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**BRYN SEIONT HOSPITAL, CAERNARFON
LEVEL 3 RECORDING**

Client: Mario Kreft

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Govannon Report GC318

(Front cover photograph; an interior view of Bryn Seiont from the Geoff Charles collection, National Library of Wales)

BRYN SEIONT HOSPITAL, CAERNARFON

Executive summary

The present document represents an Archaeological Mitigation for the site of a dwelling converted into a hospital at Bryn Seiont near Caernarfon in Gwynedd commissioned by Mario Kreft. Bryn Seiont is identified as a dwelling on the earliest maps of the area, dating from the 1820s, and the present house was erected in 1872 for Captain Pearson, an investor in the slate industry. It became the site of a sanatorium in 1914. It was managed by the Caernarfon and Anglesey Hospital Management Committee following the 1948 NHS Act and treated patients with tuberculosis, a scourge of Arfon quarrymen. Following a local government reorganisation in 1974 the site fell under the control of Gwynedd District Health Authority, and then North West Wales NHS Trust from 1999. Bryn Seiont later became a hospital offering palliative care by Macmillan nurses for cancer patients and then a centre used by the Blood Transfusion Service and a base for ambulances. As such the site informs understanding of the little-considered archaeology of the area's middle class and of hospital provision, as well as demonstrating potential for pre-Modern archaeology.

The following abbreviations are standard in this document:

BU	Bangor University
CRO	Caernarfon Record Office
HER	Historic Environment Record
<i>LM</i>	<i>Liverpool Mercury</i>
NLW	National Library of Wales
NMR	National Monuments Record
NPRN	National Primary Record Number
<i>NWC</i>	<i>North Wales Chronicle</i>
PRN	Primary record number
RCAHMW	Royal Commission on the Ancient and Historic Monuments of Wales
<i>TCHS</i>	<i>Transactions of the Caernarvonshire Historical Society</i>
TB	Tuberculosis

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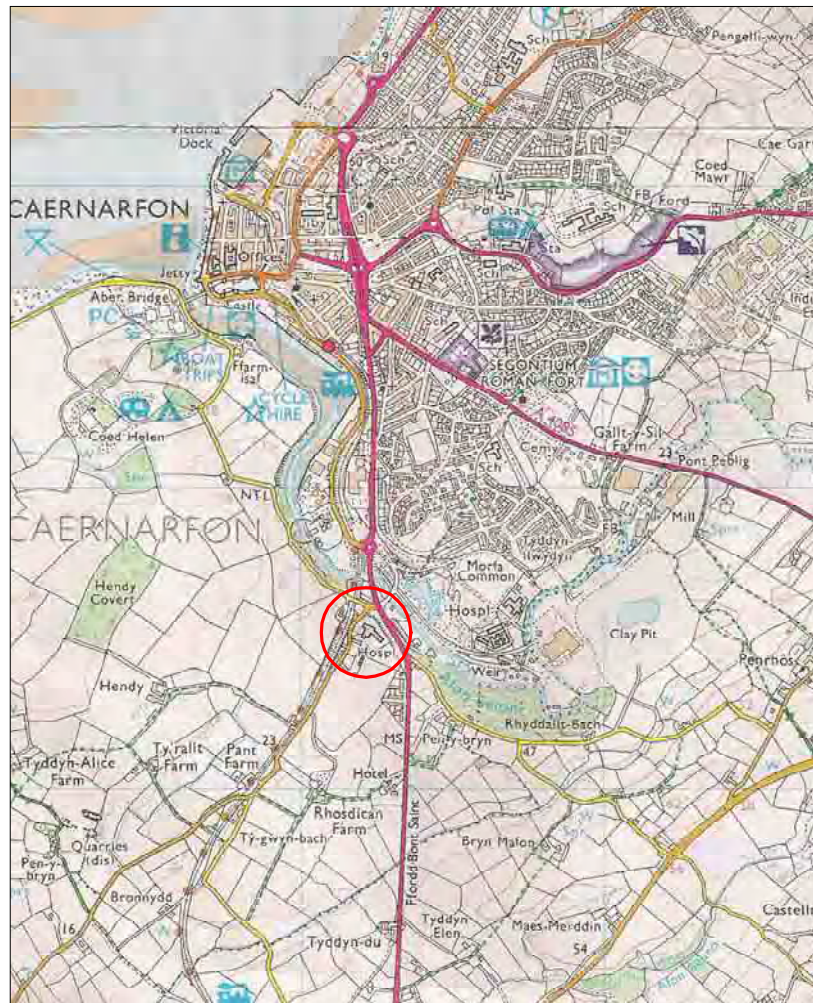


Figure 1: Location
Scale 1:25,000

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1 INTRODUCTION

Govannon consultancy has been commissioned by Pendine Park to undertake an Archaeological Mitigation of the former Bryn Seiont hospital near Caernarfon (SH 4822 6152, PRN 38193), and its grounds (SH 482 615 C, PRN 38194) in connection with a planning application for partial demolition of the site (C11/0828/14/LL). The following archaeological mitigation comprises a level 3 detailed building record and a basic archaeological record of other features identified on the site, and has been carried out according to the requirements of a specification submitted to Gwynedd Archaeological Planning Service (Appendix 1). The project was carried out by Dr David Gwyn MIfA FSA and Dr Ian Brooks MIfA FSA with specialist input from Dr Pam Michael, an authority on the history of care provision in Wales, in August-September 2013.

2 FINDINGS OF THE ARCHAEOLOGICAL MITIGATION

2.1 Site

2.1.1 Location

The site is located at SH 4822 6152, on a spur to the south of, and overlooking, the shallow valley of the Gwyrfaï river south of the town of Caernarfon at an approximate elevation of 22m AOD. It is defined by a minor road from Caernarfon to Llandwrog to the west, by the open fields to the south of Rhôs Dican farm to the south, and by an inter-war housing estate, Parc Muriau, and by the Caernarfon-Porthmadog road (the A487) to the east. It lies within the former historic parish of Llanbeblig in the present county of Gwynedd and the historic county of Caernarvonshire.

2.1.2 Soil and geology

The study area is located within an area of improved pasture and horticulture, on rocks of Ordovician formation.¹

2.1.3 Statutory protection

No part of the site is statutorily protected.

2.2 Sources

As specified, archival sources and existing archaeological studies were consulted. Archival sources were identified in CRO, in Bangor University manuscripts department, and the NLW but no information was identified in the NMR, curated by the RCAHMW. However, aerial photographs in the NMR were identified, as recorded below. Detailed map evidence is available from the 1820s with surveys of the area carried out in connection with the various railway proposals which affected Caernarfon in this period and as part of the tithe remission. The first 25" ordnance survey was carried out in 1889. As a private high-status dwelling which becomes a hospital, newspaper coverage proved particularly informative; use was made of the online facility offered by the NLW. In addition the archives of the Welsh National Memorial Association were searched at NLW and those of the Caernarvonshire and Anglesey Hospital Management Committee at CRO. It is noted that few archaeological surveys are known to have been undertaken of hospitals in Wales; a survey of the Denbigh asylum was undertaken by the RCAHMW with advice from Dr Pam Michael, and the notes

¹ B. Smith and TN George: *British Regional Geology North Wales* (HMSO 1961).

and records are curated in the NMR. In addition, a report has been carried out on Minffordd hospital, Bangor, by GAT.²

2.3 Archaeological overview – by Dr David Gwyn and Dr Pam Michael

2.3.1 Prehistory

In the mid-19th century, what was described as an ‘incense cup’, now in the National Museum of Wales, was discovered within a cinerary urn, broken into pieces by the finders, ‘near Bryn Seiont, Caernarvonshire’. The cup was illustrated in *Archaeologia Cambrensis* for 1868, which notes that it is ‘formed with considerable skill; the panelled compartments are arranged lozengewise, with open work, suggesting a certain resemblance to a little basket.’ The presence of an incense cup or pigmy cup and the other unrecorded artefacts, strongly suggests the existence of a Bronze Age burial site on or near the grounds of Bryn Seiont, given the probability of satellite burials. No indication is given as to where these artefacts were recovered. It is possible that they were identified in the course of house-building on the site in 1842, or of converting the nearby railway to standard gauge in 1866 (see below 2.3.5).

2.3.2 Roman

The recorded history of the area begins with the establishment of a Roman military base at Segontium, to the north of the study area, in the early Flavian period (AD 70-80). It is likely that the road south from Segontium and later pre-turnpike roads would have crossed the Seiont river to the east of the three present crossings (SH 4823 6171 C).³ Trial trenching by Gwynedd Archaeological Trust identified no remains adjacent to the study area.

2.3.3 Medieval

During the reign of Gruffudd ap Cynan (c. 1055-1137), Caernarfon developed as the *maerdref* of the commote of Is-Gwyrfaï, with a *llys* (royal palace) as its focus. It is recorded that Hugh of Avranches built a motte on the site of the later Caernarfon castle in 1090; it is likely that this reflects the existence of a native commotal centre (*maerdref*) in the vicinity. Following the Edwardian conquest in the late 13th century, the burgh town of Caernarfon grew as a regional centre, under the sponsorship of several notable estates, of which the most significant is Vaynol, who owned the land around the hospital site. The origins of this estate go back to the 16th century when the bishops of Bangor began to sell property belonging to their manor of Maenol Bangor. The estate was then developed by the Williams family, and passed to the Crown on the death without issue of Sir William Williams in 1696. The area in the southern part of the parish, from the Seiont to the Gwyrfaï rivers, formed part of the township or manor of Castellmai. This at one time belonged to the Bishop of Bangor (possibly a remnant of the maenol) but was released in 1682 from Ellin Robyns to William Williams, styled as ‘gent.’⁴

2.3.4 Post-Medieval and Early Industrial (1700-1800)

A Vaynol survey of 1777 confirms that the Bryn Seiont site was then in the ownership of Sir Watkin Williams Wynne of Wynnstay (though it does not show it), but the land tax assessments, which begin

² GAT (A. Davidson, M. Jones and J. Roberts): *Minffordd Hospital Bangor: Archaeological Building Recording. Report 872* (2010).

³ David Hopewell, Gwynedd Archaeological Trust, pers. comm.

⁴ W.H. Jones: *Old Karnarvon* (Caernarfon, 1882), 176.

in 1774, do not mention it as such.⁵ A possible explanation is that it then went under another name. A draft mortgage of Bryn Seiont for £900 in 1819 indicates that it was then inhabited by Robert Humphreys, gentleman; the only property in Castellmai associated with the Humphreys family goes under the name of Glanrafon.⁶ If this is an earlier, or alternative name for Bryn Seiont, then it was owned by the Robyns (occasionally Robynson) family, described in the late nineteenth century as ‘a prolific family in Carnarvon at one time, but ... extinct now’, until 1804. Thereafter several owners’ names appear but in 1812 ownership settles on one William Humphreys, probably a member of the long-established minor gentry family associated with Plas Llanfaglen and Rhuddgaer.⁷

The development of the Nantlle slate industry in the late 18th century was one of the factors that led to the improvement of the road from Caernarfon south. By the early 19th century the turnpike located by the bridge adjacent to the study area had become the most productive in the county because of the number of slate carts passing through.⁸

2.3.5 Later Industrial Period (1800-1913/14)

The Nantlle Railway survey of 1825 (figure 2a) shows a house (PRN 38195) apparently located slightly to the west of the present main hospital building, confirmed by a slightly later plan of the Coed Helen estate below (figure 2b).⁹



Figure 2a: Nantlle Railway survey 1825

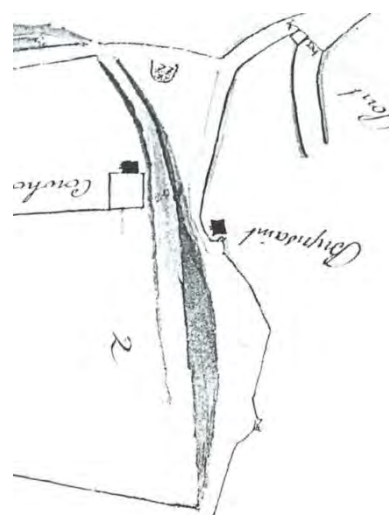


Figure 2b: Coed Helen estate plan 1828

The tithe map of 1840 (figure 3) offers a little more detail. The property was divided into three lots, all owned and occupied by Jane Hughes.

Number	Name	Cultivation	Extent
1410	Winllan	woods and pasture	0 acres 3 roods 2 perches
1411	Cae scubor	meadow	1 acre 1 rood 26 perches
1412	Bryn	homestead	0 acres 1 rood 0 perches

⁵ CRO: Vaynol 4056

⁶ NLW: Henry Rumsey Williams 919.

⁷ CRO: X/QA/LT/6/7; W.H. Jones: *Old Karnarvon*, 177; J.E. Griffith: *Pedigrees of Caernarvonshire and Anglesey Families* (Horncastle 1914), 394.

⁸ E. Hyde Hall: *Description of Caernarvonshire* (Caernarfon, 1952), 187.

⁹ CRO: X/Plans/R/1, Coed Helen 267

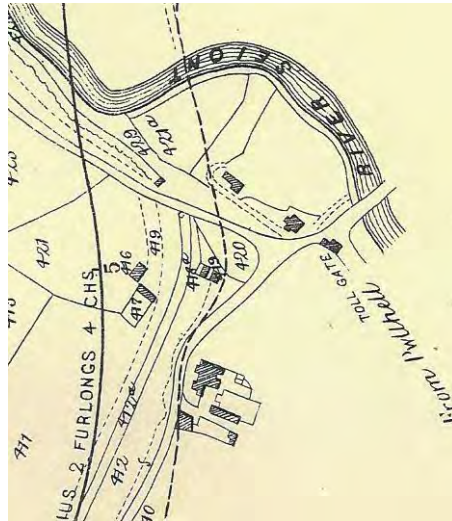


Figure 4: 1864 railway plans

The inhabitants of Bryn Seiont qualify as ‘Nobility, gentry and clergy’ by the undemanding standards of Caernarfon in the trade directories of the early to mid-nineteenth century. In 1844 it was the home of Benjamin Smith, a Black Country engineer employed as manager of Tal y Sarn quarry in Nantlle, who had also worked in Canada, then in 1849-50 of the Rev. David Roberts, a nonconformist minister. The census of 1851 suggests that it was divided up into tenements; Mrs Roberts and her four children are in residence though Mr Roberts is away, presumably on a preaching engagement, and a visiting minister is being entertained, but the house is shared with a customs collector, his wife, their five children and two servants, and with an agricultural labourer, his wife and daughter.

From 1865 until shortly after his bankruptcy 1878, Bryn Seiont was the home of Charles Pearson, variously titled ‘Esq.’ and ‘Captain’ (presumably a Volunteer rank).¹³ The property was conveyed to him by Jane Hughes and others on 31 May 1866.¹⁴ It was Pearson who ordered the erection in 1872 of the present (2013) yellow-brick house, at SH 4822 6152 to a design by J. Thomas, architect of Caernarfon.¹⁵ Little is known of Pearson, though he was clearly associated with the Nantlle-Moel Tryfan slate industry, at Coed Madog and at Braich quarries and probably elsewhere; Dr Gwynfor Pierce Jones’ PhD thesis *The Economic and Technological Development of the Slate Quarrying Industry in the Nantlle Valley, Gwynedd*, states (chapter 2):

There was only one significant leasehold sole trader in the Nantlle area during the second half of the nineteenth century, namely John (*sic*) Pearson of Newton-le-Willows. Hardly anything is known with certainty about this entrepreneur, but the few details which have been uncovered suggest that he was involved in a major investment of personal capital which might have made a significant difference to the history of the district had it been made a decade earlier. Pearson first appeared at Nantlle when he bought the interest of the Coedmadog Quarry in 1880 and subsequently of Braich Quarry in 1881, just as the market demand for slate was diminishing. By 1886-87 he was negotiating for the purchase of the important Talysarn Quarry and also the Tanrallt Quarries, but the high asking price for the former was not acceptable at the deepest point of the depression. Before any further progress could be made, Pearson died (in 1887) and the opportunity to

¹² CRO: X/Plans/R/42.

¹³ NWC 7 January 1865 and 14 December 1878.

¹⁴ NLW WNMA 43, fol. 12.

¹⁵ NWC 1 June 1872.

consolidate a strong business unit, which would have been amongst the top four in the industry, was lost.

Clearly Pearson had in fact been resident in the area from much earlier on, and the likelihood is that he was involved in the Cilgwyn Slate Company, which was controlled by the Haywards of Shropshire, a long-established county family which had produced some regionally significant architects in the 18th and 19th centuries.¹⁶ William Hayward, manager of Cilgwyn slate quarry, is described as living in Bryn Seiont in Slater's *Trade Directory* for 1868 and Worrall's, which dates from after 1871.

Whatever domestic arrangements existed between the Pearsons and the Haywards are now beyond recovery, but newspapers tend to describe the Pearsons as resident in Bryn Seiont and the *Liverpool Mercury* included the wedding of their daughter to Captain Charles Gordon Duff of Trefarthyn in Anglesey as among the 'fashionable marriages' of the 1875 season. Pearson's father-in-law was Edward Burtenshaw Sugden, first Baron St Leonards, a hair-dresser's son who had risen to become a judge, a Tory politician and a Privy Councillor.¹⁷

Following Pearson's bankruptcy, it was offered for sale in 1879 by the auctioneers William Dew and Co. The description is as follows:

Lot 1

1. Bryn Seiont house, yard, shrubberies, drive, croquet ornamental grounds and wood
2. Stable, cow-house, out-buildings, yards, etc.
3. Part of a kitchen garden and greenhouses
4. Field
5. Plantation
6. Parts of field and plantation

Lot 2

7. Parts of field and plantation
8. Part of a kitchen garden

Lot 3

9. Parts of field and plantations

Lot 4

10. Parts of field and plantations

The house is described as follows:

Large entrance hall, with tessellated (sic) floor; ditto drawing and dining rooms, library and smoking room; wide staircase and landing, seven best bedrooms, two dressing rooms, back staircase; housekeeper's room; butler's pantry, well fitted up; kitchens, cook's pantry, scullery, dairy and larder, fitted with slate tables; servants' hall, outside boot hole, wash house, conservatory, dove cote, and large yard.

¹⁶ H. Colvin: *A Biographical Dictionary of British Architects 1600-1840* (Yale University Press, 1995), 483-485; J.L. Hobbs: 'The Hayward family of Whitchurch', *Shropshire Gazette*, January 1960, 21-22.

¹⁷ *LM* 20 May.

The outbuildings are described as ‘... a range of fowl pens, with two double coach houses, two two-stall stables, two loose boxes, saddle room, cow house, piggery, hound kennel etc.’ The walled kitchen garden is described as ‘well stocked with trained trees, a fine conservatory &c.’

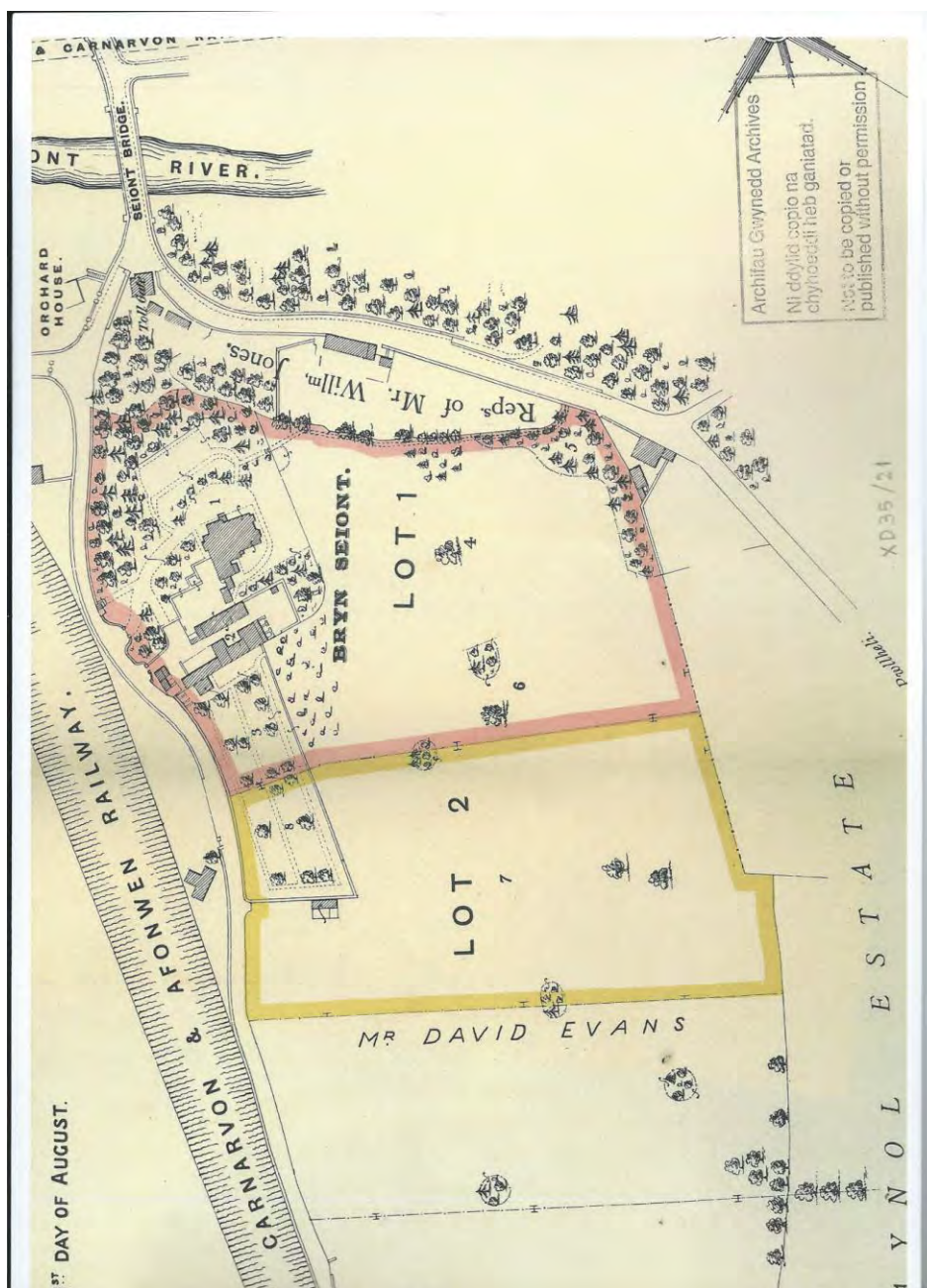


Figure 5: Map of site as offered for sale in 1879 and 1881

It was again offered for sale in September 1881 but withdrawn.¹⁸ A William Hayward, presumably son of Hayward the elder, is living there in 1881, with his wife, three daughters, two domestic servants and a groom on the evidence of the 1881 census, but in November it was apparently purchased by J.B. Allanson, a lawyer who was also an officer in the Salvation Army.¹⁹ It was for a while the residence of the Congregationalist minister Evan Herber Evans DD.²⁰

¹⁸ NLW: Caerns 23, LM 9 September.

