



Pennsylvania Hospital

Conservation Management Plan

Prepared for:
First Hospital Historic Preservation Committee
of Pennsylvania Hospital

Prepared by:
PennPraxis
Center For Architectural Conservation

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Conservation Management Plan Overview

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October, 2021

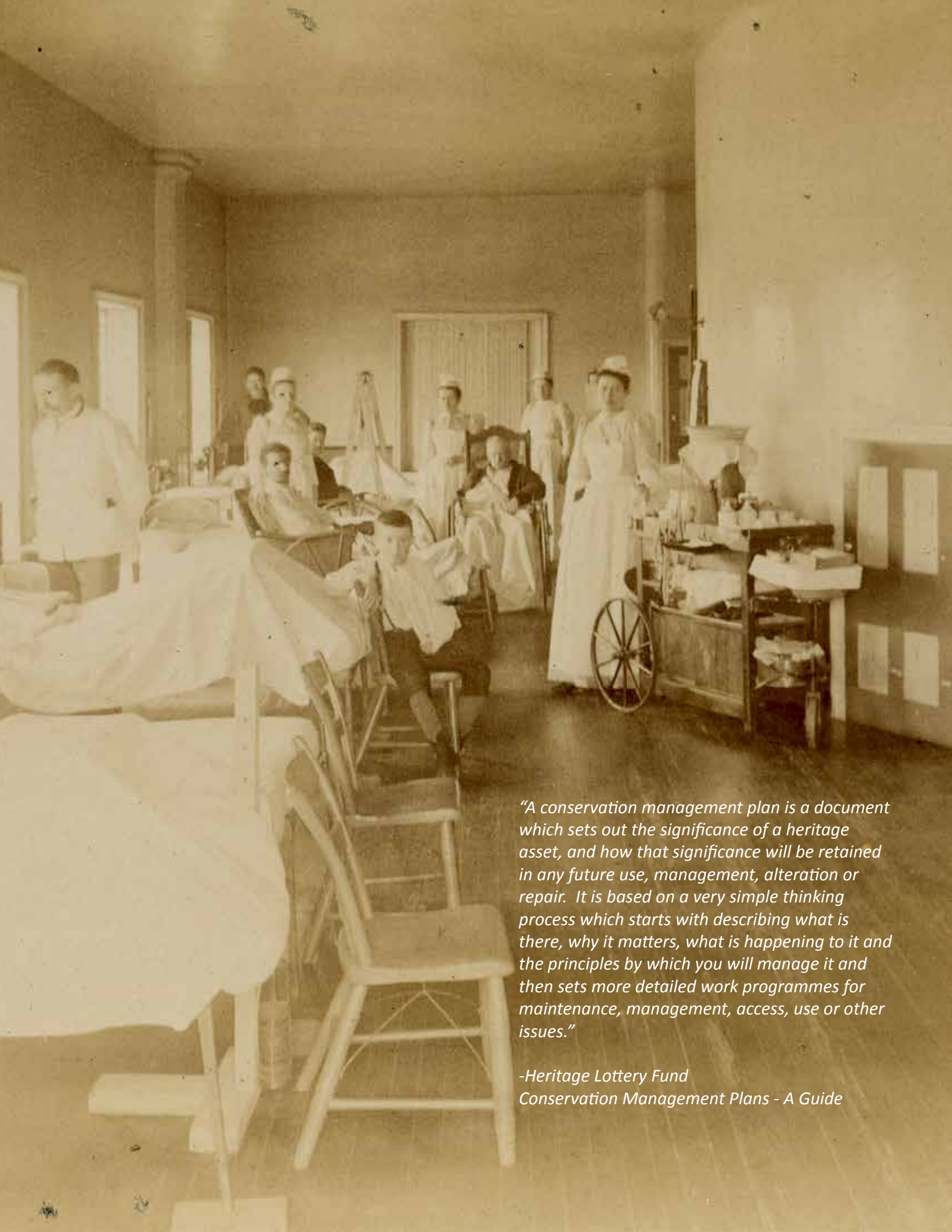
Project Background

Pennsylvania Hospital is the first chartered hospital in the nation, founded in 1751 by Benjamin Franklin and Dr. Thomas Bond. The Hospital has long been an innovator in patient care, treatment techniques, and medical research. Today, patients are cared for in state-of-the-art facilities, but the heritage of the institution is at the core of the institution and a source of ongoing inspiration. The National Historic Landmark Pine Building, outbuildings, grounds, and extensive collection of historical artifacts of Pennsylvania Hospital have incredible significance and require skilled preservation techniques by highly trained specialists. Safeguarding this iconic institution and the holdings requires an understanding of conservation and management needs, sustainable sources of funding, and adherence to an overarching conservation philosophy that articulates and embraces the challenges inherent in the Hospital's role as both a modern hospital and a public-facing cultural institution.

