Soldiers' Block, Hanmer Springs

Conservation Plan
Prepared for the Hurunui District Council

31 July 2022

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Document Quality Assurance

Bibliographic reference for citation: Ian Bowman. *Soldiers' Block, Hanmer Springs: Conservation Plan*. Report prepared for the Hurunui District Council.		
Prepared by:	Ian Bowman Architect & Conservator	
Status: DRAFT	Revision / version: 1	Issue date: 31 July 2022

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Template revision: 20130822 0000
File ref: /Users/ianalexanderbowman/Projects - organisations/HurunuiDistrictCouncil/Soldiers'Block/CP 2022/docx

Cover: Queen Mary Hospital, Hanmer Springs, N.Z., ca 1925 pan-1746-F

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1.0 Introduction

1.1 Commission

The Soldiers' Block Conservation Plan (the plan) was commissioned by the Hurunui District Council (HDC) in an agreement with Ian Bowman dated 7 June 2022.

The plan updates and augments an earlier plan prepared in 2010. It provides a comprehensive history of the buildings, spaces and elements that comprise the buildings is known and referred to as the Soldiers' Block, Hanmer. It also identifies their associated heritage values and significance and suggests a range of relevant policies and actions to inform its effective, ongoing conservation and use.

1.1.1 Purpose of the Plan

A conservation plan is a guide to the long-term care of a heritage place by owners, managers and users. In particular, it acts to ensure that the heritage values associated with these places are maintained or, where warranted, enhanced. Within such plans the recommended conservation policies and actions relate to the established range and extent of heritage values identified, and are determined through an assessment of the degree of potential threat to these values. Identification of suitable policies and actions is also informed by the *ICOMOS New Zealand Charter for the Conservation of Places of Heritage Value* (the Charter). The charter outlines appropriate principles to assist owners, managers and heritage professionals to conserve and manage heritage places throughout New Zealand.[1]

Given the importance of the plan to ensuring the effective, on-going conservation of these places, it should, at a minimum, be:

- Consulted prior to planning and/or executing any building or grounds related works
- Employed as a key resource to guide and/or inform the commissioning of any such works

1.1.2 How it was prepared

The conservation plan was prepared using the methodology described in J.S. Kerr's *Conservation Plan: A Guide to the Preparation of Conservation Plans for Places of European Cultural Significance* (Australia ICOMOS, 2013), but adapted to meet New Zealand requirements. Consistent with this guide it contains the following sections:

- History of the place: an outline of the physical and social history and significant people or organisations associated with the building/grounds
- Describing the place: a summary of relevant place related information associated with the building/grounds (e.g. legal description, land area, controlling authorities, zoning), as well as a description of such elements as its architectural/landscape qualities, construction and materials
- Assessing the place: an assessment of the heritage values and degree of significance attributable to the building/grounds based on the criteria within the Heritage New

[1] ICOMOS New Zealand Charter for the Conservation of Places of Cultural Heritage Value, ICOMOS New Zealand, 2010

Zealand Pouhere Taonga (HNZPT) Sustainable Management of Historic Heritage Guidance Information Sheet 2, 2007

- Conservation considerations: an outline of the key legislative/non-legislative requirements and potential threats that could have a bearing on the future management of the building/grounds
- Managing the place: a description of policies and prioritised actions to guide future management and conservation of the building/grounds in a way that respects and retains its assessed heritage value

1.2 Contributors

Ian Bowman (Architect and Conservator) prepared the conservation plan for the Soldiers' Block, Hanmer. The historical sections were researched and written by Robyn Burgess, then of Opus, in 2004.

1.3 Photographic Sources

Unless otherwise stated, the photographs included in this plan are those of the contributors.

1.4 Date of Inspections

An inspection of the Soldiers' Block was undertaken for the purposes of preparing the plan on 8 July 2022.

1.5 Scope and Limitations

a. Where relevant, text from the previous 2010 Conservation Plan has been replicated in this plan.

b. This plan is not a structural or fire safety survey and does not address specific issues of Building Act compliance. It is also not an archaeological assessment or a Cultural Assessment – Maori, as these are outside the scope of the brief and the expertise of the authors. The commission did not include measured drawings or a condition survey.

1.6 Acknowledgements

In preparing the plan the assistance of the following is acknowledged:

- Judith Batchelor, HDC

2.0 Understanding the Place

2.1 Māori history of the site

No prehistoric sites have been recorded in the area of Hanmer Springs at the present time.

Ngai Tahu people would have known of the location of the Springs. The area of the Hanmer plain was known as *Mania Rauhea*, the 'plain of the shining tussock'[2], but no other traditions are currently known.

The Waiau River was a major route from Canterbury to the West Coast and Marlborough for Ngai Tahu, and the river does pass along the southern boundary of the Hanmer Plain. It is unclear if earlier Ngati Mamoe or Waitaha used the pass. Any occupation that occurred along the Waiau was transitory in nature, in the form of *nohoanga* or campsites. Any excursion to the Hanmer Pools would be indicated by the presence of *nohoanga* remains such as earth ovens and food middens.

2.2 Early European Occupation

Evidently the first European to officially record the springs was William Jones, reporting to the *Lyttelton Times* in April 1859, "a remarkable fog….some holes which were filled with water of a temperature varying from milk-warm to almost boiling".[3] The *Cyclopedia of New Zealand* covering South Canterbury (1903) credits Messrs Edward James Lee and Edward Jollie for 'discovering' the Hanmer hot springs, but no date for this is provided.[4] In 1860, the Nelson Provincial Government proclaimed a 1072-hectare reserve around the springs.[5] Visitors up to the 1870s would camp in tents beside the pool or take advantage of accommodation at the Jollies Pass Hotel, built in 1862 some 4 km away.

In 1878, John Fry, owner of the Jollies Pass Hotel, constructed a small two-room Changing Shed next to the main pool in order to take advantage of the popularity of the springs. [6]

Improved transportation allowed more visitors to reach the pools, and in 1883, the Lands Department began work on improving them. The main pool was excavated and fenced.

In 1884, a bathhouse, complete with four baths, was built around the main pool.[7] This bathhouse has now gone, but was in the location just to the north of where the north-eastern wing of the Fountain House was situated[8].

A second bathhouse was added in 1888, with eight baths inside. The foundations of this bathhouse are incorporated into the eastern end of the current Gymnasium building. The second bathhouse was further added to in 1893 with two more baths and a waiting room. Gas was collected from the springs to heat the waiting room.[9] A men's swimming pool was added nearby, originally as a cold fresh-water pool but it was soon converted to a hot mineral bath.

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[2] Hanmer Springs 1883-1933: 50 Years of Progress, (reproduced 1983): 37.

[3] Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 64.

[4] *Cyclopedia of New Zealand*, Canterbury edition. *Vol. 3, part 4,* Christchurch, 1903.

[5] Ibid.

[6] Hanmer Springs 1883-1933: 50 Years of Progress, (reproduced 1983) p13.

[7] Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 65.

[8] The was demolished when the pools expanded.

[9] Ibid: 65-6.

In 1894, an enclosed women's swimming bath, known as the Marian Pool, was opened near the main pool which had been segregated for men only. This was followed by the construction of a bowling green and tennis court. When a larger pool became available for the men, the main pool was allocated to the women and the Marian pool to girls.[10]

People visiting the baths often lived in tents at the springs, but the construction of a government-owned Sanatorium building and a hotel (called The Lodge)[11] close to the springs in 1897 meant that there was now decent accommodation.[12] In 1907 The Lodge was leased to Duncan Rutherford, and between 1915 and 1916 to the Red Cross as a hospital for returned soldiers.

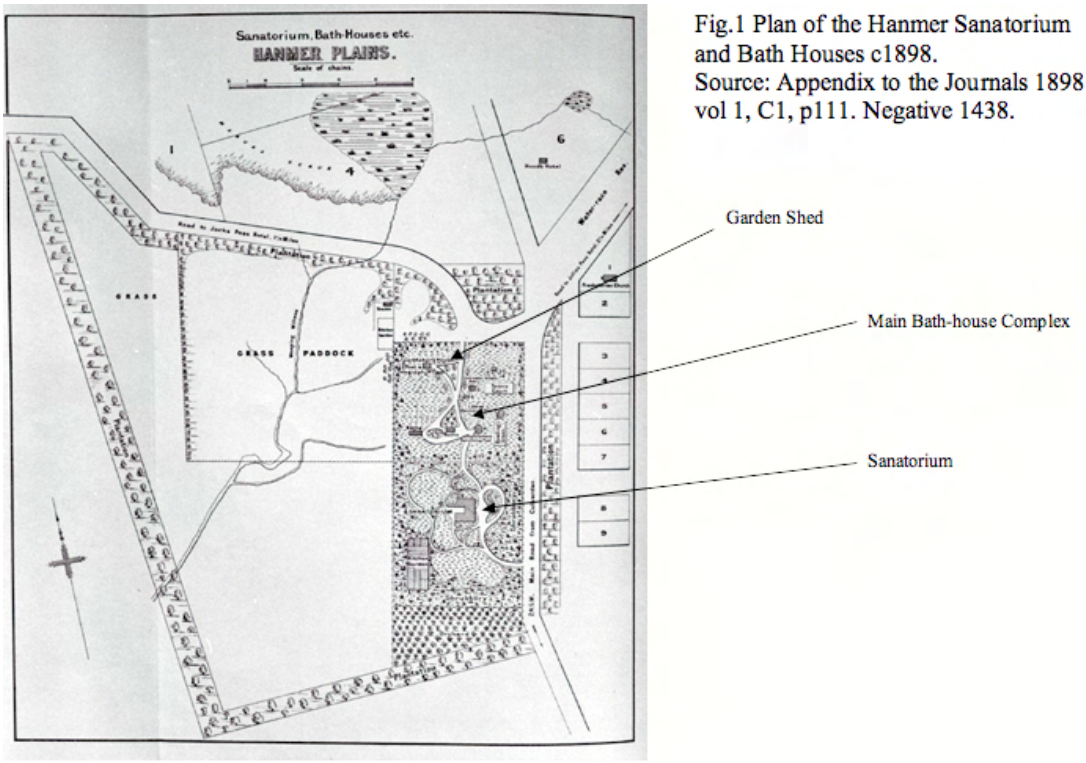

Fig.1 Plan of the Hanmer Sanatorium and Bath Houses c1898.
Source: Appendix to the Journals 1898 vol 1, C1, p111. Negative 1438.

Figure 1 Plan of the Hanmer Sanatorium and Bath Houses c 1898 AJHR 1898 vol 1 Cl, page 111

The Government Sanatorium ('Spa') was opened on the 9th of December 1897. It had a women's drawing room, a smoking room and a general sitting room.[13] Initially the Hanmer Sanatorium was a sanatorium in name only, as it was really just a lodging house where invalids could stay while they were taking the baths.[14] It was intended for people who couldn't walk any distance. First-class accommodation was available for 40 shillings a week, second-class for 20 shillings. Most of the bedrooms were first class, but this proved to be in error, as most of the wealthy visitors to Hanmer chose to stay at The Lodge.[15] Such a large number of 'second class visitors' required the cheaper accommodation that in January 1898 the manager of the Sanatorium was

[10] Ibid: 67-8.

[11] The original Lodge building no longer survives but the Heritage Hotel stands near its place at 1 Conical Hill Road, Hanmer Springs.

[12] Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 67.

[13] Ibid.

[14] Ibid.

[15] Ibid.

instructed to erect tents for them.[16] By around the turn of the century additional second-class accommodation had to be added to the Sanatorium.[17] Architectural drawings for the additions, dated August 1899, were by Public Works Department Architect, John Campbell.[18] It is quite likely that Campbell was also the architect for the original 1897 Sanatorium building. Further alterations were carried out to the Spa/Sanatorium building in 1907, including the erection of a dairy separate from the main building.[19] Such a building is seen in early drawings of the Sanatorium. It is likely that the current small brick structure, which stands alone to the south of the Soldiers' Block, is a remnant from that Sanatorium period.

The gasometer which stands in the Public Grounds was erected in 1898, prior to which date gas had been collected from no. 8 Spring into two 400-gallon tanks and used for lighting purposes.[20]

Figure 2 Sanatorium/Spa in c.1898. Source: Appendix to the Journals 1898, vol 1, C1, p111. Negative 1437, Opus Report

In 1899, a fountain-house was erected in the grounds. This was located just to the west of the current Fountain House block. A third bathhouse was added in 1900, containing 8 baths, a Turkish bath and massage slabs.[21] It was designed in 1899 by the Public Works Engineer's Department (William H Hales was the engineer in chief).[22] The third bathhouse was located to the south of the current Gymnasium block. A croquet lawn was also laid down. In 1902, a massage department was added[23], probably within one of the existing bathhouses. A garden with a tool shed appears in early plans, to the north of the current pools complex, and this may still survive.[24]

A tea house opened in 1904-5. This building still survives as the current tea kiosk at the baths, although it is not in its original location, which was closer to where the second bathhouse was (i.e. north of where the current Gymnasium building is.

In 1902 a Morgue was built near the centre of the current hospital site, near the location of the current Maintenance Engineer's office.[25] The architect for the Morgue was John Campbell, the

[16] Ibid.

[17] Ibid.

[18] Archives New Zealand (Wellington Branch), PWD Plan 18533 "Additions to Sanatorium, Hanmer".

[19] Archives New Zealand (Wellington Branch), Letter Jan 8 1907 "the dairy should be an isolated building and not connected by means of a corridor to the main building".

[20] Hanmer Springs 1883-1933: 50 Years of Progress, (reproduced 1983) p15.

[21] Archives New Zealand (Wellington branch) PWD Plans 18533 5-12.

[22] Ibid.

[23] Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 69.

[24] Further investigation is required to ascertain if the building sandwiched between two tall trees in the former garden of the hospital, adjacent to the current thermal pools complex, is in fact the original gardener's tool shed built in the early 20th century. This building is in the fenced garden area, not inspected by the author.

[25] Archives New Zealand (Wellington branch): PWD Plan 19834.

Public Works Department architect who was involved in the Sanatorium building.[26] It was shifted to the southern end of the site some time after 1950.[27] The style of the building, with tongue and groove timbers and gables with half-trusses and finials is reminiscent of features shown in images of the 19th century Sanatorium building. The morgue building has been used to hold the body of anyone who died at the hospital or in the Hanmer community (including motor vehicle accident fatalities) until such time as an undertaker could take the body away. It continued to have that function until at least 1986.[28]

At the turn of the 20th century, Hanmer was considered the third most important spa in New Zealand (after Rotorua and Te Aroha).[29] In 1902 the Tourist Department changed the name from Sanatorium to Spa in order to attract usage of the springs for relaxation purposes and not solely as accommodation for invalids. However, the Department later rethought this policy and reverted to the name 'Sanatorium' basing the institution on a 'proper sanatorium' and it reopened (in the same building) in December 1908 with a medical staff.

In 1909 the first resident medical officer, Dr. Chisson, was appointed, along with a matron, Miss E Rendell.[30] The Sanatorium is described as catering for 18 patients.[31] It appears that the treatment in these early days consisted of massage, baths or bathing in the open pool, drinking or inhaling the waters and a specially regulated programme of walks to take the 'invigorating air'.

The Sanatorium building was destroyed by fire the day after World War I began, on 2 August 1914. (After the fire, visitors/patients to the Sanatorium stayed at a house[32] in the Hanmer village until 1921, when it was merged into Queen Mary Hospital.)[33] Immediately following the destruction of the Sanatorium building, the general manager at Hanmer, B M Wilson, wrote to the government Balneologist, Dr. Wohlmann in Rotorua, requesting that he provide a rough sketch as to a suitable new Sanatorium.[34] A sketch plan dated 11 May 1915 exists for a Sanatorium which has a cruciform plan, with a central garden area, separate men's and women's wards, dining, kitchen, servants quarters and medical area.[35] Such a plan is reminiscent of the European spas. However, the reality of the effects of the war, with large numbers of soldiers returning in need of treatment, meant a rethink of what was required at Hanmer and Wohlmann's designs never reached fruition.

