

NORTH CAROLINA STATE HISTORIC PRESERVATION OFFICE
Office of Archives and History
Department of Cultural Resources

NATIONAL REGISTER OF HISTORIC PLACES

Ashe County Memorial Hospital

Jefferson, Ashe County, AH0460, Listed 4/28/2015

Nomination by Jennifer Martin

Photographs by Jennifer Martin, September 2013



Façade view



Rear view

**United States Department of the Interior
National Park Service**

**National Register of Historic Places
Registration Form**

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

1. Name of Property

historic name Ashe County Memorial Hospital
other names/site number _____

2. Location

street & number 410 McConnell Street N/A not for publication
city or town Jefferson N/A vicinity
state North Carolina code NC county Ashe code 009 zip code 28640

3. State/Federal Agency Certification

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

Signature of certifying official/Title Date
North Carolina Department of Cultural Resources
State or Federal agency and bureau

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

Signature of certifying official/Title Date
State or Federal agency and bureau

4. National Park Service Certification

	Signature of the Keeper	Date of Action
I hereby certify that the property is:		
<input type="checkbox"/> entered in the National Register. <input type="checkbox"/> See continuation sheet	_____	_____
<input type="checkbox"/> determined eligible for the National Register. <input type="checkbox"/> See continuation sheet	_____	_____
<input type="checkbox"/> determined not eligible for the National Register.	_____	_____
<input type="checkbox"/> removed from the National Register.	_____	_____
<input type="checkbox"/> other, explain:)	_____	_____
_____	_____	_____
_____	_____	_____

5. Classification

Ownership of Property

(Check as many boxes as apply)

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

Category of Property

(Check only one box)

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

Number of Resources within Property

(Do not include previously listed resources in count.)

Contributing	Noncontributing	
1	0	buildings
0	0	sites
0	0	structures
0	0	objects
1	0	Total

Name of related multiple property listing

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

Historic and Architectural Resources of Ashe Co., NC c. 1799-1955

Number of Contributing resources previously listed in the National Register

n/a

6. Function or Use

Historic Functions

(Enter categories from instructions)

HEALTH CARE/hospital

Current Functions

(Enter categories from instructions)

VACANT/NOT IN USE

7. Description

Architectural Classification

(Enter categories from instructions)

Colonial Revival

Materials

(Enter categories from instructions)

foundation Stone
walls Stone
Brick
roof Asphalt
other _____

Narrative Description

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

8. Statement of Significance

Applicable National Register Criteria

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

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

Criteria Considerations

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

Property is:

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

Areas of Significance

(Enter categories from instructions)

ARCHITECTURE

POLITICS/GOVERNMENT

Period of Significance

1941

1952

Significant Dates

1941

1952

Significant Person

(Complete if Criterion B is marked)

n/a

Cultural Affiliation

n/a

Architect/Builder

Gudger, Lindsey M. (1952 addition)

Narrative Statement of Significance

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

9. Major Bibliographical References

Bibliography

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

Previous documentation on file (NPS):

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

Primary location of additional data:

- State Historic Preservation Office
- Other State Agency
- Federal Agency
- Local Government
- University
- Other

Name of repository:

Ashe County Memorial Hospital
Name of Property

Ashe County, North Carolina
County and State

10. Geographical Data

Acreage of Property 2.482 acres

UTM References

(Place additional UTM references on a continuation sheet.)

1 17 457000 4030360
Zone Easting Northing
2 _____

3 _____
Zone Easting Northing
4 _____

See continuation sheet

Verbal Boundary Description

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

Boundary Justification

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

11. Form Prepared By

name/title Jennifer Martin
organization MdM Historical Consultants Inc. date December 10, 2014
street & number Post Office Box 1399 telephone 919/368-1602
city or town Durham state NC zip code 27702

Additional Documentation

Submit the following items with the completed form:

Continuation Sheets

Maps

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

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

Photographs

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

Additional items

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

Property Owner

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

name _____
street & number _____ telephone _____
city or town _____ state _____ zip code _____

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

Estimated Burden Statement: Public reporting burden for this form is estimated to average 18.1 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Chief, Administrative Services Division, National Park Service, P. O. Box 37127, Washington, DC 20013-7127; and the Office of Management and Budget, Paperwork Reductions Projects (1024-0018), Washington, DC 20303.

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Ashe County Memorial Hospital
Ashe County, North Carolina

Description

Ashe County Memorial Hospital stands at 410 McConnell Street in the town of Jefferson in Ashe County, North Carolina. The original front section dates to 1941, while the rear addition was built in 1952. US highway 221 is approximately 0.28 miles to the southwest. The building stands in the west part of the county seat that was named for Thomas Jefferson and incorporated in 1803. Situated in the Blue Ridge Mountains of the western part of North Carolina, the average elevation in Jefferson is about 3,000 feet above sea level. Mount Jefferson, a local natural landmark with an elevation of 4,665 above sea level, is just to the southwest of Jefferson and visually prominent from the former hospital.

Ashe County Memorial Hospital occupies a rise on the west side of McConnell Street. The surrounding area is mostly residential, although the county health department is located just across McConnell Street and slightly to the south. Mt. Jefferson Child Development Center, which is also owned by the county, is to the immediate northwest of the hospital. That building dates to the late 1940s and originally housed doctors and nurses for Ashe County Memorial Hospital, but now stands on a separate parcel and has lost historic integrity through a rehabilitation for its current use.

