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ST BARTHOLOMEW'S HOSPITAL

SUMMARY

London's oldest and most historic general hospital, still occupying its original site at West Smithfield. It was founded in 1123 by Rahere, but the only reminders of its medieval past are the fifteenth-century tower and vestry of the hospital parish church of St Bartholomew the Less; the rest of the church was rebuilt by George Dance the Younger in 1789-91, and again in 1823-5 by Thomas Hardwick. In 1702 a new stone-faced hospital gatehouse was erected facing Smithfield. This was designed by Edward Strong, nephew of Christopher Wren's chief mason. Its construction coincided with the demolition of the adjoining medieval buildings and their replacement with brick-built Georgian houses. This policy of improvement and modernization reached its zenith with the rebuilding of the hospital, between 1730 and 1768, to designs by James Gibbs, a hospital governor. Gibbs provided a neo-classical complex comprising four large, three-storey blocks of Bath stone, in a formal composition around a courtyard. The North Wing, which housed the administrative rooms and was erected first, contained a great hall for governors' meetings, and a ceremonial staircase decorated with large figure-paintings by William Hogarth, another hospital governor. Each of the three other wings contained three floors of partitioned wards, providing a total of 504 beds. Additions were made at the end of the eighteenth century by George Dance the Younger, who designed a lecture theatre for the emergent medical school on a site behind Gibbs's West Wing; this was enlarged in 1822 and again in 1834-5, and has since been replaced. In 1842 Philip Hardwick, then architect and surveyor to the hospital, improved its appearance by demolishing the houses and shops flanking the entrance gateway and replacing them with a classical screen wall, of Portland stone. Hardwick also added a ward block, known as Lucas Block, with an adjoining out-patients' department and operating theatre (the hospital's first purpose-built theatre), on the north-east corner of the site. Lucas Block was enlarged by P. C. Hardwick in 1861 to accommodate a larger out-patients' department. With the growth of the medical school and of individual clinical departments, there were considerable extensions at the hospital during the late Victorian and Edwardian periods. These include a library and museum block of 1878-9, by Edward I'Anson; a new medical theatre and school, of 1879; a new out-patients' department of 1904-7, by E. B. I'Anson; and a pathological block of 1907-9, also by E. B. I'Anson. All were designed in a suitable classical style and faced in Portland stone. Later additions include a large, seven-storey nurses' home, designed by H. E. Edmunds, erected in 1921-9; and a new combined surgical, operating and medical block, designed by W. T. A. Lodge (of

Lanchester & Lodge), and built between 1929 and 1937, necessitating the demolition of Gibbs's South Wing of 1736-9.

REPORT

Early history

St Bartholomew's Hospital was founded in 1123 by Rahere. It is said that Rahere, a vassal of Henry I, had contracted malaria while on a pilgrimage to Rome, and had promised that, should he recover, he would return to London and found a hospital for the sick poor of the city. During the return journey he had a vision in which St Bartholomew instructed him to build a church in his name with the hospital. Work began on the new institution, to the north of the City walls, after the Bishop of London had consecrated the site in March 1123 (Foster, J 1986, 5). Rahere's priory church of St Bartholomew the Great took approximately ten years to complete. Adjoining it were a cloister, some domestic buildings, a farm and a herb garden, in the area now known as Bartholomew Close. The priory church and the hospital eventually separated (Foster, J 1986, 5).

In 1539, as part of the dissolution of the monasteries, King Henry VIII closed the priory of St Bartholomew, allowing the hospital to remain open, although confiscating its property and greatly reducing its services. Public hostility forced the king to re-establish the hospital, which he granted to the City in 1546. St Bartholomew's was to be administered by a Board of Governors, with paid officers - including a clerk, a steward and a matron - to implement their orders (Foster, J 1986, 7).

The medieval hospital was a monastic-type arrangement of buildings, courtyards, cloisters and gardens. Surveys of the hospital property made in 1617, attributed to the hospital surveyor, Martin Llewelyn, show the monastic-type precinct, with rows of houses marking the northern boundary, facing Smithfield (see attached plans, etc., sheet 1). Some idea of the external appearance of the hospital, with a variety of timber-framed shops and tenements facing Smithfield, can be gleaned from an engraving of *c*.1600, showing the execution of Anne Askew, a Protestant martyr, at Smithfield in 1546 (see attached plans, etc., sheet 2).

Church of St Bartholomew the Less (building 01 on attached plans).

Just inside the main gate of the present hospital stands the parish church of St Bartholomew the Less. It was founded in the twelfth or thirteenth century as a chapel for the hospital, but since 1546 St Bartholomew's Hospital has constituted a parish in its own right, a unique position in England. The oldest parts of the present church are the lower portion of the tower and the adjoining vestry, both dating from the fifteenth century; these are all that remain of the medieval church which served the hospital until the late eighteenth century. In 1789-91 the body of the church, having

fallen into decay, was rebuilt by George Dance the Younger. Retaining the old exterior walls, Dance constructed an almost new church, forming an octagon, within the original rectangular plan. His interior was executed in timber, plastered and painted to resemble stone, and rose up to form an octagonal clerestory, thereby increasing the amount of light and centralizing the plan round a pure geometrical form. The angles of the octagon were solid pieces of timber cased with deal in the shape of clustered columns. Dance also relocated the altar in an octagonal chancel. It was an ingenious plan, but unfortunately the construction was unsound. In the course of a few years dry rot had set in, and in 1823-5 the church was rebuilt again, this time by Thomas Hardwick. Dance's octagonal design was followed and reconstructed in iron and stone, and this is the building which survives today, attached to the medieval tower (*The Builder*, 26 Dec. 1903, 664: DOE list description: Pevsner, N and Cherry, B 1973, 202).

Entrance to the church is through a low Tudor doorway in the tower at the west end, which is of rubble with a brick parapet. Opening into the vestry, the lower portion of the tower forms a lobby, with bold clustered columns, banded at the middle, moulded arches, and a small stone staircase in the angle. The body of church as rebuilt by Hardwick is in the Gothic style. Its exterior walls are partly of old stone and red brick and partly of yellow brick with some rendering. The octagon is fitted into the old rectangular walls by triangular chapels open to the centre. Bath stone columns and arches carry a clerestory of pointed lunettes with geometrical tracery, and the ceiling is groined by large and numerous moulded ribs that spring from the columns. The roof construction is said to be of iron (DOE list description).