¹⁹ LM 9 November 1881, NWC 4 June 1887.

²⁰ Y Genedl Cymreig 24 April 1894.

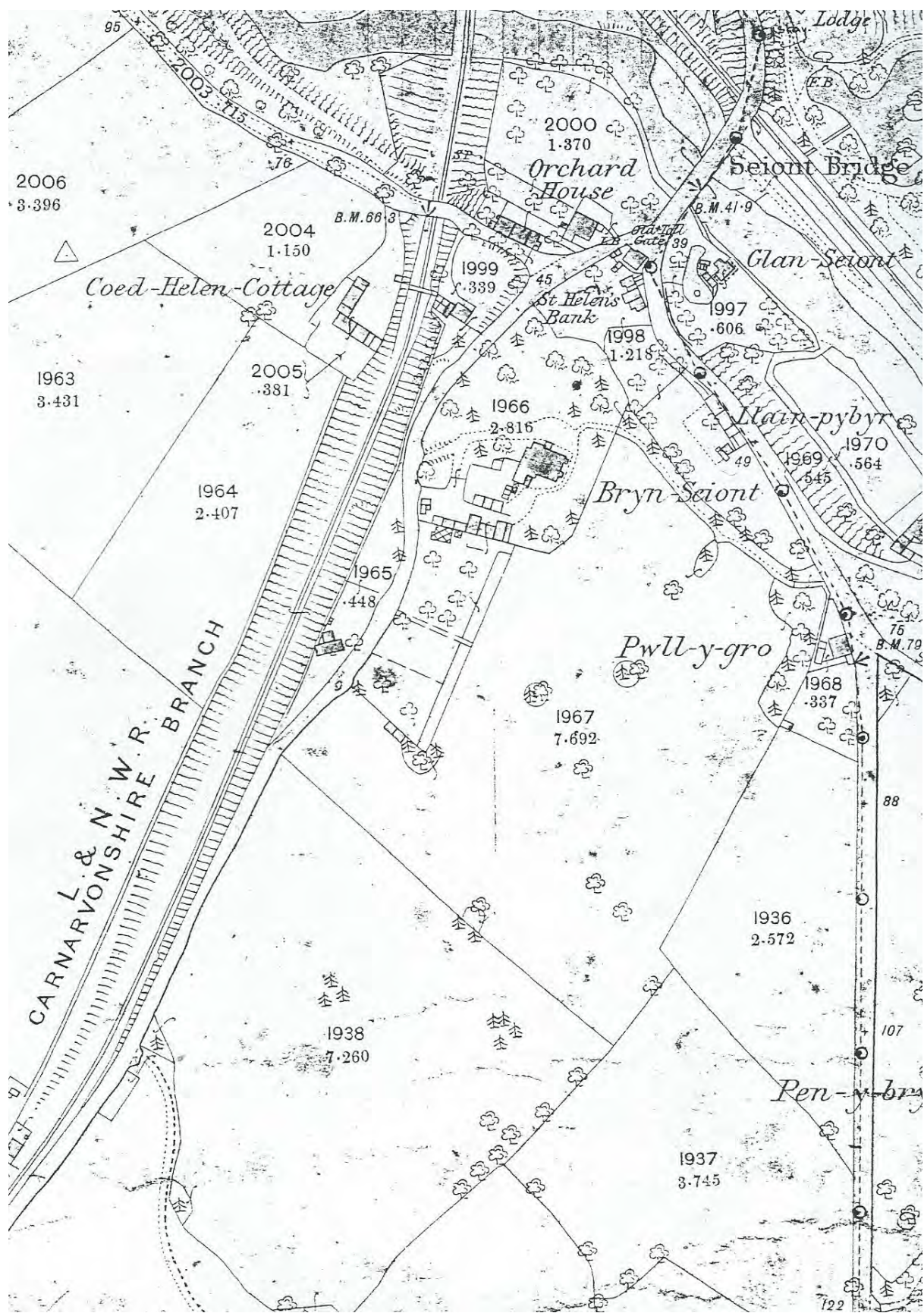


Figure 6: 1889 25" ordnance survey XV 8

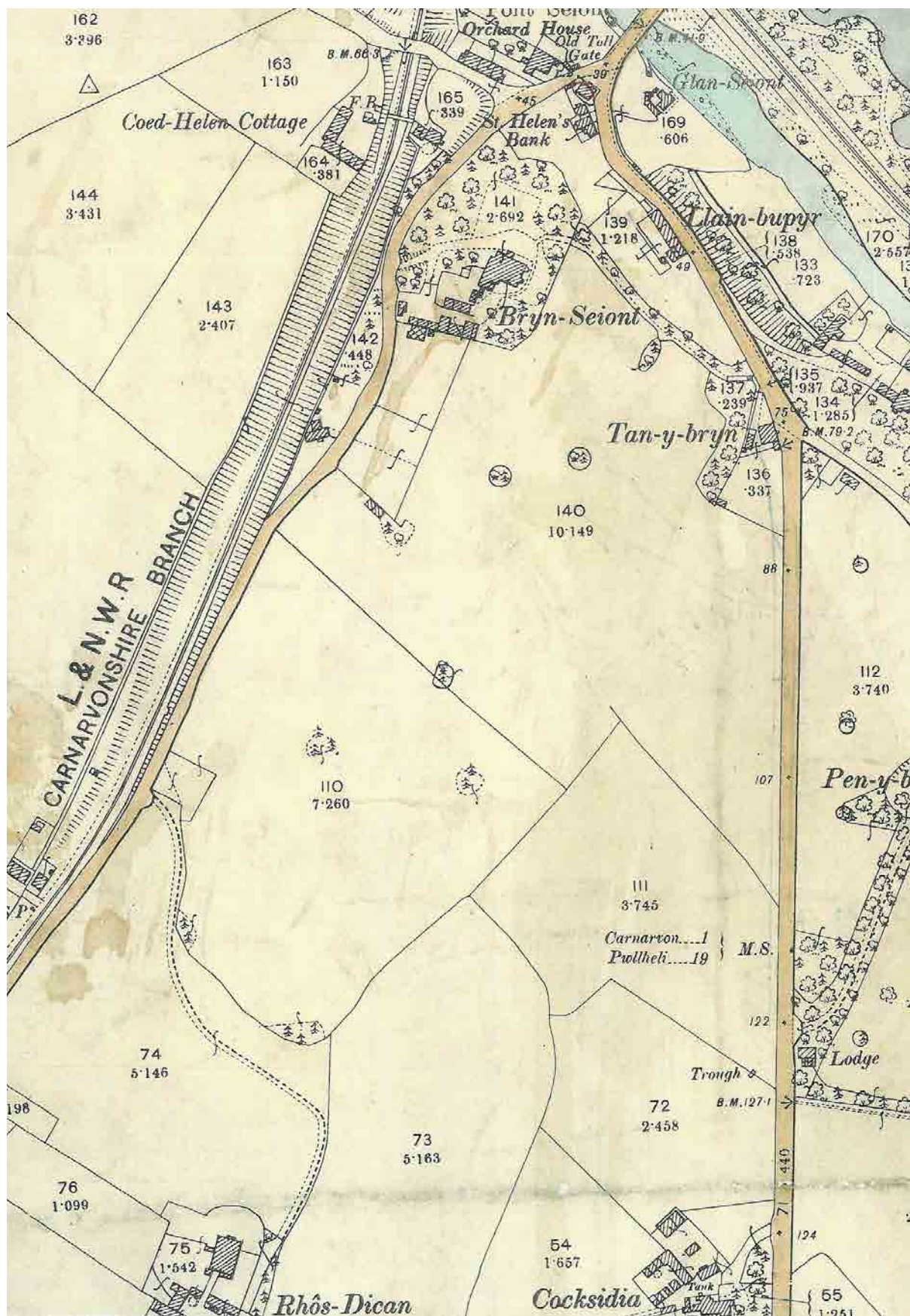


Figure 7: 1900 25" ordnance survey XV 8

Despite these various changes of occupant, and despite the fact that it was offered for sale again, the censuses for 1891, 1901 and 1911 suggest that it remained the residence of persons connected with the Cilgwyn slate quarry. Henry Carter, a solicitor born in St Helen's, Lancashire, is recorded as living there in 1891 with his wife Lumley, his brother Cuthbert and one servant. Ten years later, the family had grown to include five children, all aged between 1 and 9, three servants and a governess, Hylde Gohel, born in Eisenach 'F.S.' (*Freistaat [Thüringen]*). Carter was an associate of Vincent, the local lawyer who stood as the Conservative candidate against Lloyd George in the election of 1910, and at a time when passions were running high, a crowd of incensed Liberal-leaning quarrymen attacked the ornamental gardens after closing time one Friday night.²¹ By 1911 Lumley was a widow, living with four teenage children and four-year-old Stuart, as well as a cook, a housemaid, a waitress and a general servant.²²

Between 1881 and 1889 an additional driveway was laid on from the Porthmadog road at Pwll y Gro to reach the house from the east (figures 5 and 6), but the three 25" ordnance survey maps suggest that the property underwent little change between 1889 and the beginning of the 20th century (Figures 6, 7 and 9). Between 1889 and 1900 an enclosure was erected in the westernmost part of the grounds at SH 4805 6126 which seems to have been removed by 1918. A fountain appears to the east of the house between 1900 and 1918. However, some of the smaller changes may reflect discrepancies in the ordnance's survey's recording – for instance, a field boundary from SH 4820 6120 to 4807 6131 appears in 1879, 1881, 1881 and 1918, but not in 1889 or 1900. The boundary between the Bryn Seiont grounds and Parc Muriau appears on every map from this period except 1900. Neither the 1889 nor the 1900 maps show a boundary from SH 4821 6143 to 4831 to 6137, which appears in 1879, 1881 and 1918. The 1918 map simply refers to the house as 'Bryn Seiont', and makes no reference to its re-use since 1914 as a hospital.

2.3.6 Hospital period (1913/14-2013)

The last century of the site's development reflects the changing nature of medical care, and the evolving role of the state in its provision.

During the 19th century, outbreaks of infectious diseases, such as cholera and typhoid, caused death and serious illness amongst all ages of the population. By the end of the century these diseases had largely been brought under control, through improved public health provision, especially clean water and sewage disposal, as well as quarantine regulations.²³ Following the Public Health Act of 1872, responsibility for the provision of isolation hospitals lay with county and borough councils. Infectious diseases such as diphtheria and measles continued to cause epidemics and seriously imperil the health of children. There were no drugs to control infections and prevent high temperatures until the appearance of sulphanomides in the inter-war period followed by the introduction of penicillin at the end of the Second World War. In Carnarvon in 1845 a workhouse named Bodfan was erected containing an infirmary, and some facility for isolation, but in about 1904 a separate isolation hospital was cited at Gallt y Sil, called the Caernarfon Fever and Isolation Hospital. A similar facility, the Minffordd Isolation Hospital, was built for the Bangor area, and opened in 1895.²⁴ These provided important isolation facilities for these two towns and their surrounding areas, and at times

²¹ *Pembrokeshire Herald and General Advertiser* 28 January 1910.

²² The argument for connecting the Carter family of Bryn Seiont with Cilgwyn quarry is that various Carters as well as Haywards were associated with the quarry in the late 19th century and that the quarry operated a locomotive named *Queenie*, the name of one of Lumley's daughters.

²³ G. Roberts: 'Closing the stable door after the horse has bolted: preventing the spread of smallpox and cholera in Caernarfonshire, 1870-1910' *TCHS* 55 (1994), 109-28; T. Meirion Hughes: *Caernarfon Ddwe: Y Colera a'r Gronfa Ddwr Newydd* (Caernarfon, privately published, 1996).

²⁴ G. Roberts and A. Evans: *The Centenary of Minffordd Hospital, 1895-1995* (Bangor 1996).

when an epidemic raged, all of the beds would be filled. At other times, however, there could be many empty beds in these specialist hospitals.

Epidemics came in waves, but by the early 20th century it was realised that a serious endemic disease was regularly causing many premature deaths, and that the spread of this disease too could be limited through isolation of affected patients. Tuberculosis was a disease that could affect any part of the human body, but most often affected the lungs and took the form of pulmonary tuberculosis, commonly known as 'phthisis'. The cause of this disease, a bacillus, was discovered under a microscope in 1882 by Robert Koch. TB, otherwise known in Welsh as *y dicáu* ('the decay') or as *y darfodedigaeth* ('the visitation'), was endemic throughout many rural and industrial communities in north Wales, and was particularly serious in the quarrying districts of Caernarvonshire.²⁵ It was strongly associated with poor housing, poor ventilation and poverty. Identifying the specific causal agent, the bacillus, did not help to provide an immediate cure, nor did it help to prevent the spread of the disease. Where rates of TB began to fall, it was usually as a result of improved social conditions and it has been argued that improvements in diet were crucial.²⁶ In Wales, where poverty and poor housing conditions prevailed, the rates of tuberculosis were much slower to fall than in more prosperous regions of England. TB was regarded as a particular 'scourge' of Wales, and became a national issue. In 1910 the King Edward VII Welsh National Memorial Association was established in Wales, with an initial donation of £150,000 from the coal-owner, David Davies of Llandinam. This was a voluntary organisation aimed at preventing and eradicating tuberculosis in Wales through public health education and the provision of hospitals and treatment.

The Liberal social reforms of the early 20th century laid the early foundations of the welfare state and introduced important measures in regard to state medical provision. The National Insurance Act of 1911 was designed and introduced by the MP for Carnarvon Boroughs, David Lloyd George, who was then Chancellor of the Exchequer. This Act provided free access to medical treatment by a family doctor for the male breadwinner of the family if he were not earning enough to pay for private medical care. The Act did not provide any treatment for the wife or children of insured workers, nor did it allow for free hospital treatment for either the insured worker or his family. However, recognising the serious threat posed to the health of the nation by TB, Lloyd George awarded this disease a special status under the terms of the 1911 Act and so both insured workers and any member of their family suffering from TB was entitled to receive free care in a sanatorium. The Act also empowered the Insurance Commissioners to provide funds for the erection of sanatoria or hospitals for the treatment of TB.²⁷ This legislative measure gave a great impetus to the development of a network of TB hospitals and sanatoria.

Whereas in England the local authorities took direct responsibility for the treatment and prevention of TB, in Wales they agreed to transfer their responsibility directly to the King Edward VII Welsh National Memorial Association. This meant that an all-Wales service was provided for TB, and formed the first ever all-Wales arrangement for health services provision.²⁸ One of the first hospitals

²⁵ John Davies: 'Y gydwybod gymdeithasol yng Nghymru rhwng y ddau ryfel byd', in Geraint Jenkins (ed.) *Cof Cenedl IV: Ysgrifau ar Hanes Cymru*, 4 (1989), 153-78. John Davies: 'The communal conscience of Wales in the inter-war years', *Transactions of the Honourable Society of Cymmrodorion* (1998), 145-60. Glynne Roberts: 'Sickness and Health in Caernarfonshire, 1870-1939' in Pamela Michael and Charles Webster (eds): *Health and Society in Twentieth-Century Wales* (Cardiff, University of Wales Press, 2006), 60-77.

²⁶ T.B. Smith: *The People's Health 1830-1910* (London: Croom Helm, 1979); Thomas McKeown: *The Modern Rise of Population* (London, 1976).

²⁷ Linda Bryder: *Below the Magic Mountain: A Social History of Tuberculosis in Twentieth-Century Britain* (Oxford Historical Monographs, Clarendon Press, Oxford, 1988), 36-7.

²⁸ Linda Bryder: 'The King Edward VII Welsh National Memorial Association and its Policy towards Tuberculosis in Wales, 1910-48', *The Welsh History Review* 13 part 2 (1986), 194-216.

to be created under this new scheme and funded by the Welsh Insurance Commission was the Bryn Seiont Hospital, Caernarfon.

In 1913, on the recommendation of its local committee, the Welsh National Memorial Association decided to acquire the house and grounds of Bryn Seiont for use as a TB hospital.²⁹ The conveyance from Miss L.J. Jones to the Association was completed in April 1914,³⁰ and local architect, Joseph Owen of Menai Bridge, was appointed to prepare plans for converting the mansion to a hospital.³¹ The change of use involved protracted negotiations with local authorities and the London and North Western Railway for certain easements, and considerable difficulties had to be overcome in arranging for the disposal of sewage. It was not until 1915 that plans were finally approved by the Welsh Insurance Commissioners, who were providing grant aid, and tenders were invited for the building work.³² The contract was awarded to Messrs Humphreys, Ltd., Knightsbridge, Hyde Park, London for a tender of £3,160, plus the cost of drainage works at £1,040.³³ The final capital cost of purchasing and converting Bryn Seiont into a TB hospital was £8,074.³⁴

Whereas a number of Welsh TB hospitals, including Bryn Seiont and Craig-y-Nos in Breconshire,³⁵ were opened in large houses which had been converted, the two central sanatoria opened by the Welsh National Memorial Association in Wales were largely purpose-built. The North Wales Sanatorium at Llangwyfan, Denbighshire, although built on the site of an existing house, was built as a series of pavilion type blocks.³⁶ It provided 226 beds and treated patients from across North Wales. Similarly, the South Wales Sanatorium at Talgarth, Breconshire, was a major new institution constructed to provide 304 beds, and was the largest sanatorium in the UK.³⁷ Both the South Wales and the North Wales Sanatorium were officially opened in 1920, providing open-air wards and large grounds to enable the patients to have plenty of fresh air and exercise. The idea of a sanatorium was based upon the notion of it being possible to cure TB, particularly pulmonary TB through fresh air treatment. Patients from Caernarvonshire who were considered able to respond to such treatment would have been sent to Llangwyfan. The provision at Bryn Seiont was different as it was essentially run as a small local hospital for TB cases. Some patients admitted to Bryn Seiont were very ill and confined to bed. The hospital catered for men, women and children. Statistically, children were more likely to suffer from non-pulmonary tuberculosis, where the disease attacked the joints, or pelvic region, or the skin. The proportion of non-pulmonary cases treated at this institution was to prove relatively high. Whilst this new hospital was being purchased and converted, the old Borough Fever Hospital was temporarily acquired for use as a TB hospital and provided accommodation for

²⁹ NLW: printed works, Welsh National Memorial Association, Finance Committee minutes, 2/10/1913, p.6

³⁰ NLW: Welsh National Memorial Association Records Volume 43, p. 12, register of documents of title, 6 April 1914.

³¹ NLW: printed works, King Edward VII Welsh National Memorial Association, Finance Committee Minutes, January 13, 1916, p 2.

³² Third Annual Report for the year ended 31 March 1915, 28.

³³ National Library of Wales, printed works, King Edward VII Welsh National Memorial Association, Finance Committee Minutes, 14 October 1915, 29.

³⁴ NLW: XRC 304 W43, The King Edward VII Welsh National Memorial Association, (1932) Summary of History, Constitution and Activities of the Association together with Brief Description of its Sanatoria and Hospitals, 'Bryn Seiont'.

³⁵ Craig y Nos was the home of the famous opera singer Adelina Patti and was purchased by the WNMA in 1921; it ran as a TB sanatorium from 1922 to 1959, when it became a hospital for elderly patients, many suffering from dust diseases associated with the coal industry, a parallel with Bryn Seiont. By 1930 it had 104 beds. Ann Shaw and Carole Reeves: *The Children of Craig-y-Nos: Life in a Welsh Tuberculosis Sanatorium 1922-1959* (Wellcome Trust Centre for the History of Medicine, University College London, 2009).

³⁶ Buddug Owen: *Llangwyfan: Sanatorium to Hospital* (Caernarfon, Gwasg y Bwthyn, 2007).

³⁷ Glynne R. Jones: 'The King Edward VII Welsh National Memorial Association, 1912-1948', in J. Cule (ed) *Wales and Medicine* (London, 1971), 30-41.

26 patients.³⁸ During the First World War the cost of building materials and labour escalated rapidly and many projects were abandoned, but the conversion of Bryn Seiont was so far advanced that it was decided to complete the hospital building.³⁹ The Brynseiont Tuberculosis Hospital was finally opened on 26 April 1916, and the temporary arrangement with the isolation hospital was terminated.⁴⁰ Brynseiont provided 36 hospital beds, and employed a staff of nineteen, including a matron, a sister, one nurse and four probationer nurses, seven maids and servants, one porter, two gardeners, a charwoman and a clerk-dispenser.⁴¹



Figure 8: CRO: XS/1515/4. The entrance to the hospital during the First World war, showing staff, children (thought to be patients) and 'other rank' soldiers wearing issue 'convalescent blue' uniform and four-in-hand ties. There is no evidence that Bryn Seiont was used as a 'war hospital', and the soldiers were probably sent there because they were found to be suffering from TB.

A Visitors' Book was started in 1914, around the time of the purchase of the property; the first signatory, Margaret Lloyd George, of no. 11 Downing Street, wife of the Chancellor of the Exchequer, remarked that she was 'highly pleased'.⁴² On 30 June 1917 the hospital was visited by Violet Douglas Pennant, a daughter of Lord Penrhyn of Penrhyn Castle in Bangor, and the only woman member of the Welsh Insurance Commission, the body which had financed the conversion. On 22 August 1917, J. Lloyd Jones, of Criccieth Rectory, visited the hospital and recorded that 'The Mortuary Chapel is an excellent feature of the Hospital'.⁴³ Almost immediately on opening there began a series of small improvements to the buildings and grounds. A store house for petrol was erected, in order to comply with the requirements of the insurance policy, and clinker was delivered from Caernarfon gasworks at a cost of 2/- per load in order to lay footpaths.⁴⁴ These changes are not confirmed by the 1918 25" ordnance survey, which may have been using pre-war survey data.

³⁸ NLW: printed works, King Edward VII Welsh National Memorial Association, Second Annual Report for the year ended 31 March 1914.

³⁹ NLW: printed works, King Edward VII Welsh National Memorial Association, Medical Committee minutes, 13 January 1915, 4.

⁴⁰ NLW: printed works, King Edward VII Welsh National Memorial Association, Council Minutes, April 28, 1916, 5.

⁴¹ NLW: Mss Welsh National Memorial Association Records, volume 49, 6-7.

⁴² CRO: XY 3/1 Visitors Book, Tuberculosis Hospital, Carnarvon, entry for 5 March 1914.

⁴³ Ibid. 30 June 1917 and 22 August 1917.

