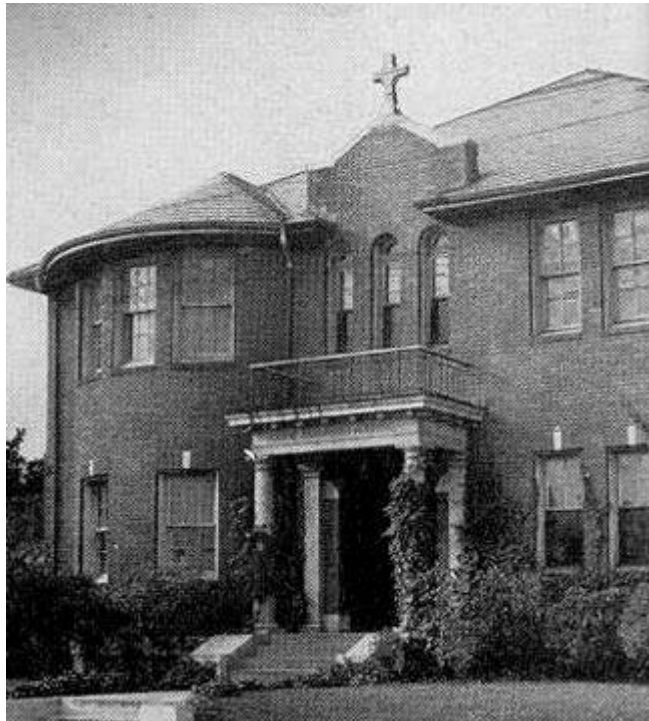


OLD GOOD SAMARITAN HOSPITAL

[Click here to view photo gallery of Old Good Samaritan Hospital.](#)

[Click here to view Charlotte Observer Article on the Good Samaritan Hospital](#)



This report was written on March 6, 1985

1. Name and location of the property: The property known as the Old Good Samaritan Hospital is located at 411 W. Hill Street in Charlotte, North Carolina.

2. Name, address, and telephone number of the present owner of the property:

The present owner is:

Charlotte-Mecklenburg Hospital Authority

Box 2554

Charlotte, NC 28234

Telephone: (704) 331-2141

The occupant is:

The Magnolias Rest Home

801 S. Graham St.
Charlotte, NC 28202

Telephone: (704) 331-3281

3. Representative photographs of the property: This report contains representative photographs of the property.

4. Current Deed Book Reference to the property: The most recent deed to this property is recorded in Mecklenburg County Deed Book 2257, Page 323. The Tax Parcel Number of the property is 073-135-07.

5. A map depicting the location of the property: This report contains a map which depicts the location of the property.

6. A brief historical sketch of the property: This report contains a brief historical sketch of the property prepared by Dr. William H. Huffman and Thomas W. Hanchett.

7. A brief architectural description of the property: This report contains a brief architectural description of the property by Lisa A. Stamper, edited and revised by Dr. Dan L. Morrill.

8. Documentation of why and in what ways the property meets the criteria set forth in N.C.G.S. 160A-399.4:

a. Special significance in terms of its history, architecture, and/or cultural importance: The Commission judges that the property known as the Old Good Samaritan Hospital does possess special significance in terms of Charlotte-Mecklenburg. The Commission bases its judgment on the following considerations: 1) the Old Good Samaritan Hospital is believed to be the first privately-funded, independent hospital in North Carolina to have been built exclusively for the treatment of blacks; 2) opening in 1891, Good Samaritan Hospital resulted from the great talents, skills, and energy of Jane Renwick Smedberg Wilkes (1827-1913), a leader in philanthropic activities in this community for more than fifty years; and 3) the Old Good Samaritan Hospital is the only surviving remnant of a once-flourishing black neighborhood in Third Ward.

b. Integrity of design, setting, workmanship, materials, feeling and/or association: The Commission contends that the attached architectural description by

Lisa A. Stamper demonstrates that portions of the Old Good Samaritan Hospital meet this criterion.