Further restoration work was carried out in 1865 and the church was restored again in 1950, following damage sustained during the Second World War. Although most of the medieval fabric of the church has gone, some early monuments have been preserved. These include, in the vestry, a fifteenth-century brass of figures of William and Alice Markeby, and a black marble plaque commemorating the wife of Thomas Bodley, founder of the Bodleian Library in Oxford. Stained glass dating from the fourteenth and nineteenth centuries was lost during the war; the present glass was designed by Hugh Easton in the 1950s (Pevsner, N and Cherry, B 1973, 202). The church is now listed Grade B (DOE list description).

The Henry VIII Gate, 1702 (building 02 on attached plans)

In an attempt to improve the public image of the hospital and to increase income by encouraging renters, the governors of the hospital decided in 1702 to construct a new stone-faced entrance gatehouse fronting Smithfield. This work was to coincide with the demolition of the adjoining medieval timber houses and their replacement by new Georgian brick structures. (An engraving published in Stow's *Survey of London*, of 1720, shows the new gateway completed and the Georgian tenements in the process of replacing the old timber buildings - see

attached plans, etc., sheet 5.) The Governors' minute book for 1702 contains an agreement with 'Edward Strong, junior, mason, to erect and build the front of this Hospital's north gate in Smithfield with Purbeck stone, according to the model drawn by the said Edward Strong ... for the sum of £550' (Yeo, G 1992, 17). Edward Strong, junior (1676-1741) was the nephew of Thomas Strong (*c*.1632-81), chief mason to Sir Christopher Wren. His father, Edward Strong, senior (1652-1724) had also worked on some of Wren's commissions, and Edward himself did much work for Wren at St Paul's Cathedral and many city churches (Colvin, H 1978, 791-2). It is therefore not surprising that the elevation of the gatehouse presents some similarities to Wren's Middle Temple gateway.

The gatehouse, known as The Henry VIII Gate, is a narrow, striking design, of three bays in three storeys above a rusticated archway. The main front is flanked by giant Ionic pilasters carrying a pediment. In the centre is a niche with a statue of King Henry VIII, flanked by closely coupled Corinthian columns and surmounted by a broken open segmental pediment with two reclining figures. The statue of Henry is by Francis Bird, his first work after he had returned from Rome (Pevsner, N and Cherry, B 1973, 202), and the reclining figures above represent Sickness (right) and Lameness (left). The rear elevation is plain.

The gatehouse was entirely rebuilt in 1834 by Philip Hardwick, who also added the short, unwindowed, two-storey wings on either side at the same time (information kindly supplied by Geoffrey Yeo). The wall flanking the gateway is also by Hardwick, and was added in 1842 as part of improvements to the Smithfield front of the hospital (see below). During World War Two blast damage temporarily revealed earlier half-timbering beneath the later stone facing (Hearsey, J E N 1965, 107). More recently, the exterior of the gatehouse was restored in 1985 by Donald Insall & Associates; two chimneys were rebuilt, the roof reslated, and the carved figures and sash windows were repaired (*The Times*, 18 Nov. 1985). The gatehouse is now an Ancient Scheduled Monument (DOE list description).

The rebuilding of St Bartholomew's Hospital to designs by James Gibbs, 1730-1768

Gibbs's design. The hospital escaped the Great Fire of 1666 (the fire was finally extinguished at Pye Corner in Giltspur Street), but by the early eighteenth century its buildings were overcrowded and dilapidated. The population of London had increased considerably and St Bartholomew's Hospital was not large enough to receive all the sick poor who applied daily for relief. An attempt was made to alleviate the situation by erecting three new wards (Foster J 1986, 10), but these were quickly filled, and it became apparent that a complete rebuilding of the hospital was necessary. The Bart's Governors were no doubt impressed with what had been done at St Thomas's Hospital (NBR No. 101158), rebuilt between 1693 and *c*.1710, and were aware that, in an ever-expanding capital, the modernisation of existing hospitals was as important as the provision of new ones. James Gibbs, a hospital governor, drew

up a plan for four separate wings grouped around a central courtyard. (Lord Burlington, Dance the elder and Hawksmoor were also hospital governors, but there is no evidence of them having submitted or being asked to submit designs.) Gibbs's plan and estimate for the administration block was accepted in September 1728. In May 1729 his plans for the entire hospital were accepted, and work began the following year. The project was finally completed in 1768, by which time all traces of the medieval hospital had vanished.

Gibbs's architectural response to the chaos of the existing medieval hospital was to produce a revolutionary design - clear, ordered, and symmetrical - comprising four large, three-storey blocks in a formal composition around a courtyard. The separation of the independent ranges enclosing the court encouraged a free passage of light and air, and the uniformity of their elegant Palladian façades answered the Governors' request for buildings 'agreeable to one uniform plan' (Yeo, G 1992, 25).

In 1729 400 copies of a first subscription engraving, showing Gibbs's plan for the hospital and the proposed elevation of his administration block, were printed in order to raise subscriptions for the rebuilding programme. Of the four blocks, three were to be for wards and one an administration building, containing the governor's meeting room and a clerk's residence. The ward blocks were to contain thirty-six 14-bed wards, twelve to each block, four on each floor, accommodating a total of 504 patients. Both this plan and that published in Stow's *Survey* to illustrate the new hospital differ from what was finally erected. The ward entrances and staircases are situated at the ends of the blocks rather than in the centre, and the north or administrative block is reversed, with its entrance facing outwards (see attached plans, etc., sheets 9-11).

There is no direct precedent for this type of design in other hospitals of the period. It is easy, with hindsight, to credit Gibbs with being ahead of his time in planning a hospital composed of detached blocks to reduce the risk of cross-infection. However, the arrangement of the buildings at Bart's is also very much like the eighteenth-century beau ideal of a college court, and resembles closely Gibbs's own earlier design, of 1724, for King's College, Cambridge (see attached plans, etc., sheet 12); both show detached, solid, stately, stone-faced blocks, with sparse, Palladian details, and are the only designs of this type produced by Gibbs. And Gibbs himself, always a practical architect, explained that the arrangement of four distinct blocks was to prevent the risk of spread of fire, noting that the Capitol in Rome, having burnt down three times, was rebuilt by Michelangelo as three blocks detached from each other for this reason (Friedman, T 1984, 214).

