

Former Middlesex Annex (North and South Wings), 44 Cleveland Street: A request for a Certificate of Immunity from Listing

Contents

Introduction	1
<i>Purpose</i>	2
<i>Organisation</i>	2
<i>Authorship</i>	2
<i>Sources</i>	3
Background	3
The site	5
<i>The development of the site</i>	5
<i>The peripheral buildings on the site</i>	7
Policy and guidance in respect of listing	9
<i>CLG Circular 01.2007/DCMS Circular PP992</i>	9
<i>Historic England Selection Guides</i>	10
<i>English Heritage ‘Conservation Principles’</i>	11
Assessment against national criteria	12
<i>Heritage significance</i>	12
<i>Architectural interest</i>	12
<i>Historical interest</i>	13
Performance against listing criteria	14
Conclusion	15
Appendix A: The English Heritage Advice report concerning the 2011 Certificate of Immunity from Listing	17
Appendix B: List description for the Former Strand Union Workhouse (Middlesex Hospital Annex), 44, Cleveland Street	18
Appendix C: Photographs.....	21

Introduction

- 1 KMHeritage has prepared this report on behalf of UCLH NHS Foundation Trust, and it relates to buildings and structures at the site of the former Middlesex Hospital Annex. The Trusts seeks a Certificate of Immunity from Listing in respect of these buildings.

- 2 The subject matter of this request for a Certificate of Immunity from Listing is specifically the buildings and structures shaded grey in Figure 2, i.e. the full extent of the current Certificate of Immunity from Listing that applies to the site. The term 'buildings' as it is used in the report refers to each and all of the buildings and structures covered by the current Certificate of Immunity from Listing.
- 3 English Heritage changed its name to Historic England on April 1, 2015.

Purpose

- 4 We have assessed the heritage significance of the site using the definitions provided by National Planning Policy Framework and guidance contained in English Heritage's 'Conservation Principles', as well as the relevant English Heritage Selection Guide. We have examined the proposal in relation to the national criteria for listing contained in CLG Circular 01.2007/DCMS Circular PP992 'Revisions to Principles of Selection for Listing Buildings'.
- 5 The purpose of the report is to explain why the buildings should not be added to the list of buildings of special architectural and historic interest. We believe that they fail to meet the statutory criteria for inclusion in the list, in that they lack sufficient special architectural and historic interest.

Organisation

- 6 This introduction is followed by a brief account of the background to the site in designation terms, and a brief outline of its history. This is followed by an account of the criteria used for the selection of buildings for listing, as a precursor to a detailed assessment of the buildings against those criteria. There is a conclusion and a number of appendices.

Authorship

- 7 The lead author and editor of this report is Kevin Murphy B.Arch MUBC RIBA IHBC. He was an Inspector of Historic Buildings in the London Region of English Heritage and dealt with a range of major projects involving listed buildings and conservation areas in London. Prior to this, he had been a conservation officer with the London Borough of Southwark, and was Head of Conservation and Design at Hackney Council between 1997 and 1999. He trained and worked as an architect, and has a specialist qualification in urban and building conservation. Kevin Murphy was included for a number of years on the Heritage Lottery Fund's Directory of Expert Advisers.
- 8 Historical and background research for this report was undertaken by Dr Ann Robey FSA, a conservation and heritage professional with over twenty years experience.

She has worked for leading national bodies as well as smaller local organizations and charities. She is a researcher and writer specialising in architectural, social and economic history, with a publication record that includes books, articles, exhibitions and collaborative research.

Sources

- 9 This report takes account of the work undertaken by English Heritage as part of their assessment of the building for listing¹, and refers to an assessment of the building by Donald Insall Associates in 2006².

Background

- 10 The overall former Middlesex Hospital Annexe site is located in the Charlotte Street Conservation Area, which is contiguous with the East Marylebone Conservation Area in Westminster directly opposite. It was designated in March 1974, and extended in 1981, 1985 and 1999. The boundary of the Conservation Area runs along the centre of Cleveland Street and returns along the northern boundary of the former Middlesex Hospital Annexe site. It then runs south along the eastern boundary of the site, before returning eastwards along the boundary with properties to the south, across Charlotte Street and along the southern side of Chitty Street.
- 11 The former Middlesex Hospital Annexe was listed Grade II on 14 March 2011. This followed a previous attempt to list the building in 2008. No map showing the extent of listing accompanies the list description as it is now available from the National Heritage List for England (the map merely shows a small triangle). However, when listing occurred, a map was issued by English Heritage alongside the list description, and is illustrated in Figure 1. The list description is contained in Appendix B.

¹ English Heritage Adviser's Report and draft list description, 31 October 2007 to 29 February 2008.

² Middlesex Hospital, the Cleveland Street Annex: An Architectural Appraisal, Donald Insall Associates Ltd., August 2006

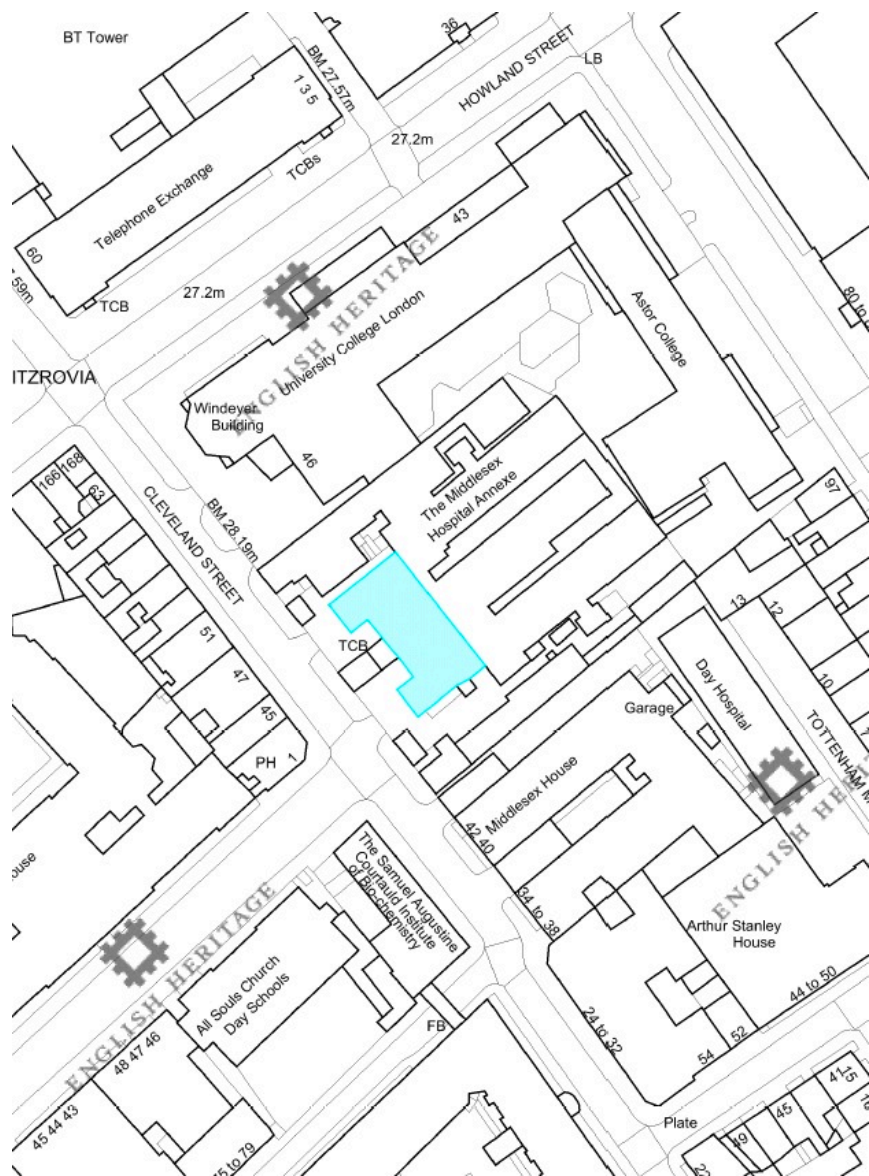


Figure 1: Map issued by English Heritage at time of listing (dated 14 March 2011, © English Heritage)

- 12 A Certificate of Immunity from Listing (No 1401787) was issued by the Secretary of State for Culture, Media and Sport on the 13 June 2011, for the 'Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block)'. It will expire on 12 June 2016. The extent of the Certificate of Immunity from Listing is shown in Figure 2. The text of the English Heritage Advice report regarding the Certificate of Immunity from Listing is provided in Appendix A.

