**United States Department of the Interior**

**National Park Service**

**National Register of Historic Places Inventory -- Nomination Form**

See instructions in *How to Complete National Register Forms*.

**1. Name**

Historic

Watts Hospital

**2. Location**

**Street & Number**

Corner of Broad Street and Club Boulevard

**City, Town**

Durham

**Vicinity of**

_Not for Publication_

**Congressional District**

_Fourth_

**State**

North Carolina

**Code**

037

**County**

Durham

**Code**

063

**3. Classification**

**Category**

_X_ DISTRICT

_X_ BUILDING(S)

_X_ STRUCTURE

_X_ SITE

_3_ OBJECT

**Ownership**

_X_ PUBLIC

PRIVATE

_PUBLIC AQUISITION

_IN PROCESS

_BEING CONSIDERED

**Status**

_X_ OCCUPIED

_UNOCCUPIED

_WORK IN PROGRESS

_ACCESSIBLE

_Y_ RESTRICTED

_Y_ UNRESTRICTED

_X_ NO

**Present Use**

_AGRICULTURE_ _MUSEUM_

_COMMERCIAL_ _PARK_

_EDUCATIONAL_ _PRIVATE RESIDENCE_

_ENTERTAINMENT_ _RELIGIOUS_

_GOVERNMENT_ _SCIENTIFIC_

_INDUSTRIAL_ _TRANSPORTATION_

_MILITARY_ _OTHER_

**4. Owner of Property**

**Name**

State of North Carolina

**Street & Number**

Attn: Mr. Borden Mace

Department of Administration--116 West Jones Street

**City, Town**

Raleigh

**Vicinity of**

_351_

**State**

North Carolina 27611

**5. Location of Legal Description**

**Courthouse, Registry of Deeds, Etc.**

Wake County Courthouse

**Street & Number**

Fayetteville Street Mall

**City, Town**

Raleigh

**State**

North Carolina 27601

**6. Representation in Existing Surveys**

**Title**


**Date**


**Federal State County Local**

**Depository for Survey Records**


**City, Town**


**State**
DESCRIPTION

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DECRIBE THE PRESENT AND ORIGINAL (IF KNOWN) PHYSICAL APPEARANCE

The Watts Hospital complex is a vivid record of hospital design and philosophy from 1908-1954. Constructed within a park-like setting of approximately twenty-seven acres, each of the fifteen buildings of Watts Hospital represents the most educated and modern thought in comprehensive hospital design available at its time of construction. This survey will principally be concerned with the buildings constructed within the first building period, 1908-1926, and the health ideologies which they represent.

Prior to the turn of the century, hospitals were very rare in the United States, and particularly so in small towns such as Durham, North Carolina. In addition, most people believed a hospital was a place to go to die, not get well. This common belief meant that the architects of Watts Hospital had to design a building which was not only sanitary, easy to work in and pleasant to be in, but also a building which would inspire confidence in the possibly terrified patients. Therefore, great effort was expended at Watts to make it as welcoming, homelike, and modern as possible. In Edward Stevens' book *The American Hospital of the 20th Century* (1918) he advises:

> The 20th c. hospital whether built in Spain, Russia, or the U. S., has one common condition in its program—that is, to give the patient the best chance for recovery. If a more thorough study of sanitation, ventilation, nursing, disturbing elements, orientation and environment one or all will help us to design buildings that hasten convalescence and produce the desired results, then that information must be obtained; and, if necessary, we should be willing to circle the globe for it.\(^2\)

There are many important factors of hospital design which the architects of Watts Hospital (Kendall, Taylor and Company of Boston, Mass.) utilized to make Watts the successful health care center it was for sixty-seven years. These factors included such elements as good ventilation; thus ventilating towers and cupolas powered by fans are located on top of every building. Buildings are narrow with large windows in order to allow the maximum amount of light and air to enter. Because it was believed that patients with different diseases should be kept separate and quiet, the typical building arrangement of the time was individual pavilions, rather than one large building as is typical today. Patients were placed in these pavilions based upon disease, sex, or ability to pay. At this time it was also part of every patient's health regimen to be exposed to pure clean air and sunlight, and thus Watts was originally located out in the country, although the city has since surrounded the complex. In addition, the buildings have airing balconies, sun rooms, and courtyards. There were also many walking paths located on the property, giving both the convalescing patients and hospital staff a place to enjoy the outdoors. This extra acreage also meant that the hospital could freely expand when necessary. Again Edward Stevens comments:

> Location is here most important, an environment that will be an uplift to the patient: an outlook that while distant from industries may still remind the patient that he is a part of the world's life and activity.\(^3\)

A concern for cleanliness and long-wearing materials is exhibited in many interior details. All interior window sills, floor and wall connections, etc. are coved. Floors are paved in marble tile and terazzo in areas of heavy use, while maple flooring is used in the patients' rooms.
Finally there was strong concern for the buildings to be fireproof, hence much of Watts is constructed of reinforced concrete and brick. Watts was constructed of high-quality concrete which was utilized for the structures' skeletons of columns, girders, beams, and floors. The wooden roof rafters were the only fire-hazardous components. The roofs were sheathed in mission tile, while the exterior walls were filled with brick and then stuccoed without and plastered within.