⁴⁴ NLW: printed works, King Edward VII Welsh National Memorial Association, Finance Committee minutes 12 October 1916, 22-23.,



Figure 9: 25" ordnance survey 1918 XV 8

There was continuing investment in the hospital during the inter-war years. In 1925 it was reported that 'The life of patients ... has been made pleasanter by the erection of recreation rooms'.⁴⁵ In 1928, £35 was spent on repairs to the greenhouse, £100 on alterations to the staff pantry, and £180 on the domestic hot water supply and heating of the Men's Block.⁴⁶

Many of the patients admitted to the institution were in an advanced stage of tubercular disease; therefore, many deaths occurred amongst them. The hospital dealt with cases of both pulmonary tuberculosis and other types of tuberculosis, and 'much surgical work' was undertaken at this institution.⁴⁷ A significant proportion of the patients had non-pulmonary tuberculosis in their bones and joints. In 1928, for instance, fifteen men were admitted to Bryn Seiont with the disease in their bones and joints as compared to thirty-six men with pulmonary tuberculosis during the same period. These patients with non-pulmonary tuberculosis were most likely to receive surgical treatment. Some patients with pulmonary tuberculosis were given pneumothorax treatment, but the results were 'not very encouraging', and suitable cases were 'few and far between'.⁴⁸ Later, during the 1930s, a growing number of patients were treated by this method, which involved collapsing the lung then re-inflating it, in an attempt to restore some elasticity. The hospital also treated patients who had previously undergone this treatment, here or elsewhere, by giving them 're-fills'.

During 1925, 172 patients were treated at Bryn Seiont Hospital, including 76 patients for pulmonary tuberculosis, 62 for non-pulmonary tuberculosis and 34 were kept under observation.⁴⁹ Of those kept under observation, 15 patients were found to be tuberculous, 13 non-tuberculous and 6 cases remained doubtful.⁵⁰ The report for 1927 gives some indication of the outcomes for patients who were discharged from this institution during the year: 60 patients had improved, nine had died, and 28 had shown no material improvement.⁵¹

The hospital treated men, women and children. During the twelve months ending 31 December 1928, 120 patients were admitted, comprising 58 men, 48 women, 11 boys and 3 girls.⁵²

Fresh air was considered to be extremely important for tuberculosis patients, and this is one reason why Bryn Seiont was considered suitable, as it was on a hill and a little way from the town. However, most of the patients who came to this hospital were advanced cases requiring medical treatment; their general health was affected by the disease and they required a comfortable environment and a warm and equable temperature. Open coal fires could not be used, or closed stoves, and the only suitable method of heating was that of a central heating system. Therefore the installation of a good boiler, capable of running a central heating system within the main building and outer wards, was essential. In 1929 it was reported that 'a big stride' had been made by 'converting an open-air block

⁴⁵ NLW: WNMA printed books, 12th Annual Report for the year ended 31 March 1925, 59.

⁴⁶ NLW: WNMA Mss volume 49, Estimates for the year ending March 31/1928, 20.

⁴⁷ NLW: printed works, King Edward VII Welsh National Memorial Association, 13th Annual Report for the year ending 31 March 1926, 74.

⁴⁸ NLW: printed works, King Edward VII Welsh National Memorial Association, 14th Annual Report for the year ending 31 March 1927, 95.

⁴⁹ NLW: printed works, King Edward VII Welsh National Memorial Association, 14th Annual Report for the year ending 31 March 1927, 94.

⁵⁰ NLW: printed works, King Edward VII Welsh National Memorial Association, 14th Annual Report for the year ending 31 March 1927, 94.

⁵¹ NLW: printed works, King Edward VII Welsh National Memorial Association, 14th Annual Report for the year ending 31 March 1927, 95.

⁵² NLW: printed works, King Edward VII Welsh National Memorial Association, 16th Annual Report for the year ending 31 March 1929, 74, The children to be seen in CRO: XS/1515/4 were probably patients

of fifteen beds to hot-water central heating'. That same year a balcony was completed which enabled patients to be placed outside during the milder months.⁵³ In 1930 Messrs C & W Land were contracted to provide a hot water supply in the Old Block and Men's building at Brynseiont Hospital.⁵⁴

When X-Ray equipment was installed it proved to be of the 'greatest value', as it facilitated better identification of cases. In 1925 one hundred and forty-four cases were examined, forty seven of whom 'were suspicious pulmonary cases'. Of the forty-seven cases described as 'suspicious', nineteen were diagnosed by X-ray as definitely having active tuberculosis, whilst twenty-eight were found to be non-tuberculous.⁵⁵ In 1927 a Potter Bucky diaphragm was added to the X-ray plant and the positive results of this innovation were described as 'most gratifying'.⁵⁶ The X-ray plant was used not only for the diagnosis of in-patients but also for out-patients from the surrounding areas. It was also generally available as a medical-diagnostic aid for local inhabitants through the local General Medical Practitioners.⁵⁷ During the year 1927, 303 X-ray films were taken, and the number of out-patients receiving X-ray examinations was 170. Amongst them were seven candidates who were examined for the silicosis authorities, investigating the alleged link between pulmonary tuberculosis and silicosis.⁵⁸

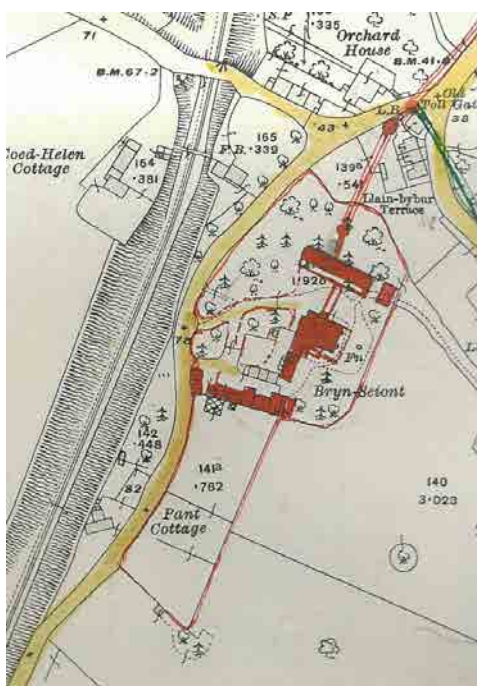


Figure 10: Pre-1930 manuscript additions to 1918 map

⁵³ NLW: printed works, King Edward VII Welsh National Memorial Association, 18th Annual Report for the year ending 31 March 1930, 74.

⁵⁴ NLW: Welsh National Memorial Association records, Mss., Journal 45, item 4/4 31 January 1930.

⁵⁵ NLW: printed works, King Edward VII Welsh National Memorial Association, 13th Annual Report for the year ending 31 March 1926, 74.

⁵⁶ NLW: printed works, King Edward VII Welsh National Memorial Association, 14th Annual Report for the year ending 31 March 1927, 95.

⁵⁷ NLW, XRC 304 W43 The King Edward VII Welsh National Memorial Association, *Summary of History, Constitution and Activities of the Association Together with Brief Description of its Sanatoria and Hospitals*, entry for 'Bryn Seiont'.

⁵⁸ NLW: printed works, King Edward VII Welsh National Memorial Association, 14th Annual Report for the year ending 31 March 1927, 95.

Two years later, the hospital began to experience serious difficulties with fluctuations in the supply of the mains electricity to the institution and sudden drops in the voltage occurred. The hospital at this stage was still on direct current, but there were hopes that this would be changed to alternating current when improvements were made by the supply company. Fundamental requirements of basic on-site facilities, including electricity supply, sewerage and heating systems were crucial for the efficient operation of this hospital. A copy of the 1918 25" ordnance survey with pen-and-ink additions included in a report of 1930 (figure 10) indicates a structure to the north of the 1872 house, what is presumably a covered walkway connecting them, and what may be verandahs along the south longitudinal wall of the new block and on the east-facing wall of the 1972 house. To the east of the new block is a smaller structure, which may have been the recreation hall/billiard room known to have stood on this approximate site, probably the building noted in 1925 (see above).⁵⁹

In 1934 a new mortuary was built, enabling the old building to be adapted to form a 'much needed out-patient department'.⁶⁰

One problem with the site from the hospital point of view was the 'lack of room for expansion'. Whilst many small improvements were carried out, it was difficult to proceed with any substantial enlargement for want of space. In 1933 the area officer reported that only the acquisition of additional land would 'make it possible to extend the block to accommodate all the patients, leaving the older part of the structure, which is quite unsuitable for wards, free to provide adequate accommodation for nursing and domestic staff'.⁶¹

In 1937 the Welsh National Memorial Association purchased additional land adjoining Bryn Seiont hospital for the sum of £379.5s.0d. The following year it was reported that 'considerable attention' had been given to the garden and grounds, and that the appearance of the institution had been much enhanced by this acquisition of land to the south side of the main building.⁶² The grounds around the building were then asphalted, bringing about a 'remarkable improvement'.⁶³ These would have facilitated the movement of patients and trolleys between the different buildings and in wet weather would have been a great improvement for staff on foot. Staff and patients would be able to enjoy the gardens more when they could easily walk around them.

The X-ray facilities and expertise based at Bryn Seiont hospital played a key role in a number of research studies of the links between the quarrying industry and tuberculosis. A study by Dr Wade, Principal Medical Officer of the Welsh Board of Health, in 1927 concluded that slate dust was an important factor in predisposing quarry workers in the Gwyrfaai district of Caernarvonshire to TB.⁶⁴ The findings were contested and debate about the hazards of the slate industry and the link between silicosis and pulmonary TB continued throughout the inter-war years and beyond.⁶⁵ In 1930 a further study was conducted, instituted by the Mines Department 'to ascertain the possible

⁵⁹ Pendine Park 12.TC/1, 981/18/972, 981/19/972.

⁶⁰ NLW: printed works, King Edward VII Welsh National Memorial Association, Twenty-First Annual Report for the year ending 31 March 1933, 86.

⁶¹ NLW: printed works, King Edward VII Welsh National Memorial Association, Twenty-third Annual Report for the year 1933, 87.

⁶² NLW: printed works, King Edward VII Welsh National Memorial Association, Twenty-First Annual Report for the year ending 31 March 1933, 86.

⁶³ NLW: printed works, King Edward VII Welsh National Memorial Association, Twenty-Third Annual Report for the year ending 31 March 1935, 105.

⁶⁴ T.W. Wade: *Ministry of Health Reports on Public Health and Medical Subjects, No. 38. Investigation into the alleged high mortality rate from Tuberculosis of the Respiratory System among Slate Quarrymen and Slate workers in the Gwyrfaai Rural District*: (H.M. Stationery Office, 1927).

⁶⁵ Linda Bryder: 'Tuberculosis, Silicosis and the North Wales Slate Industry', in P. Weindling (ed.) *The Social History of Occupational Health* (London 1986).

relationship between the high death rate from pulmonary disease in the Gwyrfaï Rural District and the chief local occupation of slate quarrying'. A total of 120 workers were chosen for examination of the chest, and after clinical examination 61 of these were selected for radiological examination. The X-rays were carried out at Bryn Seiont Hospital. This study identified silicosis amongst the millmen, who were most exposed to fine dust, but concluded that 'no evidence was obtained so far as other occupations were concerned'.⁶⁶ A further study was carried out by H.D. Chalke for the Welsh National Memorial Association in 1933, which found some evidence for an occupational link, but also drew attention to the poor housing conditions in this area and lack of good public health provision.⁶⁷ As a result of this investigation, a tuberculosis visiting station was established with X-ray apparatus to conduct routine examinations of quarrymen. In 1937 the TB physician reported that a year's work had led him to conclude that slate dust was an important predisposing cause of tuberculosis within this locality.⁶⁸ Finally, a study by Dr T.W. Davies of Swansea for the Welsh National Memorial Association, conducted in 1939, reviewed the incidence of silicosis in coal miners and slate quarrymen and found the occurrence of tuberculosis with silicosis to be much more frequent in slate quarrymen than in coal miners.⁶⁹ In 1939 slate miners were included under the Workmen's Compensation (Silicosis) Act, and other workers in the slate industry were included in 1946. However, claims proved very hard to establish, and even when proven the levels of compensation were often very low.⁷⁰



Figure 11: RCAHWW: CPE/U.K.2615:2 6.9.98;F20"/16600:541SqdN 4028

⁶⁶ C.L. Sutherland and S. Bryson: *Report on an Inquiry into the Occurrence of Disease of the Lungs from Dust Inhalation in the Slate Industry in the Gwyrfaï District* (London, H.M.S.O., 1930).

⁶⁷ H.D. Chalke: *Report of an investigation into the continued high death-rate from tuberculosis in certain parts of North Wales* (The King Edward VII Welsh National Memorial Association, 1933).

⁶⁸ Linda Bryder: *Below the Magic Mountain*, 127.

⁶⁹ T.W. Davies, 'Industrial Pulmonary Fibrosis with special reference to silicosis in Wales', *Public Health* 55, 101-122.

⁷⁰ Edward Davies: *The North Wales Quarry Hospitals and the Health and Welfare of the Quarrymen* (Gwynedd Archives Service, 2003), 223-225, for an account of the difficulties experienced by workmen in claiming compensation.

An undated aerial photograph but apparently of 1939-1945 date (figure 11) shows a structure to the north of the 1872 house, on the approximate alignment of the building identified in the pre-1930 map.

An aerial photograph of 10 May 1946 (figure 12) also appears to show a structure to the north of the 1872 house, on the approximate alignment of the building identified in the pre-1930 map as well as structures on the perimeter of the hospital site along on an axis from SH 4819 6139 to 4821 6144. Both photographs appear to show the existing mortuary at SH 4818 6150.



Figure 12: RCAHWW: 3G/TUD/UK193Part.I 10 May.46.F/12"/207.Sqdn 6013

Following the Second World War, the introduction of streptomycin as an effective treatment for TB together with a general improvement in living conditions, especially diet and housing, led to a rapid fall in the rates of tuberculosis in the population of Wales.⁷¹ In 1950 a mass radiography scheme was conducted amongst the quarrymen of Caernarvonshire and around 90% of the workforce attended. This helped to detect signs of the disease in the population and facilitate treatment. Death rates from tuberculosis which had stood at 138 per 100,000 population for the five-year period 1926-1938 (as opposed to 104 for Wales and 92 for England and Wales) fell to 74 per 100,000 in 1946-50 (compared to 75 and 66 respectively) and dropped to just 14 per 100,000 in 1961-65, (compared to 9 for all of Wales and 6 for England and Wales). Tuberculosis had been effectively brought under control and the need for specialist hospital services had disappeared.⁷² The role of Bryn Seiont Hospital had to change.

By the 1950s it was evident that the United Kingdom had passed through what is known as the epidemiological transition – a shift from the dominance of infectious diseases, to a disease pattern where long term chronic illnesses were more common. Effective vaccination programmes and improved social conditions led to the disappearance of most of the older infectious diseases. The plethora of isolation hospitals and TB hospitals across Wales were no longer required. Life expectancy increased amongst the general population. Life expectancy at birth for men in England and Wales increased from about 59 years of age in the early 1930s to 69 by the mid-1960s, and for

⁷¹ Pamela Michael and Steven Thompson: *Public Health in Wales (c. 1800-2012): A Brief History* (Cardiff, sponsored by Welsh Government, 2012), 115.

⁷² CRO: *Report of the Medical Officer of Health for Carnarvonshire, for the year 1970*, 89.

women it increased from 62 to 75 over the same period.⁷³ Heart disease and cancers became the main causes of death amongst older people. Their needs and demands on the health services were changing. At the same time medicine was undergoing rapid modernization.

In 1948 Bryn Seiont hospital was transferred to the Welsh Regional Hospitals Board, and there was no investment or improvement, other than basic maintenance, for a number of years. Cledwyn Hughes, M.P., drew attention to this in a House of Commons speech in 1952, calling for a new hospital in Bangor and a reconfiguration of hospital services in Carnarvonshire.⁷⁴ By this time there was acute pressure on beds in the county, long waiting lists, especially for male patients, and serious problems of staff recruitment, as the old and dated hospitals could not recruit young registrars or senior consultants, since they could not provide experience of up-to-date treatments and therapies. Bryn Seiont was by this time admitting an increasing number of elderly patients with tuberculosis, and the nature of the hospital began to change.

The 1962 hospital plan envisaged a new system of District General Hospitals, which would provide a hub of expertise and meet the needs of the population in each district. Highly specialised services, such as brain surgery, would be provided by a few leading hospitals; teaching hospitals would still retain a special status. Other smaller hospitals would operate within the orbit of the District General Hospital. Under the hospital plan for Gwynedd Health Authority, Bangor was chosen as the site for Ysbyty Gwynedd, a new modern centralised facility fulfilling the role of a District General Hospital.⁷⁵

Both Eryri hospital and Bryn Seiont hospital were increasingly catering for the needs of elderly and infirm patients. By 19 March 1965 the new boiler house and boilers at SH 4821 6146 were 'now functioning'. A 'new car park' had been created by 16 July.⁷⁶ By this time they were both under the control of a single matron, Miss N.M. Owen.⁷⁷ By the early 1970s Bryn Seiont was dealing with cases of terminal illness, and staff provided palliative care. In 1972 a geriatric wing was added at SH 4826 6151.⁷⁸ In 1975 an extension to the terminal care unit at SH 4825 6153 was designed by architect John Leigh (figure 13).⁷⁹

The needs of elderly patients were changing and so was health and social policy. It was no longer regarded as appropriate to place elderly patients with dementia in the North Wales Hospital at Denbigh, and the new emphasis was upon 'Care in the Community'. To support this policy shift, it was necessary to create day centres that would support the needs of elderly patients with greater health care and social needs. During the 1970s Bryn Seiont developed a day care facility and in 1978/79 a sum of £5,800 was allocated to Bryn Seiont under the Area Plan for Health Services in Gwynedd, so that a new Day Hospital could be established. This meant that Bryn Seiont was evolving a more specialist role in this field, for day care facilities for the elderly were also being provided at Llangefni, Bangor (St Davids), Caernarfon (Gallt y Sil and Bryn Seiont), Pwllheli (Bryn Beryl), Penrhyndeudraeth (Bron Y Garth) Dolgellau and Llandudno. It was noted that 'At not all of these units are elderly persons admitted solely for medical and nursing care. At many, the regime is custodial and diversionary and discussion will be needed with the Social Services Department on the

⁷³ Office of National Statistics, 'Mortality in England and Wales: Average Life Span', at <http://www.ons.gov.uk/ons/rel/mortality-ageing/mortality-in-england-and-wales/average-life-span/rpt-average-life-span.htm>, accessed 26/09/2013.

⁷⁴ Hansard, 1952.

⁷⁵ Delme Griffiths: *50 Years of the National Health Service Estate in Wales, 1948-1998* (Welsh Health Estates, 1998), 51-3 and 91-3.

⁷⁶ CRO: XY6/1/7.

⁷⁷ CRO: XY6/1/1 Caernarfonshire and Anglesey Hospital Management Committee.

⁷⁸ Plans supplied by developers, ref. 891/19/972 and 981/19/972.

⁷⁹ Drawing supplied by developers, ref. 12.TC1

question of responsibility for these persons for whom Day Centre facilities would be more appropriate'. The difficult issue of the dividing line between 'health' and 'social care' was beginning to be apparent in policy discussions. Latterly, part of the Terminal Care Unit became a community child care service on the evidence of **2.4** (Terminal Care Unit) below.



*Figure 13: An aerial view of the hospital in the 1970s. CRO: XS/2008/35
Crown copyright: RCAHMW: Aeroflms Collection.*

Following a local government reorganisation in 1974 the site fell under the control of Gwynedd District Health Authority, and then North West Wales NHS Trust from 1999. In 1981 two options were considered for the hospital; one involved the retention of the geriatric wards, and the closure of all other wards on transfer to the District General Hospital (Ysbyty Gwynedd), then under construction; the other the retention of the geriatric wards, the closure of all other wards on transfer to the DGH and the re-opening of the ground floors for elderly confused patients, retaining also the upper floor wards as a reserve for holiday periods.⁸⁰

The opening of Ysbyty Gwynedd in 1985 did lead to the re-configuration of other hospital services in the area. The C&A hospital in Bangor, an old voluntary institution, taken over by the National Health Service in 1948, was closed. In Caernarfon the Eryri Hospital was closed in 1985 and all patients and staff were transferred to Ysbyty Gwynedd. Eryri Hospital was then refurbished and re-opened the

⁸⁰ CRO: XY6/7/2, 15.

next year following the closure of Gallt y Sil, the old isolation hospital. Patients from there were transferred to Eryri Hospital, and this then became designated a 'Rehabilitation for the Elderly Hospital'.⁸¹ The role of the Eryri hospital continued to evolve and it became the focus of further investment and modernisation in Caernarfon. A £1.7 million development at Eryri Hospital was opened on 9 November 2005, providing a new palliative care facility and all inpatient beds from Bryn Seiont Hospital were immediately transferred to Eryri Hospital.⁸²

Bryn Seiont later became a hospital offering palliative care by Macmillan nurses for cancer patients and then a centre used by the Blood Transfusion Service and a base for ambulances. Road improvements in 1997 led to the removal of the remains of features associated with the turnpike (GAT report 66).

2.3.7 Post-hospital

In its declining years as a hospital, Bryn Seiont has been a focus for a social phenomenon known as 'urban exploration' or 'urbex', a form of recreational trespass and recording, of which a sub-group, 'guerilla preservationists', advocates and carries out preservation by record on websites. It is understood that a study of 'urbex' will be published in October 2013 by Dr Bradley Garrett under the title *Explore Everything: Place-Hacking the City*.⁸³

⁸¹ <http://www.wales.nhs.uk/sitesplus/861/page/41648> accessed 24/09/2013 Betsi Cadwaladr University health Board, Ysbyty Eryri, Caernarfon

⁸² <http://www.wales.nhs.uk/news/3995> accessed 25/09/2013, 'Opening of new Peblig Ward at Eryri Hospital, Caernarfon', 09 November 2005, North West Wales NHS Trust.

⁸³ Robert Macfarlane: 'A Vast Playground', *Guardian Review* 21 September 2013, 2-4: Bradley Garrett: *Explore Everything: Place-Hacking the City* (Verso, forthcoming, 2013).

2.4 Standing building survey – by Dr Ian Brooks

2.4.1 Introduction

The disused hospital complex of Bryn Seiont consists of a number of elements, some of which are linked by corridors. At the core of the complex is a mid-Victorian house which is known to pre-date the use of the site as a hospital. Attached to this is a series of later extension and modifications including an office block and a range of external service buildings. To the north, two much later hospital wings were constructed which were linked to the house by corridors. Separated from the main complex is a range of buildings which in their most recent usage was by the Blood Transfusion Service, although previously housed the X-Ray department and Nurses' Home. Opposite this range is a garage which is reputed to have been the mortuary and to the east of the X-Ray block is a Boiler House with its associated oil tanks and chimney. These buildings sit within a range of gardens which include elements from several periods of use of the site. At the southern end of the complex are the remains of a walled garden.