Gibbs's plans show that all four blocks at Bart's were to be plain, except for Gibbs surrounds to the windows and vases crowning the cornices. No expensive embellishments in the way of a portico or order of columns were proposed, and before the

intervention of Ralph Allen, Gibbs proposed facing all the buildings in brick with Portland stone dressings. Allen offered to supply at low cost stone for the new hospital from his quarries at Coombe Down, outside Bath. This offer was accepted and St Bartholomew's became one of the earliest buildings in London to be faced in Bath stone. However, as Allen's stone was relatively untried, the hospital shrewdly inserted into his contract a clause that Allen should make good at his own expense any defects that might occur within thirty years, a clause he was later called upon to honour (Oswald, A 1961, 1199). A century later the stone had deteriorated so badly that, in 1850-2, Philip Hardwick was asked to reface all the buildings, which he did using Portland stone (DOE list description).

The North Wing, 1730-8 (building 03 on attached plans). The North Wing of Gibbs's new hospital was built first. This was designed to contain the administrative offices, a great hall for the Governors' meetings, and a ceremonial staircase, and was erected before any of the less prestigious ward wings in order to attract and impress potential benefactors. The names and deeds of benefactors would be recorded for posterity on the walls of the great hall. Externally, there was no need for a grand central entrance feature, as there was already a prominent stone gateway at West Smithfield. However, the entrance arch in the North Wing still had to be large enough to accommodate carriages. Gibbs's first engravings show that he had originally planned an elaborate triumphal arch motif, with a boldly rusticated arch below a pediment; this was reduced in the executed version to a plainer arch set in channelled masonry. The stone balcony on the northern front of the North Wing is a later addition. Inside, on the ground floor, the Committee Room has door-cases with be-ribboned oak-leaf friezes between their cornice and architraves, and also a simple, boldly-treated fireplace, surmounted by a carved overmantel evidently made for the portrait of Henry VIII that it frames. The painting is dated 1544, and inscribed with the King's age at that time (55), but may well be a copy of an original of that date (in the archives is an entry for 1 Feb. 1616/17: 'It is ordered that [blank] picture maker shall have paid him by Mr. Treasurer £6 for the picture late made by him of King Henry the eighth and the same to be set up in the Committee Room' (Oswald, A 1961, 1200). Other original eighteenth-century features survive in the Treasurer's Room, on the first floor, and in the Steward's flat. The building work was probably complete by 1732, but the interior decoration was not finished until 1738 (Yeo, G 1992, 27). The North Wing is now an Ancient Scheduled Monument (DOE list description).

The Great Hall (marked 04 on attached plans). Gibbs's great hall at Bart's is perhaps the grandest of its period in London. It is of eight bays, with panelled walls bearing the names of benefactors, and a coffered ceiling with foliage scrolls, enriched plaster work, and other decorations. The ceiling in its set-out and some of its ornaments - the shells, scrolling acanthus and 'SBH' cyphers - looks back to the type favoured in William III's reign, for Gibbs was never a

Burlingtonian purist. Unusually for a commission of this size and importance, Gibbs did not rely on his favourite Italian *stuccatori*, Giovanni Bagutti and Giuseppe Artari: instead, the plasterer was the otherwise unknown Frenchman John Baptist St Michele. His bill was £192 16s., including one large rose and four small ones on the staircase ceiling and the 'fustons done in ye Walls of ye great Room' (Oswald, A 1961, 1199). In 1737 Gibbs sketched a design for the painted cartouches that occupy the spaces between the upper and lower tablets on the side walls. These were done by a Mr Richards, who also assisted Hogarth on the staircase. There are three fireplaces in the hall, all of marble, one at either end and one in the middle of the north wall. Above each there is an architectural overmantel. That at the west (or high table) end frames a full-length portrait of Henry VIII, the refounder of the hospital. It is a copy of the full-length Holbein painting destroyed when the Palace of Whitehall was burnt, and its architectural frame was a combined design by Gibbs and Hogarth, who in 1738 were requested to consult about the 'decent and respectful ornaments' which should embellish it (Oswald, A 1961, 1199). A further portrait of King Henry VIII occurs in a seventeenth-century stained-glass window in the south wall, commemorating the refoundation of the hospital; this was made probably in 1664 but installed in 1743 (Pevsner, N and Cherry, B 1973, 201).

The Hogarth staircase (marked 05 on attached plans). Gibbs's new north wing included a grand staircase leading from the main entrance up to the great hall on the first floor. George Vertue, writing in 1736, suggests that Giacomo Amiconi, the last Rococo Venetian artist to visit England, had at first been considered for the job of decorating the staircase (Croft-Murray, E 1960, 324). However, if this is so, he was eventually replaced by William Hogarth who, like Gibbs, was a governor of the hospital. It is possible that, rather than pay the usual governors 'fine' of £100, Hogarth offered to paint the staircase free of charge.

To decorate the staircase Hogarth designed and painted two large canvases depicting the biblical stories of the *Good Samaritan* and *Christ at the Pool of Bethesda*, both aptly illustrating the spirit of the hospital's work. Hogarth is not well known as a history painter, yet for much of his career he was striving to succeed in this field. He had studied under his father-in-law, the history painter James Thornhill, and had probably helped with some of his decorative projects. He subsequently became a member of the academy founded in St Martin's Lane in 1720 by, Louis Chéron, a follower of Antonio Verrio, and by John Vanderbank. It appears that, having made his reputation in the fields of portraiture, social satire and the conversation piece, Hogarth saw the Bart's commission as an opportunity to introduce himself as the successor to his father-in-law as England's leading history painter. He later wrote of the pictures:

> I entertained some hopes of succeeding in what the puffers in books call the *great style of History painting*; so that without having had a stroke of

> this *grand* business before, I quitted small portraits and familiar conversations, and with a smile at my own temerity, commenced History-painter, and on the great staircase at St. Bartholomew's Hospital, painted two scripture stories, *The Pool of Bethesda* and *The Good Samaritan*, with figures seven feet high. These I presented to the Charity; and thought they might serve as a specimen, to shew that were there an inclination in England for encouraging historical pictures, such a first essay might prove the painting them more easily attainable than is generally imagined (Croft-Murray, E 1960, 324).

