United States Department of the Interior National Park Service

National Register of Historic Places Registration Form

SENT TO D.C. 4-19-10

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, How to Complete the National Register of Historic Places Registration Form. If any 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 certification comments, entries, and narrative items on continuation sheets if needed (NPS Form 10-900a).

1. Name of Pro	operty								
historic name	St. Charle	s Hospi	al						
other names/site	e number				<u></u>				
2. Location				_, <u>, , , , , , , , , , , , , , , , , , </u>					
street & number	400 East	New Yo	ork Sti	reet				not fo	or publication
city or town	Aurora							vicini	ty
stateIllin	nois	code _	IL	_ county _	Kane	code	089	_ zip code	60505
3. State/Federa	I Agency Ce	ertificatio	on	·····					
for registering requirements s	that this properties in set forth in 36 the property significant at significant at ring official/Title A gency/bureau of ark Service	nominal the Natic CFR Pa CFR Pa the follor tewide	ion nal Re rt 60. ts wing le 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	request for gister of Hist does not me vel(s) of sign local	determination oric Places ar eet the Nationa ificance:	of eligibility ad meets th	y meets f e proced	ural and profe	ation standards essional that this property
entered in	the National R	egister			deter	mined eligible	for the Nat	tional Register	
determine	ed not eligible fo plain:)	r the Natior	nal Regis	ter	remo	ved from the f	National Re	egister	
Signature of the l	Keeper					Date of A	ction		_
In my opinion, the Signature of comm		eets do	es not m	eet the Nationa	I Register criteria	Date			
Title				Sta	te or Federal age	ncy/bureau or	Tribal Gov	ernment	

5. Classification

Ownership	of	Prop	erty
(Check as man	iy bi	oxes as	s apply.)

X private public - Local public - State public - Federal

X	building(s)
	district
	site
	structure
	object

Category of Property (Check only one box.)

Number of Resources within Property (Do not include previously listed resources in the count.)

Noncontributing	_
	buildings
	district
	site
	structure
	object
	Total
	Noncontributing

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

Number of contributing resources previously listed in the National Register

N/A	0
6. Function or Use	
Historic Functions (Enter categories from instructions.)	Current Functions (Enter categories from instructions.)
HEALTH CARE / Hospital	SANITARIUM / Nursing Home
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
7. Description	
Architectural Classification (Enter categories from instructions.)	Materials (Enter categories from instructions.)
MODERN MOVEMENT / Art Deco	foundation: STONE / Granite
	walls: CONCRETE
	BRICK
	roof: SYNTHETICS / Rubber
	other: TERRA COTTA
	· · · · · · · · · · · · · · · · · · ·

Narrative Description

(Describe the historic and current physical appearance of the property. Explain contributing and noncontributing resources if necessary. Begin with **a summary paragraph** that briefly describes the general characteristics of the property, such as its location, setting, size, and significant features.)

Summary Paragraph

The St. Charles Hospital is located at 400 East New York Street in Aurora, Illinois. The city of Aurora is located thirty-five miles west of Chicago and is the largest city in the Fox River Valley region. The building is located just east of downtown Aurora along New York Street, the city's east-west thoroughfare and main artery into the downtown. The hospital is a six-story reinforced concrete structure covered by a brick veneer. The footprint of the building is U-Shaped. The hospital is a strong example of Art Deco architecture, arguably the purest in Aurora. Notable Art Deco hallmarks include the exterior's terra-cotta detailing, a reliance on geometric design, and ornamental decoration in the same materials that comprise the general makeup of the building. The hospital was completed in 1932 and was the work of architect Wybe J. Van der Meer. Although a number of renovations have altered the appearance of the building's interior, the integrity of the hospital's Art Deco exterior remains in excellent condition.

Narrative Description

Location

The St. Charles Hospital is located just east of downtown Aurora on New York Street – the major eastwest thoroughfare into the downtown area. The property lies on the northeast corner of the intersection of New York and North Fourth Street. Directly across the street is McCarty Park. The three lots on which the hospital sits were purchased in 1928 and 1929. These lots were located to the immediate south of the original St. Charles Hospital. The houses on these lots were demolished in order to make way for the 1932 hospital.¹

First St. Charles Hospital

The Franciscan Sisters of the Sacred Heart founded the first St. Charles Hospital in 1900. The main hospital building was located at the southeast corner of Spring and North Fourth Streets. It was a brick masonry structure designed in the Victorian style. Features included dormer windows and a four-story turret. Following completion of the Van der Meer building in 1932, the original hospital became living quarters for nurses and sisters.²

¹ Beacon-News, "St. Charles Hospital, Covering Nearly a City Block, One of the Finest in State."

² Ibid.

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The old and new hospitals coexisted alongside each other for many years. A pillared entryway connected the south end of the old hospital to the north end of the new. The contrast in architecture between the old and new hospitals did not suggest continuity. This matter was addressed by resurfacing the south end of the former at the point where it met the pillared entryway "in accordance with the distinctive architecture of the new structure."³ An underground steam tunnel also linked the two buildings; accessed from the basement of either building. The underground tunnel also joined the 1932 hospital to the boiler and laundry rooms, housed in an outlying structure located behind the courtyard's gardens.

Demolished in 1968, the original hospital's footprint now consists of an empty lot covered by grass. An exterior door replaced the former entrance to the pillared walkway. The underground steam tunnel still exists but terminates at the spot where it once met the basement of the old hospital.

Overall Exterior

Van der Meer's 1932 St. Charles Hospital is a six-story reinforced concrete structure with granite base. A brick veneer set in a running bond covers the reinforced concrete frame with many areas of decorative brickwork throughout the building. The intricacies of the brickwork are characteristic of the Art Deco style in that decoration was displayed in the structure's primary building materials. In the first story, every sixth course is a darker shade brick that is recessed, simulating a rusticated stone appearance. Above the second story windows, the bricks are laid in a soldier course with alternating bricks protruding past the plane of the wall. Above most of the fifth story windows are patterned brickwork in a Gothic arch shape, further emphasizing the verticality of the building. The arch is formed by header bricks, filled with vertical and diagonal stretcher rows that alternate using a dark and light brick. Streator Brick Inc., a Chicago based company still in business. provided the bricks.⁴ The bricks feature a combed surface and include various shades of tan and brown, some with iron spots. They are set in a random pattern that creates a rich textural appearance to the surface of the building. The mortar joints have been repointed to a flush joint however; it appears that the original mortar was a cream color with a raked profile. The footprint of the building is U-Shaped. Arranged along every floor are strands of double-hung windows, punched into their respective facades. Originally these were six-over-six double hung windows with wood frames. The double hung windows are now one-over-one with aluminum frames. The general shape of the building follows a stepped, pyramid-like design. The use of setbacks represents a hallmark of the Art Deco style.⁵ Setbacks, also known as step-backs, figure most predominately in the main facade, directly above the main entrance. A terra-cotta stringcourse runs along the entire lower third of the building's exterior, directly under the second floor windows. The terra-cotta stringcourse features the hallmark Art Deco 'zig-zag' pattern. A second terra-cotta stringcourse follows the building's cornice line. The roof consists of a flat, concrete surface covered by a rubber membrane. A two-foot parapet wall attaches to the cornice.