Reinforced concrete was first utilized by Ernest L. Ransome in the late nineteenth century, and Ransome became the pivotal figure in the development and design of this material in the United States. Reinforced concrete has many advantages over more conventional materials including its relatively low cost, its fire-proofing abilities, its malleability, its strength, and its durability. The synergistic relationship between concrete and steel is well defined in this contemporary article.

The style of the complex was also considered extremely important to the overall environment. The buildings "should be simple in style and designed to make a pleasing impression upon the patients, with the entrance speaking a welcome." According to the architects, "The general style (of Watts) is a modified Spanish Mission type, with the characteristic red tile roof." In addition the buildings, particularly in their classical exterior ornamentation recall the Renaissance Revival, and in their site planning and general organization, show the influence of the Beaux Arts School.

Buildings constructed at Watts between 1908 and 1926 all share certain visual qualities characteristic of the Spanish Mission style. Typically they are horizontally-oriented massive white stuccoed buildings capped by overhanging red-tiled roofs supported on projecting rafters. Rich classical detailing and arched entrance porches lend grace and formality to the most important buildings. Whimsical Moorish ventilating towers, arched windows, patio, and an overall picturesque, coloristic quality lend charm, texture and congruity to the entire complex.

The Spanish Mission style is derived from the early missions of the western and southwestern United States constructed by the Spanish padres and the more...

*This rather early use of material (reinforced concrete) (1908) is predated by its use in the Roman Catholic Orphanage in Raleigh, and is contemporary with the Masonic Temple Building in Raleigh and the Independence Building in Charlotte, both early North Carolina skyscrapers. The practical meaning of this is, on the one hand, that a beam composed wholly of concrete is usually inadvisable, since its low tensile strength makes it uneconomical, if not actually impracticable, for it may be readily shown that, beyond a comparatively short span, a concrete beam will not support its own weight. On the other hand, on account of the cheaper compressive stress furnished by concrete, an all-steel beam is not so economical as a beam in which the concrete furnishes the compressive stress and the steel furnishes the tensile strength...
decorative Baroque Colonial architecture of Mexico and South America. Developed in California in the late 1800s, this style was a conscious attempt by architects to design "revival" structures which reflected the California experience, climate, and legend. Extremely popular in the western United States, this style was never as common on the East Coast; Watts Hospital is among the foremost examples of this style in North Carolina.

The buildings of Watts are located upon park-like, flat ground, landscaped with large trees and flowering plants. The majority of the buildings are situated on either side of the major central axis running from Broad to Maryland streets. Although the architects eventually planned to expand the complex into a more symmetrical composition, their plans were halted by the Depression and by World War II. By this time hospital philosophy had dramatically changed: self-contained, geometrical, factory-type buildings such as 1954 wing became the architectural image in the post-war years.

ADMINISTRATION BUILDING 1908 (G)

This elegant building is the centerpiece of the Watts Hospital complex. The oldest structure, it is designed in the Spanish Mission style, and is a successful combination of sophisticated aesthetics and modern technology. Again a contemporary architect advises on the design of this entry building: "The entrance to this department (administration) should be carefully studied from the psychological standpoint, with reference to the effect on the would-be patient. The entering visitor, the broad marble information counter at once invites confidence; and with the ample waiting room in the center and the various offices of the institution around the perimeter, one is not apt to lose his way."

This three-story stuccoed tripartite building (with basement) is composed of a central block, flanked by protecting bays, each capped by a separate hipped roof. Each overhanging roof is sheathed in red mission tile, and supported by decorative exposed rafters, now weathered a dark brown. This rich textural surface is further embellished by a delightfully Moorish ventilating cupola, situated on the central block. The cupola is in turn flanked by two interior chimneys.

The central three bays receive the greatest decorative emphasis. A balustraded one-story loggia, with three arched entrances serves as an entry porch. The classical ornamentation on this porch is composed entirely of cast concrete, as are the neck pediments which surmount the second story fenestration, and the strong courses which encircle the building. Decorative wrought iron balconies extend from the projecting bays, which are articulated by rectangular fenestration. The polychromatic name block "Watts Hospi-
is centered over the main entrance arch.

An arched doorway flanked by two arched windows leads to the interior lobby. The architect described this magnificent space thus: "This room is beautifully finished in Caen stone plaster with a marble floor (an intricate design formed of many different colored marbles). The walls are dadoed in quartered oak, exquisite craftsmanship, and the plaster lunettes are frescoed with some very excellent painting (no longer there). The quiet oak furniture adds to the effect of worth and richness, worthy of the splendid aims of the generous man who made it possible." This room is further distinguished by the twin memorial fireplaces located on either end of the large room, which are sheathed in coursed ashlar concrete and covered with Spanish detailing. The remainder of the first floor was used for administration purposes while the rear wing was used for a staff dining room.