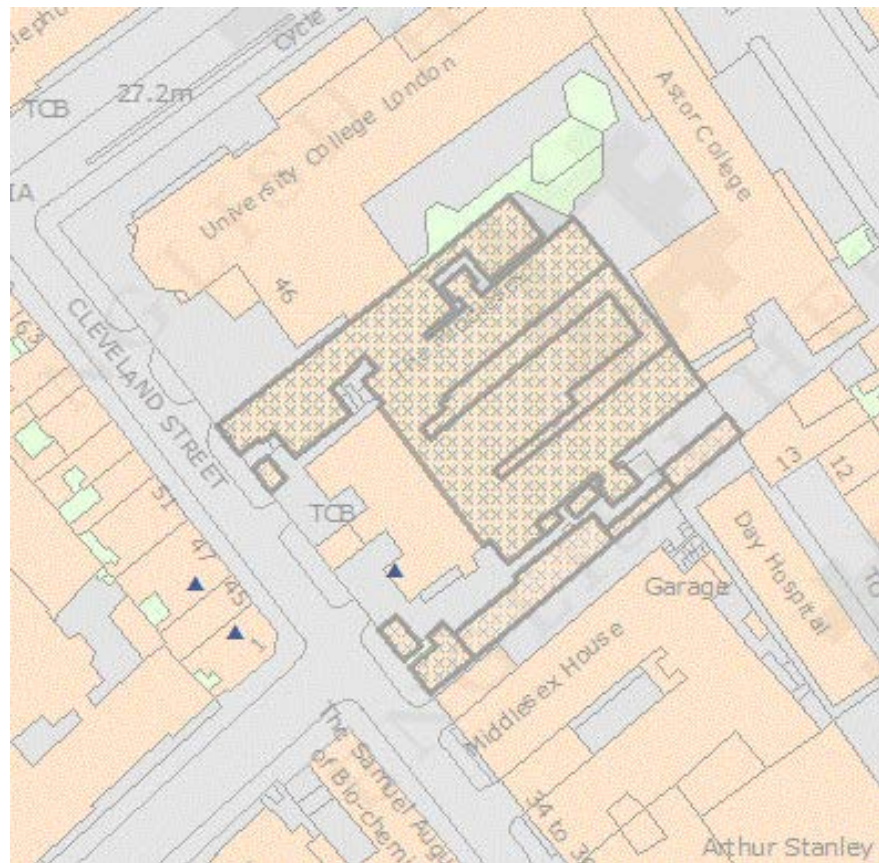


Figure 2: The extent of the Certificate of Immunity from Listing issued in respect of the 'Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block)' on 13 June 2011 (Copyright © English Heritage)

The site³

The development of the site

- 13 The Covent Garden Workhouse was built in Cleveland Street in 1778 by the Parish of St. Paul, Covent Garden, replacing a building in Denmark Court (now Exeter St). The site, a paupers' burial ground, was acquired on a lease from the Bedford Estate. The architect may have been Edward Palmer, surveyor, who was known to have prepared earlier plans for a small workhouse on the site which were superseded. The building was finished in or before 1778, by which time the parish charity school for boys and girls was established in it.
- 14 The site subsequently developed by means of gradual addition of buildings over time. A new infectious ward and infirmary were added in 1802 and 1819 to the design of Thomas Hardwick, but it is not clear where these were located. In 1836 the building became the workhouse of the Strand Poor Law Union, formed on 25th

³ Historical information in this section is drawn from *Middlesex Hospital: the Cleveland Street Annex*, Donald Inshall Associates, 2006

of March 1835, comprising the parishes of St Mary-le-Strand; Precinct of the Savoy; St Paul, Covent Garden; St Clement Danes, and the Liberty of the Rolls. Later additions to the Strand Union where the parish of St Anne, Soho (1837) and St Martin-in-the-Fields (1868).

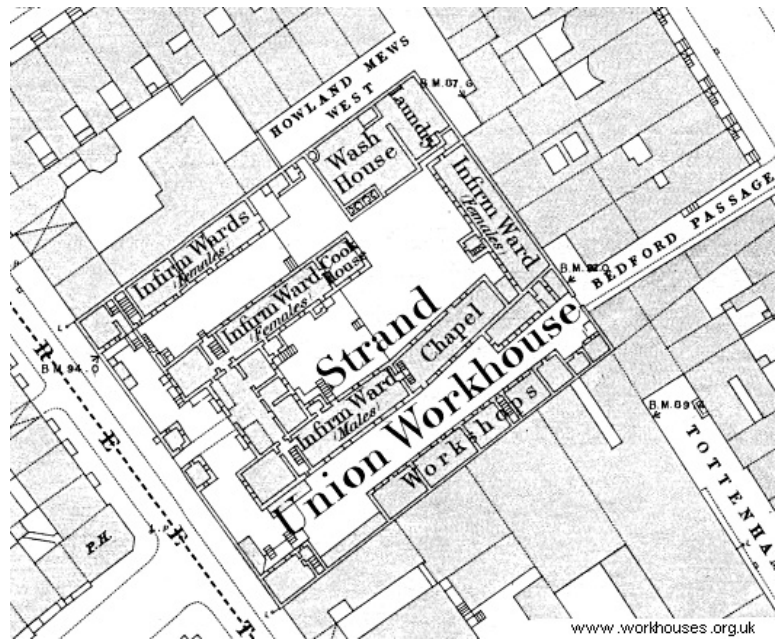


Fig 1: from the 1870 OS map

- 15 The Strand Union Workhouse moved to a large new workhouse at Edmonton in 1868-1870. The Cleveland Street site then became an infirmary for the Central London Sick Asylums District. The English Heritage Advice report accompanying the current Certificate of Immunity from Listing says: 'The infirmary, as shown on the 1895 OS map, comprised the C18 workhouse, now the entrance block, with two long pavilion wards attached to the rear: the female ward to the north and male ward to the south, plus a shorter central kitchen block. To the north and south, adjacent to the site boundary, were further blocks which contained nurses' and doctors' accommodation'.

