

United States Department of the Interior  
National Park Service

# National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form*. If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. Place additional certification comments, entries, and narrative items on continuation sheets if needed (NPS Form 10-900a).

## 1. Name of Property

Historic name Wheatley-Provident Hospital

Other names/site number N/A

Name of related Multiple Property Listing N/A

## 2. Location

Street & number 1826 Forest Avenue

N/A

not for publication

City or town Kansas City

N/A

vicinity

State Missouri Code MO County Jackson

Code 095

Zip code 64108

## 3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended,

I hereby certify that this X nomination request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60.

In my opinion, the property X meets does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance:

national statewide X local

Applicable National Register Criteria: X A B C D

  
Signature of certifying official/Title

8/18/2020  
Date

Missouri Department of Natural Resources

State or Federal agency/bureau or Tribal Government

In my opinion, the property meets does not meet the National Register criteria.

Signature of commenting official

Date

Title

State or Federal agency/bureau or Tribal Government

## 4. National Park Service Certification

I hereby certify that this property is:

entered in the National Register

determined eligible for the National Register

determined not eligible for the National Register

removed from the National Register

other (explain):

Signature of the Keeper

Date of Action

Wheatley-Provident Hospital  
Name of Property

Jackson County, Missouri  
County and State

## 5. Classification

### Ownership of Property

(Check as many boxes as apply.)

<input checked="" type="checkbox"/>	private
<input type="checkbox"/>	public - Local
<input type="checkbox"/>	public - State
<input type="checkbox"/>	public - Federal

### Category of Property

(Check only **one** box.)

<input checked="" type="checkbox"/>	building(s)
<input type="checkbox"/>	district
<input type="checkbox"/>	site
<input type="checkbox"/>	structure
<input type="checkbox"/>	object

### Number of Resources within Property

(Do not include previously listed resources in the count.)

Contributing	Noncontributing	
1		buildings
		sites
		structures
		objects
1	0	<b>Total</b>

### Number of contributing resources previously listed in the National Register

N/A

## 6. Function or Use

### Historic Functions

(Enter categories from instructions.)

HEALTHCARE: Hospital

### Current Functions

(Enter categories from instructions.)

Vacant/Not in Use

## 7. Description

### Architectural Classification

(Enter categories from instructions.)

Late 19<sup>th</sup> and early 20<sup>th</sup> Century American Movements

### Materials

(Enter categories from instructions.)

foundation: STONE: Limestone

walls: STONE: Limestone

roof: Not Visible

other:

☒

NARRATIVE DESCRIPTION ON CONTINUATION PAGES



Wheatley-Provident Hospital  
Name of Property

Jackson County, Missouri  
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## 8. Statement of Significance

### Applicable National Register Criteria

(Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

- ☒ A Property is associated with events that have made a significant contribution to the broad patterns of our history.
- ☐ B Property is associated with the lives of persons significant in our past.
- ☐ C Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.
- ☐ D Property has yielded, or is likely to yield, information important in prehistory or history.

### Criteria Considerations

(Mark "x" in all the boxes that apply.)

Property is:

- ☐ A Owned by a religious institution or used for religious purposes.
- ☐ B removed from its original location.
- ☐ C a birthplace or grave.
- ☐ D a cemetery.
- ☐ E a reconstructed building, object, or structure.
- ☐ F a commemorative property.
- ☐ G less than 50 years old or achieving significance within the past 50 years.

☒ STATEMENT OF SIGNIFICANCE ON CONTINUATION PAGES

### Areas of Significance

ETHNIC HERITAGE/BLACK

HEALTH/MEDICINE

### Period of Significance

1918-1972

### Significant Dates

1918

1926

### Significant Person

(Complete only if Criterion B is marked above.)

N/A

### Cultural Affiliation

N/A

### Architect/Builder

Owen & Payson (1917-18 remodel of 1902 bldg)

Hoit, Price and Barnes (1926 addition)

## 9. Major Bibliographical References

**Bibliography** (Cite the books, articles, and other sources used in preparing this form.)

### Previous documentation on file (NPS):

- ☒ preliminary determination of individual listing (36 CFR 67 has been requested)
- ☐ previously listed in the National Register
- ☐ previously determined eligible by the National Register
- ☐ designated a National Historic Landmark
- ☐ recorded by Historic American Buildings Survey # \_\_\_\_\_
- ☐ recorded by Historic American Engineering Record # \_\_\_\_\_
- ☐ recorded by Historic American Landscape Survey # \_\_\_\_\_

### Primary location of additional data:

- ☒ State Historic Preservation Office
- ☐ Other State agency
- ☐ Federal agency
- ☐ Local government
- ☐ University
- ☒ Other

Name of repository: **Black Archives of Mid-America; SHSMO; Missouri Valley Special Collections KCPL**

Historic Resources Survey Number (if assigned): \_\_\_\_\_

Wheatley-Provident Hospital  
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## 10. Geographical Data

**Acreage of Property** Less than one acre

### Latitude/Longitude Coordinates

Datum if other than WGS84: \_\_\_\_\_

(enter coordinates to 6 decimal places)

1 39.090515 -94.569455 3 \_\_\_\_\_  
Latitude: Longitude: Latitude: Longitude:

2 \_\_\_\_\_ 4 \_\_\_\_\_  
Latitude: Longitude: Latitude: Longitude:

### UTM References

(Place additional UTM references on a continuation sheet.)

\_\_\_\_\_ NAD 1927 or \_\_\_\_\_ NAD 1983

1 \_\_\_\_\_  
Zone Easting Northing

3 \_\_\_\_\_  
Zone Easting Northing

2 \_\_\_\_\_  
Zone Easting Northing

4 \_\_\_\_\_  
Zone Easting Northing

**Verbal Boundary Description** (On continuation sheet)

**Boundary Justification** (On continuation sheet)

## 11. Form Prepared By

name/title Emily Lenhausen, Rachel Nugent

organization Rosin Preservation date August 4, 2020

street & number 1712 Holmes telephone 816-472-4950

city or town Kansas City state MO zip code 64108

e-mail rachel@rosinpreservation.com

## Additional Documentation

Submit the following items with the completed form:

- **Maps:**
  - A **USGS map** (7.5 or 15 minute series) indicating the property's location.
  - A **Sketch map** for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.
- **Continuation Sheets**
- **Photographs**
- **Owner Name and Contact Information**
- **Additional items:** (Check with the SHPO or FPO for any additional items.)

**Paperwork Reduction Act Statement:** This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C. 460 et seq.).

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Office of Planning and Performance Management, U.S. Dept. of the Interior, 1849 C. Street, NW, Washington, DC.

Wheatley-Provident Hospital  
Name of Property

Jackson County, Missouri  
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## Photographs

Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels (minimum), 3000x2000 preferred, at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map. Each photograph must be numbered and that number must correspond to the photograph number on the photo log. For simplicity, the name of the photographer, photo date, etc. may be listed once on the photograph log and doesn't need to be labeled on every photograph.

## Photo Log:

Name of Property: **Wheatley-Provident Hospital**

City or Vicinity: **Kansas City**

County: **Jackson County** State: **Missouri**

Photographer: **Brad Finch, f-stop Photography**

Date

Photographed: **February 20, 2020**

Description of Photograph(s) and number, include description of view indicating direction of camera:

- 1 of 24: Primary (east) elevation, view SW.
- 2 of 24: Primary (east) elevation, view SW.
- 3 of 24: Primary (east) and south elevations, view NW.
- 4 of 24: South elevation, view N.
- 5 of 24: South and west (rear) elevations, view NE.
- 6 of 24: West (rear) elevation, view N.
- 7 of 24: West (rear) and north elevations, view SE.
- 8 of 24: North elevation, view S.
- 9 of 24: 1926 wing portico detail, primary (east) elevation, view S.
- 10 of 24: 1902 parapet detail, primary (east) elevation, view W.
- 11 of 24: Typical window detail, primary (east) elevation, view W.
- 12 of 24: 1902 wing, second floor, view SE.
- 13 of 24: 1926 wing, first floor corridor, view S.
- 14 of 24: 1926 wing, second floor corridor, view N.
- 15 of 24: 1926 wing, second floor, Intern Room, typical finishes, view NE.
- 16 of 24: 1926 wing, second floor connection to 1902 wing, view SW.
- 17 of 24: 1926 wing, first floor landing, view W.
- 18 of 24: 1926 wing, second floor landing, view NW.
- 19 of 24: 1926 wing, first floor, vestibule and receiving office, view NE.
- 20 of 24: 1926 wing, first floor, typical historic finishes, view NE.
- 21 of 24: 1926 wing, second floor, Intern Room, typical historic finishes, view NE.
- 22 of 24: 1926 wing, second floor, Utility Room, typical historic finishes, view W.
- 23 of 24: 1926 wing, second floor, treatment ward, view SE.
- 24 of 24: 1926 wing, second floor, typical historic cement base.

## Figure Log:

Include figures on continuation pages at the end of the nomination.

Figure 1. Location Map. *Source: Google Maps, 2020.*

Figure 2. Context Map. *Source: Google Maps, 2020.*

Figure 3. Boundary Map. *Source: Google Maps, 2020.*

Figure 4. Sanborn Fire Insurance Map, 1909, Volume 3, Sheet 317. 1902 Wing, formerly St. Joseph Catholic School, is extant. *Source: Kansas City Public Library.* <https://www.kclibrary.org/research-resources/research-databases/fire-insurance-maps-online-fimo>.

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Figure 5. Sanborn Fire Insurance Map, 1951, Volume 3, Sheet 317. 1902 Wing, formerly St. Joseph Catholic School, and 1926 wing are extant. *Source: Kansas City Public Library.* <https://www.kclibrary.org/research-resources/research-databases/fire-insurance-maps-online-fimo>.

Figure 6 Exterior and First Floor Photo Map. *Source: Adapted from Hoit, Price & Barnes, 1926.*

Figure 7 First Floor Plan and Photo Map. *Source: Adapted from Hoit, Price & Barnes, 1926.*

Figure 8. Second Floor Plan and Photo Map. *Source: Adapted from Hoit, Price & Barnes, 1926.*

Figure 9. Basement Floor Plan. *Source: Adapted from Hoit, Price & Barnes, 1926.*

Figure 10. 1902 Building, c. 1918. *Source: Black Archives of Mid-America – Wheatley-Provident Hospital File.*

Figure 11. Historic Photograph, c. 1950. *Source: State Historical Society of Missouri – Kansas City.*

Figure 12. Historic photograph from Operating Room, undated. *Source: Black Archives of Mid-America – Wheatley-Provident Hospital File.*

Figure 13. Historic Photograph of Children's Wing. *Source: Black Archives of Mid-America – Wheatley-Provident Hospital File.*

Figure 14. Historic Photograph of Children's Wing. *Source: Black Archives of Mid-America – Wheatley-Provident Hospital File.*

Figure 15. Dr. John E. Perry, photograph. *Source: Black Archives of Mid-America – Wheatley-Provident Hospital File.*

Figure 16. Historic Photo of Perry Sanatorium, 1214 Vine Street, 1940. *Source: Kansas City Tax Assessor Photos, 1940, Missouri Valley, Special Collections.*

<http://mdh.contentdm.oclc.org/cdm/singleitem/collection/kcpltax/id/1039/rec/2>.

Figure 17. Historic Photo General Hospital #2, 1932 (demolished). *Source: Jackson County Medical Journal, Volume XXVI, No. 41, cover.*

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Wheatley-Provident Hospital

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N/A

Name of multiple listing (if applicable)

## SUMMARY

The Wheatley-Provident Hospital at 1826 Forest Avenue, Kansas City, Jackson County, Missouri is an early twentieth-century two-story hospital with an L-shaped plan and flat roof. A 1902 wing forms the oldest portion of the hospital and fronts Forest Avenue to the east. A Children's Wing, constructed in 1926, extends from the northwest corner to form the L-shaped plan. Regular fenestration and ashlar cut limestone cladding unify the two wings. Exterior ornamentation is restrained, befitting the institutional nature of the building, and concentrated at the parapet. Each component of the hospital retains the exterior expression and interior spaces, including the clinic and ward rooms, that communicate its historic function. While there extended vacancy and neglect of the building has resulted in extensive deterioration or vandalism in some areas, most of the demising walls remain extant to communicate the locations of the waiting rooms, treatment rooms, and support spaces associated with Wheatley-Provident Hospital even if the doors to these rooms are missing. Both wings maintain exterior entrances while interior corridors connect the two wings. Although a 2018 fire and exposure to the elements have damaged portions of the building, Wheatley-Provident Hospital retains integrity. The historic form, massing, and plan are unchanged, and the ashlar cut limestone cladding is retained. While many of the historic wood window sashes are missing, some of the historic wood frames, as well as all the historic masonry openings and fenestration pattern remain intact. Although fire has substantially damaged the 1902 wing, sufficient historic material remains to communicate historic finishes. The 1926 Children's Wing retains its historic plan and finishes including plaster walls with cement wainscot, concrete floors, and plaster ceilings.