The second floor housed private patients and the maternity department while the third floor was occupied by children and private patients. Typically these rooms are plain, yet inviting and cheerful due to the large windows and light-colored plastered walls. They are arranged in an ell-shaped plan, on either side of the central corridor, An airings balcony is located off the third floor and was particularly used by new mother. The blue and gold plaster medallion known as the "Florentine Bambino" is attached to the balcony wall.

MALE PAVILION 1908 (E)  FEMALE PAVILION 1910 (C)  VALINDA BEALE PAVILION 1926 (B)

These three pavilions located just south of the Administration Building are all quite similar in form, except that the Valinda Beale Pavilion is three stories tall, has simpler exterior detailing, and was constructed as a private patients' ward. Each building is long and narrow and terminates at its southern end in a semi-circular sun porch. Topped by tiled roofs, the buildings are further embellished by ventilating towers and cupolas. Two-over-two sash windows punctuate the east and west facades.

The interiors contain a central corridor with private and specialized rooms located on either side. The Male and Female Pavilions also contain open wards, accommodating from fourteen to seventeen patients on each of the two floors. The sun porch located on the south end of the building provided a homely space in which the convalescing patients could enjoy the weather and mingle with other patients. This circular porch is topped by an overhanging conical roof, supported by slender full-sized columns. In addition each pavilion contains a basement floor and a balcony on its western elevation.

CONNECTING CORRIDORS 1908;1926

The buildings at Watts are free-standing, and are connected to one another by arcaded corridors. Originally they were only one story tall, but a second story was
added in the mid-twenties. The first floor is characterized by large arched windows, while the second floor contains rectangular fenestration. Flooded with light, these corridors were used for airing patients and for extra rooms when necessary. Most importantly, they provided all-weather horizontal circulation.

Surgery 1908 (Z)

"The operating pavilion is a one story and basement building devoted exclusively to surgical, accident, and x-ray work. The ambulance entrance is located in the west side opening into a receiving lobby which is adjacent to the minor operating room and accident room. . . . The operating room corridors are amply lighted through skylights as well as with generous windows in the wall. The construction is fireproof like all the other buildings and the walls and floor are of marble tile, and terrazzo." This simple rectangular stuccoed building is covered with a tile roof which is capped with two large ventilating cupolas, adding considerable decorative effect. The operatory is particularly interesting because of its avant-garde emphasis on light, cleanliness, color, and curved surfaces.

Kitchen 1908 (Y)

"The kitchen should be so located that food—hot palatable food—can be easily transported with the least delay and the least amount of handling, from the place where it is cooked to the patient's tray or dining table." The kitchen is attached to the rear of the Administration Building. This simple, one-story, utilitarian structure is stuccoed and enlivened by stepped parapets on either end, which shield the gabled tin roof with monitor. This building was later used as a laundry.

Maintenance Building 1908 (X)

This stuccoed building is quite similar in appearance to the old kitchen. It is a two-story structure with a third floor monitor roof and stepped parapets which conceal the flat roofs. This building originally contained a boiler room on the first floor and a laundry on the second floor. Later a machine shop was attached to the south wall. The kitchen and laundry are separated by a sixty foot service yard.

Wyche House 1910 (I)

"Perhaps next in importance to the care of the patient is the care of the nurse, for to do her best and give comfort and help to the sick, a nurse must conserve her own health and strength." Wyche House was meant to be just such a building. Separate from the hospital itself, it provided living quarters, classroom space, and recreational facilities for the nurses of Watts Nursing School. Built in the Spanish Mission style, Wyche House is similar to the Administration Building, though less elegantly executed.
This two story stuccoed building with basement presents four bays on its main (south) facade, which faces on the main road through Watts. The front and rear elevations are further distinguished by a triple arched loggia, shielding the main entry doors. The long building is capped by a retiled hipped roof, supported by wooden rafters. A cupola and corbelled chimney further enliven this roof surface.

The interior is vaguely colonial in its simple detailing and moldings, except for the unusual gleaming white ceramic tile mantelpiece located in the first floor reception room. This building contains nineteen double rooms and six single rooms, located on either side of a central corridor. In addition, originally planned were two large reception rooms, five classrooms, a gymnasium, a locker room, dining and sewing facilities, as well as a library. A well-integrated rear addition, constructed in 1925, accommodated twenty-four more nurses and provided more classroom space. 17

EMERGENCY AND PHARMACY: SECOND OPERATORY Between 1913 and 1937 (D and Z)

Both of these structures are simple one-story rectangular buildings with flat roofs. Snuggled among the older buildings, these heavily anonymous buildings are enlivened only by copper gutters and a single cornice string course.

ENGINEERING COTTAGE c.1928 (T)

This picturesque cottage is located at the northwest intersection of the main interior street and Maryland Avenue. The one and one-half story stuccoed frame house is capped by a gabled roof with pedimented dormers. Decorative bargeboards ornament the gable ends, while two chimneys extend from the shingled roof. Three bays wide, the front entrance is located on the south side of the house, while a one-story projecting bay with gabled roof, extends from the house and shelters a rear porch. Windows are eight over eight double sash, flanked by battened shutters. Today, this house is used as office space; however, its interior bungalow plan with colonial features remains intact. Sited among the pines, this doll-house like dwelling was originally occupied by the hospital engineer.

