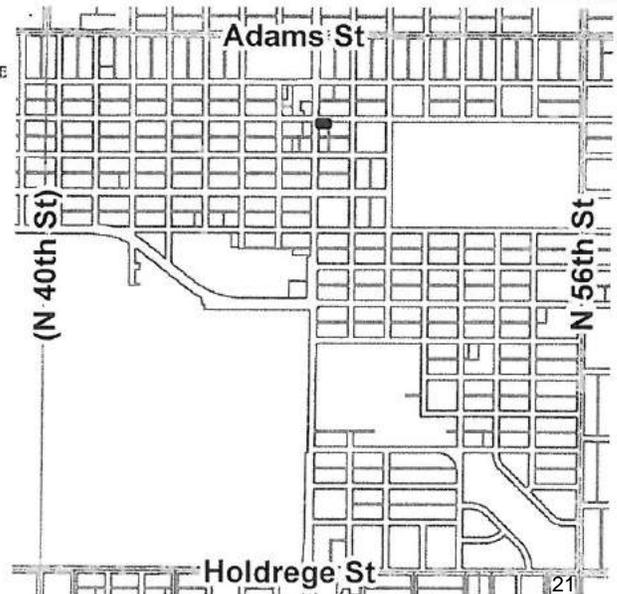
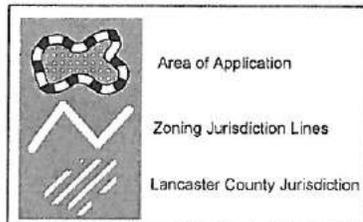
2013 aerial



One Square Mile:
 Sec. 17 T10N R07E

Zoning:

- R-1 to R-8 Residential District
- AG Agricultural District
- AGR Agricultural Residential District
- O-1 Office District
- O-2 Suburban Office District
- O-3 Office Park District
- R-T Residential Transition District
- B-1 Local Business District
- B-2 Planned Neighborhood Business District
- B-3 Commercial District
- B-4 Lincoln Center Business District
- B-5 Planned Regional Business District
- H-1 Interstate Commercial District
- H-2 Highway Business District
- H-3 Highway Commercial District
- H-4 General Commercial District
- I-1 Industrial District
- I-2 Industrial Park District
- I-3 Employment Center District
- P Public Use District



APPLICATION FOR LANDMARK OR LANDMARK DISTRICT DESIGNATION
ADDENDUM TO PETITION TO AMEND THE ZONING ORDINANCE
LINCOLN, NEBRASKA

1. NAME
Historic and/or Common NeHBS Site Wesleyan Hospital & Nurses Training School
LC13:F12-394
2. LOCATION
Address 2742 N. 48th St., Lincoln, NE 68504
3. CLASSIFICATION
- | <u>Proposed Designation</u> | <u>Category</u> | |
|--|---|--|
| <input type="checkbox"/> Landmark District | <input type="checkbox"/> district | <input type="checkbox"/> site |
| <input checked="" type="checkbox"/> Landmark | <input checked="" type="checkbox"/> building(s) | <input type="checkbox"/> object |
| | <input type="checkbox"/> structure | |
| <u>Present Use</u> | | |
| <input type="checkbox"/> agriculture | <input type="checkbox"/> industrial | <input type="checkbox"/> religious |
| <input type="checkbox"/> commercial | <input type="checkbox"/> military | <input type="checkbox"/> scientific |
| <input type="checkbox"/> educational | <input type="checkbox"/> museum | <input type="checkbox"/> transportat'n |
| <input type="checkbox"/> entertainment | <input type="checkbox"/> park | <input checked="" type="checkbox"/> other (vacant) |
| <input type="checkbox"/> government | <input type="checkbox"/> private residence | |

4. OWNER OF PROPERTY
- Name Madison Avenue Lofts LLC
Address 6501 Park Crest Dr., Lincoln, NE 68506

5. GEOGRAPHICAL DATA
- Legal Description Lot 1 and N ½ Lot 2, Baldwins Subdivision, Lincoln, Lanc. County, NE
- Property ID Number 17-17-214-004-000
- Number of Acres or Square Feet: **(more or less)** 3555 sq. ft.

