MESS HALL BUILDING (UNIT II)
EASTERN SHORE STATE HOSPITAL

HISTORIC CONTEXT

MARYLAND COMPREHENSIVE HISTORIC PRESERVATION PLAN DATA

Geographic Organization: Eastern Shore
Chronological/Development Period(s): Industrial/Urban Dominance
Prehistoric/Historic Period Theme(s): Not Applicable
Resource Type:
  Category: Building
  Historic Environment: Rural
  Historic Function(s) and Use(s): Mental Hospital: Patient Housing & Dining Rooms, probably Administrative Offices
Known Design Source: Parker, Thomas & Rice
1. Name (indicate preferred name)

Historic: Mess Hall Building - Eastern Shore State Hospital (Unit II)

And/or common: Unit II

2. Location

Street & number: 5520 West Shore Drive
City, town: Cambridge

3. Classification

Category:
- District: [ ]
- Building(s): [ ]
- Structure: [ ]
- Site: [ ]
- Object: [ ]

Ownership:
- X: Public
- Private: [ ]
- Both: [ ]

Public Acquisition:
- In process: [ ]
- Being considered: [ ]
- Not applicable: [ ]

Status:
- X: Occupied
- Unoccupied: [ ]
- Work in progress: [ ]

Accessible:
- X: Yes, restricted
- Yes, unrestricted: [ ]
- No: [ ]

Present Use:
- Agriculture: [ ]
- Commercial: [ ]
- Educational: [ ]
- Entertainment: [ ]
- Government: [ ]
- Industrial: [ ]
- Military: [ ]
- Museum: [ ]
- Park: [ ]
- Private residence: [ ]
- Scientific: [ ]
- Transportation: [ ]
- Other: [ ]

4. Owner of Property (give names and mailing addresses of all owners)

Name:
State of Maryland Department of Health and Mental Hygiene

Street & number:
201 West Preston Street

City, town:
Baltimore

State and zip code:
Maryland 21201

5. Location of Legal Description

Courthouse, registry of deeds, etc.:
Dorchester County Courthouse

Street & number:
206 High Street

City, town:
Cambridge

State:
Maryland

6. Representation in Existing Historical Surveys

Title:
N/A

Date:

Depositary for survey records:

City, town:

State:
7. Description

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Prepare both a summary paragraph and a general description of the resource and its various elements as it exists today.

SUMMARY DESCRIPTION

The Mess Hall Building, constructed in 1913-1915, was designed to house dayrooms and dining rooms for patients at the Eastern Shore State Hospital. Designed by Parker, Thomas & Rice, the Shavian manorial style building was never used in accordance with its original design. Its open plan was adapted for patient housing from the outset. Unit II, which is the mirror image of Unit I (Survey No. D-712), is a two-story, T-shaped, steel and reinforced concrete building that forms the western wing of the kitchen and mess hall complex. Hyphens connect Unit I and Unit II with the central Kitchen (Survey No. D-714). Unit II rests on a raised basement and is topped by a slate hipped roof punctuated by tall, compound interior chimneys. The exterior stylistic architectural detailing is particularly fine and includes arched bracing, Flemish bond brick, Indiana sandstone trim, a molded watertable, wood pendants below the 2nd story overhang, and green tile decorative panels. While the exterior of the building has been little changed, the interior of the north wing of the 1st floor has been completely altered.

ARCHITECTURAL DESCRIPTION

Unit II is a T-shaped wing that forms the western portion of the symmetrical kitchen and mess hall complex for the Eastern Shore State Hospital. Unit I, on the east, is the mirror image of Unit II. Unit II was designed to house dayrooms and dining halls; a brick hyphen connects Unit II with the kitchen at the center of the complex. The kitchen and mess hall complex was planned as the central service core of the institution and was designed to serve dormitory buildings housing patients. The first dormitories were not constructed for over 20 years and Unit II was pressed into use as housing from the outset.