9. Ad Valorem Tax Appraisal: The Commission is aware that designation would allow the owner to apply for an automatic deferral of 50% of the Ad Valorem taxes on all or any portion of the property which becomes "historic property." The current appraised value of the 2.535 acres of land is \$110,410. The current appraised value of the improvements is \$2,693,070. The total appraised value of the property is \$2,803,480. The property is exempt from the payment of Ad Valorem taxes because of current use. The property is zoned I3.

Date of Preparation of this Report: March 6, 1985

Prepared by: Dr. Dan L. Morrill, Director
Charlotte-Mecklenburg Historic Properties Commission
1225 S. Caldwell St. Box D
Charlotte, NC, 28203

Telephone: (704) 376-9115

Historical Overview

Dr. William H. Huffman & Thomas W. Hanchett

Hidden behind well-grown trees and shrubs, and dwarfed by later and more modern additions, the original Good Samaritan Hospital building still stands proudly in the middle of West Hill Street between Mint and Graham in Charlotte's [Third Ward](#). Indeed, the facility enjoys a historical uniqueness that seems to have been lost in modern debates on what to do with the site: it is believed to be the first private, independent hospital in North Carolina to have been built exclusively for the treatment of blacks.¹

The hospital's origins are rooted in the philosophy of the Episcopal Church and the determined efforts of a remarkable St. Peter's parishioner, Jane Renwick Smedberg Wilkes (1827-1913). The daughter of Swedish industrialist Charles Gustav Smedberg and Isabella Renwick, Mrs. Wilkes was born and educated in New York City, where she often enjoyed the company of her first cousin and schoolmate, John Wilkes (1827-1908). He was the son of U. S. Navy Admiral Charles Wilkes, who, in 1833, established the U. S. Naval Observatory and in 1838 undertook the first expedition for the United States in the South Pacific and Antarctica. The charts he made on this expedition were still used in World War II by U. S. forces. Following in his father's footsteps, John Wilkes entered the U. S. Naval Academy, and graduated number one

in his class of 1847. After service at sea in the Gulf of Mexico and the Far East, Wilkes returned to the United States in 1852. At the time, Commodore Perry specifically requested him to be a part of an upcoming expedition, but he declined. In 1853, Wilkes came to Charlotte while on leave from the Navy to look into business possibilities. Since the area seemed just what he was looking for, the following year he married his cousin Jane, resigned his commission, and the newly-married couple took up permanent residence in the Queen City.

In Charlotte, Mr. Wilkes owned (with William R. Myers) the Mecklenburg Flour Mills (1858) and founded the Mecklenburg Iron Works in 1859. During the Civil War, the flour mill fed many Confederate troops, and the foundry was taken over by the Confederate Navy as a repair facility and supplier of shells and machinery. Following the war, Captain Wilkes secured a charter for the First National Bank, and served as its first president from 1865 to 1869.²

Although the Wilkes had nine children of their own, Jane Wilkes devoted much of her considerable energy to helping others, particularly through work in St. Peter's Episcopal Church. The church has as an ideal to provide both spiritual any physical healing, and Mrs. Wilkes and her contemporaries had seen the need for a church-connected hospital through their nursing work for the Confederate wounded during the war. Thus, at the suggestion of the rector of St. Peter's Church, Reverend Benjamin Bronson, [St. Peter's Hospital](#) started in rented quarters on East Seventh Street as the first civilian hospital in North Carolina. A girl's club in the church, the "Busy Bees," under the leadership of Miss Hattie Moore, who also ran a school for girls, raised \$170 in 1877 for the purchase of a lot at 6th and Poplar upon which a new hospital could be built. At this point the church's Ladies' Aid Society took charge, of which Mrs. Wilkes was secretary and treasurer. Through her fund-raising efforts among her friends here and in New York, the original four-room hospital was completed in 1878 and was made of clay dug at the Thompson Orphanage property.³

But far from congratulating herself on this accomplishment, Mrs. Wilkes was just getting started. While serving alternately as president, secretary or treasurer of the board of managers of the hospital and always being a dominating presence, she continued her fund-raising efforts which resulted in major expansion of St. Peter's in 1898 and 1907.⁴ In 1882, at the instigation of Reverend Joseph Blount Cheshire, then rector of St. Peter's Church and subsequently Bishop of the North Carolina Diocese, a mission chapel, St. Michael and All Angels Church, was started to serve the black population of the city, and for the purpose a lot was purchased by the Diocese at the northeast corner of Mint and Hill Streets in Third Ward.⁵ The indefatigable Jane Wilkes lost no time in beginning to raise money for a companion hospital in the area for the same constituency.

