

Final Report

Western Counties Health and Occupational Centre

Cultural Heritage Plan



March 18, 2013

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1.0 Introduction

The City of London's goal through this Cultural Heritage Plan is to identify and assess the significance of the cultural heritage landscape features of the Western Counties Health and Occupational Centre Grounds. The Cultural Heritage Plan is intended to provide the basis for the future rehabilitation of the site. The protection and conservation of the cultural heritage resources and their interpretation as well as the recreational potential of the site are a key part of the future rehabilitation plan.

The Western Counties Health and Occupational Centre Grounds are located within the urbanized area of the City of London. The Western Counties site is approximately seven hectares in size. The southern portion of the site is owned by the City of London. The northern portion is owned by London Health Sciences Centre. The site is situated adjacent to Saunder's Pond (formerly known as Walker's Pond) and within a larger area of environmental significant area features that is connected to the city via a network of trails. The surrounding lands are used by community residents for passive recreation activities.

Archaeological evidence from the surrounding area suggests that the lands were used by aboriginal groups during the Middle Late Archaic and Middle and Late Woodland periods. After Euro-Canadian settlement in 1810, the lands were used for agricultural pasture and farming for the next century and a half.

The Department of Veterans Affairs opened the Western Counties Health and Occupational Centre in 1946 as a rehabilitation centre for returning World War Two veterans. The Centre was one of seven such facilities in Canada and was one of the largest. The Centre initially provided treatment to wounded veterans and ease their rehabilitation back into civilian life. After the first few years the Centre became a tuberculosis treatment centre and eventually evolved into a facility primarily for the treatment of long term care of severely wounded and psychologically affected veterans. By the time of its closure in the 1980s the Western Counties Health and Occupational Centre had become a facility for domiciliary care of veterans.

Some of the original buildings have been demolished by the City and Hospital and only four of the original buildings remain. The remnant foundations and chimneys of the demolished buildings are to be integrated into the plan. The largest remaining building – the Wellington building – is

vacant. However the three remaining smaller buildings are currently used; one of which is home to the Secrets of Radar Museum. The grounds are also used for passive recreation by area residents, hospital staff and patients.

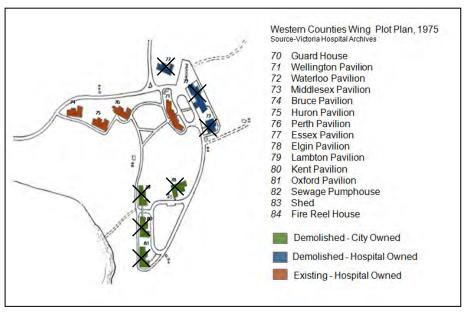


Figure 1: Layout of Western Counties Centre. showing demolished buildings. Source: Historica Research 2000.

The Cultural Heritage Plan will address the significance of the cultural heritage landscape features and provide a basis for the conservation and rehabilitation of the site. The location and landscape were an important part of the reason the site was selected as a treatment centre for returning veterans. The semi-rural site, with surrounding ponds and natural areas, was consistent with the therapeutic methods of the time that believed that physical and mental healing could be best achieved in a natural landscape.

The philosophy of the benefits of natural surroundings on mental health was pioneered in Canada by Dr. Richard Bucke at the London Psychiatric Hospital. The Western Counties Health and Occupational Centre is, in many ways, a direct implementation of Dr. Bucke's treatment philosophy of the therapeutic use of landscape. The grounds and surrounding natural areas are also important as a link to W.E. Saunders who was an avid naturalist and the founding president of the Ontario Federation of Naturalists in 1931 and one London's important local historical figures.

1.1 Goals of the Plan

The goals of the Cultural Heritage Plan for the Western Counties Health and Occupational Centre Grounds are to:

- Recognize and conserve the cultural features and topography and conserve and enhance the features associated with the 1940s landscape design;
- Maintain and preserve historical site features, and ensure they are a prominent element of the Plan; and
- Maintain passive recreation opportunities and promote site circulation and connectivity to adjacent lands.
- Be complementary to the adjacent and surrounding ESA lands.

1.2 Study Area

The Western Counties Health and Occupational Centre Grounds are located in the City of London. The lands are adjacent to and bordered on the north by the London Health Sciences Centre located at the corner of Wellington Road South and Commissioners Road. The Western Counties Health and Occupational Centre Grounds are surrounded on the east, south and west sides by the Westminster Ponds / Pond Mills Environmentally Significant Area.

2.0 Context of the Site

2.1 History of the site

2.1.1 Aboriginal history

After ice receded from the Wisconsin glaciation, aboriginal groups living south of the Great Lakes began to establish settlements in Southwestern Ontario. The environment of the area is estimated to have changed from a spruce parkland (similar to the transition zone between boreal forest and tundra) to a more dense pine forest with deciduous species of poplar and yellow birch (UTRCA 23, 2005).

It does not appear that an archaeological survey of the Western Counties Centre has been undertaken (London Middlesex Historical Society, 1998; Poulton, correspondence, 2012). Several studies have been completed in the adjacent Pond Mills and Westminster Ponds area, identifying 73 cultural

components and more than 60 registered archaeological sites (Archaeoligix 1999; UTRCA 2005).

In 1999 Archaeologix Inc. completed a stage 1-2 assessment of part of lots 23, 24 and 25 Concession 1 in the former Westminster Township. The study area included the former Western Counties Centre, but due to the construction of the facility and thus the previous disturbance of the site, the land at the Western Counties Centre was not actually assessed. A single pre-contact artifact, Onondaga chert, chipping detritus was found within the Archaeologix study area. This site was located directly west of the veteran's cottage facility towards Wellington Road.

The other archaeological assessments in the wider Pond Mills/Westminster Ponds area uncovered Middle and Late Archaic resources (2000-1100 BC) and Middle and Late Woodland resources (400-1650 AD) (Archaeologix 5, 1999.). These sites, and others contained in the City of London Archaeological Master Plan indicate that the subject area was traveled and inhabited by aboriginal peoples at various times. The availability of potable water, diverse wildlife food sources, rich soils and habitable topography would have made the subject property and surrounding area very suitable for camping and hunting (UTRCA 23, 2005).

2.1.2 Agricultural settlement

Euro-Canadian Settlement initially began toward the northern border of Westminster Township along North Talbot Road, supervised by Colonel Talbot. Settlement moved southward to Commissioners Road, after it was surveyed in 1810 (UTRCA 23, 2005).

The whole of Westminster Township was surveyed in 1820 using the double-front special survey system. The double front grid system of concession roads and sideroads allowed for five 200 acre lots between the sideroads, typically divided in the middle with farm frontage on each concession (Dean and Matthews Plate 99, 1969). The map of the 1878 Atlas depicts a less regularly sized grid, with a variety of lot sizes, although double frontage appears to be common. Settlement of the Township did not pick up until after the War of 1812, when a number of Scottish emigrants arrived in the area (UTRCA).

The Odell family settled on lot 23 Concession One in the early 19th century. John Odell and family were United Empire Loyalists and first formed a community outside Montreal, called Odelltown. Odell's sons John and Albert secured a Government land grant in Westminster Township, and relocated, building the Township's first log cabin in 1811 (Oliver 1945). The Odells and

other Westminster Township inhabitants established an agricultural community known as Odell's Corners at the crossroads of present-day Wellington and Commissioners. The community included a tavern, schoolhouse, blacksmith shop and rural residences surrounded by farmland. The post office existed from 1883-1913 (Oliver 1945). The hamlet is not listed on the 1878 Westminster Township map from the 1878 Illustrated Historical Atlas of Middlesex County, but the map does depict a cluster of residences near the intersection north of the subject property.