A CMP for Pennsylvania Hospital serves many functions:

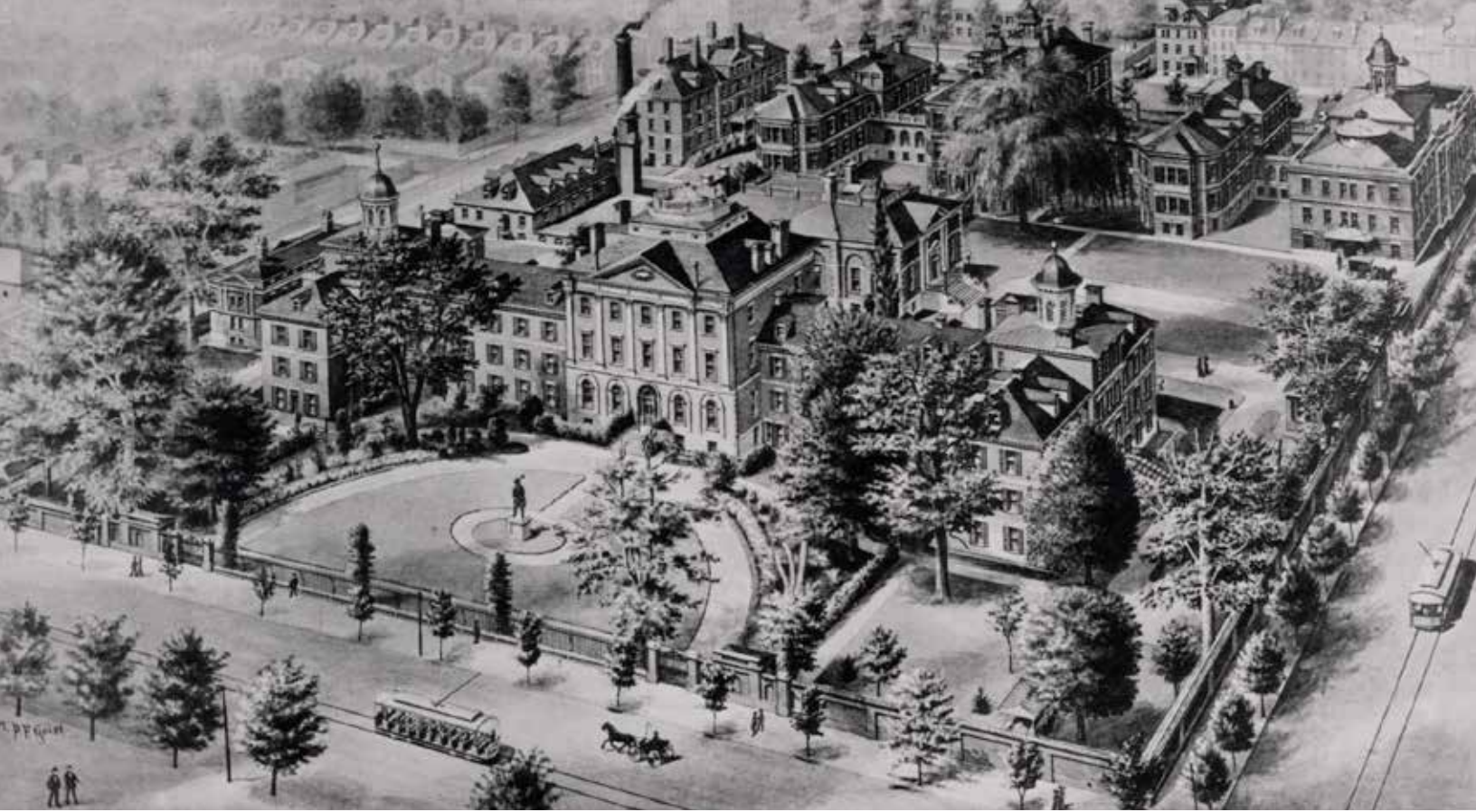
- it sets out the significance of the site including all historical assets as a whole;
- provides a clear and comprehensive conservation/preservation history;
- assesses and prioritizes the conservation of various site components;
- outlines recommendations, treatments, maintenance schedules, and conservation policies that help to ensure consistency in conservation and management approaches; and
- provides an updateable reference document for how to holistically approach conservation, use, and development based on the retention of significance.

A CMP incorporates values held by different stakeholders. It lays out a set of priorities reflective of different user groups and serves as a principal reference for future decision-making, ensuring that new work, uses, alterations, repairs, or management do not inadvertently impact or detract from the site's overall significance.



"A conservation management plan is a document which sets out the significance of a heritage asset, and how that significance will be retained in any future use, management, alteration or repair. It is based on a very simple thinking process which starts with describing what is there, why it matters, what is happening to it and the principles by which you will manage it and then sets more detailed work programmes for maintenance, management, access, use or other issues."