Unit II is a two-story Shavian manorial style building that rests on a raised basement and is topped by a steeply pitched, Peach Bottom slate roof. The 1st story and basement of the building are executed in Flemish bond brick with randomly glazed headers; the 2nd story is half-timbered stucco. Carefully composed fenestration consists of paired windows with multiple pane sash. Smaller, single windows set off the ends of the three wings. The graduated sash has 12/15 lights on the 1st story with 9/15 lights above. Basement and 1st floor window openings have Indiana sandstone sills. Primary entrances to the building are recessed within round arches at the ends of the north, south, and west wings. Centered half-timbered gables with barge boards emphasize the location of the entrances. A secondary entrance to the basement is situated on the east facade south of the hyphen. Eight tall, interior chimneys dominate the roofline of the building, constituting one of the building's most distinctive features. Compound chimney stacks with diagonally set brick rise from a simple square base. The stacks are capped with elaborate corbelled chimney caps. Small triangular ventilation louvres punctuate the roof.

Unit II, like other Parker, Thomas & Rice buildings, exhibits particularly fine detailing. The projecting watertable is topped by a shoulder course of molded brick below a soldier course that serves as the base of the 1st story. Jack arches set off paired, three-light basement windows. Entrances
housed within simple brick surrounds are centered below half-timbered gabled dormers at the ends of each wing. The bilateral symmetry of the wing ends, created by the gable, the diagonal timbering, and paired windows above green tiled panels, highlights these simple entries. The tile in the panels is set in a diamond motif that appears in other buildings that Parker, Thomas & Rice designed at the state hospitals. The stuccoed, half-timbered 2nd floor rises above a molded wood stringcourse and pendants. The restrained half-timbering is vertical with the exception of arched timbering at the corners and diagonal timbering within the gables above the entries. Historic photographs show window boxes incorporating the center diamond motif below each of the paired windows.

Architectural drawings, historic photographs, and early 20th century descriptions detail the original appearance of Unit II's interior. The original interior configuration of the building consisted of open plan space on the 1st floor and open plan space on the north and south wings of the 2nd floor. Each of the 1st floor wings was designed to serve as a dining room for the three proposed female cottages. The north and south wings on the 2nd floor were designed as dayrooms. A metal and timber truss supported the exposed ceiling in the dayrooms. The west wing on the 2nd floor, which was designed to house attendants, consisted of small rooms and closets disposed to either side of a central corridor. On the 1st floor, the crossing area was designed as a serving area for the three dining rooms. With the exception of the staff quarters in the west wing of the 2nd floor, walls were constructed of "brownish-gray" salt glazed brick. In keeping with standard practice for the design of mental institutions, openings and corners were detailed with rounded brick to eliminate sharp corners. Ceilings were plaster and interior partitions were constructed of plastered gypsum block. The 1st floor had Welsh tile floors, the 2nd had edge-grain Georgia pine. Bathrooms and stairs had terrazzo tile floors. Windows and doors were constructed of Southern pine.¹

Unit II is more intact than Unit I. By 1921 a porch, now gone, was added to the north wing.² Historic photographs show that this porch was similar to the porch remaining on the east wing of Unit I. Historic photographs and physical evidence reveal the original appearance of the primary entrances, which consisted of two-panel double doors with four light glazing. These doors were set below an arched, multiple pane transom that extended beyond the doors to fill the round arch. All of the original double doors at the 1st floor level have been removed and the openings infilled with brick and single doors. The original brick stoops and steps at the north and south end of the building have also been removed. The stoop on the north has been replaced by a handicapped ramp; the stoop on the south, by a loading platform. The date the window boxes were removed is unknown; historic photographs show that they remained in 1921.

The original appearance of the interior of the 1st floor of the north wing has been completely altered by the insertion of new office space. The remainder of the interior of the building retains many elements of its earlier architectural character. Salt-glazed brick, exposed reinforced concrete beams on the 1st floor, and roof trusses on the 2nd floor are still visible. Security screens remain on the 2nd floor at the north end of the north wing. The corridor of the west wing on the 2nd floor retains some of its original 5-panel doors and transoms as well as door surrounds.

²Eastern Shore State Hospital Biennial Report 1919-1921, p. 29.
8. Significance

Survey No. D-713

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Check: Applicable Criteria: _XA _B _X C _D

and/or

Applicable Exception: _A _B _C _D _E _F _G

Level of Significance: _national _state _local

Prepare both a summary paragraph of significance and a general statement of history and support.