The Walker family arrived on Lot 24 of the Second Concession in 1842, from Cumberland, England. William Walker established his farm and a local blacksmith shop. He established a type of fencing using iron rods and wire to reduce snow drifts that became a common feature on nearby Township farms on the road frontage and also dividing fields (Munroe 1998). The Walker blacksmith business was later run by William's son James, and later by James' son William. The shop specialized in shoeing horses but also made or repaired farm equipment such as plows, wagons carts and tools (Munroe 1998). Saunder's Pond near the subject property, once called Walker's Pond, was named in recognition of the Walker family.

By the late 1870s, lands at the subject property were owned by J.W. (possibly James Walker), William Mitchell, John Griffiths, Daniel Hyndman, Mr. Middlemore and a Mrs Hindman. A number of dwellings and small orchards are depicted nearby (Figure 2).

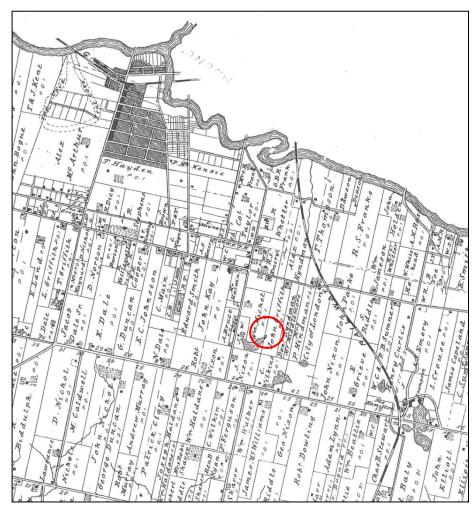


Figure 2: Excerpt of 1878 Map of Westminster Township, from the *Illustrated Historical Atlas of Middlesex County*. Approximate location of study area, on lots 23 and 24, is circled in red.

Topographical maps dated between 1913 and 1938 indicate the land on which the Western Counties Centre was built was generally "marshy" or "brush". However, a 1942 aerial photograph of the study area indicates hedgerows and tree lines defining field patterns (see Figure 3). The outlines of agricultural fields become less prominent towards the site of the Western Counties facility but appear to have been cleared for pasture or cultivation.



Figure 3: 1942 Aerial Photograph of study area, Map and Data Centre, University of Western Ontario (circle denotes site of future Western Counties Centre)

2.1.3 Ownership by W.E. Saunders

William Edwin Saunders purchased a portion of Lot 24 in 1913, according to land registry records. Personal correspondence between Saunders and Lewis McIver Terrill in 1917 indicates that the initial purchase was 30 acres and included half of Walker's Pond. The letter suggests that Saunders planned to lease the lands containing the rest of the pond and "the woods to the back of it", as well as seeking out parcels of land from 4 or 5 other owners (Judd 1991). It is not known whether Saunders actually did lease the land to the back of the pond (where a portion of the Western Counties site is located).

In 1918, Saunders purchased an additional 50 acres of land south of his original purchase. This land was still on Lot 24, and at not the site of the Western Counties facility. In 1933 Saunders granted part of the land to Charles Henry Graham. In 1943, the land was expropriated by the federal government. At this time, land on Lot 23 was also being granted to the government.

Saunders was born in London in August 16, 1861, where he attended London Central School and Collegiate Institute. He followed his father into the pharmacy business in 1883 after graduating from the Philadelphia College of Pharmacy.

Saunders is noted for his interest in natural history and his hobby as a naturalist, and kept an extensive collection of notebooks and specimens. He later wrote the column "Nature Week by Week" for the London Free Press between 1929 and 1943 (Judd 1979). He was a founding member of the Ornithological Society of London and the Federation of Ontario Naturalists, and earned an honorary degree from the University of Western Ontario in 1936. His purchase of the land adjacent to the subject property allowed him to become fully involved in gardening, bird observation and other naturalist pursuits. Saunders is recognized for his extensive contributions to the field of natural history in Ontario, including more than 250 written titles and the discovery of several bird and small mammal species (Federation of Ontario Naturalists, 1943).

2.1.4 Establishment of Western Counties Health and Occupational Centre

Veterans' facilities near the subject property were established as early as 1920, when Westminster Hospital was completed to provide treatment for "mental and nervous casualties" of the First World War (Andreae 4, 2000). By 1929, wards in the hospital were reserved for pensioners that required more general care and treatment, and the hospital ceased operating chiefly as a veterans institute, changing its name from the Westminster Psychiatric Hospital to Westminster Hospital (Andreae 4, 2000). By the time of the Second World War the rising number of casualties established a need for more military treatment centres. In 1940 the Dominion Government purchased 418 acres between Wellington Road and the London-Port Stanley Railway right of way in order to expand the Westminster facility (Andreae 4, 2000).

Planning for the Western Counties Centre began in 1943, when the Federal Department of Veterans Affairs secured the land on lots 23 and 24 in

Westminster Township. They appropriated the lands through "Plan 86", which allowed the department to expropriate the lands for a new Military Health Campus that was to honour the service and needs of war veterans (UTRCA 25, 2005).

Original plans for the campus included an active treatment pavilion, two wards, two medical units, and 400 acres of parkland for recreational and therapeutic use. Many of the facilities were not constructed; only two medical units were built and they were located on the Westminster campus, rather than the newly expropriated land. However planning for an additional facility was underway (Andreae 4, 2000).

The Western Counties Health and Occupational Centre opened in November 1946. It grew quickly from an initial six patients to 196, its bed capacity. The centre focused on treatment from the emerging field of occupational therapy, which believed that patients with active interests had a faster recovery time (Andreae 9, 2000).

Occupational therapy combined physiotherapy and real-life actions and skills on order to restore functions of the muscles, nerves and joints. The Occupational Therapy movement began in Britain and the United States in the early 20th century, and spread to Canada with the arrival of the First World War (See Section 3.1.3 for additional information).

The treatment facility comprised 11 buildings or pavilions, each named after a county in Southwestern Ontario. These included the Wellington administrative building, Middlesex occupational therapy building, Waterloo treatment building, and the Bruce, Elgin, Essex, Huron, Kent, Lambton Oxford and Perth dormitory pavilions. Within the main pavilions there was a swimming pool, automotive lab, photographic darkroom, watch repair shop and a radio lab and later a print shop (Figures 4 and 5). Each of these components allowed the veterans to engage in active pursuits that would provide both treatment and skills to help them find work when they returned to civilian life (Andreae 10, 2000).

The buildings were designed by C.D. Sutherland, chief architect of the Public Works Department of the Department of Pensions and National Health. The design of the Western Counties Health and Occupational Centre was similar to a number of other centres built by the Department of Veterans Affairs, based on a prototype the federal government deemed appropriate for health and rehabilitation centres (Andreae 18, 2000).



Figure 4: Waterloo Pavilion Pool grand opening, November 1946. Source: London Free Press Collection of Photographic Archives, Western Collection 2012.



Figure 5: Middlesex Pavilion Print Shop, January 1950. Source: London Free Press Collection of Photographic Archives, Western Collection 2012.

In 1947 the Western Counties Centre became a test site for combining its existing operations with treatment for tuberculosis in order to reduce re-

admission rates. The facility was renamed the Western Counties Veterans Lodge. The bed capacity was reduced from 196 to 150, and admission was voluntary for patients who had been released from a tuberculosis sanatorium. Within a couple years, nearly 500 patients had been admitted. Of the 434 patients admitted in 1949, 374 were new admissions while only 60 were readmissions. As the tuberculosis problem began to subside, sanatorium facilities were closed. The Western Counties Lodge stopped treatment of tuberculosis in 1950. It was the only Health and Occupational Centre to have also been used for tuberculosis treatment (Andreae 11-12, 2000).