Five years later, in 1887, sufficient money had been raised so that Reverend Cheshire bought a lot for the new hospital on the south side of Hill Street between Mint and Graham for \$700.00.⁶ The lot, which fronted one hundred feet on Hill in the middle of the block and went back one hundred feet, was only just to the west of the St. Michael's Chapel. The following year, on December 18, 1888, the cornerstone was laid for the Good Samaritan Hospital with great ceremony. A procession left St. Michael's at 3:00 in the afternoon, led by the black Masonic Fraternity, then came members of the clergy, both black and white, followed by a number of interested citizens and dignitaries. The Masons laid the cornerstone with traditional rites, followed by a service by Reverend E. A. Osborne and Reverend Cheshire of St. Peter's, and concluding with speeches by Dr. Mattoon, president of Biddle Institute (now Johnson C. Smith University), and the black clergymen Reverend Wyche and Reverend Tyler. Looking on were Mayor McDowell, Captain John and Jane Wilkes, Miss Hattie Moore and many others.⁷

Construction of the facility proceeded slowly due to available funds, but nearly three years after it was begun, Good Samaritan was finally ready for use. On September 23, 1891 the building was dedicated with proper ceremony, which included another procession from St. Michael's. A newspaper article at the time described it thus:

This building was erected at considerable cost exclusively for the use of colored people. The funds with which it was erected were raised by continuous appeals through the Episcopal church papers, and by private subscriptions. It is one of the most conveniently arranged buildings that could be built for this purpose, and every room is well ventilated. On the upper and lower floors are hot and cold baths, and the rooms are provided with iron cots with springs.⁸

Good Samaritan's founding gave Charlotte the distinction of having the first privately-funded, independent hospital built exclusively for blacks in North Carolina. This advance came in a period when Charlotte was not the state's largest city, as it is today, but rather was in third place behind Wilmington and Raleigh.⁹ The state's two other "Negro institutions" were the government-run North Carolina State Hospital at Goldsboro (1880), and Leonard Hospital, built as a teaching facility at Shaw University in Raleigh (1882).¹⁰ A 1929 survey by the American Medical Association indicates that Good Samaritan was not only a landmark in North Carolina, but one of the oldest black hospitals then in operation in the entire United States. Outside North Carolina only the Georgia Infirmary in Savannah (1832), Freedman's Hospital in Washington, D.C. (1865), Central Hospital in Petersburg, Virginia (1870), and Prince George's House of Reformation in Cheltham, Maryland (1872) predated the Charlotte facility.¹¹

Governance of the hospital was vested in a board of managers, all women of the church: Mrs. John Wilkes, Mrs. T. S. Clarkson, Mrs. Julia Fox, Mrs. Annie Lardner, Mrs. W. E. Holt, and Mrs. R. Lockwood Jones. Total cost of the hospital was \$4,400.¹² At first the hospital had few patients because of rumors which had gone around about fearful things that went on inside, in addition to the pervasive notion among many people of the day that a hospital was a place one went to die. Eventually the fears were overcome, however, and the hospital did a thriving business, supported mostly by church and citizen donations.¹³