STATEMENT OF SIGNIFICANCE

The Baltimore architectural firm of Parker, Thomas & Rice designed Unit II, constructed in 1913-1915, as the western wing of the Mess Hall Building of the Eastern Shore State Hospital. The building became a patient dormitory and never fully served its purpose-built function as space for dining rooms, dayrooms, and staff housing. The Shavian manorial building is an excellent example of its style and a superb example of the work of Parker, Thomas & Rice, an important early 20th century architectural firm. One of the earliest buildings constructed at the hospital, the Mess Hall Building established the architectural image of the Eastern Shore State Hospital and contributes to the historic significance of its historic core.

HISTORY

In January 1912 the Maryland General Assembly passed Chapter 187 creating the Eastern Shore State Hospital. The enabling legislation included a bond issue that provided $200,000 for land acquisition and construction. The Power Plant and Laundry (Survey No. D-716) and the Mess Hall Building — comprised of Unit I (Survey No. D-712), Unit II, and the Kitchen (Survey No. D-714) — were the first buildings constructed at the Eastern Shore State Hospital. The Mess Hall Building is an excellent example of Parker, Thomas & Rice’s work. It offers a textbook illustration of their ability to combine informal, picturesque architectural styles with the rigorous methodology of Beaux Arts architectural design. The functional shortcomings of the building, however, illustrate some of the drawbacks of Beaux Arts approach.

The Board of Managers of the Eastern Shore State Hospital chose Parker, Thomas & Rice as their architects after an American Institute of Architects (AIA) sanctioned competition. The choice of Parker, Thomas & Rice, who excelled in the Beaux Arts method, was almost foreordained by the architectural professionals involved in the process. The Board selected Washington architect J. Rush Marshall (1851-1927), a Fellow of the AIA, as their consulting architect for the competition. Dr. Hugh Young, the nationally renowned urologist on the faculty at Johns Hopkins who was president of the Lunacy Commission and noted Philadelphia architects Milton B. Medary (1874-1929) and Edward...
A. Crane (1867–1935) judged the entries, which were submitted anonymously by six Maryland firms invited to compete.¹

All of the architects involved in running the competition, like the principals in Parker, Thomas & Rice, were active in the American Institute of Architects; all had experience with large, complex buildings. Most importantly, all were proponents of symmetrical, axial Beaux Arts buildings. Marshall, a partner in Hornblower & Marshall, was educated at Rutgers University and worked for 12 years in the office of the Supervising Architect of the Treasury, the office responsible for the design and construction of all federal buildings. Hornblower & Marshall’s best-known building is the Smithsonian’s Natural History Museum; they also designed the U.S. Customs House in Baltimore.² Milton B. Medary, a fellow of the AIA and partner in Zantziger, Borie & Medary, was a graduate of the Beaux Arts program at the University of Pennsylvania and an eminent architectural designer at the time of his selection to the jury. He later became president of the AIA, a member of the U.S. Commission on Fine Arts, and architect of the Justice Department in the Federal Triangle.³ Edward A. Crane, also a fellow of the AIA, was a partner in Rankin, Kellogg & Crane. He was educated at the Massachusetts Institute of Technology (MIT), which introduced Beaux Arts architectural education to the United States. Within four years, Crane rose from draftsman to the head of the Engineering Department in the Office of the Supervising Architect of the Treasury, resigning in 1903 to begin architectural practice in Philadelphia. His firm designed a number of federal buildings including the Agriculture Building in Washington, D.C.⁴

The competition encompassed the design of an institution housing over 350 patients in six dormitories. Given the size of the original appropriation, the Board determined to construct the service first and request appropriations for the dormitories at a later time.⁵ Unit II was the western wing of the Mess Hall Building, which consisted of a central Kitchen connected by hyphens to two T-shaped wings. The 1913–15 Block Plan of the hospital shows the three dormitories on the eastern half of the hospital campus as the “Female Group” indicating that the dining rooms and dayrooms in Unit II would have served the female cottages.