[26] Archives New Zealand (Wellington branch): PWD Plans 18533.

[27] Plan of the site with the date 2.3.50. Held in the office of the Maintenance Engineer.

[28] Norman Beauchamp (ex plumber at Queen Mary Hospital 1956-1986), pers. comm. 15/6/04). The morgue was relocated from the Southern Block to besides the Smithy's building in 2021.

[29] Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 69.

[30] Petre, M E. 'Queen Mary Hospital, Hanmer Springs: How it Started and What it is', Student Nurses' Supplement, The New Zealand Nursing Journal, February 1959: 31.

[31] Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 70.

[32] This house was Brae View. Hanmer Springs 1883-1933: 50 Years of Progress (reproduced 1983) p17.

[33] Petre, M E. 'Queen Mary Hospital, Hanmer Springs: How it Started and What it is', Student Nurses' Supplement, The New Zealand Nursing Journal, February 1959: 31.

[34] Archives New Zealand (Wellington branch), File To 1 37/16: Memo 5 August 1914 63/11 to Dr Wohlmann.

[35] Archives New Zealand (Wellington branch), File To 1 37/16, attached with letter from J Duncan, Resident Medical Officers, Hanmer to General Manager, Wellington.

2.3 World War I

Figure 3 Digital photograph of an aerial photograph of Queen Mary Hospital Site displayed on the wall of the Maintenance Engineer's Office, dated 1966, RNZAF., from Opus Report

Prior to the war, the Hanmer Springs complex was a major tourist drawcard as a health resort. Tourism declined dramatically with the war. Business in the town suffered, as it relied on the visitors for support and trade. One of Hanmer's leading residents of the time said in 1916, "Things have gone badly ever since 'The Lodge' was closed to the public. … Shortly after the war broke out Mr Duncan Rutherford decided to transform 'The Lodge' from Hanmer's leading accommodation house into a convalescent home for soldiers, and the result was that the chief house being thus closed to them, the spending class of tourists have since kept away. The consequent loss in business has been very considerable, but still we have gladly put up with this, as our loss has been the soldiers' gain …".[36] At the time of making these statements, 'The Lodge' was being renovated[37] and returned to accommodation for tourists, as a new purpose-built hospital at Hanmer was erected.[38]

2.4 Recent History

In 1943 the hospital became a treatment centre for those with functional nervous diseases while also treating the sick from World War 2. Between the years of 1945 and 1972 major changes occurred in the treatment of psychiatric patients. In 1960 the Department of Health handed control of the hospital to the Division of Mental Hygiene (Mental Health) as only psychiatric patients (predominantly those with alcohol problems) were being treated at Queen Mary's.[39] In 1949 the Nurses and Midwives Board approved of two six-month courses a year being held at Queen Mary Hospital so that general nurses could gain experience in psychological nursing. This course continued until at least the late 1950s.[40] Treatment of functional nervous diseases ceased in 1965. In 1972 the North Canterbury Hospital Board took control of the hospital and it was granted a fee simple from the Crown in 1981. It became one of the foremost institutions

[36] "Hanmer in War Time", The Press, 18 July 1916: 8.

[37] The Lodge is said to have been completely reconstructed in 1931-2. Rockel, Ian. Taking the Waters: Early Spas in New Zealand. 1986: 72.

[38] "Hanmer in War Time", The Press, 18 July 1916: 8.

[39] Archives New Zealand, Christchurch office. Notes photocopied headed CAWS (dated 25 May 2004) providing a summary of the administration history of Queen Mary Hospital.

[40] Petre, M E. 'Queen Mary Hospital, Hanmer Springs: How it Started and What it is', Student Nurses' Supplement, The New Zealand Nursing Journal, February 1959: 31.

for the treatment of alcoholism and drug dependencies in the Southern Hemisphere.[41] In 1998 the Queen Mary Hospital was leased by Queen Mary Hospital Limited for the Hanmer Institute (latterly Hanmer Clinics) which was a privately run drug rehabilitation clinic, partly funded by the Ministry of Health. The Clinic closed due to financial difficulties in November 2003.

2.5 Hospital for Sick and Wounded Soldiers, (Soldiers' Hospital)

What has been come to be known as the Soldiers' Block was originally described as the Convalescent Home for sick soldiers. It was opened on 3 June 1916 by the Hon G W Russell. The whole of the work, from the clearing of the ground to the installation of electric light, was carried out by the Public Works Department.[42] The building was described at the time of its opening as follows:

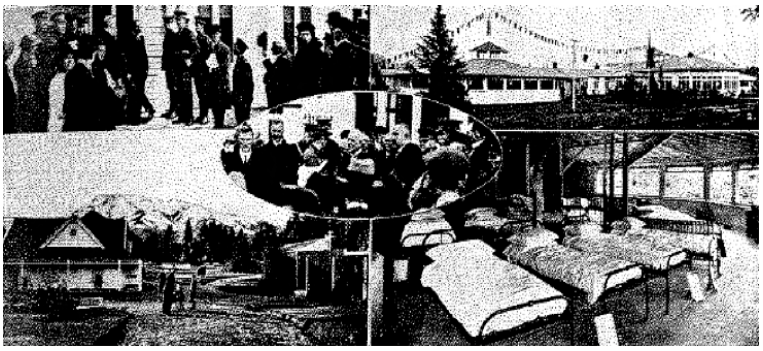

Figure 4 Copied from Silverson, page 121, Soldiers' Block opening top left, right and centre. Arrangement of beds in Octagonal wards (note no glazing in window space), Opus Report

> The building is 303 feet in length, and faces the north. It contains two octagons, dining-hall 64ft x 38ft, capable of seating 250 men, recreation hall room, non-commissioned officers' rooms, commandant's quarters, visitors' bedrooms, doctor's consulting and waiting rooms, dispensary, storerooms, kitchen, pantry, bathrooms, lavatories, and all the necessary sanitary arrangements. The interior is painted a dull white, and is splendidly lighted by electricity. The large dining-hall, which will also be used as a living-room, contains a piano and billiard table, and is heated by two large open fireplaces. The octagons will contain 100 beds each, and, if necessary, provision can be made for 400. They are heated with steam radiators and are very pleasant, cheerful rooms. A splendid view of the mountains and sanatorium grounds can be had from them. The sanitary arrangements are perfect. The recreation room is fitted with every comfort, and will contain a library. Books of every kind will be very welcome, as there is no library in the district for the men to get reading matter from. The commandant's quarters, N.C.O's rooms, etc., are all comfortably furnished. The large storerooms, capable of holding stores for a small army, are equipped with monster bins for flour, sugar, rice, sago, etc, and shelves to hold all other articles. The dispensary which is attached to the doctor's consulting and waiting-rooms, is well stocked and is in charge of a qualified chemist.
>
> In the kitchen, probably the most important place in the building, is a huge "Salamander Cooker," capable of cooking meals for 400 men. It has six large ovens, and innumerable openings on the top to hold various-sized pots and pans. Every convenience has been installed that will help to lighten the labour of the kitchen staff. Commodious rooms are attached for the chief cook and second cook. A large furnace and boiler outside the main building will generate enough steam to properly heat all the

[41] Archives New Zealand, Christchurch office. Notes photocopied headed CAWS (dated 25 May 2004) providing a summary of the administration history of Queen Mary Hospital.

[42] "For Sick Soldiers, Hanmer Convalescent Home to be opened today", The Press 3 June 1916.

> radiators in the men's sleeping apartments. A very comfortable house for the doctor is in course of construction, and the laundry is practically completed.
>
> A staff consisting of 26 officers and orderlies has been hard at work for the past week getting the building cleaned up and furnished, and everything looks promising for a very successful opening.[43]

The Lyttelton Times also reported the opening of the convalescent home in June 1916. It noted:

> The Queen Mary Hospital for convalescent soldiers at Hanmer Springs was opened on Saturday with due ceremonial at a very distinguished gathering of the civil and military. The Hospital has been built on the grounds of the Spa. It is a light airy structure, ideally situated from a convalescent's point of view, close to the health-giving springs and baths, and is a fine example, as Surgeon-General Henderson said during the day, of what such a hospital should be. Up till Saturday the returned soldiers at Hanmer had been quartered at The Lodge, which had been given by Mr Duncan Rutherford for the purpose, but from now onward the men will be in their new quarters, where strict military discipline will be observed….
>
> The new hospital building … is a most comfortable and airy building in which recovery should be rapid. It is painted in light shades inside and out, and the effect is heightened by the very extensive use of windows and skylights, which will make the hospital a warm, sunny retreat on many a winter day. Electric light has been fitted throughout, under the direction of Mr L Birks, of the Public Works Department, and in every other respect the building is up-to-date.
>
> The hospital is practically 400 feet long with a northern frontage. The building consists of two octagons of wards, at the wings, with corridors connecting up with the huge central dining hall, which is 64ft by 38ft, with a seating capacity for 250 men. It will also be used as a living room, and will contain a piano and billiard table. There is an attractive recreation room in which a library will be housed ….
>
> The octagons, which will contain a hundred beds each for a start, are heated with steam radiators. They have a pleasant outlook, and are cheerful quarters altogether. There are other rooms for the commandant, non-commissioned officers and other, in addition to large storerooms. Last but not least there are the doctor's waiting and consulting rooms, and a dispensary, which will be in charge of a qualified chemist.
>
> The kitchen houses a 'Salamander cooker', with a capacity to meet the wants of 400 men. There are six large ovens and various up-to-date labour saving devices, and there are also rooms for the cooks. A doctor's house is also in the course of erection.
>
> The work of the institution will be carried out by orderlies, and the gentler sex will find no place in the building unless it be as visitors, or possibly in cases where a trained nurse may be necessary. This is in accord with the military regulations, and the new hospital will be essentially military.[44]

[43] "For Sick Soldiers, Hanmer Convalescent Home to be opened today", The Press 3 June 1916.

[44] "Queen Mary Home for Convalescent Soldiers, Opening Ceremony at Hanmer", Lyttelton Times, 5 June 1916: 5.

The opening was performed by Minister of Public Health, the Hon G W Russell, who stated that the new building would last for many years, and would stand as an expression of affection and sympathy from the people of New Zealand towards the soldiers.[45] It was envisaged that when the soldiers had ceased to use it, it would be linked up with the public hospital system as a convalescent home.[46]

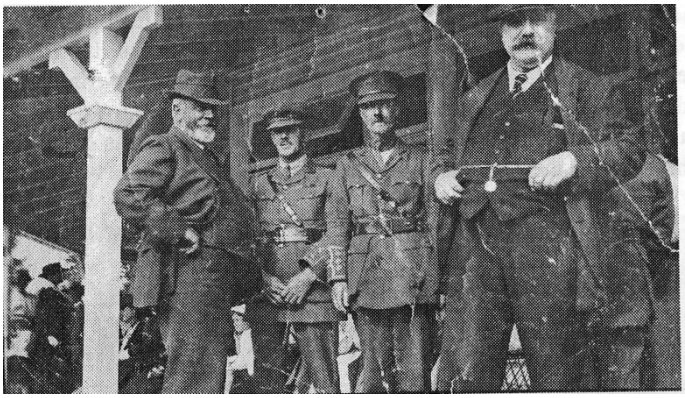

Figure 5 Opening of the verandah, Duncan Rutherford (pictured on left) paid for the verandah added to the front of the building in 1917. John Dodds, the local storekeeper stands to the right, Crawford, The Queen Mary Hospital, page 2

The Public Works officials who were responsible for the new building included Messrs Farr and Birks.[47] It is likely that the government architect, John Campbell, who had been involved in the designs of the Sanatorium building, the Morgue and most an almost identical soldiers military hospital built in a year earlier in Rotorua [see below], was also involved in the design of the Soldiers' Block.

The name given to the new hospital was the "Queen Mary Hospital for Sick and Wounded Soldiers".[48] The octagons had been named Kitchener Ward and The Joffre Ward, while the dining hall had been named after Nurse Edith Cavell, a heroine of World War I.

The building was described as being low, with an abundance of glass, and the roof has three massive domes.[49] It was built 'on the large side' in anticipation of the rush at the end of the war.[50] The Government was said to have appreciated the value of the 'open-air system adopted at Cambridge[51], England' and every hospital was to have a maximum of fresh air.[52] The plan appears to follow the same design as a soldiers hospital built in Rotorua in 1915, with two octagon wings and a central dining hall. The Rotorua [building] did not have the weatherboard flaring out at the base as the Hanmer one does.

Joffre and Kitchener wards were counterparts. The Joffre ward had about 100 beds and in the centre of the ward was a small circular room for use as a dispensary (and where the sergeant slept).[53] The wards had some heaters, but if the wards were designed to make the most of heat from the sun also.[54] Long (white) corridors lead from one ward to another, and off the corridors are doors which led to rooms for the staff. There was also a writing room with a long table and

[45] Ibid.

[46] Ibid.

[47] The King George V Hospital at Rotorua was designed by Hoggard, Prouse and Gummer.

[48] "Queen Mary Home for Convalescent Soldiers, Opening Ceremony at Hanmer", Lyttelton Times, 5 July 1916: 5.

[49] "Queen Mary Hospital, Easter at Hanmer", The Press, 14 April 1917: 7.

[50] The Press, 5 June 1916: 2.

[51] A first floor loggia at Addenbrooke's Hospital, Cambridge, was adapted for open-air treatment in 1900 (Richardson, Harriet (ed). English Hospitals 1660-1948: A Survey of Their Architecture and Design. Royal Commission on the Historical Monuments of England. 1998: 146).

[52] The Press, 5 June 1916: 2.

[53] "Queen Mary Hospital, Easter at Hanmer", The Press, 14 April 1917: 7.

[54] Ibid.

comfortable chairs, for patients to write letters home.[55] The commandant's quarters and doctor's room (where each patient was examined weekly)[56] were in this building. There was a great hall (named after Nurse Cavell) which functioned as the billiard room and dining hall combined.[57] The predominantly white kitchen had an enormous stove placed centrally, with two ovens on each side, and fuelled by coal.[58] There was also a pantry and butcher's shop.

By Easter 1917 the building housed nearly 100 men.[59] At that time a spacious verandah was added, "built in something like ten days by a gang of carpenters from Christchurch", as it was brought from Christchurch partly pre-fabricated.[60] Chairs were put on the verandah specifically for the comfort of the soldiers. Everything was said to be painted white – the building, the ironwork of the bedsteads, and the coverlets of the beds.[61] In early 1918 the hospital had 130 men. [62]

Figure 6 Christmas dinner in the recreation hall 1917 Crawford, The Queen Mary Hospital, page 2

From June 1919 until December 1921 1,134 soldiers and ex-soldiers were treated specifically for functional nervous diseases at Hanmer. The treatment was for the soldiers to live 'by the clock' during the day, with routine, discipline, activity and rest, sport, gardening, physiotherapy and massage for relaxation, as well as occupational and vocational training.[63] There were classes in basketwork and carpentry, and training in agriculture, motor engineering, maths and economics.[64]

After World War I, civilian cases were admitted in limited numbers. Initially the patients were just adult males. Authority was transferred to the Health Department, although some patients were still under the regulations of the Department of Defence.[65] The Health Department officially took over the hospital on 19 January 1922 and the hospital was now named Queen Mary Hospital, a centre for cases of functional nervous diseases and neurosthenia.[66]

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[55] Ibid.

[56] Ibid.

[57] Ibid.

[58] Ibid.

[59] Ibid.

[60] Ibid.

[61] Ibid.

[62] "Queen Mary Hospital, Inspection by Minister, Proposed Improvements", The Press, 16 February 1918: 2.

[63] Clarke, Russell. "Not Mad, but very ill": The treatment of New Zealand's shellshocked soldiers 1914 to 1939. University Thesis, 1991. p91. .

[64] Ibid.

[65] Clarke, Russell. "Not Mad, but very ill": The treatment of New Zealand's shellshocked soldiers 1914 to 1939. University Thesis, 1991.

[66] Ibid.