Ashe County Memorial Hospital is a 1941 balloon-framed building veneered in rough-cut, random-coursed granite. The 1952 rear addition is constructed of gray brick. The hospital faces slightly east-northeast, but for simplification, it will be described in this narrative as if it faces due east. The original building and its addition have long rectangular footprints and are joined at the center of each building. A hipped roof block at the center of the rear of the original building connects to a flat-roofed block at the center of the front of the 1952 addition. This east-west connector creates courtyards that are open on one side, between the two buildings, on the north and south elevations. As a whole, the building has an H-shaped footprint.

The hospital occupies a grass-covered 2.48-acre parcel that slopes downward from north to south so that a raised basement on the south end of the original wing becomes a full lower story south of the entrance and at the rear. A circa 1941 low granite curb borders the parcel on the east. A concrete driveway on the southeast corner of the parcel provides access from McConnell Street into a concrete parking lot on the south side of the building that wraps around to the rear and extends along a portion of the north side of the hospital. A concrete sidewalk extends from the south side parking lot northward along the front of the building to a sidewalk that extends eastward from the entrance to McConnell Street. Another concrete sidewalk extends from the east-west running sidewalk northward to the north end of the building.

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Ashe County Memorial Hospital
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Ashe County Memorial Hospital

1941; 1952

Contributing Building

Original Building (1941)

The one-story-on-basement building has an elongated form that runs parallel to McConnell Street. With its granite-veneer exterior, the hospital exemplifies a vernacular expression of the Colonial Revival style identified by the use of rough-faced, random-coursed granite and subdued neoclassical elements, notably its portico, box cornices, and rectangular form with symmetrical massing typical of institutional buildings constructed in the idiom. The use of locally-quarried stone was a hallmark of the style in western North Carolina in the early to mid-twentieth century. A hipped roof tops the main section of the building, the portico, and the small, centered rear wing that originally contained the operating room. Overhanging eaves on all elevations are sheathed in tongue and groove and top a plain fascia. A small, shallow, shed-roof dormer with louvered vents rests on the front slope of the roof on each side of the entrance, while a square wood belfry rises from the center roof ridge where it intersects with the ridge of the porch's hipped roof.

The building spans fifteen bays and displays six-over-six windows with concrete sills. The basement windows on the south end of the façade are visible and are varying heights depending on the slope of the parcel; two on the south end are full height, while those to the north are truncated. The double-leaf, half-glazed front entrance doors with wood panels below are deeply recessed and centered on the façade of a gable-roofed projecting vestibule topped by a wood gable. The vestibule is not original, but was likely added in the years immediately following the completion of the building. The north and south side walls of the vestibule contain tall, narrow, metal-framed windows with concrete sills. Concrete steps flanked by granite walls with sloped concrete caps front the vestibule and lead to the sidewalk that extends from the façade. The vestibule, which has a wide opening on its façade, fronts a hip-roofed porch with granite corner posts linked by a solid granite balustrade. Photographs from the hospital's dedication in 1941 show that the porch was originally open with the hipped-roof supported by full-height stone posts linked by round metal railings. Those openings have been enclosed from just above the concrete slab floor, visible from the exterior, with granite-veneered walls and large fixed-glass windows on concrete sills. The north and south plate-glass windows are flanked by tall, narrow metal frame windows. A wide fascia with beadboard paneling extends along the porch and projecting gabled vestibule.

The north elevation of the 1941 building and its 1952 addition features a hipped-roof porch with square posts sheltering a double-leaf, half-glazed door identical to the one on the façade. A six-light transom crowns the door. The concrete floored elevated porch with a granite-veneered foundation includes a metal pole railing on the top level in

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Ashe County Memorial Hospital
Ashe County, North Carolina

front of the entrance. Granite knee walls with concrete caps front a pair of stairs flanking the entrance. An original six-over-six window is on each side of the entrance.

The rear (west) elevation varies in its fenestration on each side of the rear wing. The north end, which is obscured by an overgrown shrub, features a hip-roofed projection pierced by a single window. Five windows (one doubled) pierce the wall between the end projection and the rear wing. A shed-roofed dormer identical to those on the façade is found on the rear roof slope. The centered, hip-roofed hyphen is connected to a perpendicular hipped-roof block, which originally served as the operating room, but was set apart from the main building by the hyphen in order “to prevent anesthetic odors from disturbing the comfort of other patients in the hospital.”¹ A long concrete ramp that extends along this north end of the west elevation and provides access to a transom-topped, wide, single-leaf door in the recess where the hipped-roof hyphen intersects with the hipped-roof block. Originally, this door was double-leafed. The original ramp was shorter and terminated at steps on its north end. The north elevation of the hipped-roof block features a single window and a set of tripled windows on the main level and three partially-below-ground-level windows at the basement level. The brick 1952 addition (described later) is attached to the west side of this block.

The south half of the rear elevation is a full two stories with seven windows of various sizes on the upper level and five windows on the lower level. The north end of the lower level is obscured by a temporary shed-roofed structure covered in plastic. The south end of this elevation features a hip-roofed projection with two windows on the upper floor and three windows on the lower level. Like the north end of the rear elevation, a small shed-roofed vented dormer rests on the rear slope of the main roof. The hipped-roof hyphen features a covered window on its upper level and a single-leaf solid wooden door on its lower level. The south elevation of the hipped-roof block displays a tall granite-veneered exterior end chimney situated just off center. Two full size windows pierce the upper level, while smaller windows (one infilled with granite) are on the first level. This hipped-roof block stands on a painted concrete block foundation.