In his lay-out for the Bart's paintings, Hogarth followed the Baroque tradition of decorative staircase painting, as initiated by Antonio Verrio and expounded by Thornhill, by framing the main subjects within illusionistic architectural openings and filling the subsidiary irregular spaces between them and the dado with feigned bas-reliefs. However, instead of the traditional framing of a pillared portico or screen, Hogarth opted for the more up-to-date device of a surround of bold Rococo scrollwork, which had probably been introduced into England by the Venetians (see, for example, the saloon at Moor Park by Francesco Sleter). Hogarth chose oil as his medium, also the traditional one of Verrio and his followers; but instead of painting direct onto the plaster surface, Hogarth used vast sheets of canvas, which could be attached to the walls later - this would enable him to carry out the work in his studio, rather than on site.

The story of *Christ at the Pool of Bethesda* is taken from St John's Gospel, Chapter V. Hogarth places his figures against a curved arcade (the gospel mentions five porches). Although the composition and the poses of the principal characters seem to derive from *settecento* Venetian painting and from Raphael's cartoons, the overall treatment, and in particular the treatment of the attendant figures representing various diseases and illnesses, is overwhelmingly Hogarthian. There is a tradition that Hogarth used as models patients at the hospital; whether or not this is true, he obviously relished the opportunity to paint the maimed, crippled and emaciated wretches who surround the figure of Christ. *The Pool* was the first of the two paintings to be completed, and was hung in April 1736. The *Good Samaritan* is a more straightforward composition, with the two figures of the story set in an extensive landscape background. It is said that George Lambert - landscapist, founder of the original Beefsteak Club and a friend of Hogarth - was employed by Hogarth to paint the landscape background of the *Good Samaritan*; if so, he may well have performed a similar task for *The Pool*. Lambert was, at the time, principal scene-painter at Covent Garden theatre, and it is possible that the work could have been carried out there, where there would be sufficient housing space. The *Good Samaritan* was ready for hanging by the middle of 1737 (Croft-Murray, E 1960, 325).

The imitation bas-reliefs below the two canvases are painted to simulate terracotta. They depict the vision of the founder, Rahere, his foundation of the hospital in 1123, and monks tending the sick. The lively painting and free brushwork again betray the influence of contemporary Venetians, particularly Giovanni Antonio Pellegrini (Croft-Murray, E 1960, 325). On the upper landing, above the door leading to the Great Hall, is a medallion head of Galen painted in the same free manner as he bas-reliefs. Beneath this is an inscription:

> *The Historical Paintings of this Staircase were painted and given by Mr. William Hogarth and the ornamental paintings at his Expense, A.D.* 1736

The ornamental paintings consist of the scrolled surrounds to the main pictures, the baskets of medicinal plants and flowers and the additional scrollwork on the walls of the landing, and the interlaced strapwork on the ceiling: they are the work of a Mr Richards, who was also employed by Gibbs to paint the lettering and cartouches in the hall.

The completion of the Gibbs-designed hospital: the South, West and East Wings, 1736-68 (buildings 06-08 on attached plans)

The complex of four detached blocks as designed by Gibbs was not to be completed until 1768, some forty years after his proposals were first made and fourteen years after his death. The delay was due partly to difficulties in shipping stone during the Seven Years' War, and partly to the behaviour of the Treasurer, John Tuff, who in 1760 absconded with £4,000 (Oswald, A 1961, 1200). In 1736, once the North Wing was in the main complete, work began on the first of the three remaining blocks of Gibbs's plan. This was the South Wing (06, since demolished). Rocque's Survey Map of 1736-47 (see attached plans, etc., sheet 15), shows the North and South Wings completed, and makes clear the imposition of Gibbs's formal geometric plan on the medieval hospital. The West Wing (07) was begun in 1748, and a view of the hospital by T. Jeffreys, dated 1752 (see attached plans, etc., sheet 16), shows it finished, between the North and South Wings in the partially completed courtyard. This view shows the hospital courtyard as if completed: some older buildings in the centre of the square were not demolished until 1766 (Bart's Archives, Governors' Minutes, HA1/13, 422). The East Wing (08) was begun in 1758 and completed in 1768, although patients were not admitted until the following year (Yeo, G 1992, 27-8).

The three ward wings were identical in plan and appearance. Each three-storey block was built with a staircase and staff rooms in the centre, with long wards on either side divided by a central wall and each containing two rows of beds; this differed from Gibbs's early plans, which had staircase halls at the ends of the blocks. The wards were large and airy, with wooden beds placed between the windows for maximum ventilation. There were separate wards for smallpox cases and four wards for venereal disease. Heating was by large open fireplaces in the centre of the wall dividing each ward into front and back sections. Externally, the ward wings followed

the appearance of the North Wing, but without its slightly projecting wings. The Jeffreys print (see attached plans, etc., sheet 16) shows how unity of the four separate blocks was achieved by linking arches or screen walls at the four corners. When complete, the four blocks provided a still and empty courtyard, shut off from the bustle of Smithfield, a haven of peace and quiet for both patients and staff. Unfortunately, this quadrangle is now used as a car park.

The statues and urns which once stood on the parapets of the blocks and the connecting arches in the open corners have been removed, and the South Wing was demolished in 1935 to make way for a new medical block (see King George V Block below). The West Wing (07) preserves many original internal features of Gibbs's ward design, including chimney pieces and cornicing, and the original oak staircase, and is listed Grade I. The East Wing (08) has more internal alterations than in West Wing, and is also listed Grade I (DOE list description).

Subsequent development and expansion: 1 - from the late eighteenth century to the mid-Victorian age

As the construction of the new buildings designed by Gibbs drew to a close, the hospital began to turn its attention to the problem of how to continue redevelopment in the areas between the square and the street boundaries. In 1761 plans for new buildings were drawn up by William Robinson, who had been appointed as the first professional surveyor to the hospital in 1748. The main element of Robinson's plan was a new, wide street of shops and houses at the rear of the East Wing. Further plans for redevelopment were put forward in 1765 by Robert Mylne; however, little of either scheme appears to have been built (Attfield R 1988, 68-71).

One notable addition was the Hartshorn Gate, a handsome stone portal built in 1771 to give access to the hospital courtyard from present-day Giltspur Street, at the rear of the West Wing (Bart's Archives, Governors' Minutes, HA1/14, 63). From the mid-eighteenth century this was the entrance for vehicles, the King Henry VIII Gate being used only by pedestrians. The Hartshorn Gate was demolished in 1877 to make way for a new library and museum block (see below) (Yeo, G 1992, 55).