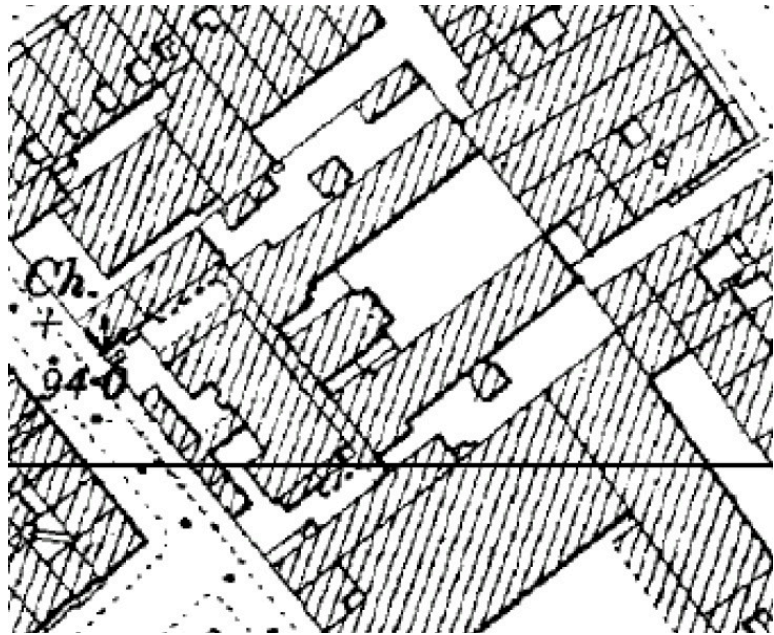


Fig 2: From the 1896 OS map, showing the replacement of the rear parts of the 18th century workhouse building with two new wings.

- 16 Middlesex Hospital, which had been established in two former houses on Windmill Street in 1745, moved to its site on the west side of Cleveland Street (facing south onto Mortimer Street) by 1760 and a concert room was built in Tottenham Street in 1772. The 'annexe' site was acquired by the Middlesex Hospital in 1924, in advance of the rebuilding of the main hospital in Mortimer Street in 1925 to 1935, for use as an outpatients department.
- 17 In World War II the hospital suffered bomb damage twice. The LCC bomb damage maps record this as 'general blast damage-not structural' to the 18th-century frontage and the south (late 19th century) hospital wing, but shows the north (late 19th century) wing as 'seriously damaged'. This bomb fell on 17 April 1941 and damaged the top floor of the North Wing.

The peripheral buildings on the site

- 18 The buildings in question are:
- Two long three-storey ward ranges are attached to the north and south of the rear of the Grade II listed 18th century former main workhouse building;
 - The single-storey former kitchen, now subsumed into later infill of the site;
 - The three-storey detached blocks to the north and south of the site boundary (referred to as 'wings' below).

19 Further information about the buildings is contained in the English Heritage Advice report contained in Appendix A. The report and the map accompanying the Certificate issue in 2011 make it clear that the Certificate relates to all buildings and structures on the site except the listed building.

20 The English Heritage Advice report says:

All are built in brown stock brick with red brick dressings; the ward blocks with red-brick bands between storeys. Roofs are slate, with the exception of the north ward which is corrugated asbestos. The wards follow a common variant of the pavilion plan, with a central projecting sanitation tower, and a broader cross wing, containing a stair, at the abutment with the frontage building. A lateral single-storey glazed corridor runs along the rear wall of the C18 building, connected to the rear wards. Windows are a combination of C19 multi-pane sashes, and C20 steel casements. The interiors are plainly finished and have been subdivided to form smaller consulting rooms.

21 It continues:

The ranges to the north and south have C19 sash windows. The ground floor of the south range has a C20 bay window. The northern building has a stair with turned balusters and cast-iron newel posts; that in the south has stick balusters. Some joinery such as door and window architraves and skirtings survive, and a few panelled doors, but the interiors are generally plain and have undergone numerous C20 alterations.

Areas in between the ward blocks and the north and south ranges have been infilled with various temporary structures. The forecourt is enclosed by stock brick walls with curved upswept parapets, square piers and cast-iron railing with columns bearing the Middlesex Hospital monogram.

22 The Insall report points out, using mapping evidence, that ‘by the time of the 1894 Ordnance Survey map... additional new buildings, sadly unlabelled, had also replaced the earlier blocks located against the boundaries’.

23 Neither the north nor the south ‘wing’ (i.e. the detached blocks to the north and south of the site boundary) is a single building, nor are the two wings identical in design. Those parts nearest Cleveland Street may be of a similar date, and have the same ‘L’-shaped format: two bays facing into the site, a blank gable to Cleveland Street, and a projecting entrance bay forming the shorter part of the ‘L’. However, the fenestration of each is different: window sizes vary, and the southern wing lacks the red brick voussoirs of the north wing’s window openings. The buildings share a simple masonry aesthetic, with shallow pitched roofs (except for some flat roofing to the South Wing).

- 24 Behind the first bay to the east of the projecting entrance bay, the two wings differ. The north wing continues at a slightly lower height than front 'L'-shaped section for five bays, with four bays at the upper two floors and five bays below, followed by a single bay that is a storey lower. At some point between the wars a large lower ground floor extension was added between the north wing and the main, now listed, building.
- 25 The south wing also continues at a slightly lower height than front 'L'-shaped section, but for two bays only. It then steps down to the three storeys at different floor levels from the front part facing Cleveland Street, and with red brick window arches. This section is 3/4 bays wide (with an irregular distribution of windows over the three floors). The building then steps out for a further 3/4 bays (again, with an irregular distribution of windows over the three floors), before stepping down to two storeys. The stepping out in plan appears between 1916 and the 1950s.
- 26 Both wings appear to have been developed incrementally, have been altered externally, and internally there is very little that is clearly identifiable from any historic period – the interior of both wings have been almost entirely altered save for the survival of some stairs and doorways, and the plans of both is a function of multiple interventions to revise the accommodation layout connect different parts of the buildings and different floor levels.

Policy and guidance in respect of listing

CLG Circular 01.2007/DCMS Circular PP992

- 27 Section 6 of the former Planning Policy Guidance 15 contained a description of the principles against which buildings might be considered for listing. Section 6 of PPG15 was replaced in 2007 by CLG Circular 01.2007/DCMS Circular PP992 'Revisions to Principles of Selection for Listing Buildings' ('the Circular'). The contents of the Circular are reproduced in 'Principles of Selection for Listing Buildings' (Department of Culture, Media and Sport, 2010).
- 28 Paragraph 6.9 of the Circular explains the statutory criteria – architectural interest and historic interest – used to assess whether a building is of 'special' interest and thus suitable for listing. In discussing architectural interest, it talks of 'importance in its architectural design, decoration or craftsmanship', 'technological innovation or virtuosity' and 'significant plan forms'. In discussing historic interest, it talks of a building illustrating 'important aspects of a nation's social, economic, cultural or military history and/or has close historical associations with nationally important people. There should normally be some quality of interest in the physical fabric of the building itself to justify the statutory protection afforded by listing'.

- 29 Paragraphs 6.12 to 6.16 (as revised) discuss the ‘General Principles’ that apply. Whereas ‘from 1700 to 1840, most buildings are listed’, for buildings built after 1840 selection becomes more important because of the greater number of buildings erected.
- 30 Aesthetic considerations are ‘key’, but not necessarily a deciding factor in assessing special interest. Where a building qualifies for listing primarily on the strength of its special architectural interest, the fact that there are other buildings of similar quality elsewhere is not likely to be a major consideration. Paragraph 6.15 emphasises the importance of national interest in statutorily listed buildings. The paragraph makes it clear that the state of repair of a building does not prevent it from being listed.