In 1925, a major addition was built immediately behind the original building which more than doubled the facility's capacity. In the 1930's additional property was acquired, and in 1937 another wing was added, making it at the time a 100-bed hospital with the latest equipment, with 22 nurses and with patients from most of the doctors of the city. By the early 1950's, however, the facilities and staffing were not able to keep pace with the years, and a small church found it increasingly difficult to support a modern hospital, although through the years money had come from the Duke Endowment and the Julius Rosenwald fund for expansions. Just as St. Peter's hospital was closed when Memorial opened in 1940, in 1959 the Memorial staff agreed to take over Good Samaritan, and in June, 1961, the site was formally passed to the ownership of the city.¹⁴ Just prior to that, a bond issue of \$800,000 had been passed for expansion and improvement of the hospital, but the project mushroomed to \$1.4 million before completion.¹⁵ The new addition is the one facing Graham Street. Despite all the money spent on the facility, when its name was changed to Charlotte Community Hospital, debate still raged on about whether to continue using it as a general hospital until 1982, when it was closed. It is now used as the Magnolias Rest Home.

The renovations for the Magnolias included the original hospital building, now difficult to recognize because the old front entrance was bricked up, which was a unique and noble experiment in community health care in the late nineteenth century, and one Charlotte can truly be proud of. The building is, without question, truly worthy of historical status.

NOTES

¹ *Charlotte News*, June 25, 1936; newspaper article by Mrs. J. A. Yarbrough, 1939; both on file at Charlotte-Mecklenburg Public Library. For many years Charlotte writers have mistakenly indicated that Good Samaritan was the first black hospital in the South. This misapprehension may possibly be traced to a pamphlet by Dr. Mary

V. Glenton, *Story of a Hospital*, 2nd ed. (Hartford, Conn.: Church Missions Publishing Co., 1937), pp. 18-19, which detailed several projects undertaken by the Episcopal Church in the South. The section on Good Samaritan was titled "Our Oldest Negro Hospital."

² *Charlotte Evening Chronicle*, July 6, 1908, p. 1 January 20, 1913, p. 1.

³ *Charlotte News*, January 20, 1913, p. 1 1978, p. 14A.

⁴ *Ibid.*; *Charlotte News*; *Charlotte Observer*, April 15,

⁵ Interview with Judge Francis Clarkson, Charlotte, N.C., April 13, 1983.

⁶ Deed Book 66, p. 495, April 6, 1887.

⁷ *Charlotte Evening Chronicle*, December 19, 1888, p. 3.

⁸ *Ibid.*, September 24, 1891, p. 4.

⁹ United States Bureau of the Census, Sixteenth Census: 1940, Population Volume I, p. 772.

¹⁰ *University of North Carolina Newsletter*, March 25, 1931. *Journal of the American Medical Association*, March 30, 1929, pp. 1096-1098. Linda Harris Edmisten, Raleigh Preservation Planner, telephone interview with Thomas W. Hanchett, February, 1985.

¹¹ *Journal of the American Medical Association*, March 30, 1929, pp. 1096-1098.

¹² Article by Yarbrough, note 1.

¹³ *Ibid.*

¹⁴ *Charlotte Observer*, October 25, 1959, p. 1B; Deed Book 2257, p. 323, June 27, 1961.

¹⁵ *Ibid.*, July 27, 1964, p. 1B.

Architectural Description

Lisa A. Stamper

The first privately funded, independent hospital in North Carolina, which was built exclusively for the treatment of black people, the Good Samaritan Hospital, was dedicated on September 23, 1891. It was built in Charlotte's Third Ward neighborhood, on West Hill Street between what is now South Graham and Mint Streets. The original Richardsonian Romanesque style building's cornerstone was laid on December 18, 1888. This building still stands, despite many additions and remodelings, as a physical tribute to the city's concern for all members of its community.

It was not easy for Charlotte's Episcopal Church to establish this unique and historic hospital. Because of financial difficulties and public ignorance, the Good Samaritan had a slow beginning. Within twelve years after the dedication, the hospital had grown enough to merit adding twelve rooms to the back of the original structure. By 1925, another building was constructed to the rear of the hospital. Later an obstetrics wing was constructed along West Hill Street in 1937. Ownership of the hospital was accepted by the city in 1961, since management of such a large facility was becoming too large a job for the church community. In 1963 a new addition facing South Graham Street was built. At this time, the Good Samaritan's name was changed to the Charlotte Community Hospital. These buildings were recently renovated to accommodate a rest home called the Magnolias.