Health and Occupational Centres like the Western Counties Centre were initially administrated separately from Veterans Hospitals. However in 1950, the facility amalgamated with Westminster Hospital. By this time the need for both occupational treatment centres and tuberculosis sanatoriums was on a sharp decline. The centre transitioned to its third period of use as the Western Counties Wing of Westminster Hospital. With a bed capacity of 176, the site now provided domiciliary care for aging veterans, primarily from the First World War. By the mid 1960s, veterans from the Second World War became the dominant residents. The facility offered general treatment stays, which averaged from 20-24 days, and domiciliary stays which averaged between 700 to more than 800 days (according to statistics from 1970 and 1973) (Andreae 12, 2000).

The facility supported between 130-150 patients with a staff of 37 men and 16 women in 1959. Reduced numbers of staff were available on weekends. Recreational therapy was still considered an important part of the domiciliary care unit, with card and board games, movies and television and bowling, lawn bowling and darts noted as popular activates. A bowling lane was constructed in the basement of one of the pavilions. Arts and crafts and a toy repair shop were also associated with the centre. More active sports were also encouraged, such as golf, baseball and fishing. Two baseball diamonds were constructed, one located on the east side of the Waterloo Pavilion. A golf course was constructed on site in 1956 (now the site of Parkwood Hospital), and Walkers Pond was stocked with fish by the Ontario Department of Lands and Forests for patient use only. Some activities were coordinated with the Veterans Psychiatric Institute at Westminster Hospital (Andreae 13-14, 2000).

In 1977 the Western Counties Wing and the Westminster Hospital became part of the Westminster Campus of Victoria Hospital. Parkwood Hospital, operated by the Women's Christian Association, took over the Western Counties wing in 1980. By 1984, funding for a new Western Counties Wing building was announced by the Department of Veterans Affairs. Within five years, the residents were moved to the new facility at Parkwood Hospital.

Three of the original pavilions were abandoned and the Middlesex pavilion was demolished. The remainder were used by London Health Sciences and the Board of Education during the following decade (Andreae 15, 2000).

2.1.5 City of London

In 2000 a plan was approved to divide the property of the former Western Counties Centre. The City acquired the former Lambton, Kent, Oxford and Elgin dormitory pavilions along with Walker's Pond. London Health Sciences retained the remaining buildings and a portion of land surrounding them (See Figure 6). The boundary was determined by topographical features and drainage to Walker's Pond. The City subsequently demolished the former dormitory buildings on their land.



Figure 6: Aerial image showing land ownership of former Western Counties Health and Occupational Centre, boundary between owners denoted by black line. Map source: City of London.

2.2 Adjacent lands

2.2.1 Natural area

The former Western Counties Centre is adjacent to the Westminster Ponds and Pond Mills Conservation area managed by the Upper Thames River Conservation Authority. The natural area surrounding the subject property contains five kettle ponds and a beaver pond surrounded by upland and lowland habitats. The lowland habitats contain bog areas with a number of species including Tamarack and Leatherleaf growing from a layer of peat. The bog area is located around Spettigue Pond. Other areas are swampy forest with a variety of maple trees, silver birch and American elm. Along Saunders Pond (formerly known as Walker's Pond) there is a marshy area with cattails, sedges and rushes (UTRCA 2012).

The upland habitat of the natural area surrounding the subject property comprise a typical eastern hardwood forest, including Sugar Maple, American Beech, White Ash, Basswood, Red Oak, White Oak and Shagbark Hickory. Previous agricultural fields and woodlots have introduced additional species to the area (UTRCA 2012).

The Provincially Significant Wetland area surrounding the site contains 757 plant species (including 30 provincially or nationally rare species), 232 species of birds, 20 species of mammals, 18 species of fish, 12 species of amphibians and 7 species of reptiles (UTRCA 91, 2005).

2.2.2 Urban context

The site, once rural and outside the limits of the City of London, is now enveloped by Hospital lands and suburban development. It is located approximately three kilometres from the downtown core, and approximately four kilometres to Highway 401. Residential, commercial and industrial development now fills the space between the downtown core and the highway, and the naturalized area surrounding the subject lands is a popular location for passive recreational activities and educational excursions.

Hospital and care facilities are located primarily to the north and west of the subject property, forming an identifiable cultural landscape. The expanded Westminster Campus of Victoria Hospital is located to the north of the subject property, north of Commissioners Road. Parkwood Hospital and the St. Joseph's Health Centre Neurobehavioural Rehabilitation Centre are located more directly northwest of the former Western Counties Centre, near the

intersection of Wellington and Commissioners. Southeast of the property is the London Tourism Information Centre, located along Wellington Road, one of the major southern entrance roads to the city from Highway 401. The John Dearness Centre for Long Term Care is located southwest of the subject property, at the intersection of Wellington and Southdale.

The land beyond the Environmentally Significant Area (ESA) east has been developed for residential subdivisions, excluding a former landfill site to the northeast. In the section between Pond Mills and Westminster Ponds, the subdivision includes an elementary school and secondary school. The subdivision further east also includes an elementary school. A string of commercial development is located along Wellington Road, west of the subject property.

2.2.3 Connections – trails, roads

The subject property is located within a block of land once part of the settlement survey grid of Westminster Township. The section of land is bordered on the north by Commissioners Road, Wellington Road to the west, Southdale Road to the south and historically Pond Mills Road to the east. The former London-Port Stanley Railway line bisected the area. Currently, winding subdivision roads have filled in the section east of the railway to Pond Mills Road and between the Westminster Ponds cluster and the Pond Mills cluster of kettle ponds.

3.0 Heritage Value and Interest3.1 Cultural heritage resources3.1.1 Built features

Existing layout and buildings

Site

Originally the buildings were laid out in an organic layout, taking advantage of the natural topography of the site and the views provided of the pond to the west and the meadow in the centre of the site (See Figure 7).

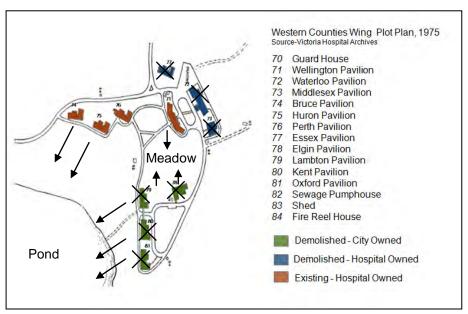


Figure 7: Plan showing layout of Western Counties Centre. Arrows denote views to pond and meadow. Plan source: Historica Research, 2000.

Building Design

The existing dormitory pavilions are a similar roughly F-shaped plan with slight variations. Entrance to the dormitory pavilions was located off a veranda, where a set of French doors led to the square entrance hall and two additional sets of French doors provided access to the living room. The placement of the doors was evenly spaced across the veranda. The living room was located at the end of the pavilion, at the bottom of the F-shape. From the entrance hall, a corridor travelled to the opposite end of the building, providing access to the sleeping quarters or wards. Four ward rooms were located on the front end of the pavilion. Two large rooms with space for four beds were placed between narrower, two-bed rooms. Two long ward rooms formed the 'top' of the f-shape, containing space for several beds.

Directly behind the front hall was a study and quarters for staff supervisor. Beside this were lavatories. This section of the building formed the central bar of the F-shape. A coat closet and stairs to the basement level were constructed alongside the hallway between the lavatory and larger ward rooms (See Figures 8-9).

Exits were located at the end of the large ward room, the corridor and the stairway to the basement. These may have varied from pavilion to pavilion depending on site location and grading. Rectangular windows, singularly or in pairs, were located in most of the rooms. A larger picture window was located in the living room, and in the two front ward rooms. A large stone fireplace and chimney was located in the living room in the centre of the rear wall.