Main Façade

The main entrance is located directly in front of the corner of New York and North Fourth Streets. The two-story entrance pavilion is stepped forward from where the south and west elevations meet. It is two stories tall and rectangular in plan with clipped corners. The building's central tower, located directly above the main entrance, is ninety-two feet tall.⁶ It includes two window bays with decorative brickwork above the windows.

³ Franciscan Sisters of the Sacred Heart, *St. Charles Hospital: Souvenir of Dedication, 1932* (Aurora, IL: Finch & McCullough Printers, 1932), 59.

⁴ Jennifer Grobe, "St. Charles Hospital Notes," St. Charles File at Aurora Preservation Commission, Aurora, IL.

⁵ Bevis Hiller and Stephen Escritt, Art Deco Style (London: Phaidon, 1997), 19.

⁶ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 53.

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The brickwork consists of a central rectangular section of end bricks flanked by diagonal solder bricks in a striped pattern. Vertical brick piers are located between and flanking the windows. These triangular piers protrude beyond the wall surface and extend upwards to the parapet. Terra-cotta chevron capitals top the piers. The windows, as well as the windows in the attached two towers, are some of the few remaining original multipaned windows. Historically, the tower was topped with a rose and lavender neon cross. The 1932 dedication booklet states the neon cross was fourteen feet tall and eight feet wide. The booklet also claims that it was visible for miles around.⁷ The cross is no longer in place. Four projecting, vertical brick piers run from the tower's roof cornice down to the top of the entry pavilion. To the immediate left and right of the main entrance are life-sized statues of St. Joseph and St. Charles. The statues are placed in recessed, ornamented portals. Terra-cotta ornamentation surrounds the portals. If standing directly in front of the main entrance, St. Charles is to the right while St. Joseph is to the left.

Terra-cotta blocks with green glazing frame the main entry's large, leaded glass window. The leaded glass window contains a geometric design. Art Deco frequently relied on geometric pattern as a system of ornamentation and design.⁸ A metal window frame supports the leaded glass window. A terra-cotta cornice caps the projected main entrance. A keystone is in the center of the main entry's parapet. A small, metal cross is attached to the keystone. Directly beneath is a neon sign that says "St. Charles." The sign's font is arranged vertically. The neon sign is no longer in use. Another neon sign was located just above the main doorway. The sign read "St. Charles Hospital," written horizontally. This neon sign also does not operate.

Secondary Elevations

The west elevation is 180 feet long.⁹ The west elevation (Fourth Street) has two projecting bays with setbacks; one located near the front of the building, the other towards the rear. The front setback, located nearest to the main entrance, includes three triangular brick piers. The piers project out from the setback and run from the roof cornice to the bottom of the fifth floor windows. The bays include paired windows on each floor with decorative brickwork above the top floor windows. This is comprised of a soldier course, then three sections of brickwork; a central section laid in a dog tooth fashion, flanked by two "striped" vertical sections comprised of lighter bricks laid around a darker stretcher row, and finally a dog tooth row on each end, capped with terra-cotta that matches the dog tooth detailing. The front setback aligns with and enhances the verticality of the sixth story tower. The detailing of the front setback also matches that of the building's central tower.

On the north end of the west elevation is the chapel and Fourth Street chapel entrance. Directly above the chapel entrance's wood door is an elaborate terra-cotta "Coat of Arms" in honor of Bishop Edward Francis Hoban, D.D., the second bishop of the Diocese of Rockford (1928-1942). A terra-cotta 'zig-zag' pattern flanks the "Coat of Arms." The "Coat of Arms" motif represents the bishop's motto, "Veni lumen cordium," which translates as "Come, Light of Hearts." The "Coat of Arms" connects to the terra-cotta stringcourse and features the words "Cor Jesu salus in te sporangium," which translates to, "Heart of Jesus, salvation of those who trust in thee."¹⁰ Plywood covers the stained glass window above the wood door. Many of the St. Charles Hospital's original stained glass windows are in bad disrepair. Despite this, there are photos on file by Wardell Art Glass, an Aurora company, which depict some of the windows before they were ruined.¹¹ The stained glass windows are the work of Chicago's Deprato Statuary Company. The company still operates under the name Deprato

⁷ Ibid.

⁸ Leland M. Roth, American Architecture: A History (Boulder, CO: Perseus Books, 2001), 374.

⁹ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 53.

¹⁰ Jan Mangers, "St. Charles Hospital Notes," St. Charles File at Aurora Preservation Commission, Aurora, IL.

¹¹ Ibid.

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Rigali.¹² The stained glass windows display a Gothic influence through the way in which they culminate in a pointed arch. The look of the stained glass windows corresponded with the building's Art Deco design scheme. Individual pieces of glass displayed an irregular sense of geometry. When combined, these individual pieces created an even greater sense of geometric pattern.

The north face of the chapel has five triangular shaped stained glass windows with soldier brick Gothic arches flanked by stylized Art Deco piers with terra cotta caps that mimic engaged buttresses. These windows have also been boarded up with plywood. An aluminum/glass door with side and transom lights sits beneath the west window; paired double-hung windows are located beneath the other stained glass windows. A brick porch, later added to the building, extends from the chapel's north face and surrounds the door. The pillared entryway connected the original St. Charles hospital to the new hospital at this exact point. Geometric terra-cotta 'zig-zag' ornament frames the doorway.

A polygonal two-story bay extends from the east face of the chapel with limestone-colored glazed terracotta piers and decorative spandrels. Both terra-cotta and brick provide ornamentation on the bay. Plywood covers the small, Gothic arched stained glass windows. Casement-type windows adorn every face of the polygonal bay. Historically, this was the chapel office.

The south face of the chapel includes a limestone-colored terra-cotta covered entry featuring Gothic arches between triangular piers. A ramp (non-historic) leads up to the entrance. The east end of the face is stepped slightly forward with a decorative terra-cotta cornice. Two rectangular stained glass windows adorn the projection above the decorative terra-cotta 'zig-zag' stringcourse; soldier course brickwork frames the windows and decorative Gothic-style brickwork is featured above the windows. Plywood conceals the single Gothic arched stained glass window. The south face of the chapel also includes stylized buttresses akin to that on the chapel's north face.

To the rear of the hospital is the inner court or courtyard: a common, open space delineated by the union of the New York and Fourth Street elevations. The inner court was used as the ambulance entrance. An emergency room was located just inside the ambulance entrance.¹³ The inner court contained ample green space. A flower garden, rock garden, and grotto were important components of the inner court.¹⁴ The gardens and grotto were later removed. The former garden area now consists of grass and evergreen foundation plantings.

On the east face of the south elevation (New York Street) there are a set of original wood double doors with a transom light. This was the hospital's south entry. Above the doorway is a terra-cotta relief of a cross. A thin band of terra-cotta is located beneath the cross. Triangular brick piers, grouped in twos, flank both sides of the wood double doors. The piers project from the face of the elevation. The piers run from the roof cornice to the terra-cotta band above the wood double doors.

The main face of the south elevation is 130 feet long.¹⁵ It contains one projecting bay with setback. Three triangular, brick piers are located above the setback extending into the tower. The setback and tower have the same decorative brickwork as the west elevation. The brick piers run from the top of the setback to the base of the four-story projection.