Historic England Selection Guides

- 31 Paragraph 6.8 of the Circular refers to English Heritage Selection Guides. They ‘provide detailed technical information about each building type, and are linked to the general principles contained in this Circular. They demonstrate what features are considered significant and likely to make a building of special architectural or historic interest when assessing buildings of a particular type from different periods, regions, or styles... The general principles [architectural and historic interest] take precedence over the Selection Guides, which are published as supplementary information’.
- 32 The Selection Guide relevant to the former Middlesex Hospital Annexes is the ‘Health and Welfare Buildings Selection Guide’.
- 33 In respect of ‘specific considerations when considering health and welfare for designation’, the Selection Guide says:

Many hospitals, particularly from the 1830s onwards, were built to standard design principles. Credit will therefore be given to particularly good representative survivals of certain types as well to examples that display particular innovation.

Alteration is inevitable in such intensively-used buildings: the survival of the essential principal elements will be a key determinant. Sometimes, isolated survivals, such as chapels, will warrant designation even when the rest of the complex has been substantially altered. Care will be needed to define just where the special interest lies: it can be unevenly distributed across a hospital site.

- 34 The Selection Guide mentions a series of ‘over-arching issues for assessing health and welfare buildings’, and says the following:

Pre-1840 general hospitals, pre-1868 hospitals with pavilion plans, and workhouses prior to 1845, will be listable unless heavily altered.

Greater selection is required for later examples because of the vast increase in numbers. Architectural interest, planning, and intactness (particularly external) will be crucial considerations. Specialist hospitals developed later and may be of special interest where they deviated from normal hospital plans; relatively early dates within the overall chronology of these types will strengthen the case.

- 35 The Selection Guide makes clear that the typology of the pavilion plan was 18th century in origin and the adaptation of the former Strand Union workhouse with pavilion wings in 1880 is a very late instance of something that was long established in hospital planning. The Selection Guide says:

After 1868 the only general hospitals likely to be listable are those with novel plans (such as the radial University College Hospital, London (1897-1906, Alfred Waterhouse; listed Grade II), features such as circular wards (which enjoyed a brief vogue during the 1880s, as at New End Hospital, Hampstead, London; listed Grade II) or those which have exceptionally fine architectural detailing, such as Brumwell Thomas's West of England Eye Infirmary of 1898- 1901 in Exeter (listed Grade II).*

- 36 Finally, the Selection Guide says:

Corridor-plan (typically of 1840-70) and pavilion-plan (about 1870-1914) workhouses need to meet more rigorous criteria, especially regarding their architectural quality, the degree of intactness, and group value with related structures.

- 37 No 'Introduction to Heritage Assets' exists for this building type.

English Heritage 'Conservation Principles'

- 38 Separate from Selection Guides, and not purporting to form part of current guidance regarding the selection of buildings for listing, is English Heritage's 'Conservation Principles'⁴. The 'Conservation Principles' nonetheless are intended by English Heritage as a central means of identifying significance in a heritage asset, and Paragraphs 28 and 29 make clear that it is intended that 'Conservation Principles' has a role in the kind of assessment undertaken when potential heritage assets are considered for designation. Paragraph 29 says that:

In the proposed new national system of cultural heritage protection, 'reasons for designation' will set out why each 'historic asset' is above the threshold for designation for its 'architectural, historic or archaeological interest'. Grounds for designation will necessarily be confined to specific values under these headings,

⁴ 'Conservation Principles, Policies and Guidance for the sustainable management of the historic environment' (English Heritage, April 2008)

directly related to published selection criteria. The statutory basis of designation will, however, be sufficiently broad to embrace the range of values which the Principles identify as desirable to take into account in the management of significant places.

- 39 'Conservation Principles' describes a number of 'heritage values' that may be present in a 'significant place'. These are evidential, historical, aesthetic and communal value. While the statutory criteria as described and explained in CLG Circular 01.2007/DCMS Circular PP992 remain the measure against which listability should be made, it would seem appropriate to use the measure of heritage significance provided by 'Conservation Principles' to assist in assessment.

Assessment against national criteria

- 40 The purpose of this section is to assess the buildings against the criteria set out in the previous section, and to examine whether they possess sufficient special interest to satisfy the statutory requirement for listing. CLG Circular 01.2007/DCMS Circular PP992 points out at Paragraph 6.5 that 'many buildings are interesting architecturally or historically, but, in order to be listed, a building or structure must have "special" interest'.

Heritage significance

- 41 'Significance' is defined in the National Planning Policy Framework as 'the value of a heritage asset to this and future generations because of its heritage interest. That interest may be archaeological, architectural, artistic or historic'. The English Heritage 'Planning for the Historic Environment Practice Guide' puts it slightly differently – as 'the sum of its architectural, historic, artistic or archaeological interest'.

Architectural interest

- 42 The peripheral buildings on the site very clearly and self-evidently lack architectural merit. They are unremarkable late Victorian buildings, even if one is considering simply the approximately symmetrical front wings, let alone the more standard rear parts of the site. They do not represent notable examples of pavilion planning in late 19th century hospital sites.
- 43 There is nothing about either of the buildings – apart from perhaps the symmetry of the 'wings' at the front in terms of massing and form – that demonstrates 'importance in its architectural design, decoration or craftsmanship', 'technological innovation or virtuosity' and 'significant plan forms' – these qualities are simply not present in any way in the buildings. They have no significant 'architectural' quality about them in the sense of the term as used when discussing older buildings that might possess some level of interest. The only feature in the wings that possesses

any vaguely designed quality is the broad shape of the pavilion wings - now obscured by later infill and extensive alteration - and a very ordinary style of fenestration for the period. However, the fenestration pattern in both 'wings' lacks any particular order or system, even where floor levels (such as in the north wing) appear to be consistent. The shape and form of the wings is dictated only by the available space on the site for additional accommodation, and not by any notion of architectural massing and composition, either aesthetic or arising from medical-based theories of hospital planning.

- 44 The peripheral buildings on the site are additions to a Victorian hospital, a common occurrence in the late 19th century and successive periods, and such buildings exist in London and in large numbers across the country. They have little to do with the preceding workhouse use of the site, the reason it has any kind of historic interest; the fact that the site evolved into a hospital after the workhouse use left does not mean that the later buildings on the site have any special interest.

Historical interest

- 45 That said, there is a modest degree of local historic interest in the buildings, though considerably less than that of the main former workhouse building that has been acknowledged by statutory listing. However, they are located in a part of London where a number of hospitals developed over time. The principal buildings on these sites, if not listable, may still possess local historic interest. The ancillary or added structures do not necessarily have that interest.
- 46 In any event, the historic interest of the wings is confined to the non-workhouse, later phase of the site, which is of inherently less local interest than the earlier workhouse phase. It is important that these two phases of the site's history are not confused. The significance of the Cleveland Street site – local or otherwise – is not that it was a hospital, but that it has earlier been a workhouse.
- 47 The buildings do not illustrate 'important aspects of a nation's social, economic, cultural or military history and/or has close historical associations with nationally important people'. There is no available information regarding the person or persons responsible for their design, and those people (probably more than one, given the various phases of development of the wings) was, almost certainly not an architect but a builder following a basic construction template or pattern book.
- 48 Finally, whatever local historical interest that is possessed by the wings is already recognised already by their inclusion in the Charlotte Street Conservation Area.

Performance against listing criteria

49 For the reasons given above, it is clear that the buildings in question at the former Middlesex Hospital Annexe lacks the required special interest to meet the two statutory criteria for listing.

50 It is worth noting that the list description for the Grade II former workhouse states, at the start, that:

The building's special interest ends at the line of the rear wall of the C18 workhouse. The later ward blocks attached to the rear, and the separate ranges to the N and S, are not of special interest.