6. REPRESENTATION IN EXISTING SURVEYS
- Title Historical and Architectural Survey of Lincoln, NE
- Date ongoing _____ State County Local
- Depository for survey records Lincoln/Lancaster County Planning Dept.
- City Lincoln State Nebraska

Is proposed Landmark or Landmark District listed in the National Register?

yes, date listed

no

7. DESCRIPTION AND HISTORY

Condition

excellent

deteriorated

unaltered original site

good

ruins

altered moved date

fair

unexposed

7. DESCRIPTION AND HISTORY, CONT.

DESCRIPTION:

Summary Paragraph

The former Wesleyan Hospital and Nurse Training School and Hotel Cecil in the University Place neighborhood of Lincoln, Lancaster County, Nebraska is a two-story brick commercial building on a raised basement with rowlock arched openings, a flat roof, and pressed-metal cornices on the street facades (north and west). The structure stands toward the north end of the main commercial avenue of the formerly independent town of University Place. Wesleyan Hospital retains a high degree of exterior integrity including metal cornice and finials, although its brick is painted and windows have been replaced. The interior retains some elements of its later use as apartments, as well as its original entrance stairs up to the raised first floor and two interior staircases.

Narrative Description

Wesleyan Hospital anchors a prominent corner towards the north end of the University Place business area, with a rectangular footprint of approximately 30' (north-south) by 95' (east-west) The two story-brick building has a high, raised basement of cast-in-place concrete, with a rusticated pattern on all facades. The high basement is lit with numerous square-headed windows on all sides, with sills at ground level and lintels topped by a wide stringcourse. The two principal entrances are approximately centered on the north and west principal facades, with round-ended concrete steps at each entrance, extending out onto the sidewalks. The entrances are all and narrow, under round-arched rowlock openings. The first and second floor window openings have segmental arched, rowlock lintels, projecting slightly from the brick walls. Early photos show the arches in contrasting brick from the walls, now concealed by monochromatic paint.

The window openings of the building vary in considerably in height and especially in width, with wider openings generally on the western portion, which initially opened as a hotel, and narrower, more uniform openings to the east (rear) portion, built originally as the hospital. The two portions are further distinguished by a step down in the cornice on the north (Madison Ave.) façade. That pressed metal cornice is intact on both street facades, including corner finials. The only loss is a date plaque (1906) shown in early images, centered on the west façade. The flat roof is pitched from front (west) down towards the back (east), acknowledged by three steps in the south, secondary façade. An early postcard image of the east, rear façade indicates that the third story once had a railed balcony supported on three spindly posts, presumably of steel. That historic image, and evidence in the masonry, indicates an east, rear entrance has been infilled, centered between the two basement windows.

Historic images show double-hung, one-over-one windows in most of the openings. The wide windows flanking the entrance on west façade may had had a transom above paired double-hung sash. The windows

have been replaced with metal sash, configured as horizontal sliders in the larger openings and one-over-one double-hung sash in the rest of the openings.

The raised first story required steep staircases continuing from the sidewalk steps at both street entrances. The interior is well-lit on all three levels, including the basement, which is accessed by exterior steps on the south side, just east of the 48th St. sidewalk. The interior was largely gutted to the exterior walls and interior studs by a previous owner, although two staircases appear to remain in original locations on the north wall, and to retain original treads. It is apparent from the interior that distinct structural approaches to the exterior walls were employed at each level. The interior of the basement/foundation walls are rough, cast-in-place concrete. The first story has brick and tile masonry bearing walls, while the top floor is wood-frame in structure, with brick veneer.

Documentary evidence described in Section 8 provides some insights into original interior characteristics of the hospital/school and hotel. The original hotel and hospital configurations may not have been markedly different, as the hotel was readily absorbed into the hospital with a year or two. The original descriptions made clear that Wesleyan Hospital was not a surgical facility, so highly specialized spaces may not have been required. The reported bed-count of the hospital of 20 or 21 beds is seemingly contradicted by a simultaneous suggestion of “capacity approximately 40,” but perhaps is clarified by the seamless conversion of the hospital into a boarding house, all within the month of August 1912. That the boarding house room could accommodate one to four students, for a capacity of 40-50, supports the interpretation that the hospital consisted of numerous patient rooms—not large wards. Probably the room sizes varied somewhat, as suggested by the boarding house advertisement. The larger spaces may have been in the west hotel portion, with its larger windows.

HISTORY:

The Wesleyan Hospital at 2742 North 48th Street in Lincoln (formerly University Place), Lancaster County, Nebraska, is locally significant under Criterion A in the area of medicine as a rare extant example of a small-town private hospital and nurses training school, which opened in 1906 and closed in 1912, the era of the first efforts by the State of Nebraska to regularize and regulate nursing education.