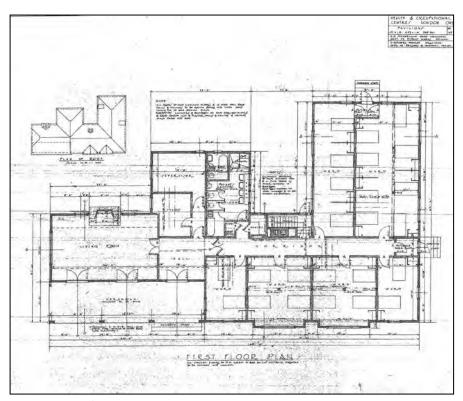


Figure 8: Plan of cottage pavilions. Source: Historica Research, 2000.

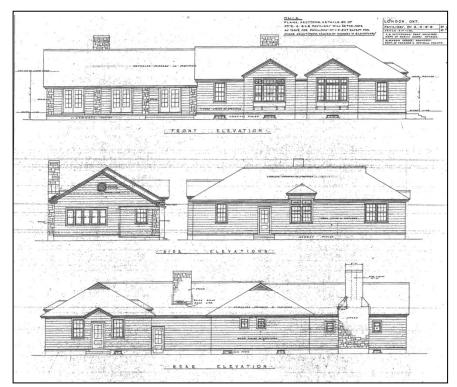


Figure 9: Elevations of cottage pavilions, originally clad in wooden clapboard. Source: Historica Research 2000.

The remaining dormitory buildings are clad in vinyl siding. They feature oneover-one sash windows in single or pairs, in vinyl frames. Larger windows at the living room or front wards contained a central fixed pane flanked by oneover-one sash windows. A three-paned transom is set above. The pavilions feature gable-on-hip roofs clad in asphalt shingles (Figures 10-12).



Figure 10: 2012 view of cottage pavilion, now Secrets of Radar Museum.



Figure 11: Rear view of existing cottage pavilion, 2012.

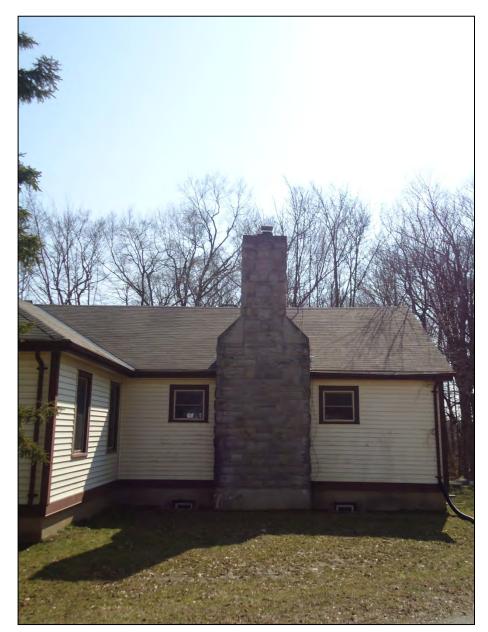


Figure 12: Rear view featuring chimney, 2012.

Plans for the pavilions indicated that the bays along the veranda were French doors. Currently, in the pavilion now converted to the Radar Museum, pairs of windows are located in their place.

The dormitory pavilions were all oriented to face towards the lake or central open space/meadow.

The Wellington Pavilion, the former administration building, is the only non-dormitory building remaining on the site. As built, the building was a two storey (and basement) building with a central wing and angled side wings.

The central wing of the building featured a central entrance located under a small gabled portico. The plan depicts a glazed door with round arched fanlight and sidelights. Rectangular windows, singular and in pairs, were located along the front and rear facades. In the second storey, both front and rear, there were three gabled dormers with trios of rectangular windows (See Figure 13). A large stone block chimney is extended from the kitchen wing. The building was clad in clapboard siding. A cupola was located atop the roof in the centre of the building. The roof was hip-on-gable.

The entrance led to a vestibule with coat closet to the right side. The main hall and stairway were also located to the right. Across from the front hall, an additional vestibule led to the centrally located rear entrance. The front side of the central wing contained the cloakroom, canteen, storage area, and general office. On the other side of the corridor were a visitor's room and private waiting room. To the left of the entrance was the communal dining hall. The right side wing contained lavatories, doctor's offices and other office space. The left side wing contained the kitchen and food storage areas. The second storey, located only above the central wing, featured a billiards room and caretaker's living quarters (Figure 14).

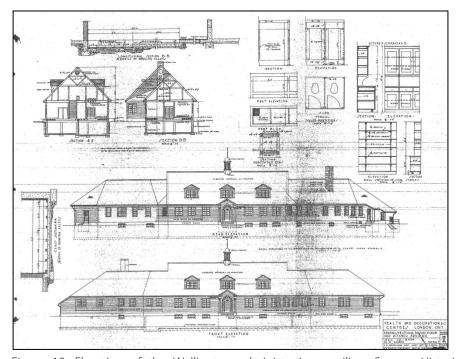


Figure 13: Elevation of the Wellington administration pavilion. Source: Historica Research, 2000.

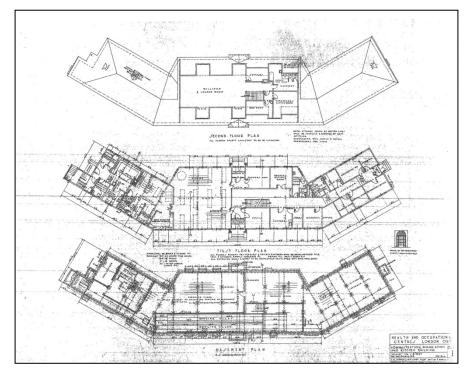


Figure 14: Plan of Wellington administration centre. Source: Historica Research, 2000.

The exterior windows and doors of the existing building have been boarded up, and pillars or columns from the porticos have been removed. The clapboard siding is still evident, though paint is peeling. The dormers, chimney and cupola are still present. The original plan of the building, with its grand central wing and side wings still faces towards the pond (Figures 15-16).



Figure 15: View of front and side wing of former Wellington Pavilion, with gatehouse to left, 2012.



Figure 16: Rear view of the former Wellington Pavilion, 2012.

A small gate house still exists on the property. It is a small square building with hip roof and boarded-up corner windows. It is clad in clapboard siding.

The orientation of the buildings towards the pond or central open space/meadow is a layout indicative of the therapeutic purpose of the site. The large ornamental fireplaces and verandas in the cottage provided a humanizing effect to an otherwise institutional place.

Ruins and chimneys

Of the 11 original buildings of the Western Counties Health and Occupational Centre, four remain. The Middlesex building was demolished in the mid-1990s and the others were demolished after 2000. There are no remaining ruins of the Essex dormitory pavilion, the Waterloo treatment pavilion or the Middlesex workshop pavilion.

The southern dormitory buildings on City land have been demolished but concrete foundation ruins and chimneys of the cottages remain. The foundations indicate the layout of the cottages and different room proportions. The remaining fireplaces have been capped at eight feet and have had metal grates installed in their openings. Three of the four chimneys remain. Hearths remain on some of the chimneys. The space within the foundation ruins has been seeded with clover (Figures 17-19).



Figure 17: View of foundation ruins, looking toward Saunders Pond, 2012.



Figure 18: View of foundation ruins and chimneys looking toward remaining cottage, 2012.



Figure 19: View of foundation ruins, seeded with clover, 2012.

3.1.2 Landscape features

Vegetation

There is a variety of vegetation on the site that indicates different periods in the site's history. Surviving ornamental plantings such as crab apple, spirea and juniper are located throughout the site, particularly in the central open space between the north buildings and south ruins and alongside the former roadway between buildings. No foundation plantings are evident outside the former Wellington Pavilion and the remaining dormitory pavilions. There are no remaining foundation plants along the ruins of the southern dormitory buildings. A mix of specimen (ornamental) trees can be found throughout the site (Figures 20-22).

Invasive non-native species surround much of the site, particularly around Saunders Pond, blocking views.



Figure 20: cluster of shrubs at cottage ruins, 2012.



Figure 21: Specimen trees near cottage ruins and roadway, 2012.