The south elevation features a full-height, hipped-roof centered projection that was likely added sometime in the immediate years after the building was completed. It features a doubled metal casement window off center on the upper level and a replacement paneled door on the lower level. The east elevation of the projection features a plywood-covered double-door opening on the first level and a casement window on the lower level. The west elevation of the projection displays a large casement window situated between the first and second levels. A window is located on both levels of the main block’s wall just west of the projection. To the east of the projection there is a window on the upper level and a divided light door with a transom on the lower level. This projection contains stairs.

¹ “Operating Room is Ideally Located,” *The Skyland Post*, October 30, 1941.

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Interior

The building is entered through the double-leaf doors sheltered by the gabled vestibule. They lead to the enclosed porch with a concrete floor and plaster ceiling. The original entrance is missing its doors, but retains its multi-light transom that is missing some of its muntins. Originally, paired fifteen-light double-leaf doors filled the opening. A pair of windows—one of which has been boarded up—flanks the former entrance. A metal WPA plaque reading “built by the Works Progress Administration in cooperation with the county government 1939,” is to the right (north) of the door. The date on the plaque refers to the year construction began.

The main level of the interior follows a double-loaded corridor plan with sixteen rooms along each side of the hallway that extends the length (north to south) of the building. A lobby is located just inside the front door. Walls are a combination of original plaster and simulated wood paneling, while floors are hardwood, vinyl sheeting over wood, and some ceramic tile in the bathrooms. Ceilings are original plaster and original wood paneled doors remain throughout. Schoolhouse-type light fixtures also remain. The interior was remodeled in 1952 after the completion of the rear addition; this is the period when the paneling was installed.

Around 1970, the interior was again remodeled for use as office space. At this time, a wall on the east south side of the lobby was removed to increase space in that area. In the room immediately south of the lobby, at least one wall was removed, but possibly more. Two rooms on the main level and at the northwest corner were combined into one space. Otherwise, the interior room arrangement has mostly remained intact. In recent years, the majority of the fixtures have been stripped from the building making it difficult to discern the original or even later functions of individual spaces. Obviously, small rooms with sinks and toilets served as bathrooms; larger rooms with these fixtures as patient rooms. It remains unclear where food preparation took place when the building functioned as a hospital. Most rooms served as patient rooms, although offices occupied a few rooms.

Ashe Memorial Hospital Addition (1952, circa 1970)

Designed by Asheville architect Lindsey Madison Gudger, the gray brick, T-shaped, flat-roofed rear addition contains twenty-five patient rooms and is a full two stories on the south end and most of the rear elevation, while the northeast section rests on a raised basement. It contains original metal casement windows resting on projecting header-bond brick sills. A tall square brick flue rises from the building’s interior.

The addition is connected to the 1941 rear block by a hyphen. The north elevation of the hyphen features paired casement windows on its main level, a single casement window corresponding to the location of the stair, and a single window on the basement level.

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The east elevation faces the rear elevation of the original building creating a three-sided courtyard. This north end of the rear addition is seven bays wide. Windows are of varying sizes with the northernmost bay filled with a triple window, although its center section has been covered with plywood. Basement windows are visible on the south and north ends of this elevation.

The north elevation displays a centered window and, at the northwest corner, a circa 1970 small hip-roofed addition with vertical synthetic siding. It is elevated on metal poles, but its hipped roof is lower than the flat roof of the 1952 addition. Two aluminum two-over-two windows occupy its west elevation and a door is on its north side where a stair has been removed. A door on the east side leads to a small stairway that in turn connects to a small room adjacent to a door on the upper level of the west elevation. This door was originally a window.

The west elevation of the 1952 addition slopes downward from north to south so that lower level windows on the north end are smaller. Fenestration between the levels varies with twelve windows, mostly paired, piercing the upper floor and seven windows occupying the lower level. Two double-leaf, half-glazed, wood doors with hipped-roof aluminum hoods are on this elevation's lower level. Each hood is edged in horizontal grooved aluminum.

The south elevation features a circa 1970 shed and gable-roofed, enclosed exterior stair with vertical siding that is supported on its west end by metal poles. A November 1951 photo shows this end of the building with a metal exterior stair in the same location as the enclosure indicating that the stair likely remains inside. The bottom entrance to the stair is covered in plywood. It allows access from the second floor to the exterior and is fitted with a one-over-one window on its south side, a pair of windows on its west side, and a single window on the east side of the small porch connecting it to the building; all windows are on the upper level of the stair. A pair of windows flanks the upper door where the stair connects, while four windows of different sizes are found on the lower level.

The east elevation of the south end of the addition has four sets of double windows and two narrow windows on the upper level and four windows on the lower level. Like the east elevation on the north end, this side of the building faces the rear of the original building creating a courtyard open on one side.

The south elevation of the hyphen connecting the addition to the original building features the tall, flat-roofed, gray brick elevator tower with a metal-framed window on its south elevation. It rises about a full story above the building's roofline. A window is on the upper level of the south elevation just west of the tower, while a paired metal window pierces the lower level.