*-Heritage Lottery Fund
Conservation Management Plans - A Guide*



The Pennsylvania Hospital is significant for its status as the nation’s first hospital. In continuous use for more than 260 years, the Hospital has been the site of innovations in clinical care, public health, medical research, education, and mental health treatment. Founded in an era of American Enlightenment ideals, the Hospital evolved within a network of formative Philadelphia civic institutions and emerging disciplines. As such, the Hospital’s history and relevance extends far beyond its own walls and founding figures. Intimately linked to botany, science, print culture, art and medicine, technology, theories of social welfare, the role of women in society, race, and urban development, among others, Pennsylvania Hospital is illustrative of many stories and historical developments. These stories can be explored through the site, buildings, landscape, collections, and people that have remained integral to the institution. Rare among its peer medical institutions, the Hospital retains its original building, historic spaces, and collections in situ, which offers a glimpse into its institutional evolution and the development of thought in one place over time.

Ownership & Heritage Status

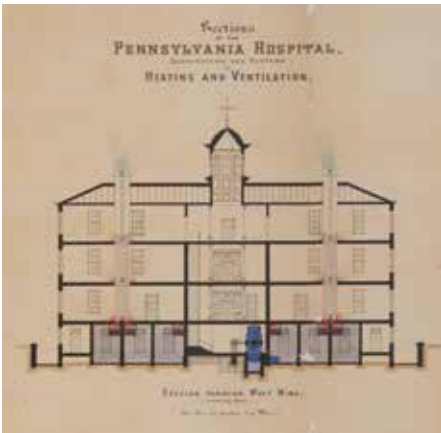
The Pennsylvania Hospital's Pine Building is a designated National Historic Landmark by the United States Secretary of the Interior. It was listed in 1965. The Hospital campus was listed as an individual historic property on the Philadelphia Register of Historic Places in 1957. It is also included in the Society Hill Historic District, designated in 1999. The Pine Building's East, West, and Center wings, the Ayer Building, the perimeter wall and the grounds south of the Pine Building were all included in the Society Hill District nomination as "significant." The Gate House was included as "contributing." The Hospital complex is owned by the Trustees of the University of Pennsylvania. The scope of this project was confined to the area bounded by Spruce, Pine, 8th and 9th Streets. Other significant historic buildings are affiliated with the Hospital and should be subject to similar planning processes.



Stakeholder Input



An engraving by W. E. Tucker shows the formal south facade of the Pine Building. (Image: Pennsylvania Hospital Archives)



Sections of the Pennsylvania Hospital illustrating the System of Heating and Ventilation, 1876. Portions of various systems are still extant throughout the Pine Building. (The Athenaeum of Philadelphia)



James Trenchard engravings of a William Bartram drawing of “Franklinita alataamaha” (Image: American Philosophical Society Library)

Balance: It was clear from stakeholder conversations that there is a balance to be struck between the healthcare mission of the Hospital and the cultural values of the institution. The CMP is designed to practically negotiate this tension. Stakeholders agree that the Hospital mission and historical value are integral to one another and that caring for both aspects--and highlighting the ways in which they overlap--is mutually beneficial. This theme also raises issues around space use and allocation which will need to be negotiated in terms of public access, employee needs, safety, and security.

Access: Broadly speaking, access was a key theme. There was an expressed desire to enhance access to the site, archives and collections for scholars, students, researchers and public visitors. There is an explicit need to enhance access to the narrative of the institution. Moving beyond the past institutional narrative of famous founders and towards more contextual and interrelated narratives that frame the Hospital in terms of its role in public health, medical education and innovation, social and national history, and civic life will broadly extend the Hospital’s relevance to contemporary audiences. There is great potential to interpret these various contexts using the Hospital’s collections, spaces, landscapes and through active partnerships with other institutions.

Potential & Relevance: There is enormous opportunity to expand the narrative of the hospital. Moving beyond the founding fathers narratives creates space to explore the actual and under-interpreted depth and dimensionality of the Hospital’s significance and relevance. There are many more stories to tell. Not just of individuals or groups of people but also

about disciplines, knowledge networks, and economy. Many stakeholders, particularly those in academia and working within the culture sector, encouraged embracing the complexity of the site by exploring the history and evolution of the place through the lenses of race, gender, mental health care & stigmatization, access to healthcare, etc. With this approach, the Hospital's built spaces, archives, and material collections provide a wealth of resources to interrogate and discuss contemporary issues, reflect on societal change, and highlight lingering questions.