Each wing housed three 1st floor dining rooms.⁶ A central serving area was situated at the intersection of the three dining rooms on axis with the hyphens that connected to the Kitchen. Presumably each of the three cottages in the Female Group would have had its own dining room in the Mess Hall. The

³Withey, pp. 415-416. While Marshall and Medary were probably acquainted through the AIA, both Marshall and Medary worked on the Cosmos Club in Washington, of which Marshall was a member.
⁴Withey, p.147. Marshall’s tenure at the Office of the Supervising Architect predated Crane’s.
⁵Eastern Shore State Hospital Biennial Report 1913-15, pp. 20-22. Because the General Assembly continued to appropriate construction funds to implement their 1908 legislation mandating state care for the mentally ill in Maryland, it was not unreasonable for the Board of Managers to expect that additional funds would be forthcoming.
⁶A plan of one of the proposed patient cottages suggests that each dining room would have served approximately 60 people.
2nd floor was designed as housing for nurses and other hospital staff with "linen rooms, clothes rooms, trunk rooms, closets and toilets." Two large day rooms for patients were also located on the 2nd floor of each wing. Storerooms, sewing rooms, and workrooms were located in the basement, which was connected to the Laundry, Power House, and Kitchen by reinforced concrete tunnels. The building was heated by a hot water expansion system utilizing exhaust steam from the Power Plant. While the Mess Hall Building was equipped with "a thorough system of modern plumbing with the latest sanitary appliances," sewage was emptied into the Choptank.

The design of Unit II as a dining room/dayroom facility is unusual and differs in significant ways from similar facilities in contemporary institutions. Virtually all the period literature on the design of mental institutions held that the chronic insane could be fed in a single dining room and could mingle at meal times without ill effect. The use of a single dining room provided for economy of construction and operating costs. Alternatively, individual small cottages could have their own dining rooms, served from a central kitchen, to facilitate a more homelike atmosphere. The other purpose-built functional use in Unit II, dayrooms, were typically part of patient dormitories. Their location in a separate building with no walkways or passages shown between the buildings (a common feature in the design of mental institution campuses) is anomalous. The unusual design suggests that the Board planned at the outset for the Mess Hall Building to be multi-purpose space that could be adapted to dormitory use until funding for cottages was received.

E.D. Springer & Company was awarded the construction contract for the hospital in August 1913. The construction of the hospital began with its groundbreaking on September 23, 1913. E.D. Springer & Company was the contractor for the project, which was completed on March 29, 1915. The contractor found that it was cheaper to ship supplies by water than by rail and constructed a 1400 ft. pier with double tracks. After construction was complete, the contractor sold the pier to the hospital, providing a facility for hauling coal and other materials essential to hospital operation.

Unit II is a superb example of the Beaux Arts design skills of Parker, Thomas & Rice. It is an excellent example of their ability to execute Anglo-American styles in accordance with Beaux Arts design principles, a characteristic of the firm's work. The methods of the Ecole des Beaux Arts in Paris came to dominate academic architectural training during the late 19th and early 20th century. The systematic teaching methods of the Ecole emphasized universal design principles based on clarity of plan. This academic system stressed the importance of designing a building's elevations from its floor plan. The layout of the building was driven by axial symmetry of the circulation system, from which the plan was developed. Locations of entrances, fenestration patterns, and ornament were all subordinate to the overall design of the building and reinforced the hierarchy of the building's elements and its bilateral symmetry. Architectural style was not applied until after the plan was refined. The Ecole insisted on a rigorous, consistent, and coherent application of architectural style and stylistic features. Enormous attention was devoted to choosing an architectural style appropriate to the setting.

7Eastern Shore State Hospital, Biennial Report, 1913-1915, p. 23.
9Eastern Shore State Hospital, Biennial Report, 1913-1915, p. 23.
10Eastern Shore State Hospital, Biennial Report, 1913-1915, p. 23.
and function of the building. MIT, where two Parker, Thomas & Rice partners received their American training, pioneered Beaux Arts architectural training in the United States.

Parker, Thomas & Rice were a nationally renowned firm noted for outstanding design. The architects designed buildings at Springfield prior to winning the competition for the Eastern Shore State Hospital. The partners in Parker, Thomas & Rice included J. Harleston Parker (1873-1930), Douglas H. Thomas, Jr. (1872-1915), and Arthur Wallace Rice (1869-1938). Parker was born in Boston and graduated from Harvard. After completing a four year course of study at the Ecole des Beaux Arts in Paris, Parker returned to Boston and by 1900 formed a partnership with Thomas, opening offices in Boston and Baltimore. Thomas was a Baltimore native who graduated as president of his class from Johns Hopkins and studied architecture at MIT. Thomas then spent two years in Paris furthering his Beaux Arts training. He died at the age of 43 when his Pierce Arrow overturned on a hairpin curve. Rice joined Parker and Thomas in 1907. Born in Boston, Rice trained at MIT and, like his partners, in Paris ateliers. Rice was evidently responsible for many of the firm's commercial buildings. All were Fellows in the AIA; Thomas served as president of the Maryland AIA.