After the military hospital and its staff was absorbed into the Public Health Service, Queen Mary's Hospital became the first civil institution established in New Zealand for the treatment of functional nervous diseases.[67] There was an increase in admissions during the years of the Depression, in the late 1920s and early 1930s.[68]

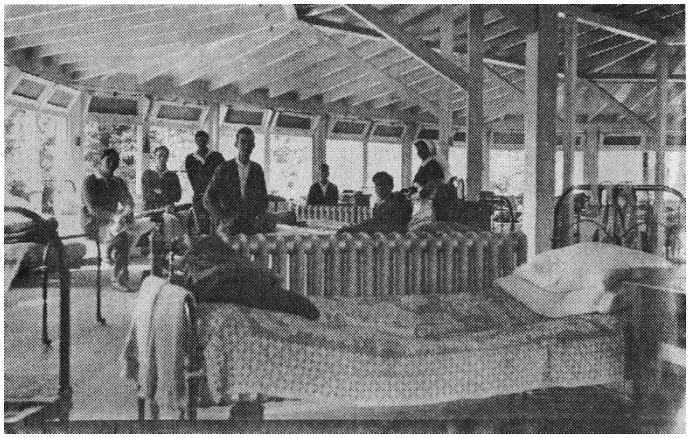

Figure 7 Early days in the ward: Soldiers' Block, Crawford, The Queen Mary Hospital, page 2

It appears that when the plans were first begun for the new male pavilion in the late 1930s (i.e. the Rutherford Block), the old male pavilion (i.e. the Soldiers' Block) was to cease being used for patients. However, by July 1940 the Health Department had changed its mind, as a letter from the Public Works Department to a Christchurch engineer notes that "as it is now decided to continue the use of the Old Male Pavilion, it is advisable to place the steam services in good order" by fixing up hot water calorifiers (i.e. turning steam into hot water for heaters).[69] Around this time it appears that the windows in the Soldiers' Block were altered or added, and the cost of glazing bars and glazing in existing sashes was put at £60.16s.[70] (It is believed that prior to this the octagonal wards had canvas screens instead of glass windows).[71]

The Soldiers' Block (Old Male Pavilion) officially closed its doors as accommodation for sick soldiers in 1946, but it continued use (at least part of it did) as an Occupational Therapy Department.[72] It subsequently was used as a plumber's store, the Hanmer Village library, the community centre where dances were held, lectures given, billiards and table tennis played, and Alcoholics Anonymous meetings were held. From 1990 to 2003 the Taha Maori programme was housed in the Eastern Ward.

A sprinkler system was installed in the mid 1960s. Brick fireplaces were replaced with log burners in the late 1990s.

[67] Carberry, Lieut-Col. A D. The New Zealand Medical Service in the Great War 1914-1918. 1924: 516.

[68] Clarke, Russell. "Not mad, but very ill": the treatment of New Zealand's shellshocked soldiers 1914 to 1939. University thesis, 1991.

[69] Archives New Zealand (Christchurch branch), Male Pavilion (Part 2), 13/4/1, 1939-45.

[70] Archives New Zealand (Christchurch branch), Male Pavilion (Part 2), 13/4/1, 1941-48 Box/43.

[71] Robert Crawford, draft notes for registration proposal for Soldiers' Block, sent to NZ Historic Places Trust, September 2003 (copy held on HPT file).

[72] Petre, M E. 'Queen Mary Hospital, Hanmer Springs: How it Started and What it is', Student Nurses' Supplement, The New Zealand Nursing Journal, February 1959: 31.

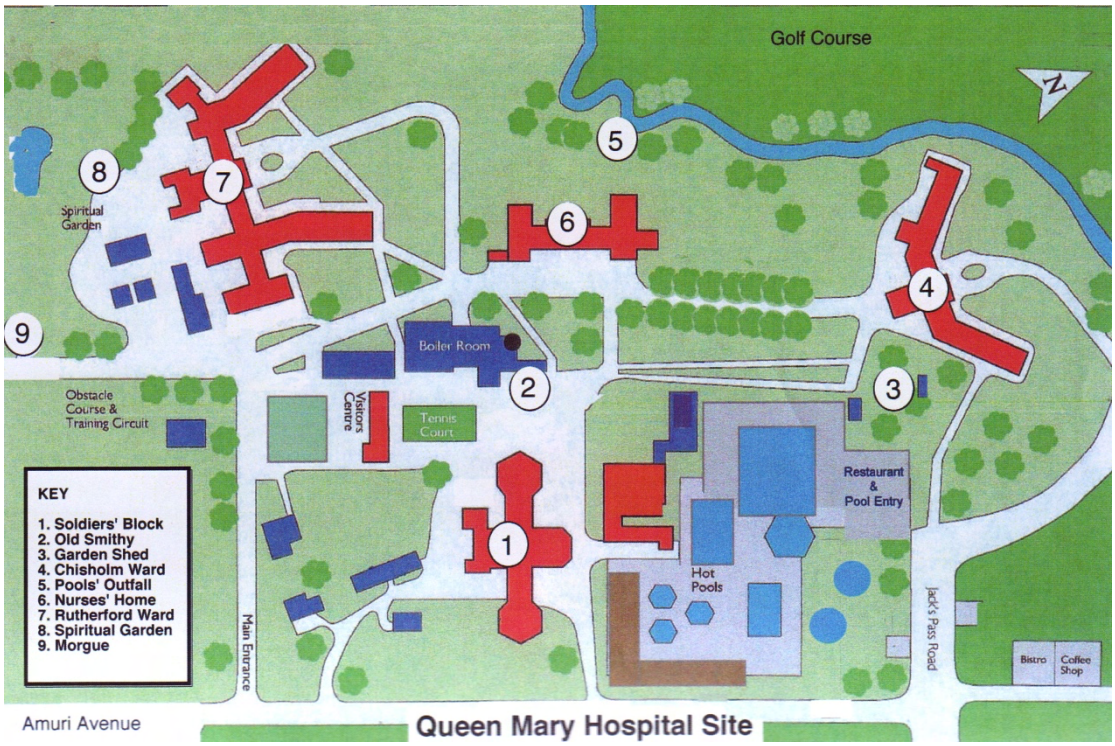

Figure 8 Site plan showing the main buildings of the Queen Mary Hospital, from inside front cover of Crawford, The Queen Mary Hospital, Hanmer Springs, 1916-2003

2.6 Chronology of events for Queen Mary Hospital[73]

Date	Person
1859	Probably the first European record of the hot springs at Hanmer
1860	1072 ha reserve created around the springs
1878	Two-room changing shed built by main hot pool
1884	First bathhouse built around main pool (location was approximately immediately to the north of the north-easternmost wing of the present Fountain House block)
1888	Second bathhouse built (extended 1893), (location was on the site of the eastern end of the Gymnasium building)
Late 1880s?	Men's fresh water swimming pool built close to second bathhouse, soon converted to hot water bath
1894	Enclosed women's swimming bath (Marion Pool) opened near the main men's pool (location not clear)
1894-1897	Bowling green and tennis court built
1897	'The Lodge' hotel built as accommodation, located in the Hanmer Township, not in the current hospital grounds (now gone, but

[73] Note events specific to the Soldiers' block are highlighted in bold

	approximately where the Hanmer Heritage Hotel stands at the corner of Conical Road)
1897	The Sanatorium building opened, as a kind of lodging house for invalids who were taking the waters
1898	Gasometer erected by pools (still *in situ* in the public grounds in front of the thermal pool complex, not in the hospital grounds)
1899	A 'fountain house' was erected (this is gone but its location was approximately west of the location of the current Fountain House Block)
1900	Third bathhouse built (location was immediately to the south of the eastern end of the Gymnasium building)
1899-1900	Additions to Sanatorium Building
c1900	Garden and tool shed to the north of the current pools complex
1902	Sanatorium's name changed to Spa
c1902	Morgue erected (now located at the south end of the site – originally it was located near where the current Maintenance Engineer's office is)
	Croquet lawn laid down
1904-5	Tea kiosk opened at baths (still survives in the baths complex but not quite in its original location)
c1906	Further alterations were carried out to the Spa building, including the erection of a dairy separate from the main building (this may be the small brick building which stands alone behind the Soldiers' Block)
1908	Spa building reverted to being a Sanatorium again, this time a proper one with medical staff
1914	The Sanatorium building burnt down a day after the outbreak of World War I
1915	Bowling green and tennis court built
1916	**Soldiers' Block opened**
	'The Lodge' hotel built as accommodation, located in the Hanmer Township, not in the current hospital grounds (now gone, but approximately where the Hanmer Heritage Hotel stands at the corner of Conical Road)
	The Sanatorium building opened, as a kind of lodging house for invalids who were taking the waters
	Gasometer erected by pools (still *in situ* in the public grounds in front of the thermal pool complex, not in the hospital grounds)
	A 'fountain house' was erected (this is gone but its location was approximately west of the location of the current Fountain House Block)

1917	**Addition of a verandah to the Soldiers' Block.**
	Third bathhouse built (location was immediately to the south of the eastern end of the Gymnasium building)
Date not Certain	Occupational Therapy Building, Doctor's or Medical Superintendent's House, Smithy/Plumber's Building, Single Men's Quarters erected. These may be contemporary with the Soldiers' Block
Date not Certain	'Clarence House' used for nurses home. It is not clear which this building is – it may be one of the houses in the grounds
1922	Health Department took over the hospital, renaming it the Queen Mary Hospital.
1926	A separate women's hospital block was opened (this is the current Chisholm Ward in the hospital grounds)
1927-28	Nurses Home built (still in its original location in the hospital grounds)
1929-30	Women's Massage and Bath House built. This is the current Gymnasium building in the hospital grounds, the eastern end of which is on the foundations of the 2nd (1888) bathhouse
1937	Medical Superintendent's House built (the second one? – this may be House Number 3 in the hospital grounds)
1940	A new men's hospital block opened (this is Rutherford Block in the hospital grounds)
	Soldiers' Block windows glazed
1943	New Male Bath and Massage Block built (this is the current Fountain House building)
1946	**Soldiers' Block use as a hospital for sick soldiers ceased and continued to house the Occupational Therapy Department**
After 1950	The Morgue building was shifted to its present location
1960s	A programme was developed for alcoholics only
ca. 1965	**Installation of a sprinkler system**
1970s-80s	The alcoholics programme was developed to include drug addicts and co-dependent family members
1980s	**Recladding of north side of building with plastic weatherboards**
Unknown	**Partitions put into octagonal wards**
1990	**Taha Maori programme introduced, running alongside the main programme for Pakeha**
1990s	**Log burner installed in existing fireplaces in dining/recreation room**
2003	Hanmer Clinic, as it had become known, closed due to financial difficulties

2.7 People of significance to the Soldiers' Block

2.7.1 Dr Percy Chisholm

Dr. Chisholm was Medical Director at Hanmer from 1920 for 23 years.[74] When appointed as Superintendent, he was a Captain, but was quickly promoted to Major and then to Lieutenant Colonel. At the time of his appointment he was one of three army experts on functional nervous conditions. The other two were D. E. Fenwick in Wellington, who had once been in charge of Hanmer, and Marshall MacDonald in Dunedin.

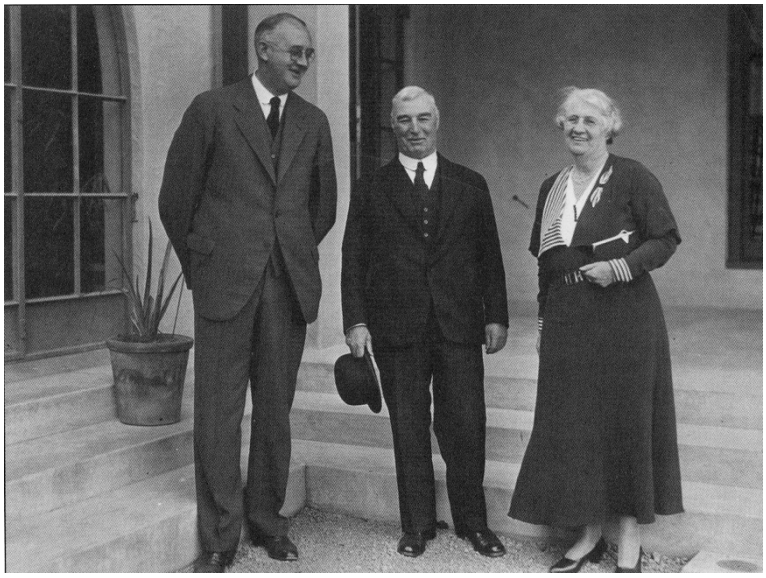

Figure 9 Dr. Percy Chisholm with Prime Minister Forbes, MP for Hurunui, and his wife, 1933, Crawford, Too Good to Last, page ii

Chisholm trained at the Maudsley Neurological Hospital, the University Hospital, the Special Hospital for Functional Nerve Diseases, Lancaster Gate, and the Hospital for Nervous Diseases, Queen's Square. These hospitals had been selected for good reasons. Maudsley Hospital had opened in 1915 for the treatment of shell-shocked soldiers, and at Queen's Square, Dr. Lewi Yealland practised electrotherapy. He was trained under Sir James Mott.[75]

When Hanmer passed to civilian management in early 1922, Chisholm was joined by Dr. William Sowerby who had war-time experience at Maida Vale Neurological Hospital in London. Major Baxter, another army doctor who worked with Chisholm at Hanmer, requested a discharge in 1920 so he could go to London for advanced study.

2.7.2 Hoggard, Prouse and Gummer, architects[76]

The firm was formed in 1913 and comprised three significant architects: Jack Hoggard and William Prouse in the Wellington office, and William Gummer in the Auckland office. The three were admitted to the New Zealand Institutes of Architects in 1914 with Prouse as an Associate and Hoggard and Gummer as Fellows. The partnership ended officially in 1921, although a request for dissolution of the partnership was made in 1917. Gummer continued in partnership with Prouse until 1923. Which of the architects is responsible for the design of the Soldiers' Block is not certain, therefore a brief resume of each architect is given.

[74] http://www.historycooperative.org/journals/hah/7.1/weaver.pdf.

[75] http://www.nzetc.org/tm/scholarly/tei-WH1-Medi-t1-g1-t1-body-d22.html.

[76] These notes are largely taken from the NZHPT Glossary of Architects, Engineers and Designers, 1990.

John Hoggard (1878-1936)[77], known as Jack, was the eldest son of Thomas and Mary Harriet Hoggard. He was first trained in the practice of his uncle; W C Chatfield and his next employment was with Joshua Charlesworth. In 1906 he travelled to San Francisco to study earthquake resistant design and returned in 1907 when he established a partnership with William Prouse. An early building designed by the partnership was the Cadbury factory, 60 Ghuznee Street, which was the first steel framed building in Wellington and possibly in New Zealand. The partnership also designed the Adelphi Theatre in 1912, and the Britannia Theatre in 1913. Following the dissolution of the partnership in 1921, Jack Hoggard designed the Lower Hutt Fire Brigade and Ambulance station in 1924, and the Riddiford Baths complex in 1925,

William John Prouse (1878–1956) came from a timber merchants' family. Although receiving no formal architectural training, Prouse practiced in Wellington for 46 years. Buildings he designed included the Majestic Theatre, Wellington, in 1928, and the Masonic Hotel, Napier in 1932.

Figure 10 William Gummer, private collection, http://www.dnzb.govt.nz/dnzb/

William Henry Gummer (1884–1966) was articled to W.A Holman, an Auckland architect, and was elected as an associate of the Royal Institute of British Architects in 1910. In the period 1908–1913 he travelled in the United Kingdom, Europe and the United States, during which time he qualified as an Associate of the Royal Institute of British Architects. While overseas, he worked for Sir Edwin Lutyens, leading English architect of the time, and for Daniel Burnham in Chicago. Burnham was a major American architect and one of the founders of the influential Chicago School of Architecture.

In 1923 he formed a partnership with Charles Reginald Ford. Gummer was one of the most outstanding architects working in New Zealand in the first half of this century and was responsible for the stylistically and structurally advanced Tauroa (1916), Craggy Range (1919), Arden (1926), and Te Mata (1935) homesteads, all at Havelock North. Gummer also made a significant contribution to New Zealand's architectural heritage in his war memorials in Dunedin, the Massey Memorial in Wellington, the Bridge of Remembrance in Christchurch, and the National War Memorial in Wellington[78].

