

ARCHITECTURAL DESCRIPTION

The Community Health Center at Parole, at 1950 Drew Street in the Parole neighborhood of Annapolis, is located at the northeast corner of the intersection with Parole Street. The existing building exhibits design and construction characteristics of two distinct periods; construction of the original building (to the west) was begun with the laying of the cornerstone by the Parole Community in 1948, and completed in 1949. A major renovation and addition was completed in the early twenty first century with changes to the design of the original building.

The current two-story building has a footprint of ninety-four feet by thirty-three feet, and an overall height of twenty-seven feet. In 2002 the building underwent an expansion, including interior and exterior renovations, when the thirty five by twenty eight foot, two-story addition to the east end of the building was constructed.

The building is sited on an approximately half acre, trapezoidal lot, approximately 145' by 155'. The building is sited to face Drew Street set back approximately thirty feet from the curb, with a parallel forty-four foot side setback from Parole Street. Two concrete sidewalks approach the building from Drew Street and provide access to the various front entrances to the different functions in the building.

The street front yards are landscaped with lawn and dispersed foundation plantings, and includes two mature Japanese maple trees, with a mature deciduous tree straddling the eastern property line at Drew Street. There is minimal landscaping on the rear of the lot.

There is an asphalt parking lot located to the rear of the building with pedestrian and vehicular access to Parole Street. This parking lot is located behind the original portion of the building and the remainder of the rear yard (behind the addition) is enclosed with a chain link fence and is a dedicated play area for the childcare program.

The original fifty-nine foot by thirty-three foot building was completed in a straightforward, *Minimal Traditional* style. It was a two-story building with the first level sunken approximately three feet below the adjacent grade, of concrete unit masonry construction finished with painted stucco. All four corners are finished with regular, eight by sixteen inch exposed brick quoins, keyed into the finishing stucco with alternating orientation. The original cornerstone (see photograph) is located at the southwest corner of the building.

This design is similar to several buildings built in Annapolis soon after World War II, with traditional forms and details reminiscent of earlier colonial revival structures in Annapolis. This is a good example of a commercial builder interpretation of traditional styles seen as appropriate for the professional institutional use in the context of a colonial city. While no existing design or construction documents for the building have been discovered, a May 31,

1949 *Evening Capital* article on the dedication of the health center described one of the speakers, Charles Henry, as the “architect and designer of the center.”

The original five bay front façade included centered doors at both levels with second floor access by way of a double run brick stair with painted cast iron railings leading to a square level landing, with lower level access through a door in the wall of the stairs. The main double doors at the second level were under a wood framed, double sloped (curved and straight) pedimented roof on square brick piers. These centered double doors were wood with a multi pane glazed panel over wood panels; the lower level door was a transom paned and wood panel design.

On the second floor the punched openings, all with brick sills, contain paired wooden double hung six over six sash. Lower level openings are offset slightly from the windows above, and contain ganged casement sash at the sides with single casement sash towards the center.

The west elevation of the building contained an additional stair accessing the lower level and the main level by wall of a stuccoed block and concrete stair with a metal pipe railing. Single double hung windows were located on the south end of the second floor with a single casement window below on the lower level. Unfortunately, additional documentation of the original building is not available to analyze the other original elevations, but the existing condition plans prepared in 2001 indicate that similar windows existed on the other elevations.

The original design and construction for the building included a shallow slope flat roof behind parapet walls with an eighteen-foot height on the Drew Street and front side elevations. The side parapets (east and west) stepped at the mid point, with the roof discharging to the rear (north) of the lot.

The renovation and expansion was begun in June 2001 and completed in June of 2002, and was designed by Paul Clarke, AIA, of Colimore Clarke Associates, Architects, of Annapolis and Baltimore. The project completely renovated the 3960 square feet of the existing building, and added an additional 1830 square feet in a two story addition.

The renovated facility was designed to facilitate changes to the program as a response to increased patronage of the health center, the need for additional administrative space, modifications to meet the requirements of the American with Disabilities Act, and plan changes in providing medical services. The modifications and additions included an expansion of the Community Health Center on the second floor, renovation of the lower level Day Care space, and additional business offices for the Health Center. Access improvements were made to meet the requirements of the American with Disabilities Act, and the design addressed the difficulties of dealing with the grade changes and other access issues.

As part of this redesign the building was given a façade renovation to tie and unify the new work with the original building. A major character-changing element was to add a new hip roof to unify the entire building, finish the addition, and overlay the existing flat roof. The roof is clad with standard composition fiberglass asphalt shingles, with a continuous overhanging eave and soffit, finished in prefinished aluminum.