51 Nothing about the buildings that are the subject of this request for a Certificate of Immunity from Listing has changed since the current Certificate of Immunity from Listing was issued in 2011. No new evidence that might confer greater - or indeed any - historic interest on the buildings has emerged in the intervening period. Given our understanding of the site, the extensive research that was undertaken by English Heritage when recommending listing and the earlier detailed work by Donald Insall Associates, we believe that further historical information is extremely unlikely to appear, and, even if further facts were uncovered regarding the buildings, we think it unlikely that such information would create historic interest where it does not presently exist.

52 The site has remained vacant and unused (though protected against crime and the weather) since the listing of the main former workhouse building and the issuing of the current Certificate of Immunity from Listing. The buildings in question are exactly as they were when the Certificate of Immunity from Listing was issued in 2011. Their architectural interest has, obviously, not increased since then. They remain lacking in special architectural interest.

53 The English Heritage Advice report regarding the Certificate of Immunity from Listing assessed the buildings as follows:

English Heritage's Selection Guide for Health and Welfare buildings (2007) advises that pre-1840 general hospitals and pre-1868 hospitals with pavilion plans will be listable unless heavily altered. Greater selection is required for later examples because of the vast increase in numbers. Architectural interest, planning, and intactness will be crucial considerations.

The former Middlesex Hospital Annexe, built around an existing C18 workhouse, has some claim to historic interest as an early adaptation of a London workhouse site for infirmary use following the 1867 Metropolitan Poor Act. In the context of C19 hospital design however, it is not an early example of an infirmary built on the

pavilion principle, nor is it notable for its design. Workhouse infirmary architecture was generally plainer and more utilitarian than that of other institutions, reflecting its Poor Law status, and relatively few are listed. These particular examples are architecturally modest by any standards and the interiors considerably altered, while surviving fittings such as the stairs in the north and south blocks, are standard for their time. The site's principal claim to interest lies in the C18 former workhouse, as recognised in its recent inclusion in the list. The remainder of the buildings fall quite clearly below the standard required for listing.

54 This assessment remains valid in 2016.

Conclusion

- 55 The former Middlesex Hospital Annexe is located in the Charlotte Street Conservation Area. The inclusion of the site within the conservation area inherently acknowledges what architectural and historic interest it has. The listing of the main workhouse building in 2011 and the presence of the whole site in a conservation area has allocated the correct range of heritage significance that the site has. The North and South Wings do not possess any greater local significance than inclusion in a conservation area acknowledges
- 56 In 2013, KMHeritage made representations on behalf of UCLH NHS Foundation Trust regarding the inclusion of the buildings on Camden's Local List. We examined the Council's criteria for local listing in the London Borough of Camden, and showed that the wings very clearly do not meet the criteria set out by the Council for local listing. The buildings were not added to the Local List.
- 57 The Council makes clear that 'if a nomination is within a conservation area and is also identified in the conservation area statement or appraisal as making a positive contribution to a conservation area we will not add it to the local list, as it already has similar protection under Camden's development policy DP25 – Conserving Camden's Heritage.' No part of the former Middlesex Hospital Annexe site is shown in the Charlotte Street Conservation Area conservation area appraisal (adopted July 2008) as making any contribution to the conservation area.
- 58 While circumstances change and new evidence can come to light, those factors do not apply in the case of the buildings surrounding the listed former workhouse at the former Middlesex Hospital Annexe site. Those buildings remain entirely lacking in any level of architectural and historic interest that even approaches special interest, and thus fail, at a basic level, to meet the statutory criteria for listing.

Kevin Murphy B.Arch MUBC RIBA IHBC
Thursday, 28 January 2016

The author of this report is Kevin Murphy B.Arch MUBC RIBA IHBC. He was an Inspector of Historic Buildings in the London Region of English Heritage and dealt with a range of major projects involving listed buildings and conservation areas in London. Prior to this, he had been a conservation officer with the London Borough of Southwark, and was Head of Conservation and Design at Hackney Council between 1997 and 1999. He trained and worked as an architect, and has a specialist qualification in urban and building conservation. Kevin Murphy was included for a number of years on the Heritage Lottery Fund's Directory of Expert Advisers.

Appendix A: The English Heritage Advice report concerning the 2011 Certificate of Immunity from Listing

Case Name: Middlesex Annexe

Case Number: 463145

Background

The former Strand Union Workhouse, which is the frontage block at the former Middlesex Hospital Annexe, was listed at Grade II in March 2011. We have been asked to advise whether a Certificate of Immunity should be granted in respect to the remainder of the hospital buildings to the north, south and rear of the listed frontage block.

Asset(s) under Assessment

Facts about the asset(s) can be found in the Annex(es) to this report.

Annex	List Entry Number	Name	Heritage Category	EH Recommendation
1	N/A	Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block)	Listing	Do not add to List
2	1401787	Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block)	Certificate of Immunity	Grant COI

Visits

None: Data from other sources.

Context

The former Middlesex Hospital Annexe, which operated until 2006 as an outpatients' department, stands within the Charlotte Street Conservation Area. There is a planning application to redevelop the site for mixed residential and commercial use. The buildings were assessed for listing in 2007 and we recommended that the C18 frontage block, the former Strand Union Workhouse, be listed at Grade II, while the infirmary blocks, dating from the 1870s, were not of special interest. The Heritage Minister declined to accept our advice with regard to the C18 workhouse, and none of the buildings on the site were listed. In 2010 we received a further application to list the former workhouse on the basis of new historical evidence. Although the 1870s infirmary blocks were not part of this application, we included them in our assessment. On our recommendation, the former workhouse was listed at Grade II in March 2011, while the infirmary buildings were not listed. We have now received an application for a COI in respect of the 1870s blocks.

Assessment

CONSULTATION

The owners' representatives, KM Heritage, and the London Borough of Camden were sent an Initial Consultation Report, and have confirmed that they wish to make no comments.

ASSESSMENT

English Heritage's Selection Guide for Health and Welfare buildings (2007) advises that pre-1840 general hospitals and pre-1868 hospitals with pavilion plans will be listable unless heavily altered. Greater selection is required for later examples because of the vast increase in numbers. Architectural interest, planning, and intactness will be crucial considerations.

The former Middlesex Hospital Annexe, built around an existing C18 workhouse, has some claim to historic interest as an early adaptation of a London workhouse site for infirmary use following the 1867 Metropolitan

Poor Act. In the context of C19 hospital design however, it is not an early example of an infirmary built on the pavilion principle, nor is it notable for its design. Workhouse infirmary architecture was generally plainer and more utilitarian than that of other institutions, reflecting its Poor Law status, and relatively few are listed. These particular examples are architecturally modest by any standards and the interiors considerably altered, while surviving fittings such as the stairs in the north and south blocks, are standard for their time. The site's principal claim to interest lies in the C18 former workhouse, as recognised in its recent inclusion in the list. The remainder of the buildings fall quite clearly below the standard required for listing.

CONCLUSION

After examining all the records and other relevant information and having carefully considered the architectural and historic interest of this case, the criteria for listing are not fulfilled.

SOURCES

Royal Commission on the Historical Monuments of England, English Hospitals 1660-1948, 1998
Survey of London, Volume 36: Covent Garden (1970), 60-61

Reasons for Designation Decision:

The former infirmary buildings to the north, south and rear of the frontage building at the former Middlesex Hospital Annexe are not recommended for designation for the following principal reasons:

- * Planning: this is not an early or notable example of an infirmary built on the pavilion principle
- * Architectural: the buildings are plain and utilitarian and lack architectural interest.