Gummer was an important figure in the New Zealand Institute of Architects. He was elected a Fellow in 1914, four years after having been elected an Associate, was President between 1933 and 1934, and was later elected a life member.

Significant buildings of the partnership include:

Brett Publishing Co Ltd. Fort Street, 1913

Public Trust Office, Auckland 1913

NZ Insurance Co Ltd., Auckland 1914

[77] Tod Hoggard, The life and work of architect John Hoggard, unpublished, September 1995.

[78] Peter Shaw, The War Memorials of W.H. Gummer, Art New Zealand, number 48, Spring 1988

Princess Theatre, Auckland 1914

Grad Theatre Manners Street, 1914

Offices Lambton Quay next to Public Trust, 1914

Freezing Works, Ngauranga, 1915

NZ Shipping Co and Commonwealth and Dominion Line Building, 1917

Cunard and Co and NZ Shipping Co Waterloo Quay and Ballance Street, 1918

Wellington Woollen Mills, 1919;

State Fire Building, Lambton Quay 1919;

YWCA, Queen Street, Auckland 1919;

Huddart Parker and Co, Quay Street, 1920;

Auckland Star Office, Queen Street, 1920.

2.7.3 The Public Works Department[79]

The Public Works Department was formed in 1870 as a direct consequence of Vogel's development programme and immediately assumed a place of vital importance being in charge of public works such as railways and roads and immigration (before the latter departed to Crown Lands in 1872).[80] Head office was split between the technical engineering staff (headed by John Carruthers) and administration. While the actual works were done under contract the department developed proposals, surveyed and prepared plans and administered the public works contracts. Soon the department numbered more than two hundred, including temporary employees and those on contract, and railway construction went ahead in leaps and bounds.

William Clayton was employed as Government Architect to design the many public buildings required, including the Government Buildings. The department occupied a considerable space in these buildings on their completion.

From 1878 'working' railways became a separate department and in the same year James Macandrew, as minister in Grey's government, divided the department into separate island organisations. The department had to weather the difficulties of the split administration and then the storms of the 1880s depression during which substantial staff cuts were made and public works were focussed more on unemployment relief. With Seddon as minister from 1891, and then the return to prosperity from the mid-1890s, the department gained a new lease of life and entered its long-term role as the state's construction agency for railways, roads, public buildings, lighthouses, harbour works and defence.

Into the early twentieth century the Government Architect's office was revived and hydro-electric power development and irrigation was added to its activities. During the 1920s under minister Gordon Coates and head Fred Furkert the department was revitalised, the work mechanised and working conditions improved. Although public works largely returned to its unemployment relief function for a time during the depression of the early 1930s the election of the Labour Government in 1935, along with the demands of war, brought the department back to a prime position. Under Robert Semple as minister responsibilities included airfields, a greater emphasis on roading and irrigation and then defence works and housing construction. In 1946 the Public

[79] Bowman, Vossler, Martin, Evans, *Old Government Buildings Conservation Plan*, for HNZPT 2022

[80] Rosslyn J. Noonan, *By Design: A Brief History of the Public Works Department/Ministry of Works, 1870-1970*, Wellington, Government Printer, 1975.

Works Department merged with the planning- and policy-oriented Ministry of Works to form the modern-day Ministry of Works which soon took over town and country planning functions. The ministry adopted a central planning and infrastructure role in the Keynesian welfare state of the postwar decades that followed. Housing, hydro-electric development, roading and public buildings comprised its major activities. In 1966 the Ministry of Works moved into the Vogel Building.

3.0 Describing the Place

3.1 Summary Description

Property:	Soldiers' Block, Hanmer
Controlling Local Authorities:	Hurunui District Council
Administered Under:	Hurunui Operative District Plan
Physical Address of Place:	3 Jacks Pass Road, Hanmer Springs
Legal Description:	Part Section 79, Hanmer Town Area, being part of Certificate of Title CB38C/188, Canterbury Registry.
Ownership:	Hurunui District Council
Zoning:	Queen Mary Heritage Zone
NZ Heritage List/Rārangi Kōrero Listing:	The whole site, including the thermal baths, was listed as the Queen Mary Hospital (Former) and Hanmer Springs Thermal Reserve Historic Area Historic Area by Heritage New Zealand Pouhere Taonga (HNZPT), list number 7583, registered on 10 December 2004. The Queen Mary Hospital, including the Soldiers' Block, excluding the thermal baths area, was listed as an historic place category I with HNZPT, register number 7612, on 24 June 2005.
Heritage Order/Protection Notice[81]	-
HDC Schedule 14.1:	The building is entered on Schedule 14.1 Historic Buildings and Structures in the Hurunui Operative District Plan as Soldiers' Block-Queen Mary Hospital (former), Site H57, List number 7612, Location 3 Jacks Pass Road, Hanmer Springs
Associated HDC Listed Buildings:	The Chisholm War-Queen Mary Hospital (former), Site H47, List number 7612, Location 3 Jacks Pass Road, Hanmer Springs; Nurses' Hostel-Queen Mary Hospital (former) Site H67, List number 7612, Location 3 Jacks Pass Road, Hanmer Springs; Queen Mary Hospital (former) and Hanmer Springs Therma Reserve Historic Area, Site H68, List number 7583, Corner Amuri Avenue and Jacks Pass Road, Hanmer Springs;

[81] A Protection Notice (now referred to as a H[82] Burgess, R., author and Ian Bowman, I, peer reviewer, Queen Mary Hospital, Hanmer, Heritage Assessment for the Hurunui District Council, Opus October 2004.

Figure 11 Hurunui Operative District Plan showing the Queen Mary site with associated zonings

3.2 Architecture

3.2.1 Floor plan

The Soldiers' Block is a single storey building comprising a large central dining hall with two octagonal wards to the east and west which are connected by corridors. The dining hall has a facetted wall facing north. The corridors connecting the wards with the central block have rooms on either side. Each of the wards has a toilet block at their extremities, both of which are in an almost unaltered condition from when the building was first built.

To the south of the dining hall is a small block comprising a recreation hall, a corridor the length of the block, rooms and corridor to the south of the hall and a verandah to the east. To the south and west of this block is a further block, which has different sized rooms and a verandah attached to the west corridor forming a small courtyard.

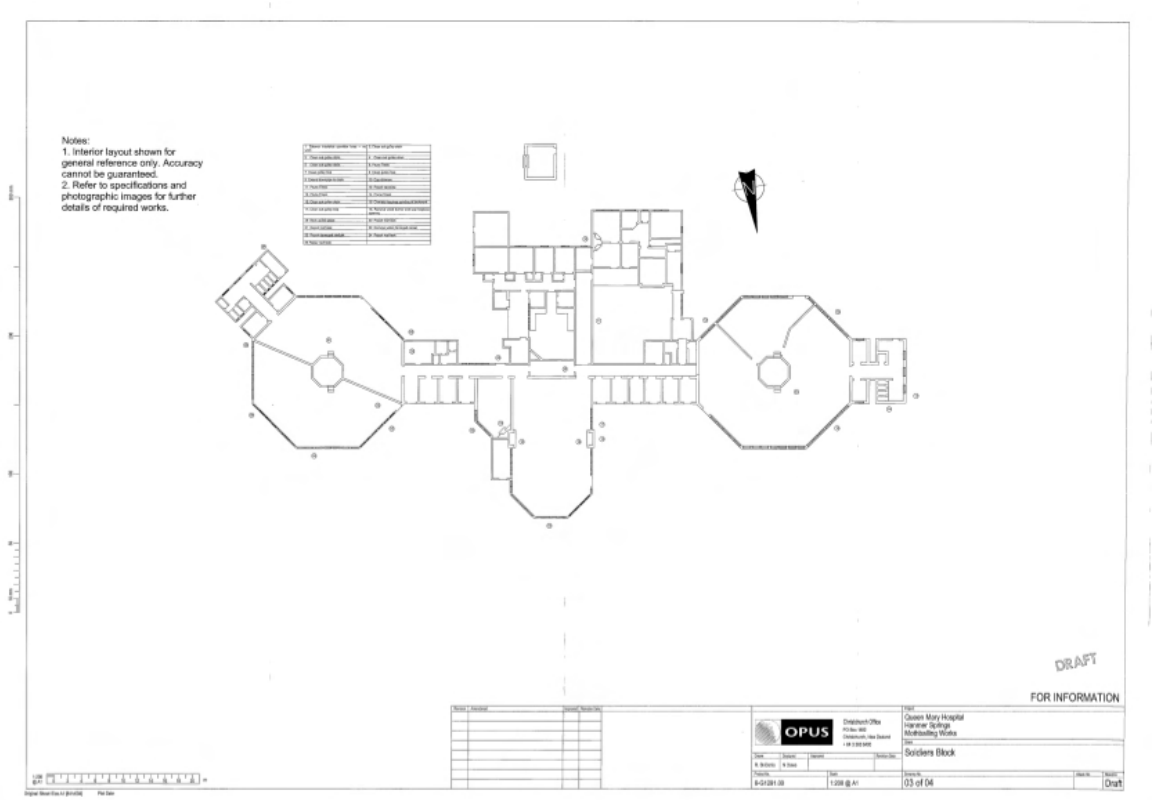

Figure 12 Opus floor plan of the Soldiers' Block, 2004

3.2.2 Elevations

The two octagonal wards have a central lantern with a low-pitched, facetted, hipped roof and a matching roof over the main building. The walls have continuous square casement windows between the upper half of the wall to the underside of the eaves and splayed, timber weatherboarded walls under the windows. The splayed base was a common wall and gable form in Edwardian Arts and Crafts buildings and the later Californian Bungalow houses from the immediate post World War I period to the 1930s. The glazing to the windows was installed after the construction of the building, as described below.

The dining hall wing is similar in roof form to the wards but with a gabled lantern and continuous windows and splayed weatherboard base to the north only. A verandah projects from the front

half of the building, which has been enclosed on the east side housing toilets. To the south of the toilets is another facetted room, possibly the dispensary, which is connected to the east central corridor. Opposite the dispensary is the kitchen, which is also built within the enclosed verandah.

The south of the building maintains the same aesthetic as the north of the building with weatherboarded walls and square headed casement windows, but without the spayed base.

The south-west block has an Arts and Crafts styled projecting window into the courtyard with leaded toplights. The walls facing the courtyard are splayed.

The interiors of the wards and dining hall have exposed timber framing with match-lined ceilings. Large timber trusses with raking wall braces support the roof framing in the dining hall, while series of posts with similar raking braces support the ward roofs. Simple triangular trusses support the recreation hall roof.

Original rooms still have timber match lined ceilings and walls as well as original doors, which are vertical four panelled in the Bungalow style.

Figure 13 Soldiers Block, photo Ian Bowman 2010

3.2.3 Design and origins[82]

The following description of the design and probable origins is taken from Robyn Burgess's *Queen Mary Hospital, Hanmer, Heritage Assessment*. Ian Bowman researched and wrote the history of the Otaki Rotunda building, which was formerly the Anzac and Suvla Wards of the King V George Hospital in Rotorua and is the same design as that of the Soldiers' Block. This hospital was opened in 1915 when civilian hospitals could not cope with the influx of sick and injured soldiers from the First World War. Patients of these wards included orthopaedic cases, shell shock and neurasthenia, cases similar to those at Hanmer[83].

Robyn Burgess used this research as well as extensive research of her own to write the following history, which is quoted in full.

The design of the Queen Mary Soldiers' Home/Block was based on the King George V Hospital at Rotorua (1915), which in turn had been based on octagonal open wards at Trentham and Featherston military camps.

The origins of the design of the octagonal shaped wards have until recently been unclear. It has been suggested that they have developed from the military bell tents. Their lantern has also been likened to some of the ventilation areas of some early bathhouses in New Zealand. However, a literature review by the author on the Trentham Military Training Camp has provided a vital clue as to the origins of the octagon design. At the start of World War I Trentham Camp had makeshift hospital facilities. Initially hospital accommodation utilised the Trentham grandstand and tea kiosk in the racecourse. Will Lawson, in 1917, described the subsequent construction of the military hospital proper in 1915:

After the experience gained in using the octagonal-shaped kiosk in the racecourse, it was decided to adopt the design for camp hospital works. Private subscriptions to build one of these were given by citizens, chiefly in the Wairarapa, and the new hospital was called the Wairarapa Ward. It has a capacity of 62 beds, and is so built, with movable screens on the windows, that the windows on the sheltered side of the building may be kept open, while the exposed ones are closed. In the centre is a glassed-in office with a raised floor, from which elevation the nurse on duty is able to keep an eye on all her patients without having to visit each bed. [84]

When the Queen Mary Hospital for Returned Soldiers opened in 1916 in Hanmer Springs, its design was reported as being based on the military hospital opened a little earlier in Rotorua. The Rotorua one, in turn, was said to have been based on the design of the 'Wairarapa Ward' at Trentham Military Camp and a military hospital at Featherston Camp. [85] The development of this specific hospital design therefore was initiated in New Zealand and this could explain why, to date, our research has not shown any international precedents for such a hospital design. It suggests that the hospital design may be unique to New Zealand, reflecting a New Zealand adaptation of an earlier type of design that appeared in the late 19th century in tea kiosks and band rotundas. Such octagonal designs for kiosks and rotundas were became fashionable in the late 19th and were influenced by the Oriental designs displayed at the New Zealand and South Seas Exhibition which was a world fair held in Dunedin in 1889. There are a small

[82] Burgess, R., author and Ian Bowman, I, peer reviewer, Queen Mary Hospital, Hanmer, Heritage Assessment for the Hurunui District Council, Opus October 2004.

[83] Margaret Tennant, op cit, page 79.

[84] Lawson, Will. Historic Trentham 1914-1917: The Story of a New Zealand Military Training Camp, and some account of the daily round of the troops within its bounds. 1917: 14-15.

[85] HJHR, 1916: v.2: s.H31, p2. Report of the Inspector-General of Hospitals and Charitable Institutions and Chief Health Officer to the Minister of Public Health, Hospitals and Charitable Aid, Dated 22 June 1916.

number of historic tea kiosks with octagonal or polygonal designs surviving in New Zealand, such as the 101 year old Riccarton Racecourse Tea House.

As at Rotorua, the Hanmer building had two octagonal wards linked by a corridor with a large hall between them. The octagonal wards had a nurses' station at their centre, which enabled the nurses to monitor the patients. The lantern roof at the centre and the large windows that encircled the wards maximised the available sun and air, considered vital for recuperating patients. Hospital designs of this type arose from a gradual recognition about the importance of fresh air, sunlight and cleanliness for healing, which began to have physical results from the late 19th century.[86] Today the Soldiers Ward at Hanmer Springs is believed to be the only one of this design to survive in New Zealand. Both octagonal wards from King George V Hospital at Rotorua were moved to the Otaki Children's Health Camp, where one of them still stands today – this remaining one at Otaki has been described as 'of outstanding national significance'.[87] The Soldiers Ward at Hanmer is of even greater significance as the only complex of this design to survive intact and still on the site for which it was designed.

The King George V Hospital at Rotorua and the Featherston military camp hospital were both constructed in 1915 and both employed an octagonal design.[88] It has been suggested that these buildings were designed under John Campbell, the Government Architect of the period [see below].[89]

Figure 14 ANZAC and Suvla wards at King George V Hospital, Rotorua, Health Camp Board Collection

The description at the time of the opening of King George V Hospital helps to understand how this type of design was meant to work. The observation post was housed in the central octagonal space under the lantern, presumably for light and ease of supervision.[90] The rotundas, which could be opened up, made the most of the theory of the beneficial effects of fresh air. They had continuous glazing around the main walls, with the ceilings appearing more solid in comparison, hence the description of these buildings as having 'floating ceilings'.[91]

The octagon plan has been used extensively in the Classical and Renaissance periods in Europe. However, it is not clear that the Greek and Roman temples or the Renaissance architecture of Europe was particularly influential in the design of the Soldiers' Block. Rather,

[86] From submission to the Canterbury District Health Board/Council by Jennie Hamilton of the New Zealand Historic Places Trust, 2004 (May?), copied from the NZHPT file on Queen Mary Hospital, Hanmer.