University Place

In 1889, University Place, Nebraska became the first of four towns incorporated on the eastern outskirts of Lincoln in the late 1880s and early 1890s. Three of these towns—University Place, Bethany Heights, and College View—were organized around newly-founded colleges. Three additional colleges were established in the same period outside the capital city to the east, north, and west but their surroundings failed to achieve town status.^a

University Place grew to be the largest of Lincoln’s suburbs, closely associated with Methodist-affiliated Nebraska Wesleyan University. The town reached a population exceeding 5,000 before annexation in 1926.^b University Place was served by streetcar connections to Lincoln, and Burlington Railroad to the north and Missouri Pacific to the south. Warren Avenue (now North 48th Street) was its main commercial thoroughfare.

^a James L. McKee, *Lincoln the Prairie Capital*, Northridge, CA: Windsor Publications, 1984, pp.66-72.

^b Neale Copple, *Tower on the Plains*, Lincoln: Lincoln Sunday Journal and Star, 1959, pp. 127.

The emergence of incorporated suburban towns flanking Oderkirk, Wendell W. *“Organize or Perish”: The transformation of Nebraska Nursing Education, 1888-1941*. Lincoln, NE: PhD. Dissertation, University of Nebraska-Lincoln, 1987. A full range of services, from banking to Carnegie libraries to medical care, within each town. In both College View and University Place, small hospitals were established despite proximity to nearly a dozen small private hospitals in nearby Lincoln, including Saint Elizabeth Hospital, a substantial and fast-growing general hospital.

Early Private (Doctors’) Hospitals/Nurses Schools in Lincoln

There were approximately a dozen smaller hospitals in Lincoln coinciding with the few years Wesleyan Hospital operated^c, most of which offered nurses’ training.^d Oderkirk explains that offering a school was an essential means by which small hospitals secured student nurses as staff.^e Only Saint Elizabeth Hospital still exists from that era as an institution, but it was a much larger “general” hospital and its early buildings on South Street (1880s-1910s) are gone except for a chapel wing. The only comparable hospital building of Wesleyan Hospital’s tenure extant in Lincoln is Andrus Hospital at 3259 Holdrege Street. It operated as a hospital and later nursing home in a standard American Foursquare house which still stands. It is not known to have offered nurses’ training.

Regulating Nurses Training in Nebraska

Nebraska hospitals of the early twentieth century, and their nurses’ training schools which supplied them with staff, could be opened without any oversight of government or educational agencies. “Schools formed wherever and whenever a doctor, religious group, or hospital board of trustees recognized a need for hospital services.”^f Schools proliferated in the first decades of the 20th century, with nine in Nebraska in 1900 growing to sixty by 1920.^g It was also an era of increased concern for professionalization among nurses, and across the country standards for nursing schools and registration of trained nurses began to be instituted. A statewide association of graduate nurses formed in 1906^h and almost immediately began to advocate for state regulation of schools and registration. A registration law was passed in 1909 which the *American Journal of Nursing* reported as “Nebraska nurses succeeded in securing the passage of what they know to be a rather poor bill.” The nursing group which was formed under the State Board of Health granted its “nursing secretaries” only an advisory role to the Board of Health and the nurses could not inspect schools.ⁱ Even so, the registration law cast increased attention on the adequacy of schools, focusing on the size of hospitals impacting their ability to offer students sufficient depth and breadth of experience, as well as on the training of nursing supervisors and quality of the instructional courses. Beginning in 1911, a written examination was required for graduating students to become registered nurses in Nebraska.^j

^c Lincoln City Directories 1908, 1911, 1912, 1914, 1915, 1918

^d *Nebraska State Historical Society*, Archives Record for Nebraska State Board of Health, “Annual Reports of Training Schools, 1909-1990”, 1909-1910 and 1911, Retrieved 12 February 2015.

^e Oderkirk, Wendell W. *“Organize or Perish”: The transformation of Nebraska Nursing Education, 1888-1941*. Lincoln, NE: PhD. Dissertation, University of Nebraska-Lincoln, 1987, p. 152.

^f Oderkirk, pp. 152, 3.

^g Oderkirk, Wendell W. *“Organize or Perish”: The transformation of Nebraska Nursing Education, 1888-1941*. Lincoln, NE: PhD. Dissertation, University of Nebraska-Lincoln, 1987, pp. 154.

^h Oderkirk, pp. 174-5.

ⁱ Oderkirk, pp. 178-181.

^j Oderkirk, pp.179-180.