Countersigning comments:

Agreed. This site was recently assessed for listing, and the C18 workhouse building was listed, which the C19 parts of the site were excluded from the listing. It is right that these later ranges, which are not of special interest, are issued with a Certificate of Immunity.

Emily Gee
18 April 2011

Annex 1

Factual Details

Name: Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block)

Location: Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block),
Cleveland Street,
London,
W1T 4JU

County	District	District Type	Parish
Greater London Authority	Camden	London Borough	Non Civil Parish

History

The former Middlesex Hospital Annexe in Cleveland Street occupies the site of the Covent Garden Workhouse, built c1775-8, which became the Strand Union Workhouse following the Poor Law Amendment Act of 1834. The workhouse closed following the Metropolitan Poor Act (1867), and relocated to a new building in Edmonton.

The debate about hospital design of the 1850s led to the construction of large 'pavilion plan' general hospitals, with long open cross-ventilated wards and separate sanitary facilities in towers. Private and voluntary hospitals however were not open to sick paupers, who had recourse only to the workhouse. A few Poor Law Unions built new infirmaries on the pavilion-plan model, the first being Chorlton Union in Manchester (1864-6) but provision was generally inadequate. The problem was most acute in London where many workhouses, of which the Strand Union was a prime example, still occupied C18 buildings which were overcrowded, insanitary, with little separate provision for the sick who constituted the vast majority of inmates. The Metropolitan Poor Act required the provision of separate infirmaries for the sick poor, and numerous London authorities were required to build new infirmaries on separate sites from the workhouse, while others, including the Strand Union, were organised into Sick Asylum Districts. The Cleveland Street site was subsequently rebuilt, with the exception of the frontage block of 1775-8, as the infirmary for the Central London Sick Asylums District, to the design of John Giles & Gough. It opened in June 1875. Although on a much more modest scale, the design was influenced by the St Pancras Infirmary, Highgate, one of the earliest separate workhouse infirmaries in London, built in 1869 to the design of John Giles & Biven. The infirmary, as shown on the 1895 OS map, comprised the C18 workhouse, now the entrance block, with two long pavilion wards attached to the rear: the female ward to the north and male ward to the south, plus a shorter central kitchen block. To the north and south, adjacent to the site boundary, were further blocks which contained nurses' and doctors' accommodation. Buildings also flanked the central entrance gate.

The infirmary became part of the Middlesex Hospital in 1924, when all the buildings underwent extensive refurbishment. The front boundary walls were remodelled to provide two entrances, and the buildings flanking the former entrance removed. During WWII the hospital suffered bomb damage twice. The LCC Bomb Damage Maps record this as 'general blast damage - not structural' to the south ward, but shows the north ward as 'seriously damaged'.

Details

The buildings comprise two long three-storey ward ranges which are attached to the north and south of the rear of the Grade II listed C18 frontage block; the single-storey former kitchen, now subsumed into later infill structures, and the three-storey detached blocks to the north and south of the site boundary. All are built in brown stock brick with red brick dressings; the ward blocks with red-brick bands between storeys. Roofs are slate, with the exception of the north ward which is corrugated asbestos. The wards follow a common variant of the pavilion plan, with a central projecting sanitation tower, and a broader cross wing, containing a stair, at the abutment with the frontage building. A lateral single-storey glazed corridor runs along the rear wall of the C18 building, connected to the rear wards. Windows are a combination of C19 multi-pane sashes, and C20 steel casements. The interiors are plainly finished and have been subdivided to form smaller consulting rooms.

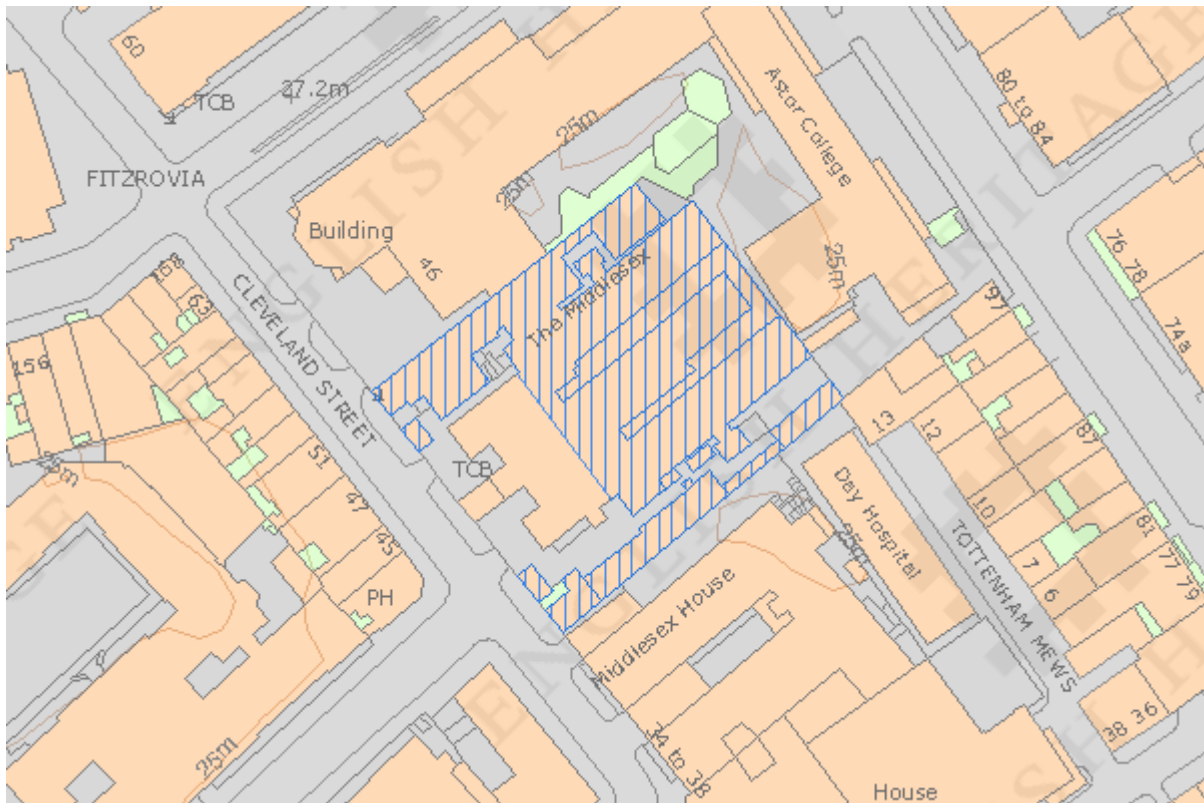
The ranges to the north and south have C19 sash windows. The ground floor of the south range has a C20 bay window. The northern building has a stair with turned balusters and cast-iron newel posts; that in the

south has stick balusters. Some joinery such as door and window architraves and skirtings survive, and a few panelled doors, but the interiors are generally plain and have undergone numerous C20 alterations.

Areas in between the ward blocks and the north and south ranges have been infilled with various temporary structures. The forecourt is enclosed by stock brick walls with curved upswept parapets, square piers and cast-iron railing with columns bearing the Middlesex Hospital monogram.

Selected Sources

Royal Commission on the Historical Monuments of England, *English Hospitals 1660-1948*, 1998
Survey of London, Volume 36: Covent Garden (1970), 60-61

Map**National Grid Reference:** TQ2924481815

© Crown Copyright and database right 2011. All rights reserved. Ordnance Survey Licence number 100019088.