The plan of the site is based on a topographic survey commissioned by Pendine Park from Wynn Rogers Cyf with additional elements added by direct measurement (Figure 1). The internal plans (Figures 5 - 7) were compiled through direct measurement with the use of both tape measures and a Leica 'Disto D2' range finder. Photographs were taken with a Nikon D80 digital SLR camera at a resolution of 10.2 mega pixels. Where practical all the photographs included a metric scale.

External

Main Block

The centre of the main block (Plate 1) consists of distinctive house built of yellow brick with later extensions which are covered in rough cast render. The central house is under a slate covered roof; however this would appear to be a later replacement as there are no surviving chimney stacks piercing the roof level. In general the house is constructed using distinct yellow bricks using a Flemish bond where practical. The mortar courses are noticeably thin, particularly when compared with some of the later additions. The colour and quality of the brick would suggest that it is probably imported London Brick, rather than the locally produced brick. The nearest local brick works were the Seiont Works, however, the Seiont brick not considered sufficiently artistic to be used as a facing brick.⁸⁴

The main entrance to the house was to the north with the main doorway flanked to the west by the gable end of a range running along the western side of the building and to the east by the widow giving light onto the main staircase. The elevation of the gable end incorporates (Plate 2, Figure 2.1) four, thin, double, string courses in red brick with each of the bands being 40 mm thick. This use of contrasting brick is reflected below the eaves where a stepped decoration in red brick is evident. The barge boards are slightly fluted and have pieced terminals. The widow at attic level sits uncomfortably within the design and is probably a later addition. The first floor widows consist of a triple set of tall, relatively thin sash widows separated by ashlar mullions with a low, segmental, arch of red brick above. The space between the arch and the lintel was filled with an ochre coloured brick work. The ground floor windows were originally a group of three narrow, tall sash windows, each below its own low, segmental brick arch in the red brick. The eastern window also preserved its original contrasting brick panel between the arch and the window lintel. The middle and western window, however, have been replaced by a relatively modern window under a concrete lintel. Although the contrasting brick arches survive, the panels of ochre brick have been lost.

⁸⁴ GAT (J. Roberts): *Seiont Brickworks, Caernarfon. Archaeological Watching Brief. Report 687* (2007), 2.

The porch (Plate 3) has dwarf walls of yellow brick supporting a wooden superstructure. The side walls had a series of relatively broad lancet windows in their upper portions (Plate 4) and the opening is also flanked by much narrower lancet windows (Plate 5). The bargeboards are perforated with tri-lobate designed and had spiral finials which link to a circular rail forming the lower edge of the barge boards.

The western elevation of the house (Plate 6, Figure 2.2) is distinctive because of its lack of decoration. The use of yellow brick throughout is consistent with the rest of the house; however this face lacks both the string courses in contrasting brick and the use of brick arches above the windows. Where possible a Flemish bond is used for the construction of the house, and this pattern is also used on this elevation. The lack of elaboration suggests that this was the service access to the house and was not supposed to be seen by visitors. It also suggests that the current drive which approaches this face of this house was not the preferred access at the time of the house.

The centrally-placed door gives access to the service passage running through the centre of the house. Both this and the narrow window to the south (Plate 7) have depressed arched heads formed of voussoir bricks. To the north, both floors have a group of three sash windows under depressed arch voussoir heads with the windows lighting the ground floor being much taller (Plate 8). This end of the building contained the dining room and one of the major bedrooms, thus the increased care over the arrangement of the windows at this end of the elevation. To the south of the door the windows have been replaced by a later, two storey bay window, partly clad in slate (Plate 9). Further to the south, another door gave access to the kitchen complex. This section of the western elevation had a standard sash window to the south of the door and a single, small, sash window on the first floor. All of these had depressed arched heads formed of voussoir bricks. The roof hipped to the north and has a half hip to the south where it joins the slightly lower roof line of the service wing. It is probable that this end of the main roof was originally a gable end with a chimney which was replaced when the building was re-roofed. The wooden box like structure to the north of the centrally placed door has an open top and was to protect the opening allowing light to the widows of the cellar room below.

The southern elevation (Figure 2.3, Plate 10) demonstrates the transition between the public and service appearance of the house. Three parallel gable ends form the core of the house, whilst a lower protruding range contained the kitchen and its associated rooms. The façade has been further modified by the construction of later ranges and the insertion of a somewhat crude, square bay in the centre of the façade and the addition of render to the wall above the bay window. The original design, however is evident. The use of thin, red string courses and stepped design, also in red brick mirrors that seen on the northern face as does the use of ochre brick in the space between the window hoods and the lintels at the eastern end of the range. The chimney stack has received further decoration with the use of ashlar knees, at two levels, where the stack steps in and the construction of a recess below a depressed arch of brick voussoirs. This recess hold a moulded shield with a bend (diagonal line) across its face (Plate 11). The original colours of this shield have been lost with later painting although it is now painted white with the words 'Bryn S[eiont]' on the bend. The western gable protrudes slightly from the line of the other two gables and is blocked by the kitchen range, however the widows lighting the attic in this gable have pointed heads marked by the use of the contrasting red brick. It is possible that this style of opening was used for the attic windows in the eastern gable, however the windows have been replaced with slightly larger windows with flat, concrete lintels. The roof of the kitchen is at a lower level leaving the attic windows of the western gable exposed. It is in this range that the division in decorative schemes between the public and service ranges is evident. Only one of the string course pairs continues across the elevation, however the stub ends of the lower string courses are visible on the eastern edge of the façade showing the

point at which the plainer scheme of the western elevation and the more ornate scheme for the rest of the house meet. The kitchen range façade is partly blocked by the construction of a later service range, blocking one of the first floor windows. There is also a blocked opening within the attic space, with both the widow sill and head having been removed and the opening being filled with yellow brick.

The eastern elevation (Figure 2.4, Plate 12) looked out over the gardens. The decorative design scheme continues on this elevation with five double string lines in red brick and the stepped red brick decoration below the gables. These gables protrude slightly from the façade and the changes in width of the bays are marked by the use of ashlar knees. The centrally placed door and the window above, at first floor level, both have depressed arched heads formed of brick voussoirs with ochre brick infill between the head and the lintel. Similar window heads occur above the windows in the gables, however these do not have the ochre infill. Both of the gables have ground floor bay windows. That on the northern side is rectangular in plan and clearly a later addition or replacement, whilst the southern bay is polygonal in plan. Even so the structure and windows in this southern bay suggests that it is at-least a later replacement. The only possible original windows in this face are the southern attic window and the group of three narrow sash windows on the northern end of the first floor. Two of the windows have been replaced by fire doors which are linked by the external fire escape from the building. It is not certain whether the dormer wholly within the roof a gable end is part of the original scheme or a later addition. It is likely that this was a later addition as it is not centrally placed between the gables whereas the rest of this elevation is symmetrical.

At least two modifications to the southern first floor window can be seen. There is the trace of a canopy which would have blocked the attic window. There is also infill brickwork, in a slightly different coloured yellow brick, which fills a bigger space than the current windows. It is likely that a group of three narrow sash windows originally occupied this space and these were replaced (probably for safety) when the fire escape was added to the building. A discoloured line crossing the face of the building, just above the ground floor windows probably marks the position of lean-to veranda. If so this must pre-date the replacement of the bay windows which would have not comfortably fitted beneath such a feature.

The main house had a series of later additions which were not part of the original design for the house. In the west corner an office block was added (Plate 13). This was a two-storey addition under a flat roof, probably constructed of brick, however rendered, so that the type of brick cannot be determined. There is a similar block on the north eastern corner of the house (Plate 14); however this block can be accessed from inside the building whereas there is no direct link between the office block and the main house. It is likely that the flat roofed toilet block (Plate 15) of similar construction adjacent to the porch is also from this phase of construction.

In the south-western corner of the house, attached to the service range is a range containing further, later, service rooms (Plate 16). Offset to the south, this range includes a small store which blocks the view from the southern door and ground floor widow of the service range to the house. Adjacent to this store is the one room with a sliding double door whereas the rest of the range has three standard doors each with a window to the south. With the exception of the most southern door, these give access to separate room with no further links. The southern door however gives access to a range of two rooms running across the southern end of the complex. On the northern side of this complex an external toilet has been built into the joint between this cross range and the rest of the service rooms (Plate 17). All of this range is probably built of brick, however, the use of a rough-cast render means that it is not possible to determine the structure nor whether there is more than one phase of construction. The range is under a slate roof.

On the southern elevation a further extension was added between the service range and the main façade of the house (Plate 18). This range blocked the lower part of the middle gable of the house. It is under a hipped slate roof and is probably constructed of brick although the walls are covered with rough cast render.

Terminal Care Unit

To the north of the house is a complex of later buildings which formed the Terminal Care Unit. This consists of interlinked three ranges which have at least three phases of construction. The Terminal Care Unit is linked to the main house by means of a corridor which now houses the main door to the main hospital complex (Plate 19). This corridor is clearly of more than one phase with the wooden link attached to the porch being earlier than corridor which includes the doorway and runs to the north. The earlier corridor is under a peaked, corrugated iron roof whilst the later corridor has a flat roof.

The Terminal Care Unit itself can be separated into three linked units. The bulk of the unit consists of a range running west from the point at which the corridor enters the unit, there is a range running at right angles at the eastern end of the main range and a clear later extension on the eastern end of the unit. The main block (Plates 20 and 21) is probably contemporary with the side wing (Plate 23). Both appear to be constructed of brick, although this is covered with a concrete render with a rough cast surface painted white. Both wing are under gabled roofs covered in slate and have wooden casement windows. The centre of this complex has been severely damaged by a fire in 2011 (Plate 23) destroying much of the roof structure at the eastern end of the main block and the southern end of the side wing.⁸⁵

The southern side of the main block is an extension sitting under a flat roof. Plan 12.TC.1 would suggest that this took place after 1975.

Linked by a short corridor with a flat roof the extension to the Terminal Care Unit is of a similar construction to the main block, but is clearly of a separate build. It sits beneath a hipped roof covered in slate (Plate 25).

Geriatric Unit

The geriatric unit is linked to the main complex by means of a corridor to the linking corridor to the Terminal Care Unit. Whilst the linking corridor is parallel to the Terminal Care Unit, the Geriatric Unit itself is set at an angle in order to fit into the available space (Plate 26). Constructed of a wooden frame in filled with panels, the true nature of this building has been disguised with a façade of brick on the southern face and part of the eastern end (Plate 27 and 28). On the northern side of the building, however, which was less likely to be seen by the patients or their visitors, the true nature of the construction can be seen (Plate 29). The use of yellow brick on the face of the geriatric unit was probably designed to blend with the brick used for the house; however these bricks are clearly from a different source and there is a marked increase in the depth of mortar used to bed each of the brick. The windows used throughout this block are of metal frame types.

Linked to the northern face of the Geriatric Unit is a small extension linked by a short corridor (Plate 30). This extension has a flat roof and is clad in corrugated metal and is supported by external steel supports (Plate 31). It is clearly a later addition to the Unit.

Garage

⁸⁵ <http://www.bbc.co.uk/news/uk-wales-12968753>.

Adjacent to one of the drives onto the site and opposite the X-ray Department and Nurses Home is the Garage (Plate 32). This has a double doorway to the east and a triple doorway to the west both giving access to single rooms which were not interlinked. The building is of brick, although it has been rendered in concrete. It sits under a pyramidal slate roof with a wooden finial (Plate 33). To the rear of the building are two windows, each giving light to one of the rooms. They are of metal frame construction and have sawn slate lintels.

X-ray Department and Nurses' Home

The X-ray department and Nurses' Home consist of a linear range with a cross wing towards its eastern end and later lean-to extensions (Plate 34). The western end of the main range consists of a single storey range under a gabled slate roof (Plate 35). This range has a series of wooden casement windows and a later porch added towards its western end on the northern elevation. The structure of this range is uncertain as it is coated in a rough render which was then painted white. It would appear to have been cut by the construction of the cross range (Plate 36) which consists of a two storey block under a gabled slate roof running at right angles to the main range. This range is also rendered, however it was not painted. The eastern end of the main range (Plate 37) is a one and a half storey building under a gabled slate roof. It has central doorway facing north, flanked by two six pane, wooden, casement windows. It is not possible to determine the structure of this building as it is coated in rough render, however the presence of a tie beam suggest that it predates the construction of the Nurses' Home and may be of stone construction.

The eastern gable end of the X-ray Department (Plate 38) would suggest that there were further buildings in this range which have been demolished. This is confirmed by a plan drawn by Lingard and Associates which is assumed to have been drawn in 1972.⁸⁶ There are two lean-to extension on the southern elevation of the X-ray Department. That at the eastern end (Plate 38) is clearly of brick construction whilst that towards the western end (Plate 39) is rendered and painted, making its structure impossible to determine. Both extensions sit under mono-pitch slate roofs. There is no evidence for a third extension seen on the 1972 plan.

Boiler House

To the south east of the X-ray Department is the Boiler House and its associated chimney and oil store (Plate 40). The boiler house consists of a two storey height block with single storey extension at both ends. Constructed on red brick built in Flemish Bond both the central area and the extensions have flat roofs. The western extension contains the welfare facilities whereas the eastern extension held the generator. The main block has three, high level fifteen pane windows with metal frames on the northern elevation and four similar high level windows on the southern elevation. Below these windows (Plate 41) are four opening covered by wooden louvers which acted as vents for the building. The western extension (Plate 42) has a central doorway in the western elevation with three, metal framed, windows whereas the Generator Room (Plate 43) extension has a door in its southern face, adjacent to the large doorway into the Boiler Room, a small high level window to the east and a vent to the north covered by a wooden louvered structure.

The tall, rectangular plan chimney is divorced from the main structure (Plate 44). There are three pipes at about 2 m above ground level carrying the exhaust fumes from the boilers and a hatch in the base of the chimney which presumably allowed for the chimney to be cleaned and produce a flow of air up the chimney.

⁸⁶ Reference 981/18/972.

Two oil tanks (Plate 45) are located to the north of the chimney. These are set within a brick enclosure and have a metal gantry over the tanks to allow manipulation of the valves. There are valves on the tanks (Plate 46) and at ground level where the oil pipes enter the boiler house (Plate 47)

The hot water from the boilers was piped, through underground channels (Plate 48) to the other buildings in the complex. These run from the western side of the Boiler House to the southern side of the House with side routes to the X-ray Department and the Geriatric Unit.

Temporary building adjacent to the Geriatric Unit

A wooden panel temporary building was positioned to the south of the Geriatric Unit. Sitting on a concrete pad this building almost gives the appearance of a stationary caravan. At the time of recording it was almost collapsed (Plate 49).

Walled Garden

The southern end of the proposed development area is defined by the remains of a walled garden (Plate 50). Surrounded on three sides by stone walling, this area is now used as a paddock. The western wall (Plate 51) is constructed of random stonework with some cement render in places and stands up to 2.4 m above the current ground level. It is constructed of stones typically 200 x 150 mm in size, although they reach sizes of 350 mm x 250 mm in places. The top of the wall is capped by a series of slate slabs which have sawn edges sawn with a Greave's saw. The wall also incorporates the occasional slate block also with sawn edges. In the southwest corner there is a gateway (Plate 52) which appears to be a later feature of the garden, possibly when the garden was converted into a paddock. The gateway is marked by a series of brick quoins which appear to be a secondary feature.

Embedded in the top half of the southern wall is a brick structure consisting of a series of brick piers linked by recessed brick walling (Figure 3, Plate 53) set at a height of 1.34 m above the current ground level. The brickwork reaches a further height of 0.66 m and spreads for a total length of 12.7 m along the southern wall. Given its position, it is assumed that this structure is associated with a glass house which was probably attached to the wall at this point.

The eastern wall is a similar height to that to the south of the garden at around 2.0 m. It was not, however integrated into the southern wall and the joint is now moving apart (Plate 54). The inclusion of slate blocks with sawn edges low down in the in the southern wall may suggest that the southern wall has been re-built.

The southern end of the eastern wall is marked by four brick buttresses (Figure 4, Plates 55 and 56). Three of these were simple triangular buttresses (Plate 55), however, the most northerly (Buttress 4) has a more complex and decorative profile (Plate 56). The three triangular buttresses were constructed with the courses of brick running at right angles to the hypotenuse of the triangle, which the more decorative buttress was built in a more conventional manner with horizontal brick courses.

Between buttresses 1 and 2 the wall would appear to have a repair consisting of a series of small, rounded stones in lime mortar (Plate 57).

The northern end of the walled garden is now marked with a hedge of pleached hedgerow trees, separating the paddock from the car park (Plate 58). The eastern stone wall, however continues alongside of the current car park (Plate 59) suggesting that the walled garden probably extended as far as the X-Ray Unit.

The wall on the western side of the car park has been replaced by a low stone wall with two entrances flanked by low brick walling which is probably of a later date than the stone wall. The main vehicle entrance consists of in-turned brick walls (Plate 60). One of these links the tall wall of the walled garden to the much lower wall of the car park. The second entrance (Plate 61) is a small pedestrian access point near to the X-Ray Unit. As with the vehicle access it is flanked by low brick walls, partly flanking a gap in the stone walling.

Gardens

The gardens contain elements from several phases of modification of the grounds, some of which probably relate to the domestic use of the site and others to the use as a hospital. The main building complex effectively divides the gardens into two, although the mature trees, which are such a feature of the gardens, form a belt running along the western and northern edges of the development area.

The western gardens are largely of mature trees, however the remains of a semi-sunken garden adjacent to the garage are evident. The northern drive (directly to the house) crosses the western garden through a wide gateway flanked by rusticated stone piers with pyramidal stone caps (Plates 62 and 63). The driveway would appear to have been flanked by a series of yew trees which are only found along this drive. There appears to be the use of some specimen trees within the planting, particularly near to the road where a mature Scots Pine and a sweet chestnut can be found.

Running through the wooded area to the west of the buildings is the remains of a footpath (Plate 64). Now marked as a slight linear hollow 1.20 m wide and flanked by the occasional rounded stone this feature ran down slope before turning sharply to the right and heading towards the northern corner of the plot. This pathway appears to be a relatively early feature as it is cut by the rounded stone border of a flower bed and is blocked by a semi-mature tree.

The generally wooded character of the western side of the garden is broken by the semi-sunken garden, adjacent to the garage, which is constructed of random stone slabs with slate coping. This feature is rather overgrown, but appears to have several levels linked by short stone steps. It was centred, however around a gravelled area with a central fountain or bird bath (Plate 65) which was surrounded on three sides by low stone wall. Some of the original planting for this area survives with the use of conifers (Plate 66) and tree ferns (Plate 67) within the planting. The western side of the semi-sunken garden incorporates a well into its structure (Plates 68 and 69). Although the superstructure of this feature clearly relates to the garden it would appear to sit over a much earlier structure. The well 0.8 m in diameter, at least 8 m deep and at the time of the survey held at least 4 m of water. The well shaft is constructed of roughly coursed, rounded stone boulders whereas the superstructure is of slatey stone slabs. There is a basin to the west of the well which formed part of the garden structure. In its most recent phase the well had a decorative wooden hood hung with slates, however this structure has been vandalised and now sits on the adjacent footpath to the garage.

The eastern side of the garden is marked by open lawns, although there is a clump of mature horse chestnut trees near to the Boiler House (Plate 70) and a group of Scots Pines (Plate 71) in the field to the east of the property which appears to be deliberate planting groups. The most modern planting scheme, however is represented by a series of concrete planters on a paved area (Plate 72) between the House and the Geriatric Unit and the survival of two pampas plants (Plate 73) within the lawned garden.

Internal

The internal arrangement of rooms is shown on Figures 5 – 7. The rooms have been numbered for convenience with the first floor rooms having the prefix 'F', the cellars 'C' and the attic 'A'. A correlation between the assumed function of the rooms, the function recorded on the plans from the 1970s and from door labels is shown in Appendix 1.

Main Block

Ground Floor

The entrance to the house at the core of the complex was through the porch (Room 1, Plate 74). This was built against the recess by the front door to the house, thus the western side of the porch is shorter than the east. The porch consists of a wooden structure sitting on dwarf brick wall 0.84 m high. The wooden superstructure has lancolate windows (Plate 75) both in the sides. These had dot decoration to each side of each of the windows, probably in coloured glass. The windows flanking the opening to the porch (Plate 76) had slightly more arabesque (arrowhead like) shapes. Above the opening to the porch (Plate 77) is a segmented window which reflects the shape of the window hood of red brick used for some of the windows of the house. The porch itself has a simple triangular head. It gives access to the front door which sits within a recessed moulding. The door is a modern, institutional, rectangular door, however it sits below a window with a pointed head which gave light to the lobby. This window is now filled with safety glass, but judging from the main staircase window probably included some stain glass in its original design.

The lobby (Room 2, Plate 78) is separated from the main hall by a glass and wooden screen, which although now housing a modern, institutional, fire door appears to be part of the original design of the house. It has three-quarter round moulding on the doorframe and the frame for the lights above the door, a feature which reflects the decoration on some of the major windows in the house. There are four panes above the door and one to each side, which although now contain modern safety glass probably included some stained glass elements. The ceiling of the lobby had a decorated plaster ceiling (Plate 79) with a box cornice with moderately spaced dentil blocks. This has rolled mouldings which give way to an inner floral frieze. The centre of the ceiling, however is missing.

To the west of the lobby (Room 3, Plate 80) is a room which in its last phase of use was a kitchen, however it is within the footprint of the house and was probably a study/office in its original use. This would allow clients/workers to consult the owner without having to enter the main house. The room is heavily modified, however the one of the original windows (Plate 81) survives as does the door frame. The second window is clearly a modern replacement, probably replacing two similar windows to the one surviving window. The surviving window is a tall, narrow sash window with a three-quarter round moulding around the frame. The frame is set back within a panelled reveal. The doorway has a slightly moulded doorframe. Although now one room, in the 1970s this room was divided into a telephone room, in the north east corner, and a dental surgery.