## NARRATIVE

### SETTING

The Wheatley-Provident Hospital a two-story historic hospital located in a primarily commercial neighborhood roughly bound by Interstate 70 to the north; Paseo Boulevard to the east; the Union Pacific Railroad tracks to the south; and US Highway 71 to the west. The neighborhood is located approximately one mile southeast of the central business district in downtown Kansas City and less than one-half mile south of the Interstates 70 and 670 interchange and approximately one block east of US Highway 71 (*Figure 1*). Historic one and two-story commercial and light industrial resources of varying ages and in a variety of styles characterize the resources immediately adjacent to the Wheatley-Provident Hospital while an educational complex is roughly centered at the northern end of the neighborhood (*Figure 2*). Paved surface parking lots are spread throughout the area and a large, grassy vacant lot is located one block to the north. A grassy athletic field and asphalt track is associated with the educational complex.

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Wheatley-Provident Hospital

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N/A

Name of multiple listing (if applicable)

## SITE

The Wheatley-Provident Hospital is sited on an irregular parcel centered on the east half of a block bound by East 18<sup>th</sup> Street to the north; Forest Avenue to the east; East 19<sup>th</sup> Street to the south; and Troost Avenue to the west (*Figure 3*). The parcel fronts Forest Avenue and measures approximately eight-tenths of an acre. A concrete sidewalk and shallow concrete curb line portions of the Forest Avenue frontage, however, they are absent from the remaining perimeter. The property has been vacant for more than a decade. That neglect has led to the extensive vegetative overgrowth and vines growing on the stone walls. A large non-historic earthen mound is located northeast of the building and a non-historic informal dirt drive in the northeast corner extends from Forest Avenue to the rear of the parcel. The earthen mound covers the concrete walkway that historically connected the public sidewalk to the primary entrance to the 1926 wing.

## EXTERIOR

The Wheatley-Provident Hospital is a two-story hospital constructed in two phases to form an L-shaped building. The original block (1902) fronts Forest Avenue while a 1926 Children's Ward projects from the northwest corner to create an L-shaped plan (*Figures 4 and 5, Photo 1*).<sup>1</sup> Ashlar cut limestone cladding, flat roofs, and regularly punched fenestration unify the two wings. The extended vacancy of the building has resulted in neglect, illustrated by vandalism, graffiti, and the growth of vines on the walls. Many of the windows and exterior doors are gone, either deteriorated or purposely broken.

### 1902 Wing

#### *Primary (East) Elevation*

Four bays organize the primary (east) elevation at each story (*Photos 2 and 3*). An entrance defines the north first-story bay and plywood boards fill the bay. A hipped portico with an asphalt roof extends above the entrance bay and shelters a concrete stoop. Ashlar cut limestone pillars support the portico roof and while concrete stairs access the stoop. A stepped ashlar cut limestone wall lines the south side of the stairs. A matching wall lined the north side, however, has since been destroyed (*Figure 6*). A metal pipe railing bisects the stairs and extends from ground level to the stoop. Window openings define the remaining primary elevation bays. There are three regularly spaced openings to the south of the entrance at the first story. The second story has four regularly spaced openings directly above the first-story openings. The basement has three short openings directly beneath the first-story window

<sup>1</sup> The 1902 block constructed as St. Joseph Catholic School, as shown on the 1909 Sanborn (*Figure 4*).

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Wheatley-Provident Hospital

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N/A

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openings. Historic one-over-one wood sashes remain in the north-two second story bays while the third from north second-story bay lacks window sash. Plywood boards fill the remaining window openings. Limestone lintels and concrete sills accent each window bay, including the basement. A stone parapet tops the elevation. A limestone modillion course accents the bottom of the parapet while a large, arched limestone name stone inscribed "WHEATLEY PROVIDENT HOSPITAL" is centered on top of the parapet (*Photo 10*).

*South Elevation*

The south elevation is seven bays wide at both stories (*Photo 4*). Each of the regularly spaced bays contains a single window opening at each story, including the basement. The west half of the south elevation projects from the east half of the elevation plane and contains the west-three bays. The stone cladding on this half of the elevation is more uniform in color and face roundness, conveying the use of a higher quality of stone.<sup>2</sup> The stone used for the west half of the building has more variety in color, more of a fieldstone quality. A concrete-clad bump out is positioned at the intersection of the two planes and contains a window (*Photo 3*). A hipped asphalt roof tops the bump out and plywood fills the east-facing entrance bay. A window opening is present at the second story above the entrance. The west-three window bays on the second floor are empty while the remaining bays are boarded. Limestone lintels and concrete sills accent the window bays. The basement openings are much shorter in height but retain the same stone sills and lintels as the openings in the upper stories. A historic steel fire escape extends from the east-two second-story bays. A limestone parapet and modillion course continues from the primary elevation to ornament the east half of the elevation only and is present on the portions of the façade that have the higher quality stone.

*West (rear) Elevation*

The west (rear) elevation is three bays wide at the first story and five bays wide at the second (*Photos 5 and 6*). Each of the regularly spaced bays contains a single window opening at each story. The basement has a single opening below the center bay of the first story. A one-story concrete block shed addition with a corrugated metal roof projects from the south half of the elevation and covers the historic façade.<sup>3</sup> Two small, rectangular window openings pierce the concrete block. Plywood fills the north window opening, which retains its frame, while concrete block infills the south opening. Three bays pierce the first story north of the addition. Window openings define the north-two bays and contain plywood boards. A centered secondary entrance defines the remaining bay. Plywood fills the doorway. A concrete loading dock extends

<sup>2</sup> The reason for this variation is currently unknown. This stone is similar in appearance to the 1926 wing cladding and may represent work completed in association with its construction.

<sup>3</sup> The construction date is unknown; however, the addition does not appear on the 1951 Sanborn Map. Historic aerials indicate the addition may be present by 1970.

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below the bays. A concrete ramp perpendicular to the dock accesses the loading dock between the window bays (*Photo 6*).<sup>4</sup> A large opening in the south end of the loading dock accesses a basement entrance. Window openings define all five second-story bays. The windows have been destroyed and the bays left open. Limestone lintels and concrete sills accent the north-four bays. A portion of the roof has collapsed above the fifth bay, damaging the opening.

*North Elevation*

The north elevation is similar to the south. It is six bays wide at both stories (*Photo 1*). The west half of the elevation contains two bays and projects northward from the east half of the elevation plane, which contains four bays. One east-facing bay is centered in each story of the narrow wall where the west half juts northward. An entrance fills the first-story east-facing bay while a window opening fills the second-story east-facing bay. Window openings define the remaining north elevation bays and feature limestone lintels and concrete sills. The second and fifth bays are paired window openings while the remaining bays have single window openings. These bays are wider and also set lower in the wall, possibly corresponding to an internal stairwell. There are basement windows in the first, fifth, and sixth bays. Similar to other elevations, the basement windows are shorter than the window openings in the stories above, but they are the same width. The wood deck leading to the entrance to the west half covers the basement wall below the middle bays. Plywood boards cover most openings, however partial historic one-over-one wood windows remain in the second and sixth second-story bays. A limestone parapet and modillion course continue from the primary elevation to ornament the east half of the elevation only. A limestone chimney is centered on the elevation between the third and fourth bays. The chimney is nearly flush with elevation plane and pieces the parapet above. The 1926 Children's Wing addition extends from the west corner of the north elevation.

**1926 Children's Wing**

*Primary (east) Elevation*

The primary (east) elevation is eight bays wide at the first story and basement, and ten bays wide at the second story (*Photos 1 and 9*). The primary entrance defines the fourth bay while windows define the remaining first-story bays. The basement has windows that are shorter than the openings in the stories above, but they are the same width and align with the upper openings. A limestone portico shelters the entrance and has an arched opening and gabled asphalt roof (*Photo 9*). A gabled limestone parapet with a concrete cap accents the gable while arched openings pierce the north and south portico walls. The primary entrance is boarded, however a wood transom frame and door casings are visible on the interior. All first-story window bays are boarded and feature limestone lintels and concrete sills. The second-story

<sup>4</sup> The construction date is unknown; however, the dock and ramp appear contemporary to one another. Neither is present on the 1951 Sanborn Map.



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window bays are open, however historic wood window casings remain in place. Limestone lintels and concrete sills accent all second-story bays. The fourth and fifth windowsills are raised to accommodate the portico below. A low limestone parapet with concrete coping tops the elevation. Narrow crenellations and a central gabled section reference a gothic revival battlement. A concrete medallion is centered in the gabled parapet.

*South Elevation*

The south elevation is three bays wide at the first and second stories (*Photo 6*). An entrance defines the east first-story bay. The entrance opens to the loading dock that also abuts the west elevation of the 1902 wing, and features a limestone lintel. Plywood fills the bay. Window openings define the remaining south-elevation bays. The two first-story window bays are boarded while the second-story window bays are open. The basement has one window opening below the westernmost bay. It is shorter than the upper windows, but the same width. Limestone lintels and concrete sills accent all window bays. A square limestone chimney projects from the west corner of the elevation and rises several feet above the parapet and a brick extension tops the limestone chase (*Photo 5*). The east corner of this elevation attaches to the northwest corner of the 1902 wing.

*West (rear) Elevation*

The west (rear) elevation is nine bays wide at the first story (*Photo 7*). Window openings define all first story bays. The seventh bay is offset from the others and likely corresponds to an interior stairwell. All first-story windows are currently boarded. Eleven window bays of varying size organize the second story. The sixth, seventh, and tenth bays are significantly smaller than the others while the eighth bay is offset, likely in correspondence with an interior stairwell. The second bay is boarded while all others are open. The basement has nine bays, each containing a single window opening that is shorter than the openings in the upper stories. The second bay from the north is wide while the rest of the bays have the same width as the openings above. The fifth and sixth bays have openings that are shorter than the other basement window openings. The fifth bay appears to be the coal chute. Limestone lintels and concrete sills accent all bays and no sashes or glazing remain visible. The chimney is flush with the south end of the elevation.

*North Elevation*

Five bays organize the north elevation at both stories (*Photo 8*). Window openings define all bays. The fifth second-story bay retains a partial one-over-one historic wood window which lacks glazing, however all other windows are boarded. Limestone lintels and concrete sills accent the window bays. A historic fire escape extends from ground level to the center second-story bay and a square metal vent flue spans both stories between the first and second bays.

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N/A

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The basement has three bays that align with the first, third, and fifth bays above. The basement windows are shorter than the upper openings, but are the same width and have stone sills and lintels. A non-historic metal sign reading "ASYLUM" tops the elevation and is associated with the building's use as a haunted house attraction between 1992 and 1996.

## INTERIOR

### 1902 Wing

The 1902 wing has been damaged by the elements and a 2018 fire. The first floor is inaccessible due to fire damage, however portions are visible from the second floor above (*Photo 12*). Visible finishes include brick and historic plaster walls, concrete flooring, and exposed wood ceiling elements. The historic floorplan appears to be intact, with a large open room at the northwest corner and a series of smaller rooms and corridors to the south and east. The second floor has been badly damaged, preventing access to most of the floor. Much of the wood floor in the northwest portion has collapsed as has the ceiling above (*Photo 12*). Brick partitions subdivide the second floor and many openings have been enlarged or otherwise damaged, distorting their historic shape. Historic plaster remains on most walls, however large sections have fallen throughout, revealing the historic brick masonry underneath.