The first major new buildings at Bart's to follow Gibbs date from the 1790s and were the work of George Dance the Younger. Dance, who restored and partly rebuilt the church of St Bartholomew the Less, was involved with plans for the hospital and the emergent medical school from 1789 until possibly as late as 1822, three years before his death (Attfield, R 1988, 76). In 1791 Dance built a surgeons' lecture theatre, or medical theatre, for John Abernethy, the Assistant Surgeon and Lecturer in Surgery. This was situated in Windmill Court, behind the West Wing. This building began the succession of schemes providing for the development of the emergent medical school, which received recognition from the University of London in 1839, but was not incorporated until 1921. Dance's theatre (building 11 on attached plans - see sheets 17-18) was a small pavilion, dominated by the circular theatre, which

projected rather like a temple. The popularity of the lectures meant that more accommodation was soon required and Dance's theatre was enlarged in 1822. In 1834-5 the building was rebuilt and expanded to include a library, museum and chemical theatre (Yeo, G 1992, 121, 123).

The next period of major rebuilding was the 1840s, when the appearance of the hospital was improved by the demolition of the houses and shops which had previously flanked the gateway on West Smithfield, and their replacement with a classical screen wall, of rusticated Portland stone, including arcading with iron grilles and Doric columns. This screen wall was the work of Philip Hardwick, architect and surveyor to the hospital (Foster, J 1986, 15), and is now listed Grade II. In 1842 Hardwick also built a new block, known as Lucas Block (building 09 on attached plans), containing surgery wards and a small out-patients' department, with an adjoining operating theatre (10) (Yeo, G 1992, 23, 36). Prior to this operations had taken place in a theatre constructed in the East Wing (Yeo, G 1992, 70). Hardwick's ward and theatre, both faced with Portland stone, are situated to the north-east of Gibbs's North Wing, near the corner of West Smithfield and Little Britain. The ward block is of three stories (the top storey probably a later addition) and the adjoining theatre is partly single-storey and partly of two storeys. Both blocks are now listed Grade II in combination with a later out-patients' extension of 1861 (12). This replaced the earlier out-patients' department at the north of Lucas Block, and was the work of Philip Hardwick's son, P. C. Hardwick. It contained a large, top-lit out-patients' waiting hall, and had a stone-faced classical entrance front comprising a rusticated ground storey and Doric entrance arcade. This block was subsequently enlarged and was substantially rebuilt in the 1980s. It is now used for physiotherapy treatment.

The only other significant addition of the mid-Victorian period was the pool and fountain (marked 13 on attached plans) which was installed in the square in 1859, again to designs by P. C. Hardwick (Yeo, G 1992, 31). The three nearby cast-iron lamp standards were added later; they and the fountain are listed Grade II (DOE list description).

Subsequent development and expansion: 2 - the late Victorian and Edwardian eras

Library and Museum block, 1878-9 (building 14 on attached plans). Between 1878 and 1879 a new block, consisting of a library, practical classroom, and museum, was built adjoining the existing medical theatre and school, on a site previously occupied by the Hartshorn Gate (see above) and a row of houses. Although its classical stone front faced Giltspur Street, the building was entered at the rear, through the quadrangle built by Gibbs. The new block, designed by Edward I'Anson, architect to the hospital, and built by a Mr Brass, comprised a basement, ground floor and two upper storeys. The basement contained spacious lavatories, cloak-rooms, a students' meeting-room, and class-rooms, with walls partly of glazed bricks, for the sake of light. The large and attractive

library, with floors and bookcases of polished oak, was situated on the ground floor. This contained an upper gallery, and was capable of holding 20,000 volumes. Some of the cases for books were placed at right angles to the walls, thus providing convenient recesses in the room for private study. The first floor housed a large laboratory room, capable of being divided in two by a sliding door. Along the walls were tables, with lamps and sinks, where 150 students could work with test-tubes and other appliances for chemical analysis. On the top floor was a lofty, well-lighted museum, with upper galleries and a lantern roof of glass and iron, for the large and valuable collection of anatomical specimens. The floor of museum was of wainscot parquetry, in narrow widths, diagonally laid, with pitch-pine borders. It was originally intended that the gallery floors should be of glass, but this idea was later abandoned and pitch-pine used instead (*The Builder*, 8 Nov. 1879, 1233-4). Although modern partitioning and shelving has been inserted at ground-floor level in both the library and the museum, they remain much as built, particularly at gallery level. Externally, the block is of yellow stock brick with a classical front of Portland stone, designed by I'Anson in deference to the existing Gibbs hospital. The basement is rusticated and the ground floor windows have Gibbs surrounds. The first floor has the appearance of a *piano nobile*, with pediments and balustrading to the windows. The upper storey has top-lights with blind panels, and there is an entablature with an inscribed frieze, a modillion cornice and a balustrade. The building is now grade II (DOE list description).

New Medical Theatre and School, 1879 (building 15 on attached plans). As soon as the new library and museum block was complete, work began on the rebuilding of the medical theatre and school. The old block had been only one storey in height, but the new buildings for the theatres and school were designed to be carried to the same height as the library and museum, which they adjoined, and of which they formed a continuation. Two new theatres were provided, one for anatomy, to accommodate 500 pupils, and one for medicine, to seat 250. A large new dissecting-room was also provided, with room for 250 students to practice dissecting at one time. The old theatre buildings were taken down at the end of 1879 and work began on the new block in the following year (*The Builder*, 8 Nov. 1879, 1233-4).

New Out-patients' Department, 1904-7 (building 16 on attached plans - see sheet 22). The early years of the twentieth century were a difficult time for St Bartholomew's Hospital. Pressure for accommodation increased with the growth of the medical school and of individual clinical departments. In 1903 Bart's was accused of being 'antiquated and inefficient' (*The Times*, 8 Jan. 1903), and many well-know hospital architects, including Henry Burdett and Alfred Saxon Snell, proposed plans for expansion and modernization (*The Hospital*, 31 Oct. 1903, 86-9: *The Builder*, 1 Jan. 1904, 49). One scheme even suggested the demolition of the church of St Bartholomew-the-Less (*The Builder*, 17 June 1904, 868). Eventually, a large area of ground adjoining the hospital to the south was acquired from

Christs' Hospital, and a new out-patients' department was planned for the site by E. B. I'Anson, the architect to the hospital (Foster J, 1986, 21).