Figure 22: Site vegetation, 2012.

Views

Historically, views from the pavilions in the Western Counties facility were of the water or the interior meadow between buildings. Views to the facility were relatively open at the gatehouse entrance to the site, presenting a formal arrival court and the buildings located within a landscaped backdrop. Views of the water today are blocked by invasive vegetation (Figure 23).



Figure 23: View toward Saunders Pond, blocked by vegetation, 2012.

Circulation routes

Access to the site was historically permitted from an entrance off Commissioners Road, north of the site, and from Wellington Road, to the west. The roads met at a central entrance near the gate house and northern dormitory buildings. The west road from Wellington passed three of the north dormitory buildings. A curving driveway led from the convergence of entrance roads to the southern dormitories, looping in front of the buildings to carry vehicles back up to the main entranceway. Vehicles and pedestrians shared the routes throughout the site.

Currently, access to the site is from the north. The former lane to Wellington Road has been closed during construction of a new hospital building. An additional roadway/pathway now exists in front of the southern dormitory ruins leading to the north portion of the complex. Within the site, vehicles are

limited to the northern portion. Access to the City owned land is prevented by a gate. Pedestrians are able to access all parts of the site. The City's trail system in the adjacent ESA can be accessed from two places. The new site plans for the hospital lands will re-establish the Wellington Street access.

3.1.3 History/stories

Natural features

The recognition of natural features in the area has been in place since at least the early 20th century when W.E. Saunders purchased a portion of the property. His interest in the natural word established the area as an early informal bird sanctuary and nature preserve.

Natural features were still an important aspect of the site during its various incarnations as a veterans' health facility. The initial plan for the site prioritized views of the pond and created a therapeutic environment for treatment within landscaped and naturalized space.

From the closure of the veterans' treatment centre today, the site and surrounding area has been valued by the community for its trails and interpretive centres as part of the Westminster Ponds/Pond Mills Environmentally Significant Area.

Cultural landscape – from aboriginal to veterans

The former Western Counties Health and Occupational Centre and surrounding area is an evolved cultural landscape that has encompassed a variety of uses and significant places from the pre-contact aboriginal era to present day.

Archaeological studies in the surrounding area indicate that the land was travelled or inhabited by aboriginal groups likely due to the presence of the kettle ponds, rich soils and variety of wildlife.

Euro-Canadian settlement in the region began with the construction of the first log house in Westminster Township at Odell's Corners, now the nearby intersection of Wellington and Commissioners. The area was used for agricultural purposes and local industry (Walker blacksmith shop) during the 19th century.

By the 20th century the site and surrounding area was changing, with the construction of the Westminster military hospital north of Wellington and Commissioners, later to play a role in the development of the Western Counties Health and Occupational Centre. The purchase of lands west of the subject property by W.E. Saunders for his nature preserve also foreshadowed the use of surrounding lands for natural conservation.

Increasing needs for veterans' treatment facilities led to the expropriation of Saunders' land in 1943 for construction of the Western Counties Health and Occupational Centre in 1946. Use of the site for veterans' care continued until 1989 under various treatment programs. The programs integrated the natural features of the site to create a therapeutic environment that was an integral component of healing and rehabilitation.

The natural features of Westminster Ponds and Pond Mills were designated as an Environmentally Significant Area in 1990, protected and managed by the Upper Thames River Conservation Authority. Similar to Sanders' use of the site in the early 20th century, the site is now preserved as a habitat to several hundred different species of bird, mammal, reptile, amphibian and plant, and is a popular location for local hikers, joggers, naturalists and school groups.

The Veterans' story

Planning for Veterans' treatment centres began near the end of the war, when the Director of Medical Services of the Department of Veterans Affairs studied the physical rehabilitation programs being delivered in Great Britain. Within a year, planning for centres specializing on the treatment of veterans by occupational therapy seems to have been underway (Andreae 9, 2000).

The first Veterans' Health and Occupational centre opened in Ottawa in 1944, and the Western Counties facility was the second centre in 1946. By the following year there appear to have been at least 5 other Health and Occupational (or convalescent) Centres for Veterans. Data from the Annual Report of the Department of Veterans Affairs in 1949 lists six Health and Occupational Centres in Saint John, Senneville, Ottawa, Toronto, and Burnaby. During this time, the Western Counties Centre is listed as a tuberculosis treatment lodge. A second tuberculosis centre was located in St. Hyacinthe, Quebec. The Department of Veterans Affairs also operated several other hospitals and veterans homes (Andreae 6, 2000).

The Health and Occupational Centres followed similar patterns as to their locations and programming. They were typically located in attractive settings

away from the general hospital, and used pavilions and central dining or recreational halls rather than single-mass buildings. The centres focused on exercise, sports and handicrafts in a group environment to encourage active recovery to ease veterans back into civilian life. They also provided practical training, such as photography and photo development, auto mechanics, watch repair and radio training to help provide skills for veterans to find work after their discharge from the centre (Andreae 9-11, 2000).

Gradually, as veterans were treated and returned to civilian life, the functions of the Health and Occupational centres changed. The Western Counties Centre became a tuberculosis treatment centre, and later a domiciliary care facility. Others became long-term domiciliary centres, and the remainder closed or were adapted to other purposes and merged with local hospitals. By the late 1950s, occupational therapy had been established in most general hospitals, and the specific treatment centres had become redundant.

The name Western Counties seems to have been unique to this particular facility. There were no other 'Counties' facilities. Others were given local names like Rideau, Ridgewood. Divadale, York, or George Derby (Andreae 6, 2000).

Occupational therapy

The early roots of Occupational Therapy arose when a more humanitarian approach was being taken to public institutions, particularly psychiatric facilities, some of which encouraged patients to work or be active during their treatment periods. With the return of numerous wounded veterans from the First World War, volunteers were recruited to engage the veterans in occupational work during their convalescence. By 1918, training courses for this purpose were being conducted at the University of Toronto. Occupational aides at the training courses in Toronto and Montreal wore military-styles uniforms of green and white with badges and brown leather belts (Cardwell, Friedland and Robinson 15, 2001).

These initial volunteer positions and training courses were primarily occupied by over 300 women, who later found themselves providing care to Veterans Hospitals and General Hospitals, mental hospitals and tuberculosis sanatoriums (Cardwell, Friedland and Robinson 15, 2001).

In the early 1920s, organizations such as the Builders Exchange in Winnipeg and the Toronto Curative Workshop emerged as sheltered workshops and treatment centres formed by occupational aides. The aides and volunteers began to form societies and lobbied to have formal training programs

reinstated in Universities in Canada and abroad. During the 1920s and 1930s, a number of charitable groups helped raise funds to provide occupational therapy to less fortunate members of the community (Cardwell, Friedland and Robinson 17, 2001).

The Second World War brought increased enrollment to the courses at the University of Toronto, and demand for trained therapists. The Canadian Government agreed to enlist over 80 occupational therapists to serve in the armed forces and fully commissioned officers (Cockburn 17, 2001). By the end of the War, revised and expanded occupational services were being provided in Veterans Hospitals under the Department of Veterans Affairs. This resulted in the creation of treatment centres like the Western Counties Health and Occupational Centre (Driver 58, 1968).

4.0 Land use policy framework

4.1.1 Provincial Policy Statement

The Provincial Policy Statement (PPS) was approved in 2005 by the Ministry of Municipal Affairs and Housing and was issued under the authority of the *Planning Act*. The PPS requires that all decisions affecting planning matters "shall be consistent with" the Provincial Policy Statement.

Section 2.6 of the Provincial Policy Statement requires that *significant cultural heritage landscapes* be conserved. The PPS defines cultural heritage landscapes as:

"A defined geographical area of heritage significance which has been modified by human activities and is valued by a community."