The nursing board began to require annual reports from training schools and Wesleyan Hospital filed such reports in 1909 and 1911.^k The state registration law pressured small hospitals and their training schools to focus on successfully preparing students for the exam. “If too many of its students failed the examination, the hospital’s reputation was damaged. More important, the hospital might fail to attract enough students to staff the hospital.”^l

The Rise and Fall of Wesleyan Hospital

Charles E. Coffin of North Loup, NE was appointed first assistant physician at the Nebraska Hospital for the Insane in 1895 and was appointed superintendent in 1899.^m Previously listed as physician in North Loup, NE (1892).ⁿ By 1904 he had separated from the state hospital and was residing in University Place, NE, listed in the city directory as a physician involved in “ins[urance]”.

In December 1904 Coffin purchased property at the SE corner of Warren Avenue (N. 48th St.) and Miller/19th St. (Madison Ave.). In Dec. 1905 he incorporated Wesleyan Hospital and Nurses Training School with Drs. H. R. Palmer and J. O. Everett.^o The building originally bore a date plaque at the center of the west cornice reading “1906.” By May 1906 Coffin sold the east 58.75’ of the property to the hospital and school and the west 36 feet to William Butts, who in the 1907 directory was listed as proprietor of the Hotel Cecil at that corner. Coffin reserved the “right of passage” over the south three feet of Butts’ property to access the hospital, where exterior stairs access a basement entrance today.^p The hotel apparently was short-lived, as Butts sold his interest in 1907 and his purchaser sold the property back to the hospital corporation in 1908.^q

The initial description of the hospital stated “There will be no attempt to make it a surgical institution, or anything of that kind, but it is to be a place where the general public of the state may bring their patients and place them under the care of efficient nurses and in the best of surroundings for their care. Of course the place will be equipped with the best of everything in the way of surgical and medical appliances known.”^r Reports filed with the Nebraska State Board of Health in 1909 and 1911, in connection with new legislation to regulate nurses’ training, indicated the hospital offered twenty (1909) or twenty-one beds (1911), though inexplicably “capacity about 40” was also reported in 1909.^s

According to ads in the *The Nebraska News* (later *University Place News*), Wesleyan Hospital operated under Dr. Coffin until 1911, when Dr. R. H. Sawyer took charge. By the summer of 1912, Coffin was reported as removing to his Florida home,^t and the hospital was closed in August of 1912.^u The building was

^k [Nebraska State Historical Society](#), Archives Record for Nebraska State Board of Health, “Annual Reports of Training Schools, 1909-1990”, 1909-1910 and 1911, Retrieved 12 February 2015.

^l Oderkirk, pp. 184.

^m *Nebraska Blue Book*. Lincoln, NE: The State Journal Co. 1901. pp. 393. Retrieved 12 February 2015.

ⁿ The Omaha Clinic Proceedings of the Nebraska State Medical Society (May 1892). *Twenty-Fourth Annual Session*. Vol. 5. H. J. Penfold. pp. 463. Retrieved 12 February 2015.

^o The Nebraska News aka University Place News. (28 December 1905). *The Wesleyan Hospital*. pp. 5

^p Lancaster Deeds 122:578, 121:593, 134:98, 353.

^q Lancaster Deeds 144:591 and 149:136.

^r The Nebraska News aka University Place News. (28 December 1905). *The Wesleyan Hospital*. pp. 5

^s [Nebraska State Historical Society](#), Archives Record for Nebraska State Board of Health, “Annual Reports of Training Schools, 1909-1990”, 1909-1910 and 1911, Retrieved 12 February 2015.

^t The Nebraska News aka University Place News. (26 July 1912). pp. 3.

advertised for rent as “An elegant, modern building for a rooming and boarding house” with an estimated capacity of “Forty to fifty roomers.”^v The announcement of the closure mentions the possibility of its reopening as a girls’ dormitory “but, if so, it will be entirely under the management of the stockholders, or their leesee [sic]. There will be no connection whatever between it and the university...”^w The closure was reported nationally in the *American Journal of Nursing*, in the same edition that editorialized about problems with hospital-based training schools, and the increasing pressure to enroll younger and younger women as trainees.^x

The girls’ dormitory, Johnson Hall, was advertised for the Fall and Spring semesters of the 1912-13 school year, indicating that “One, two, three or four may occupy each room.”^y Johnson Hall was operated by Frank A. and Minnie M. Johnson. Although news about the conversion of the hospital to a boarding house stated that “...Wesleyan University has nothing to do with the management of the Wesleyan Hospital or any of the proposed dormitories”,^z the article points out Frank Johnson’s close ties to the University as a nephew to Mrs. C. C. White, a prominent resident of University Place and member of the Nebraska Wesleyan University Board of Trustees.^{aa} Nebraska Wesleyan’s student newspaper also reported on events at the boarding house, underscoring the close connection between the college and the private boarding house. The boarding house possibly operated only the single school year as it was not mentioned in *The Wesleyan* (NWU student newspaper) in the fall of 1913.