¹² Jennifer Grobe, "St. Charles Hospital Notes."

¹³ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 56.

¹⁴ Ibid., 77.

¹⁵ Ibid., 53.

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Lobby / First Floor

The main entry door leads through a vestibule and into an open two-story lobby. The original main entry door has been removed. In its place is an anodized steel and glass door. Originally, the lobby floor consisted of black and white marble, though carpet now covers the lobby floor. It is rumored that the marble may still be intact beneath the carpet. Directly above the vestibule door, or south wall of the lobby, is the flower balcony. Historically, the second floor corridor connected to the flower balcony.¹⁶ The flower balcony affords great views of the outside through the leaded glass window as well as to the lobby immediately below. The flower balcony's low, parapet wall illustrates the use of 'zig-zag' patterning; a common Art Deco characteristic based on simple geometric design.¹⁷ Access to the flower balcony no longer remains.

On the east wall of the lobby sits the information desk, which is still in use. The booth's granite base is also intact, as is the granite wainscoting which extends throughout the lobby space. The booth's decorative Art Deco window surround is no longer. Simple wood trim has replaced it.¹⁸ The original wall sconces were also removed. Before the 1970s renovation, three portals allowed for easy access from the lobby to the adjacent reception room. The tops of these portals contain 'zig-zag' detailing. The portals have since been sealed with drywall. The walls throughout the building however, consist of plaster. A single security door now provides access to the first floor corridor. Drywall was added to the front of the reception room; it is currently used as office space. The reception room's decorative ceiling remains in fine condition. The first floor nurses' station and administrative offices are located just to the left of the lobby.

Also located off the first floor corridor is the kitchen. Although altered heavily, the kitchen retains its glazed tile walls. Aside from the original walk-in refrigerators and freezer (from Armstrong's Cork Insulation Company of Chicago), all of the kitchen equipment has been replaced.¹⁹ The dining room is located immediately across from the kitchen.

The auditorium is located at the north end of the first floor. The wood floor has been removed and rubber flooring has taken its place. Ramps have been installed for access to the stage. The main section of the auditorium is currently used for storage purposes. The stage has recently been used for office space. Other important rooms on the first floor included an autopsy room, a doctors' library with reading room, and conference rooms.

Typical Upper Floors

All six floors of the hospital retain their original floor plan despite the interior renovations of the early 1970s. The floor plans conform to Van der Meer's U-Shaped plan. Two main hallways run through the building. One hallway follows the west or Fourth Street elevation. The other main hallway runs along the south or New York Street elevation. Rooms flank both sides of the two central hallways. This floor plan is consistent for floors one through five. The sixth, uppermost floor contains roof gardens on the ends of the west and south elevations. The sixth floor also includes access to the sixth floor penthouse. The sixth floor penthouse is the highest room in the building. It is situated at the top of the hospital's central tower. Original leaded glass windows are still present in the penthouse. The windows are grouped in twos and are of the casement type.

¹⁶ Ibid., 55.

¹⁷ Bevis Hiller and Stephen Escritt, Art Deco Style, 79.

¹⁸ Jennifer Grobe, "St. Charles Hospital Notes."

¹⁹ Ibid.

Fox River Pavilion, a private nursing home, currently uses the building. Fox River Pavilion began its occupancy in 1993. The nursing home does not use all six floors. The nursing home operates on the first, third, fourth, and fifth stories. The second and sixth floors sit empty and are primarily used for storage. Floors two and six are also used for salvage: materials needed on active floors are taken from the second and sixth floors. The second floor has not been used since 1971, the year the hospital closed.

As part of the interior renovation, drop ceilings were installed throughout most of the building's hallways. A few portions of the original ceiling remain. The section of hallway between the main lobby and former reception room on the first floor retains its historic ceiling. This section consists of plaster fitted with crown molding. Additional plaster ceiling with crown molding might still exist above the ceiling tiles.

Aside from the children's ward and auditorium, the 1932 hospital contained terrazzo flooring on all six levels. The terrazzo floors also included coved sanitary terrazzo bases.²⁰ Carpet and linoleum tile replaced much of the terrazzo flooring. In its present state, linoleum tile covers most of the floors. Uncovered terrazzo still exists on the second floor. The material is in fair condition; a few areas are chipping. The flooring on the sixth floor and sixth floor penthouse might have been asbestos tile; this flooring material is no longer present. A concrete skim coat has been applied.²¹

When completed in 1932, the hospital contained seventy private and semi-private rooms; the facility could provide for 125 patients.²² The original cabinets are still in place in the private rooms. Lyons Metal Products, an Aurora based company, provided the cabinets. The bathrooms in the private rooms retain their sinks and bathtubs, though the toilets have been replaced. Patients in the semi-private rooms were required to use communal bathrooms located between the rooms. Floors three through five consist mainly of private rooms, used for residents of Fox River Pavilion.

Located directly above the auditorium at the north end of second floor corridor is the chapel. One enters the chapel space through carved wood doors with geometric patterning. Perpendicular to the wood doors is the "crying room." When children became upset during church services, parents took them to the "crying room" to avoid further disruption. The "crying room" features two wooden double doors with leaded glass. One of the chapel's most notable features is the bold triangular shape of the sanctuary. The geometric appearance of the sanctuary compliments the shape of the large stained glass windows along the north and south walls. The far end of the sanctuary is recessed into the chapel's main, east wall in a way that enhances the chapel's sense of depth. The altar's original black and white checkered marble floor remains intact. Much of the chapel's ornament and furniture has been removed. This includes the cross-shaped chandeliers, statuary, and "fumed oak pews."²³ An impressive coffered ceiling covers the chapel space. The original wood confessional sits along the south wall of the chapel. A wood chapel balcony is located across from the altar at the east end of the room. The balcony provided additional seating and held the organ and chimes.²⁴ Fox River Pavilion currently uses the chapel as storage space. Nevertheless, the chapel still impresses; arguably, the finest space in the old St. Charles Hospital.

The St. Charles Hospital's historic chapel and other notable interiors deserve to be preserved. Although general neglect and renovation have altered the appearance of the interior, rooms such as the chapel and lobby retain their Art Deco beauty. These interior spaces were among the hospital's most striking components when it

²⁰Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 53.

²¹ Jennifer Grobe, "St. Charles Hospital Notes."

²² Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 62.

²³ Ibid., 60.

²⁴ Ibid.

opened in 1932. The hospital's exterior presents an even stronger case for preservation. Aside from a few minor changes, the building's exterior appears the way it always has. The look of its facades has not been marred by unsightly additions or alterations. The building's exterior retains it Art Deco look and integrity.

St. Charles Hospital
Name of Property

8. St	ate	ement of Significance	· · · · · · · · · · · · · · · · · · ·
Appl (Mark	lica : "x"	able National Register Criteria in one or more boxes for the criteria qualifying the property	Areas of Significance (Enter categories from instructions.)
for National Register listing.)			HEALTH / MEDICINE
X	4	Property is associated with events that have made a significant contribution to the broad patterns of our history.	ARCHITECTURE
E	3	Property is associated with the lives of persons significant in our past.	
x	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	Period of Significance 1932 – 1959
ב נ	C	individual distinction. Property has yielded, or is likely to yield, information important in prehistory or history.	Significant Dates 1932
	"x"	a Considerations in all the boxes that apply.) y is:	Significant Person (Complete only if Criterion B is marked above.)
′	A	Owned by a religious institution or used for religious purposes.	N/A
	В	removed from its original location.	Cultural Affiliation N/A
(С	a birthplace or grave.	
(D	a cemetery.	
	E	a reconstructed building, object, or structure.	Architect/Builder Van der Meer, Wybe J. – Architect
	F	a commemorative property.	DeWit, C.J. – Contractor
	G	less than 50 years old or achieving significance	DeWit, Peter – Superintendent
		within the past 50 years.	