4.1.2 City of London Official Plan

The City owned portion of the site is designated as "Open Space" in the City of London Official Plan and the portion of the site owned by the London Health Sciences Centre is designated "Regional Facility".

Section 13.5 of the Official Plan provides the policy framework for the identification and conservation of Cultural Heritage Landscapes in London. This section implements the Provincial Policy Statement which requires the conservation of significant cultural heritage landscapes. The City's Official Plan policies identify that Cultural Heritage Landscapes will be recognized on publicly owned lands and on privately owned lands where ownership consent is given.

Policy 13.4.2 states that the conservation of Cultural Heritage Landscapes will be managed through the use of guidelines that identify the physical features that are to be conserved and describe the opportunities for recognition, interpretation, promotion and conservation of the Cultural Heritage Landscape. Guidelines are to include:

- A refined delineation of the Cultural Heritage Landscape;
- The important history and physical features, activities and processes that have shaped the Cultural Heritage Landscape;
- The physical features within the Cultural Heritage Landscape that should be retained;
- The opportunities for recognizing and interpreting the Cultural Heritage Landscape; and

• Guidelines for all future projects within the landscape to promote, enhance and conserve the Cultural Heritage Landscape.

5.0 Community Input

The Cultural Heritage Landscape Plan was developed in consultation with the community, the London Advisory Committee on Heritage (LACH), and stakeholders such as the London Health Sciences Centre. Two public meetings were held during the process and the draft Cultural Heritage Plan was presented to LACH for comment. In addition a survey was distributed at the beginning of the process to assist with understanding how the site is currently used.

5.1.1 Community Survey Results

As a component of the background research stage, a survey was prepared to obtain public input on level of use, site access and current range of uses, as well as future use and compatibility. The survey was distributed during the site visits, public open houses and information sessions, and posted on the City of London website.

The results from the survey indicate:

The majority of users visit the site on a daily basis (41%), and a further 27% visit weekly;

Approximately half (56%) of the users travel to the site by automobile, 22% walk, 15% bike, and 7% use public transit;

Reasons for visiting:

Recreational walking and dog walking, sightseeing, plant and tree identification, observing animals and nature, and historic purposes were identified as the most common reasons for visiting the site.

In regards to future development and use, summer and winter activities (i.e. walking, jogging, cycling, skiing, snowshoeing etc.), dog walking, historic and educational uses (i.e. museum), and nature observation, preservation and enhancement are viewed as most compatible for the grounds. Figure 23 provides a summary chart of common land uses identified as compatible for the site.

Generally, respondents feel future development should include a balance of natural and manicured landscape areas, minimal public facilities (i.e. washrooms, water, garbage facilities), increased provision of safety/security, and increased recognition and enhancement of historic and veteran significance to promote past uses of the site.

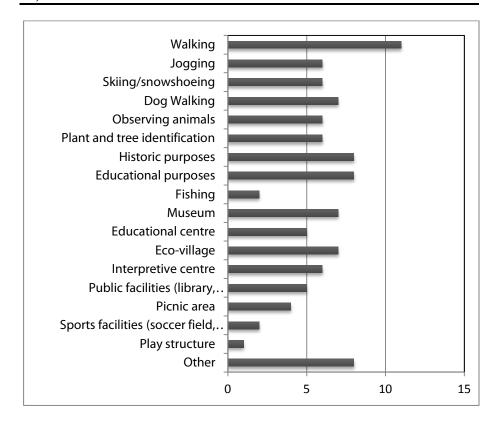


Figure 24: Common land used identified as compatible for the site.

5.1.2 Summary of key Community Comments

Through the survey and the public meetings a number of issues were identified. The key issues have been grouped into themes and described below:

Protection

The majority of comments received indicated that the lands should be conserved and protected. Most people indicated that the remnant foundations should remain and that the existing buildings should be maintained and users found for the vacant ones. The was strong support for passive recreation uses and opportunities for interpretation of the heritage resources of the site to be considered.

Accessibility

Many people commented that public access to the site should be maintained. Ability to access to the site by paths is also important and the existing trail and path connections, including linkages to the hospital complex should be maintained and integrated into any future plans for the site. Vehicle access and parking were also important, although many people

commented that vehicle access should be limited and not necessarily permitted in all parts of the site.

Maintenance

There were many comments that the maintenance of the site needs to be improved. The control of litter and appropriate trash collection and maintenance of the vegetation – especially the control of invasive species – was identified by many.

Sustainability

Concern was expressed about the future of the existing buildings. Participants in the process expressed a desire that the buildings be maintained and users found for the vacant buildings to ensure their continued existence.

Several people commented that the maintenance and future development of the site should have consideration for the sensitivity of the surrounding environmental lands. Several people mentioned control of invasive species and support for the species that frequent the site – especially the chimney swifts – should be part of the plan.

Concern was also expressed that security and safety be considered. Appropriate signs and lighting should be considered as part of the plan. There was considerable support for washrooms on the site. Currently, there are no washroom facilities, which limit the use and activity on the site.

6.0 Heritage Designation

An important component of this study was to evaluate the site to determine if heritage designation of the property would be appropriate. The designation of the property could be applied through the Ontario Heritage Act as a designated Heritage Conservation District or through the Planning Act as a designated Cultural Heritage Landscape. Based on a review of the history, context and heritage attributes of the site, the Western Counties Health and Occupational Centre is worthy of designation as a Cultural Heritage Landscape under the Heritage act and under the Planning Act.

6.1 Ontario Heritage Act Regulation 9/06

The subject property has been evaluated using *Ontario Regulation 9/06* pursuant to the *Ontario Heritage Act* to determine its heritage value. The regulation provides that:

A property may be designated under section 29 of the Act if it meets one or more of the following criteria for determining whether it is of cultural heritage value or interest:

- 1. The property has design value or physical value because it,
 - *i. is a rare, unique, representative or early example of a style, type, expression, material or construction method,*
 - ii. displays a high degree of craftsmanship or artistic merit, or
 - iii. demonstrates a high degree of technical or scientific achievement.
- 2. The property has historical or associative value because it,
 - i. has direct associations with a theme, event, belief, person, activity, organization or institution that is significant to a community,
 - ii. yields, or has the potential to yield, information that contributes to an understanding of a community or culture, or
 - iii. demonstrates or reflects the work or ideas of an architect, artist, builder, designer or theorist who is significant to a community.
- 3. The property has contextual value because it,
 - i. is important in defining, maintaining or supporting the character of an area,

- *ii. is physically, functionally, visually or historically linked to its surroundings, or*
- iii. is a landmark.

The Western Counties Centre has design or physical value for the following reasons:

- The site's ornamental plantings are representative of "therapy through landscape" approach to health care in the early 20th century;
- The site is a rare surviving national example of cottage complex treatment centres intended for veterans care. Several facilities built to a similar prototype were constructed across Canada; few remain.

The Western Counties Centre has historical or associative value for the following reasons:

- The site has direct association with the Department of Veterans' Affairs and the veterans of both the First and Second World Wars;
- The site has direct association with the profession of occupational therapy and the work towards returning veterans to civilian life.

The Western Counties Centre has contextual value for the following reasons:

- The site is physically, functionally and visually linked to the surrounding natural area;
- The site is an integral part of the hospital campus.

6.2 Ontario Heritage Act Regulation 10/06

The subject property has been evaluated using *Ontario Regulation10/06* pursuant to the *Ontario Heritage Act* to determine its heritage value. The regulation provides that:

- (1) The criteria set out in subsection (2) are prescribed for the purpose of clause 34.5 (1) (a) of the Act. O. Reg. 10/06, s. 1(1).
- (2) A property may be designated under section 34.5 of the Act if it meets on or more of the following criteria for determining whether it is of cultural heritage value or interest of provincial significance:
 - 1. The property represents or demonstrates a theme or pattern in Ontario's history.
 - 2. The property yields, or has the potential to yield, information that contributes to an understanding of Ontario's history.
 - 3. The property demonstrates an uncommon, rare or unique aspect of Ontario's cultural heritage.