HILL HOUSE (H) 1945

The largest residence and classroom space in the Watts complex, this stuccoed building was constructed in 1945 to enlarge the nursing school facilities. It contains room for eighty students, five staff members, a library and classrooms. This large two story structure (with basement) presents ten bays on its main (south) facade and is organized on an L-shaped plan. The facade is pierced by rows of two-over-one double-hung windows. A one-story projecting pavilion with arched opening shelters the main entry. Ornamental scuppers are the only decorative feature of this plain, flat-roofed building.
NEW BOILER HOUSE 1954 (S)

This utilitarian brick and cinderblock building contains the boiler plant. Horizontal windows are located just below the cornice line of this flat-roofed rectangular building; it is flanked by two round brick steam towers.

WING 1954 (A)

The 1954 wing was constructed in an attempt to modernize and expand the aging, overcrowded and increasingly obsolete original complex. Designed by Durham architect George Watts Carr,* this self-contained structure reflected the newest trends in hospital design and philosophy when first built.

The four story L-shaped building (with basement) is located directly west of the Valinda Beale Pavilion, and contains some 99,000 square feet. This geometrical structure of brick and glass appears totally unrelated to the earlier buildings. The architect’s son, Robert Carr,18 attributes this lack of integration to the common belief that the old buildings would soon be replaced.

The front elevation (south) faces Club Boulevard and contains concrete solar shades which shield the south fenestration. This horizontally-oriented building is articulated by alternating courses of windows and brick bands. Due to the large percentage of windows the gleaming interiors are extremely well lit.

Like the original Administration Building, the 1954 Wing can be approached by car by a main entrance culminating in a circular drive before the front entry. The entry doors are approached through a one story colonnade, a well-executed 1950s design. Wood paneled walls and angled vertical wooden slatted room dividers define this space still occupied by the original turquoise blue furniture. Interior walls are finished in plaster with marble wainscoting on the first floor and terrazzo flooring throughout. The ground floor originally contained the kitchen and dining areas, while the first floor housed the lobby, administrative offices, and x-ray rooms. Patients’ rooms were located on the second, third, and fourth floors, with the surgical suite on the second floor, obstetrics on the third floor, and laboratories on the fourth floor.19 This wing in combination with the original buildings accommodated some 327 patients and thirty-seven babies in 1974.20

INHALATION THERAPY BUILDING 1970 (F)

Located adjacent to the Maintenance Building, this structure was the last addition to the Watts Complex. Constructed of concrete block, with stucco finish, this five-bay rectangular building was used for both inhalation therapy and office space.

*George Watts Carr also designed the CCB Building in Durham, a sophisticated Art Deco skyscraper.
NEW LAUNDRY  Constructed 1939, extensively remodeled 1976  (R)

This large, horizontal, warehouse-like, one-story brick building was extensively remodeled in 1976. Sheathed in brick veneer, this plain structure is enlivened by a large overhanging cornice band and projecting pyramidal skylights. This building is still used as a laundry today by Durham County General Hospital.
FOOTNOTES


2. Edward F. Stevens, The American Hospital of the 20th Century (New York Architectural Record Publishing Company, 1918) p. 4; hereinafter referred to as "Stevens." This contemporary book of hospital design was written by a man who worked on some hospital projects with Kendall and Taylor and thus provides valuable insights about hospitals built in the first three decades of the twentieth century. Also photos and floorplans.


7. Albert Kendall, "Watts Hospital--A Pioneer of the South", Modern Hospital (July, 1922) p. 6, hereinafter referred to as "Kendall."


11. Stevens, p. 11.

12. Kendall, pp. 6, 8.

13. Interview with George Watts Hill, June 1979. His grandfather founded Watts Hospital, and he himself served on the Board of Directors for some forty years; thus he is an invaluable source of information about Watts.

14. Kendall, pp. 9, 10.

15. Stevens, p. 185.
FOOTNOTES (cont'd)

16. Stevens, p. 175.


18. Interview with Robert W. Carr, June 1979. Mr. Carr, an architect, recently conducted an in-depth study of the buildings' structural condition, and is also the son of George Watts Carr, the architect who designed the 1954 Wing.


George W. Watts, "a doer of good work and a Christian gentleman,"1 gave a gift of a hospital to his adopted city of Durham, North Carolina, on February 21, 1895. Durham had been good to Mr. Watts, who had made a fortune in the industries which formed an important city from a quiet rural railway stop: tobacco, textiles, railroads and banking. Watts stated at the hospital's dedication "Watts Hospital was built to show my appreciati of your fellowship and kindness, and to do so in such a manner as would benefit our peopl and glorify the name of the Master."2

The first in the city and the sixth in North Carolina, the hospital was open to every white person free of charge, with a small fee charged only if the patient could afford it, a provision which helped make it a beloved local institution and which led to troubling financial difficulties throughout its eighty-one-year history.

This beneficent gift was viewed at first with some misgiving on the part of Durham's citizenry. In the nineteenth century a hospital was considered a place where one went to die.3 Slowly attitudes began to change when, of the sixty-eight people who were treated during the first year, only three died. The first hospital in the state to receive a class A rating from the American Medical Society, Mr. Watts' hospital became a source of pride for the community.