Period of Significance (justification)

The period of significance covers the date of the hospital's completion in 1932 up to 1959, the fifty-year cut-off for National Register listing.

Criteria Considerations (explanation, if necessary)	N/A
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Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance and applicable criteria.)

The St. Charles Hospital meets National Register criteria A and C for its commitment to the health and well-being of Aurora, Illinois and for the building's striking Art Deco design. The 1932 structure updated the look and capability of the institution. The contemporary Art Deco design reflected an increased concern for the welfare and comfort of the patient. In short, a greater emphasis on modern healthcare's new potential.

Completed in 1932 for a cost of \$500,000, the new St. Charles Hospital for the Franciscan Sisters of the Sacred Heart, replaced the original hospital building as the primary care facility. Groundbreaking for the new building occurred April 19, 1931. On October 23, 1932, a dedication ceremony marked completion of the new hospital.¹ Architect Wybe Jelles Van der Meer designed the building. A noted ecclesiastical architect, Van der Meer worked almost exclusively for the Rockford Diocese. He produced designs for a number of churches, schools, and hospitals for the diocese, a territory that encompassed twelve counties in northwestern Illinois.² The majority of these designs were done in the Gothic style. The design for the St. Charles Hospital however, marked a departure for the architect. Van der Meer's impressive Art Deco building emphasized the importance of Aurora as a major center of industry and commerce. Despite the interior renovations of 1971 and 1972, prior to the building's reopening as the St. Charles Medical Center in 1973, the integrity of the striking Art Deco exterior remains in fine condition.³

Van der Meer's Art Deco design also reflected an increased concern for the welfare and comfort of the patient; it emphasized the need for modern healthcare. Van der Meer's fashionable, contemporary-looking hospital replaced the old, Victorian hospital. The contrast in architectural style was symbolic; the overturn of outdated, nineteenth-century medicine in favor of progressive, modern medicine. The new building also renewed the mission of the institution's founders, the Franciscan Sisters of the Sacred Heart. The utilitarian design and technological innovation of Van der Meer's hospital allowed the Order to better "care for the poor, the sick and to educate children."⁴

Narrative Statement of Significance (Provide at least one paragraph for each area of significance.)

The story of the St. Charles Hospital begins in nineteenth-century Europe. In 1866, Reverend William Berger, a pastor in Seelbach, Germany, founded the Franciscan Sisters of the Sacred Heart. Following the religious persecution experienced by German Catholics during the *Kulturkampf* in 1876, the Order started looking for a new home. They relocated to the United States and eventually established headquarters in Avilla, Indiana. Shortly after arriving in Indiana, the order moved to Joliet, Illinois, where it founded St. Joseph Hospital.⁵

¹ Beacon-News, "St. Charles Hospital, Covering Nearly a City Block, One of the Finest in State," 5 September 1937; Beacon-News, "Thousands at Dedication of New Hospital," 24 October 1932.

² Cornelius J. Kirkfleet, *The History of the Parishes of the Diocese of Rockford, Illinois* (Chicago: John Anderson Publishing Company, 1934), 139-140.

³ Robert R. Miller, That All May Be One: A History of the Rockford Diocese (Rockford, IL: Diocese of Rockford, 1976), 142.

⁴ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932 (Aurora, IL: Finch & McCullough Printers, 1932), 47.

⁵ Ibid.

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The Franciscan Sisters of the Sacred Heart flourished in their new Joliet home. The Order quickly conducted establishments in the dioceses of Rockford, Peoria, and Springfield as well as the archdiocese of Chicago. The Order incorporated in the state of Illinois under the name "An Association of Franciscan Sisters of the Sacred Heart." The group also extended its charity outside of Illinois; establishments emerged in the dioceses of Fort Wayne, Los Angeles, and San Diego and the archdiocese of San Francisco.⁶

As the size of the Joliet chapter grew, the need for a larger convent and hospital became apparent. In February 1900, at the request of Rev. Charles Schnueckel, the Franciscan Sisters purchased property in Aurora, Illinois for the creation of a new hospital. Aurora's status as a rapidly growing community allowed the Franciscan Sisters to achieve a greater good. The Order paid \$14,000 for the Coulter residence and grounds on North Fourth Street.⁷ The former Coulter home served as the first St. Charles Hospital. The hospital received its first patient roughly a month after it acquired the property. In December 1901, the Order expanded the size of the new hospital through the purchase of the neighboring James Freeman residence located at the corner of Fourth and Spring Streets. In May 1902, work began on an addition to the former Freeman residence. Completed in late 1902, the new addition served as the main part of the hospital.⁸

History of Healthcare in Aurora

Before proceeding with the story of the St. Charles Hospital, let us turn our attention to the broader development of healthcare and industry in Aurora. The St. Charles was not the first hospital in Aurora; it was the "second city hospital."⁹ The history of Aurora healthcare has a somewhat humble beginning. Dr. Frederick L. Pond established the city's first healthcare institution in 1874. Dr. Pond's Medical and Surgical Center was a small, privately owned hospital. Pond regarded himself as a path breaker in cancer research.¹⁰ Pond's fellow physicians however, did not take this claim seriously. The Aurora medical community regarded Pond as a quack.¹¹ Nevertheless, the medical center provided care until Pond died in 1898. Shortly after its founder's death, the center reorganized as a home for the elderly.¹²

The shortcomings of Pond's Medical and Surgical Center underscored the need for a legitimate public hospital. The call for better-quality healthcare culminated in 1886 with the formation of the Aurora City Hospital Association; a group of altruistic Aurora citizens who sought to establish a general hospital.¹³ At first, the association rented a house at 132 South Fourth Street for use as the public hospital.¹⁴ Paid memberships to the Hospital Association and fundraising drives provided the necessary funds for the hospital's operation. In 1888, the hospital moved into a brand new facility at 516 South Lincoln Avenue; a Queen Anne style structure erected for a cost of \$9,000.¹⁵

⁶ Ibid., 50.

⁷ Cornelius J. Kirkfleet, The History of the Parishes of the Diocese of Rockford, Illinois (Chicago: John Anderson Publishing Company, 1924), 202; Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932 (Aurora, IL: Finch & McCullough Printers, 1932), 50.

⁸ Ibid.

⁹ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 17.

¹⁰ Vernon, Derry, *The Aurora Story* (Aurora, IL: Aurora Bicentennial Commission, 1976), 94.

¹¹ Robert Barclay, Aurora 1837 – 1987 (Aurora, IL: Copley Press, 1988), 103.

¹² Vernon, Derry, The Aurora Story, 94.