The Hall (Room 4, Plate 82) is relatively large space with a moulded ceiling of similar type to the lobby (Plate 83). It has a polychrome tile floor with a yellow and red banded border (Plate 84) which has been disrupted in the SW corner of the room with the use of red quarry tiles. This is the route between the service passage and the Dining Room, possibly marking the position of a partition across this corner, however it is equally possible that this area was subject to excessive wear and was replaced by the cheaper quarry tiling after Bryn Seiont became a hospital. Centrally placed on the southern wall is a blocked fireplace (Plate 86). This has been moulded to represent either a house or possibly a classical tomb. Within the 'roof' area of the fireplace is a shield with a chevron. Unfortunately this has been painted white so that the original colours are not discernable. Although

now painted in intuitional magnolia, the walls of the Hall have inscribed lines within the plaster replicating the joints of an ashlar wall with courses 0.25 m wide. The Hall is dominated, however by the staircase which is of a framed newel staircase type,⁸⁷ unfortunately the lower newel post and the balusters have been looted on the ground floor. There is one newel post lying on the floor to the Hall (Plate 87), however it is of too plain a design and probably is from the service stairs.

The Hall gives access to the Ballroom/Drawing Room to the east, the Dining Room to the west (Plate 88), the Service Passage to the south and the later toilet block to the north. The door cases to the adjoining rooms in the house heavily framed with slightly moulded frames.

The Ballroom/Drawing Room (Room 6) runs across the whole width of the house, now divided into two rooms by a stud wall partition (Plate 89), however, the continuous run of the skirting boards suggest this was originally one room. The presence of two doors into this room, however, may suggest the possibility of dividing the room with a temporary screen. Unfortunately the ceiling within this room has been replaced with a plain ceiling. The floor has also collapsed near to the fire door in the eastern wall and in doing so the partition wall has also partly collapsed. A missing section of plaster on the western wall shows that although this wing is faced with brick the internal construction is of a stone rubble. During the 1970s this room was divided into two Female Wards.

The northern end of this room (Room 6A) has a blocked fireplace on the northern gable wall with a later entrance to Rooms 18 and 19 to the east and a block opening to the west (Plate 90). These probably originally held tall sash window, but have been modified when the extension to the north of this room was built. The bay window within Room 6A (Plate 91) appears to be an original opening, although the bay window itself is a later addition. The opening to the window is surrounded by three-quarter column mouldings (Plate 92) separated by slightly moulded panels. The columns have a cushion base, but no capitals. The final use of the room is shown by presence of children's picture on the western and southern walls of this room (Plate 93).

The southern end of the Ballroom/Drawing Room (Room 6B) has two narrow sash windows, either side of a blocked fireplace on its southern wall (Plate 94) and a bay window on the eastern wall (Plate 95). The two sash windows have three-quarter round column mouldings together with panelling within the reveals (Plate 96). The 'columns' extend over the window. Similar mouldings surround the bay window (Plate 97); however as with the bay window in Room 6A, the window itself is a later replacement.

The Dining Room (Room 7, Plate 98) has doors to both the Hall and the Service Passage (Room 8). There is a blocked fireplace, centrally placed in the northern wall and a group of three tall sash windows in the western end. These windows occupy an original openings, the frames, however are relatively undecorated when compared to the other ground floor windows within the public rooms of the house. The room retains part of its original moulded ceiling with a frieze of floral decoration (Plate 99).

The ground floor service passage (Room 8, Plate 100) links the Dining Room, Hall, Kitchen and Rooms 9 and 10. It also includes the cellar head (Plate 101) and the service staircase to the first floor (Plate 102). It also has an external doorway at the western end of the passageway. The decorative scheme of mock stonework continues through the passage, however the decorative scheme is much simpler with the newel post for the 'back stairs' having relatively plain 'acorn' finial and a cushion shaped banister rail (Plate 103). The cellar stairs are behind a plain panelled partition with the doorway facing the "back door" to the property. This back door has a narrow window (Plate 104) immediately

⁸⁷ R.W. Brunskill: *Vernacular Architecture. An Illustrated Handbook* (Fourth Edition) (Faber and Faber Ltd, 2000), 125.

to the south which gave light to the link between the Kitchen (Room 110 and the Dining Room (Room 7).

Room 8, is found at the eastern end of the ground floor service passage (Plates 105 and 106). In the 1970s it served as a Nurses' Dining Room; however its original function is not clear. It appears to be associated with the service passage way and may therefore have been a House Keeper's Parlour although this is not certain. Few original features have been retained in this room, indeed the southern end of the room (Plate 105) has been replaced with a bay window late in the development of the building. In the north western corner there is a built in wooden cupboard (Plate 107) which probably relates to an earlier use of this room.

Room 10 (Plate 108) would appear to have been a pantry, although in the 1970s it was recorded as a 'Ward Kitchen'. Partially tiled, this room retains a few features which probably relate to its original use. Of most importance is the sash window in the southern wall (Plate 109) demonstrating the original position of the rear wall of the house. This now only opens onto a passageway to a rear door to the property. Also in the north eastern corner, there is a built in cupboard (Plate 110) which appear to pre-date the rest of the decoration within this room. The tiles on the walls have a boarder along the top edge (Plate 111). This shows at least two stages of decoration with a decorative frieze being replaced with a plain band.

The Kitchen (Room 11, Plate 112) had a large chimney breast on the eastern wall with an opening linking this room to Room 10 which has subsequently been blocked (Plate 113) Whilst the chimney breast has been blocked, it probably contained a closed range as there is a high level hatch on the chimney breast to allow the chimney to be cleaned (Plate 114). In its final phase the Kitchen was lined with tiles with a checkerboard boarder (Plate 115). The floor of the Kitchen was covered in red quarry tiles. The bay window in the western wall would appear to be a late adaptation to the Kitchen.

Room 12, (Plate 116) is entered by the southern doorway to the Kitchen. On the 1970s plans of the hospital this room is shown as a 'Surgery', although it may originally have been a cook's parlour. Now lined in tiles with a decorative boarder, the room contains a blocked chimney breast which has been re-used as a shelving area. This room marks the division between the 1872 house and the later extensions.

Rooms 13 and 14 are within an extension to the 1872 house. Room 13 is marked as a 'pantry' on the 1970s plans of the hospital whilst Room 14 is labelled as the "Nurse's Pantry". Room 13 (Plate 117) is a plain, tiled room with a single casement window in the southern wall, whilst Room 14 (Plate 118) is a larger room with windows in the southern and eastern walls. It is separated from the passage to the back door by a brick partition with curved ends.

Room 15 (Plate 119) is shown as the 'Domestic Staff's Sitting Room' on the 1970s plans. It has a small chimney place in the north western corner which probably served as a chimney for a small stove in the corner of the room. Beyond Room 15 is a WC (Room 17) and associated hand basin (Room 16).

Two rooms (Rooms 18 and 19), in a later extension, are accessed through a doorway in the north eastern corner of the Ball Room/Drawing Room (Room 6A). These consist of a WC (Room 18, Plate 120) and a room with no obvious features (Room 19, Plate 121) except for a window in the eastern wall. This arrangement of room post-dates the drawing 24-1 which shows a WC, Sluice Room and Bath Room occupying this space.

Below the main stairs there is also a later WC and Toilet block (Rooms 20 and 21) accessed through a door which replaces a much smaller window seen in the photograph XS/1515/4 held by the Gwynedd Archives.

The Cellars (Figure 7)

The cellars are accessed by means of a staircase from the ground floor service passage. The stairs (Plate 122) have a newel post with a simple faceted finial, a cushion shaped handrails and plain, square cross section balusters (Plate 123). The stairs are within a linking corridor (C1) with a corrugated iron ceiling (Plates 124 and 125). At the western end of this corridor is a coal chute (C2, Plate 126) with a brick supporting arch. This chute would have had an opening adjacent to the external door in the western elevation, however this has been blocked, presumably when central heating was added to the property.

On the southern side of the corridor, the cellar (C3) had two windows in its southern wall (Plate 127) showing that there must have been light boxes on the outside of the building. The cellar is directly below Room 10 and the access to the external light would have been lost when Rooms 13 and 14 were added to the range. One of these windows retains its wooden sash window, whilst the other is blocked with a wooden sheet. Both of these windows have slate sills and wooden lintels. There is an opening in the northern wall of this cellar which is filled with a wooden lattice (Plate 128). This internal 'window' would have allowed natural light into the central passageway. This cellar held refrigerators according to the plan 24-1 which dates to before 1972.

The eastern end of the passageway opens onto the cellar C4, which is directly below Room 9. This contains the remains of the heating control system on its eastern wall (Plate 129) and has two concrete platforms which presumably held other machinery which is now lost. It is labelled as 'Calorifiers' on Plan 24-1. The pipes from the boiler house enters the building through the southern wall of the cellar. This space, however (C5) would appear to have originally been an external entrance to the cellars from the grounds. There are a set of brick steps leading to a passage way which has been blocked (Plate 130). The heating pipes now occupy the top of this original opening. These steps are below the later bay window in Room 9 suggesting that the ducting for the heating system pre-dates the construction of the bay window.

Cellar C6 is the only cellar without external opening and therefore was probably intended to be a wine cellar (Plate 132). It currently has light weight slatted shelving which presumably is related to the storage needs of one of the hospital phases rather than its original fittings.

The largest cellar (C7) lies to the north of the passageway. It has a triple sash window in its western wall (Plate 133) positioned below the remains of a light box on the western elevation of the house. The cellar occupies the space below the dining room (Room 7) and the windows would have been directly below those in the Dining Room.

First Floor (Figure 6)

The first floor rooms are largely those within the house built in 1872. The main staircase is 'U' shaped in plan with 10 step on the first leg to the half landing, three steps in middle of landing and 11 steps to second flight (Plate 133). The solid newel posts has a square section post (Plate 134) and a decorated, faceted, cap carved with a trefoil design within a triangle (Plate 135). The handrail is of a cushion type with mouldings below and the balusters form a complex pattern with alternate balusters being decorated at either the top or bottom. There is also a sinuous lower rail with a ribbon like loop on every other baluster (Plate 134). There is also a recessed, sinuous design on the tread ends and on the edge of the first floor below the balusters (Plate 133). The staircase is light by

a storey and a half window (Plate 136). This has two mullions and a high transom dividing the window into six main area. These were further divided into a series of rectangular panes. Although heavily damaged it is clear that at least some of the panes were of coloured glass as is shown by the survival of small blue squares in the corners of the window. The window sits within an opening with a depressed arch top and a three-quarter round moulding defining the edge of the reveal.

The landing (F2) and stairwell (F1) have a ceiling with a wide band of scrolling running around the edge of the ceiling (Plate 137). The ceiling is divided into three areas each with the same moulded ceiling design. The major division is marked by a depressed arch running north – south across the landing (Plate 138) dividing the landing proper from a short corridor to Room F6. The third area is within the short corridor running north off the landing to rooms F8 and F11. There are also notably deep skirting boards around the landing which are slightly moulded along their top surface.

The landing is partly filled with a later, cupboard (F3, Plate 139). This is lightly constructed of a wooden frame coated in plasterboard and contains a series of shelving units.

The landing gives access to three bedrooms, the upper service passage and a range of small rooms which probably acted as storage areas and a bathroom. At the eastern end of the landing is a large room (F4) which ran the complete width of the 1872 house. Now divided into two rooms, the continuation of the skirting boards through the later partition suggest that this was originally one large room, probably a bedroom. The northern end of the bedroom (Room F4A, Plate 140) has a blocked fireplace in the northern gable end which was originally flanked by two window openings. One of these has been replaced with a doorway giving access to the later extension and a range of toilet and washroom facilities (Rooms F20 – F24). The eastern side of Room F4A has a large, triple paned window (Plate 141), the frame of which would appear to be largely original. It has wooden panelling around the reveal and a three-quarter round moulding in the shape of a thin column with a cushion base and no capital (Plate 142). The fire door occupies the space previously occupied by a window, although the original panelling and mouldings have been lost by the insertion of the fire door. The southern end of the room (Room F4B, Plates 143 and 144) has a modern window to the east, although this occupies the position of a triple sash window in the 1872 house. The southern gable end probably had a centrally placed fireplace which is now blocked. There are flanking sash windows in this wall the frames of which retain the three-quarter round mouldings, however the panelling on the reveals has been lost.

To the south of the Landing is a smaller bedroom (Room F5, Plate 145) which was probably divided and originally included Room F13. The fireplace in Room F5 (Plate 146) has a cast iron fascia, the top plate of which has a lozenge shaped decoration (Plate 147). There is also an egg and dot beaded mantel shelf over this small hearth.

The master bedroom (Room F6 (Plate 148)) was probably at the western end of the landing. It has a triple sash window complex at its western end with panelling below the windows (Plate 149). It is noticeable that this opening does not have the three-quarter mouldings which are such a feature around many of the windows in the family/public part of the house. It does, however preserve some fragments of a moulded ceiling which has been lost in the bedroom. To the north of Room F6 is a linking door to Room F7 which is assumed to be the dressing room (Plates 150 and 151). This room has a similar triple sash window as the bedroom (Plate 150) and two doorways to the east (Plate 151). The northern door gives access to a small cupboard, whilst the southern door opens into a room which is assumed to have been a bathroom (Room F8). There is a plaster panel on the southern wall of this room (Plate 152) which might have held a window between this room and the storage space to the south (Room F9). There is also a perforated iron plate between the joists of

the ceiling (Plate 153) whose function is uncertain, however it may have been a mounting plate for either the lighting or a shower fitting.

Rooms F 9 and F10 are relatively lightly constructed of lath and plaster, however they are clear part of the 1872 house as the moulded ceiling on the landing respects their plan. It is likely that they were originally used for storage, possibly as linen cupboards. At the northern end of the short corridor from the landing is a WC (Plate 154). The window in this room has been replaced by a wooden casement window.

The upper service corridor (Rooms F12 and F13) are accessed through a door in the south western corner of the landing. This is divided into two areas by a modern fire door (Plate 155) and contains the back staircases to both the ground floor and the attic (Plate 156). It is lit by a three light window which runs from the half landing on the stairs to the ground floor (Plate 157) to slightly above the half landing to the attic flight (Plate 158). Both flights of stairs are of dog leg type and originally had newel posts with a faceted acorn type finial and a simple cushion shaped handrail (Plates 159 and 160).

There is a suite of rooms off the southern side of the upper service corridor which are interlinked, but separate from the rest of the house. On the Plan 24-1 they are shown as the Matron's Sitting Room, Bedroom and Bathroom and it is possible that this reflects an earlier use for a senior servant, possibly the House Keeper. Rooms F15 and F16 appear to have been improved in the 1930's with the inclusion of fireplaces with glazed ceramic surrounds (Plates 161 and 162). Room F15 also includes what is assumed to be an inserted bay window (Plate 163) which could be of a similar date to the fireplaces. Room F16, however retains its sash windows.

Rooms 17 – 19 have been highly modified as a bathroom and toilet retaining few if any original features.

The Attics (Figure 7)

Accessed only from the back staircase the attics consist of three corridors and nine distinct rooms. There is also an area without floor boards (Room A14) which held the water tanks. The back staircase gives access to a corridor (Room A 1, Plate 164) linking Rooms A2, A3 and A4 which appear to be the major rooms in the attic as these all have fireplaces.

Room A2 has two small windows with pointed heads (Plate 165) in its southern gable wall which appear to be part of the original design of the 1872 house. Unfortunately although the hearth survives the fire surround has been removed (Plate 166), however the built in cupboard to the north of the chimney breast may be an original feature. The western side of the room is dominated by a large dormer window which is clearly a much later feature (Plate 167).

Room A3 (Plate 168), however, retains its fire surround (Plate 169). Although smaller than those on the first floor it is of a similar design to those in Rooms F15 and F16 and are probably of a similar date. There is also a decorative plate on the door (Plate 170) which is probably of a similar date. This room is also unusual in retaining a fragment of its last decorative scheme in the form of wallpaper protected behind the door (Plate 171).

Room A4 (Plate 172) has a fireplace on its eastern wall with a brick surround which has been subsequently painted white (Plate 173). To the north is a built in cupboard which hid some of the water supply system (Plate 174). The room is dominated by a later dormer window (Plate 175) with smaller cupboards below.

The second corridor runs parallel with the corridor from the back stairs (A1) and is accessed from three steps at the eastern end of corridor A1. It runs to the east before turning north linking rooms A7 – A12. Much of this area has been modified to divide it into a series of smaller rooms with few original features. Indeed some of these modifications took place after Plan 24-1 was drawn, probably in the 1970s. This is particularly seen in Room A7 which is marked as two separate 'Staff Bedrooms', although it now houses a water storage tank. The sash window in the eastern wall of this room, however, (Plate 176) is probably original as are the two smaller sash windows in the southern wall.

Room A8 has suffered considerably since the building has been abandoned, however it retains the frame for a dormer window (Plate 177) which is assumed to be a later addition. Room A9 has also been modified with the replacement of the window with a fire door (Plate 178).

Room A10 is the only other attic room to include a fireplace (Plate 179). It is placed on the northern gable wall of this range and is flanked by sash windows which appear to be part of the 1872 house design (Plate 180). Unfortunately the fire surround in this room is missing. The position of the hearth would suggest that it relates to a room which was much bigger than the current size of A 10 and confirms that the current layout of rooms in this range is a relatively modern arrangement.

Rooms A11 and A12 also have been heavily modified with the addition of a dormer window in Room A11 (Plate 181) and the modification of A12 as a bathroom (Plate 182). The corridor (A13) from the western end of A5 only links the centre of the attic complex to a WC (A14) passing the tank area (A14).

Office Block

Attached to, but not part of, the northern face of the 1872 house is the office block. This would appear to be of a similar date to the matching extension on the north eastern corner of the east corner of the house, however, unlike the other extension there is no access from the main house. The ground floor (Figure 5) has an entrance vestibule with the staircase to the north (Plate 183) The rest of the ground floor consist of a large room (Room 23) with a toilet and wash room attached (Rooms 24 and 25). There are a pair of wooden, tripartite, casement windows in the western wall of Room 23 (Plate 184) which are reflected in the similar room on the first floor (Room F26, Figure 6, Plate 185). The staircase is enclosed holding a dog leg stair (Plate 186) with a single casement window for light. There are also a toilet and washroom off the northern end of the upper room (Rooms F27 and F28).

Attached Storage Building to the South of the House

There are group of rooms attached to the south western corner of the house complex to the west and south of Room 15. These are only accessed from the outside with no link to the main house complex. Rooms 26, 27, 28 and 29 were boarded so that it was not possible to inspect their interiors, however they can only be one room deep and the windows and doors are all on the western side except Room 26 which has a door on its northern face. Room 26 is identified as a vegetable store on Plan 24-1 which is consistent with its relationship to the kitchen. Room 27 has a sliding 'garage type' door, however it is labelled as the 'old boiler room' on 24-1. Cracks around the sliding door allowed some inspection of this room which was a featureless box. Room 28 is labelled as a 'sterilizing room'.

At the southern end of this range are two interlinked room (Rooms 30 and 31) which are labelled as 'stores' on Plan 24-1. It was possible to gain entry to these rooms, however no new evidence was gained than could be seen from the outside of this range.

Linking Corridors (Figure 6)

The house is linked to the later 'Terminal Care Unit' and the Geriatric Unit by a series of corridors. These can be conveniently divided into three areas. The corridor linked to the porch (Room 33) is of a different construction to the rest of the corridors having a peaked roof (Plate 187). It was constructed of wooden planking with a series of rectangular windows just below the eaves (Plate 188). The style of construction would suggest that this is part of an earlier corridor than the others links to the wards. It is possible that this may be part of the corridors seen on the pre-1930 manuscript additions to the ordnance survey linking the house to a range now occupied by the Terminal Care Unit.

The other two corridors are wider, that to the 'Terminal Care Unit' (Room 34, Plate 189) being constructed of brick whilst that to the Geriatric Unit (Room 71, Plate 190) is a much light construction with boards supported with a wooden framed partition.

Terminal Care Unit

The block known as the 'Terminal Care Unit' clearly had a range of functions over time. The map evidence would suggest that the earliest part of this range includes Rooms 43 – 47 and the corridor (Room 40) which was marked as a 'veranda' on the Plan 24-1. The pre- 1930 manuscript additions to the 1918 map shows a range occupying this position , however it is longer than current range and does not include the north south aligned range possibly suggesting that the current range is a replacement rather than a modification of an existing range of buildings.

The entrance lobby (Room 35, Plate 191) gives access to both the north south range and the main block. This area of the building has been heavily burnt removing the roof over Rooms 35, 47, 54, 55 and 56. The main block and the north south range had gabled roofs whilst the later extension to the east has a flat roof. The last phase of use for the Terminal Care Unit would be appear to be as offices as shown by the labels on some of the doors.

The main block has a central corridor (Room 40) from which all other rooms are accessed. To the south of the corridor are two larger rooms (Rooms 41 and 42) which are later additions to a pre-existing block. Room 41 (Plate 192) is partly divided by short stub walls which might reflect the position of the veranda which probably occupied the northern section of this room. It has two external windows and a fire door to the south and an internal window onto the corridor together with a door to the north. Room 42 (Plate 193) is also subdivided, this time by built in furniture. The label on the door defined this room as the 'Reception', presumably as part of the final use of the building which contained a series of offices including the Child Development Services. Although Room 43 (Plate 194) is labelled as a 'Meeting Room' on the Plan 24-1 it is shown as a ward demonstrating the change in use of this range.

Rooms 44 – 47 (Plates 195 – 198) are of similar design and size. Although they are marked as wards on Plan 24-1 they were clearly used as offices in their last usage as is shown by the common design of desk and shelving unit in all of these rooms. Room 45 has a plaque on the door labelled 'Community Nursing - Child Development'. These rooms all have similar wooden casement windows as does the north –south aligned range which is assumed to be of a similar construction date to the main block.

The north-south range has a series of rooms off the eastern side of a corridor (Room, 49, Plate 199) together with a single room at the northern end (Room 50, Plate 200). Unlike the main range the rooms to the east of the corridor appear to have retained their functions from the 1970. Rooms 51 (Plate 201) and 52 (Plate 202) are tiled in white tiles and have the remains of fittings for a toilet and a shower. Room 53 (Plate 203) is fitted out with shelving reflecting its designation as a Linen Room

on Plan 24-1. Room 54 (Plate 204) contains no distinguishing features, however its description as an office on Plan 24-1 seems apt. Room 55 (Plate 205), however has been modified, described as a ward on Plan 24-1 this room was converted to part of the corridor to the extension to the Terminal Care Unit built in 1975. Finally in this range Room 56 (Plate 206) has been heavily burnt, but was probably a single bed ward in its final use.

The 1975 extension to the Terminal Care Unit is a pre-fabricated building with a flat roof constructed of a wooden frame with infill panels and plastic framed windows. Although built as a Terminal Care Unit its final use was as a series of offices. Room 58 is described as a ward on the Plan 12.TC.1, however the door is labelled 'Lead Nurse – Child Development'. It has a small room/storage area (Room 59) separated by a sliding door in its north eastern corner (Plate 207). Room 61 was designed as a single bed ward; however it became the office for the Social Work Team Leader. Similarly Room 62 would appear to have been designed as ward, however its final use was as an office for the Head of Child Psychology Services. Unlike the other rooms this room retains a mixture of toys and manuals (Plate 208) together with a chair from its final use. Room 64 is labelled Service Development Manager whilst the small store in at the western end of the corridor (Room 57) is labelled 'Private Staff Only'.