A growing population and patient load soon created a demand for more space than the modest cottage style facility composed of five small buildings on four acres could provide, and in 1909 Mr. Watts built a large, modern hospital in the pavilion style on twenty-seven acres on the edge of town.

As early as 1884 a local physician, Dr. Albert G. Carr, approached the Durham Board of Aldermen hoping the city would fund a hospital for its booming population (150 percent increase in population during the 1880s from 2,091 to 5,485), but he met with no success. Equally futile were approaches to the Durham Medical Society (1888) and Trinity College (1891)4.

A patient of Dr. Carr's, George Watts took an interest in the project because of his frail wife's frequent visits to Johns Hopkins Hospital in Baltimore, and his own illness in 1892 and the excellent nursing care he received in Baltimore.

Son of a prominent Baltimore tobacconist, George W. Watts was born August 18, 185 in Cumberland, Maryland. A graduate of the University of Virginia, 1871, George soon after graduation began working for his father, G. S. Watts. The elder Mr. Watts, realizing the potential of tobacco manufacturers W. Duke and Sons of Durham, invested in the young company which later grew into the giant American Tobacco Company, and bought a one-fifth interest for his son.

George Watts moved to Durham in 1878 when the firm of W. Duke and Sons was consolidated with that of B. L. Duke. In 1885 this company, "regarded as one of the largest
manufacturers of the kind in the world, was incorporated as W. Duke, Sons and Company, and Watts, a capable and energetic administrator, was chosen secretary/treasurer. When the American Tobacco Company was established in 1890 he became one of the managing directors.

He was also a prominent figure in the building of six railroad lines including the Durham and Northern, and in the formation of the Durham Water Works and the Electric Light Company. He was either director, president, or vice president of several textile companies throughout the state including in Durham the Erwin Mills, Durham Cotton Mills, Commonwealth Cotton Manufacturing and the Golden Belt Manufacturing Company. He also directed the Fidelity Bank in Durham, the Farmers & Commercial Bank of Raleigh, and a trust company in Baltimore. In addition to the American Tobacco Company, he was also a director of Blackwell's Durham Tobacco Company and the R. J. Reynolds Tobacco Company in Winston-Salem.

As well as being an astute businessman, Watts was also a generous philanthropist, not only endowing Watts Hospital, but giving generously to the Presbyterian Church, its orphanage at Barium Springs, North Carolina, and to Elizabeth College in Charlotte whose buildings later formed the nucleus of Presbyterian Hospital. He was instrumental in funding the Presbyterian Union Theological Seminary and its move to Richmond, Virginia.

Watts and his first wife Laura Valinda Beale had one daughter, Annie Louise Watts, who married John Sprunt Hill; their descendents are prominent Durham citizens who have maintained the family's traditional business and philanthropic interests. Their son George Watts Hill has served since 1947 as Chairman of the Board of Central Carolina Bank and was president of the Watts Hospital Board of Trustees from 1937-1961. Mr. Hill also was a co-founder of the Blue Cross-Blue Shield and served as a Public Trustee of this insurance organization from 1933-1974.

Expanded, renovated, and rebuilt over the years, Watts Hospital has known two sites. The original Watts Hospital, built in 1895, was a complex of five small buildings which stood at the northeast corner of Main Street and northeast Buchanan Avenue. Designed by Rand and Taylor of Boston and built at a cost of $30,000 with a $20,000 endowment, it reflected the popular functional and inexpensive "cottage style" hospital. Connected by long covered corridors or arcades, the hospital was composed of a central administration building, male pavilion, female pavilion, surgical building and combination mortuary and carriage house. It had twenty-two beds, eighteen of which were free of charge and designed "with rounded edges and curved inner surfaces to eliminate dust."

The hospital was intended not only to treat the sick, but also to train nurses: a school of nursing was established there in 1895, the second in the state. Watts considered "nursing a religious calling as well as an occupational pursuit." He reported:
Three years ago I was, for a short while, a patient in a hospital, and only then did I fully learn the invaluable services of her we term a trained nurse. With her womanly gentleness, given to her by God, augmented by years of study, reflection and experience, she becomes almost a heavenly visitant, an angel of mercy at the bedside of the sick. She knows his needs, she realizes his condition; her hand is always ready to make him comfortable; her earnest sympathy encourages him; her firmness stimulates him, and her training enables her to faithfully carry out the physician's instructions. More than once I have been told that her services are more valuable than physic.

Nurses then supplied not only patient care, but much of the manual labor necessary to run a hospital, such as cooking, serving meals, cleaning wards, etc. Student nurses lived in the hospital at no cost. The first graduating class of Watts Training School consisted of one student, Miss Ethel Clay, but by 1906, twenty-one nurses had graduated from the demanding program.

The "Watts Hospital Board of Lady Visitors Minutes" for 1895-1896 (Duke University Manuscript Department) provide an intriguing and homey insight into the participation of local citizens in monetary and moral assistance to the new institution. A small organization, the Board of Lady Visitors, appointed two of their number to make weekly inspections to the hospital.