 ¹³ Aurora Preservation Commission, "Property Description and Reasons for Designation for the 1888 Copley Hospital Building – 516
 S. Lincoln Avenue," 8 December 1999, Copley File at Aurora Preservation Commission, Aurora, IL.

¹⁴ Beacon-News, "The Public Hospital," 9 October 1886.

¹⁵ Aurora Preservation Commission, "Property Description and Reasons for Designation for the 1888 Copley Hospital Building – 516 S. Lincoln Avenue."

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In many respects, the rise of local industry particularly the railroad business determined Aurora's healthcare needs. The city's position on the Fox River made it an ideal spot for mills and factories. The river proved to be an invaluable power source. As industry matured, Aurora established itself as a significant manufacturing center, well-known for the production of heavy-machine building equipment.¹⁶ Most importantly however, was the presence of the Chicago, Burlington & Quincy Railroad. In 1856, the railroad company selected Aurora as its headquarters for railcar construction and repair. Railroad business was instrumental in the economic development of the community. The Chicago, Burlington & Quincy remained the city's largest employer for over one hundred years. Located on the east side of the Fox River, the CBQ railroad shops provided employment for multiple generations of Aurora natives and European immigrants.¹⁷

A negative consequence of the rise in railroad employment was the noticeable increase in worker injury. During the early years, a large percentage of the city hospital's patients received treatment for injuries incurred from railroad work. Due to the industrial nature of the work, many of the injuries were quite severe. The hospital performed a number of amputations on limbs crushed by moving railroad cars. Workers also received treatment for burns, contusions, and frozen feet.¹⁸ However, occupational hazards did not seriously deter people from seeking employment with the CBQ railroad.

Naturally, the population surged along with the railway boom. When comparing Aurora's population to that of neighboring Naperville, it allows for a better understanding of railroad production as a major instigator of population growth. Although comparable in geographic size and population to Aurora today, Naperville remained a small farming community until after World War II. The census numbers are telling. According to 1900 census numbers, Naperville supported a population of 2,629. Meanwhile, Aurora claimed a population of 24,147. By 1930, Aurora's population had jumped to 46,589, nearly double the 1900 number. Naperville on the contrary, continued to lag behind. The 1930 Naperville census showed a mere 5,118 inhabitants.¹⁹ Naperville lacked the jobs and infrastructure the CBQ railroad supplied. As a result, Aurora's population mushroomed while Naperville's remained stagnant.

As Aurora's population increased the number of open hospital beds decreased. The 1888 public hospital could no longer fulfill the community's healthcare demands. In 1912, the Aurora Hospital Association organized a pledge drive to raise funds for a new, up-to-date facility. The fundraising operation was a success. The 1912 fundraising campaign successfully raised approximately \$103,000.²⁰ Completed in 1916, the Lincoln Wing provided an additional five stories of space, effectively quadrupling the capacity of the former hospital building. The Lincoln Wing (named for its location on Lincoln Avenue) included modern x-ray, fumigating, anesthesia, and operating rooms.²¹

The Aurora City Hospital continued to expand. A second addition was finished in 1932. A six-story wing, later known as the West Wing, raised hospital capacity by nearly half. The generous spirit of Colonel Ira C. Copley, former publisher of the *Beacon News*, made the project possible. Copley donated \$500,000, a site valued at \$250,000, and a \$1,100,000 endowment to the Aurora Hospital Association building fund. Copley's

¹⁶ Catherine Bruck, "Aurora, IL," in *Chicago Neighborhoods and Suburbs: A Historical Guide*, ed. Ann Durkin Keating (Chicago: University of Chicago Press, 2008), 97.

¹⁷ Ibid.

¹⁸ Copley Hospital, "A Century of Caring," *Copley Caring: 1886 – 1986* 9 (Spring 1986): 4.

¹⁹ Naperville Heritage Society, "Naperville Population Numbers," Census file at Naper Settlement, Naperville, IL; Aurora Public Library, "Aurora Population Numbers," Census file at Aurora Public Library (Main Branch), Aurora, IL.

²⁰ Copley Hospital, "A Century of Caring," 9.

²¹ Ibid., 9-10.

philanthropic gift made the West Wing addition a reality amidst the economic turbulence of the Depression. As a token of thanks, the Aurora City Hospital was renamed Copley Hospital²²

The New St. Charles Hospital

Expansion was not unique to the Aurora City Hospital. Population gains also forced the St. Charles Hospital, comparable in size to that of the Copley Hospital, to undergo a series of developments as well. A dormitory for the Franciscan Sisters was built in 1910. A boiler house and laundry added in 1920. The Order was also forced to add new branches to the hospital. The St. Charles School of Nursing opened in 1922 and a \$100,000 maternity hospital opened in 1925.²³ These additions however, were not enough. As the years went by, the number of patients rose steadily. In 1912, the hospital accommodated 1,121 patients. By 1923, the total number of patients was 1,958.²⁴ Greater occupancy meant the need for a larger facility with more beds. Between 1923 and 1929, the Order bought up residences on Spring, Fourth and New York Streets in order to make way for the new St. Charles Hospital.²⁵ One of these properties was the former home of Benjamin Hackney, a prominent businessman and leading Aurora citizen during the second half of the nineteenth-century. As one of the chief promoters of the Aurora Branch Railroad, forerunner of the Chicago, Burlington & Quincy Railroad, Hackney played a decisive role in the community's economic development.²⁶

Constructed in 1931 and 1932, the new Art Deco building renewed the look and mission of the St. Charles Hospital. Erected for a cost of \$500,000, the 110-bed hospital building replaced the original as the primary care facility. Groundbreaking for the new building occurred April 19, 1931.²⁷ Contractor C.J. DeWit hired local labor for the project. According to a 1931 *Chicago Daily Tribune* article, the project did much to alleviate local unemployment during the early years of the Depression.²⁸ On October 23, 1932, a dedication ceremony marked completion of the new hospital. An estimated crowd of over 5,000 attended the ceremony. The Rev. Edward F. Hoban, bishop of the Diocese of Rockford, delivered the dedication and blessing of the new hospital. Hoban praised the new structure: "My presence here among you on this momentous day affords me great pleasure, to assist you in offering up this splendid edifice to the honor and glory of God."²⁹

<u>Art Deco</u>

Designed by Dutch architect Wybe Jelles Van der Meer (1883 – 1948), the new St. Charles Hospital presented a new take on ecclesiastical architecture for the architect. Prior to the St. Charles Hospital, Van der Meer worked primarily in the traditional styles for ecclesiastic architecture, with the Gothic style being the most predominant.³⁰ The hospital required something new. Van der Meer's Art Deco design was contemporary and innovative. The style emphasized progress and optimism; architecture not enslaved to the past. According to Bevis Hiller and Stephen Escritt, authors of *Art Deco Style*, "Art Deco represents a romantic vision of the interwar world of the 1920s and 1930s – a world still seduced by the promises of progress in the face of the rising

²² Ibid., 10-11.

²³ Edward L. McDonald, Golden Jubilee History of the Diocese of Rockford, 1908 – 1958 (Rockford, IL: Waldsmith Illustrators, 1958), 357.

²⁴ Cornelius J. Kirkfleet, *The History of the Parishes of the Diocese of Rockford, Illinois* (Chicago: John Anderson Publishing Company, 1924), 202.