Partnerships: Pennsylvania Hospital is well-positioned to initiate partnerships and collaborations with schools, universities, and other cultural organizations and historic sites. As part of PennMedicine, there may be opportunities to explore academic partnerships that encourage access to and analysis of the Hospital's archives and historic collections in pursuit of new research and engagement. Interconnectivity between histories of institutions and the development of medicine as intertwined with botany, art, the humanities, law, governance, and urban development offer innumerable connections to other sites around the city and beyond many of which function as historic sites and archives today. In the past, these relationships have been developed through exhibitions, public lectures, and speaker series.

Identity: The Hospital is a locus of multi-generational identity. The depth of its history has fostered a distinct sense of identity among its patients and employees, (both long-term and past), who express a strong connection to the place. The Hospital is both part of and distinct from the University of Pennsylvania Healthcare System. Both of these identities are valuable and both entities, the Hospital and the University, stand to benefit from highlighting their historic and current relationships.



In this 19th century map of Philadelphia, the Pennsylvania Hospital is identified as a significant place of interest in the Table of Reference.



A contemporary Facebook post celebrating the Hospital's gardens in the spring of 2021.



The northern half of the Hospital's campus has always been dedicated to modern hospital facilities and has evolved alongside advancements in medical technology. (Image: Pennsylvania Hospital Archives)

An Evolving Site

In 1751, the Hospital was located at the western fringe of the city. Today, it sits within Center City Philadelphia. While the southern half of the site has remained relatively stable in form and design signaling the Institution's awareness of its historical identity and significance, the northern half of the site has been allocated to innovation and change to meet the needs of modern medicine. The project site embodies these complementary and integrated values - history and technical innovation in the service of patient care and medical research.



The 1794 Plan of the city and the suburbs of Philadelphia shows the Hospital campus (encircled by the red dots) relative to the bustling city developing along the Delaware River. Only the East Wing and Elaboratory are present.



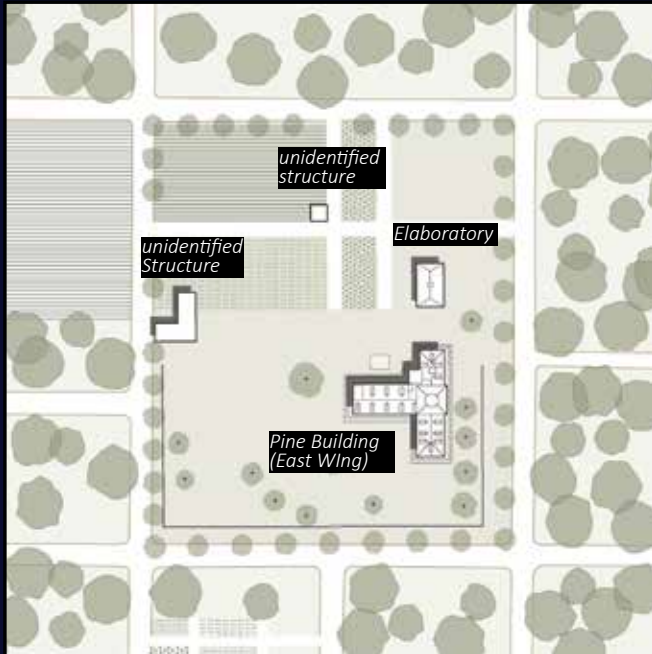
The Philadelphia Atlas from 1875 shows the footprint of the Hospital and its new, octagonal operating theater, which preceded the Garrett Memorial Pavilion. (Image: Philageohistory.org)



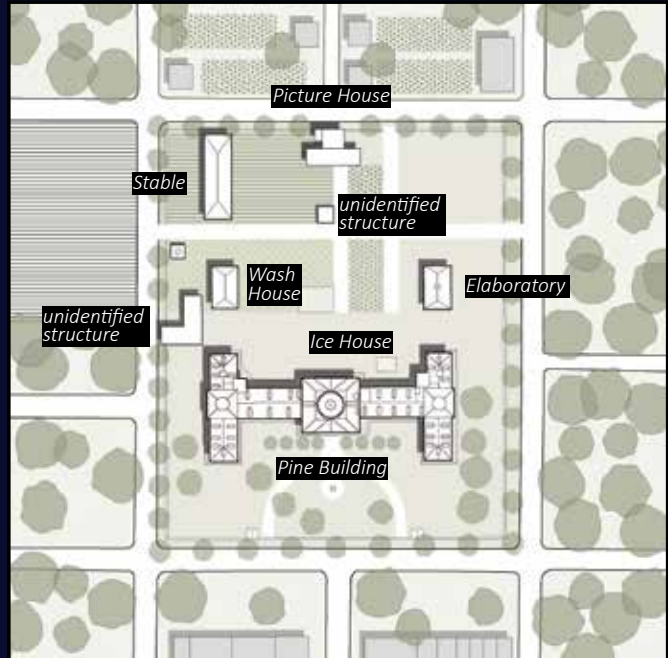
The Hospital grounds as they appeared in the 1910 Atlas of the City of Philadelphia by G.W. Bromley. The Memorial Pavilions represent one of the most significant building campaigns and programmatic developments in the Hospital's history. The multi-story, state of the art Pavilions dramatically expanded patient services. (Image: Philageohistory.org)