The ladies were kept busy sewing "homemade robes and wrappers for the free wards" and holding concerts (average net, $28), ball games, and chrysanthemum shows to raise funds. Donations of clothes and food were welcomed and these ranged from "one dozen selected hyacinth bulbs," to "Julian Carr's ten cans of tomatoes." The September, 1895 minutes record "several friends have sent fruit and vegetables during the month... have also received 2 (two) jars of preserves."

The Board of Lady Visitors kept a careful patient census with the average number of patients for May, 1895, being three and one-half; June, being two and three-fifths; July, being six and one-sixth; August, being seven and two-thirds. In September, for instance, they noted:

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<td>3</td>
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Other patients left in a more unorthodox manner: May--"two patients discharged for rudeness to nurses." A poignant note is found after the list of Thanksgiving donations: "Baby Esther Miller died November 21; other patients have all done nicely."
The nurses' sitting room benefitted from Thanksgiving donations from local businessmen. The room, located on the second floor, front hall of the main building, became "a neat and cozy sitting room for the use of the nurses set up (with) everything needful."

Nothing escaped the ladies' notice, and they commented on the building's maintenance. January, 1896, found "everything in perfect order except a pipe which had been broken and been repaired." June found, "lamps for the entire building needed...twelve or more for use when the electric lights go out as they have on several occasions."

A large two-story addition to the hospital was made in 1906, donated by Mr. Watts who continued as the main financial supporter of the institution. The addition contained non-charity wards, an increase of thirty beds, and two nurses' rooms with baths. Despite the new addition, increased utilization and lack of expansion room on the four-acre site necessitated a new and larger hospital. The administration building of the original complex was moved in 1914 to 302 Watts Street, Durham, and is now a handsomely restored private residence.

"A great modern hospital" rose on the twenty-seven acres on Broad Street and Club Boulevard that George Watts donated. He also financed the $335,000 plant and established an endowment of $300,000. This 110-bed facility, designed in the fashionable Spanish Mission style by Bernard S. Taylor of the Boston firm of Kendall and Taylor (designers of Johns Hopkins Hospital), represented the "pavilion" style of architecture typical of larger urban hospitals. The dedication and presentation of the second Watts Hospital took place on December 2, 1909. This institution contained medical and obstetrical wards and an operating pavilion. Surgical wards were completed the following spring.

The nurses' home was not ready for occupancy until June, 1911. The Greensboro Daily News reported on December 3, 1909, that the home "Will be in appearance, externally the exact replica of the charity wards in the building that sits farthest south. When completed, the chain will be one beautifully symmetrical complex and the cost will run up to $250,000 for buildings alone."

Prior to 1911 the nurses had lived on the third floor of the hospital. Their new home named Wyche House in honor of Mary Lewis Wyche, the dynamic and influential superintendent of both Watts Hospital and the Watts nursing school from 1903-1913, was a two story, 45 feet by 100 feet structure. A small reference library for the nurses was located in the Board of Trustees room by 1923. Wyche House was more like a college dormitory than an extension of Watts Hospital. In his speech at the 1909 dedication, the Reverend John C. Kilgo, president of Trinity College, which later became Duke University, remarked:

I congratulate those unselfish women who have given themselves to the task of nursing the sick that they have such an elegant home, such
exceptional opportunities to study their profession; and such excellent chances to minister to the suffering.\textsuperscript{13}

By 1910 the Durham Morning Herald was able to report "the hospital idea has so taken the people who were formerly its enemies" that George Watts was planning an addition. The newspaper considered the hospital the "largest single work of philanthropy that any North Carolinian has done along charitable lines" and that Watts's idea was not the establishment of an institution whose charity wards were not so mean that the respectable folks should be ashamed to be caught in them."\textsuperscript{14}

Hospitals have never been known as money-making propositions and Watts Hospital was no exception to this rule. Relying on contributions from the public, city and county governments, and the generous George Watts, who in 1918 contributed $5,000 to cover a budget deficit, Watts Hospital was a grateful recipient of a portion of the $40 million Duke Endowment Fund established in 1924. Thirty-two percent of the Fund was earmarked to maintain public hospitals. One dollar per day per charity patient was allocated, an amount which for Watts amounted to $17,575 in 1928, and this helped the hospital deal with the deficit caused by its generous charity care tradition.

George Watts died March 7, 1921. In his will he left an apartment house (Staff House) which had been erected on the site of the old hospital and $200,000 in memory of his first wife Laura Valinda Beale Watts. This sum was added to the Endowment Fund which the trustees placed in a special building account for construction of a private patients pavilion which was erected ca. 1926 at a cost of $180,871.85.