The original Good Samaritan Hospital was basically a rectangular two story brick building set just down the street from neighborhood stores and Saint Michael's Church. Its quaint picket fence, two story bay window, recessed rectangular side, and broad tripped roof with two interior chimneys must have been intended to blend with the surrounding residential architecture. The building was twelve thin bays in width and four bays in depth. All windows, except those of the two and one-half story entrance had six-over-six lights plus rough stone sills. The first story windows were all transomed and topped with simple stone lintels. The 1891 entrance was three bays wide. The first story had a large, round arched doorway, the second story contained three thin, round arched windows, and the attic story had three short rectangular windows.

From photographs and drawings in the Good Samaritan Hospital's annual reports, it appears as if an addition was built on to the back of the original building between 1902 and 1909. According to a May, 1964, article (located in the Good Samaritan file in the Carolina Room of the Charlotte-Mecklenburg Public Library), the *Journal of the National Medical Association* reported that this addition added twelve rooms to the small hospital. It also appears to have been built in the same style as the original structure.

In 1925 a three story brick addition was built behind the original building, to which the addition was connected by a hallway. Simpler but similar in design to the original, this addition, which was the same width as the original hospital and eight bays in length, greatly increased the hospital's capacity. The eight bay side, which faces S. Mint Street, has windows with eight-over-one lights, except two smaller windows near the center, which only have six-over-one lights. The end of this addition has had many opening alterations, but it appears as if most if not all windows had eight-over-one lights. A brick belt course separated the second and third stories.

A two story obstetrics wing was built facing W. Hill Street in 1937. This addition deviated in design from the others. Although it was made of brick, the window headings were of brick with contrasting concrete keystones. The overall effect was more delicate.

In 1963, another addition was built facing South Graham Street. It too, was constructed with brick, but was obviously influenced by the International style. Small windows, vertical features, and lack of ornamentation are typical design features of institutional buildings built about this time.

Presently, the Good Samaritan Hospital and all its additions are standing, although some have been altered. The 1891 building and early 1900s addition appear to have had a brick veneer placed over the original brick work. This could have been done in 1937 when the obstetrics wing was built, since the veneer covers the stone lintels and sills, and replaces them with brick work of the same style as the 1937 addition. The original entrance has been completely bricked over. The 1937 wing is presently hidden by a decorative concrete screen, erected in 1963, probably an attempt to visually integrate all the building facades along West Hill Street.

Last year's interior renovation of the Good Samaritan Hospital included the original building as well as all later additions, except the 1925 addition. This addition is not presently used and has not been significantly altered. Still intact are tiled operating rooms, plumbing, dumbwaiters and elevators, which were probably installed during the "complete modernization" of the facility in 1937 (see the *Journal of the National Medical Association*, May 1964).

The renovated interiors are uniform in design. So much so, that while walking down the hallway, through one building to another, one is not aware of when one structure ends and the other begins. Almost all early decorative elements have been removed to create this uniformity; however, a few early features remain. Window shapes and sizes change from one building to the next, with those of the original building being much more pleasant and interesting. The room now used as an entertainment room by the residents still has exposed brick walls. In a few areas in the original building,

evidence of arched openings still exist. Also, the original elevators are present, though not presently in use. Most importantly, the chapel in the early 1900s addition contains magnificent stain-glassed windows and elegant furniture, such as communion table and pews.

It appears as if some early landscaping still exists in front and to the southeast of the 1891 building. By studying photographs and drawings of the hospital from early annual reports, it appears that landscaping was implemented over several years. The picket fence is gone, and a chain-link fence encloses the garden along South Mint Street and to the west of the facility. All the original residences and businesses are gone from the area, and newer businesses have built uninteresting boxes for offices in the area. Directly across West Hill Street a monthly parking lot sits in front of the old hospital.

The Good Samaritan Hospital buildings are the last of the early structures standing in this area of Charlotte's Third Ward. The hospital's historic significance is obvious, and its physical presence represents the persistence of Charlotte's community to improve the quality of life for all its members.