Site Chronology

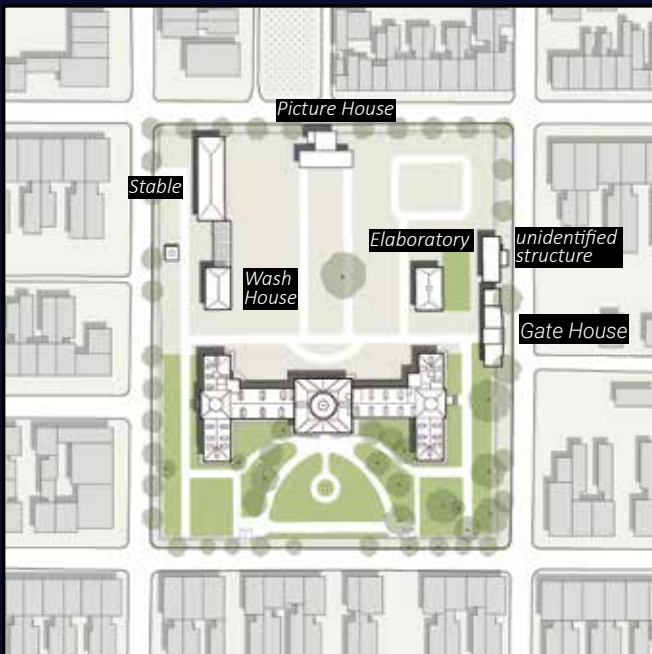
The following diagrams visualize information from a variety of sources, including historic images, maps, photographs, and descriptions from primary and secondary sources. They show how the Hospital campus has grown and changed over time.