Room 70, in the south western corner of the Terminal Care Unit Extension is described as a 'Boiler Room' on Plan 12.TC.1 and although it was not possible to enter this room, the louvered doors and its only access being to the outside (Plate 209) would suggest it retained this use.

Geriatric Unit

The Geriatric Unit was constructed in 1972 as a prefabricated building with a flat roof supported by wooden I- section beams. In order to fit within the available land it was aligned at an angle to the other buildings within the complex, resulting in two awkward shaped rooms (Rooms 110 and 111) at its eastern end. The original design had a series of wards to the south of a central corridor (Room 72, Plate 210), whilst the service rooms including toilets, staff offices and bath rooms were along the northern side. The exceptions to this pattern are Rooms 94 and 95 which were described as One Bed Wards on Plan 981/19/972.

A late addition to the Geriatric Unit was a room constructed of a metal frame with a corrugated sheet cladding (Room 80, Plate 211). This was accessed through a room (Room 78) labelled 'Staff Only' and was internally clad with mock wood and contained the remains of a television and music centre which suggests it may have been a staff recreation room. Room 78 (Plate 212) was described as a Physiotherapy Room on the Plan 981/19/972, however the Staff Only Label on the door and the microwave would suggest that it was a Staff Room in its final use.

The wards on the southern side of the corridor are of a pattern with a door flanked by windows opening onto the corridor (Plate 213) and a fire door in the southern wall (Plate 214). One of the Wards (Room 106) has a paper label on one of the internal windows identifying its last use as an 'CFS Assessment Clinic'. A label in Corridor 71 would suggest that CFS stands for Chronic Fatigue Service. Some later modification of the wards is shown in Rooms 101 – 105. What was described as a six bed ward on Plan 981/19/972 has been divided into four small consultation rooms (Rooms 102 – 105) off a central corridor (Room 101, Plate 215) leading to the fire door. Each of the consultation rooms (Plate 216) retains its curtain rail to provide some privacy around the bed.

The double unit at the western end of the line of wards (Room 109, Plate 217) is described as a 'Day Room' on Plan 981/19/972 an interpretation which is enforced by the remains of an upright piano in the corner of the room (Plate 218).

Room 110 is marked as a Sister's office on the 981/19/972 plan, at the time of the survey, however it contained a book case with literature about children's nutrition (Plate 219) suggesting it was used as part of the Child Development Unit when it was last used.

X-ray Department and Nurses' Home

The X-Ray Department and Nurses' Home was converted for the use of the Blood Transfusion Service destroying much of the evidence for its previous use. The form of the buildings would suggest they may have been an agricultural range before they were converted for medical use.

Room 112 (Plate 220) is at the western end of the range, recorded as waiting room on Plan 24-1, although it was used for storage when it was under the control of the Blood Transfusion Service. It has a door and two narrow, casement windows on its northern face (Plate 221) and an internal door to the passageway (Room 113). There is also a WC cubicle in the south west corner of Room 112 which is clearly a later feature.

Rooms 114 and 115 were a single room on Plan 24-1 labelled as a Dark Room, however they have been converted into a store room and a kitchen for the Blood Transfusion Service. It was not possible enter Room 116, as it was padlocked, however it had been converted from a series of cubicles associated with the X-Ray Department. Room 117 (Plate 222) used to hold the X-Ray equipment, although its recent use was as a as an office.

Rooms 119 – 122 are on the ground floor of what was the Nurses' Home, Rooms 120 and 122 used to be a bedroom (120) and a living room (122), although they have most recently been used for storage. Room 121, however retains its function as a bath room. The staircase is enclosed with a right hand turn to the first floor. The newel post has a flat cap (Plate 223) and the hand rail is of a simple cushion shape. The half landing has a shelf to one side (Plate 224 which demonstrates that the top of building which forms the Nurse's Home was built of a thinner wall. It would seem likely that it the original range was extended up when it was converted from the agricultural buildings.

The first floor (Figure 6) consist of four rooms opening off a small landing at the top of the stairs. When it was used as a Nurses' Home, this floor consisted of three bedrooms, one of which has been divided to provide a kitchen for the Blood Transfusion Unit. The other rooms were most recently used as office space. A built in cupboard, however, (Plate 225) in Room F31, probably relates to the use as a Nurse's bedroom.

At the eastern end of the range (Room 125, Figure 5) was a room which it was not possible to enter. It has opposed doorway and the use of a tie bar would suggest this was originally and agricultural building, possibly a stable, however by the time Plan 24-1 was drawn it was used for storage. Lean to additions to the southern side of the range (Rooms 123, 124 and 126) are clearly of a later date than the main range. It was not possible to enter any of these rooms, however the windows in Rooms 123 and 124 mean that it was possible to assess their appearance. Room 123 is recorded as an examination room on Plan 24-1, however its final usage was for storage. Room 124 holds heating control system linked to the ducts from the Boiler House.

Boiler House

The Boiler House was a detached building to the south east of the X-Ray Department and Nurse's Home. It mainly consists of a large room holding four furnaces (Plate 226). Three of these boilers were oil-fired (Plate 227); however the boiler at the eastern end was coal-fired (Plate 228). The boilers were linked so that the exhaust fumes could be extracted though a pipe at above head level

through the northern wall of the building to the chimney (Plate 229). The oil-fired boilers were supplied through a pipe which runs in a T-plan trough in the floor (Plate 230), whilst a second L-plan trough (Plate 231) to the east of the coal fired has an uncertain function. One possibility was that the coal fired was used to power a generator which was located in a room to the east. Two stub wall attached to the eastern wall of the boiler house (Plate 232) probably held a water tank supplying the boilers. The steam/hot water produced was largely used to heat the hospital, although the pipes are now missing the concrete pad in the northwest corner of the boiler house (Plate 233) probably held the valve system. The pipes then exited the building through the brick lined pit adjacent to the concrete pad (Plate 234).

The electrical control system for the boilers was mounted on the dividing wall between the main boiler house and the welfare facilities in the south west corner of the Boiler House (Plate 235). The boiler house has a flat roof covered with corrugated sheets. These are supported by iron girders with diagonal bracing (Plate 236).

It was not possible to gain access to the room to the east of the Boiler House; however it is labelled as a 'Generator' on Plan 981/18/972 and the presence of a louvered screen on the northern wall of this building (Plate 43) would tend to confirm this function.



Plate 1: General view of the main block, looking NW



Plate 2: Front elevation of the house



Plate 3: The porch



Plate 4: Lancolate windows in the side of the porch



Plate 5: Detail of the bargeboard on the porch



Plate 6: West facing elevation of the house

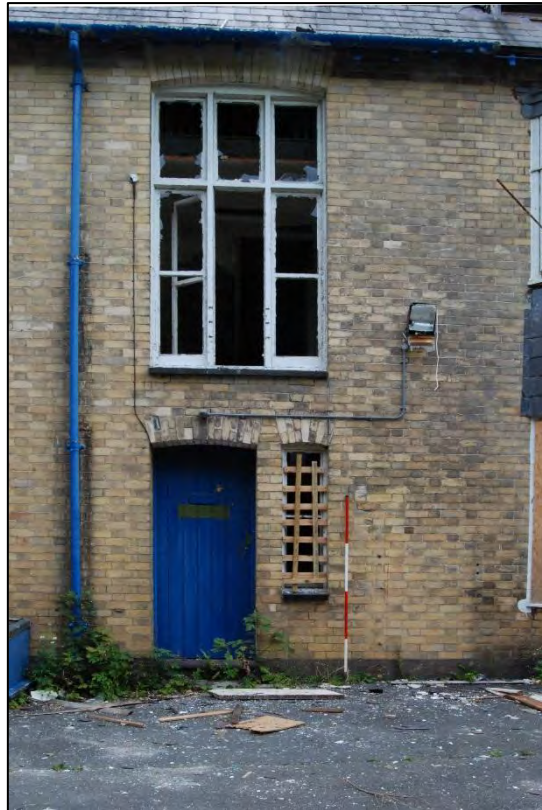


Plate 7: Door and Service Passage Window in the western elevation



Plate 8: Windows at the northern end of the western elevation



Plate 9: Bay window on the western elevation



Plate 10: The southern elevation



Plate 11: Shield on the southern elevation



Plate 12: The eastern elevation



Plate 13: The office block



Plate 14: The extension added to the NE corner of the house



Plate 15: The toilet block adjacent to the porch



Plate 16: The service range attached to the SW corner of the house



Plate 17: Rear elevation of the service range showing the position of the external WC



Plate 18: Later extension on the eastern side of the service range.



Plate 19: The linking corridor between the porch and the terminal care unit



Plate 20: The southern elevation of the main block of the Terminal Care Unit



Plate 21: The northern elevation of the main block of the Terminal Care Unit.



Plate 22: Side wing of the Terminal Care Unit



Plate 23: The central section of the Terminal Care Unit from above



Plate 24: The extension to the Terminal Care Unit, looking east



Plate 25: The extension to the Terminal Care Unit from above



Plate 26: The Geriatric Unit from above



Plate 27: The southern elevation of the Geriatric Unit



Plate 28: The eastern elevation of the Geriatric Unit



Plate 29: The northern elevation of the Geriatric Unit



Plate 30: The extension to the Geriatric Unit, looking SE



Plate 31: The northern elevation of the extension to the Geriatric Unit showing the external steel supports



Plate 32: The Garage, looking north



Plate 33: The finial on the garage roof



Plate 34: The X-ray Department and Nurses Home, looking SE



Plate 35: The southern end of the main range of the X-ray department



Plate 36: The cross wing or Nurses Home, looking south



Plate 37: The eastern end of the main range of the X-ray Department



Plate 38: Brick extension at the eastern end of the X-ray department



Plate 39: Extension on the southern elevation of the X-ray Department



Plate 40: The Boiler House complex, looking SE



Plate 41: Northern elevation of the Boiler House



Plate 42: The western extension to the boiler house



Plate 43: The eastern extension to the Boiler House (Generator House)



Plate 44: The base of the chimney, looking east



Plate 45: The oil tanks



Plate 46: Valve on top of the oil tank



Plate 47: Oil inlet valve



Plate 48: Ducting carrying the heating pipes to the buildings within the complex



Plate 49: Temporary building near the Geriatric Unit, looking north



Plate 50: The walled garden, looking SW



Plate 51: Typical section of the western wall of the Walled Garden



Plate 52: The gateway in the SW corner of the Walled Garden



Plate 53: Possible glass house structure in the southern wall of the Walled Garden



Plate 54: The joint between the southern and eastern walls of the Walled Garden



Plate 55: Buttress 1 in the Walled Garden



Plate 56: Buttress 4 in the Walled Garden



Plate 57: Patch with small stones and lime mortar between Buttresses 1 and 2 in the Walled Garden



Plate 58: The hedge between the paddock and the car park



Plate 59: Wall alongside the car park



Plate 60: Brick gateway to the car park



Plate 61: The pedestrian entrance to the car park



Plate 62: Gate pier on the northern drive



Plate 63: Gate pier on the northern drive



Plate 64: Line of the footpath through the western woodland



Plate 65: The fountain/bird bath



Plate 66: Conifers within the semi-sunken garden



Plate 67: Tree fern associated with the semi-sunken garden



Plate 68: The well superstructure



Plate 69: The well



Plate 70: Group of mature horse chestnut trees in the eastern garden



Plate 71: Group of Scots Pine trees in the field to the east of the site.



Plate 72: Concrete planters



Plate 73: Pampas grass in the eastern garden



Plate 74: The porch



Plate 75: The windows in the side of the porch



Plate 76: Lancolate windows in the porch



Plate 77: Window over the entrance to the porch



Plate 78: The lobby



Plate 79: The plaster ceiling in the Lobby



Plate 80: Room 3, looking north



Plate 81: Smaller window in Room 3



Plate 82: The Hall, looking NE



Plate 83: The ceiling in the Hall



Plate 84: The Hall floor



Plate 85: Repair in the SW corner of the Hall



Plate 86: The Fire place in the Hall



Plate 87: Abandoned newel post in the Hall



Plate 88: The Hall looking west



Plate 89: The partition dividing the Ballroom/Drawing Room



Plate 90: The northern end of Room 6A



Plate 91: Bay Window in Room 6A



Plate 92: Detail of mouldings on the bay window in Room 6A



Plate 93: Children paintings in Room 6A



Plate 94: The southern end of Room 6B



Plate 95: Bay Window in Room 6B



Plate 96: Mouldings around southern windows of Room 6B



Plate 97: Mouldings around the bay window in Room 6B



Plate 98: The Dining Room, looking west



Plate 99: Detail of the ceiling in the Dining Room



Plate 100: The ground floor service passage



Plate 101: The Cellar head



Plate 102: Service staircase to the first floor



Plate 103: Newel post for the service staircase to the first floor



Plate 104: Window by the “back door”



Plate 105: Room 8 looking south



Plate 106: Room 8 looking north



Plate 107: Cupboard in Room 8



Plate 108: Room 10, looking NW



Plate 109: Sash window between Room 10 and the passageway, looking north



Plate 110: Built in cupboard in Room 10



Plate 111: Tiles in Room 10



Plate 112: The Kitchen, looking SE



Plate 113: Blocked opening between the Kitchen and Room 10



Plate 114: Hatch for cleaning the chimney in the Kitchen



Plate 115: Decorative boarder in the Kitchen



Plate 116: Room 12, looking south



Plate 117: Room 13, looking south



Plate 118: Room 14, looking SE



Plate 119: Room 15, looking north



Plate 120: Room 18, looking west



Plate 121: Room 19, looking east



Plate 122: The Cellar stairs



Plate 123: Detail of the newel post of the Cellar stairs



Plate 124: Corridor C1 looking west



Plate 125: Corridor C1 looking east



Plate 126: The coal chute



Plate 127: Cellar C3, looking south



Plate 128: Cellar C3, looking north



Plate 129: Cellar C4, looking SE



Plate 130: Brick steps in C5



Plate 131: Cellar C6, looking north



Plate 132: Cellar C7, looking west



Plate 133: The main staircase, looking SW

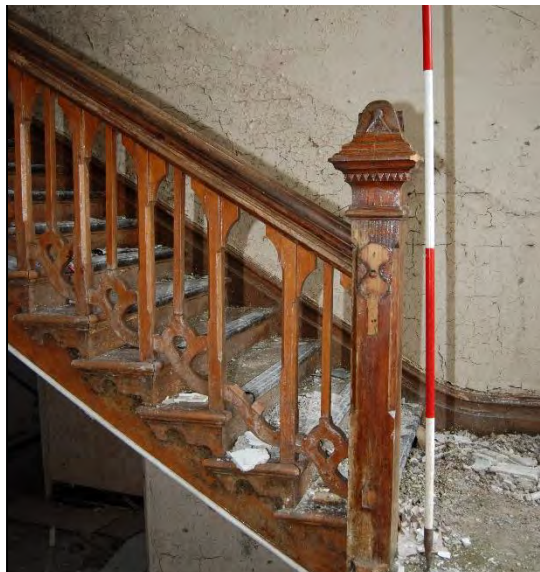


Plate 134: Middle newel post



Plate 135: Detail of the newel post finial



Plate 136: Main staircase window



Plate 137: The ceiling mouldings on the first floor landing



Plate 138: The first floor landing, looking east



Plate 139: Cupboard on the first floor landing



Plate 140: The northern end of Room F4, looking north.



Plate 141: The window in Room F4A



Plate 142: Detail of panelling and moulding around window in Room F4A



Plate 143: Room F4B, looking SE



Plate 144: Room F4B, looking south



Plate 145: Room F5, looking south



Plate 146: Fireplace in Room F5



Plate 147: Detail of decoration on the fire surround in Room F5



Plate 148: Room F6, looking west



Plate 149: Window in Room F6



Plate 150: Room F7, looking NW



Plate 151: Room F7, looking east



Plate 152: Room F8, looking SE



Plate 153: Perforated iron plate in the ceiling of Room F8



Plate 154: Corridor to Room F11



Plate 155: Partition between the two sections of the upper service corridor, looking west



Plate 156: Upper service corridor, looking west



Plate 157: The lower section of the window for the upper service corridor



Plate 158: Top of widow for the upper service corridor



Plate 159: Newel post and handrail for the back staircase.



Plate 160: Detail of the finial on the back staircase newel posts



Plate 161: Fireplace in Room F15



Plate 162: Fireplace in Room F16



Plate 163: Bay Window in Room F15



Plate 164: Corridor from the back stairs in the attic



Plate 165: Room A2, looking south



Plate 166: Fireplace in Room A2, looking NE



Plate 167: Later dormer window in Room A2



Plate 168: Room A3, looking SW



Plate 169: Fireplace in Room A3



Plate 170: Door plate in Room A3



Plate 171: Fragment of wall paper in Room A3



Plate 172: Room A4, looking SE



Plate 173: Fireplace in Room A4

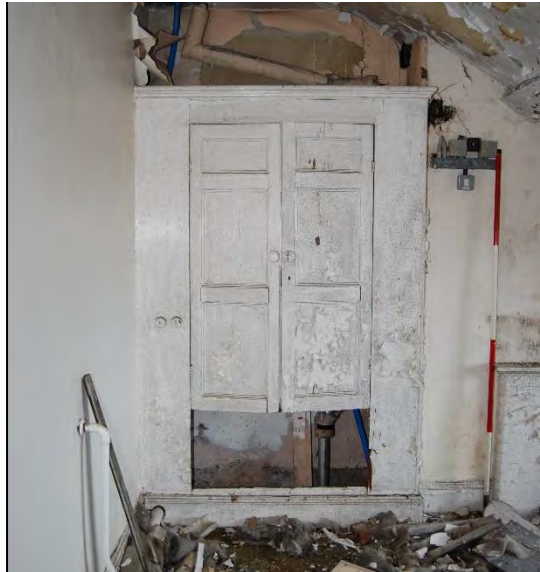


Plate 174: Built in cupboard in Room A4



Plate 175: Dormer window in Room A4



Plate 176: Room A7, looking SE



Plate 177: Room A8, looking east



Plate 178: Room A9 looking east



Plate 179: Fireplace in Room A10



Plate 180: One of the flanking windows in Room A10



Plate 181: Room A11, looking north



Plate 182: Room A12, looking north

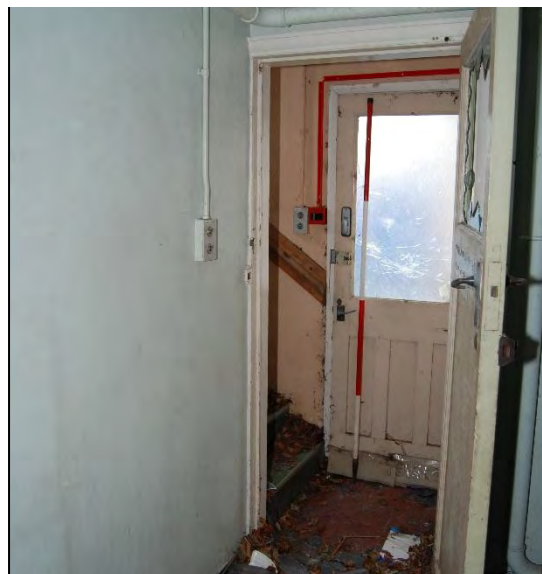


Plate 183: The entrance vestibule to the Office Block



Plate 184: Window in Room 23



Plate 185: Room F26, looking SW



Plate 186: Staircase in the Office Block



Plate 187: Corridor (33) looking south



Plate 188: Detail of Corridor (33), looking SE



Plate 189: Corridor (Room 34) looking north



Plate 190: Corridor (Room 71) looking east



Plate 191: The lobby to the "Terminal Care Unit" (Room 35) looking east



Plate 192: Room 41, looking NW



Plate 193: Room 42, looking SW



Plate 194: Room 43, looking south



Plate 195: Room 44, looking NW



Plate 196: Room 45. Looking east



Plate 197: Room 46, looking east



Plate 198: Room 47, looking west



Plate 199: Corridor (Room 49), looking north



Plate 200: Room 50, looking north



Plate 201: Room 51, looking NE



Plate 202: Room 52, looking east



Plate 203: Room 53, looking east



Plate 204: Room 54, looking east



Plate 205: Room 55, looking east



Plate 206: Room 56, looking west



Plate 207: Rooms 58 and 59 looking NE



Plate 208: Toys in Room 62



Plate 209: Louvered door to Room 70



Plate 210: Corridor (Room 72) in the Geriatric Unit, looking NW



Plate 211: Room 80, looking SE



Plate 212: Room 78, looking east



Plate 213: Entrance to Room 106



Plate 214: Room 106



Plate 215: Corridor (Room 101) looking SW



Plate 216: Room 102, looking NW



Plate 217: The Day Room (Room 109), looking SW



Plate 218: Piano in the Day Room (Room 109)



Plate 219: Children's nutrition literature in Room 110



Plate 220: Room 112, looking SE



Plate 221: Room 112, looking north



Plate 222: Room 117, looking south



Plate 223: Newel post for the staircase in the “Nurse’s Home”.