[87] New Zealand Historic Places Trust Register: Otaki Children's Health Camp Rotunda (formerly King George V Hospital), Category I Historic Building, Register Number 4098.

[88] Bowman, Ian. A Conservation Plan for The Rotunda, Otaki (copy held at the New Zealand Historic Places Trust Library, Wellington).

[89] Ibid.

[90] Ibid.

[91] Ibid.

one suggestion for the octagon plan being used for the military in New Zealand is that its origins are from the bell tent used by soldiers in the 19th and early 20th centuries, because in effect, they looked like and functioned much like tents. Even the lantern at the top of the octagonal wards is reminiscent of ventilation flaps at the top of tents.

It is possible that the raised lantern design derives from earlier bathhouses.

Photographs of bathhouses at Kamo, dated 1905 and 1907 show buildings that have a raised lantern which has fenestration all around (see photograph attached, fig 18 in Appendix 4), although the plan form of those bathhouses appears to be square and not octagonal.

Research into the Otaki Rotunda building determined that the architects for that building were Wellington architects, Hoggard, Prouse and Gummer. The plan is identical to the Soldiers' Block at Hanmer and therefore it is almost certain that Hoggard, Prouse and Gummer were the architects for the Soldiers' Block, possibly commissioned by the Government Architect, John Campbell, as suggested by Robyn Burgess. The NZHPT Registration Assessment reiterates that Hoggard, Prouse and Gummer designed the Soldiers' Block and that the firm also designed the hospital buildings at Trentham, Featherston, and Rotorua. The description of the Rotorua hospital, below, is identical to that of the Soldiers' block.

The ground plan is that of a cross, at the east and west ends of which are octagonal dormitories, each for 200 men. The walls are closed board for 3ft 6in from the floor, thence an open space of about 5ft to the eaves. The openings can be closed by vertically siding sashes filled with waterproof Hessian. The dormitories have high lantern roofs. In the corridor connecting the dormitories are 10 rooms for officers or non-commissioned officers, opening with French windows to the verandah. North of the corridor, and forming one arm of the cross, is a large dining hall, with walls similar to those of the dormitories. South of the corridor are the kitchen, pantry, storeroom, waiting-room, and the commandant's quarters. In the centre of each dormitory is an octagonal room, with glass walls for attendants. Outside each is a large lavatory, octagonal in form. The building is of wood with an iron roof and concrete foundation.[92]

According to Tennant, the wards had been considered as being temporary structures only and their speedy erection at the hospital was reflected in leaks and other defects resulting in continuous and costly maintenance[93].

3.3 Hospital architecture

3.3.1 International context[94]

Preliminary research indicates that the design of the Soldiers' Block is not typical of any known sanatoria, convalescent home or hospital in England. The Royal Commission on the Historical Monuments of England (now part of English Heritage) has published a large volume on the full range of hospital types in England. Correspondence with the editor of that volume, and extracts sent to the author from English Heritage, suggest that there may be no hospital buildings in England like Soldiers' Block.[95] The principle of 'open air' sanatoria developed in the late 19th century, initially for cases of tuberculosis and then for other types of semi-convalescing patients in general. These buildings encouraged large amounts of fresh air and sunshine through for patient recovery. One of the earliest sanatoria in England was the Manchester Sanatorium at Bowden (1884) which had a south-facing wing designed on a half-butterfly plan, which

[92] New Zealand Herald, 12 January, 1916.

[93] Margaret Tennant, op cit, page 79.

[94] Quoted from Burgess, R. Opus Report, op cit.

[95] Letter from Tony Calladine, and emails from Harriet Richardson both from English Heritage (UK), June 2004.

consisted of wards set high above the ground level, with casement windows reaching almost to the floor and a large conservatory or 'sun bath' where the patients could bask in the sunlight. [96] This idea of patients being encouraged to 'live in the open air as much as possible' set the standard for nearly all subsequent sanatoria in England.[97] Another key hospital that influenced future development was the Ida Hospital at Cookridge, England, (1887-8) which was built with verandahs for the use of patients, and a half-butterfly plan, with the pavilion wards angled southwards so that there was a more even distribution of light than would otherwise have been gained from keeping the wards in one line.[98] The Ida Cookridge hospital is an early example of what became to be a standard form in England for sanatoria in the 1890s, pre-dating its vogue in Arts and Crafts domestic architecture where butterfly plans were used extensively.[99] The Women's Pavilion (Chisholm Ward) follows this type of design and therefore is typical of some of the English sanatoria, albeit old-fashioned for a 1926 building.

The Cambridge Tuberculosis Colony was originally established in 1916 at Bourne (and moved to Papworth in 1918) had as its main purpose to rehabilitate sufferers, and patients were trained in a variety of trades, from carpentry to boot-repairing, and from cabinet-making to farming.[100] In this respect, the Hanmer hospital is similar with its buildings for occupational therapy, its farm and garden.

3.3.2 Background to hospital architecture

While the earliest hospitals date back to Antiquity and a number survive in Europe from the Middle Ages and the Renaissance, the Georgian period saw a considerable advance in the number and design of hospitals101. The style of these buildings is, logically, Georgian and this became a standard style for many hospitals since that time. Bethlehem Hospital, 1675-76, designed by Robert Hooke began this Georgian architectural tradition for hospitals, which was continued in other subsequent major hospitals. These include the London Hospital, 1751-57, by Boulton Mainwaring, Rotunda Hospital, Dublin, of 1745, by Richard Cassels, and the Bootham Asylum, York, 1772-1777, by John Carr. The 17th century hospital design used cruciform and courtyard planning, while the later 18th and 19th centuries saw the popularity of the pavilion form, where wards were in individual buildings connected by corridors.

Many hospitals were designed in the Georgian style in New Zealand such as the main hospitals in Auckland, Wellington and Palmerston North while Kew Hospital in Invercargill was designed in the Italianate style and Christchurch Hospital was designed in the Elizabethan style.

The early twentieth century saw the recognition of access to open air as being as crucial for improving health. Among preventative measures in hospital design at this time were large opening windows and open verandahs from which patients were able to gain fresh air. Crichton and McKay used these principles when designing Wellington's Ewart Hospital (now demolished) and the Chest hospital, as did Arthur Griffin in his design for Nelson hospital (also demolished). These three hospitals of the immediate post-World War I period clearly reflect the open air concept as they had large numbers of high and low level windows in each ward and large partially glazed verandahs off each ward and at the ends of each wing.

[96] Richardson, Harriet (ed). English Hospitals 1660-1948: A Survey of Their Architecture and Design. Royal Commission on the Historical Monuments of England. 1998: 145.

[97] Ibid.

[98] Ibid: 183-186.

[99] Ibid.

[100] Ibid: 150.

[101] Nikolaus Pevsner, *A History of Building Types*, Princeton University Press, 1976, page 139.

The same principle became popular in the design of schools, which were termed 'open air schools'. In these designs all sides of the classrooms could be opened for fresh air. This was a concept imported from Germany and the first of these classrooms was opened in 1914 in Wellington South.

The location of the hospital in a large open park-like setting allowed for the planting of large gardens. The gardens were available for patients to walk among and, if bed ridden, to look out at, giving health benefits. The contribution of gardens to the improvement of society in general was well recognised in the planting of public gardens in the latter half of the 19th century. The garden cities and garden suburbs expanded the garden concept dramatically. These urban design principles were popular in providing healthy living environments where benefit of the country could be enjoyed in the town.

3.3.3 Military hospital history[102]

After the departure of the main body of New Zealand soldiers to Egypt in October 1914, an army camp was set up in Trentham in the Hutt Valley near Wellington to train reinforcements.[103] However, overcrowding at the camp, combined with too much moisture in the top soil of the camp resulted in a serious epidemic of measles in May 1915 when 33 people died.[104] The Victoria Ward at Wellington Hospital opened as a military ward to assist in the control of the measles epidemic.[105] By July 1915 the camp hospital at Trentham itself was enlarged to 200 beds and five NZANS nurses were stationed there. In June 1918 the bed numbers were increased to 500.[106] A military hospital was established at Featherston Military Camp in 1915.[107]

The King George V Hospital at Rotorua, built in 1915, soon became the chief military hospital in New Zealand, providing a convalescent depot for returned invalids. Other military convalescent homes were set up early in the war period in Wellington (in the home of Attorney-General, Sir Francis Bell), in Hanmer (The Lodge), in Dunedin (Montecillo Military Convalescent Home), in Christchurch (Chalmers Wards at Christchurch Hospital and also the Cashmere Military Sanatorium for tuberculosis sufferers), at Auckland (the Annexe at Auckland Hospital), as well as at Devonport, Timaru, Napier, Wanganui and Invercargill.[108]

A major illness for returning soldiers was the so-called 'shell shock'. 'Shell shock' is a misnomer first used in an article in February 1915 by Dr. C S Myers of the Royal Medical Corps.[109] It was assumed that the chemical or physical effects of a close shell burst were responsible for the soldier's sensory losses. The idea caught the public imagination and 'shell shock' became a term used for any mental illness that arose from war induced anxiety neuroses.[110] In December

[102] Quoted from Burgess, R, Opus Report, op cit.

[103] Kendall, Sherayl and Corbett, David. *New Zealand Military Nursing: A History of the Royal New Zealand Nursing Corps, Boer War to Present Day*. 1990: 43.

[104] Ibid.

[105] Ibid.

[106] Ibid.

[107] Bowman, Ian. *A Conservation Plan for The Rotunda, Otaki* (copy held at the New Zealand Historic Places Trust Library, Wellington).

[108] Kendall, Sherayl and Corbett, David. New Zealand Military Nursing: A History of the Royal New Zealand Nursing Corps, Boer War to Present Day. 1990: 43.

[109] Clarke, Russell. "Not mad, but very ill": The treatment of New Zealand's shell-shocked soldiers 1914 to 1939. University Thesis, 1991.

[110] Ibid.

1915 it was agreed that soldiers returning to New Zealand who had illnesses other than physical injury were not suitable for the usual hospitals.[111]

When military patients were first sent to the Rotorua hospital in 1915 it soon became evident that military representation was necessary in order to maintain discipline.[112] Accordingly, an arrangement was soon made that military patients would be under the control of the Defence Minister. Colonel Valentine of the Public Health Department was loaned to the Defence Department to become a full time military officer under the Director General of Medical Services at both the Rotorua and Hanmer convalescent hospitals.[113]

The report of the Inspector-General of Hospitals and Charitable Institutions and Chief Health Officer dated 22 June 1916 said the following of Military Convalescent Hospitals:

> Under your auspices hospitals for our sick and wounded have been erected at Rotorua, and more recently at Hanmer. Very excellent results have been reported from the former place, which amply justify your decision to take over the thermal springs and sanitoria for the benefit of our sick and wounded.
>
> Features of the new hospitals referred to are the facilities for treating the patients in the open air, and the octagon-shaped wards which have been erected for the more effectual carrying-out of this principle have given the greatest satisfaction to the medical officers at Trentham and Featherston Camps, where, owing to the generosity of certain residents of the Wairarapa, I was first able to experiment in this direction. It was on the experience of the "Wairarapa Ward" at Trentham that I felt justified in recommending that wards on similar lines should be erected at Rotorua and Hanmer.[114]

When Queen Mary Hospital at Hanmer Springs opened in 1916 it had 20-40 convalescent patients. It was to be a convalescent home for soldiers, providing a soothing environment for healing. Hanmer soon became *the* place where neurasthenic, shell-shock and other functional nervous diseases were treated.[115]

In 1919 the Department of Defence organised for the training of Medical Officers in psychotherapy to treat functional nerve cases.[116] Major Tizard and Captain Chisholm were dispatched to England for three months for such training.[117] Chisholm came to Hanmer on 19 December 1919.[118]

In military terms, in World War II, only Rotorua and Hanmer Springs had proper convalescent hospitals, which were provided by the government and which catered for long term care. Other places merely had convalescent depots, for short term care, established in close proximity to military camps[119]

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[111] Ibid.

[112] Carberry, Lieut-Col. A D . The New Zealand Medical Service in the Great War 1914-1918. 1924: 504.

[113] Ibid.

[114] HJHR, 1916: v.2: s.H31, p2. Report of the Inspector-General of Hospitals and Charitable Institutions and Chief Health Officer to the Minister of Public Health, Hospitals and Charitable Aid, Dated 22 June 1916.

[115] "Hanmer Springs, Unequalled for Neurasthenic Cases", The Press, 10 November 1917; 'Not Mad But Very Ill'.

[116] Clarke, Russell. "Not Mad, but very ill": The treatment of New Zealand's shellshocked soldiers 1914 to 1939. University Thesis, 1991. p91.

[117] Ibid.

[118] Lieut-Col A D Carberry writes that Chisholm trained in England under Sir James Mott and took command of the Hanmer hospital in 1920. Carberry, Lieut-Col. A D. The New Zealand Medical Service in the Great War 1914-1918. 1924: 510.

[119] Website http://nzetc.org/projects/wh2/ - The Official History of New Zealand in the Second World War.

3.4 The setting

The landscape and setting have been fully described in the Lucas Associates' report[120], particularly the Summary and Historic Role sections, with the key elements of the setting of the buildings being the various hospital buildings located within the extensive, park-like grounds with large mature trees and lawns surrounding the buildings with an alpine backdrop. Of particular landscape interest to the Soldiers' block is its proximity to the road, which is lined with hedges and a gate giving access to the road. To the north is a fenced area with demolished buildings and a building site. To the north east is a majestic avenue of trees set in an expansive lawn, visible from the Soldiers' Block linking the Nurses' Hostel and the Chisholm Ward.

3.5 Construction and Materials

The main materials used in the construction of the Soldier's Block comprise timber framing, cladding and joinery, corrugated steel roofing, and brick for foundations and chimneys.

An outline history of these materials is included in Appendix 5.

[120] Lucas Associates, Landscape Assessment, Queen Mary Hospital, Hanmer Springs. Prepared for Hurunui District Council, July 2004

4.0 Assessing the Place

4.1 Significance Assessment

The significance of a place is generally derived through a process of:

- Understanding the heritage values associated with the place (e.g. historic, architectural, archaeological, social, cultural); and
- Assessing the relative importance of these values based on a range of relevant criteria.

For the purposes of this plan the assessment of the significance of The Soldier's Block and its constituent fabric/elements has been informed by the qualities identified in the definition of historic heritage contained in the Resource Management Act 1991 (RMA).[121] These are as follow:

a) means those natural and physical resources that contribute to an understanding and appreciation of New Zealand's history and cultures, deriving from any of the following qualities:

(i) archaeological: (ii) architectural: (iii) cultural: (iv) historic: (v) scientific: (vi) technological; and

b) includes -

(i) historic sites, structures, places, and areas; and (ii) archaeological sites; and (iii) sites of significance to Maori, including wahi tapu; and (iv) surroundings associated with the natural and physical resources.

Although the RMA provides no further clarity regarding the meaning of the qualities outlined in (a)(i) – (vi), interpretive guidance is provided in Sustainable Management of Historic Heritage Guidance Information Sheet 2, 2007 prepared by Heritage New Zealand Pouhere Taonga (HNZPT).

The following assessment of heritage values is based on the guidance provided in this information sheet as well as other relevant international criteria.

4.2 Assessment of the Heritage Values[122]

4.2.1 Physical Values

Archaeological information

- Not assessed as part of this commission.