### *Basement*

The basement (*Figure 9*) is rectangular in plan.<sup>5</sup> A double-loaded corridor bisects the plan and small, roughly rectangular rooms flank the corridor. Typical historic finishes include a concrete floor, exposed wood ceiling elements, and limestone foundation perimeter walls. Historic limestone and brick partitions subdivide the basement. Partial historic steel sash windows remain in some locations; however, most basement window bays are boarded and lack windows.

### 1926 Children's Wing

The 1926 Children's Wing retains much of its historic configuration and finishes throughout. The alterations to the floorplan have been additive rather than subtractive. Non-historic partitions were constructed in a few locations but historic partitions were not removed. The first floor has five small exam rooms, a large waiting area, a suite of rooms for the X-ray department, a laboratory, and the receiving office. The second floor has two large wards, utility room, kitchen, toilet, the director's room, the sewing and linen room, the Intern room, two small closets, and two small spaces identified only as "Room." The variety of room sizes communicates the historic function of the building as a hospital with small spaces dedicated to

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medical specialties and large wards in lieu of private patient rooms for accommodating patients. Typical historic finishes on the first and second floors were simple and economical, including plaster on metal lath walls, cement wainscot, plaster on metal lath ceilings, concrete base, concrete floors, and wood door casings and transoms. Vandalism, including graffiti, and the elements have damaged all interior spaces to varying degrees. Water infiltration due to areas of the roof that have been compromised has damaged some of the plaster on the walls and ceilings, although most plaster is intact. The concrete floors with integrated concrete bases are intact in most locations. Wood door casings are extant in most locations.

*First Floor*

The first floor is rectangular in plan and features small exam and patient rooms or office space arranged along a north-south double loaded corridor (*Figures 6 and 7, Photos 13 and 19*). Several significant interior spaces remain intact. The primary entrance opens to an open vestibule centered on the east perimeter wall. The orthopedic room abuts the vestibule to the south while the laboratory occupies the southeast corner of the floor. The receiving office, medical, and surgical rooms are positioned on the east wall north of the vestibule. The nose & throat and dental rooms line the north end of the floor while the eye department occupies the northwest corner of the floor. The clinic-waiting room, which historically was open to the vestibule and the receiving room, abuts the eye department to the south. A non-historic concrete masonry unit wall subdivides the clinic-waiting room into two smaller spaces. A historic staircase separates the clinic-waiting room and the suite of small rooms historically associated with the x-ray department, which is in the southwest corner of the floor.

Historic corridor finishes include concrete flooring, plaster on metal lath walls, cement wainscot, and plaster on metal lath ceilings. A non-historic concrete masonry unit partition forms the center portion of the west corridor wall and encloses the clinic-waiting room (*Photo 13*). Door openings in this section contain metal casings. Wood door casings, trim, and large transoms accent doorways in the remaining, historic plaster sections and the eastern corridor wall. Typical exam and patient room and office finishes are similar to those in the corridor (*Photo 20*). Historic wood or metal doors remain in some doorways. There does not appear to be a differentiation of finishes to communicate the different functions of the rooms. Materials choices are utilitarian and used throughout the building. A set of historic concrete stairs offset south-of-center on the west side of the corridor access the second floor (*Photo 17*). Stair handrails and railings are absent, however historic rectangular metal newel posts remain at the landings.

*Second Floor*

<sup>5</sup> There are no historic plans of this building, so the historic uses of the spaces in this portion of the building, especially the basement, are unknown.

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The second-floor landing opens to an L-shaped double-loaded corridor which access the southern two-thirds of the second floor (*Figure 8, Photo 18*). Second-floor corridor finishes are similar to those on the first floor (*Photo 14*). The kitchen, director's office, and two spaces labeled simply as "Room" line the east side of the corridor; storage rooms and a toilet line the south side of the corridor; the "Intern" room, closet, sewing and linen room, child's toilet, and a utility room line the north side of the corridor. These spaces retain historic finishes similar to those on the first floor, including plaster walls and ceilings and concrete floors with an integrated base (*Photos 15, 21, and 22*). A doorway in the southeast corner opens to the 1902 wing (*Photo 16*).

A wide doorway at the north end of the corridor opens to a large room with a square plan (*Photo 23*). This space was historically designated as the Ward, with twelve beds, and the "Wait-Awhile-Ward" with thirteen beds (*Figure 14*). The finishes are typical of the second floor and include concrete flooring, plaster walls, and a plaster ceiling. Wide three-part window openings flank the entrance and historically allowed observation into the room from the adjacent kitchen and utility rooms. The glazing is absent, although the wood casings remain. A pair of historic square columns clad in plaster with concrete bases is roughly centered in the room, opposite the entrance. Low concrete bases extend from the columns and terminate at the east and west perimeter walls, representing a glazed partition that historically subdivided the space into treatment wards.<sup>6</sup> Historic wood framing for a large six-part window tops the east concrete base and extends to the east perimeter wall. Similar low, concrete bases extend from the north perimeter wall and flank the center bay. Wood framing tops both bases and formerly contain large four-part windows, however the glazing has since been removed. These partitions historically created five small semi-private rooms.

### *Basement*

Concrete stairs in the south end of the first-floor corridor access the basement below (*Figure 9*). The basement is rectangular in plan and a north-south double-loaded corridor runs most of the length. The perimeter walls are limestone while historic partitions in a variety of materials are spaced throughout. Most partitions are brick or hollow tile. Exposed concrete ceilings and concrete floors are present throughout the basement. Small rooms of unknown use line the east and west perimeter walls.<sup>7</sup> A kitchen with narrow rectangular plan lines the approximate north two-thirds of the east wall. Finishes include historic mid-century glazed tile walls, concrete

<sup>6</sup> The partition separating the treatment wards has been mostly dismantled. The historic location of the partition has been lightened on the corresponding plan (*Figure 8*) to reflect this.

<sup>7</sup> The 1926 Hoyt, Price & Barnes plans indicate these rooms originally served utilitarian functions including boiler and coal rooms, however their subsequent and most recent uses are unknown.

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flooring, and an exposed concrete ceiling. A long, rectangular service window opens from the west kitchen wall into a cafeteria. Cafeteria finishes match those present in the kitchen.<sup>8</sup>

## INTEGRITY

The Wheatley-Provident Hospital remains in its original location and retains its historic mass and L-shaped plan. The building retains the historic configuration of rooms in a variety of sizes to accommodate all the functions associated with a hospital, including medical treatments, patient support services, and administration. The simple, utilitarian finishes and unornamented spaces throughout the building communicate the economic status of the hospital throughout its history. The exterior does not appear significantly altered. While most historic one-over-one wood windows have been lost, partial extant historic wood windows are in several positions including at the 1902 east elevation and 1926 north elevation. Historic steel sash basement windows remain in some locations. The fenestration pattern is unchanged, and the masonry window openings remain intact at all elevations. Exterior alterations are limited to loading dock and shed addition at the west (rear) elevation. The date of construction is unknown; however, Sanborn maps and historic aerials suggest it may fall between 1951 and 1970, and would thus be historic alterations completed within the period of significance and associated with ongoing hospital activities. While exposure to the elements and a 2018 fire have significantly damaged the 1902 wing, large portions of historic fabric sufficient to represent historic finishes, including wood floors and plaster walls, are extant. The 1926 Children's Wing is in far better condition and retains the majority of historic interior finishes including plaster walls with concrete wainscot, concrete floors, and plaster ceilings. In addition to historic finishes, the Children's Wing retains its historic plan with few alterations. On the first floor, the building retains the receiving office, the clinic waiting room, the X-ray department, and specialty rooms for medical care: Eye, Nose and Throat, Dental, and Surgical. The second floor retains the Ward and the "Wait-Awhile Ward" to accommodate patients, as well as the director's office and the kitchen. Although non-historic concrete masonry unit partitions are present along the west wall of first-floor corridor, these partitions preserve the historic plan as depicted in historic architectural plans. While partitions have been removed from the west end of the second floor, the historic columns and concrete base remain in place and reflect the location of the missing partition, and historically the glazed partial-height partitions provided visual transparency between the spaces.

<sup>8</sup> The 1926 Hoyt, Price & Barnes plans suggest the kitchen and cafeteria spaces occupy the former laundry space. It is unclear where the laundry was relocated.

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**SUMMARY**

Wheatley-Provident Hospital (Hospital) is locally significant under Criterion A in the areas of ETHNIC HISTORY/BLACK and HEALTHCARE/MEDICINE as the only private hospital for African Americans in Kansas City from the era of segregation. It was also the only private<sup>9</sup> hospital for African American patients, and one of only two such hospitals (public or private) in Kansas City, throughout the period of significance. Dr. John Edward Perry, an African American physician in Kansas City, founded the Perry Sanitarium in 1903 as a private community medical facility and training center for nurses. Perry Sanitarium merged with another organization to become Wheatley-Provident Hospital and Nurse Training Association. In 1918, the newly formed organization purchased an existing building (the 1902 wing of the nominated property) to house its operation. With an entirely African American staff and ownership, Wheatley-Provident Hospital was the only private hospital in Kansas City, Missouri to provide much needed community health services for African American patients and practical training for African American nurses. The facility expanded its services and its physical plant in 1926 with the construction of a new wing. By 1936, Wheatley-Provident Hospital was one of 122 hospitals in the nation owned and operated by African Americans, and one of only sixteen such hospitals in the nation to receive an "A class" rating by the American College of Surgeons.<sup>10</sup> Wheatly-Provident Hospital operated in the nominated building until 1972 when the organization moved to the new Martin Luther King, Jr. Hospital and the nominated building closed. Although overt segregation and discrimination lessened in the 1960s, the primary patient demographic at Wheatley-Provident Hospital was still African American throughout its years of service. The period of significance begins in 1918 when the newly established Wheatley-Provident Hospital began operations in the existing building on Forest Avenue, and ends in 1972 when the Hospital closed at that location. The majority of the ownership, staff, and patients was African American throughout the period of significance. With the demolition of all other public and private hospital buildings specifically constructed for the care of African American patients, Wheatley-Provident Hospital is significant as the only extant such resource in Kansas City.

<sup>9</sup> "Private" hospitals were funded with private money, through charitable organizations or individual donors, as well as the minimal revenue from patients. By comparison, "Public" hospitals were funded by the local, state, and federal government.

<sup>10</sup> Margaret Klein, *The Wheatley-Provident Hospital*, A Special Study for the Council of Social Agencies, Kansas City, Missouri, 1936, 1.

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## NARRATIVE

### WHEATLEY-PROVIDENT HOSPITAL AND HEALTHCARE FOR AFRICAN AMERICANS

#### *Late Nineteenth and Early Twentieth Century Hospitals*

The healthcare services for African Americans, including those in Kansas City, at the turn of the twentieth century were substantially limited. Wheatley-Provident Hospital filled a substantial need in the community for decades. There were no other public or private hospitals in Kansas City designed to serve African American patients and provide training for African American physicians and nurses. Only General Hospital #2 (*Figure 17*), the segregated ward of city's only public hospital, served African American patients, but did not provide training for African American nurses or doctors.<sup>11</sup> Healthcare for all persons in the nineteenth century was less sophisticated in terms of the understanding of the causes and treatments of various conditions and in terms of the available medical technology. In the early- to mid-nineteenth century, people often treated themselves when plagued with illness and injury. They used folk remedies, superstitious rituals, patent medicines, and medical books that were written for laymen and do-it-yourselfers.<sup>12</sup> By the mid-nineteenth century the medical field became more professional. Medical societies formed across the country to promote ethics, education, and standardized practices. The American Medical Association was established in 1847; the Missouri State Medical Association was established in 1850; the Jackson County Medical Society formed in 1881.<sup>13</sup> The organizations met on a regular basis to discuss the dissemination of medical information and best practices among individuals in the profession.

By the late 1800s medical colleges and educational institutions were popping up around the country to formally train doctors. In Missouri most of these were located in Kansas City and St. Louis, including the Medico-Chirurgical College and the University Medical College in Kansas City. However, untrained "doctors" were still prevalent throughout the country. In 1883 the Missouri Medical Practice Act required that self-proclaimed physicians without a medical diploma or certificate pass an examination administered by the State Board of Health in order to continue practicing.<sup>14</sup> In addition to professional requirements, advancements in science and technology helped change the landscape of medicine. By the turn of the twentieth century researchers were beginning to understand the cause of many formerly mysterious diseases and

<sup>11</sup> General Hospital #2 occupied the former City Hospital (for white patients) at 22<sup>nd</sup> Street and McCoy Avenue, less than one mile southwest of the nominated property. The building is no longer extant and the General Hospital is now Truman Medical Center and has undergone multiple alterations and additions, but is generally located in the same area in which it was constructed originally.