The above map is for quick reference purposes only and may not be to scale. For a copy of the full scale map, please see the attached PDF - 1400281_1_634408924798070066.pdf

Annex 2

Factual Details

Name: Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block)

Location: Former Middlesex Hospital Annexe (buildings to north, south and rear of frontage block),
Cleveland Street,
London,
W1T 4JU

County	District	District Type	Parish
Greater London Authority	Camden	London Borough	Non Civil Parish

History

Details

Selected Sources

None.

Map

National Grid Reference: TQ2924481815



© Crown Copyright and database right 2011. All rights reserved. Ordnance Survey Licence number 100019088.

The above map is for quick reference purposes only and may not be to scale. For a copy of the full scale map, please see the attached PDF - 1401787_1_634408924824809048.pdf

Appendix B: List description for the Former Strand Union Workhouse (Middlesex Hospital Annex), 44, Cleveland Street

798-1/0/10402 CLEVELAND STREET 14-MAR-11 44 Former Strand Union Workhouse (Middles ex Hospital Annex)

II Former workhouse. Built after 1775 and in use by 1788 as the workhouse of the parish of St Paul, Covent Garden. Architect probably Edward Palmer. Converted into an infirmary c1870-75. Altered 1924.

The building's special interest ends at the line of the rear wall of the C18 workhouse. The later ward blocks attached to the rear, and the separate ranges to the N and S, are not of special interest.

MATERIALS: Yellow-brown stock brick laid in Flemish bond; sparse stone dressings; slate roof.

EXTERIOR: Four storeys high. Symmetrical facade of 3 bays flanked by projecting 2-bay side wings. The central part has later narrower windows inserted to either side, except at third floor. Moulded stone string-course between first and second floors wrapping around the side of the wings and continuing as a plain brick string-course. The central entrance has modern extended porch (not of special interest). Each of the inner faces of the wings has an oculus at first floor. The roof (replaced in the C20) is concealed behind the parapet. Some window openings are altered on the side and rear elevations. Most windows are replaced, but some original 6-over-6 pane sashes remain on the N and rear elevations. The rear elevation has a brick string-course between the first and second floors.

INTERIOR: Internal plan much altered, and only vestiges survive, including the N stair compartment (the stair itself is later). A pair of arched niches flanking a chimneybreast in the ground floor may be original features. Basement not fully inspected, but is believed to retain brick vaults.

HISTORY: The Covent Garden Workhouse (as it was originally known) was built by the parish of St Paul, Covent Garden, under the St Paul Covent Garden Act (1775) replacing a building in Denmark Court (Exeter Street). The site was acquired on a lease from the Bedford Estate. The architect was probably Edward Palmer, surveyor and steward to the Duke of Bedford, who prepared earlier plans for a smaller workhouse on the site. It was finished in or before 1778, when the parish charity school had been established there. The Act stipulated that an additional burial ground be provided on the site, which was consecrated in 1788. In 1802 and 1819 tenders were obtained for building an infectious ward and an infirmary respectively, each to the design of Thomas Hardwick (these no longer survive). In 1836 the building became the workhouse for the Strand Poor Law

Union, formed on 25 March 1835 under the Poor Law Amendment Act (1834) or New Poor Law which superseded the Poor Law of 1601. The Union comprised the parishes of St Paul, Covent Garden; St Mary-le-Strand; Precinct of the Savoy; St Clement Danes and the Liberty of the Rolls, joined by St Anne, Soho (1837) and St Martin-in-the-Fields (1868). The only other surviving workhouse from these parishes is that of St Anne Soho in Rose Street, now No 14 Manette Street.

The workhouse originally comprised the frontage block as seen today, with longer wings to the rear containing segregated male and female wards. At its full extent, the site comprised a pair of small receiving wards flanking the entrance gate, a chapel, further wards to the N and E; workshop ranges to the S and a wash house and laundry in the NE corner. A C19 account describes a stone relief above the entrance inscribed with the motto: 'Avoid Idleness and Intemperance'. Burials on the site had apparently ceased by the late 1850s when the laundry was built. The body of the 'Italian boy', murdered in 1831 by body snatchers Bishop and Williams or the 'London Burkers' and sold for dissection, was disinterred from among the hundreds of skeletons lying there; the case had caused a scandal and was instrumental in the passing of the Anatomy Act (1832). The Strand Union moved c1870 to a new workhouse at Edmonton, and the building was extended and converted as the infirmary for the Central London Sick Asylums District, retaining only the C18 frontage block.

Conditions at the Strand Union Workhouse were notoriously bad, and it featured prominently in the mid-C19 movement to reform the workhouse system. In 1853, the philanthropist Louisa Twining (1820-1912) visited an elderly nurse there, which prompted her influential campaign to improve workhouse conditions. In 1856, Dr Joseph Rogers (1821-1889), physician and renowned campaigner for the reform of the treatment of the sick poor, was appointed Medical Officer to the Strand Union. The dreadful conditions he encountered there - overcrowded, insanitary, with little separate provision for the sick who, like in many urban workhouses, constituted the vast majority of inmates - were to launch him on his lifelong mission as a healthcare reformer. He managed to secure some improvements, including the addition of a dispensary and separate laundry, in the face of the hostility of the Strand Guardians, who eventually dismissed him in 1868. He became Medical Officer to the Westminster Union in 1872. Rogers helped found the Association for the Improvement of London Workhouse Infirmaries (1866) and became president of the Poor Law Medical Officers' Association. In 1865 the Strand Union was named and shamed in a series of damning articles on metropolitan workhouse infirmaries published in 'The Lancet', which lauded Rogers' valiant efforts. The Strand, it stated, was 'remarkable, even among the London houses, as an illustration of the ideas according to which the accommodations of in-door paupers were originally planned'. An official inquiry of 1866 recommended the closure of several workhouses, including the Strand. Rogers was the key figure behind the Metropolitan Poor Act (1867); his campaigning also led to the provision of similar schemes in other cities. He had also helped campaign for the abolition of the

window tax (1851). His obituary in *The British Medical Journal* (13 April 1889) read 'see the comparatively comfortable and well appointed workhouse infirmaries, and think of the reeking dens they were. Compare them thirty - nay twenty - years ago and now, and confess that if Howard was the Hercules of prison reform, as truly was Rogers the Hercules of workhouse reform'. An English Heritage blue plaque commemorates his residence at 33 Dean Street, Soho. Rogers' memoirs: *Reminiscences of a Workhouse Medical Officer*, were published in 1889.

A third prominent figure with historical associations here was Charles Dickens, who lived very close to the Covent Garden Workhouse at No 10 Norfolk Street, now 22 Cleveland Street, c1815-17 as a child and for a period of at least two years from 1829. Dickens corresponded with Joseph Rogers in 1866, expressing his wonder that 'the poor should not creep in corners to die, rather than fester and rot in such infamous places'. Dickens' satirical short story 'A Walk in a Workhouse' (1850) describes a perambulation through a large metropolitan workhouse in 'the parish of St So-and-So', elaborating scenes of wretchedness in this 'little world of poverty enclosed within the workhouse walls'. What can be said with some certainty is that the former Strand workhouse is the sole survivor of the C18 institutions that were still operating in London when Dickens was writing, and which were targeted for reform in the 1860s.