Parker, Thomas & Rice received widespread national recognition during the first two decades of the 20th century. Their buildings are exemplars of Beaux Arts architectural design; the firm is credited with establishing Beaux Arts design in Baltimore with their 1907 Savings Bank of Baltimore. In 1913 Herbert Croly, author of The Promise of American Life and a major figure in U.S. intellectual history, wrote a lengthy article on the firm in The Architectural Record. Croly's absorbing concern was the development of a distinctly modern American identity and culture that moved away from agrarian ideals, a concern that dovetailed with contemporary architectural debates on an appropriate American architectural style. Croly particularly admired the way Parker, Thomas & Rice combined the rigor of Beaux Arts architectural training and design with the "diffident, unassuming and personal" that were hallmarks of the English tradition in American architecture, which Croly approvingly characterized as "American architectural Anglicism." Croly wrote that the firm had a "natural instinct

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12 "Partial List of Buildings designed and executed by Parker, Thomas, & Rice" in Taylor to Broening, 1921.
13 Withey, pp. 454-455 and Dorsey, p. 284.
14 Withey, p. 594 and obituaries. The Witheys conjecture that Col. D.H. Thomas of Baltimore, who died in 1905 and was credited with designing several buildings was Thomas's father. Obituaries contradict their assumption, stating that his father, who survived him, was president of the Merchant Mechanics National Bank.
15 Withey, p. 594 and p. 505.
17 Croly, who became a founding editor of The New Republic in 1914, was a major liberal Progressive Era reformer. The influential Promise of American Life, published in 1909, argued for a new American nationalism that moved away from Jeffersonian individualism and embraced large-scale institutions led by an intellectual elite.
for architectural picturesqueness."18 He perceptively noted that Beaux Arts design lent itself to formal, neoclassical architectural styles drawn from Roman, Italian Renaissance, and French Renaissance models. Parker, Thomas & Rice succeeded in designing Beaux Arts buildings using more picturesque, vernacular-based architectural styles based on British models and early American buildings. This approach had a distinct appeal in an increasingly nativist age.

Parker, Thomas & Rice’s memorable, highly pictorial buildings incorporate powerful architectural imagery regardless of the style the firm used. Their buildings in Baltimore included the Alex. Brown and Sons Building (1900), Baltimore Gas and Electric Company (1916), the Liberty Building, the B&O Railroad Office Building, the Pennsylvania Railroad Office Building, the North German Lloyd Steamship Offices (Hansa House, 1907), the Union Trust Building, and the Maryland Life Building. They designed a number of exquisite small banks in Baltimore, many of which have been demolished. They were responsible for the campus plan and Gilman Hall (1904) at Johns Hopkins University and the Belvedere Hotel (1903). They also designed the Harvard Club in Boston and the main building of the Jamestown Exposition (1907).19

Unit I and Unit II were designed in the Shavian Manorial Style.20 This style, derived from the work of Scottish-born, British architect Richard Norman Shaw (1831-1912), combined Jacobethan elements in a distinctive, domestic architectural style that paved the way for the enormous popularity of the Queen Anne. Shaw’s residential buildings, which were widely published and a major influence on the Shingle Style, featured half-timbered or shingled 2nd stories above 1st stories of Elizabethan brickwork. Carefully composed roofs feature cross gables with barge boards and prominent chimney stacks. The Mess Hall Building appears influenced by the Sussex vernacular employed by Shaw in several of his buildings.