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Addition Interior

Like the original portion of the building the interior of the 1952 addition follows a double-loaded corridor plan on both levels. Fifteen rooms flank the main corridor on the upper level and there is a small room in the hyphen connecting to the original building. There are fewer but larger rooms on the lower level. The southernmost room on this level served as the emergency room. Finishes are similar to those in the 1941 building. In this part of the building walls are plastered or covered in faux wood paneling. Floors are vinyl sheeting. On the lower level at the north end, one room retains a wood floor. Some ceramic tile walls remain in some rooms. Solid wood doors—some with windows—remain throughout the interior. This part of the building has been stripped of most of its fixtures making original room function difficult to discern. Like the original portion, however, it is likely most rooms served as patient rooms.

Integrity Assessment

Ashe Memorial Hospital has undergone alterations since construction, but the changes have not substantially diminished its overall integrity. The interior was renovated in 1952 to keep up to date with medical practices and again in 1970 when the building became office space. These renovations included the application of faux wood paneling and the rearrangement of some interior spaces. However, the double-loaded corridor plan with flanking rooms in the original building and in the 1952 addition remains intact. Most of the alterations are surface treatments, such as paneling and floor tile, and are reversible. The Ashe Memorial Hospital is a rare example of a New Deal medical facility in North Carolina and remains worthy of preservation.

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Ashe County Memorial Hospital
Ashe County, North Carolina

Summary

Located on a hilltop site in the western portion of the county seat of Jefferson, North Carolina, Ashe County Memorial Hospital is an intact historic medical facility constructed in two stages. The original vernacular Colonial Revival-style hospital dating to 1941 was built through the cooperative efforts of the Works Progress Administration (WPA), which provided labor; the local community, which donated money and equipment; and the Duke Endowment, which provided a cash contribution and staffing assistance. In 1952, the county constructed a flat-roofed, Modernist-influenced, brick rear addition designed by Asheville architect Lindsey Madison Gudger that doubled the size of the facility. Ashe County Memorial Hospital meets National Register of Historic Places Criterion A in the area of politics/government as a largely intact public health facility constructed in this isolated mountain county through the efforts of local leaders who raised funds to supplement the contributions of the WPA and the Duke Endowment near the end of the Great Depression. Before Ashe County Memorial Hospital opened, the nearest hospital was in North Wilkesboro, which is thirty-five miles away. Ashe County Memorial Hospital served the county from November 1941 to 1970 when a new, modern hospital was opened south of Jefferson. The hospital also meets Criterion C for architecture as a vernacular Colonial Revival-style building that employed locally-sourced stone to create an idiom well-suited to its mountain setting; and for the 1952 addition as a rare intact example of Modernist-influenced institutional architecture in the county. The hospital is significant on the local level with a period of significance of 1941, the date of construction for the original hospital building, and 1952, the date of construction for the addition.

The contexts, "National Crisis, Local Impact: 1930-1955," pages E 46-57 and "Ashe County After 1955, pages E 57-63," in "Historic and Architectural Resources of Ashe County, North Carolina, Circa 1779-1955" (MPDF) provide historic context for the Great Depression and the New Deal in the county. The locally significant Ashe County Memorial Hospital falls under Property Type 3D, "Institutional Properties: Medical Buildings," found on page F 94. This section also provides some architectural context, but additional context is contained in this nomination. Institutional buildings are historically significant as centers of community development and as places of community identity. Institutional buildings in Ashe County must retain their location, setting, and overall integrity of materials, design, and workmanship. If a building is significant for its architecture under Criterion C, alterations must be minimal on both the exterior and interior, according to the registration requirements on pages F 96-97 of the MPDF. Ashe County Memorial Hospital exhibits architectural integrity, retaining its original materials and modest Colonial Revival and Modernist detailing at the exterior. The building also retains notable interior finishes mostly dating from 1952 when the original building was remodeled and the addition constructed. Additional historical background and context for Ashe County Memorial Hospital is included below.

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Ashe County Memorial Hospital
Ashe County, North Carolina

Historical Background and Politics/Government Context

In the late 1930s, Ashe County, whose population stood at just over twenty-one thousand in 1930, had a health department but not a hospital.² The closest hospital was thirty-five miles away in North Wilkesboro.³ According to local physician Dr. Dean C. Jones, who served as Ashe County Memorial Hospital's chief surgeon, head physician, and superintendent, Rev. R. H. Stone, pastor of Jefferson Presbyterian Church from 1921 to 1941, approached Jones in 1938 to ask him whether he would run a hospital in Ashe County if Stone could get it built and outfitted. Jones, a native of the Ashe County town of Lansing, expressed interest. Around the same time, members of the Jefferson Rotary Club recognized the need for a hospital to serve the local community and took the lead in the effort in the summer of 1938.⁴

On August 2, 1938, the Rotary Club organized a meeting of several citizens at the office of Dr. B. E. Reeves to discuss the possibility of establishing a hospital that would serve the county. A committee headed by Reverend Stone was formed to investigate the possibility and to report those findings at a meeting later that month. Among the findings of the report was that several people in the community had recently died due to a lack of access to adequate medical care. The report also pointed out that Ashe County citizens were spending money for medical care in other places when they could be pouring those funds into the local economy.⁵