²⁵ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 51.

²⁶ Beacon-News, "Pioneer Home on St. Charles Hospital Site," 7 December 1930.

 ²⁷ Beacon-News, "St. Charles Hospital, Covering Nearly a City Block, One of the Finest in State," 5 September 1937; Beacon-News, "Thousands at Dedication of New Hospital," 24 October 1932.

²⁸ Chicago Daily Tribune, "Two Hospitals, Bridge Will Be Built in Aurora," 8 March 1931.

²⁹ Beacon-News, "Thousands at Dedication of New Hospital," 24 October 1932.

³⁰ Wybe Jelles Van der Meer, Catholic Churches and Institutions (Rockford, IL: Diocese of Rockford, 1931).

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spectre of totalitarianism."³¹ During a time of economic turmoil and impending war in Europe, the Art Deco style provided a much-needed boost in public morale.

Art Deco relied extensively on the use of bold, geometric patterns. Hard-edged designs, either angular or curvilinear, characterized the style. Strong, bold colors complimented these patterns.³² Van der Meer relied extensively on geometric patterning. The triangular geometry of the chapel sanctuary and the 'zig-zag' detailing of the lobby portals were two notable examples of the dependence on geometry.

The hospital's simple, pyramid-like design represented another hallmark of the Art Deco style. Although the six-story building contained relatively few setbacks, the St. Charles facade nevertheless called to mind the great Art Deco skyscrapers of the metropolis. Art Deco's most recognized buildings, skyscrapers such as the Chicago Board of Trade Building (1930) and New York City's Chrysler Building (1930) climbed upward through a series of staggered steps.³³ The arrangement of setbacks emphasized geometric form and most importantly, heightened the hospital's sense of bulk.³⁴ Van der Meer's monolithic building suggested permanence and stability, a hospital of great importance and worth.

Non-traditional building materials constituted further adherence to the style. Industrial materials such as concrete, metal, and terra-cotta figured predominately in Art Deco construction and ornamentation. The style celebrated industrialism. Terra-cotta for example, a relatively inexpensive cast-clay product, produced ornamentation mechanically using precast models.³⁵ Mass produced terra-cotta exemplified Art Deco's connection to the materials and processes of industry. The St. Charles Hospital's terra-cotta detailing was appropriate. It was decoration that befitted Aurora's reputation as a center of industry.

The use of modern construction techniques and materials reflected an increased concern for improved safety and cleanliness. The 1932 *St. Charles Hospital: Souvenir of Dedication*, published in conjunction with completion of the new hospital, repeatedly made note of advances in hospital science and sanitation. According to the booklet, "Nothing in scientific or medical standards has been sacrificed in the construction of the new modernly equipped St. Charles Hospital."³⁶ In accordance with these demands, Van der Meer installed terrazzo floors with coved sanitary terrazzo bases throughout the building for easy cleaning. The dedication book also made note of the reversible double-hung windows that allowed for proper ventilation and simple cleaning.³⁷ Other advances in hospital technology included an electronically operated dumb waiter, temperature controlled operating rooms, adjustable operating tables, and an electronic paging system for doctors.³⁸

The contrast between the 1932 hospital and its predecessor was dramatic. A pillared entryway along Fourth Street connected the old to the new hospital. Following completion of the Van der Meer building, the original hospital became living quarters for sisters and nurses. Although demolished in 1968, the old Victorian hospital coexisted alongside the contemporary Art Deco structure for thirty-six years. The contrast in design between the old and new buildings created something of an eyesore. In an attempt to enhance stylistic continuity between the two buildings, Van der Meer resurfaced the south end of the Victorian hospital in the Art

³¹ Bevis Hiller and Stephen Escritt, Art Deco Style (London: Phaidon, 1997), 19.

³² Leland M. Roth, American Architecture: A History (Boulder, CO: Perseus Books, 2001), 374.

³³ Bevis Hiller and Stephen Escritt, Art Deco Style, 19.

³⁴ John J.-G Blumenson, *Identifying American Architecture* (New York: W.W. Norton & Co., 1981), 77.

³⁵ Carla Breeze, American Art Deco: Architecture and Regionalism (New York: W.W. Norton & Co., 2003), 27.

³⁶ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 78.

³⁷ Ibid., 53.

³⁸ Ibid., 55-68.

Deco fashion.³⁹ The resurface job concerned more than just aesthetics. It symbolized the shift from conventional, nineteenth-century medicine in favor of progressive, modern medicine based on twentieth-century achievements in science and technology. As a self-sufficient, independent city with a rapidly growing population, Aurora demanded the very best in healthcare. Van der Meer's hospital reflected this need through the incorporation of the latest in technology and sanitation. Furthermore, Van der Meer found it necessary to design the new St. Charles Hospital with little regard to established building practices. The look of the hospital had to project confidence in the future. It could not afford to bear the influence of architectural classicism or eclecticism.

Art Deco Buildings in Aurora

The new St. Charles Hospital occupied an important position within the larger framework of Art Deco in Aurora. The hospital was by no means the lone stylistic example in the area. A number of Art Deco buildings exist on Aurora's Stolp Island. Located in the middle of the Fox River, Stolp Island played a crucial role in the development of the city. The island provided a neutral ground between different groups of settlers who came to the area during the first half of the nineteenth-century; it united pioneers on the "east side" of the river to pioneers on the "west side."⁴⁰ The neutrality of the site made it an ideal home for the city hall and other public institutions. The island's centrality also made it an ideal location for commercial enterprise.⁴¹

The development of Stolp Island as a commercial focal point coincided with the general rise in the popularity of Art Deco architecture and decoration. The island included several Art Deco structures and numerous examples of terra-cotta ornamentation. In 1986, the Stolp Island Historic District became a National Register Historic District. The Paramount Theater (1931) at 8 East Galena Boulevard is arguably the most well-known Stolp Island structure. Designed by the architectural firm of Rapp & Rapp, who also designed the Chicago Theatre, the Paramount is a classic movie palace. The Paramount's intricately ornamented terra-cotta octagonal tower makes it a strong example of Art Deco.⁴²

Another stylistic example on Stolp Island is the Benevolent & Protective Order of the Elks building (77 South Stolp Avenue). The 1926 Elks building is an example of "Mayan Revival." The terra-cotta friezes on the building's facade evoke the design motifs from Mayan temples.⁴³ The cultural exoticism of the Elks building recalls the Art Deco architecture of nearby DeKalb's Egyptian Theater (1929). The Elks building is also listed on the National Register as part of the Stolp Island Historic District.

A more standard example of Art Deco is the New York Street Memorial Bridge, located due east of the St. Charles Hospital. The reinforced concrete bridge spans the entire Fox River, connecting Stolp Island to the east and west banks of the Fox. Dedicated on Armistice Day 1931 as a memorial to veterans of World War I, the bridge features Art Deco influenced statues of "Victory" and "Memory."⁴⁴ The Memorial Bridge is also listed on the National Register as part of the Stolp Island Historic District.

<u>Van der Meer</u>

³⁹ Ibid., 59.

⁴⁰ Roberta Deering and Joseph McElroy, *The Historic Structures of Stolp Island* (Aurora, IL: Aurora Preservation Commission, 1985), 1.

⁴¹ Ibid., 2-4.