The Mess Hall Building’s combination of Beaux Arts formality with vernacular detailing succeeded admirably in establishing a powerful visual image for the Eastern Shore State Hospital. Its functional drawbacks, however, reveal the problematic aspects of Beaux Arts planning. Some deficiencies can no doubt be attributed to the hybrid nature of the building, but others point to the triumph of image over function. The building’s most distinctive architectural characteristics appear to be visual gestures. In institutional design, dining halls are service spaces that are less important than patient dormitories. In cottage plan mental institutions, separate dining hall buildings eliminated the need to provide kitchens and dining rooms in each ward. Since patients were fed in shifts, a large dining hall could serve several hundred people. While the Mess Hall’s T-shaped configuration provided a way to break up a large space, it prevented the area from being used as a general assembly or entertainment area, a common second use for dining halls in other institutions. Because of additional exterior walls, the T-

19Dorsey & Dils, op. cit., H.D.C. op. cit., and "List of Buildings." The Alex. Brown & Sons Bldg. was one of a handful of buildings that survived the Baltimore Fire of 1904.
20This term, coined by Henry-Russell Hitchcock, is the counterpart of his term "Richardsonian Romanesque" and offers a more precise stylistic description than either Tudor revival or Queen Anne revival does. See Hitchcock, Architecture: Nineteenth and Twentieth Centuries, pp. 206-220.
shaped configuration was also a far more costly way of constructing the open plan space. Access to
dayrooms on the 2nd floor of a building not intended for dormitory was also problematic.

Buildings at mental institutions that date from the late 19th or early 20th century often exhibit a
picturesque roofline with cupolas and decorative chimney stacks. Ventilation was extremely important
to hospital design both for the provision of fresh air and the elimination of odors. While the tall
chimneys are a distinguishing architectural characteristic of the Mess Hall Building, these chimneys
appear to have served no function. They are placed at stair towers and over trunkrooms in locations
not conducive to ventilation.

Perhaps the most serious functional shortcoming of the building is the absence of sun porches or screen
porches, particularly given the hospital’s location on the Choptank and the advantages of its sea
breezes.21 While porches or verandahs are not typically a part of a prototype dining hall, by the 20th
century they were considered an essential element in the design of residential buildings for the mentally
ill. Porches were even added to existing buildings that had been designed without them. Large
screened porches essentially became fresh air dayrooms. Bedridden patients could be wheeled out on
the porch and all could partake in healthful, outdoor air. The rendering for the Completed Hospital
Group shows no prominent porches on any of the cottages, which would have made porches associated
with the dayrooms that much more important. The absence of porches proved to be one of the most
serious problems of the Mess Hall Building. Without protection, doors began to warp and rot in the
salt air. Finally in 1921, the General Assembly gave the hospital a $3000 appropriation to construct
three porches on the Mess Hall Building. Only the porch on the east end of Unit I survives.

By September 1927, 286 patients were jammed into the Mess Hall Building. One of the 1st floor
wings was used for administrative offices; attendants lived on the east and west wing of the 2nd floor.
The basement, lit primarily by electric light, was used as a sewing room. In 1926 construction began
on the Administration Building, which would house offices and staff quarters. By February 1928 staff
had moved into their new residence and the administration moved into their new offices.22 The Mess
Hall Building continued to be the hospital’s only patient housing until Carey (D-718) and Nice (D-719)
were constructed in the late 1930s, some 20 years after the hospital opened.

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21 Porches would have been inappropriate for the Shavian manorial style.
22 Eastern Shore Hospital Diary, n.p.
10. Geographical Data

Acreage of nominated property: Less than one acre

Quadrangle name: Cambridge, Maryland

Quadrangle scale: 1:24000

UTM References: do NOT complete UTM references

Verbal boundary description and justification:

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11. Form Prepared By

name/title: Betty Bird

organization: Betty Bird & Associates

date: August 15, 1997

telephone: 202-588-9033

The Maryland Historic Sites Inventory was officially created by an Act of the Maryland Legislature to be found in the Annotated Code of Maryland, Article 41, Section 181 KA, 1974 supplement.

The survey and inventory are being prepared for information and record purposes only and do not constitute any infringement of individual property rights.

return to: Maryland Historical Trust
Shaw House
21 State Circle
Annapolis, Maryland 21401
(301) 269-2438
BIBLIOGRAPHY


Board of Managers, Eastern Shore State Hospital of Maryland. Minutes, 1922-1939 (Eastern Shore Hospital Center Archives)


"Eastern Shore Hospital Diary, 29 November 1922 thru 15 April 1937." (Eastern Shore Hospital Center Archives)


Obituaries for D.H. Thomas, Jr. (Collection of Peter Kurtze, Maryland Historical Trust)

"Partial List of Buildings designed and executed by Parker, Thomas & Rice," attached to R. E. Taylor to William F. Broening, February 18, 1921. (Peale Museum Vertical Files, courtesy of Peter Kurtze, Maryland Historical Trust)