The facility reopened as a hospital for at least a few years, first under Dr. Chester E. Lewellen in October 1916^{bb} and then under Dr. Cabbage in March 1917.^{cc} Dr. Elbert J. Latta (and his wife Mamie as superintendent of nurses) managed the hospital by 1918.^{dd} The Lattas’ efforts appear to have been short-lived as they returned to Hastings, NE by the time of the 1920 census. The building was repeatedly sold in the late ‘teens and early 1920s until William Seng, a prominent University Place builder, purchased the property in 1928. Seng built four apartment buildings in University Place on his own account including St. Charles Apartments (NRHP 1985) and he apparently operated the former hospital and hotel as Grace Apartments.^{ee}

Summary

The brief life of Wesleyan Hospital and its even shorter tenure as a school for nurses are characteristic of the rapidly evolving medical environment in Nebraska in the early 20th century. Small private hospitals relied on nursing students for staffing, while the nursing profession was acutely focused on the uneven quality of entrance requirements, instructional programs, supervision, and practical experience, especially at the

^u The Nebraska News aka University Place News. (2 August 1912). pp. 3. *The American Journal of Nursing* Vol. 12. Philadelphia: J.B. Lippincott Company. 1912. pp. 1057. Retrieved 12 February 2015.

^v The Nebraska News aka University Place News. (2 August 1912). pp. 3

^w “Wesleyan Hospital Closed,” The Nebraska News aka University Place News. (August 30, 1912), pp. 1.

^x “Some Problems of the Training Schools” *The American Journal of Nursing* (October 1911) Vol. 12 No. 1. Philadelphia: J.B. Lippincott Company. pp. 1. Retrieved 12 February 2015.

^y The Nebraska News aka University Place News. (30 August 1912). *Johnson Hall*. pp. 1. The Nebraska News aka University Place News. (24 January 1913). pp. 3.

^z The Nebraska News aka University Place News. (9 August 1912). pp. 3.

^{aa} The Nebraska News aka University Place News. (30 August 1912). *Johnson Hall*. pp. 1.

^{bb} The Nebraska News aka University Place News. (13 October 1916). *Hospital Reception*. pp. 1.

^{cc} The Nebraska News aka University Place News. (30 March 1917). *Wesleyan Hospital Changes Hands*. pp. 1.

^{dd} Lincoln City Directory 1918

^{ee} Lincoln City Directory, 1928.

smallest hospitals. As oversight and regulation increased, the viability of establishments such as Wesleyan Hospital was directly impacted and the roughly dozen private hospitals in Lincoln and its suburban towns closed or in rare cases (such as Dr. Bailey’s “Green Gables” sanitarium) grew to meet the more stringent requirements.

The small building constructed half as Hotel Cecil, half as Wesleyan Hospital and Nursing Training School, was a tiny fraction of the size of Saint Elizabeth, Lincoln’s sole general hospital of the era, and to Lincoln General, Bryan Memorial, and Lincoln Veterans’ Hospitals, all founded in the decade of 1921-30. Of these, only Lincoln Veterans’ Hospital (NRHP 2012) retains significant portions of its early complex and it stands in crystal-clear contrast to Dr. Coffin’s establishment, which had closed to patients scarcely a decade earlier.