SOURCES: Rogers, Dr J, *Reminiscences of a Workhouse Medical Officer* (1889) *Survey of London*: volume 36: Covent Garden (1970), 60-61 Richardson, R and Hurwitz, B, Joseph Rogers and the Reform of Workhouse Medicine, *British Medical Journal*, 16 December 1989. Richardson, R, Points of Entry: Middlesex Hospital Outpatients' Wing/The Strand Union Workhouse, *History Today*, Vol 43, September 1993, 62-63. English Heritage, *The Workhouse* (1999) Website - www.workhouses.org.uk REASONS FOR DESIGNATION: The former Strand Union Workhouse is listed for the following principal reasons:

* Historic interest: for associations with renowned figures in mid-C19 workhouse reform, most notably Dr Joseph Rogers, whose direct experience here as Chief Medical Officer launched him into the vanguard of the movement to reform Poor Law healthcare provision, a significant step towards the socialisation of medical care in Britain. It may also have provided inspiration for workhouses portrayed by Dickens in 'Oliver Twist' and later works *
Rarity: as a survival of an C18 London parish workhouse, one of only three to remain *
Architectural interest: while much altered internally, it remains clearly legible as a late-C18 Poor Law institution, whose austere yet imposing exterior eloquently announces its original purpose.

Selected Sources

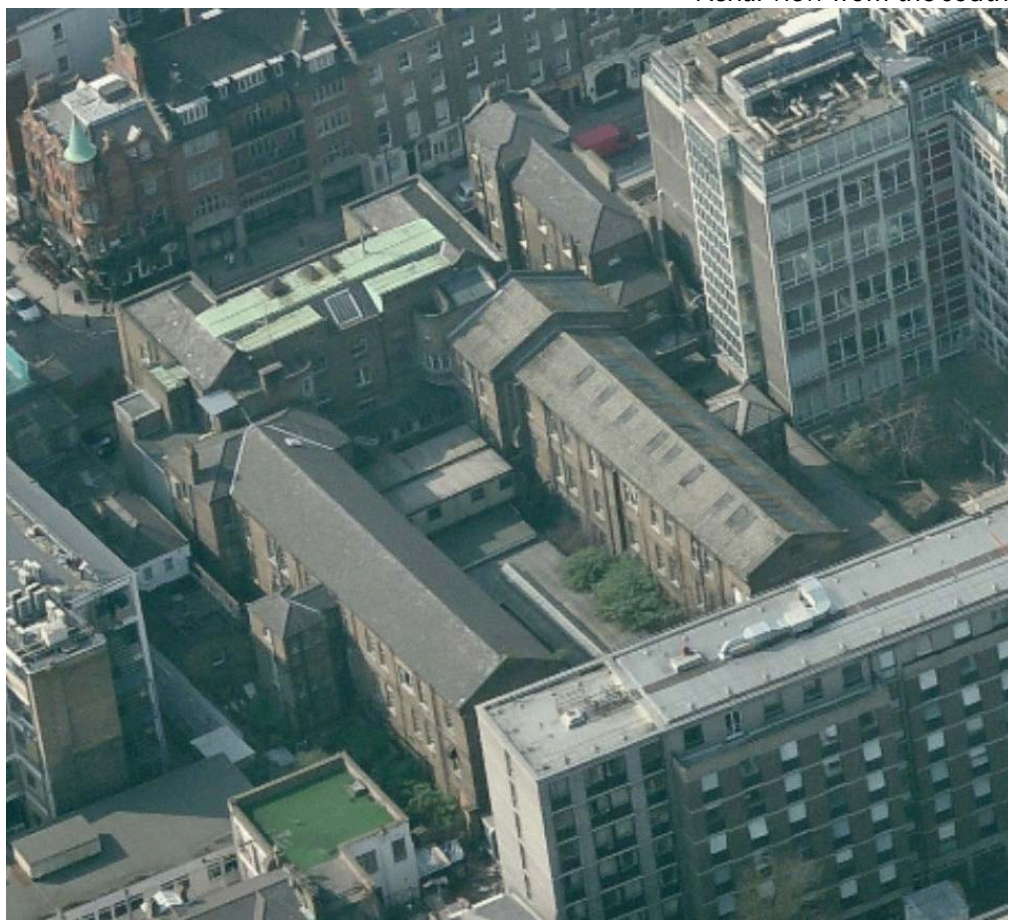
Legacy Record - This information may be included in the List Entry Details

National Grid Reference: TQ 29263 81800

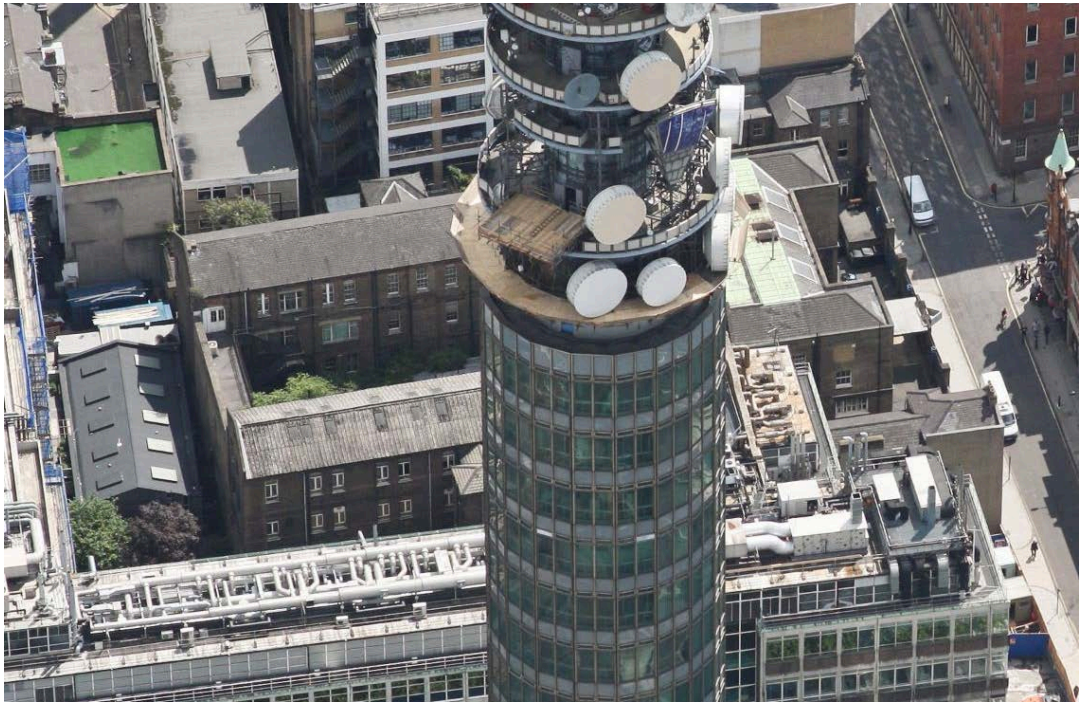
Appendix C: Photographs



Aerial view from the south



Aerial view from the east



Aerial view from the north



Aerial view from the west



Southern ward block



Southern ward block



The east 'courtyard'



The South Wing



The South Wing



The South Wing: front part



The South Wing: front part



The South Wing: looking towards rear



The South Wing: rear part



The South Wing: looking towards front



The South Wing: rear part



The South Wing: interior



The South Wing: interior



The South Wing: interior



The South Wing: interior



The North Wing



The North Wing



The North Wing



The North Wing



The North Wing



The North Wing: lower ground floor extension



The North Wing: interior



The North Wing: interior



The North Wing: interior

KMHeritage

72 Pymer's Mead

London SE21 8NJ

T: 020 8670 9057

F: 0871 750 3557

mail@kmheritage.com

www.kmheritage.com

© 2016