<sup>12</sup> Barbara M. Gorman, Richard D. McKinzie and Theodore A. Wilson, *From Shamans to Specialists: A History of Medicine and Health Care in Jackson County Missouri*, (Kansas City, MO: Jackson County Medical Society, 1981) 16.

<sup>13</sup> Gorman, 28.

<sup>14</sup> Gorman, 57.

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how to treat them. Diagnostic tools such as microscopes and radiology came into use. Surgical procedures were improved with the use of antiseptics and anesthetics.<sup>15</sup> Physicians gradually moved from treating patients in their homes to offering treatment in a doctor's office or a hospital.

From the eighteenth century to the early twentieth century hospitals were places of last resort, where people, many of them poor, went to spend their dying days.<sup>16</sup> Most hospitals were private, often charitable, institutions, usually located in urban areas. These charitable institutions were less focused on administering therapeutic treatment than providing social order by removing the indigent from regular society.<sup>17</sup> Public hospitals operated on public funds and were required to help anyone who came to them for medical attention, regardless of race or ability to pay, although the latter required working off the debt. Most municipalities had one public hospital because that is all that public funding could support. Several prominent public hospitals originated as the medical departments of the city's almshouses.<sup>18</sup> There was thus a stigma attached to entering a hospital. Many hospitals that did offer treatment were installed in modified houses that were not ideally set up for medical treatment. As medicine changed in the early twentieth century, so did the culture of the hospital. Doctors gradually came to see the hospital as a place where they could do their best work to alleviate and cure their patient's illnesses. Wealthy patients opted to go to the hospital for treatment instead of staying home, which helped transform the hospital environment.<sup>19</sup>

African Americans experienced additional limitations on healthcare options due to the systemic racism that pervaded society. Hospitals, even public hospitals, were not automatically open to everyone. Most hospitals maintained separate wards for white and black patients, and hospitals that treated white patients rarely employed black doctors or nurses. There were few medical schools outside of Historically Black Colleges and Universities (HBCUs) that admitted African American students, so the number of formally trained black physicians and nurses remained low. Those individuals who did get medical degrees could not get jobs at white hospitals and thus could not get the practical experience necessary to become a hospital doctor. In response to the discriminatory practices in the acceptance policy of established medical associations, a group of black physicians founded the National Medical Association in 1895.

Racially exclusive Jim Crow laws that dominated all aspects of society, including housing, education, and employment, made it more difficult for African Americans to afford healthcare.

<sup>15</sup> Gorman, 65.

<sup>16</sup> Gorman, 71.

<sup>17</sup> Vanessa Northington Gamble, *Making a Place for Ourselves: The Black Hospital Movement 1920-1945*, (New York: Oxford University Press, 1995), 4.

<sup>18</sup> Gamble, 4.

<sup>19</sup> Gorman, 71.



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Additionally, after centuries of conditioning that the black man is inferior and the white man is superior, as a means of justifying slavery, many hospitals and white physicians did not feel obligated to provide black patients with the same quality of care or facility as the white patients.<sup>20</sup> That same conditioning and internalized racism fostered mistrust of black physicians and nurses, even among black patients.<sup>21</sup>

Acknowledgment of this systemic racism and its effects prompted Dr. Daniel Hale Williams, founder of the Provident Hospital and Nurse Training School in Chicago as the nation's first black-controlled hospital, issued a series of speeches in 1900 that promoted the idea of starting their hospitals and training programs for African Americans rather than try to gain acceptance and operate within the system developed by and for whites.<sup>22</sup> Dr. Williams' words inspired African Americans to establish training programs with the aim of promoting their race while some organizations led by white people opened black hospitals.<sup>23</sup> While this did lead to a rise in the number of facilities available to African American patients, Jim Crow laws and the doctrine of "separate but equal" remained limiting factors in the quality of care across the country, especially when the "equal" part was considered less important than the "separate" part. White hospitals opened "Negro" wards in ancillary buildings while black organizations founded private hospitals owned and operated by black physicians, surgeons, nurses, and administrators. The latter often encountered difficulties acquiring adequate funding for the staff and equipment necessary to maintain a functioning hospital.<sup>24</sup>

*Healthcare for African Americans in Kansas City*

The history of healthcare for African Americans in Kansas City followed the same patterns as other cities across the country.<sup>25</sup> The City Directory for Kansas City in the early twentieth century, listed hundreds of physicians, although the list was separated into those who were and those who were not members of one of the few recognized medical associations, none of which allowed African Americans. Prior to 1900, the Kansas City General Hospital, the city's only public healthcare institution, had five beds to serve the 18,000 African Americans in Kansas City.<sup>26</sup> Black physicians typically treated patients in the communities through house visits and in offices converted from homes. However, at the turn of the century, there was a growing

<sup>20</sup> Gamble, 7. Even within the white population, treatment and services were not necessarily always equal. Various immigrant groups experienced significant discrimination, but not on the magnitude experienced by African Americans.

<sup>21</sup> Gamble, 12.

<sup>22</sup> Gamble, 3.

<sup>23</sup> Gamble, 3.

<sup>24</sup> Klein, 2.

<sup>25</sup> W. Montague Cobb, *Report of the Health Specialist for Kansas City, Missouri*, Prepared for the Community Relations Project of the National Urban League, April 1946. Missouri Valley Special Collections, Kansas City Public Library, 17.

<sup>26</sup> Thomas C. Unthank, M.D., *Negro Doctors in Kansas City*, 1935, Missouri Valley Special Collections, Kansas City Public Library, 4.

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movement to establish a hospital dedicated to serving the black community, preferably staffed with black doctors and nurses.<sup>27</sup>

One of the most notable advocates for improving healthcare for African Americans in the Kansas City metro area was Dr. Thomas C. Unthank, a graduate of Howard University who moved to Kansas City in 1898. In 1902, shortly after his arrival, Unthank founded the John Lange Hospital, at 1227 Michigan Street, using a sizable donation from Lange, the manager for the Jazz musician Blind Boone.<sup>28</sup> Lange Hospital was the only other private hospital in Kansas City, Missouri dedicated to serving African American patients. John Lange was the primary means of financial support for the hospital, thus the institution closed shortly after his death in 1916.<sup>29</sup> In 1905, Unthank co-founded Douglass Hospital, a private hospital and nurse training facility for African Americans in Kansas City, Kansas.<sup>30</sup> Unthank led a group of black physicians in an effort to petition the city for a dedicated municipal hospital for black patients in Kansas City, Missouri. In 1908, when the Kansas City General Hospital moved out of its 1873 building at 22<sup>nd</sup> and McGee streets, it agreed to convert it use as the hospital for minorities. The new building two blocks south at 23<sup>rd</sup> and McGee streets was Kansas City General Hospital and the old building was renamed General Hospital No. 2.<sup>31</sup> For the first three years of operation, General Hospital No. 2 did not staff any black doctors or nurses.<sup>32</sup> At the time of its founding, Wheatley-Provident Hospital was one of four area (Kansas City, Missouri and Kansas City, Kansas) hospitals that provided healthcare to African Americans. It is the only such historic hospital with an extant building.

Funding differentiated the two types of hospitals that operated in Kansas City, Missouri. Public hospitals used local, state, and federal government funds to construct and maintain buildings, purchase equipment and supplies, and pay staff. Government funding also helped to cover the expenses incurred to treat patients unable to afford their treatments. Public hospitals were often required to treat patients regardless of their ability to pay. By comparison, private hospitals relied on private donations or charitable organizations to fund building construction and maintenance, equipment, and payroll. Most private hospitals chose to accept patients regardless of their ability to pay for treatment, although this often had a significant financial impact on an institution. Grants and fundraising campaigns provided additional means of support for private hospitals. In Kansas City, Missouri, General Hospital No. 2 was the only

<sup>27</sup> Unthank, 4.

<sup>28</sup> Charles Edward Coulter, *Take up the Black Man's Burden: Kansas City's African American Communities 1865-1939*, (Columbia, MO: University of Missouri Press, 2006), 50. Lange Hospital is no longer extant.

<sup>29</sup> Coulter, 50.

<sup>30</sup> Nancy Hulston, "Thomas C. Unthank, Physician, 1866-1932," Missouri Valley Special Collections: Biography, Kansas City Public Library. <https://kchistory.org/islandora/object/kchistory%253A115410>, (accessed February 16, 2020).

<sup>31</sup> Gamble, 9.

<sup>32</sup> Gamble, 9.

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public hospital to treat African American patients, beginning in 1980. The original General Hospital No. 2 was destroyed by fire in 1930 and rebuilt in concrete, with a concrete block addition in 1940. The 1930-1940 building was demolished circa 2007. Lange Hospital, which closed before Wheatley-Provident Hospital purchased and occupied the nominated building, was the only other private hospital in the city to treat African American patients. Douglass Hospital was a private hospital founded in the town of Quindaro, Kansas, which was later annexed into Kansas City, Kansas. Douglass Hospital closed in 1978. It occupied several buildings throughout its history, including the former Western University/Freedman's University, none of which are extant.

*The History of Wheatley-Provident Hospital*

Dr. John Edward Perry, a contemporary of Dr. Unthank and working toward the same goal of better healthcare for African Americans, was instrumental in the transformation of the healthcare system for black patients in Kansas City (*Figure 15*). Perry was born to two former slaves in Clarksville, Texas in 1870. With the encouragement of his parents, Perry pursued a degree from Meharry Medical College, an HBCU in Nashville, Tennessee, and graduated in 1895.<sup>33</sup> Upon graduation, Perry experienced direct discrimination when applying for positions at hospitals across the country.<sup>34</sup> In some cases he was accepted, but then turned away once the administration discovered that he was not white. In 1903, Dr. Perry moved to Kansas City and established his practice at 1214 Vine Street (*Figure 16*).<sup>35</sup> In 1910, Perry converted his office to a small private hospital and a place for nurses in training to gain practical experience, the Perry Sanitarium and Training School for Nurses.<sup>36</sup> He wanted to provide a place to train nurses for future work in hospitals. As described in a 1936 report from the Kansas City Council on Social Agencies, "The prospect of a place where Negro physicians might study, learn and gain experience unhampered by prejudice."<sup>37</sup> The fourteen-room facility was designed to hold sixteen patients and operate with a staff of two or three nurses.<sup>38</sup> Perry renamed his private offices at 1214 Vine Street *Provident Hospital and Training School for Nurses* in 1912 when he established the Provident Hospital Association to administer the facility and determine the course of action to scale up the operation and become a more comprehensive community institution.<sup>39</sup> The Provident Hospital Association determined the best way to have a more significant impact on the community would be to move to a larger, more permanent building

<sup>33</sup> Nancy J. Hulston, "John Edward Perry, Physician, 1870-1962," Missouri Valley Special Collections: Biography, Kansas City Public Library.  
[https://kchistory.org/islandora/object/kchistory%3A115458?solr\\_nav%5Bid%5D=37085d921e7e2b2f05af&solr\\_nav%5Bpage%5D=0&solr\\_nav%5Boffset%5D=2&search=john%2520edward%2520perry](https://kchistory.org/islandora/object/kchistory%3A115458?solr_nav%5Bid%5D=37085d921e7e2b2f05af&solr_nav%5Bpage%5D=0&solr_nav%5Boffset%5D=2&search=john%2520edward%2520perry), (accessed February 16, 2020).

<sup>34</sup> Klein, 1.

<sup>35</sup> The building is no longer extant.

<sup>36</sup> Klein, 2.

<sup>37</sup> Klein, 1.

<sup>38</sup> Klein, 2.

<sup>39</sup> Klein, 2.

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where the organization could provide both healthcare services to patients and training facilities for nurses.