- 4. The property is of aesthetic, visual or contextual importance to the province.
- 5. The property demonstrates a high degree of excellence or creative, technical or scientific achievement at a provincial level in a given period.
- 6. The property has a strong or special association with the entire province or with a community that is found in more than one part of the province. The association exists for history, social, or cultural reasons or because of traditional use.
- 7. The property has a strong or special association with the life or work of a person, group or organization of importance to the province or with an event of importance to the province.
- 8. The property is located in unorganized territory and the Minister determines that there is a provincial interest in the protection of the property.

The site fulfills the following criteria of the Act:

1. Represents a theme or pattern...

The site is representative of early occupational therapy principles of the healing benefits of landscape.

2. Contributes to an understanding of Ontario's history . . .

The site contributes to the understanding of treatment for returning war veterans and understanding of the early years of occupational therapy.

3. Demonstrates a unique aspect . . .

The naming of the buildings for each of the counties in southwestern Ontario is unique among other Health and Occupational Centres in Canada.

6. Association with entire province . . .

The facility was one of three located in Ontario (one of seven nationally) to treat injured veterans and is directly related to the therapeutic use of landscape.

7. Association with life or work of person, group, or organization...

The property has a strong association with Veterans' Affairs and the treatment of injured soldiers.

6.3 Cultural Heritage Landscape designation

Provincial legislation provides for the conservation of cultural heritage landscapes at several levels, as outlined in the following section.

In support of the provincial interest identified in Subsection 2 (d) of the *Planning Act*, and as provided for in Section 3 of the Act, the Province has refined policy guidance for land use planning and development matters in the *Provincial Policy Statement, 2005* (PPS) which when addressing cultural heritage planning provides for the following:

2.6.1 Significant built heritage resources and significant cultural heritage landscapes shall be conserved...

The PPS provides the following definitions useful for identifying and conserving cultural heritage landscapes:

Cultural heritage landscape: means a defined geographical area of heritage significance which has been modified by human activities and is valued by a community. It involves a grouping(s) of individual heritage features such as structures, spaces, archaeological sites and natural elements, which together form a significant type of heritage form, distinctive from that of its constituent elements or parts. Examples may include, but are not limited to, heritage conservation districts designated under the Ontario Heritage Act; and villages, parks, gardens, battlefields, mainstreets and neighbourhoods, cemeteries, trailways and industrial complexes of cultural heritage value.

Conserved: means the identification, protection, use and/or management of cultural heritage and archaeological resources in such a way that their heritage values, attributes and integrity are retained. This may be addressed through a conservation plan or heritage impact assessment.

The recognition of cultural heritage landscapes within the PPS provides that:

Municipalities and approval authorities can incorporate more detailed cultural heritage landscape conservation objectives and policies reflecting local heritage places, landscapes and districts into Official Plans, land use planning documents, and related development approval procedures or decisions.

Cultural heritage landscapes may also be designated under Part IV or V of the *Ontario Heritage Act*. Part IV designation is characterized by the *Ontario Heritage Toolkit* as follows:

Property designation is not limited to buildings or structures but can include groups of buildings, cemeteries, natural features, cultural landscapes or landscape features, ruins, archaeological and marine archaeological sites, or areas of archaeological potential.

A property of cultural heritage value or interest may be considered for designation if it fulfills the criteria outlined in *Regulation 9/06* of the *Ontario Heritage Act* described in the previous section.

6.4 Heritage Designation Recommendations

As summarized in the preceding sections, the Western Counties Health and Occupational Centre fulfills a number of criteria under both municipal and provincial legislation that warrants its conservation as a cultural heritage landscape. The distinctive area has design and physical value, historical and associative value and contextual value as outlined in *Ontario Regulation 9/06* of the *Ontario Heritage Act*. Furthermore, the property fulfills a number of criteria outlined in *Regulation 10/06* of the *Ontario Heritage Act* that recognizes its value as a provincially significant site. The site is also one of the few surviving examples of a Federal program to assist returning war veterans and would also warrant consideration as a National Historic site.

It is recommended that the structures, ruins, circulation routes and landscape features of the former Western Counties Health and Occupational Centre be designated as a Cultural Heritage Landscape in the City's Official Plan. While designation as a Cultural Heritage Landscape in the Official Plan provides the same benefits as a heritage designation under the *Ontario Heritage Act*, there are some important differences.

The Cultural Heritage Landscape designation in the Official Plan would be applied as a special policy area in the Official Plan and would be limited to the Western Counties site – including the portion on the City's property and the portion on the London Health Sciences Centre's property. The policies of the

special policy area would provide direction on how change, development and maintenance of the site would occur. The policies could also require a Heritage Impact Statement for any proposed development adjacent to the site.

Heritage designation under the *Ontario Heritage Act* would provide similar benefits and would apply to the entire property. Notwithstanding that the designating bylaw would identify the heritage features subject to the bylaw; it would apply to the City's entire property (which includes the ESA) and the LHSC entire property (which includes the hospital facilities). Heritage designation under the Heritage Act does provide stronger controls on demolition than does designation under the Official Plan. If the City was concerned that there was potential that the London Health Sciences Centre would demolish the remaining buildings on the hospital's lands it could apply a heritage designation now or at some point in the future.

It is recommended that the property be added to the City of London's Inventory of Heritage Resources. Inclusion on this municipal register would allow for 60 day protection of the site should a demolition application be submitted for surviving structures. This would allow the municipality to pursue designation for further protection.

7.0 Cultural Heritage Plan

The Cultural Heritage Plan for the Western Counties Health and Occupational Centre grounds focuses on conserving and maintaining the cultural heritage features of the site including the remaining structures, the remnants of the former structures, and the natural and designed landscape features including the ornamental plantings and circulation patterns.

Through the research and community consultation phases of the planning process, three conceptual cultural heritage plans were developed and presented to City staff, the London Advisory Committee on Heritage (LACH), and the community for review and discussion (see Appendix A). The three concept plans presented three levels of infrastructure and investment in the site ranging from a minimal infrastructure option (Option 1) to a moderate infrastructure option (Option 2) to a maximum infrastructure option (Option 3).

Based on the analysis of the research and the input received during the community consultation, the recommended Cultural Heritage Plan is based on Option 2: Moderate Infrastructure with some elements of Option 3 incorporated. The Cultural Heritage Plan is recommended to be implemented in phases. The recommended Cultural Heritage Plan is shown in Appendix A.

The Cultural Heritage Plan also recognizes that the implementation of the plan is based on continued partnership and cooperation between the City of London and the London Health Sciences Centre. While the successful implementation of the plan will require coordination between the two organizations, the recommendations and implementation strategies are designed so that the City and London Health Sciences Centre can implement the portions of the plan on their lands independently as priorities and resources for each organization warrant.

7.1 Interpretive themes

The Cultural Heritage Plan is based on four interpretive themes that are representative of the history and cultural heritage attributes of the site. The four themes are:

- Natural history of the site and the surrounding lands
- Cultural landscape associated with aboriginal use of the lands, early European settlement and agriculture and the cultural landscape associated with the Veterans' facility.

- Veterans' story including London's contribution to World War Two and the rehabilitation of returning soldiers.
- Occupational Therapy profession and its history in relation to therapeutic use of landscape and the role of women in pioneering the field of occupational therapy.

7.2 Treatment of heritage resources

The remaining elements of the built heritage features on the site are the four existing buildings on the London Health Sciences Centre portion of the lands and the four "ruins" (foundations and chimneys) of the four demolished buildings on the City owned portion of the lands.