8. SIGNIFICANCE

| <u>Period</u> | <u>Areas of Significance-Check and justify</u> | |
|--|--|---|
| <input type="checkbox"/> _prehistoric | <input type="checkbox"/> _archeology-prehistoric | <input type="checkbox"/> _landscape architecture |
| <input type="checkbox"/> _1400-1499 | <input type="checkbox"/> _archeology-historic | <input type="checkbox"/> _law |
| <input type="checkbox"/> _1500-1599 | <input type="checkbox"/> _agriculture | <input type="checkbox"/> _literature |
| <input type="checkbox"/> _1600-1699 | <input type="checkbox"/> _architecture | <input type="checkbox"/> _military |
| <input type="checkbox"/> _1700-1799 | <input type="checkbox"/> _art | <input type="checkbox"/> _music |
| <input type="checkbox"/> _1800-1899 | <input type="checkbox"/> _commerce | <input type="checkbox"/> _philosophy |
| <input checked="" type="checkbox"/> _1900- | <input type="checkbox"/> _communications | <input type="checkbox"/> _politics/government |
| | <input type="checkbox"/> _community planning | <input type="checkbox"/> _religion |
| | <input type="checkbox"/> _conservation | <input type="checkbox"/> _science |
| | <input type="checkbox"/> _economics | <input type="checkbox"/> _sculpture |
| | <input checked="" type="checkbox"/> _education | <input type="checkbox"/> _social/humanitarian |
| | <input type="checkbox"/> _engineering | <input type="checkbox"/> _theater |
| | <input type="checkbox"/> _exploration/settlement | <input type="checkbox"/> _transportation |
| | <input type="checkbox"/> _industry | <input checked="" type="checkbox"/> _other (medicine) |
| | <input type="checkbox"/> _invention | |

Specific dates: 1906, 1912, 1906-18

Builder/Architect: Unknown

Statement of Significance:

The former Wesleyan Hospital and Nurses Training School is a locally rare example of a private hospital of the early 20th Century. It opened in 1906, shortly before the State of Nebraska began regulating nursing training and registration, probably contributing to the cessation of the school and closing of the hospital in 1912. It was subsequently used as a boarding house for Wesleyan students, reopened briefly as a hospital, and was converted into flats by the 1920s. It provides a very clear contrast to Lincoln’s large general hospitals, beginning with St. Elizabeth in the 1880s, Bryan Memorial and Lincoln General of the ‘20s, and Veterans’ Hospital of 1930, underscoring the rapid development of medical training and hospital care in that era.

9. STANDARDS FOR DESIGNATION

(Check one(s) that apply)

- Associated with events, person, or persons who have made a significant contribution to the history, heritage, or culture of the City of Lincoln, the County of Lancaster, the State of Nebraska, or the United States;
- Represents a distinctive architectural style or innovation, or is the work of a craftsman whose individual work is significant in the development of the City of Lincoln, the County of Lancaster, the State of Nebraska, or the United States; or
- Represents archeological values in that it yields or may be likely to yield information pertaining to pre-history or history.

10. MAJOR BIBLIOGRAPHICAL REFERENCES

Oderkirk, Wendell W. "*Organize or Perish*": *The transformation of Nebraska Nursing Education, 1888-1941*. Lincoln, NE: PhD. Dissertation, University of Nebraska-Lincoln, 1987.
Nebraska State Historical Society, Archives Record for Nebraska State Board of Health, "Annual Reports of Training Schools, 1909-1990", 1909-1910 and 1911, Retrieved 12 February 2015.

Western Medical Review. Vol. 11 No. 1. Lincoln, NE: Western Medical Review Company. 15 January 1906. p. 3. Retrieved 12 February 2015. Records incorporation of the hospital in 1905.

"Hospital Changes Hands," Journal of the American Medical Association Vol. 69 Part 2. American Medical Association. 1917. p. 1283. Retrieved 19 February 2015.

House Journal of the Legislature of the State of Nebraska (5 January 1897). Twenty-Fifth Regular Session. Lincoln, NE: State Journal Company, Printers. p. 28. Retrieved 12 February 2015. Notes Dr. C. E. Coffin as 1st Asst. Physician, Nebraska Hospital for the Insane, Lincoln

Nebraska Blue Book. Lincoln, NE: The State Journal Co. 1901. p. 393. Retrieved 12 February 2015. Notes Dr. Coffin as Superintendent of Nebraska Hospital for the Insane since 1899.

Polk's Medical Register and Directory of North America (12th revised ed.). R. L. Polk & Co. 1912. p. 1035. Retrieved 12 February 2015. Lists Wesleyan Hospital with capacity 30, C. E. Coffin as physician, Catherine Wollgast as superintendent.

The American Journal of Nursing Vol. 12. Philadelphia: J.B. Lippincott Company. 1912. p. 1057. Retrieved 12 February 2015. Notes: "The Wesleyan Hospital and Training School, located on University Place, has been closed."

ibid., "Some Problems of the Training Schools," *editorial*, p. 1.

The Nebraska News (aka *University Place News*).

"The Wesleyan Hospital," Article on "preliminary work for a hospital at University Place", (28 December 1905), p. 5.

Final advertisement for Wesleyan Hospital listing C. E. Coffin as President, (27 October 1911). p. 3.