The foundation stone of the new wing was laid in July 1904. The building comprised a basement and four floors, spread over an area of about 1½ acres (see attached plans, etc., sheet 22). The basement housed the heating and ventilation apparatus, but also contained bathrooms for medicated and vapour baths and douches, and a complete drug factory for the dispensary above. The ground floor was dominated by the large out-patients' waiting-hall, 140 ft long and 45 ft wide, capable of seating 850 people. Surrounding this were a sequence of separate surgical and medical consulting rooms. There was also accommodation for the sister and nurses in charge of the department, as well as rooms for the reception of accident and other emergency cases, a dispensary, and a common room for the medical students. The department was designed to deal with out-patients at a rate of 1,500 every morning, and for dispensing prescriptions at the same rate. Further consulting rooms and a chemical laboratory were provided on the first floor, along with beds for medical and surgical out-patients. The second and third floors were mainly devoted to several specialist departments, including throat, ophthalmic, aural, women's diseases, skin, dental, electrical and orthopaedic out-patients' departments. The fourth floor housed a clinical lecture theatre. The new out-patients' department was formally opened by the Prince of Wales in July 1907. As with Edward I'Anson's library and museum block of 1878-9, the main stone front of the block was designed in a restrained classical style, to harmonize with the other buildings of the hospital. This front section, facing Giltspur Street, housed the accommodation for the resident medical officers (*Building News*, 24 June 1904, 903; 29 July 1904, 136-7; 20 Nov. 1908, 748: *The Builder*, 2 Nov. 1907, 473-4).

Pathological Block, 1907-9 (building 17 on attached plans). In 1907 work began on a new pathological block, devoted to the purposes of pathological teaching and research. The new block was designed by E. B. I'Anson, and faced West Smithfield, adjoining the existing museum, library and medical school buildings erected by Edward I'Anson some years earlier. The new block comprised six stories (see attached plans, etc., sheet 23), including a basement containing a mortuary capable of storing eighteen bodies, and a mortuary chapel where the body of a deceased patient could be viewed by relatives and friends or by a coroner's jury. A special lift was provided by which bodies could be raised to the top storey, which contained the post-mortem room. On the ground floor were situated the medical school administrative offices and a common room for staff; the handsome furniture of these rooms was provided by private subscription among the members of the hospital and medical school staffs. On the first floor was a large laboratory for clinical pathology, two research labs, rooms for pathologist and demonstrator, and a room for media with assistants rooms adjoining. The second floor housed three large labs for pathological histology, bacteriology and for junior demonstrators. A pathological library, a laboratory for

chemical pathology, and a lecturers' private room were provided on the third floor, and on the fourth floor was situated the post-mortem room, with rooms adjoining for demonstrators, storage, etc. At the time the new block was described as probably 'the most complete of its kind ever erected', and was seen as striking evidence of the increasing importance of the part played by the pathological department in the modern hospital (*The Hospital*, 10 July 1909, 395). Once again, a suitably classical façade of Portland stone was designed to blend with the existing buildings.

Subsequent development and expansion: 3 - from the First World War to the present day

A large new nurses' home (building 18 on attached plans), named Queen Mary's Home in honour of Queen Mary who laid the foundation stone, was built between 1921 and 1929. It is an extensive building, of seven storeys, angled to follow the line of Little Britain, which it faces. The rear elevation of the block is plain and faced with stock brick; the main elevation to Little Britain is of Portland stone, in the grand classical style of the period. the architect was H. E. Edmunds (FRIBA) and the contractors were Dove Brothers (memorial stone on building).

In 1927 work began on much-needed new medical and surgical wards at the southern side of the hospital, a significant redevelopment which was to change the appearance of the historic Gibbs courtyard. A new medical block was to occupy the southern side of the hospital square, necessitating the demolition of Gibbs's South Wing. The architect of the scheme was W. T. A. Lodge, of Lanchester & Lodge, and the contractors were again Dove Brothers. The general purpose was to provide modern buildings equipped with up-to-date apparatus, with 250 surgical beds, 250 medical beds and five operating theatre suites, planned so as to be separate units but all interconnected to facilitate supervision. The Surgical Block (building 19 on attached plans) was planned with 250 beds divided into ten units of 25 beds, two such units on each floor from the ground to the fourth (see attached plans, etc., sheet 24). Each unit contained a large 22-bed ward, one 2-bed ward and one single-bed ward, and each floor had its own operating suite in the adjoining operation theatre block (building 20 on attached plans, since replaced). The Medical Block (building 21 on attached plans) had similar accommodation. Each unit throughout had its own sanitary rooms, ward kitchen, linen room, sister's room, etc. The large medical wards had sun balconies for beds on the south side. All the buildings were of steel-framed construction. The front end of the medical block facing the hospital square and the return ends were faced in Portland stone, but the main walls generally were in brick. All the floors were of reinforced concrete and the internal walls and partitions were of brick and hollow tile. The Surgical Block and the operation theatre suites were completed in 1930; the Medical Block was completed in 1937, when the entire complex was officially opened as the King George V Block (*AJ*, 24 June 1937, 1112-4: Pevsner, N and Cherry, B 1973, 201). It is likely that further rebuilding,

including the demolition of the rest of the Gibbs Square, would have taken place had not the outbreak of war intervened.

During World War Two the hospital's lecture theatres and medical students' residential college were all bombed in. In 1947-57 a new medical school was built in nearby Charterhouse Square by Easton and Robertson (Weinreb, B & Hibbert, C (eds) 1983, 695); the site had been acquired by the Hospital Medical College in 1933-4 but the accommodation there, a mixture of converted and new buildings, had been severely damaged during enemy air raids in 1940 and 1941 (Yeo, G 1992, 59-61). The hospital continued under the Henry VIII charter until 1948 when it was absorbed into the National Health Service. Since then, much rebuilding and modernization has taken place, including the construction of the Queen Elizabeth II wing in 1961, and of Gloucester House, a new nurses' home and school of nursing named after the President of the hospital, the Duke of Gloucester. The hospital's Board of Governors survived until 1974 when Bart's became part of the City and Hackney District Health Authority, under which it still functions as a teaching hospital. The future of this historic site is at present uncertain, as it has been recommended for closure in the recent Tomlinson report on London's hospitals.