In 1914, members of the local Phyllis Wheatley Club established, on paper, the Phyllis Wheatley Hospital. The organization was also in pursuit of a hospital building to serve the African American population of Kansas City concurrent with Dr. Perry's Provident Hospital.<sup>40</sup> With both groups applying to the city's Board of Public Welfare for funding, the Board suggested the two organizations combine efforts as a single organization. Although neither group approved of the approach initially, they eventually worked through the disagreements and officially organized on April 8, 1914.<sup>41</sup> The newly established Wheatley-Provident Hospital and Nurse Training Association, which incorporated in March 1916,<sup>42</sup> sought funding from the local Allied Charities organization to cover both operating costs and the costs associated with purchasing a building.<sup>43</sup> Dr. Perry was appointed director of the organization in 1916 and served in that capacity until 1935.<sup>44</sup> Throughout the history of the hospital, many prominent local African Americans served on the board of directors of Wheatley-Provident Hospital; the duty citizens felt to support the organization illustrated the importance of this community asset during the period of significance.

Wheatley-Provident Hospital's first capital campaign, in 1917, raised \$21,000, which the organization used to purchase and remodel an existing building to house the new hospital.<sup>45</sup> It purchased the two-story stone building at 1826 Forest Avenue (the south wing of the nominated property), constructed for the St. Joseph Catholic School in 1902. The organization hired prominent local architect Owen & Payson to remodel the former school building into a twenty-room hospital (*Figure 10*). The Hospital applied to the Allied Charities Fund for additional money to purchase new equipment.<sup>46</sup> The building was reconfigured to have large wards and several small rooms for various medical procedures or the small X-ray and Laboratory departments, training, and storage and other support services.<sup>47</sup> Although there was a room designated for its

<sup>40</sup> Charles E. Coulter, *Take Up the Black Man's Burden*, (Columbia, MO: University of Missouri Press, 2006), 96. Phyllis Wheatley Clubs were African American women's clubs that organized in cities and towns across the country for various purposes associated with community and personal improvement. Many of these groups, including the group in Kansas City, focused on improving healthcare.

<sup>41</sup> "Wheatley Provident Hospital" Case No. 0162-D, nomination for designation on the Kansas City Register of Historic Places, 5. Missouri Valley Special Collections, Kansas City Public Library.

<sup>42</sup> Nathan B. Young, Jr. and William H. Young, *Your Kansas City and Mine* (Kansas City: Midwest Afro-American Genealogy Interest coalition, 1950 (reprint 1997)), 55.

<sup>43</sup> Klein, 4

<sup>44</sup> "Wheatley-Provident Hospital," *Weekly Bulletin of the Jackson County Medical Society*, January 7, 1956, 1581. Missouri Valley Special Collections, Kansas City Public Library.

<sup>45</sup> Klein, 2.

<sup>46</sup> Klein, 2.

<sup>47</sup> Historic plans of the renovated 1902 building have not been found.

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use, Wheatley-Provident Hospital did not yet have the funds to purchase its own X-ray machine until 1920.<sup>48</sup>

Wheatley-Provident Hospital operated with an entirely African American staff and ownership group to provide much-needed hospital care to the surrounding community. The organization did not discriminate against or refuse service to individuals who were not African American, it provided care to those who were refused service or were provided with substandard care in other hospitals. After several years in operation in the building at 1826 Forest Avenue, administrators recognized that there was still a gap in services needed and those provided at the Hospital, specifically in the care for children. In 1922, Dr. Katharine Berry Richardson, the white founder of Children's Mercy Hospital, recognized that there was a great need for pediatric care among African Americans in Kansas City. She could not sway the directorate of Children's Mercy Hospital, the white hospital, as they believed offering more than one bed for minorities would jeopardize funding from their white patrons. Thus, Dr. Richardson began assisting with the solicitation of funds to finance the construction of a new pediatric department at Wheatley-Provident Hospital.<sup>49</sup>

With the addition estimated at \$75,000, the Hospital organization began raising money and hired renowned local architects Hoit, Price and Barnes to design a structure to house the clinic, the pediatric department, operating room, the X-ray department, and the laboratory (*Figures 12-14*).<sup>50</sup> The two-story building had a full basement, which housed various support functions, such as laundry and the boiler. The new wing added thirty-two new beds and much-needed departments when it opened in 1926, such as the X-ray department and a dedicated children's department (*Figure 11*).<sup>51</sup> Most of the beds filled the two large wards on the second floor, designed to accommodate patients with illnesses or those recovering from surgery or other treatments performed in the specialized treatment rooms at the north end of the first floor. The clinic on the first floor treated those who did not need to be admitted for longer stays. The new wing staffed ten to fifteen new pediatricians, most of whom were trained and awarded certificates from the newly established program conducted at Wheatley-Provident Hospital.<sup>52</sup> There do not appear to be any spaces historically associated with classroom training, as practical instruction took place in the hospital rooms. While the hospital now had the capacity to provide specialized care for children, it continued to treat illnesses and performed corrective or

<sup>48</sup> Doretha Williams, "The Wheatley-Provident Hospital," *Community Curator, A Project of the Kansas City Museum at Corinthian Hall*, undated. Black Archives of Mid-America.

<sup>49</sup> Soward, James L. *Hospital Hill, An Illustrated Account of Public Healthcare Institutions in Kansas City, Missouri*, (Kansas City, MO: Truman Medical Center Charitable Foundation, 1995), 64.

<sup>50</sup> Klein, 3. "Wheatley-Provident Hospital," *Jackson County Medical Society*, 1581.

<sup>51</sup> It is unclear if there were spaces dedicated just to the treatment of children, but there was a separate child's toilet and there were dedicated pediatric physicians.

<sup>52</sup> J. Edward Perry, M.D., "The Pediatric Department of Wheatley-Provident Hospital, Kansas City," *Journal of the National Medical Association*, Vol. 18, No. 3, Jul-Sep 1926, 126.

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emergency surgery for patients of all ages. All of the spaces associated with the care and treatment of patients are intact and continue to communicate this institutional function. The simple finishes were so utilitarian that they have not been substantially altered or removed. A. R. Ferebee, D.D.S. from Coffeyville, traveled to Kansas City for treatment at Wheatley-Provident Hospital in 1927, and wrote a letter to the *Kansas City Call* praising the hospital for its excellent service.<sup>53</sup> Ferebee even received a personal visit from Dr. Perry. Wheatley-Provident Hospital also offered social services to address deficiencies in hygiene and diet that exacerbated illnesses and physical maladies.<sup>54</sup> By 1936, Wheatley-Provident Hospital was one of 122 hospitals owned and operated by African Americans in the country. It was also one of only sixteen such hospitals to earn an A class rating from the American College of Surgeons.<sup>55</sup>

Wheatley-Provident Hospital continuously provided healthcare services to the African American community despite the persistent need for funding. The local community did not have a substantial pool of potential donors with deep pockets and thus relied on annual fundraisers and charitable organizations to maintain the budget.<sup>56</sup> Rates and fees for services were kept in line with the other hospitals, specifically General Hospital No. 2, the public hospital in Kansas City, Missouri, and Douglass Hospital, the private hospital in Kansas City, Kansas. Wheatley-Provident Hospital accepted patients who did not have the ability to pay for the services they needed. However, according to a 1936 report from the Council of Social Agencies, "this hospital is a community expression of the fight against the pauperization of the Negro. It stands not only to promote better health conditions, but also to assist the Negro to come self-maintaining, to pay for services according to his ability to pay."<sup>57</sup>

The systemic racism and racial segregation that developed the initial need for Wheatley-Provident Hospital remained firmly in place throughout much of the history of the building. A scathing report from health specialist W. Montague Cobb, M.D. of the Community Relations Project of the National Urban League, published in 1946, outlined the systemic problems that plagued the healthcare system for black patients in Kansas City, primarily "the curious paradox of laws which equalize and customs which discriminate."<sup>58</sup> Segregation and the quest for "separate but equal" facilities yield an unnecessary duplication of efforts and financial resources which can have detrimental effects on the segregated hospital.<sup>59</sup> Underfunding of black hospitals led to shortages of materials or sharing of equipment among institutions. Despite these challenges, Wheatley-Provident Hospital remained an important community institution, as

<sup>53</sup> A. R. Ferebee, D.D.S., "My Sojourn at Wheatley Hospital," *Kansas City Call*, December 9, 1927. Black Archives of Mid-America.

<sup>54</sup> Perry, 127.

<sup>55</sup> Klein, 1.

<sup>56</sup> "Wheatley Hospital in Need of More Funds," *Kansas City Call*, October 26, 1951. Black Archives of Mid-America.

<sup>57</sup> Klein, 3.

<sup>58</sup> Cobb, 17.

<sup>59</sup> Cobb, 18.

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it continued to be the only private hospitals dedicated to serving African American patients in Kansas City, Missouri. The Hospital's importance as a local training facility was also recognized. Sixty nurses graduated and twenty physicians trained at Wheatley-Provident Hospital between 1918 and 1972.<sup>60</sup>

Wheatley-Provident Hospital operated from the same building, through challenging financial times. However, it became increasingly difficult and expensive to keep up with the technological and scientific advancements required to keep a hospital equipped enough to provide adequate services. As more medical schools began admitting African American students in the mid-twentieth century, the need for training through Wheatley-Provident subsided. However, the hospital remained an important community institution for the treatment of African American patients. Wheatley-Provident Hospital remained the only private hospital to explicitly serve African Americans patients in Kansas City throughout the period of significance, and one of only two such hospitals, public or private. In the mid- to late-1960s, overt discrimination and outright segregation were outlawed, and African Americans were not limited in which hospital they could visit or apply to for work. However, after integration, the resources that were once the pride of the African American community become disposable in favor of the white institutions that had, by default, been maintained better throughout. In the case of Wheatley-Provident Hospital, the outmoded and outdated building was shuttered in favor of constructing a new hospital. Martin Luther King, Jr. Hospital opened on June 12, 1972 at 25<sup>th</sup> and Euclid streets, south and east of the nominated property. That is also the day Wheatley-Provident Hospital closed. Despite the construction of the new hospital, its design capable of adapting as needed to new technology in the medical field, Martin Luther King Jr. Hospital closed its doors in 1983, because all state and federal funding was diverted to Truman Medical Center and Research Hospital. The vacant Wheatley-Provident Hospital functioned, briefly, as a "haunted house" and later as a nightclub. Interior alterations associated with these functions included the removal of some historic trim and partitions, particularly in the 1902 building. The building has remained vacant for more than a decade.

## CONCLUSION

Wheatley-Provident Hospital is significant as the only extant private hospital building in Kansas City associated with the care of African American patients. The modest two-story building, part of which was a renovated former Catholic school, illustrates the disparities in healthcare provided to Kansas City's African American population and highlights the state of race relations in the city through the mid-twentieth century that such a facility was necessary. The demolition of Perry Sanitorium (1214 Vine Street), General Hospital #2 (22<sup>nd</sup> Street and McCoy Avenue), and Douglass Hospital (Quindaro, Kansas City, Kansas) means that Wheatley-Provident

<sup>60</sup> "Wheatley-Provident Hospital," Undated summary

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Hospital is also the only extant public or private hospital in the metro area (Kansas City, Missouri and Kansas City, Kansas) purpose-built to serve African American patients in an era of segregation. Despite years of vacancy and neglect, Wheatley-Provident Hospital retains the features and configuration of the wards and medical departments that convey the significance of this building as the only extant hospital for African Americans in Kansas City.



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**VERBAL BOUNDARY DESCRIPTION**

The boundaries for the nominated property at 1826 Forest Avenue follow the current property line for the parcel currently associated with the resource. The T-shaped parcel includes the eastern 100 feet of Lot 8, all of Lots 9-16, the eastern 62 feet of Lot 17 and the eastern 62 feet of the north 3.5 feet of Lot 18, in the Victor Place Addition of Kansas City, Jackson County, Missouri.

**BOUNDARY JUSTIFICATION**

The boundaries for the nominated resource include the parcel of land historically associated with the property.