Ad lists R. H. Sawyer as President. (3 November 1911). p. 3.

"Dr. Coffin left yesterday for his Florida home." (26 July 1912). p. 3.

"At a special meeting of the board of directors of the Wesleyan Hospital it was decided to discontinue it as a hospital and let the university use it as a girls' dormitory." (2 August 1912). p. 3.

"The Wesleyan University has nothing to do with the management of the Wesleyan Hospital or any of the proposed dormitories." (9 August 1912). p. 3.

"Wesleyan Hospital Closed." (16 August 1912). p. 1.

"Johnson Hall." (30 August 1912). p.1.

Ad for Johnson Hall and article. (24 January 1913). p. 3.

The Wesleyan (NWU student newspaper)

11. FORM PREPARED BY:

Name/Title: Stacey Hageman and Ed Zimmer

Organization: Lincoln/Lancaster County Planning Dept.

Date Submitted: 13 March 2015

Street & Number: 555 S. 10th Street

Telephone: (402)441-6360

City or Town: Lincoln

State: Nebraska

Signature:



Property Owner:

Brett Harris % Madison Avenue Lofts, LLC

FOR HISTORIC PRESERVATION COMMISSION USE ONLY:

DATE LANDMARK/LANDMARK DISTRICT DESIGNATED

LANDMARK/LANDMARK DISTRICT NUMBER

file:///F:\LongRange\Historic\Landmarks\LMARKS\WesleyanHospital.doc



Former Wesleyan Hospital/Hotel Cecil
SE corner of N. 48th & Madison, Lincoln, NE
Feb 2015



View from NW (2015, left)

Ca. 1906 (below)





Views from ENE (2015 left)

Ca. 1906-12 (below)