The 2002 addition has been inset from the corners of the existing building, differentiating the addition from the original, and allowing the brick corner quoin detail to read. The current design of the front (south) elevation includes a cross gable at the east end to mark the separate entrance to the offices which are accessed through an aluminum and glass gabled projected vestibule. The Drew Street (south) façade of the addition is of wood frame construction with a synthetic stucco/insulation exterior finish system on a concrete block foundation. Second floor windows are single double hung vinyl sash.

Renovations have altered the façade of the existing building considerably. In addition to the change of the roof design, the west end windows on both levels have been eliminated and the front door has been altered from a double wood door to an aluminum and glass door, transom and sidelight system. Existing wood windows have been replaced with vinyl sash.

A major character altering change was completed in the new design of the entry portico. The small, landing wide, brick columned, entry portico was eliminated and a wide gabled pediment was constructed spanning the entire width of the front stairs. The eaves of this gabled pediment are set below the soffit of the roof. The pediment is set on a shallow wood trim architrave and supported by two, one and one half story Doric columns. The existing brick steps were given a new brick facing and painted metal railing, and the wooden entry door to the lower level was replaced with a painted metal door.

The original elements of the west (Parole Street) façade have been modified in the 2002 renovation to alter the exit stairs with new treads and risers and a new railing system. The original doors to the two levels have been replaced with painted metal doors. Two single double hung windows have been eliminated and the walls infilled with a stucco finish to accommodate interior renovations.

The east façade encompasses the end wall of the 2002 addition and consists of frame walls with vinyl lap siding and trim. The building form steps back from a roofed enclosure of the exit stairs from both levels, to the main addition with a transitional roof joining the hip and front gable forms. The end quoins of the original building are exposed by the inset of the additions walls.

The rear (north) elevation includes the modified rear wall of the existing building that has been raised and finished in stucco to eliminate the edge of the original flat roof and support the new roof system, and the existing brick masonry chimney has been extended seventeen courses to clear the roof. Replacement vinyl windows have been inserted into the existing brick-silled openings. A glass enclosed access lift has been added to the original façade in the location of original window openings. This elevation of the 2002 addition includes a new areaway to access the lower level space in the existing building, and is constructed of vinyl lap siding and trim on wood frame.

The interior of the 2002 addition includes standard contemporary finishes of painted gypsum drywall, vinyl composition and ceramic tiles, carpet, and exposed concrete. Trim is simple and straightforward and includes painted wood casings. Fixtures and furnishings in the addition are contemporary.

The interior of the original 1949 building has been altered during the renovation and addition to refurbish the spaces, address programmatic changes and to address contemporary code requirements. On the lower level, the bathrooms have been updated and re-plumbed (now encompassing a raised floor), access to the exterior lift has been added, partitions have been modified for functionality and code compliance, mechanical systems updated, and the space has been given access to a bathroom and new exit in the 2002 addition. Additionally, the interior single run stair between the two levels has been eliminated and the resulting floor space put to storage use.

The original second floor health suite has been enlarged to include additional open office space in the addition, and the previous floor plan has been modified to add accessible bathrooms, provide additional workspace and relate to the current functioning of the health center. Other changes to the original plan include the construction of selected walls to provide additional office space, reducing size of the original waiting area. Current finishes include vinyl composition tile, painted drywall, carpet, and acoustical lay in ceilings, with standard clamshell casings at new window openings.

Some original character defining details of the initial period of construction have been retained in the renovation. This includes original doorway openings with trim and casing along the corridor, and original trim and casing in several of the window openings. A particularly interesting detail is the stained plywood wainscoting and trim lining the central corridor of the health suite. Plywood was an innovative material, ‘high tech’ for the period, which, while developed earlier, was refined and improved during World War II, becoming readily available in the post-war years. The wainscoting is four feet, four inches high with a two-part base of flat stock and moulded cap, and a projecting cap ledge where the wainscot meets the painted wall above. The wainscoting has flat lath trim covering the vertical joints between panels at approximately four feet on center. Original window openings are cased with wide sanitary trim, with catalog trim beneath the interior sills.

While the original building exhibits a simplified, vernacular traditional style for its era, and is well scaled for the neighborhood context, it was altered in the 2002 renovation and addition. The addition achieved programmatic and functional architectural goals, t in a postmodern style using standard building materials and details, and has modified the character of the original building, showing a history of change and adaptation of this important community institution.

Note:

No original construction drawings or other documentation have not yet been found for the 1949 building. Drawings for the addition and renovation, prepared by Colimore Clarke Associates, appear to be original construction drawings, but are not red-lined or modified to indicate what changes were made during construction and incorporated into the final work. This description has been prepared based on site visits and tours conducted in the summer of 2016.

Michael Justin Dowling, Architect
29 September 2016

PHOTOGRAPHS

See attached PDF photographs.

Photographs by Michael Justin Dowling, Architect
20 September 2016