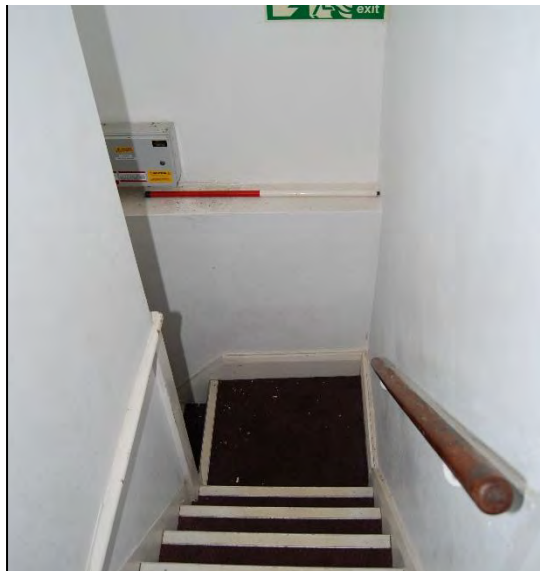


Plate 224: The staircase in the “Nurse’s Home”

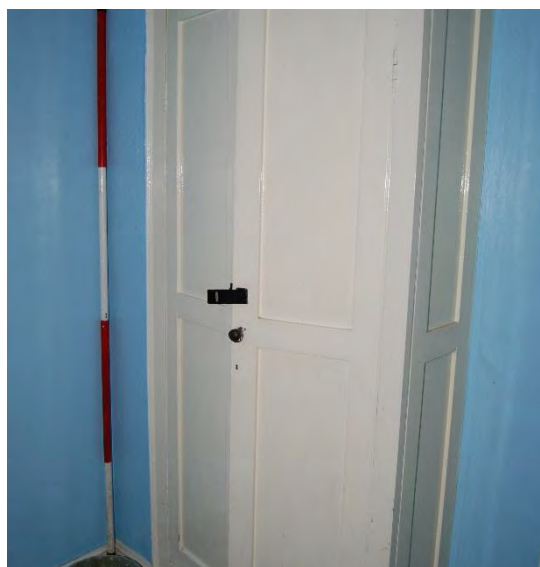


Plate 225: Built in cupboard in Room F31



Plate 226: Room 127, looking NE



Plate 227: One of the oil-fired boilers



Plate 228: The coal fired boiler



Plate 229: The exhaust system of the boilers



Plate 230: Trough in the floor of the Boiler house



Plate 231: Trough in floor of the Boiler House



Plate 232: Stub walls, possible tank support in the Boiler House



Plate 233: Concrete pad in the Boiler House



Plate 234: The pit in which the heating pipes leave the Boiler House

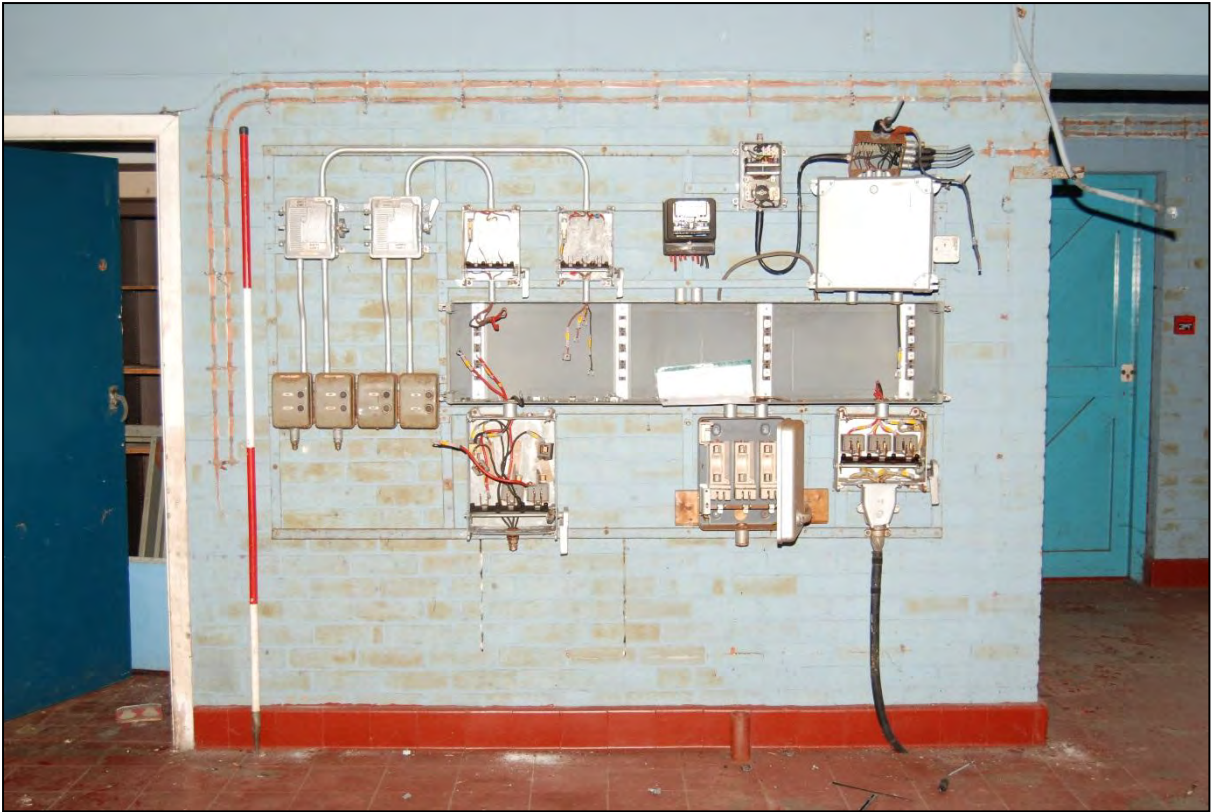


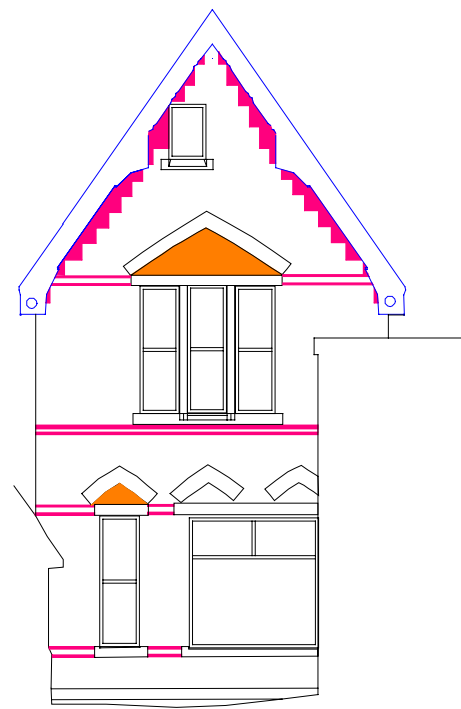
Plate 235: Electrical control system for the boilers



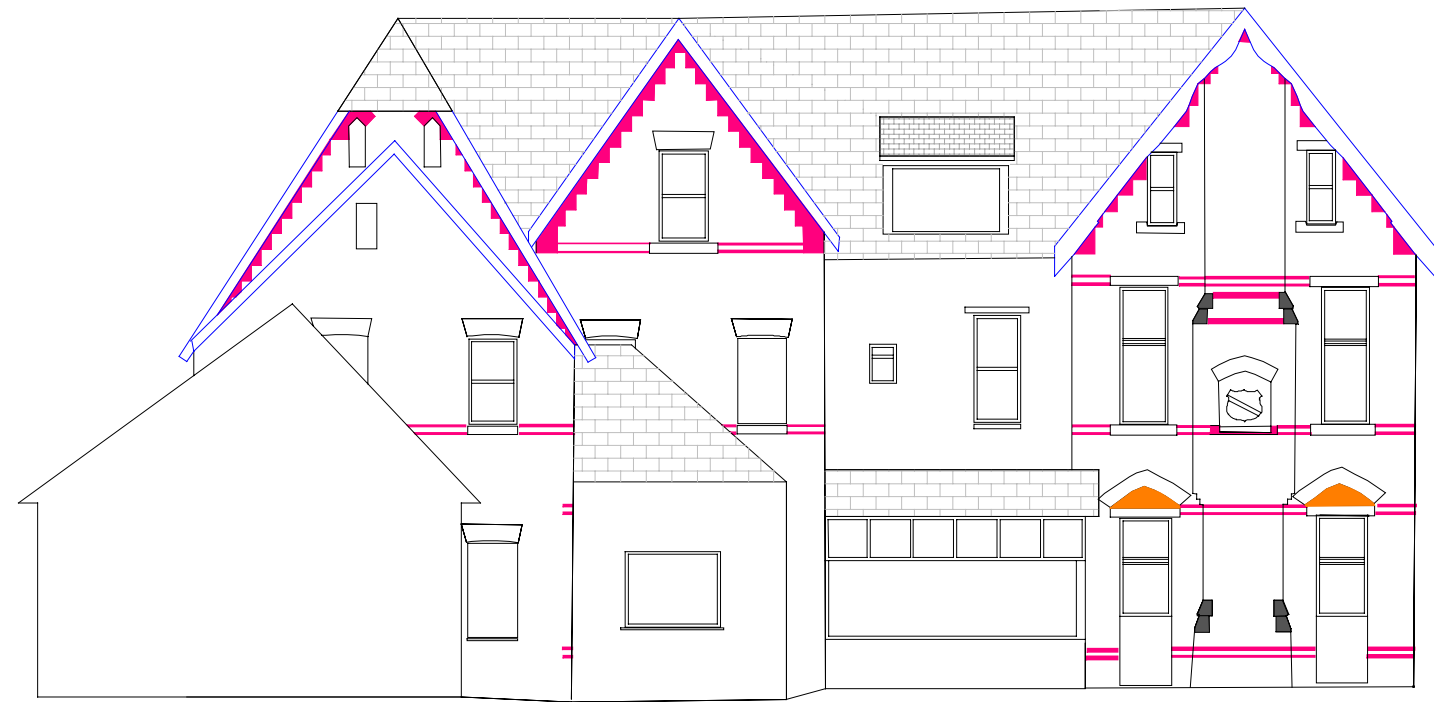
Plate 236: The roof structure of the Boiler House



Figure 14: Plan of the Site
Scale 1:750



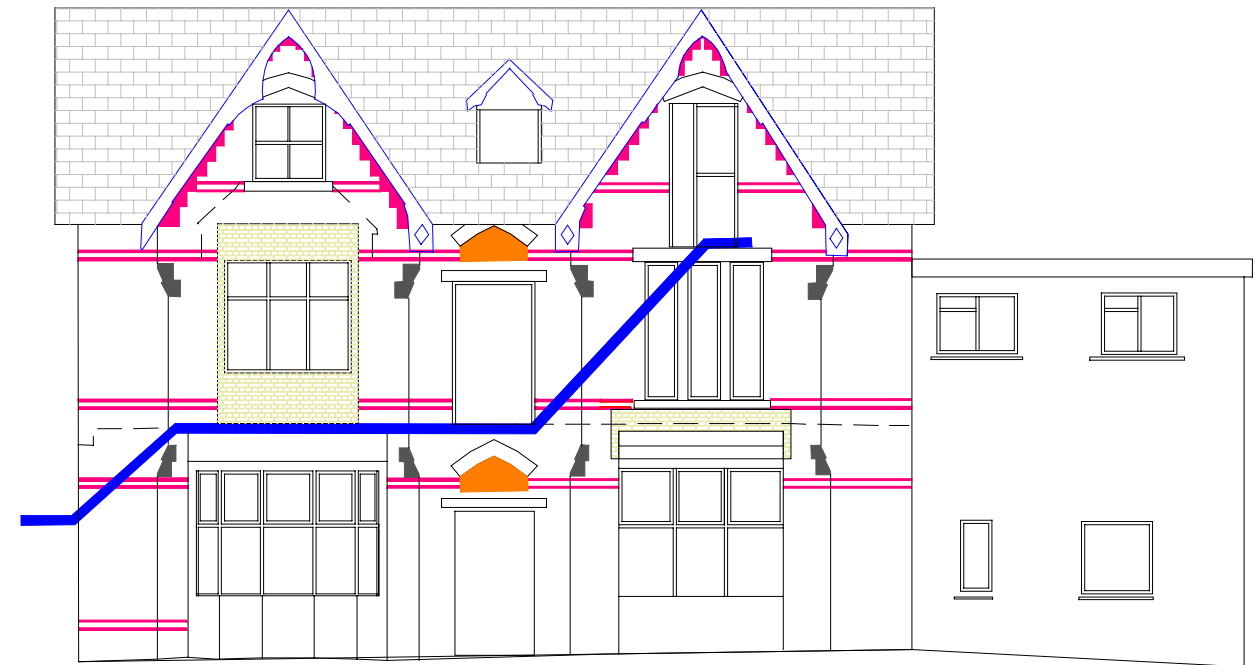
Elevation 1



Elevation 3

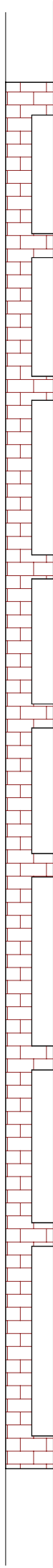


Elevation 2

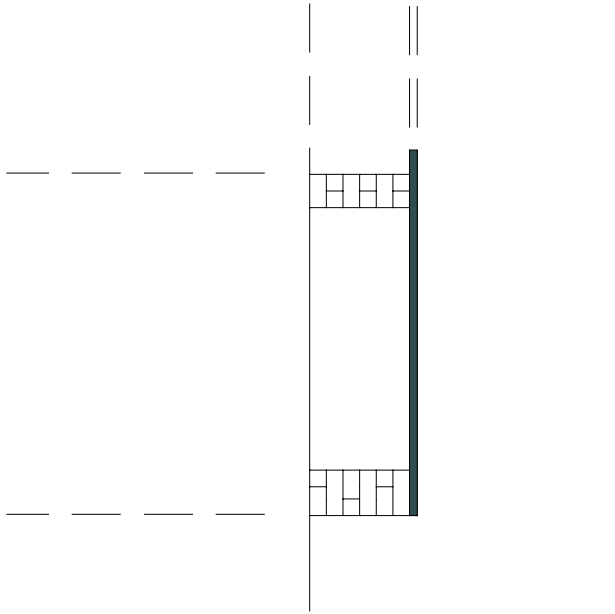


Elevation 4

Figure 15: Elevations
Scale 1:20



Plan



Elevation

Figure 16: Glasshouse Structure
Scale 1:50

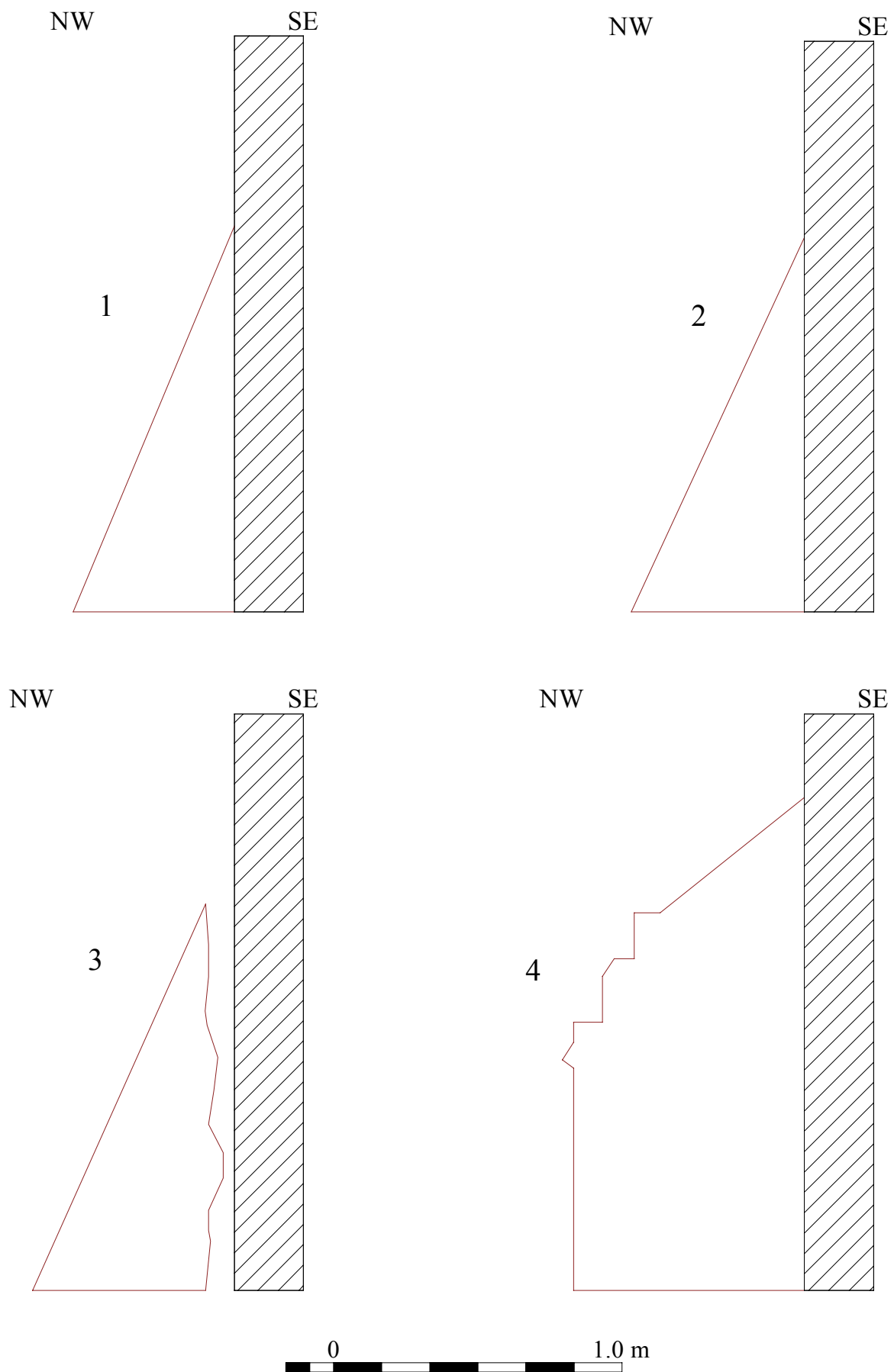


Figure 17: Buttress Profiles
Scale 1:20

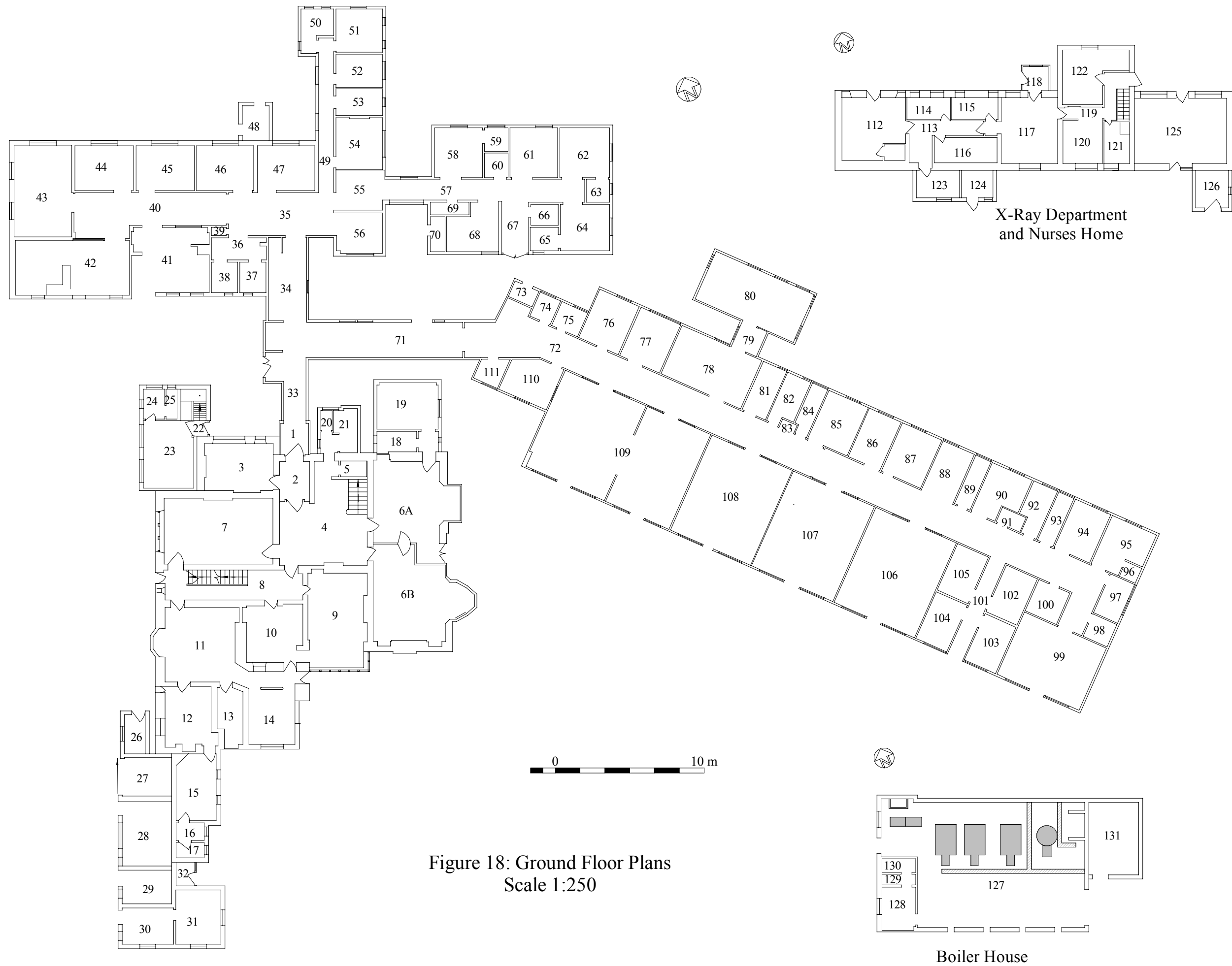
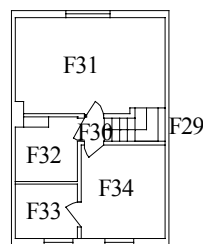
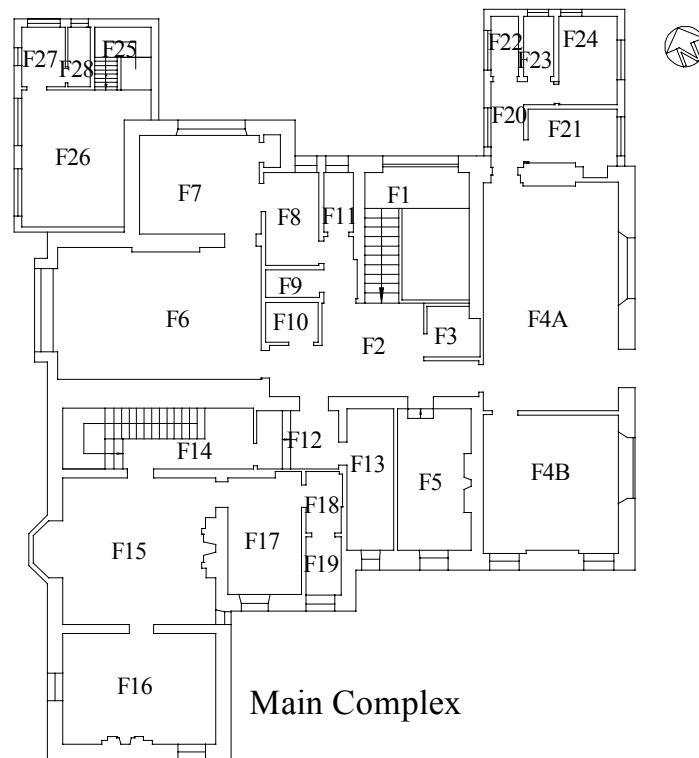