The committee decided to request funding from the Works Progress Administration (WPA), renamed the Works Projects Administration in 1939, for the building. In 1935, Congress created the WPA to administer \$5 billion for public works. The WPA provided jobs to unemployed workers on public projects sponsored by federal, state, or local agencies. Workers received on-the-job training to prepare them for further employment. Construction, including public buildings, roads, and infrastructure, was the WPA's focus. Wherever possible, construction used local materials, explaining the prevalent use of stone in WPA buildings in western North Carolina. The WPA also worked to improve public health in a variety of ways and built hospitals across the United States. In a radio address on October 21, 1939, Frances Kerr, Assistant Commissioner of the WPA, offered that the agency "builds hospitals and provides medical and dental treatment for people who could not receive such treatment otherwise." She reported that

² *Population of States and Counties of the United States, 1790 to 1990, for the Twenty-One Decennial Censuses* (Washington, D.C.: U. S. Department of Commerce, Bureau of the Census, Population Division, 1996), 116.

³ "Establishment of County Hospital Interesting," *The Skyland Post*, October 30, 1941.

⁴ Arthur L. Fletcher, *Ashe County: A History* (Jefferson, N.C.: Ashe County Research Association, Inc., 1963), 282-283; "The Jefferson Rotary Club," *The Heritage of Ashe County, North Carolina, Volume I, 1984* (Winston-Salem: Hunter Publishing Company, 1984), 553.

⁵ "Establishment of County Hospital Interesting," *The Skyland Post*, October 30, 1941.

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Ashe County Memorial Hospital
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in its first three years of existence, the WPA built over 100 new hospitals across the country.⁶ By January 1, 1941, eleven WPA-funded hospitals had been built in North Carolina, and another twenty were improved or renovated. A three-story, WPA-built, red-brick hospital in Boone still stands and is now used as the personnel office for Appalachian State University. Others were constructed in Craven, Cumberland, and Wake counties.⁷

Rev. Jack Huney hired a Duke University architect who drew up plans for a twenty-four-bed hospital. The committee presented the plans to the WPA district office who suggested that the agency would likely fund such a project, but would require the county to act as a sponsoring agency and for the local share of funds to be raised by the Ashe County Hospital Association, a non-profit that would also operate the hospital. In December 1938, the Ashe County Commissioners agreed to act as sponsor and to submit a formal application to the WPA.⁸

Local funding would come from selling membership stock certificates and other contributions. On January 1, 1939, the fundraising campaign was launched in churches throughout the county. On March 25, 1939, the WPA agreed to provide almost \$26,000 and required the sponsor's share to be around \$19,000.⁹ The Duke Endowment also provided financial aid, as well as advice on construction and equipment to outfit the hospital. Begun in 1924, the Endowment provided financial aid to non-profits, hospitals, schools, orphanages, and rural churches. During the Great Depression, the Endowment funded the building of many rural hospitals in North Carolina establishing the state as a leader in rural community health care.¹⁰

In the spring of 1939, the committee's attention turned toward securing an appropriate site for the hospital. In April, the committee decided to build the hospital on the site of the former Jefferson School dormitory. The parcels owners, Roy and Guy Badger, Mrs. V. V. McConnell, and Mrs. Eula J. Neal, donated the land on a hilltop on McConnell Street.¹¹

When ground was broken on August 29, 1939, several dignitaries were in attendance, including Congressman Robert L. Doughton, a strong supporter of Franklin Delano Roosevelt and the New Deal. Ninety-two-year-old bank

⁶ "Health Conservation and the WPA," address delivered by Florence Kerr, Assistant Commissioner, Work Projects Administration, New Deal Network, www.newdeal.feri.org/works/wpa05.htm, accessed November 4, 2013.

⁷ *North Carolina WPA: Its Story, January 1, 1941*, North Carolina Collection, Durham Public Library, Durham, N.C., n.p.; Donna Akers Warmuth, *Images of America: Boone* (Charleston, SC: Arcadia Publishing, 2003), 99.

⁸ "Establishment of County Hospital Interesting," *The Skyland Post*, October 30, 1941.

⁹ "Establishment of County Hospital Interesting," *The Skyland Post*, October 30, 1941.

¹⁰ "Duke Endowment Helps in Building New Ashe Hospital," *The Skyland Post*, October 30, 1941; The Duke Endowment, <http://www.dukeendowment.org/about/our-history>, accessed November 12, 2013.

¹¹ "Establishment of County Hospital Interesting," *The Skyland Post*, October 30, 1941.

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president J. J. Thomas, who had donated \$1,000 toward funding the hospital, moved the first shovelful of dirt in a ceremonial gesture.¹²

By September 1939, the WPA had hired Lester Stump as foreman and work was underway. On October 26, 1939, the *Skyland Post*, the local newspaper, reported that “pouring concrete in the basement is practically completed and work has been started on the erection of framing and stone veneering.” The paper related that much of the work was a cooperative effort with area residents donating material and time. Len Severt donated the stone, which was being quarried off his farm near West Jefferson. Web Cooper, who worked for the State Highway Department, was drilling the stone on his off time at no charge. Mrs. R. F. Blevins and Mrs. J. B. Council, both living near Jefferson, donated a large quantity of stone that was also to be used to build the walls. Ben Barker of Lansing was hauling the rock at a low price. The paper also reported that low bids for windows and doors and plumbing and heating were to be solicited soon. Finally, the *Skyland Post* relayed that thirty WPA men were working on the project and that the walls and roof would be completed “before real winter sets in.”¹³

Fundraising for the building campaign occurred throughout construction. In November 1939, the newspaper reported that the building committee appointed J. Everett Roland of the Clifton community of Ashe County to oversee sponsor contributions to the construction and to collect subscriptions and pledges to advance the building’s completion. The paper urged those who had already subscribed to make their payments so that construction could be completed. According to the story, all contributors’ names would be displayed in the building.¹⁴ Fundraising for the building proved challenging and delayed construction throughout 1940.