The plan recommends that the ruins be conserved. The existing foundations should be capped to prevent degradation due to weather and the chimneys should be maintained to ensure they are stable. The land within and in close proximity the foundations should be maintained by mowing and appropriate landscape practices.

The existing buildings should be conserved and maintained. Ideally, the existing uses will continue and new uses could be found for the vacant buildings.

7.3 Circulation and accessibility

The recommended plan identifies a circulation pattern that follows the historical road patterns of the veterans' facility. Vehicle access will be limited to the northern portion of the site. Vehicle access to the existing buildings will be maintained but vehicle access to the southern portion of the site will be terminated at the Catalpa Meadow where parking on the side of the road is proposed. An improved parking area is also recommended near where the existing softball diamonds are located.

Pedestrian access will be maintained throughout the site. A system of paths are shown on the recommended plan. The path network provides pedestrian connections throughout the site and connects to the existing path leading to the hospital and to Wellington Street. Paths should be maintained to appropriate City standards and asphalt surface is recommended to provide for maximum accessibility.

The existing trail heads and connections to the existing trails in the adjacent ESA should be maintained and appropriate signage should be installed. The plan also provides for a potential future trail leading from the Catalpa Meadow and connecting to the existing trail network in the ESA.

7.4 Landscape and vegetation

The ornamental landscape design is one of the defining features and cultural heritage attributes of the site. The Cultural Heritage Plan recommends the conservation of the landscape features and the maintenance of the ornamental plantings that include both native and non-native species.

The layout of the site and the orientation of the buildings were designed to take advantage of the views of the ornamental landscape and surrounding natural setting. The views through the site and to Walkers Pond should be improved by the removal of invasive species such as European Buckthorn and Manitoba Maple. The meadows should also be maintained and mowing of the meadows once per year is recommended to prevent the establishment of woody plant materials.

Within the site, the open grass areas should be maintained by mowing and appropriate landscape practices. The ornamental specimen trees should be maintained and replaced if possible once they have completed their lifespan.

7.5 New structures and facilities

New washroom facilities are recommended. Currently, there are no washroom facilities and visitors to the site frequently request the use of the washrooms at the Secrets of Radar Museum. Water and sanitary sewer services been removed from the City of London owned portion of the site. As a first phase, portable washrooms could be installed and permanent facilities could be constructed in later phases. Provision of water and sewer services will have to be determined – either through an agreement with London Health Sciences to extend water services from their property or consideration of consideration of an on-site septic system. Alternatively, if a user was found for the Wellington Pavilion, there may be opportunity to provide public washroom facilities as part of the re-use of the building.

A picnic pavilion is recommended for the Catalpa Meadow. It should be large enough to accommodate small gatherings or school groups. A small parking area along the road at the end of the vehicle driveway is recommended to provide nearby parking. All of the new buildings and structures should be designed to be complementary to the architectural style of the existing buildings.

Users of the site include visitors, staff and patients of the hospital facilities at the London Health Sciences Centre. The surface treatment and grades of paths, the location and number of benches, and other site features should be designed and placed with consideration that some users will have limited mobility. Trash receptacles should be placed at appropriate locations throughout the site.

7.6 Signs and wayfinding

Identification and wayfinding signs should be located at the entrances to the site. Key locations would be at the vehicle entrance to the site from the north and at the trail heads of the trails leading into the ESA.

Interpretive signs are recommended to be located at each of the four ruins. The signs at each location would tell the story of the site associated with one of the four interpretive themes (see section 5.1). At the ruins of the former Lambton Pavilion, a bridge that crosses the remnant foundation is recommended. The bridge should be constructed so that it is accessible to wheelchairs and other mobility devices and it would provide visitors the opportunity to view and "read" the foundations to understand how the building would have functioned when it was a veterans' facility.

Regulatory signs that provide guidance on areas of no parking, hours of operation and use of the site should be installed where needed.

8.0 Implementation

8.1 Designation as Cultural Heritage Landscape

It is recommended that the City designate the Western Counties Health and Occupational Centre grounds as a Cultural Heritage Landscape. As discussed on section 4.0, the lands are worthy of heritage designation under the Heritage Act and under the Planning Act as a Cultural Heritage Landscape.

It is recommended that the property be added to the City of London Inventory of Heritage Resources as an interim conservation measure.

8.2 Phasing

Implementation of the recommended Cultural Heritage Landscape Plan could occur in phases. This would permit the City and the London Health Sciences Centre to initiate some aspects of the Plan immediately and implement other phases once resources have been allocated.

Three implementation phases are recommended. The first phase would focus on stabilizing and maintaining the existing features and landscape. Some minimal site improvements, such as waste receptacles and the installation of portable toilets are recommended in this phase. Installation of initial interpretive signs is recommended for this phase with the balance implemented in Phase two. Phase one would also include the heritage designation of the lands.

Phase two would focus on improving the pedestrian environment within the site, including new paths and upgrading of existing paths, installation of wayfinding and regulatory signs, and installation of benches. Improvements to parking areas are also part of this phase.

Phase three would focus on the development of permanent facilities such as permanent washrooms and the picnic pavilion. The capping of the ruins and the interpretive bridge are also a part of this phase. Detailed phasing plan is described below.

Phase 1: Designation and Stabilization of Heritage Features

- Heritage Designation
 - o Designate the lands as a Cultural Heritage Landscape in the City of London Official Plan
- Stabilization and Maintenance
 - o Remove invasive vegetation along the boundary of the site
 - o Establish maintenance procedures for the City owned portion of the lands, including regular mowing of grassed areas and annual cutting of the meadows
- Improve Site Amenities
 - o Install portable washrooms and establish procedures for maintenance
 - o Install trash receptacles and establish procedure for regular removal of trash
 - o Install traffic bollards and a gate at appropriate places to limit vehicle access to the southern portion of the site
 - o Install four interpretive signs at the ruins and one site map
- Coordination and Communication
 - o The City of London continue to communicate and coordinate plans and actions with the London Health Sciences Centre
 - o The City assist the London Health Sciences Centre in finding suitable uses for the existing vacant buildings.

Phase 2: Improve Circulation and Visitor Amenities

- Improve paths and pedestrian facilities
 - o Improve and reconstruct existing paths
 - o Construct new path to Walker's Pond and new dock or lookout
 - o Install benches and bike racks in appropriate locations
- Improve parking facilities
 - o Construct new parking spaces with backup space on the City owned lands near the Catalpa Meadow
 - o Improve the parking lot located near the ball diamonds on the London Health Sciences Centre lands

- Landscape Maintenance
 - o Plant new trees and shrubs to renew designed landscape and enhance existing park
- Communication and signs
 - o Install remaining interpretive signs
 - o Install signs at trailheads
 - o Install "No Parking" and other regulatory signs where needed and appropriate

Phase 3: Install Permanent Facilities

- Interpretive
 - o Install the bridge at the Lambton ruin
 - o Capping of ruins
- Visitor Amenities
 - o Construct Picnic Pavilion at Catalpa Meadow
 - o Construct permanent washroom facilities

8.3 Capital program

The phased approach to implementation of the recommended Cultural Heritage Plan allows the City, and London Health Sciences Centre, to plan for the necessary resources. The phasing is designed so that the more intensive development is in the second and third phases. The first phase includes initiatives that would improve the site and provide some interpretation that could be undertaken with a minimal amount of capital investment. A number of the initiatives could be undertaken with existing resources or in some cases, such as removal of invasive vegetation, could be undertaken by volunteers. There is also the possibility of grants or donations that could offset the cost of implementation.

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Appendix A: Cultural Heritage Landscape Plan



Western Counties Health & Occupational Centre Cultural Heritage Plan

Site Development - CONCEPT 1





Western Counties Health & Occupational Centre Cultural Heritage Plan

Site Development - CONCEPT 2





Western Counties Health & Occupational Centre Cultural Heritage Plan

Site Development - CONCEPT 3