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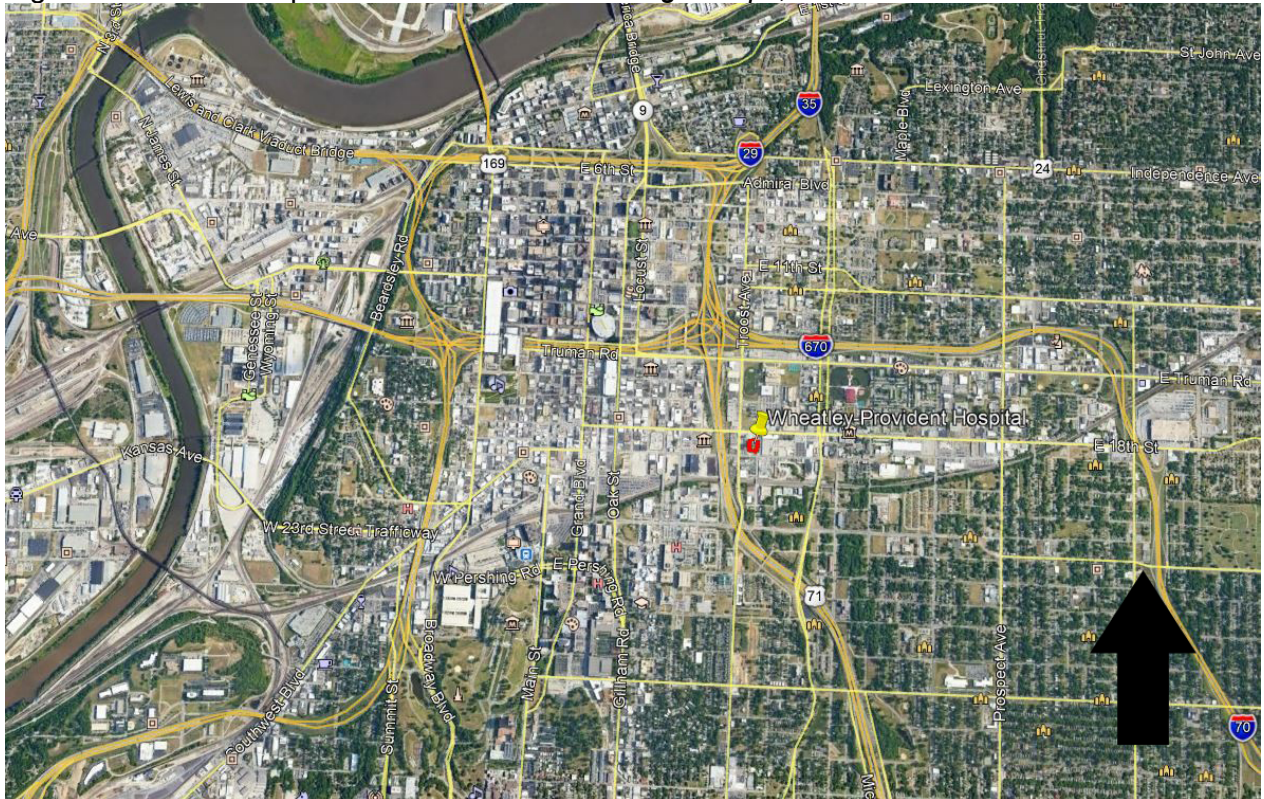
Jackson County, Missouri

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N/A

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Figure 1. Location Map. Not to scale. Source: Google Maps, 2020.





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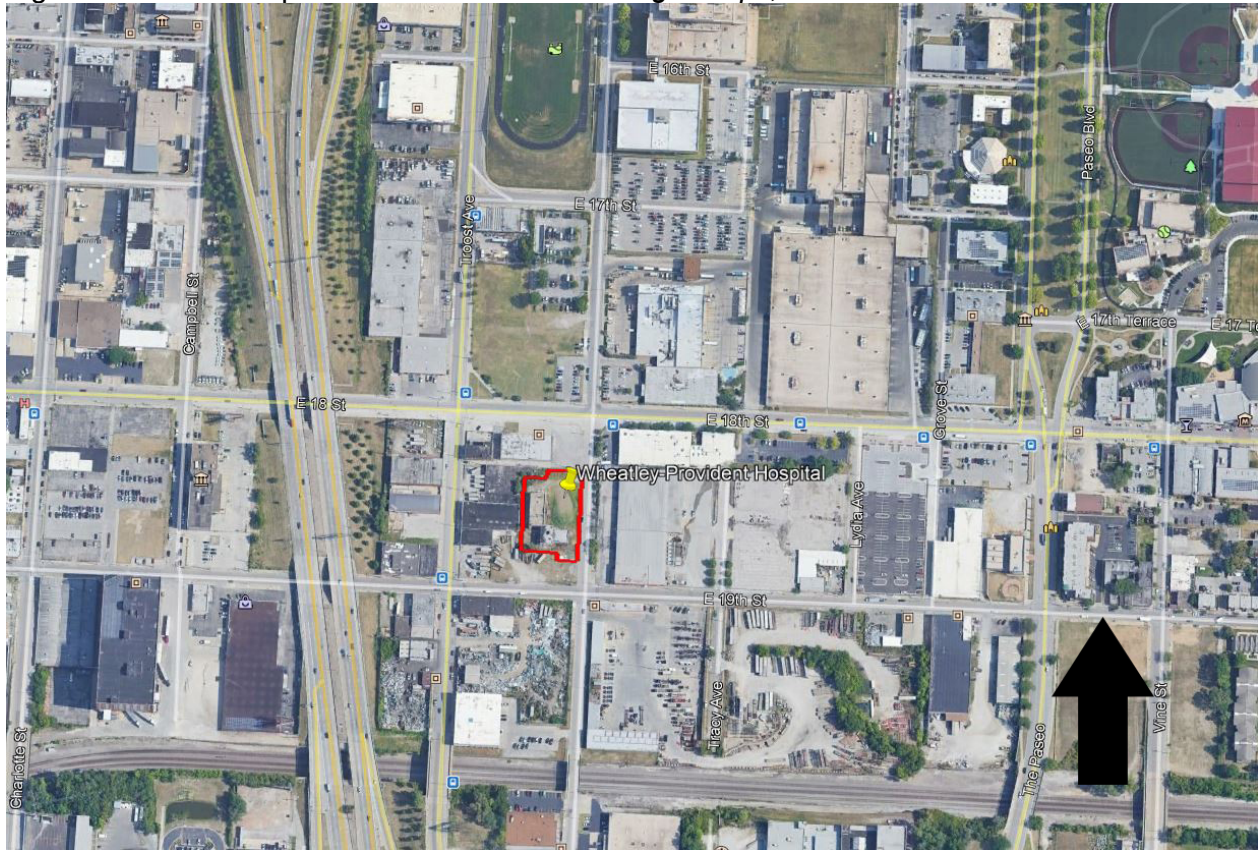
Jackson County, Missouri

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Figure 2. Context Map. Not to scale. Source: Google Maps, 2020.



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Figure 3. Boundary Map. Not to scale. *Source: Google Maps, 2020.*



Wheatley-Provident Hospital  
1826 Forest Avenue  
Kansas City, Jackson County, MO 64108  
39.090515, -94.569455



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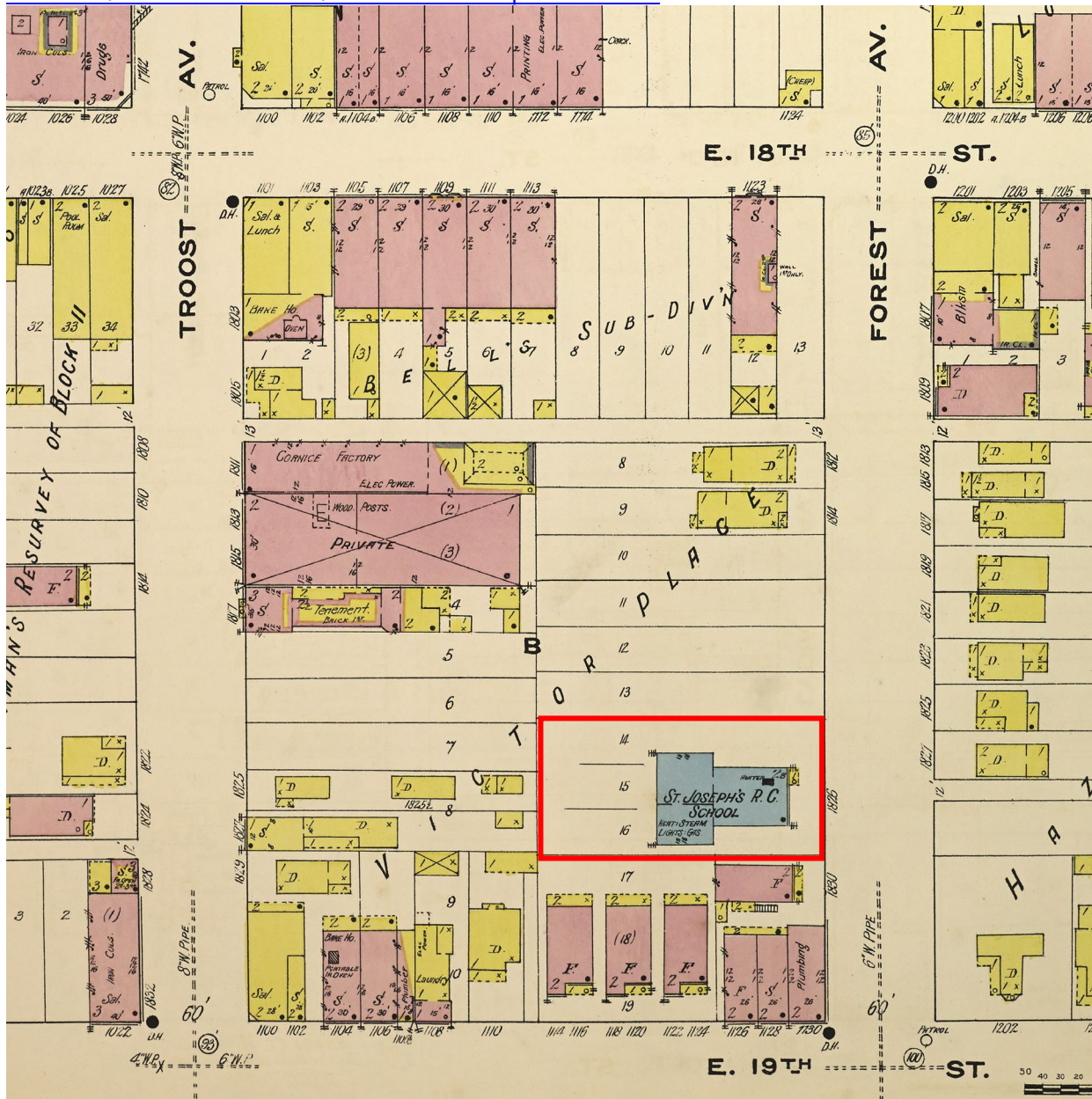
Jackson County, Missouri

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N/A

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Figure 4. Sanborn Fire Insurance Map, 1909, Volume 3, Sheet 317. 1902 Wing, formerly St. Joseph Catholic School, is extant. Source: Kansas City Public Library. <https://www.kclibrary.org/research-resources/research-databases/fire-insurance-maps-online-fimo>.