Architecture (A)

- The Soldiers' Block has **high, national** architectural values.
- The block is a replica of three other hospital buildings designed specifically for the army in the latter part of the second decade of the twentieth century. These hospitals give a clear understanding of a design-response to health care of the period. These included isolation, being located in a park-like setting, having access to plenty of sun and fresh air,

[121] Refer s.2, RMA

[122] Refer Appendix 3 for a description of the terms used below for the purposes of ranking heritage values

good air circulation in the wards, ease of supervision of patients by the nursing staff, and quiet surroundings. The design of the lantern in the centre of the roof allowed for central natural light and increased ventilation from the stack effect, while the structure supporting the lantern defined the work station of the supervisor. In the Hanmer building, to these attributes was added community dining and good recreation facilities. The origin of the octagonal wards has been traced to the improvised use by the army of an octagonal tea-kiosk in 1915 at the Trentham Race course, which was found to be a suitable building form. The splayed base was consistent with the contemporary Arts and Crafts style and the later Californian Bungalow style, which became popular in the 1920s and 1930s.

Technology and engineering (T&E)

- The Soldiers' Block has **high, national technology** and **engineering** values.
- The building is constructed using standard timber framing techniques, but adapted for an unusual form. The trabeated structural system is clearly visible with posts and beams supporting the lantern and the centre span of the roof. Ventilation was a major requirement for hospitals of the period, which is exemplified in this building. The lantern was an efficient, passive means of providing good ventilation. Steam radiators from the geo-thermal baths within the compound provided heating in the wards.

Scientific (Sc).

- The Soldiers' Block has **high, national, scientific** values.
- As with the other ward buildings at the hospital, a significant scientific value of the Soldiers' Block and of the site in general was its location within a geothermal area. Medical theories of the time linked bathing and inhaling steam to help patients with functional nervous diseases. The Opus Report suggests that the "Queen Mary Hospital was the first place in New Zealand where Electro Convulsive Therapy (ECT) was used to improve mood.[123] Queen Mary Hospital is also believed to be among the first in the world to mount a concerted psychotherapeutic programme for the rehabilitation of alcoholics and, later, drug addicts.[124]"
- The setting of the building was designed as a therapeutic landscape and for self-sufficiency, while also being closely associated with early professional horticulturalists and landscape architects (refer to Appendices 3 and 4, Revised Landscape Assessment, Lucas Associates, October 2004).

Rarity (R).

- The Soldiers' Block has **high, national, rarity** values.
- The Soldiers' Block was the first to be constructed at the hospital and it is the only intact building of its type and design remaining on its original site. The only other similar building, the Otaki Rotunda, was relocated from Rotorua. The design is believed to be unique internationally

Representative (Rep)

- The Soldiers' Block **high, national representative** values.
- The building is representative of an approach to military hospital design of the period and contemporary medical thinking on health measures.

[123] Robert Crawford, pers comm. 16/6/04.

[124] Robert Crawford, letter to Hurunui District Council 31 July 2004.

Context or group (C or G)

- The Soldiers' Block has **high, regional group** or **contextual** values.
- The block is one of a group of buildings comprising the Queen Mary Hospital, one of two surviving military hospitals designed in 1915 and constructed in 1916, and one of many significant buildings designed by the architectural firm Hoggard, Prouse and Gummer.

4.2.2 Historic Values

People (P)

- The Soldiers' Block has **high, regional** people values.
- The block is associated with all patients and the staff who worked in it since its opening in 1916 until it was closed in 2003, particularly Dr. Percy Chisholm, its first Superintendent.
- The building is associated with architects Hoggard, Prouse and Gummer, who designed it, and the Public Works Department who commissioned and constructed the building.

Events (E)

- The Soldiers' Block has **moderate, local events** values.
- Principal events in the history of the building are its opening in 1916 and closing in 2003.

Patterns (Pa)

- The Soldiers' Block has **high, national pattern** values.
- As with other buildings on the site and other hospital buildings, the Soldiers' Block reflects the attitudes to health care in general and psychiatric health in particular. The Queen Mary complex was especially associated with the care of returned soldiers after World War I and, from 1920, the treatment of civilian patients with Functional Nervous Disorders. Later the hospital was the major centre of treatment of alcoholism and addictions.

4.2.3 Cultural Values

Identity (I)

- The Soldiers' Block has **high, national identity** values.
- The building is a significant building on the Queen Mary Hospital site and as the oldest and most well-known, it is possibly the best recognised building associated with the hospital.

Public esteem (Pe)

- The Soldiers' Block has **high, national public esteem** values.
- There has been considerable interest in the whole hospital site particularly since its closure and the need to retain the complex intact because of its significant national heritage values. The Queen Mary Reserve Trust was formed in 2004 to promote the public retention of the site and conservation of its buildings. Through its efforts, the efforts of the NZHPT and the Hurunui District Council, the site and buildings have been secured as a public reserve.

Commemorative (C)

- The Soldiers' Block has **high, national commemorative** values.

- The building is commemorative of the soldiers who suffered physical and mental injuries from the two World Wars and who were treated in the ward. Plaques on the building recognise Duncan Rutherford and the opening of the hospital by the Minister of Health, the Hon. G W Russell.

Education (Ed)

- The Soldiers' Block has **high, national educational** value for its physical, historical and cultural heritage values.
- The block has the potential to educate the public on mental health facilities of the past, the development of public mental health architecture, army hospital design, the work of the Hoggard, Prouse and Gummer and the historic development of Hanmer as a spa resort and hospital complex.

Tangata whenua

- Not assessed as part of this commission.

Statutory recognition

- The building is not separately registered by HNZPT but is registered together with other buildings, as a Category I historic place (register number 7583) and lies within the Historic Area registration (register number 7612). The building is also individually listed by the Hurunui District Council and included within an historic area.

4.2.4 Authenticity and Integrity

Authenticity[125] (Au)

- The external form, scale, materials, openings, details and general style of the building have been retained as has the interior planning, form and most of the fittings. The main changes to the block have been internal partitions to the octagonal wards and the various additions to the rear of the building, which are now considered as significant. Although not documented, it is possible that the kitchen and toilets of the central wing have been added at some stage after the original construction. Their partitions are also more recent.
- New cladding has been installed over the original external cladding. Other details and materials such as roofing, chimneys, framing, many internal linings, window and door joinery, flooring, fire surrounds, and toilets to the octagonal wings have all been retained. Some new linings and partitions have been introduced.
- The building currently has no specific use.
- Apart from the added elements listed above, the construction methods, technology and workmanship of the exterior and interior spaces, have all been retained from the original construction.
- Much of the setting of the building has been retained largely intact. Buildings immediately to the north have been demolished, however.
- The unusual style and form of the building evoke a spirit of military discipline and efficiency as well as a spartan existence somewhat softened by its beautiful setting.

Integrity (Int)

- The building has issues with rodent infestation and rotten timberwork.

[125] The levels of authenticity are those noted in the Nara Document and the Riga Charter

4.3 Degree of significance

To determine the degree of significance associated with the building and its immediate context an assessment of its key elements was undertaken using the following graduated scale:[126]

- Exceptional significance - indicates that the space or element has a primary role in understanding the distinct heritage significance of the place;
- High significance - indicates that the space or element has a secondary role in understanding the distinct heritage significance of the place;
- Some significance - signifies a minor role in understanding the distinct heritage significance of the place;
- Little significance - indicates that there is little or no contribution in an understanding the distinct heritage significance of the place;
- Intrusive - indicates that the heritage significance is adversely affected by the inclusion of the space or element.

The spaces are also assessed according to their relative levels of authenticity using the same graduated scale as for significance.

The assessments are made on the basis of the information available at the time of preparing this plan. As additional information becomes available the assessment of spaces and fabric may need to be revised.

The significant elements and associated fabric that have been identified comprise the following:[127]

Element	Degree of significance	Reason	Heritage values[128]	Authenticity
EXTERIOR				
East wing	Exceptional	One of three primary elements to the design of the building, the east wing housed patients and a toilet block and is the most visible wing of the hospital from the street.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional; the principal modification is the addition of plastic weatherboarding.
South wing	Exceptional	Although a rear wing, it houses many of the functional elements of the block including the kitchen, store rooms and living quarters.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional.
West wing	Exceptional	One of three primary elements to the design of the building, the west wing mirrors the east wing and	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional; the principal modification is the addition of plastic weatherboarding.

[126] Kerr, JS (2013), Conservation Plan: A Guide to the Preparation of Conservation Plans for Places of European Cultural Significance

[127] A detailed schedule of elements and fabric is included as Appendix 4, while photos of major elements and spaces are included in Appendix 7

[128] Refer Section 4.2 for more specific detail relating to these values

Element	Degree of significance	Reason	Heritage values[128]	Authenticity
		housed patients and a toilet block.		
Central wing	Exceptional	One of three primary elements to the design of the building, the central wing housed the dining room which doubled as a recreation space.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional; the principal modification is the addition of plastic weatherboarding.
Roof	Exceptional	The hipped roofs with lanterns and a unique characteristic of the hospital design.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	High; the reroofing in corrugated steel and the removal/modifications to chimneys have reduced the degree of authenticity.
INTERIOR				
Central wing dining hall	Exceptional	The central focus of the planning of the building housing the principal recreation and dining space of the building.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional: the insertion of non-historic joinery has reduced the level of authenticity to a small extent .
East side dispensary	High	The original use of the room is not known but is associated with the dining hall and has its own fireplace.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional: the insertion of non-historic joinery has reduced the level of authenticity to a small extent.
East and west corridors	Exceptional	The corridors are the principal circulation spaces between the east, west and central wing and giving access to individual bedrooms.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional: the insertion of non-historic joinery has reduced the level of authenticity to a small extent.
East and west single bedrooms	High	Individual bedrooms for officers and visitors.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional.
East and west octagonal hospital wings with raised central nurses' station	Exceptional	Original, principal hospital wards and supervision spaces	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional: the insertion of non-historic partitions has reduced the level of authenticity to a small extent
Corridors to and toilet blocks to east and west hospital wings	Exceptional	Original functional spaces of exceptional authenticity	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional

Element	Degree of significance	Reason	Heritage values[128]	Authenticity
Rooms off corridor to toilets to east and west hospital wings	High	Spaces possibly for staff/officers.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional
Whare iti (former kitchen?)	Exceptional	A principal functional space, understood to be the kitchen, that provided meals to patients and medical and military staff	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	Exceptional
Other spaces	High	Secondary, functional spaces such as ablutions and accommodation.	A, T&E, R, Rep, C or G, P, E, Pa, Pe, Ed	High; new joinery, linings and fittings have reduced the authenticity of these spaces.

4.4 Summary Statement of Heritage Significance

- The Soldiers' Block is of **high, national, potential, international, significance** due to its collective associated physical, historic and cultural heritage values.
- The building is one of two remaining 'Soldiers' Block' hospitals in New Zealand and the only one remaining on its original site. The design was to accommodate soldiers injured in the First World War and is believed to be unique internationally.
- Its design is based on the contemporary belief in fresh air, good ventilation, sun and located in a park-like setting to improve recovery for patients. The uncommon octagonal form of the wards with a central octagonal nurses' station was an efficient plan to maximise patients and minimise staff necessary for supervision.
- The building, the first to be constructed at the hospital, is associated with its architects, nationally recognised firm Hoggard, Prouse and Gummer and the Public Works Department who commissioned and built it and is largely authentic in design, materials, craftsmanship and setting.
- The building is one of a group of buildings with very high heritage values in the nationally significant Queen Mary Hospital complex established to treat returned soldiers and later the only such facility in New Zealand giving treatment of addictions, where treatment was voluntary and where innovative programmes were offered for the first time in the country.
- There is very high local and national public esteem for the site and buildings.

5.0 Hurunui District Council requirements[129]

> The building has been unoccupied for the last 18 years and the Council has had numerous attempts at attracting a use(s) for the building. The latest QS is $5.2million to earthquake strengthen and restore the building. The Council has not been successful in securing funding support to get this work done. The Council currently has $1.3 million set aside. The Council has a limited budget of $100k for maintenance for the whole site which is largely spent on security, vandalism repair, gutter cleaning and grounds maintenance. The building continues to deteriorate under the minimum maintenance plan. There is a strong community desire to see the building opened up for multi-use community facility and a business use that will sustain the ongoing maintenance costs of building. There will need to be flexibility in retaining the important historic elements of the building and allowing for adaptation to meet building standards and the requirements of a suitable new use(s).

It should be noted that HDC meets with HNZPT representatives to view the site, in particular to the interior of the Soldiers' Block. The HNZPT has given its support for funding applications.

[129] Email from Judith Batchelor 22 July 2022

6.0 Conservation Considerations

6.1 Influences on Conservation Policy

There are a number of statutory and non-statutory instruments that will assume an influential role in the future management and development of the Soldiers' Block . Those of particular relevance are as follows:

6.1.1 Heritage New Zealand Pouhere Taonga Act 2014 (HNZPTA)

As described in 3.1 above, the whole site, including the thermal baths, was listed as the Queen Mary Hospital (Former) and Hanmer Springs Thermal Reserve Historic Area Historic Area by Heritage New Zealand Pouhere Taonga (HNZPT), list number 7583, registered on 10 December 2004. The Queen Mary Hospital, including the Soldiers' Block, excluding the thermal baths area, was listed as an historic place category I with HNZPT, register number 7612, on 24 June 2005.

The List is an important repository of information about historic places, historic areas, wāhi tūpuna, wāhi tapu and wāhi tapu areas throughout New Zealand. However, it should be noted that entry on the List:[130]

- Does not equate to automatic protection;
- Does not directly create regulatory consequences or legal obligations on property owners;
- Does not directly create specific rights or control over property; and
- Can result in heritage properties being considered for inclusion in district plan heritage schedules under section 74(2)(b) of the RMA.

As the Soldiers' Block replaces a building constructed in 1897, the site constitutes an archaeological site for the purposes of Part 3, Subpart 2 (archaeological sites) of the HNZPTA.[131] Consequently, any future works that could result in any part of the building or site being modified or destroyed would necessitate an authority to be sought and obtained from HNZPT prior to commencement.[132]

6.1.2 Building Act 2004 (BA)

The BA regulates all building work in New Zealand and outlines the functions of territorial authorities as building consent authorities.

In exercising functions under the BA, building consent authorities need to ensure that buildings are safe, promote physical independence and wellbeing, have adequate fire escape provisions and are designed, constructed and able to be used in ways that promote sustainable development. Additionally, all those performing functions/duties or exercising powers under the Act are, amongst other matters, required to consider the following principles:

[130] Refer http://www.heritage.org.nz/the-list/about-the-list; accessed June 2022

[131] Under s.6 Interpretation of the HNZPTA an archaeological site includes any building or structure (or part of a building or structure) associated with human activity that occurred before 1900

[132] Refer s.42, HNZPTA

- The importance of recognising any special traditional and cultural aspects of the intended use of a building;[133] and
- The need to facilitate the preservation of buildings of significant cultural, historical or heritage value.[134]

Regardless, there can be tensions between the requirements of the BA and the purpose and principles of the RMA and HNZPTA. These stem from the focus on ensuring building safety, amenity and access under the BA as opposed to the stronger protective bias under the RMA and HNZPTA. [135]

Although the general repair, maintenance and replacement of existing building components are exempted from building consent,[136] any alteration is likely to require a building consent and will need to satisfy the relevant requirements of the BA.

6.1.3 Building (Earthquake-prone Buildings) Amendment Act 2016 (BAA)

The BAA amended the provisions of the BA that apply to earthquake-prone buildings[137] and took effect from July 2017.

Under the new system:

- The threshold for defining an earthquake-prone building remains,[138] with amendments to clarify certain aspects (including that it applies to parts of buildings). In practice, this equates to any building that is less than 34 per cent of the new building standard; and
- New Zealand is categorised into areas of high, medium and low seismic risk[139] (with timeframes for identifying potentially earthquake-prone buildings of five, 10 and 15 years,[140] and timeframes for strengthening earthquake-prone buildings of 15, 25 and 35 years,[141] dependent on the seismic risk of the area).

The BAA also introduced a new requirement to remediate earthquake-prone buildings when substantial alterations are undertaken[142] and, in terms of historic heritage, provides an opt-in extension of up to 10 years to remediate any Category 1 or National Historic Landmarks listed heritage buildings identified as being earthquake prone.[143]

In the event that the Soldiers' Block is assessed as being earthquake prone the relevant remedial provisions of the BA would need to be satisfied.