⁴² Roberta Deering and Joseph McElroy, *The Historic Structures of Stolp Island*, 12; Carla Breeze, *American Art Deco: Architecture and Regionalism*, 124.

⁴³ Roberta Deering and Joseph McElroy, The Historic Structures of Stolp Island, 26.

⁴⁴ Ibid., 5.

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The close proximity of the St. Charles Hospital to the Art Deco architecture of Stolp Island was no accident. Van der Meer would have been well acquainted with the island's distinctive architecture and extensive use of terra-cotta ornamentation before he accepted the St. Charles commission. Van der Meer was a well-known architect of ecclesiastical buildings. He created numerous designs for churches, schools, and hospitals. During the 1920s, he did work for the Archdiocese of Dubuque and most importantly, the Diocese of Rockford, a territory that encompassed twelve counties in northwestern Illinois.⁴⁵ Van der Meer's other work in Aurora included St. Theresa Church and School (1926), Fox Valley Catholic High School, and Madonna Catholic High School for Girls (1926). The architect also designed a new building for Aurora's third city hospital, St. Joseph Mercy. Dedicated on September 20, 1931, one year before completion of the new St. Charles, St. Joseph Mercy was a six-story Gothic style structure. The hospital's most notable feature was a seven and a half story tower with delicate stone tracery work.⁴⁶

The Gothic inspired St. Joseph Mercy Hospital characterized the ecclesiastical architecture of Wybe Jelles Van der Meer. In general, the architect felt most comfortable when designing in the Gothic style. Examination of Van der Meer's 1931 architecture book Catholic Churches and Institutions revealed this preference for historical based design. Van der Meer further revealed his fondness for Gothic architecture through the inclusion of a quote from John Ruskin, the famous nineteenth-century art critic and champion of the Gothic style. The quote appeared on the final page of Van der Meer's book, a fitting conclusion for an architect who repeatedly found inspiration in the Gothic churches of Northern Europe.

To some extent, Van der Meer's preference for Gothic design can be attributed to his Northern European roots. He was born in Woudend Friesland, Netherlands on June 18, 1883.⁴⁷ When Van der Meer was twentythree years old, he immigrated to the United States.⁴⁸ The architect's portrait in the St. Charles Hospital: Souvenir of Dedication was accompanied by a caption that read, "Wybe J. Van Der Meer, B.N.A. - A.I.A. Architect." The title "B.N.A." denoted that Van der Meer was a registered architect with the Royal Institute of Dutch Architects.⁴⁹ This designation meant that Van der Meer was a professionally licensed architect prior to his arrival in the United States. As part of his instruction in the Netherlands. Van der Meer would have been educated in the architecture of the Gothic builders. His training in the Gothic was not simply confined to the classroom however; it would have included firsthand knowledge of the great Gothic churches through actual, personal experience.

Van der Meer's Catholic Churches and Institutions also contained photographs and blueprints of his work to date. Published prior to the completion of the new St. Charles, Catholic Churches and Institutions included a perspective drawing and floor plans of the unfinished hospital. Despite the absence of St. Charles photographs, the proposed building was impressive when placed alongside the architect's larger corpus. The hospital stood out as the book's single example of Art Deco influenced architecture. In all likelihood, the St. Charles Hospital was Van der Meer's first and only Art Deco design. Although he felt most at ease in the Gothic style, Van der Meer's work on the St. Charles Hospital proved that he was a capable and flexible architect who felt comfortable working in both new and old modes of design.

⁴⁵ Cornelius J. Kirkfleet, The History of the Parishes of the Diocese of Rockford, Illinois (Chicago: John Anderson Publishing Company, 1934), 139-140.

⁴⁶ Aurora Preservation Commission, "Tanner Historic District," http://www.aurora-

il.org/communitydevelopment/historicpreservation/hist tanner.php.

 ⁴⁷ Beacon-News, "Well Known Architect is Heart Victim," 18 May 1948.
 ⁴⁸ Jan Mangers, "St. Charles Hospital Notes," St. Charles File at Aurora Preservation Commission, Aurora, IL.

⁴⁹ Franciscan Sisters of the Sacred Heart, St. Charles Hospital: Souvenir of Dedication, 1932, 42; Jan Mangers, "St. Charles Hospital Notes."

Catholic Churches and Institutions served as more than just a portfolio. The book's foreword outlined Van der Meer's approach to ecclesiastical architecture. The foreword offered rare and valuable insight into the architect's building philosophy. Van der Meer wrote, "The varied *motifs* in the unfolding idea of Christianity itself, have given to architecture a richness of variety and a depth of meaning such as the history of this art can show nowhere else."⁵⁰ For Van der Meer, the lessons of Christianity should never fail to guide the pen of the ecclesiastical architect. Christianity was a most fruitful muse. Although intended for fellow ecclesiastical architects, Van der Meer stated that *Catholic Churches and Institutions* would appeal to anyone interested in the building arts. ⁵¹ If done correctly, Christian architecture would appeal to anyone, regardless of personal religious beliefs. In the case of the St. Charles Hospital, the Art Deco design infused with Christianity, would appeal to the public at large.

Throughout his career, Van der Meer maintained close ties to the Diocese of Rockford, which is further evidence of his devotion to Christianity. Van der Meer attended service at Rockford's St. Peter's Cathedral.⁵² As both a parishioner and associate of the diocese, the architect quickly developed a friendship with Edward F. Hoban, second bishop of the Rockford Diocese. In 1930, Hoban authorized Van der Meer's work on *Catholic Churches and Institutions*.⁵³ Hoban also conducted the dedication ceremony for the St. Charles Hospital on October 23, 1932.⁵⁴ When Bishop Hoban moved out of his residence at 1704 National Avenue in Rockford in 1930, Van der Meer along with his wife and three children moved in. The family lived in the former Diocese Chancery home for four years. Van der Meer later donated the house back to the diocese.⁵⁵

The Franciscan Sisters of the Sacred Heart closed St. Charles Hospital in 1971. Over the following two years, the building experienced a major renovation. The former hospital reopened in 1973 as the St. Charles Medical Center.⁵⁶ At the same time as the renovation, the Illinois Department of Conservation declared the St. Charles Hospital an important historic landmark. The agency included the building on its 1972 Illinois Historic Landmarks Survey. The building's current tenant is the Fox River Pavilion nursing home. Although over thirty years have passed since inclusion on the 1972 survey, much work remains unfinished. National Register designation will help preserve and maintain the integrity of the St. Charles Hospital's historic Art Deco exterior as well as its significant interiors.

The final page of *Catholic Churches and Institutions* contained a prescient quotation regarding preservation. An excerpt from the writings of John Ruskin, famous English art critic and early historic preservationist: "When we build, let us think that we build forever. Let it not be for present delight nor for present use alone. Let it be such work as our descendants will thank us for."⁵⁷ Selection of the Ruskin quote revealed the importance of conservation to Van der Meer. Great architecture deserves protection so that future generations can appreciate and learn from what it has to offer. Inclusion of the St. Charles Hospital on the National Register of Historic Places will enrich the culture and historic legacy of the Aurora community.

⁵⁰ Wybe Jelles Van der Meer, *Catholic Churches and Institutions* (Rockford, IL: Diocese of Rockford, 1931), foreword. ⁵¹ Ibid.