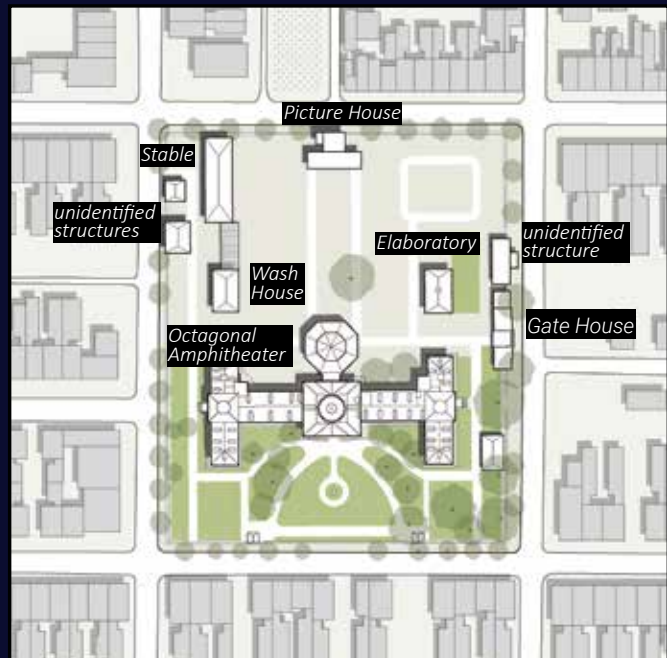
1754 - 1793



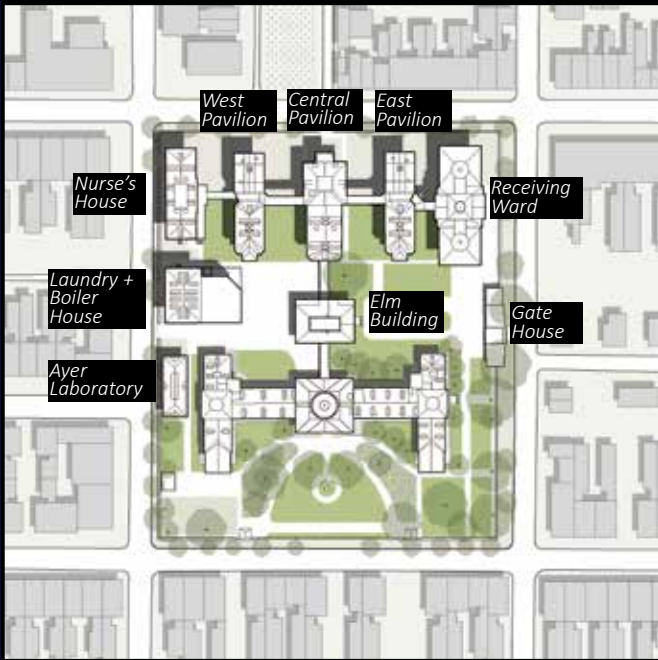
1794 - 1817



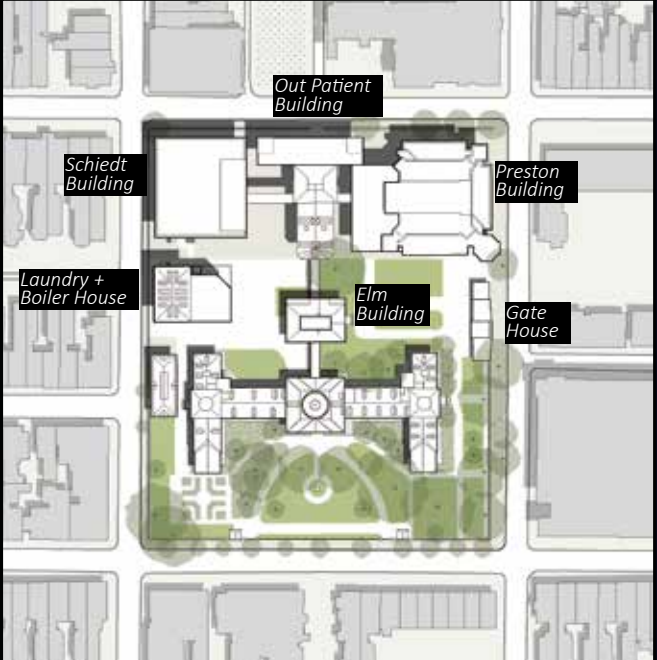
1818 - 1862



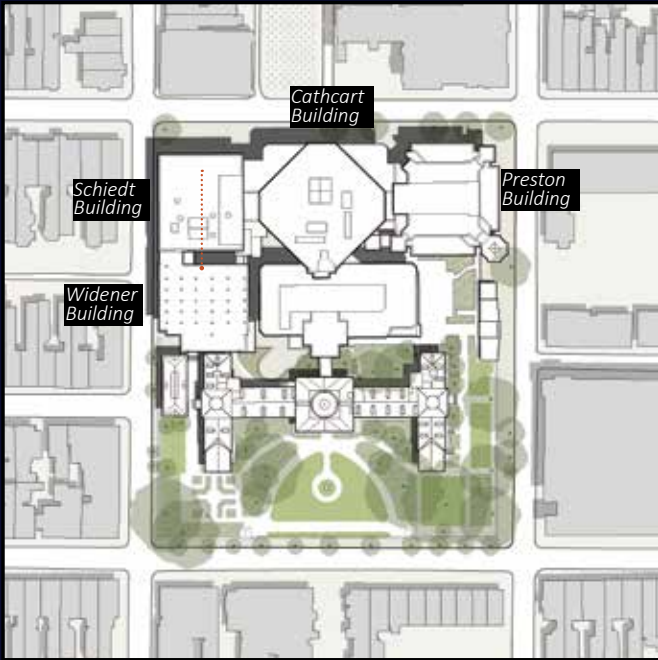
1863 - 1890



1891 - 1930



1931 - 1976



1977 - 2021

Throughout the site's evolution, the Pine Building and its relationship to its surrounding gardens and open space have remained consistent indicating a conscious choice on the part of the Hospital to preserve its iconic presence and signal its history within the city and medical history. The Pine Building and gardens have remained intact for as long as they have because they have been consistently valued, used, and maintained since their creation. Furthermore, they constitute a collective heritage that is recognized among generations of overlapping communities of patients, medical professionals and educators, scholars, neighborhood residents, and historians.

Stewardship Goals

The following six key stewardship goals were identified throughout the CMP planning process. Future initiatives pursued by the Hospital should advance one or more of these goals. As demonstrated in the scenarios laid out in the following pages, multiple goals can and should be brought together through future projects.

1. Build Endowment: Fundraise to establish an endowment to support the ongoing conservation and care of the historically significant buildings, grounds, and collections in perpetuity.

2. Explore and Share a Dynamic History: The Hospital is not stuck in the past; history continues to be made there each day. The wealth of material collected and embodied by the site presents unparalleled opportunities to explore relevant topics in healthcare in a manner that builds on the site's history to inspire timely and informed discussion.

3. Highlight the Pine Building & In Situ Collections: The Pine Building and historic collections are more than just an asset to the Hospital, they present a tangible link through which to explore histories of medicine, institutionalization, patient care, and Philadelphia, as well as the ways in which medicine has connected with other fields, such as art, botany, humanities, and economy. Proactively examining those histories through the lenses of race, gender, social equity, and disability would further expand the narrative, connecting it to relevant topics of our time.