[133] Refer s.4(2)(d), BA

[134] Refer s.4(2)(l), BA

[135] Refer s.6(f), RMA and ss.39 and 42, HNZPTA

[136] Refer cls.1 & 2, Part 1, Schedule 1, BA

[137] Refer Ministry of Business, Innovation & Employment, How the system for managing earthquake-prone buildings works, https://www.building.govt.nz/managing-buildings/managing-earthquake-prone-buildings/how-the-system-works/, accessed July 2021

[138] Refer s.133AB, BA

[139] Refer s.133AD, BA

[140] Refer s.133AG(4), BA

[141] Refer s.133AM(2), BA

[142] Refer s.133AT, BA

[143] Refer s.133AO, BA

6.1.4 The Resource Management Act 1991 (RMA)

Under section 6(f) of the RMA the protection of historic heritage from inappropriate subdivision, use and development is a matter of national importance.

Historic heritage is further defined[144] as 'those natural and physical resources that contribute to an understanding and appreciation of New Zealand's history and cultures, derived from the associated archaeological, architectural, cultural, historic, scientific or technical qualities they possess'. Such resources include:

- Historic sites, structures, places and areas;
- Archaeological sites;
- Sites significant to Maori, including wahi tapu; and
- Surroundings associated with these resources.

The requirement to protect historic heritage is largely facilitated through the policy and regulatory framework contained in policy statements and district plans prepared and administered by local authorities. This includes the need for a resource consent to be sought and obtained for any works that could have an adverse effect on identified heritage values. In preparing or changing their district plans territorial authorities are also required to have regard to any relevant entry on the New Zealand Heritage List/Rārangi Kōrero administered by HNZPT.[145]

Provision is also made in the RMA for the issuing of a Heritage Order to protect:

(a) Any place of special interest, character, intrinsic or amenity value or visual appeal, or of special significance to the tangata whenua for spiritual, cultural, or historical reasons; and

(b) Such area of land (if any) surrounding that place as is reasonably necessary for the purpose of ensuring the protection and reasonable enjoyment of that place.[146]

6.1.5 Hurunui Operative District Plan 2000 (HODP)[147]

The building is included in the HODC Schedule 14.1 – Historic buildings and structures, and the site on which it is located is also listed as an historic area.

Given its individual heritage listing and location within an historic area, all future work (e.g. maintenance, repair, alterations) on the building will need to comply with the relevant provisions of the HODC, a statutory instrument prepared by Hurunui District Council (HDC) to assist it to carry out its functions under the RMA. Rules are described in section 14.4 with assessment criteria in section 14.5 3 Heritage Resources within the Queen Mary Hospital Heritage Zone.

6.1.6 Canterbury Regional Policy Statement 2013, 2021 (CRPS)

Chapter 13-Historic Heritage describes issues, objectives and policies relating to historic heritage. The introduction explains how historic heritage contributes to Canterbury's unique identity:

[144] Refer s.2, RMA

[145] Refer s.74(2)(b)(iia), RMA

[146] Refer s.189(1), RMA

[147] Note: the operative plan is currently in the process of being reviewed, with a proposed plan anticipated to be publicly notified and open for submission in August/September 2022 – consequently, the outcome of this process could result in changes being made to the current planning settings outlined within this section of the plan

> *The diversity of heritage items, places and areas, including historic cultural and historic heritage landscapes, and the cultures and eras they represent, contribute to the regional sense of identity. The cumulative loss of these heritage items, places and areas and their values can diminish that sense of identity.*

The recognition and management of historic and cultural heritage and historic cultural and heritage landscapes is required of local and territorial authorities by the CPRS which lists assessment criteria for these items.

6.1.7 ICOMOS NZ Charter 2010

The International Council on Monuments and Sites (ICOMOS) is a non-governmental body organised through UNESCO that promotes the practice and standards of conservation through its international and national committees. Each committee is required to determine standards for conservation in its member country. The New Zealand National Committee of ICOMOS is recognised by HNZPT, the Department of Conservation and many local authorities as the body responsible for establishing ethical considerations and standards relating to heritage conservation in New Zealand.

In 2010 the New Zealand National Committee published a revised ICOMOS New Zealand Charter (refer Appendix 1). The Charter is the guiding standard for conservation in New Zealand and the Old Government Buildings Conservation Plan has been prepared to comply with its associated principles. All future decisions relating to the conservation of the structure should be made according to these principles, including ensuring that any proposed interventions are consistent with the accepted international conservation practice outlined in the Charter.

Key principles in the Charter can be summarised as follows:[148]

- All work should be thoroughly documented;
- Any conservation work undertaken should be the minimum necessary and reversible where possible;
- Any changes should retain the significance of the place;
- Any change should be based on evidence, not conjecture;
- Prevention of further deterioration is desirable;
- Conservation work that would enable renewal of a significant use is desirable;
- Reconstruction may be desirable to improve interpretation; and
- Conservation work that helps to minimise identified risks or threats to the place is desirable.

Additional ICOMOS Charters and recommendations relevant to conserving the structure include the Riga Charter on Authenticity and Historical Reconstruction in Relation to Cultural Heritage (2000), the Nara Document (1994) and the 1993 World Management Guidelines for World Cultural Heritage Sites (ICCROM, UNESCO, ICOMOS) by Sir Bernard Feilden and Jukka Jokilehto.

[148] ICOMOS NZ (2010), ICOMOS New Zealand Charter for the Conservation of Places of Cultural Heritage Value, pgs.2-5; refer Appendix 1

6.2 Condition of significant elements

6.2.1 Architectural Survey

No architectural condition assessments of the building have been provided. However following the space by space inspection on 8 July, it is apparent that there are areas of rotten linings and cladding and a significant rodent infestation. External paintwork is in a poor condition and some external joinery is deteriorating

No structural survey has been provided.

6.3 Threats

A key component of the management of heritage places is identification of threats to their associated heritage values and implementation of appropriate actions to avoid, remedy or mitigate any actual or potential damage. The primary threats to the Soldiers' Block are highlighted below, with each grouped under a relevant theme. The associated heritage values that are potentially affected are also identified.

Threat	Explanation	Potentially affected value[149]
6.2.1	***Site ownership and building use***	
a	The building and site are currently owned by the HDC. Should the site be subdivided and/or sold, the heritage values and integrity of the complex would be put at risk.	CorG, P, Pa, I, Pe, Au
b	The building is currently empty and has no viable, sustainable use putting at risk the long term retention of the building.	All
6.2.2	***Loss of heritage value, significance and authenticity***	
c	Insensitive or inappropriate use, investigations, remedial work, maintenance, strengthening, restoration, reconstruction, adaptation or deterioration through neglect is likely to adversely affect identified physical and cultural values and the authenticity of building spaces and elements.	All
d	Loss of authenticity and the integrity due to modifications to the 1916/17 building designs, particularly the elevations, principal spaces and corridors through major intervention or small, incremental changes that cumulatively contribute to a loss of remaining fabric, spaces and heritage values.	A, R, Re, G, P, Pe, Ed, Au
6.2.3	***Management, maintenance and security***	
e	Ill-timed or inadequate/inappropriate care, design of, or modification to, significant spaces and elements that could result in the inadvertent loss	A, T&E, Rep, P, Pa Ed, Au

[149] Refer Section 4.2 for more specific detail relating to these values

Threat	Explanation	Potentially affected value[149]
	of their associated heritage values, including: • Exterior elevations; • roof; • principal interior spaces, and their associated details.	
f	Employing design professionals, building contractors and sub-contractors with little or no training and experience of cultural heritage conservation to advise or undertake work on the building is likely to impact on its associated heritage values, significance and authenticity.	A, T&E, R, Re, Pe, Au
g	The effective delivery of this repairs and maintenance can be influenced by conflicting or competing imperatives, such as the availability of dedicated funding.	A, T&E, R, Pe, Au, I
h	Visual and physical impacts on heritage values and fabric resulting from the insensitive installation of elements to enhance sustainability (e.g. thermal upgrading, solar panels, electric car charging facilities)	A, Au, Int
i	There is ongoing damage to the building from vandalism despite security and alarm systems.	A, T&E, Pe
j	The timing and way in which works or activities are designed and/or executed will have a bearing on the significance and integrity of the building. This may include, for example, works that are poorly specified, delays in undertaking required maintenance/repairs and unsympathetic remedial or restorative work.	A, R, C, Pe, Au, I
k	Resilience of the building to natural hazard events (e.g. seismic) and the nature and extent of any remedial measures required to counteract such events.	A, Au, Int
6.2.4	***Legislative influences***	
l	The requirement for statutory compliance with existing and future changes in legislation affecting the building, such as recent and far ranging changes to the Health and Safety and Building Acts, may impact on their authenticity, heritage values and significance.	A, T&E, R, C, Ed, Au
6.2.6	***Information loss and recording***	
m	Inadequate or insufficient recording of interventions to the building, such as modification, maintenance or repair, can present future challenges concerning the nature and timing of prior work undertaken. This could create confusion regarding determination of original or later fabric and compromise the ability to monitor the efficacy of previous interventions.	A, R, Au
n	Failure to record interventions and appropriately curate associated archival information (e.g. documents, photographs, oral histories) could result in a diminished understanding of allied heritage values and the	A, R, Au

Threat	Explanation	Potentially affected value[149]
	success or otherwise of the interventions.	
6.2.5	***Understanding of heritage values***	
o	An inadequate understanding of the building's associated heritage values could result in the inadvertent loss of heritage fabric or decisions concerning its future use that are not fully informed.	A, T&E, R, C, Ed, Au
6.2.6	***Monitoring***	
p	In the absence of regular monitoring appropriate conservation actions to rectify any damage/deterioration to the building may be unable to be designed and implemented within necessary timeframes.	A, T&E, R, C, Au

7.0 Managing the Place

7.1 Conservation Policies, Actions and Priorities

The conservation policies and actions tabulated below have been developed in response to:

- The significant heritage values associated with the buildings, setting and constituent elements identified in section 4.2; and
- The potential threats to these values identified in section 6.3.

Their primary intention is to inform the ongoing care of the buildings and setting, with mitigation of any construction and operational related effects being addressed through relevant management plans and operational procedures.

To help put the policies into context and to aid their implementation the table also identifies the relevant threat/s to which they are a response along with their relative priority. The priorities have been assessed and assigned using the following graduated scale:

- Immediate – To be implemented instantly;
- Urgent – To be implemented within three months;
- Necessary – To be implemented within three years;
- On-going – To be implemented within the life of the plan (10yrs);
- Desirable – To be implemented where possible within the life of the plan (10yrs); and
- Indefinite – To be implemented over the life of the plan (10yrs) and beyond.

7.1.1 Policies

Identified Threat[150]	Policy No.	Policy	Priority
General			
All	7.1.1.1	The policies identified in this Plan should be adopted by those responsible for managing the building and site to ensure there is agreement on its use, future management, maintenance, repair and other conservation interventions.	Necessary
c—k, m-p	7.1.1.2	All conservation work including investigations, remedial work, maintenance, strengthening, restoration, and reconstruction should be consistent with this Plan, the I*COMOS NZ Charter for the Conservation of Places of Cultural Heritage Value 2010*.	On-going

[150] Refer Section 6.3

Identified Threat[150]	Policy No.	Policy	Priority
b-f, h, j, k	7.1.1.3	Retention and conservation of the extant 1916/17 building designs, particularly the elevations, principal spaces and corridors, should be a prevailing consideration in any future decisions to modify or change the use or configuration of the building.	On-going
a	7.1.1.4	On-going retention of the building and associated site in HDC ownership.[151]	Indefinite
Management and Use			
Use			
b, c, o	7.1.1.5	A compatible use should be established for the building that is sympathetic to the functional intent reflected in the extant 1916/17 building designs, while retaining in their original state fabric and spaces identified in this Plan as having a high-exceptional degree of significance.	On-going
c, d, e, h	7.1.1.6	Any modifications required to the spaces and elements in order adapt the building to a new use should be located in building spaces that have a relatively low sensitivity to change and are identified in this Plan as having a low – moderate degree of significance.	On-going
Conservation including Maintenance and Repair			
Skills			
c-f, h, j, m, n	7.1.1.7	All design, planning, documentation and resulting conservation interventions such as maintenance, repair and stabilisation work should be undertaken or supervised by competent people with appropriate built heritage conservation qualifications, training and experience, including tradespeople and/or conservators.	Indefinite
c-f, h, j, m, n	7.1.1.8	Relevant external consultants should be engaged where requisite in-house conservation skills or knowledge is either inadequate or unavailable.	Indefinite

[151] Note: Due to the potential "binding" nature of this policy no associated action has been included in section 7.2 – Actions of this plan. Regardless, it has been included here to recognise and reinforce the long-standing, established, historical connection that exists between the Crown and the building and associated site and that it would be undesirable for this relationship to be either deliberately or unintentionally severed.

Identified Threat[150]	Policy No.	Policy	Priority
Building stabilisation, maintenance and repair			
c, g, j, m	7.1.1.9	All investigative works should be of a non-destructive nature or the minimum required where this is impracticable; any such works should also be discretely located, based on the advice of a person with appropriate built heritage conservation qualifications and experience. Any subsequent repairs required should match the surrounding fabric.	Indefinite
c-f, j, k	7.1.1.10	Any structural design work commissioned should comply with national and international best practice guidelines relevant to strengthening heritage buildings.	Indefinite
c, e, g, j, m	7.1.1.11	Maintenance and repair of the building should be undertaken within timeframes commensurate with the identified condition of individual spaces and elements, and to a high standard to ensure it is maintained in a good condition.	Indefinite
Restoration/reconstruction, adaptation			
c-f, g, j	7.1.1.12	Any restoration, reconstruction or adaptation of the building should be guided by the heritage values identified in this Plan relevant to the spaces, elements and/or fabric to which these works apply (refer section 4.2). Existing heritage values should not be reduced and, wherever possible, heritage values should be enhanced by the restoration/reconstruction of significant spaces and elements.	On-going
c-f, g, j, m, n	7.1.1.13	Wherever possible, restoration/reconstruction of any fabric or elements of high-exceptional heritage value identified in this Plan should be undertaken in a manner that enables any changes to be reversed in future.	On-going
m, n	7.1.1.14	Where restoration, reconstruction or adaptation necessitates the removal of any fabric or elements of high-exceptional heritage value identified in this Plan, any such work should be appropriately documented, archived and monitored.	On-going
a, b, g, l	7.1.1.15	Any new services installations (e.g. security, mechanical, electrical, solar panels, communications and fire safety), fixtures or fittings introduced should be located in spaces of low-moderate heritage value identified in this Plan and be discretely positioned to avoid adverse visual and physical impacts on the building.	On-going

Identified Threat[150]	Policy No.	Policy	Priority
Fittings and fabric			
c-e, h, m	7.1.1.16	All existing elements, fittings and fixtures identified in this Plan as being historic fabric[152] should be retained in situ, and be maintained and repaired, where necessary.	On-going
Protection of fabric			
i, k	7.1.1.17	Protective measures should be designed and implemented to ensure that the spaces, elements and fabric identified in this Plan as having a high-exceptional degree of significance are appropriately safeguarded from potential threats such as fire, natural hazard events or human induced damage.	On-going
Legislative protection			
o	7.1.1.18	Retention of the building on the heritage lists administered by HDC and HNZPT should continue given its significant national heritage value.	Indefinite
b , o	7.1.1.19	Those responsible for managing the building should continue to constructively engage and collaborate with those responsible for its oversight and other statutory authorities with an interest in the protection and conservation of the building such as HNZPT.	Indefinite
Planning and management			
a-g, i, k, l, m-p	7.1.1.20	Management and conservation of the building by its owner/administrator should be undertaken in a systematic and co-ordinated manner, including suitable provision being made for such matters as routine maintenance and recovery from natural disaster events.	Indefinite
a-k, l, m-p	7.1.1.21	Those responsible for the day-to-day management of the building should be knowledgeable about its associated heritage values and have the capacity and capability to ensure they are competently managed.	Indefinite
c-e, j, m, n, p	7.1.1.22	Adequate conservation safeguards should be included in all contract and tender documentation consistent with the heritage values of the building and the policies and actions contained in this Plan.	On-going