In early January 1941, the hospital’s finance committee started its final drive to collect payment on subscriptions. The newspaper reported “the hospital building is about half completed and collection of all subscriptions is needed at this time.”¹⁵

On March 7, 1941, the local newspaper reported that the rock-veneering was to be completed that week and that the roof was being put on. The plumbing, wiring, and heating were being roughed-in in preparation for the plastering, which was to take place “in the near future.” The building and finance committees reported that an additional \$3,500 was needed to buy radiators, laboratory and bathroom fixtures, lighting fixtures, and framing and hardware for windows and doors.¹⁶

¹² “Establishment of County Hospital Interesting,” *The Skyland Post*, October 30, 1941. “Robert L. Doughton, North Carolina History Project, <http://www.northcarolinahistory.org/encyclopedia/432/entry>, accessed November 5, 2013.

¹³ “Rapid Progress Being Made On Ashe Hospital,” *The Skyland Post* (West Jefferson), October 26, 1939.

¹⁴ “J. E. Roland Now Devoting His Full Time to Hospital,” *The Skyland Post*, November 30, 1939.

¹⁵ “Hospital Starts Final Drive Now for Collection,” *The Skyland Post*, January 4, 1941.

¹⁶ “Good Progress Being Made on Ashe Hospital Building,” *The Skyland Post*, March 7, 1941.

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In early March 1941, Athens Stove Works, Inc., donated a range to the hospital for its kitchen. Dr. Fred Hubbard donated operating room equipment, but furniture for the building was still needed.¹⁷ By the end of March, all the hospital rooms had been furnished.¹⁸

In April 1941, the hospital auxiliary launched a campaign in the county schools to raise money. All children in county schools were asked to donate one dime. Lansing schools raised \$87.01 for the hospital.¹⁹ Merchants throughout the county were asked to place containers in their stores to collect dimes to fund the building's completion. Other fundraisers were held throughout Ashe County in the spring of 1941.²⁰

In May 1941, the newspaper reported "the colored people of Ashe county are making splendid progress toward contributing money for the purpose of furnishing one room in the Ashe County hospital."²¹ Heating and plumbing equipment was finally purchased that month.²² In the summer of 1941, the Women's Auxiliary of Lansing donated linens and several Elkin manufacturing companies donated thirty-seven blankets.²³

As construction neared completion in the summer of 1941, fundraising efforts ramped up. The hospital finance committee declared Ashe County Memorial Hospital day in churches throughout the county. The committee asked churches to take up a special collection for the hospital. Wade Eller, chairman of the finance committee declared, "contributions for orphanages, home and foreign mission work, etc. are mighty fine, but I do not know of a more worthy cause than that of providing badly needed service right here at home for our people."²⁴ On July 18, 1941, the newspaper reported that workers were "busy doing painting and landscaping."²⁵

In the fall of 1941, the hospital received staffing assistance from the Duke Endowment, whose director, Dr. W. S. Rankin advised the hospital's executive committee on hiring a surgical team.²⁶ With Dr. Rankin advising them, in October 1941, the executive committee elected Dr. Fred C. Hubbard, operator and chief surgeon of the Wilkes County hospital and president of the North Carolina Medical Association, as head of the surgical staff. Dr. Dean C.

¹⁷ "Operating Room Equipment Given to Ashe Hospital by Dr. Hubbard; Others Give," *The Skyland Post*, March 20, 1941.

¹⁸ "Hospital Rooms All Furnished; Need Equipment," *The Skyland Post*, March 27, 1941.

¹⁹ "School Children Asked to Give a Dime, Sturdivant Now Directing a Drive," *The Skyland Post*, April 3, 1941; "Lansing Schools Raise \$87.01 for Ashe Hospital," *The Skyland Post*, April 24, 1941.

²⁰ "More Money Badly Needed for Ashe County Memorial Hospital," *The Skyland Post*, April 17, 1941.

²¹ "Ashe Hospital is Given Funds," *The Skyland Post*, May 1, 1941.

²² "Heating, Plumbing Equipment for Ashe Hospital is Purchased," *The Skyland Post*, May 8, 1941.

²³ "Ashe Hospital Group to Hold Meeting Tonight," *The Skyland Post*, July 10, 1941.

²⁴ "July 7th to be Hospital Day in Ashe County Churches," *The Skyland Post*, June 20, 1941.

²⁵ "Work on Hospital, Grassy Creek School, and Lansing Water System Nearly Ended," *The Skyland Post*, July 18, 1941.

²⁶ "Medical Staff of Ashe Hospital to be Considered," *The Skyland Post*, August 15, 1941.