Additions to the hospital continued over the next several years. At this period, it was one of three North Carolina hospitals recognized by the American Medical Association for the training of interns and held a class A qualification from the American College of Surgeons. A major addition was made to Wyche House in 1925 which "expanded accommodations, demonstrations and classrooms and new equipment. Continual additions and renovations to wards, operating rooms, laboratory equipment resulted in facilities for 200 patients by 1928."\textsuperscript{15}

The Depression profoundly affected the finances of the hospital with charity care increasing dramatically and attendant dramatic cost rises. The charity load jumped from 22 percent to 69 percent between 1929 and 1932 with the deficit increasing to $7,000.\textsuperscript{16} By the end of 1938 the deficit had reached $316,877.\textsuperscript{17}

Duke University Hospital, opened in 1930 and also hard hit by the Depression, joined Watts Hospital in developing a private hospital insurance plan, the Hospital Care Association, which, from its inception in 1933, carried the Blue Cross symbol. This was an aid in insuring the solvency of both hospitals, but both in the following decades also began to rely more heavily on government grants and aid.
In 1936 municipal appropriations enabled the hospital to construct a new two-story x-ray pavilion across from the operating room. The new pavilion contained x-ray, fluoroscopic, examining, dressing, and dark rooms and office space on the ground floor and an isolation ward on the second floor.

In 1939 the city and county governments each voted $25,000 supplements to Watts Hospital for charity hospitalization and construction of a new laundry plant and boiler room. With additional funding coming from the Duke Endowment, the structures were completed that year.

Since 1935 the Board of Trustees had hoped to build another nurses home or add to Wyche House, but because of financial difficulties and the outbreak of World War II, this matter lost priority. However, in 1945 with funds left to the hospital by Annie Watts Hill, along with other private donations and appropriations from the city, county, and federal governments, the home was completed. Hill House, named in honor of Mrs. Hill, provided accommodations for eighty students and five staff members as well as a library and classrooms.

The post war period saw serious overcrowding with corridors lined with temporary beds, other beds placed in the center of wards, and several private rooms converted to semi-private. The number of beds grew to 193 regular and 37 temporary. The physical plant was deteriorating. Clearly, a major plan for expansion was needed. The trustees realized that the hospital could no longer be totally private and self contained, but would have to appeal to local citizens to pass a $2 million bond issue. During the vigorous public relations campaign that the hospital waged in 1950, the ownership of the hospital became an issue, because the hospital charter specified that the property would revert to the Watts heirs if it ever ceased operations as a health care facility. Accordingly a quit claim deed was executed and the heirs relinquished all rights to the buildings that comprised Watts Hospital. The campaign was a success and the bond issue passed April 22, 1950.

Construction of the large new brick wing was well underway by late 1952, but the rest of the 43 year old structure was deteriorating rapidly. One history recalled,

The conglomerate of aging structures that comprised Watts Hospital was sprawling and spread out, adding greatly to the inefficiency imparted by age alone. Ironically enough the new wing would only heighten this aspect as more and more personnel time would be spent in travel between the various far flung segments of the plant. Thus during the 1950s and (later during the 1960s) the trustees found themselves increasingly occupied with the task of struggling to keep pace with the repair and renovation needs of the hospital.
The complete and fully equipped new wing opened January 1, 1954. Two years later various renovation projects were completed, but it was becoming clear that despite the 1954 addition the expanding Durham population signalled future expansion for the hospital. In 1961 a New York architectural firm was engaged to conduct a study into the long range construction goals of the hospital. A "second opinion was offered by the University of North Carolina Department of Hospital Administration in 1965. They suggested that 444 beds would be needed and they would have to be provided either by a further major expansion program or by replacement of the existing Watts facilities (capacity 340 beds at this time)."

In 1967 state hospital inspectors issued a temporary conditional license to Watts. The regular license was withheld until necessary renovations to the older part of the hospital were completed in April, 1968.

The results of a forty-two month study of Durham's health care needs by the Hospital Planning Commission were published in August, 1968. The report recommended a single county government board to oversee the facilities. But its major recommendation that a 459 bed hospital be constructed on a new site was to change the future of the Watt plant.

The new Durham County General Hospital rose on a fifty-acre site in northern Durham County in 1976. When the patients were transferred, the older section of Watts was left vacant. The nursing program remained on the old campus and the 1954 wing was in use for classrooms, administration and medical facilities for Watts Group Practice, comprised of family practitioners. The laundry also remained in use serving the new hospital.

A 1979 report by Carr, Harrison and Pruden, a Durham architectural firm, assessed the structural integrity of the building and its adaptability for a new use. An innovative adaptive reuse of the gracious old hospital will become a reality in September 1980, when the doors open for the North Carolina School of Science and Mathematics. Two hundred and fifty gifted high school students will attend classes and live in dorm rooms that once housed patients.

Before the new school opens, all health care operations with the exception of the laundry will move to Durham County General. Plans are on the drawing board for a new building on its grounds to be named in honor of George W. Watts and it will, among other uses, house the nursing school.

Watts Hospital will continue to serve Durham in its new capacity as a school. A benefactor of education, George Watts would undoubtedly approve this use. During his lifetime "he provided and maintained the medical focus of Durham for a period of more than thirty years, a record of civic interest and devotion rarely equalled. It stands as his enduring monument."
FOOTNOTES


5. The Durham Recorder, ibid.

6. Flowers and Schumann, p. 43.


9. Perry, p. 56.


12. Ibid.


19. Perry, p. 56.
20. Trustees Minutes, April 24, and May 12, 1944.


The approximately twenty-seven acres containing bounded on the north by Sprunt Avenue, on the south by Club Boulevard, on the east by Broad Street and on the west by Maryland Avenue.