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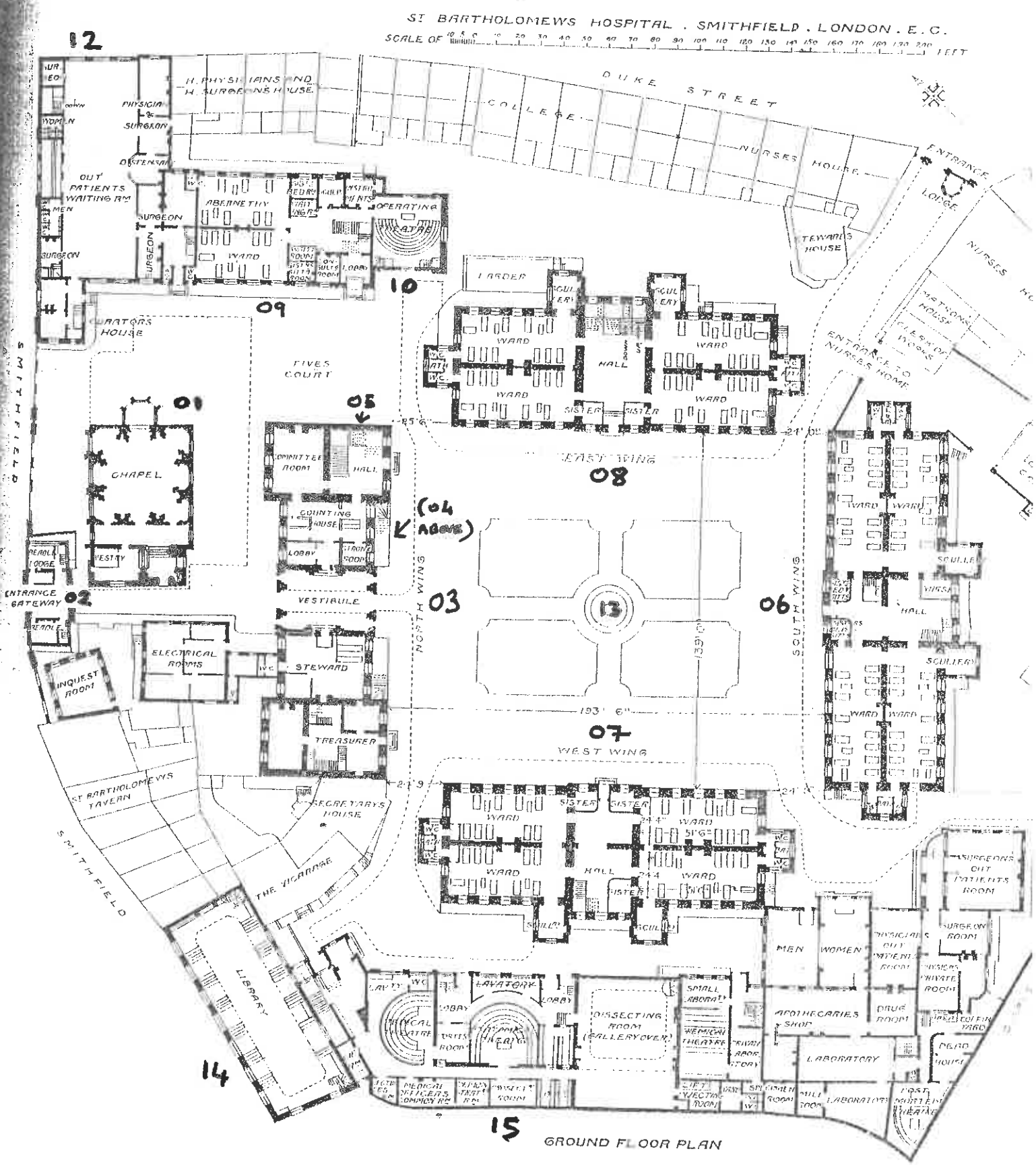
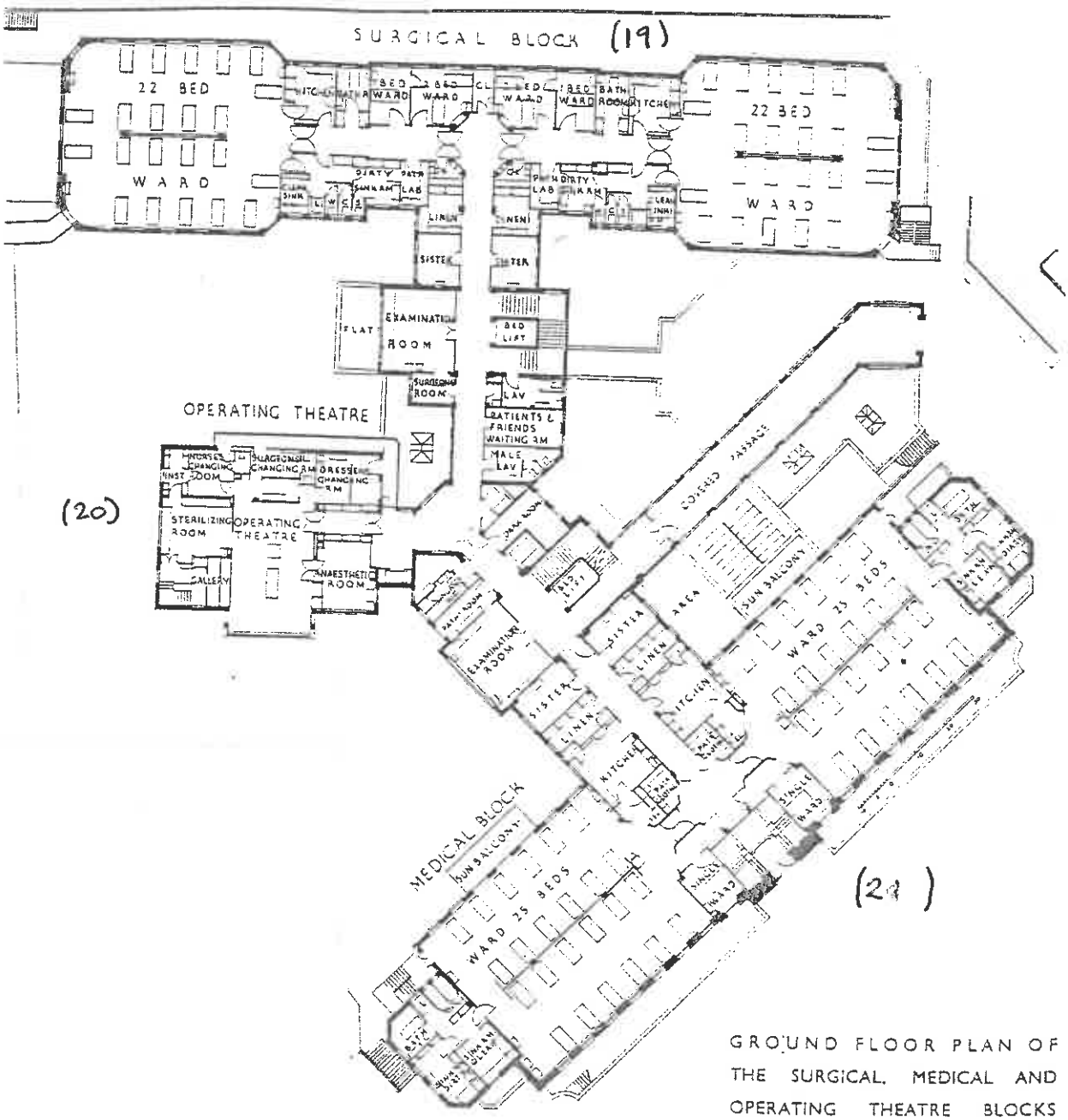
Report written by Colin Thom, December 1992