4. Amplify Opportunities for Scholarly Research

and Exchange: Partnering with other institutions, sharing resources, developing relationships and activating institutional partnerships, benefits the Hospital by raising awareness and use of the archives and collections and helps raise the public profile of the Hospital as a cultural and historic institution in the region.

5. Reinvest in Public Outreach Programs:

Another key component of raising the Hospital's public profile is to establish a presence in public discourse and events of contemporary relevance. This may be accomplished through social media platforms, digital exhibitions, series and lectures, tours and other events.

6. Focus on Preventive Conservation:

Budgeting for and staying on top of routine care and maintenance is critical for avoiding irreparable damage, loss, and costly future repairs. Moving towards a conservation mindset that emphasizes the importance of preventive care is a key step towards establishing a conservation program that is cost-effective and sustainable.

Scenarios and Ways Forward

The following scenarios and proposals for next steps are a direct response to the identified heritage values, site vulnerabilities, institutional needs, and stewardship goals of the Hospital and its key stakeholders. Scenarios, such as the Archive relocation, were developed to fulfill the broadest array of conservation concerns and advance the greatest number of stewardship goals. Each proposal in the Plan has been developed with this integrated strategy in mind. As such, each proposal fulfills multiple objectives and reinforces a variety of heritage values.







“Conservation is about the care and continuing development of a place in such a way that its significance is retained or revealed and its future is made secure. The objective of the conservation plan is to set out how that aim may best be achieved.”

(James Semple Kerr, *The Conservation Plan*)

Addressing deferred maintenance and focusing on preventive conservation

Deferred maintenance is common at most historic sites, but it can be overwhelming and costly to address, requiring episodic capital projects that can detract from other important priorities. The definition of deferred maintenance according to the US General Services Administration is: *Maintenance or repairs to fixed assets that were not performed as scheduled or in sequence, and are put off to a future period.* Developing a plan to address deferred maintenance in a strategic manner and to begin implementing cyclical or preventive maintenance protocols for building components like windows, exterior woodwork, ironwork, masonry, roof, and water drainage systems will help avoid costly repairs and replacement in the future.

Updating and increasing web presence

If the Covid-19 pandemic has taught us anything, it is that a lot can be accomplished over the web. Technologies geared towards digital exhibitions and virtual tours have advanced significantly and provide an accessible way to share information with the public. Investing in a virtual tour, web upgrade for the historical information about the site, and interactive online exhibits, would help to raise the profile of the site, provide a framework to incorporate and share new research and information, and increase public engagement.



Pennsylvania Hospital Campus, 1896 - 1925

The evolution of the Pennsylvania Hospital campus can be illustrated and explored through 3-D mapping. Interactive educational maps could be developed for the web, serving as a means to increase the public understanding of the site in its various stages and how it has evolved in response to changing technologies and theories of medicine.

Exploring race, gender, and class through the Pennsylvania Hospital

Race, gender, and class have and continue to shape how individuals experience health, illness, access to medical care, and participation in the medical profession. The archival collections held at the Pennsylvania Hospital present a profound opportunity to study the intersection of racial, gender, and class biases in medicine from the Early American era to the present. The wealth of resources can serve not just scholars studying the history of medicine but also urban history, the history of education and medical education, environmental and intellectual history.

Often, as telling as information held within the archives, is the information that has been omitted, or simply not recorded. This is particularly true when it comes to the experiences of African American patients at the Hospital. This under-explored area of research holds enormous potential to contribute valuable information about the Hospital's history and should be pursued through collaborative partnerships and research opportunities.

Students from the Nursing School circa 1960s. (Image: Pennsylvania Hospital Archives)






Developing an efficient space plan that improves access to collections

The current space dedicated to archives storage poses a few key access obstacles and preservation risks: the third floor gabled roof limits the total volumetric space available for collections storage, prevents barrier-free access, and subjects the collections to a heightened risk of moisture infiltration due to potential roof damage or leaks.

Moving the archive to another location not directly under the roof would minimize environmental risks to the collection, maximize floor space, improve access and, most importantly, fulfill multiple Stewardship Goals including: enabling archive staff to more effectively monitor collections conditions (a fundamental aspect of routine care and maintenance); improve access to the collections for the staff, researchers, scholars, and the general public; and facilitate institutional partnerships and scholarly research.