Beginning at an iron stake same being point where westerly side of street now laid out graded, macadamized and known as Seventh Street intersects the south westerly side of the Guess macadam road, thence south 40°30' west along westerly side of said Seventh Street as same now runs twenty six hundred and twenty (2620) feet to an iron

LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES

STATE CODE COUNTY CODE
STATE CODE COUNTY CODE

NAME / TITLE Architectural Description: Janet Silber, Consultant
Historical Significance: Patricia S. Dickinson, Consultant

ORGANIZATION Survey and Planning Branch
DATE November 1, 1979

STREET & NUMBER 515 N. Blount Street
TELEPHONE 733-6545

CITY OR TOWN Raleigh, North Carolina 27611

STATE HISTORIC PRESERVATION OFFICER CERTIFICATION

THE EVALUATED SIGNIFICANCE OF THIS PROPERTY WITHIN THE STATE IS:

NATIONAL ___ STATE X LOCAL ___

As the designated State Historic Preservation Officer for the National Historic Preservation Act of 1966 (Public Law 89-665). I hereby nominate this property for inclusion in the National Register and certify that it has been evaluated according to the criteria and procedures set forth by the National Park Service.

STATE HISTORIC PRESERVATION OFFICER SIGNATURE

TITLE State Historic Preservation Officer
DATE November 1, 1979

FOR NPS USE ONLY
I HEREBY CERTIFY THAT THIS PROPERTY IS INCLUDED IN THE NATIONAL REGISTER

DIRECTOR, OFFICE OF ARCHAEOLOGY AND HISTORIC PRESERVATION

ATTEST:

KEEPER OF THE NATIONAL REGISTER
### PERIOD

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### SPECIFIC DATES

**STATEMENT OF SIGNIFICANCE**

The Watts Hospital complex, the major part of which was built 1908-1926 largely through the generosity of millionaire industrialist George W. Watts, was the first hospital in Durham and one of the first in North Carolina. Watts was the son of wealthy tobacco industrialist G. S. Watts, who helped establish the American Tobacco Company, and was himself successful in tobacco and textile industries, railroads, and banking. He conceived the idea of a hospital which would offer quality health care of the citizens of his adopted city of Durham, regardless of their financial status. Following this mandate, the staff of the hospital managed to provide charitable health care without sacrificing quality. Though it operated on a deficit budget for years, Watts was the first hospital in the state to receive a class A rating from the American Medical Society. The Spanish Mission style complex is typical of other hospitals built in the United States in the late teens and twenties and represents an effort by the architects to design buildings which would instill confidence in a population still largely wary of hospitals. Several pavilions comprised of ventilating towers, brightly lit rooms, airing balconies, and spacious waiting areas, all situated on wooded grounds complete with walking paths, are indicative of the trend in health care philosophy of that day. Operating as a hospital until 1976, the Watts hospital complex will reopen in 1980 as a school for students gifted in math and science.

### Criteria Assessment:

A. Indicative of the growing concern for modern health care prevalent in the early part of the twentieth century.

B. Associated with millionaire philanthropist George W. Watts, who helped expand the state's major industries and business interests--tobacco, textiles, railroads, and banking; and with the architecture firm of Kendall, Taylor, and Company, of Boston, Mass.

C. An example of the Spanish Mission style architecture, rare in North Carolina; and early twentieth century hospital architecture which features narrow buildings with airy open spaces.
CONTINUATION SHEET


Durham Morning Herald, Durham, N. C. June 27, 1941.


Kendall, Albert. "Watts Hospital - A Pioneer of the South," Modern Hospital, July, 1922


Sanborn Maps for Durham, 1913, 1937.

stake in westerly side of said Seventh Street as same now runs, thence North 2°48' East twenty six hundred and eighty two and 7/10 (2682 7/10) feet to an iron stake in line of southwesterly side of Guess Macadam Road, thence South 43°50' East along the southwesterl side of said Guess Macadam Road eighty one (81) feet and six (6) inches to point or place of beginning, same being small triangular strip of land caused by widening and straightening of street in front of land known as "New Watts Hospital Property".
Watts Hospital (Durham County)
Corner of Broad Street and Club Boulevard
Durham, NC

Zone 17
NE 17/687510/3988040
SE 17/687500/3987660
SW 17/687220/3987660
NW 17/687220/3988110

NAL MAP ACCURACY STANDARDS
SURVEY, RESTON, VIRGINIA 22092
AND SYMBOLS IS AVAILABLE ON REQUEST
Watts Hospital Plot Plan
1923

A  Administration Building
B  Power Route and Laundry
C  Womens Pavilion
D  Operating Pavilion
E  Mens Pavilion
F  Nurses Home
G  Maternity Pavilion - Future
H  Isolation Ward - Future
I  Convalescent Home – Future
J  Private Room Pavilion
K  _______ Quarters - Future