SUB-CLASS 2A—Four blocks arranged in a square, but detached from one another with a free space at each ar



Bart's Hospital c. 1890, from H. C. BURDETT, Hospitals and Asylums of the World, 4 vols, 1891-3, portfolio of plans, 34

Sheet 21

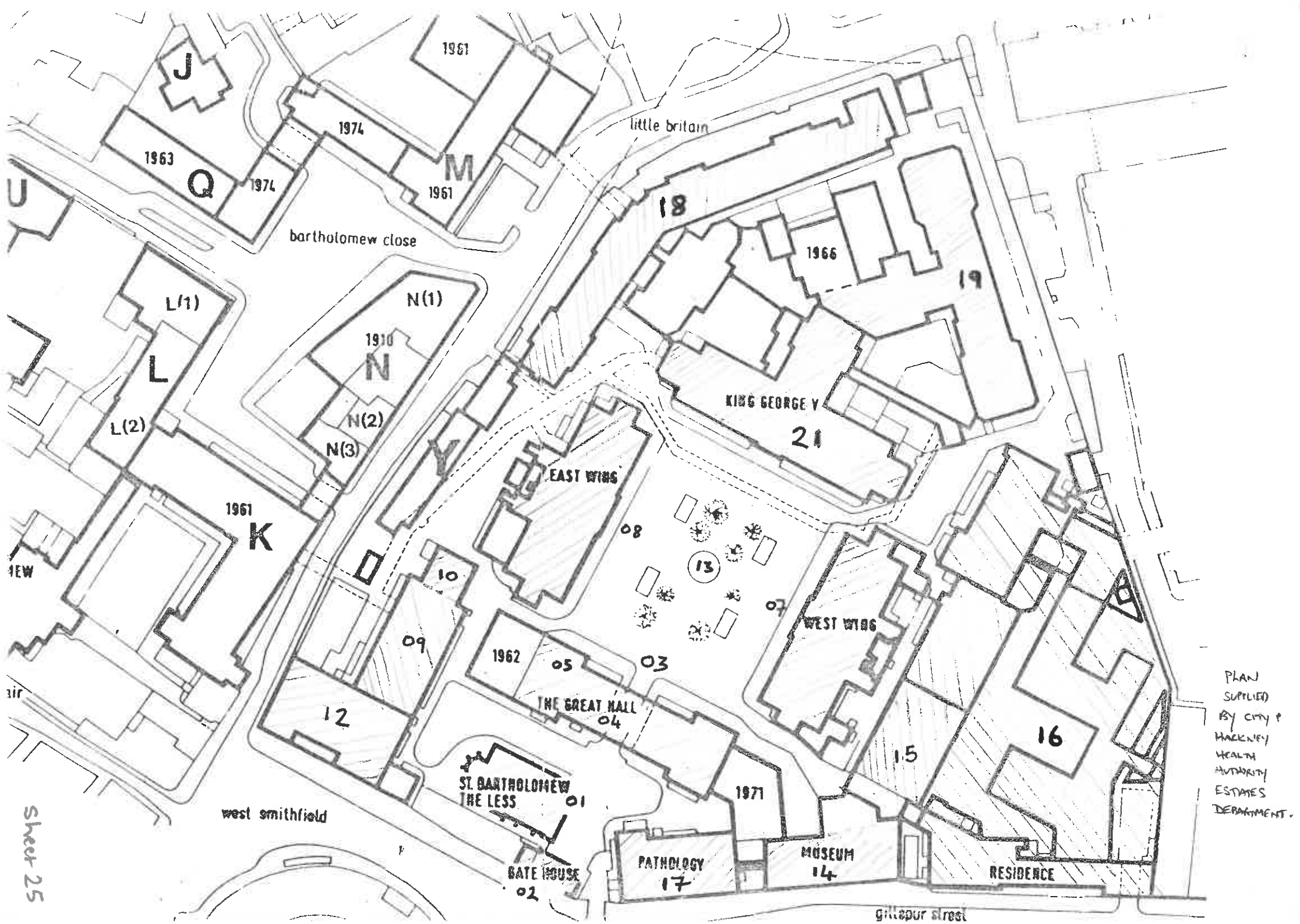


GROUND FLOOR PLAN OF THE SURGICAL, MEDICAL AND OPERATING THEATRE BLOCKS

KING GEORGE V BLOCK

New Surgical Block (19), operating theatres (20) and Medical Block (21), 1927-1932

(Architects' Journal, 24 June 1937, p. 113)


1961
J
1974
1963
Q
1974
M
1961
little britain
bartholomew close
18
1966
19
L(1)
N(1)
1910
N
L
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L(2)
N(3)
KING GEORGE V
21
EAST WING
1961
K
08
13
10
07
WEST WING
09
1962
05
03
THE GREAT HALL
04
12
16
15
ST. BARTHOLOMEW THE LESS
01
1971
west smithfield
PATHOLOGY
17
MUSEUM
14
RESIDENCE
GATE HOUSE
02
Gilkapur street
PLAN SUPPLIED BY CITY & HACKNEY HEALTH AUTHORITY ESTATES DEPARTMENT.
Sheet 25