Former Wesleyan Hospital/Hotel Cecil
View from SE (left) Feb 2015

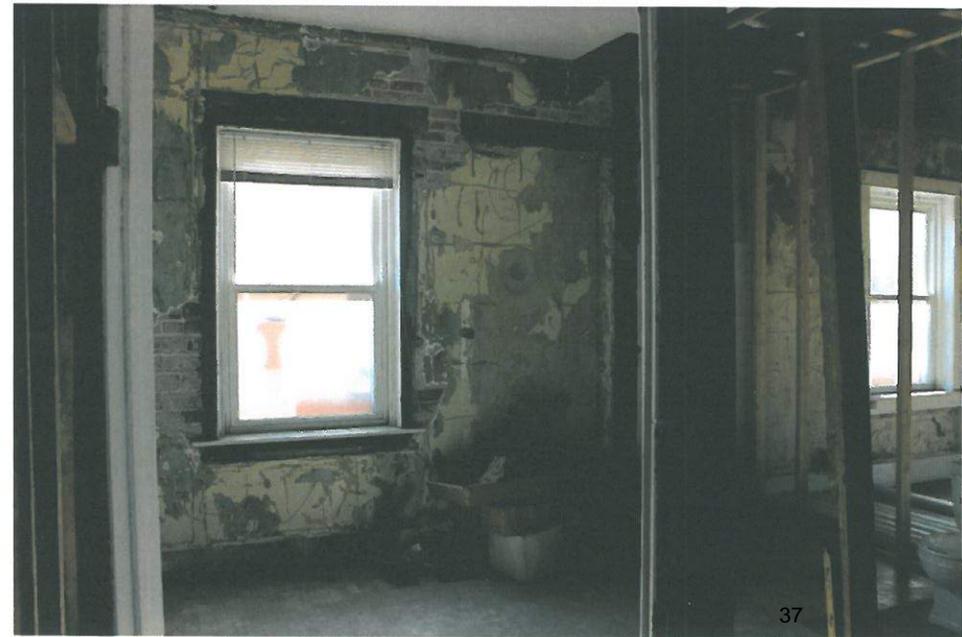


North entrance, looking north



1st, south side, facing west

1st, south wall

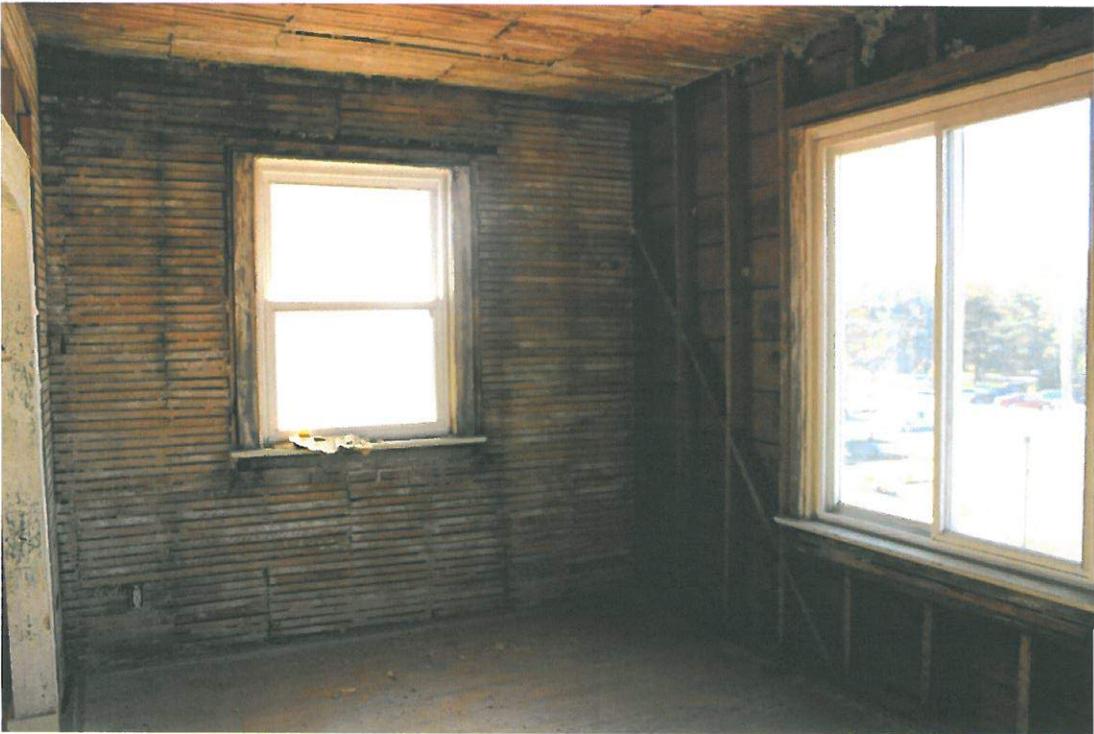


View on first floor, looking west at west stairs.





Views of east stairs, looking ENE on 2nd floor (above) and north down staircase from 2nd floor (right)



2nd floor, SW corner



2nd floor, SE corner



2nd floor, NE corner



2nd floor, south wall
Looking east



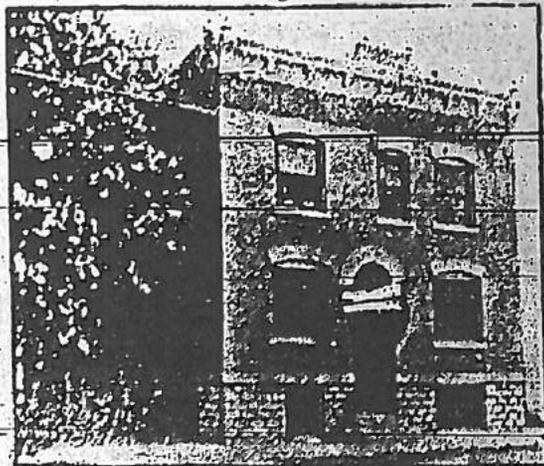
THE
Wesleyan Hospital
AND NURSE TRAINING
SCHOOL
OF
University Place, Neb.

It is ideally located in the most delightful residential suburb of Lincoln. It is a modern, thoroughly equipped hospital with a staff of experienced doctors. An extra large roster of trained nurses is maintained for hospital attendance and for outside work with other physicians. One of our physicians may send patients to this hospital for medical or surgical treatment and be assured of Christian surroundings and the best of care.

Advertising card for The Wesleyan Hospital and Nurse Training School, ca. 1906

Johnson Hall

A Dormitory for Girls



A strictly modern rooming house—has steam heat, radiator in every room. One and two bath rooms on every floor, (six in all.)

Electric lights, every room light and airy. Hot and cold water on every floor.

Rooms, \$6, \$8 and \$10 per month, one two three or four may occupy each room.

Two reception rooms and large, well lighted halls are fitted up for the roomer's convenience. Meals served at popular prices to roomers; also table board furnished those staying elsewhere.

Three blocks from the University. One block to Post Office

Address—MRS. MINNIE JOHNSON, Matron

19th and Warren Ave., University Place, - - - Nebraska

The Nebraska [University Place] News, 24 January 1913.