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Jones, an early figure in the establishment of the hospital, was elected assistant to Dr. Hubbard, superintendent, and resident physician.²⁷

Throughout the second half of 1941, the hospital finance committee worked to raise the final funding needed to install the plumbing and heating and to put the finishing touches on the building. Despite their efforts, by December the committee lacked \$2,500 needed to buy lighting, plumbing, and heating fixtures.²⁸

When it was announced that the hospital would open on November 1, 1941, hospital officials asked “everyone be invited to bring along a gift for the hospital if nothing more than a jar of beans.” The newspaper noted that coal was needed and that “any contributions...will be appreciated.”²⁹

Ashe County Memorial Hospital opened to great fanfare on November 1, 1941. When it was completed, the twenty-four-bed facility cost \$60,000 to construct. The Honorable Frank H. Dryden, acting commissioner of the WPA, addressed a crowd of 1,500 gathered to celebrate the dedication. He noted, “this hospital demonstrates once again what can be done in a community when local officials join with your Federal government to make intelligent use of otherwise idle labor.” Others speakers included Congressman Doughton and Dr. W. S. Rankin, director of the Duke Endowment.³⁰

From its opening in November 1941 to 1950, the hospital staff performed 879 surgeries, 2,707 minor surgeries, 64,891 lab tests, 5,232 x-rays, and delivered 2,863 babies. The total number of bed patients for the period was 12,246.³¹

In early 1951, hospital officials, with the help of the West Jefferson Woman’s Club, started a campaign to raise \$10,000 to help pay for an addition to the hospital.³² The hospital’s finance committee sold non-profit shares and secured donations, but also obtained financing from the North Carolina Medical Care Commission.³³ Lindsey

²⁷ “Dr. Hubbard Elected as Chief Surgeon of Ashe County Hospital,” *The Skyland Post*, October 17, 1941.

²⁸ “Hospital Finance Committee Will Meet After Club,” *The Skyland Post*, December 12, 1941.

²⁹ “Plan to Open Ashe Memorial Hospital on Saturday, November 1,” *The Skyland Post*, October 9, 1941.

³⁰ “Many Notables Heard During Hospital Dedication Service,” *The Skyland Post*, October 30, 1941.

³¹ “Ashe County Memorial Hospital Cited as Institution of Mercy and Service in Plea for Funds by Wade E. Eller,” *The Skyland Post*, February 8, 1951.

³² “Hospital’s Drive for Funds Starts,” *The Skyland Post*, January 25, 1951.

³³ “\$10,000 Must Be Raised Early for New Building,” *The Skyland Post*, January 25, 1951.

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Madison Gudger (1904-1964) of Asheville designed the addition.³⁴ Construction commenced in February 1951 with Hickory Construction Company as the contractor.³⁵

The building was completed in early 1952 at a cost of nearly \$400,000. It contained twenty-five patient rooms and other rooms including offices and an operating room. In March of that year, all activities were moved into the new addition so that the original front section could be remodeled. Because of the work occurring in the 1941 section, an official told a local newspaper reporter, “we would appreciate if visitors would not visit at the hospital unless it is absolutely necessary at the present due to the confusion in the hospital.” With the completion of the addition, Dr. James I. Baumgartner of Asheville joined the staff as assistant to Dr. Dean Jones in charge of medicine.³⁶

In August 1969, ground was broken for a new and more modern Ashe County Memorial Hospital to replace the original building. In November 1969, hospital trustees met to discuss the progress on construction and voted to change the name to Ashe Memorial Hospital. One participant at that meeting “pointed out that the name of the county was added in order to get WPA aid in the beginning.”³⁷ The building was completed in 1970 and the original Ashe County Memorial Hospital closed. The former hospital served as county offices for several years, but is now vacant.

The WPA in Ashe County

Ashe County, like the rest of the country, suffered through the Great Depression bringing further hardship to the agricultural economy, especially the livestock market. The timber industry that had come with the railroad’s arrival in 1914 devastated the landscape so that by the time the Depression hit, there was no income to be had from forest resources.³⁸

Unemployment became a significant problem in the county, but various work programs initiated by the federal government, including the WPA were designed to provide economic and social relief to Ashe County and communities across the nation. The WPA built 416 miles of roads in Ashe County, including one to the top of Mount Jefferson, installed sidewalks in Jefferson, and made street and sidewalk improvements in West Jefferson. Water mains and sewage treatment plants were built in West Jefferson. In addition to the Ashe County Memorial Hospital, the WPA built or improved schools at Crumpler, Lansing, Grassy Creek, Laurel Springs, and Riverview and

³⁴ Lindsey Madison Gudger Certificate of Death, October 6, 1964, ancestry.com, accessed December 26, 2014.

³⁵ “Hospital Building Starts,” *The Skyland Post*, February 15, 1951.

³⁶ “New Hospital Wing Occupied,” *The Skyland Post*, March 27, 1952.

³⁷ “Hospital Trustees Hold Meeting,” *The Skyland Post*, November 13, 1969.

³⁸ Arthur L. Fletcher, *Ashe County: A History* (Jefferson, N.C.: Ashe County Research Association, Inc., 1963), 322-323.