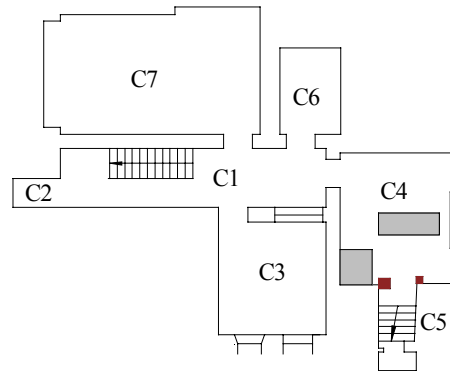
Figure 18: Ground Floor Plans
Scale 1:250



Nurses Home



Figure 19: First Floor Plans
Scale 1:250



Cellar



Attic



Figure 20: Cellar and Attic Plans
Scale 1:250



0 50 m

- | | |
|--|---|
| ■ Phase 1 (Pre 1872) | ■ Phase 6 (1965) |
| ■ Phase 2 (1872) | ▨ Phase 7 (1972) |
| ■ Phase 3 (?1880's) | ▨ Phase 8 (1975) |
| ■ Phase 4 (Pre 1930) | ▩ Phase 9 (post 1975) |
| ■ Phase 5 (Post 1930, Pre 1965) | |

Figure 21: Possible Phases
Scale 1:400



Figure 22: Position of the Photographs in the Archive
(External Shots)
Scale 1:750

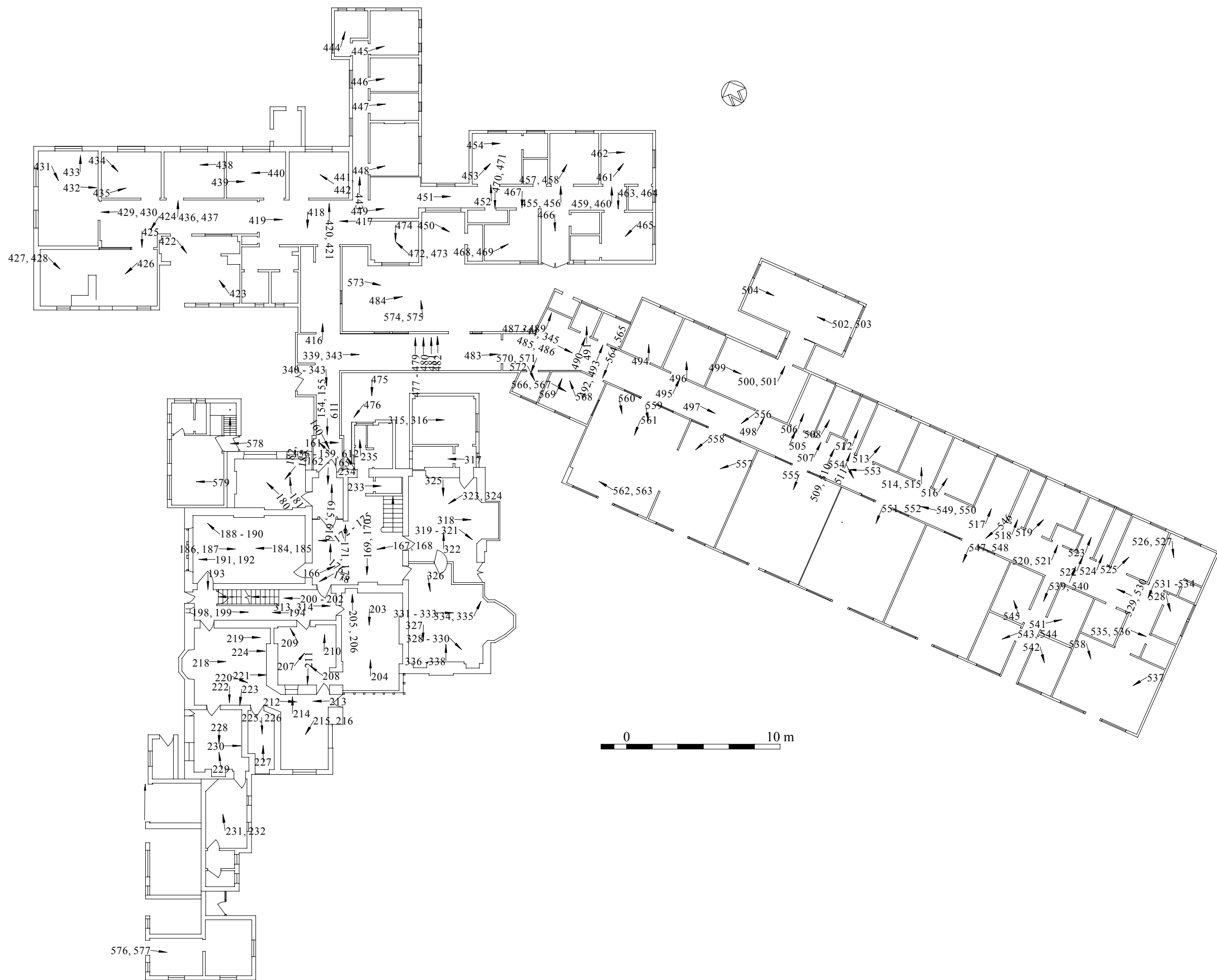
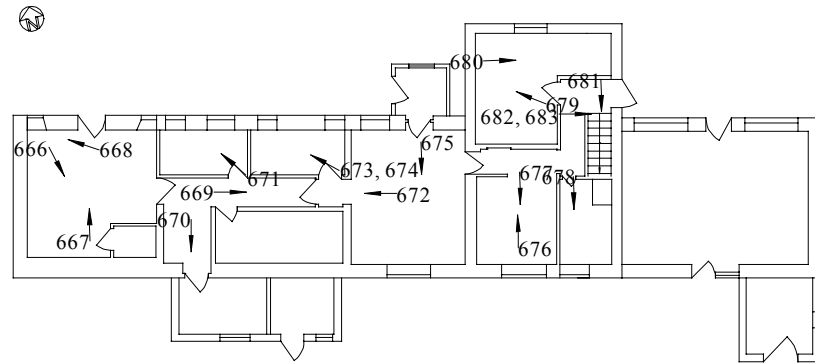


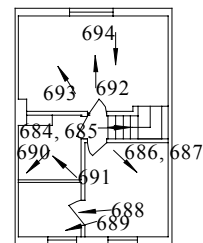
Figure 23: Location of the Photographs
Scale 1:250



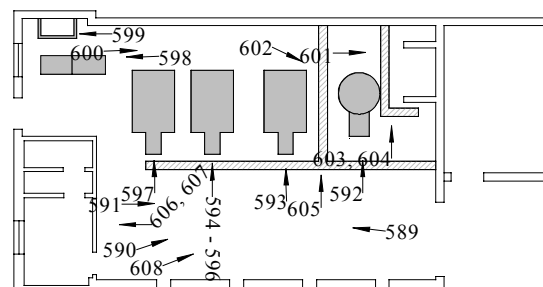
Figure 24: Location of the Photographs
Scale 1:250



X-Ray Department
and Nurses Home



First Floor of Nurses Home



Power House



Figure 25: Location of the Photographs
Scale 1:250

Table 1: Correlation of Room Usage

Room Number	Location	Possible Original Use	1970s	2013 Label
1	House	Porch		
2	House	Lobby	Vestibule	
3	House	?Office	Telephone Room and Dental Surgery	
4	House	Hall	Hall	
5	House	Below Stair Cupboard		
6	House	Ball Room/Drawing Room	Female Wards	
7	House	Dining Room	Dining Room	
8	House	Service Corridor		
9	House	Butler's Pantry	Nurses Day Room	
10	House	Scullery	Ward Kitchen	
11	House	Kitchen	Kitchen	
12	House	Cook's Parlour	Surgery	
13	House	Pantry	Pantry	
14	House		Nurses Pantry	
15	House		Domestic Staff Sitting Room	
16	House		Lavatory	
17	House		WC	
18	House		Bath Room	
19	House		Sisters Room and WC	
20	House		WC	
21	House		Bath Room	
22	Office Block			
23	Office Block		Office	
24	Office Block			
25	Office Block			
26	House		Vegetable Store	
27	House		Old Boiler House	
28	House		Sterilization Room	
29	House		Store	
30	House		Store	
31	House		Store	
32	House		WC	
33	Linking Corridor	Link to Block built before 1930	Covered Way	
34	Linking Corridor			

Room Number	Location	Possible Original Use	1970s	2013 Label
35	Terminal Care Block		Veranda	
36	Terminal Care Block			
37	Terminal Care Block			
38	Terminal Care Block			
39	Terminal Care Block			
40	Terminal Care Block		Veranda	
41	Terminal Care Block			
42	Terminal Care Block			Reception
43	Terminal Care Block		Ward	Meeting Room
44	Terminal Care Block		Ward	
45	Terminal Care Block		Ward	Community Nursing - Child Development
46	Terminal Care Block		Ward	
47	Terminal Care Block		Ward	
48	Terminal Care Block		Store	
49	Terminal Care Block			
50	Terminal Care Block		Two WC's	
51	Terminal Care Block		Sister's Room and Lavatory	
52	Terminal Care Block		Bath Room	
53	Terminal Care Block		Linen Room	
54	Terminal Care Block		Office	
55	Terminal Care Block		Ward	
56	Terminal Care Block		Ward	
57	Terminal Care Extension			
58	Terminal Care Extension		Ward	Lead Nurse - Child Development
59	Terminal Care Extension		WC	

Room Number	Location	Possible Original Use	1970s	2013 Label
60	Terminal Care Extension		WC	
61	Terminal Care Extension		Single Room	Social Work Team Leader
62	Terminal Care Extension			Head of Child Psychology Services
63	Terminal Care Extension			
64	Terminal Care Extension			Service Development Manager
65	Terminal Care Extension		Relatives Room	
66	Terminal Care Extension		Relatives Room	
67	Terminal Care Extension		Relatives Room	
68	Terminal Care Extension		Bath Room	16
69	Terminal Care Extension			Private Staff Only
70	Terminal Care Extension		Boiler Room	
71	Linking Corridor			
72	Geriatric Block			
73	Geriatric Block		Engineering	
74	Geriatric Block		Day Toilet	Staff toilet
75	Geriatric Block		Day Toilet	Female toilet
76	Geriatric Block		Kitchen	Assisted toilet
77	Geriatric Block		Day Dining Room	
78	Geriatric Block		Physiotherapy	Staff Only
79	Geriatric Block			
80	Geriatric Block			
81	Geriatric Block		Store	Store
82	Geriatric Block		Toilet	Female toilet
83	Geriatric Block			
84	Geriatric Block		Toilet	Men's toilet
85	Geriatric Block		Bathroom	
86	Geriatric Block		Clean Utility	
87	Geriatric Block		Sluice	
88	Geriatric Block		Nurses Duty Room	
89	Geriatric Block		Toilet	
90	Geriatric Block		Medic Bath Room	
91	Geriatric Block		Store	Store

Room Number	Location	Possible Original Use	1970s	2013 Label
92	Geriatric Block		Toilet	Men's toilet
93	Geriatric Block		Cleaner	
94	Geriatric Block		1 Bed Ward	
95	Geriatric Block		1 Bed Ward	
96	Geriatric Block		Toilet	
97	Geriatric Block		Staff	
98	Geriatric Block		Toilet	Toilet
99	Geriatric Block		4 Bed Ward	
100	Geriatric Block		Store	
101	Geriatric Block		Six Bed Ward	
102	Geriatric Block		Six Bed Ward	
103	Geriatric Block		Six Bed Ward	
104	Geriatric Block		Six Bed Ward	
105	Geriatric Block		Six Bed Ward	
106	Geriatric Block		Six Bed Ward	CFS Assessment Clinic
107	Geriatric Block		Six Bed Ward	
108	Geriatric Block		Six Bed Ward	
109	Geriatric Block		Day Room	
110	Geriatric Block		Sister	Authorised Staff Only. Office
111	Geriatric Block		Disposal	Store
112	X-Ray Block		Waiting Room	
113	X-Ray Block			
114	X-Ray Block		Dark Room	
115	X-Ray Block		Dark Room	
116	X-Ray Block		Cubicles	
117	X-Ray Block		X-Ray Room	
118	X-Ray Block			
119	X-Ray Block			
120	X-Ray Block		Bedroom No 4	
121	X-Ray Block		Bath Room	
122	X-Ray Block		Living Room	
123	X-Ray Block		Examination Room	
124	X-Ray Block			
125	X-Ray Block		Store	
126	X-Ray Block			
127	Boiler House		Furnace Room	
128	Boiler House		WC	
129	Boiler House		WC	
130	Boiler House		Rest Room	

Room Number	Location	Possible Original Use	1970s	2013 Label
131	Boiler House		Generator Room	
F1	First Floor of House	Half Landing		
F2	First Floor of House	Landing		
F3	First Floor of House		Store	
F4	First Floor of House	Bedroom	Ward	
F5	First Floor of House	Bedroom	Surgery	
F6	First Floor of House	Bedroom	Ward	
F7	First Floor of House	Dressing Room	Ward	
F8	First Floor of House	Bath Room	Bath Room	
F9	First Floor of House	Linen Room	Store	
F10	First Floor of House	Cupboard	Store	
F11	First Floor of House			
F12	First Floor of House	Link between upper service corridor and landing		
F13	First Floor of House	Part of Bedroom	Sluice Room	
F14	First Floor of House	Service Passage		
F15	First Floor of House	Bedroom (possible House keeper's sitting room)	Matron's Sitting Room	
F16	First Floor of House	Bedroom (?staff)	Bedroom	
F17	First Floor of House		Bathroom	
F18	First Floor of House			
F19	First Floor of House		WC	
F20	First Floor of House			
F21	First Floor of House		Sluice Room	
F22	First Floor of House		WC	
F23	First Floor of House		Lavatory	
F24	First Floor of House		Bath Room	

Room Number	Location	Possible Original Use	1970s	2013 Label
F25	Office Block	Stair case		
F26	Office Block		Office	
F27	Office Block		WC	
F28	Office Block		Lavatory	
F29	Office Block	Stair case		
F30	Office Block	Landing		
F31	Nurse's Home		Bedroom No 1	
F32	Nurse's Home		Bedroom No 2	
F33	Nurse's Home		Bedroom No 2	
F34	Nurse's Home		Bedroom No. 3	
C1	House Cellars	Linking corridor		
C2	House Cellars	Coal Shute		
C3	House Cellars		Refrigerator and Stores	
C4	House Cellars		Calorifiers	
C5	House Cellars	Link to Garden		
C6	House Cellars	?Wine cellar	Store	
C7	House Cellars		Store	
A1	House Attic	Landing		
A2	House Attic	Staff bedroom	Nurse's Bedroom	
A3	House Attic	Staff bedroom	Nurse's Bedroom	
A4	House Attic	Staff bedroom	Nurse's Bedroom	
A5	House Attic	Corridor		
A6	House Attic	Corridor		
A7	House Attic	Staff bedroom	Staff Bedrooms x2	
A8	House Attic	Staff bedroom	Staff Bedroom	
A9	House Attic	Staff bedroom	Staff Bedroom	
A10	House Attic	Staff bedroom	Staff Bedroom	
A11	House Attic	Staff bedroom	Staff Bedroom	
A12	House Attic	Staff bathroom	Bathroom	
A13	House Attic	Corridor		
A14	House Attic	Staff WC	WC	

2.5 Discussion

2.5.1 Development

2.3 and **2.4** above confirm human intervention in the Bryn Seiont site in Prehistory in the form of Bronze Age burial features, and that Bryn Seiont was occupied as a dwelling from the late 18th century onwards. The earlier house was rebuilt in 1841 and was subsequently replaced by a larger house in 1872

The buildings at Bryn Seiont clearly reflect multiple phases of developments on the site which are outlined on Figure 8. There is little physical evidence of the buildings on the site prior to the erection of the 1872 house (Phase 1); however it is likely that the well and the large scots pine tree on the western boundary of the site relate to this phase of activity.

The core of the hospital complex is the yellow brick house constructed in 1872 (Phase 2) and designed by J. Thomas. This was a significant gentleman's residence incorporating elements from the Arts and Crafts Movement in its decoration. The use of polychrome brickwork including the string courses in contrasting brick suggests the influence of John Ruskin's writings on Venice and the Italian Gothic on the design of the house.¹ The quality of the house is shown by the selection of materials for its construction and the quality of the brickwork. The yellow brick appears to be 'London Brick' rather than the local brick and the thin nature of the mortar courses demonstrate the care with which the house was built. This care is particularly noted when comparing the quality of the original brickwork to that of the later modifications. The quality of the main staircase and the decoration of the hall in general suggest some influence from the Arts and Craft Movement.²

The house retains the plan and functional separation of an earlier Victorian residence. This separation between the family rooms and the service areas of the house is marked, indeed there would appear to be a disparity between the proportion of the house given over to the servants rather than for family use. The family rooms tend to occupy the south and east of the house whilst the north and west and the attics and cellars were service rooms and servant accommodation. Not surprisingly, what remains of the decoration within the house is more complex within the family rooms of particular note is the use of three-quarter round mock columns around the windows and doors. The contrast between the family and service areas of the house is also shown on the outside design. The use of contrasting brick string courses, window hoods and roofline details occurs only on the section of the house used for family and public rooms whilst the western side of the house is much plainer. This would suggest that the main access to the house was from the east whilst the service access was from the west. The 1889 Ordnance Survey map shows a track leaving the Porthmadog road to the north of Pwll-y-gro.

The disparity between the designs on the two shields is curious. Whilst the shield on the southern side of the house has a bend (diagonal bar) that within the house has a chevron. Unfortunately none of the original paint work survives and the designs are rather simple, so it is not possible to resolve this disparity.

The map evidence would also suggest that the buildings which were to become the X-Ray Department and Nurses' Home were contemporary with the 1872 house. They were probably some of the '... range of fowl pens, with two double coach houses, two two-stall stables, two loose boxes,

¹ S. Calloway: *The Elements of Style. An Encyclopedia of Domestic Architectural Detail* (Mitchell Beazley, 2005), 237.

² S. Calloway: *The Elements of Style. An Encyclopedia of Domestic Architectural Detail* (Mitchell Beazley, 2005), 326.

saddle room, cow house, piggery, hound kennel etc.' recorded in the 1879 sale catalogue. It is also likely that some element of the garden can be associated with this phase of activity. This is particularly relevant to the clumps of mature trees to the east of the house. These have been noted by the RCAHMS as part of a post-medieval garden, shown on the 1900 Ordnance Survey Map, under the NPRN number 86320.³

The porch, whilst earlier than the construction phases associated with hospital development appear to be slightly later than the main house (Phase 3). It incorporates elements with more gothic design which are at odd to the rest of the house.

The pre-1930 annotations to the 1918 Ordnance Survey map shows a building to the north of the house, in a similar position to the Terminal Care Unit, together with a passageway linking this block to the house. It is thought that the short length of wooden passageway attached to the porch may be associated with this phase (Phase 4), however the length of the building shown on the plan would suggest that the building to which the passageway led has been replaced. The service buildings to the south, however, had been added by this date. There was also a divorced building to the east which later plans identify as a billiards room.

It is difficult to separate the development of the site between 1930 and 1965 (Phase 5). The main house was extended to the north with the addition of three wings. The office was added to the north western corner and an extension was added to the north eastern corner to provide toilet and washing facilities to the Ballroom/Drawing Room and the large bedroom which had become wards. Between these two wings a toilet block was also added with an access below the main staircase. It is likely that the bay windows to the house were also added or replaced during this phase of activity. An L-plan range was built on the site of the range built to the north of the house, possibly replacing a temporary structure built either during or shortly after the First World War. The L-plan range had a veranda along its southern side and was probably linked to house via the passageway which already existed.

Other modifications to the X-Ray Department and Nurses Home included the various lean-to extensions and possibly the heightening of the cross range to produce the Nurse's Home.

In 1965 (Phase 6) the boiler house was constructed. This was linked to the main ranges by means of pipes held in below ground channels. That which entered the house accessed through what had been a doorway to the gardens, whilst those pipes for the X-Ray department entered through one of the lean-to extensions. In 1972 the Geriatric Unit was added to the complex (Phase 7) and in 1975 (Phase 8) an extension was added to the Terminal Care Unit. Assuming that the plan 12.TC.1 reflects that which was built as the extension to the Terminal Care Unit this unit range was further extended after 1975 (Phase 9) and a new range of rooms replaced veranda on the southern side of the Terminal Care Unit. Also in the late phase of development a variety of small extensions were added, including the staff rest room to the north of the Geriatric Unit.

The most modern development of the complex relates to the most recent use of the hospital. The X-Ray Department and Nurses' Home were redeveloped as offices for the Blood Transfusion Service and the Terminal Care Unit was largely converted into offices for the Child Development Service. The Geriatric Unit appears to have continued, although it also ran Chronic Fatigue and Pain Management Clinics. It may be that it was at the same time that one of the wards in the Geriatric Unit was converted into four consultation rooms.

2.5.2 Conclusions

³ <http://map.coflein.gov.uk/index>.

The Bryn Seiont site demonstrates evidence of human intervention as early as the Bronze Age, and has yielded significant information about two major modern social changes which are still little understood in archaeological terms in Wales, namely the changing expectations in terms of domestic architecture, recreation and social standing of a middle class made up mainly of incomers to the region but seeking to establish themselves within it, and evolving provision for health care.

The demolition of Bryn Seiont in 1841 and the building of the new house on the site of the old, and the subsequent building of the present house in 1872 indicate the growing ambitions of a capitalist-managerial class associated with the slate industry, anxious to become accepted as members of a regional elite. To this end, an architect-designed house with accommodation for servants showing the influence of the Arts and Crafts movement, and with grounds suitable for parties and meetings, was evidently crucial. It is also significant that in their wake came lawyers such as Allanson and prominent members of the Welsh dissenting connections such as Herber Evans, whose resources were obviously sufficient to enable him to live in Bryn Seiont. In this respect, it is clear that the evidence of online newspapers has enormous potential to illustrate these changes, and the activities of these individuals, and thereby to inform the material record.

The provision of health care in Wales has been extensively studied by university academics, but (as noted in 2.2 above), little has been carried out in the way of archaeological recording. Bryn Seiont is particularly significant in regional terms as a place where diseases associated with the slate industry were addressed, and there is a strong case for more detailed evaluation of the resource across Wales that can make use of existing research and marry it to the archaeology of standing hospital buildings and of hospital gardens.

3 ARCHAEOLOGICAL POTENTIAL

- Given what is now known of the presence of an earlier house on site, it is recommended that consideration be given to a watching brief on the site identified in this document.
- It is recommended that a watching brief be maintained during below-ground disturbance and that geophysical survey be carried out on the gardens should there be plans to carry out any intervention in the grounds.

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