Photographs. (Eastern Shore Hospital Center Archives)


VERBAL BOUNDARY DESCRIPTION AND JUSTIFICATION

The boundary encompasses the peninsula that includes the historic buildings and their setting. The project area consists of the peninsula bounded by the Choptank River on the north and Shoal Creek on the west and south. The eastern boundary extends along Shoal Creek to a point approximately 300 ft. upstream from the Power House and Laundry. The boundary then proceeds in an arc roughly ENE to the intersection of West Shore Drive (Maryland Route 479) and Point Drive. The boundary then proceeds roughly WNW to the Choptank River in an arc on the north and east side of West Shore Drive. The intersection of the eastern boundary of the project area and the Choptank River is directly north of the east facade of the Dr. Charles J. Carey Building (Survey No. D-718).
LIST OF ATTACHMENTS

"Block Plan of the Eastern Shore State Hospital" (Source: Eastern Shore State Hospital, Biennial Report 1913-15, p. 15)

"Eastern Shore State Hospital Showing Completed Group as Contemplated" (Source: Eastern Shore State Hospital Biennial Report, 1913-15, frontispiece)

"Second Floor Plan Showing Second Floor Plan Now in Use" (Source: Eastern Shore State Hospital, Biennial Report, 1913-15)

Dining room, ca. 1915 (Source: Eastern Shore Hospital Center Archives)

Second floor ward, ca. 1915 (Source: Eastern Shore Hospital Center Archives)

View from northwest, ca. 1915 (Source: Eastern Shore Hospital Center Archives)

View of north facade, ca. 1921 (Source: Eastern Shore Hospital Center Archives)

"State Hospital from Waterfront, Cambridge, Maryland" (Source: Postcard, Eastern Shore Hospital Center Archives)

View from northeast, ca. 1921 (Source: Eastern Shore Hospital Center Archives)
Block Plan of the Eastern Shore State Hospital.
SECOND FLOOR PLAN
SHOWING SECOND FLOOR PLAN NOW IN USE.
STATE HOSPITAL FROM WATER FRONT, CAMBRIDGE, MD.
Locational Map
Mess Hall Building (Unit II)
Eastern Shore State Hospital
Survey No. D-713
Cambridge, Dorchester Co., Maryland

Source: USGS Quad, Cambridge, MD
D-713

MESS HALL BLDG (UNIT II) ES STATE HOSPITAL
CAMBRIDGE, MD
PHOTO: BERTY BIRD
JULY 1997
MD SHPO
VIEW FROM SWE
1 OF 10
D-713

MISS HALL BELLS (UNIT II) ES STATE HOSPITAL
CAMBRIDGE, MD

PHOTO: BETTY BIRD
JULY 1997

MD SHPO

VIEW FROM W SHOWING W & S WINGS

2 OF 10
D - 713
MESS HALL BLDG (UNIT II) LS STATE HOSPITAL
CAMBRIDGE, MD
PHOTO: BETTY BIRD
JULY 1997
MD SHPO
VIEW FROM SE
3 OF 10
D-713
MESS HALL BLDG (UNIT II) ES STATE HOSPITAL
CAMBRIDGE, MD
PHOTO: BETTY BIRD
JULY 1997
MD SHPO
EAST & NORTH FACADES
41 OF 10
MISS HALL BLDG (UNII II) E S STATE HOSPITAL
CAMBRIDGE, MD
PHOTO: BEING BIRD
JULY 1997
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HALF TIMBERING, TILE WORK & GABLE, S FACADE
5 OF 10
MESS HALL BLOCK (UNIT II) ES STATE HOSPITAL
CAMBRIDGE, MD
PHOTO: BETTY BIRD
JULY 1997
MD SHPO
CHIMNEYS
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MESS HALL BLDG (UNIT II) ES STATE HOSPITAL
CAMBRIDGE, MD
PHOTO: BETTY BIRD
JULY 1997
MD SHPO
1ST FLOOR, S WING, VIEW FROM S
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MESS HALL BLDG (UNIT II) ES STATE HOSPITAL
CAMBRIDGE, MD
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W WING, 2ND FLOOR CORRIDOR FROM W
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MESS HALL BLDG (UNIT II) ES STATE HOSPITAL
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2ND FLOOR OPEN DORMITORY
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