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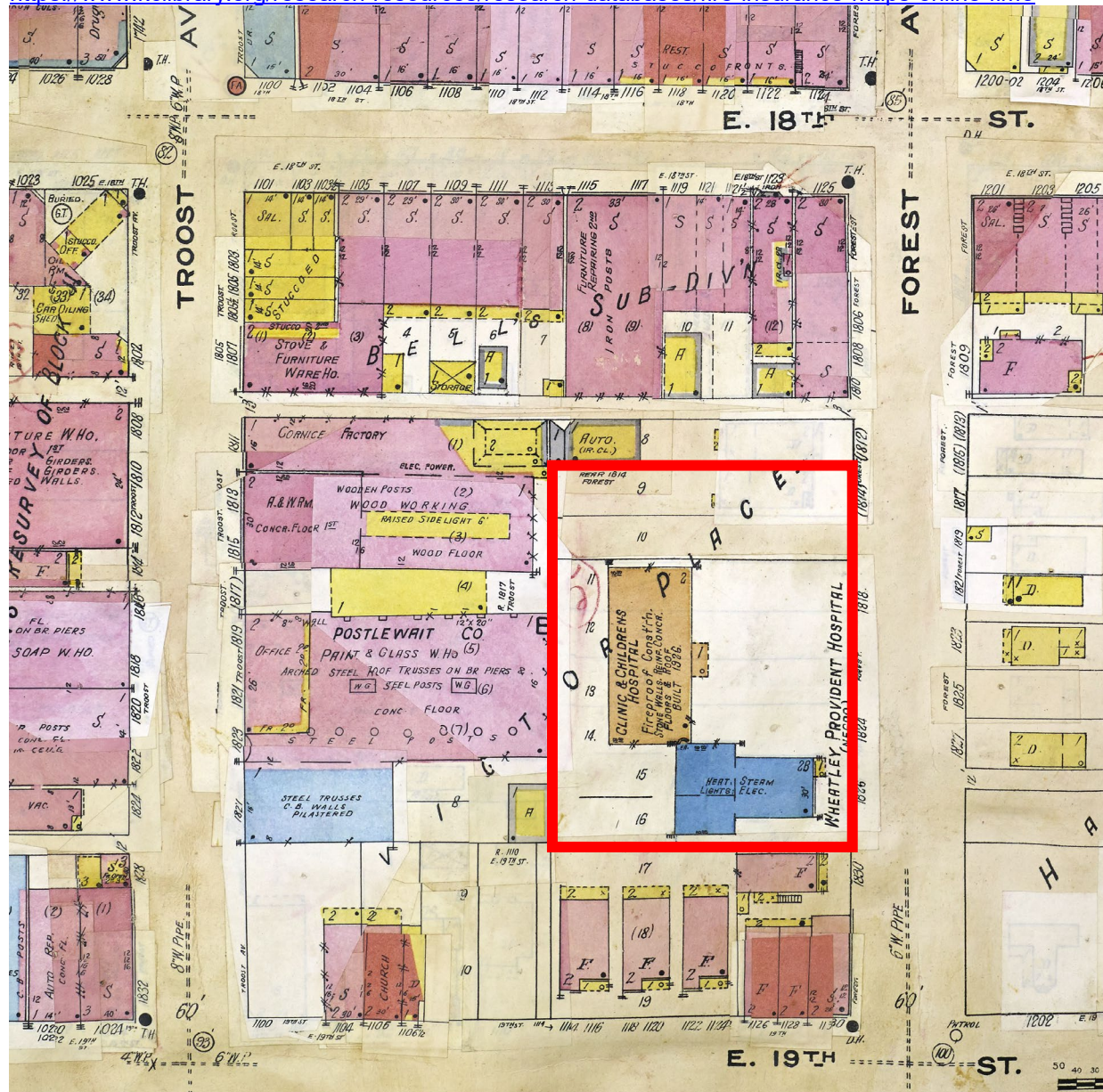
County and State

N/A

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Figure 5. Sanborn Fire Insurance Map, 1951, Volume 3, Sheet 317. 1902 Wing, formerly St. Joseph Catholic School, and 1926 wing are extant. Source: Kansas City Public Library.

<https://www.kclibrary.org/research-resources/research-databases/fire-insurance-maps-online-fimo>.





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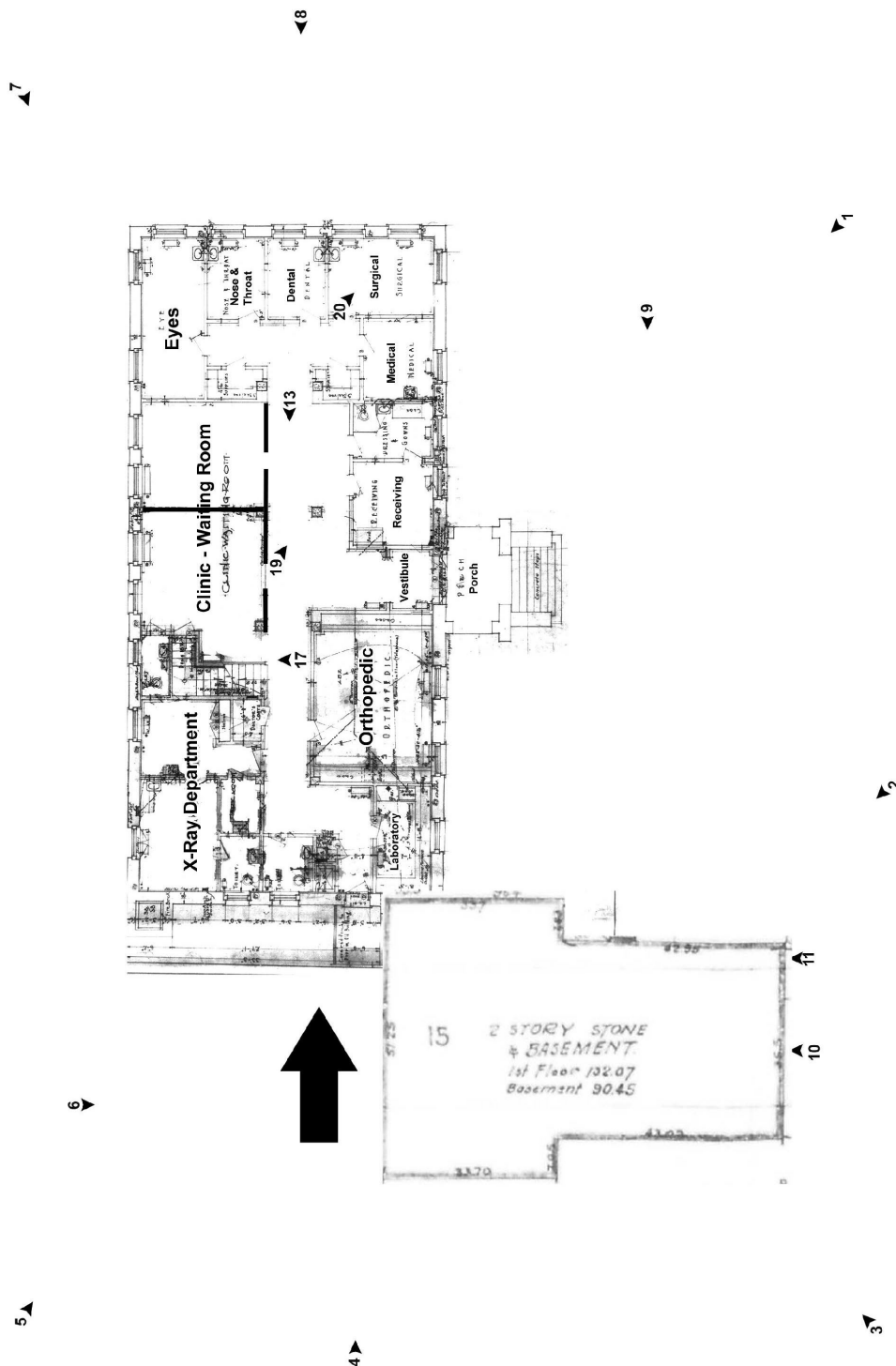
Jackson County, Missouri

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Figure 6. Exterior and First floor plan and photo map. Not to scale. *Source: Adapted from Hoit, Price & Barnes, 1926.*



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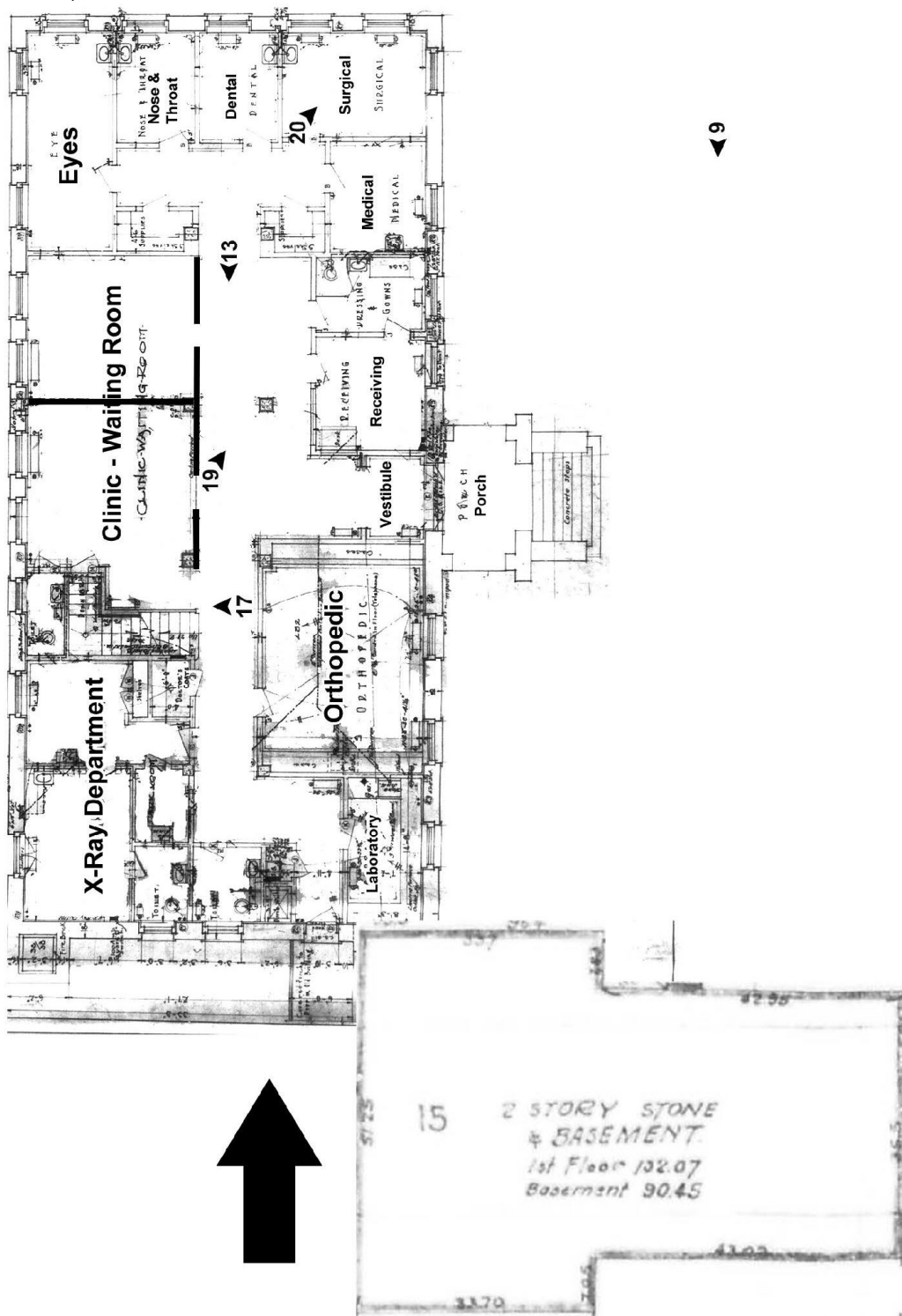
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Figure 7. First floor plan and photo map. Not to scale. *Source: Adapted from Hoit, Price & Barnes, 1926.*