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constructed an addition to the West Jefferson School. By June 1, 1941, a total of \$1,655,564 had been spent on WPA projects in the county.³⁹

While New Deal work programs originated at the federal level, they employed local workers in projects aimed at improving the lives of North Carolina citizens. By January 1, 1941, approximately 125,000 North Carolinians had worked on almost four thousand WPA projects across the state. According to a report at the time, eighty-five percent of federal money from the WPA went to worker wages, while the remaining funds paid for materials, equipment and supplies.⁴⁰

The New Deal employed men and women in a variety of jobs. In January 1941, over 1,000 people in the county were working for the WPA.⁴¹ Women employed by the WPA worked in school lunchrooms, the county library, and on horticulture projects designed to improve high school grounds.⁴² The 1940 federal census indicates that in the town of Jefferson, numerous people worked for relief agencies. Allie Wardell was a librarian for the WPA and Dorothy Neal was a typist for the National Youth Administration (NYA). Bynum James served as a road supervisor for the WPA. It is likely that Alonzo E. Baldwin, a forty-year-old listed in the census as a stonemason, and Will Mullis, a mortar mixer, both working for the WPA, helped to construct Ashe County Memorial Hospital. Jefferson resident Claude W. Day's occupation was listed as a night watchman for the WPA at the hospital during the period when it was under construction.⁴³

Architecture Context

New Deal programs such as the WPA and Civilian Conservation Corps (CCC) frequently employed native stone for their building projects in western North Carolina. In many cases, the use of a distinctive local material lent a vernacular character with an element of rusticity to a subdued expression of a long-established style. As exemplified by Ashe County Memorial Hospital, the use of rough-faced, random-coursed granite provided the local, rustic flavor to the Colonial Revival style, expressed here in the use of a simple rectangular form with symmetrical massing and fenestration, a pedimented portico, and boxed cornices that altogether give the building an authoritative appearance suitable to its institutional use. The National Park Service's program of building in the Rustic Revival style greatly influenced both the WPA and CCC. The Park Service design standards during this period focused on constructing in stone or log, often with unhewn timbers, so that buildings and structures blended with their surroundings.

³⁹ Bishir et al., 75-76; Arthur L. Fletcher, *Ashe County: A History* (Jefferson, N.C.: Ashe County Research Association, Inc., 1963), 324-326; "Work Starts on West Jefferson \$36,228 Street Project," *The Skyland Post*, January 30, 1941.

⁴⁰ *North Carolina WPA: Its Story*, January 1, 1941, North Carolina Collection, Durham County Public Library Durham, NC.

⁴¹ "Record Number Now Working on WPA in County," *The Skyland Post*, January 25, 1941.

⁴² "Women's WPA Projects in County Accomplishing Much," *The Skyland Post*, April 18, 1941.

⁴³ 1940 Federal Census of the Population, ancestry.com, accessed November 4, 2013.

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In addition to Ashe County Memorial Hospital, three WPA buildings remain in Ashe County. The agency constructed five schools in Ashe County, but only the Lansing School (NR, 2009) in the town of Lansing remains. An intact massive stone building constructed in 1937-1938, the two-story, hip-roofed, native-granite-veneered building typifies the style and materials used by the WPA in western North Carolina. Its restrained Colonial Revival style expressed by its lunette windows in the parapeted gables and its pedimented entry porch carried by paired Tuscan columns on granite plinths signifies the building's public or institutional function. Like the hospital and school, the West Jefferson Community Center, a one-story T-plan building constructed in West Jefferson in 1938, features a veneer of locally quarried, random-coursed stone and symmetrical massing. The well-preserved building now serves as the offices of the Ashe County Arts Council.⁴⁴ The WPA also built the 1939 State Prison Camp at Smethport, which includes the main cell block building, a dining hall, and workshop with exteriors of random-coursed locally quarried stone. All of the buildings have brick or frame exteriors, with the most distinctive being the main cell block building accented with subtle Art Deco motifs of stepped pilasters and chevron panels executed in brick.

The 1952 gray brick addition typifies the types of institutional buildings constructed in the mid-twentieth century in North Carolina. The low-slung, flat-roofed building followed the post-World War II trend of integrating buildings into their setting's terrain. Institutional buildings of the period like the hospital addition lacked ornamentation, often had a flat roof, and were typically fitted with metal awning or casement windows. The most common 1950s Modernist institutional buildings constructed in the county were schools. In Creston, the low-slung Riverview School, built in the 1950s, has a red-brick exterior and a flat roof. Its original awning style windows have been replaced with vinyl windows. The building now serves as a community center.

Ashe County Memorial Hospital is a largely intact institutional building constructed in two phases. The 1941 section epitomizes the use of local materials to lend an element of rusticity to an established revival style to western North Carolina buildings constructed during the Great Depression with the assistance of the WPA. The agency's tendency to use native materials and to build in a style appropriate to its locale is clearly demonstrated in the original portion of Ashe County Memorial Hospital. The 1952 addition, built in response to an increased demand for medical care, was attached to the rear of the original building and mirrors its overall form with its double-loaded corridor plan, but with its flat roof and complementary gray brick, it does not detract from or overwhelm the original building. Furthermore, the addition chronicles the expansion of public health care in this rural mountain county in the mid-twentieth century.

⁴⁴ Phone interview with Rebecca Williams, Ashe County Arts Council, West Jefferson, North Carolina, November 12, 2013.

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The Skyland Post (Jefferson, North Carolina).

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Verbal Boundary Description

The boundary of Ashe County Memorial Hospital is shown by the solid, heavy black line on the accompanying map entitled "Tax Map, Ashe County Memorial Hospital." The parcel number for the property is 09263001844.

Boundary Justification

The boundaries encompass the remaining 2.482 acres of the acreage that was historically associated with Ashe County Memorial Hospital.