⁵² Cornelius J. Kirkfleet, *The History of the Parishes of the Diocese of Rockford, Illinois* (Chicago: John Anderson Publishing Company, 1934), 139-140.

⁵³ Wybe Jelles Van der Meer, Catholic Churches and Institutions, foreword.

⁵⁴ Beacon-News, "Thousands at Dedication of New Hospital."

⁵⁵ Diocesan Research and Planning Office, "Owners of 1704 National Avenue, Rockford," Diocese of Rockford, Rockford, IL.

⁵⁶ Robert R. Miller, That All May Be One: A History of the Rockford Diocese (Rockford, IL: Diocese of Rockford, 1976), 142.

⁵⁷ Wybe Jelles Van der Meer, Catholic Churches and Institutions.

Kane County, Illinois County and State

Developmental history/additional historic context information (if appropriate)

N/A

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Newspapers: Beacon-News Chicago Tribune

Previous documentation on file (NPS): preliminary determination of individual listing (36 CFR 67 has been requested) previously listed in the National Register				Primary location of additional data: State Historic Preservation Office					
				Federal agency					
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						Aurora Preservation Commission; Aurora			
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10. Geogi	raphical Data								
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Verbal Boundary Description (Describe the boundaries of the property.)

Lots 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, and 12 in Block 20 of McCarty's Amended Plat of Aurora on the east side of Fox River, in the City of Aurora, Kane County, Illinois.

Boundary Justification (Explain why the boundaries were selected.)

The nominated boundary includes the property historically associated with St. Charles Hospital.

name/title Charlie Wilkins

organization Aurora Preservation Commission		date December 1, 2009				
street & number	1 South Broadway	telephone	630-	853-8816		
city or town	Aurora	state	IL	zip code	60505	
e-mail	cewilki4@gmail.com					

Additional Documentation

Submit the following items with the completed form:

• 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. Key all photographs to this map.

- Continuation Sheets
- Additional items: (Check with the SHPO or FPO for any additional items.)

Photographs:

Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map.

Name of Property: St. Charles Hospital

City or Vicinity: Aurora

County: Kane

State: Illinois

Photographer: Charlie Wilkins

Date Photographed: November 3, 2009

Description of Photograph(s) and number:

IL_KaneCounty_St.Charles_001 St. Charles Hospital, New York and Fourth Streets; looking northeast.

IL_KaneCounty_St.Charles_002 Main entrance and west elevation; looking east.

IL_KaneCounty_St.Charles_003 Main entrance; looking northeast.

IL_KaneCounty_St.Charles_004 Close-up of main entrance; looking northeast.

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IL_KaneCounty_St.Charles_005 Statue of St. Charles, main entrance; looking northeast.

IL_KaneCounty_St.Charles_006 Statue of St. Joseph, main entrance; looking northeast.

IL_KaneCounty_St.Charles_007 West elevation, chapel entrance; looking east.

IL_KaneCounty_St.Charles_008 Close-up of west elevation, chapel entrance; looking east.

IL_KaneCounty_St.Charles_009 Close-up of terra cotta ornament, west elevation, chapel entrance; looking east.

IL_KaneCounty_St.Charles_010 North elevation; looking south.

IL_KaneCounty_St.Charles_011 North elevation and inner court; looking southwest.

IL_KaneCounty_St.Charles_012 Inner court; looking southwest.

IL_KaneCounty_St.Charles_013 Close-up of chapel exterior; looking north.

IL_KaneCounty_St.Charles_014 South elevation of chapel wing; looking north.

IL_KaneCounty_St.Charles_015 Close-up of chapel entrance, south elevation of chapel wing; looking north.

IL_KaneCounty_St.Charles_016 Southeast elevation; looking west.

IL_KaneCounty_St.Charles_017 Southeast elevation, basement entrance; looking west.

IL_KaneCounty_St.Charles_018 Roof detail; looking south.

IL_KaneCounty_St.Charles_019 Reception desk, main lobby; looking east.

IL_KaneCounty_St.Charles_020

Lobby ornamentation, main lobby; looking northeast.

IL_KaneCounty_St.Charles_021 Main entrance window, main lobby; looking southeast.

IL_KaneCounty_St.Charles_022 First floor corridor; looking west.

IL_KaneCounty_St.Charles_023 Patient's room, fifth floor; looking north.

IL_KaneCounty_St.Charles_024 Dining room, fifth floor; looking north.

IL_KaneCounty_St.Charles_025 Auditorium stage; looking east.

IL_KaneCounty_St.Charles_026 Auditorium office; looking north.

IL_KaneCounty_St.Charles_027 Chapel ceiling; looking east.

IL_KaneCounty_St.Charles_028 Chapel altar; looking east.

IL_KaneCounty_St.Charles_029 Chapel; looking west.

IL_KaneCounty_St.Charles_030 Chapel and second floor chapel balcony; looking west.

IL_KaneCounty_St.Charles_031 Chapel windows; looking north.

IL_KaneCounty_St.Charles_032 Confessional, south wall of chapel; looking south.

IL_KaneCounty_St.Charles_033 Wood door, entrance to chapel; looking east.

IL_KaneCounty_St.Charles_034 Doors to "crying room"; looking north.

IL_KaneCounty_St.Charles_035 Sixth floor penthouse; looking west.

St. Charles Hospital Name of Property	Kane County, Illinois				
Property Owner: (Complete this item at the request of the SHPO or FPO.)					
name LaSalle Bank NA Trust #117021-07					
street & number 8950 Gross point Road, Suite 600	telephone				
city or town Skokie	state IL zip code 60077				

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 listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C.460 et seq.). Estimated Burden Statement: Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing

Estimated Burden Statement: Public reporting burden for this form is estimated to average 18 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 Office of Planning and Performance Management. U.S. Dept. of the Interior, 1849 C. Street, NW, Washington, DC.

Nathaniel Witherell Historic District, 70 Parsonage Rd, Greenwich, 10000346, LISTED, 6/09/10

CONNECTICUT, HARTFORD COUNTY, North-West School, 1240 Albany Ave, Hartford, 10000339, LISTED, 6/11/10

FLORIDA, HILLSBOROUGH COUNTY, Upper North Franklin Street Commercial District, Bounded by E Oak Ave, N Florida Ave, Kay St, & N Tampa St, Tampa, 10000344, LISTED, 6/09/10

ILLINOIS, COOK COUNTY, Calhoun, Mr. James Kent, House, 740 Greenwood Ave., Glencoe, 09000780, LISTED, 6/07/10

ILLINOIS, COOK COUNTY,

Sauganash Historic District, Roughly bounded by Lemont and Keating Aves, Chicago and Northwestern Railway and the alley to the east of Kilbourn Ave, Chicago, 10000310, LISTED, 6/07/10

ILLINOIS, COOK COUNTY, Union Park Hotel, 1519-1521 W Warren Blvd, Chicago, 10000309, LISTED, 6/07/10

ILLINOIS, KANE COUNTY, St. Charles Hospital, 400 E New York St, Aurora, 10000312, LISTED, 6/07/10

LOUISIANA, ASCENSION PARISH, St. Joseph's School, LA 22 and 44, Burnside, 88002651, REMOVED, 6/09/10