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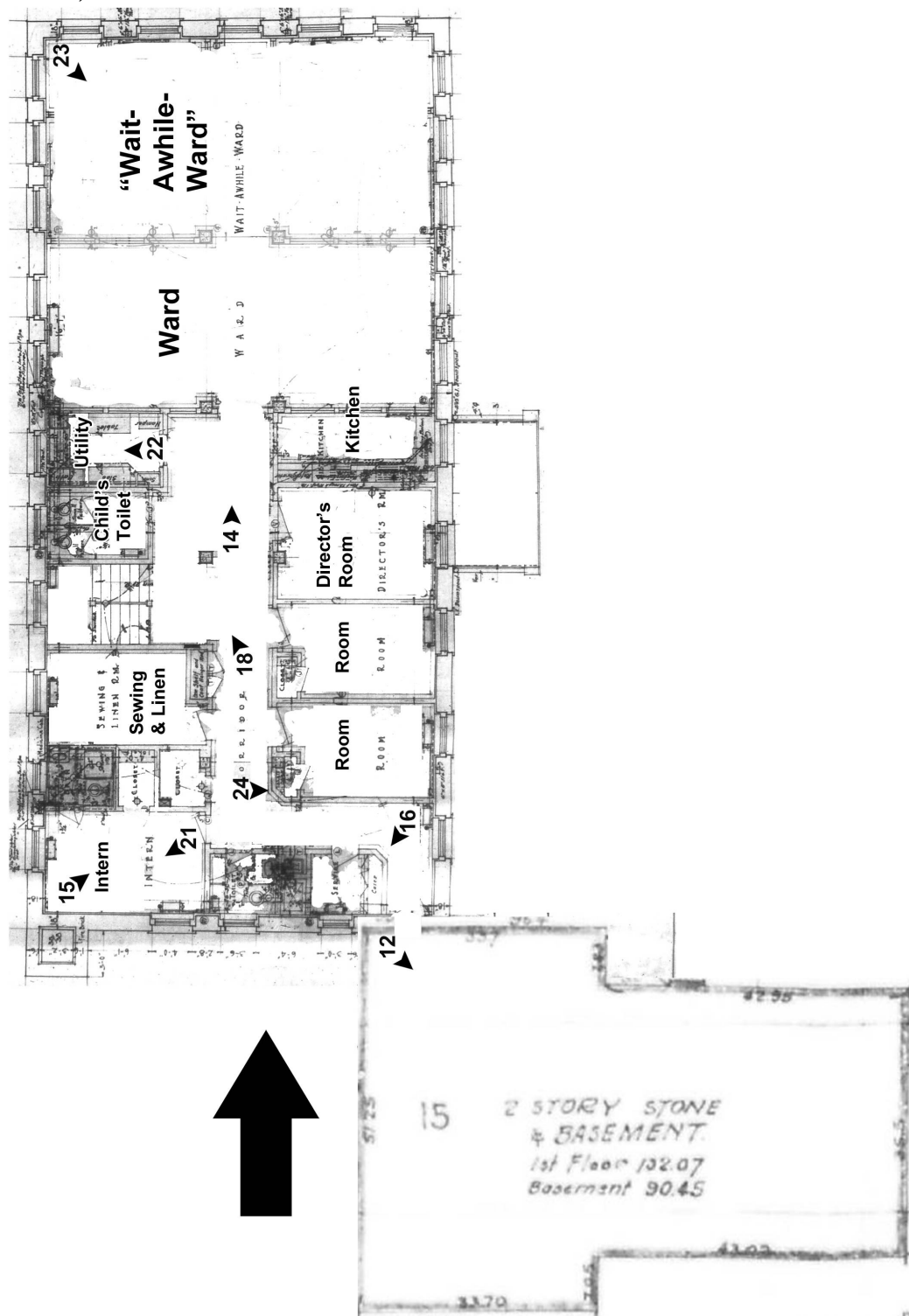
Jackson County, Missouri

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Figure 8. Second floor plan and photo map. Not to scale. Source: Adapted from Hoit, Price & Barnes, 1926.



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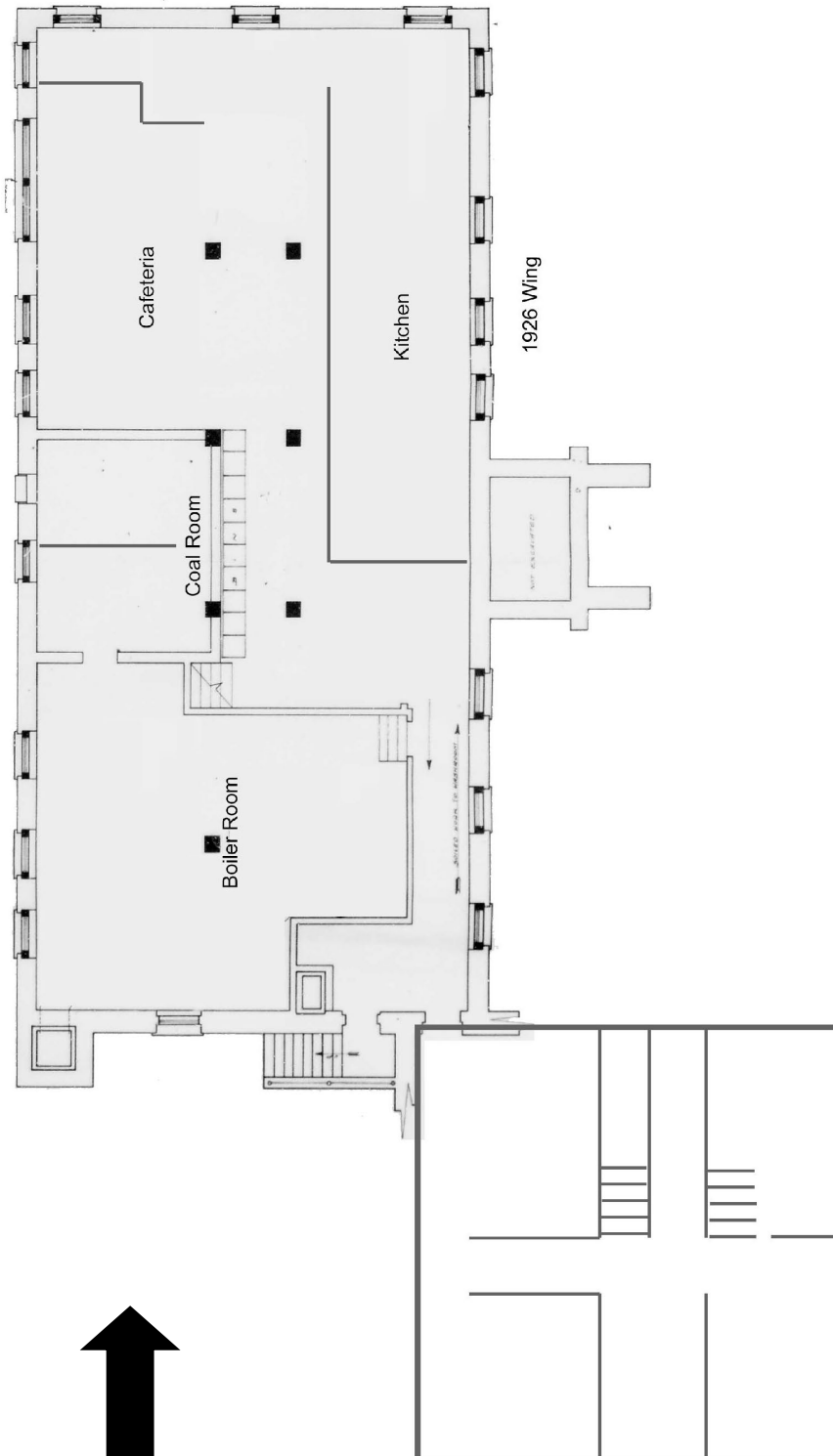
Jackson County, Missouri

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Figure 9. Basement floor plan. Not to scale. *Source: Adapted from Hoit, Price & Barnes, 1926.*





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Figure 10. 1902 Building, c. 1918. Source: *Black Archives of Mid-America – Wheatley-Provident Hospital File*.



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Figure 11. Historic Photograph, c. 1950. *Source: State Historical Society of Missouri – Kansas City.*





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Figure 12. Historic photograph from Operating Room, undated. *Source: Black Archives of Mid-America – Wheatley-Provident Hospital File.*



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Figure 13. Historic Photograph of Children's Wing. Source: *Black Archives of Mid-America – Wheatley-Provident Hospital File*.





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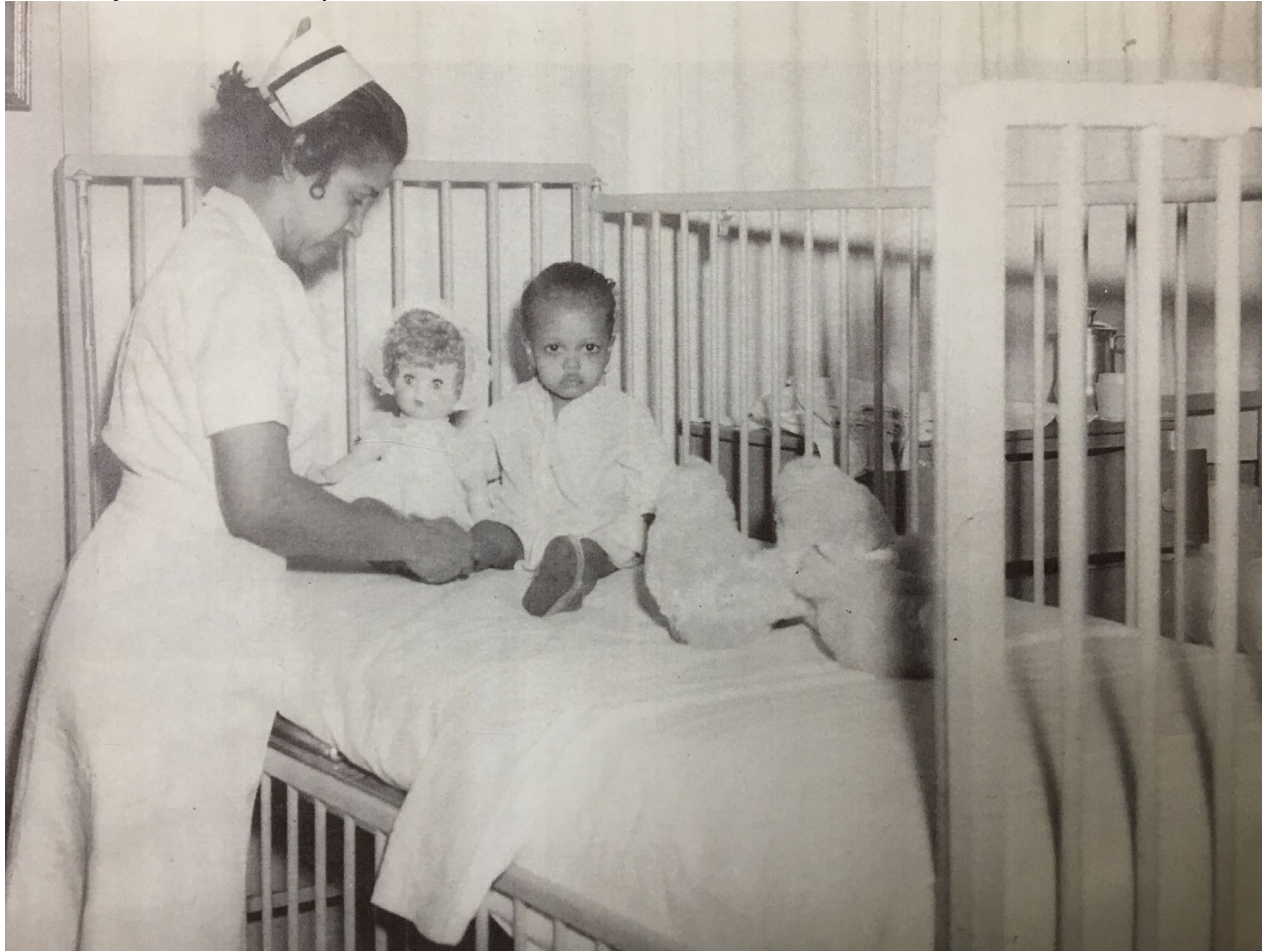
Jackson County, Missouri

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N/A

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Figure 14. Historic Photograph of Children's Wing. Source: *Black Archives of Mid-America – Wheatley-Provident Hospital File*.



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Figure 15. Dr. John E. Perry, photograph. Source: *Black Archives of Mid-America – Wheatley-Provident Hospital File*.





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Figure 16. Historic Photo of Perry Sanitorium, 1214 Vine Street, 1940. Source: *Kansas City Tax Assessor Photos, 1940, Missouri Valley, Special Collections.*

<http://mdh.contentdm.oclc.org/cdm/singleitem/collection/kcpltax/id/1039/rec/2>





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Figure 17. Historic Photo General Hospital #2, 1932 (demolished). *Source: Jackson County Medical Journal, Volume XXVI, No. 41, cover.*



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Figure 18. Douglass Hospital, c.1940. Quindaro, Kansas City, Kansas. *Source: General Collection (P1), Hospitals – Douglass, Number 1, Missouri Valley Special Collections, Kansas City Public Library.*



MVSC, Kansas City Public Library, Kansas City, Missouri









WHEATLEY  
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