The East and West Wings of the Hospital were historically used as open patient wards. The cast iron columns, which were part of a 19th century ventilation system, are still extant in the first floor of the East Wing. The space is a good candidate for future interpretation. (Image: Pennsylvania Hospital Archives)



Generating new narratives and updating existing interpretation through outreach and collaboration

Co-hosting scholars and fellows programs, providing access to archives, and embarking on shared exhibitions or speaker series could generate meaningful and timely dialogue through the site. The Surgical Amphitheater is one of the most intriguing features of the historic site and poses enormous potential for education. It was recently used to enhance the classroom experience for Penn freshman in Professor Beth Linker's course 'Snip and Tuck: A History of Surgery.' The sixteen students used both the Hospital's historical archives and the surgical amphitheater to research and reenact an operation that took place at Pennsylvania Hospital in 1815. Linker recounted the experience for the Hospital newsletter:

*Under the skilled guidance of archivist Stacey Peeples, the students closely studied the Hospital Case book preserved from the early nineteenth century. They came upon a particularly intriguing entry titled 'The Case of the Wen.' On February 22nd, 1815, Dr. John Syng Dorsey (assisted by his uncle, Dr. Philip Syng Physick) removed a 25 pound sebaceous cyst—known at the time as a 'wen'—from the back of [Julia Richards], a 'poor black woman' who traveled from Carlisle, Pennsylvania...The students spent the entire semester researching this case, learning about Physick and Dorsey, about surgical instrumentation in Philadelphia, about the types of patients who came to the hospital for treatment, as well as how analgesics (such as laudanum) were used prior to the advent of ether anesthesia. For the reenactment, the students dressed (as best they could) in period dress, and meticulously rehearsed the procedure, down to the very last drop of laudanum. **There was no better way to end a semester's worth of work than to stand in the actual amphitheater where the actual surgery took place.** As one student put it, 'one of the greatest parts of this class was the reenactment of a surgery at the amphitheater at the Pennsylvania Hospital.'"*

Enhancing Engagement and Access to Gardens

Access and use of the gardens ties into the core healing mission of the Hospital. Intentionally designed and continuously used as a therapeutic landscape, the gardens have nourished the bodies and souls of patients and visitors alike. By encouraging patients to use the gardens when appropriate, the gardens could enhance patient experience. For family or loved ones of the patient, the gardens represent an area that can be accessed to provide a calm setting while waiting for procedures to finish without leaving the Hospital complex. For the general public, access to the gardens is part of the historic fabric of the neighborhood which includes nearby Washington Square and Independence National Park. Awareness can be increased through use of appropriate signage, and multi-media wayfinding material, including websites, apps, and hard-copy brochures.



Wisteria vines are planted throughout the south gardens. It is significant for its connection to Dr. Caspar Wistar.



Franklinia, planted near the Physic Garden, is another symbolic planting for its connection to Hospital founder Benjamin Franklin.



The ornamental gardens are a defining feature of the Hospital's iconic vista in the spring.



Volunteer gardeners have been tending to the Physic Garden since its creation for the Bicentennial.





Guiding Principles

The following principles reinforce the stewardship goals outlined on pages 11-12. The principles emerged from stakeholder conversations and provide a philosophical framework through which the Committee can consider their work at the Hospital. The principles include:

- Preserving the integral relationship between the Hospital as a functioning patient care institution and as an important cultural-historical institution.
- Shifting to a care cycle that is based on preventive conservation and cyclical maintenance and employing a philosophy for sustainable management that avoids cycles of major capital interventions by mitigating the effects of active deterioration.
- Developing institutional and educational partnerships that position the hospital and its history in contemporary dialogue and exchange, grow a capacity for collaboration, and establish a more prominent presence with a broader audience.
- Extending the Hospital's narrative and institutional associations beyond its famous founders to develop more expansive and inclusive contexts. Using the Hospital's history to explore and contribute to conversations about contemporary issues.
- Recognizing the Pine Building and historic collections as more than just an asset to the Hospital and understanding that they present an enormous opportunity to explore histories of medicine, institutionalization, patient care, and Philadelphia as well as the ways in which medicine has connected with other fields, such as art, botany, humanities and trans-Atlantic circuits of knowledge and trade. Proactively examining those histories through the lenses of race, gender, and disability would further expand the narrative, connecting it to relevant topics of our time.
- Developing the Hospital's ability to support scholarship and research by broadening access to the collections, hosting researchers through residencies, and using digital technologies to share primary source material, exhibitions, and interpretive projects.



While the contributors to the Pennsylvania Hospital Conservation Management plan are many, its origins begin with the vision of the Hospital and the University of Pennsylvania Health System's leadership team. In particular, we would like to acknowledge the unwavering support of Theresa Larivee, Chief Executive Officer of Pennsylvania Hospital; Kevin Mahoney, Chief Executive Officer of the University of Pennsylvania Health System; and Philip Okala, Chief Operating Officer of the University of Pennsylvania Health System. This CMP was prepared by a multi-disciplinary team of heritage specialists at The University of Pennsylvania's Weitzman School of Design, Penn Praxis, and the Center for Architectural Conservation. The authors include Kecia Fong and Starr Herr-Cardillo. Invaluable input and guidance was provided by the Pennsylvania Hospital staff, particularly Lead Archivist/ Curator Stacey Peebles and Senior Director of Facilities Jeff O'Neill.