[152] Refer Appendix 4 schedule of elements and fabric

Identified Threat[150]	Policy No.	Policy	Priority
Funding			
a, b, g	7.1.1.23	Adequate funding should be provided to facilitate the effective, on-going conservation of the building, as well as the professional curation and organisation of archival systems dedicated to the history, conservation and maintenance of the building.	Indefinite
Statutory requirements			
d, f, k, l	7.1.1.24	All statutory requirements should be complied with, and careful attention applied to any requirements that have the potential to compromise the character and integrity of significant spaces, elements or fabric identified within this Plan.	On-going
Interpretation			
o	7.1.1.25	An active, co-ordinated approach to research and interpretation of the building and its associated heritage values should be adopted.	Indefinite
Documentation and Monitoring			
b, e, i, k, m, n, p	7.1.1.26	Heritage fabric should continue to be documented to ensure that an accurate, up to date record is available in the event of damage/loss resulting from vandalism, theft, arson or natural disaster.	Indefinite
f, m, n, p	7.1.1.27	All work to the building, including maintenance, repair, restoration, reconstruction and adaptation, and any associated advice should be appropriately recorded and/or documented and systematically archived as part of the building's historic record.	Indefinite
p	7.1.1.28	The condition of the building and its associated heritage values should be regularly monitored and re-evaluated as part of an ongoing programme of condition assessment to prevent loss of heritage value and inform prioritisation of future conservation works.	Indefinite

7.1.2 Actions

Action No.	Action	Priority	Relevant Policy from section 7.1.1
General			
7.1.2.1	The Plan is a 'living document' and should be reviewed, at a minimum, every 10 years or following major work to spaces of high-exceptional heritage value or as new, material information becomes available.	On-going	7.1.1.1 7.1.1.2

Action No.	Action	Priority	Relevant Policy from section 7.1.1
Protection			
7.1.2.2	Ensure that the existing level of protection afforded the building through listing on the Hurunui District Plan is maintained.	Indefinite	7.1.1.18
7.1.2.3	Continue with regular meetings with representatives of HNZPT to mutually share relevant information/updates regarding the on-going conservation and protection of the building.	Desirable	7.1.1.19
Conservation including Maintenance and Repair			
Maintenance and repair			
7.1.2.4	Prepare and regularly update a condition survey of the building to enable repairs schedules to be drawn up and implemented.	Indefinite	7.1.1.2 7.1.1.11 7.1.1.20 7.1.1.21
7.1.2.5	Prepare and implement a preventative cyclical maintenance plan relating to fabric and spaces of high-exceptional heritage value identified in this Plan, and review the maintenance plan on a 3 yearly basis to ensure it remains relevant.	On-going	7.1.1.2 7.1.1.7 7.1.1.11 7.1.1.20 7.1.1.21 7.1.1.27 7.1.1.28
7.1.2.6	Retain fabric of high-exceptional heritage value identified in this Plan unless it is in a severely deteriorated condition or is required to be removed to meet legislative requirements or for health and safety reasons.	On-going	7.1.1.2 7.1.1.3 7.1.1.6 7.1.1.9 7.1.1.10 7.1.1.11 7.1.1.12 7.1.1.13 7.1.1.14 7.1.1.16
7.1.2.7	Use traditional techniques and materials to conserve fabric of high-exceptional heritage value identified in this Plan unless modern techniques and materials offer significant conservation benefits.	On-going	7.1.1.2 7.1.1.10 7.1.1.11
7.1.2.8	Review activities and associated budgets relating to the maintenance of the heritage values of fabric and spaces of high-exceptional significance identified in this Plan on an annual basis.	On-going	7.1.1.2 7.1.1.7

Restoration/reconstruction, adaptation

Action No.	Action	Priority	Relevant Policy from section 7.1.1
7.1.2.9	Limit the degree of intervention to any spaces and/or fabric identified in this Plan as having high-exceptional heritage value to preservation, repair, maintenance, and minor adaptation, and only to the extent necessary to meet essential statutory or operational requirements. Spaces and fabric identified as being of lower heritage value are less constrained and therefore better suited to adaptation, if required. The advice of an appropriately qualified and experienced conservation architect should be sought prior to undertaking any work involving adaptation.	On-going	7.1.1.2 7.1.1.3 7.1.1.7 7.1.1.8 7.1.1.9 7.1.1.10 7.1.1.15 7.1.1.19 7.1.1.20
7.1.2.10	Discreetly label any new/replacement fabric introduced to enable it to be easily recognised as such on inspection.	Indefinite	7.1.1.2 7.1.1.27
7.1.2.11	Consider, and, if appropriate, prepare and implement a timeline to restore and/or reconstruct key original elements, including: • Restoring all chimneys and pots to their original design; • Repainting using the original colour palette; • Restoring the original weatherboards, flagpoles; • Removal of partitions in the octagonal wings.	Desirable	7.1.1.2 7.1.1.3 7.1.1.12 7.1.1.14
7.1.2.12	Install any new internal or external facilities/security measures, or modification of existing facilities/measures in accordance with the specifications/standards contained in the follow documents (or subsequent updates): • Heritage New Zealand, Sustainable Management of Historic Heritage Guidance Information Sheet 12, *Alterations and additions to historic buildings*, 2007; • English Heritage, C*onservation Principles Polices and Guidance*, 2008; • US National Park Service, Secretary of the Interior's Standards for Rehabilitation, 36 CFR 67.	Indefinite	7.1.1.2 7.1.1.7 7.1.1.8 7.1.1.10 7.1.1.12 7.1.1.13 7.1.1.14 7.1.1.15 7.1.1.17

Action No.	Action	Priority	Relevant Policy from section 7.1.1
7.1.2.13	Install any photovoltaic cells or other elements to enhance sustainability in the operations of the building in accordance with the specifications/standards contained in the follow documents (or subsequent updates): • Historic England, *Energy Efficiency and Historic Buildings Solar Electric (Photovoltaics*) , v1.1 November 2018, Historic England. • *Solar Panel Guidelines*, Government of South Australia, through the Department of Environment, Water and Natural Resources, 2013; • Kimberly Kooles and Caty Rushing, National Alliance of Preservation Commissions, *Sample Guidelines for Solar Systems in Historic Districts, Athens, Georgia*, 2011; • A. Kandt, E. Hotchkiss, and A. Walker, National Renewable Energy Laboratory, J. Buddenborg and J. Lindberg , National Trust for Historic Preservation, Technical Report, NREL/TP-7A40-51297, *Implementing Solar PV Projects on Historic Buildings and in Historic Districts* , Office of Energy Efficiency & Renewable Energy, 2011.	Indefinite	7.1.1.2 7.1.1.3 7.1.1.12 7.1.1.15
Structural and fire considerations			
7.1.2.14	Any structural strengthening to the building should be informed by relevant guidance contained in the following documents (or subsequent updates): • David W. Look, AIA, Terry Wong, PE, and Sylvia Rose Augustus, The Seismic Retrofit of Historic Buildings Keeping Preservation in the Forefront, Conservation Bulletin 41, US National Park Service; • Ian Bowman and Lou Robinson, Guidelines for Earthquake Strengthening, New Zealand Historic Places Trust; • NZNSEE 2008 Conference proceedings, A.G. Cattanach, G.W. Alley and A.W. Thornton, Appropriateness of Seismic Strengthening Interventions in Heritage Buildings: A Framework for Appraisal .	Indefinite	7.1.1.2 7.1.1.7 7.1.1.9 7.1.1.10
7.1.2.15	Design any new structural work required on the building in conjunction with a person appropriately qualified, experienced and trained in built heritage conservation.	On-going	7.1.1.2 7.1.1.7 7.1.1.8 7.1.1.10
Planning and management			
Funding			
7.1.2.16	Prepare a long-term conservation budget for the building based on the findings of the condition survey and actions identified in the cyclical preventative maintenance plan. The budget should be reviewed annually to ensure the timely and systematic prioritisation of these works.	Indefinite	7.1.1.23

Action No.	Action	Priority	Relevant Policy from section 7.1.1
Management			
7.1.2.17	Widely socialise the Plan with those involved with oversight of the building and ensure suitable training in its use and application is undertaken by those responsible for its day-to-day management.	On-going	7.1.1.10 7.1.1.20 7.1.1.21
7.1.2.18	Review existing standard contract and tender documentation (e.g. standard templates) used to procure services on the building to ensure that: • It clearly sets out the heritage expectations sought for any future work, including appropriate conservation safeguards; • Contractors are appropriately trained and supervised to undertake such work; and • Appropriate induction training is provided prior to commencement of any works. The review should be undertaken in conjunction with a person appropriately qualified, experienced and trained in heritage conservation.	Indefinite	7.1.1.22
7.1.2.19	Establish an induction process for contractors involved in any major works on the building, supported by engagement of an appropriately qualified and experienced site supervisor.	Indefinite	7.1.1.20 7.1.1.21
Use			
7.1.2.20	Undertake an assessment of existing uses within the building and on the site to determine their compatibility relative to the heritage values identified in this Plan.	Necessary	7.1.1.3 7.1.1.21 7.1.1.22
Access and Security			
7.1.2.21	Undertake a review of existing security requirements to determine any detrimental effects on spaces and fabric identified in this Plan as having high-exceptional heritage value and prepare a mitigation plan to address any impacts identified.	On-going	7.1.1.17 7.1.1.20
Disaster planning			
7.1.2.22	Prepare and implement a Disaster Management Plan for the building which covers such matters as evacuation, emergency equipment storage and the emergency salvage of significant fabric in the event of an earthquake. The plan should be reviewed on an annual basis to ensure its continued relevance.	Urgent	7.1.1.2 7.1.1.17 7.1.1.20 7.1.1.26
7.1.2.23	As New Zealand is a signatory to the Hague Convention, [153]display the Hague symbol on the exterior of the building to alert relevant authorities to its heritage significance. Relevant authorities such as Civil Defence should also be notified of the significance of the building and the implications of the Hague Convention and advised that the Hague symbol will be displayed on the building.	Necessary	7.1.1.2 7.1.1.21

[153] This convention is centred around identifying and protecting cultural property from unnecessary demolition following a major natural event such as an earthquake or tsunami

Action No.	Action	Priority	Relevant Policy from section 7.1.1
Interpretation			
7.1.2.24	Regularly update any interpretive material developed for the building, augmented by new research into its history including oral histories of key people associated with its design, construction and use.	Desirable	7.1.1.2 7.1.1.25
Documentation and Monitoring			
7.1.2.25	Undertake future documentation of the building, including measured drawings and photography, based on the following standards (or subsequent updates): • HNZPT Archaeological Guidelines Series, *Investigation and Recording of Buildings and Standing Structures*, 2018; • Heritage Information Series, *Photographic Recording of Heritage Items Using Film or Digital Capture*, Heritage Office, Department of Planning, Parramatta NSW, 2006; • English Heritage, *Understanding Historic Buildings A guide to good recording practice*, English Heritage, 2006; • ICOMOS, *Principles for the recording of monuments, groups of buildings and sites*, 1996.	Indefinite	7.1.1.2 7.1.1.26 7.1.1.27
7.1.2.26	Ensure documentation relevant to the building and site and any associated work commissioned (e.g. plans, reports) is retained, compiled, entered on a database and stored in a manner that facilitates its long-term survival, accessibility and easy retrieval, particularly in the event of an emergency or a natural disaster.	Indefinite	7.1.1.2 7.1.1.26 7.1.1.27
7.1.2.27	Monitor the condition of heritage fabric on an annual basis. The condition of its associated heritage values should also be evaluated and reported on by a suitably qualified heritage professional every 5 years to ensure there is no noticeable decline.	Indefinite	7.1.1.2 7.1.1.20 7.1.1.26 7.1.1.28

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Appendix 1: ICOMOS New Zealand Charter for the Conservation of Places of Cultural Heritage Value (Revised 2010)

Preamble

New Zealand retains a unique assemblage of places of cultural heritage value relating to its indigenous and more recent peoples. These areas, cultural landscapes and features, buildings and structures, gardens, archaeological sites, traditional sites, monuments, and sacred places are treasures of distinctive value that have accrued meanings over time. New Zealand shares a general responsibility with the rest of humanity to safeguard its cultural heritage places for present and future generations. More specifically, the people of New Zealand have particular ways of perceiving, relating to, and conserving their cultural heritage places.

Following the spirit of the International Charter for the Conservation and Restoration of Monuments and Sites (the Venice Charter - 1964), this charter sets out principles to guide the conservation of places of cultural heritage value in New Zealand. It is a statement of professional principles for members of ICOMOS New Zealand.

This charter is also intended to guide all those involved in the various aspects of conservation work, including owners, guardians, managers, developers, planners, architects, engineers, craftspeople and those in the construction trades, heritage practitioners and advisors, and local and central government authorities. It offers guidance for communities, organisations, and individuals involved with the conservation and management of cultural heritage places.

This charter should be made an integral part of statutory or regulatory heritage management policies or plans, and should provide support for decision makers in statutory or regulatory processes.

Each article of this charter must be read in the light of all the others. Words in bold in the text are defined in the definitions section of this charter.

This revised charter was adopted by the New Zealand National Committee of the International Council on Monuments and Sites at its meeting on 4 September 2010.

Purpose of conservation

1. The purpose of conservation

The purpose of conservation is to care for places of cultural heritage value.

In general, such places:

- have lasting values and can be appreciated in their own right;
- inform us about the past and the cultures of those who came before us;
- provide tangible evidence of the continuity between past, present, and future;
- underpin and reinforce community identity and relationships to ancestors and the land; and
- provide a measure against which the achievements of the present can be compared.

It is the purpose of conservation to retain and reveal such values, and to support the ongoing meanings and functions of places of cultural heritage value, in the interests of present and future generations.

Conservation principles

2. Understanding cultural heritage value

Conservation of a place should be based on an understanding and appreciation of all aspects of its cultural heritage value, both tangible and intangible. All available forms of knowledge and evidence provide the means of understanding a place and its cultural heritage value and cultural heritage significance. Cultural heritage value should be understood through consultation with connected people, systematic documentary and oral research, physical investigation and recording of the place, and other relevant methods.

All relevant cultural heritage values should be recognised, respected, and, where appropriate, revealed, including values which differ, conflict, or compete.

The policy for managing all aspects of a place, including its conservation and its use, and the implementation of the policy, must be based on an understanding of its cultural heritage value.

3. Indigenous cultural heritage

The indigenous cultural heritage of tangata whenua relates to whanau, hapu, and iwi groups. It shapes identity and enhances well-being, and it has particular cultural meanings and values for the present, and associations with those who have gone before. Indigenous cultural heritage brings with it responsibilities of guardianship and the practical application and passing on of associated knowledge, traditional skills, and practices.

The Treaty of Waitangi is the founding document of our nation. Article 2 of the Treaty recognises and guarantees the protection of tino rangatiratanga, and so empowers kaitiakitanga as customary trusteeship to be exercised by tangata whenua. This customary trusteeship is exercised over their taonga, such as sacred and traditional places, built heritage, traditional practices, and other cultural heritage resources. This obligation extends beyond current legal ownership wherever such cultural heritage exists.

Particular mātauranga, or knowledge of cultural heritage meaning, value, and practice, is associated with places. Mātauranga is sustained and transmitted through oral, written, and physical forms determined by tangata whenua. The conservation of such places is therefore conditional on decisions made in associated tangata whenua communities, and should proceed only in this context. In particular, protocols of access, authority, ritual, and practice are determined at a local level and should be respected.

4. Planning for conservation

Conservation should be subject to prior documented assessment and planning.

All conservation work should be based on a conservation plan which identifies the cultural heritage value and cultural heritage significance of the place, the conservation policies, and the extent of the recommended works.

The conservation plan should give the highest priority to the authenticity and integrity of the place.

Other guiding documents such as, but not limited to, management plans, cyclical maintenance plans, specifications for conservation work, interpretation plans, risk mitigation plans, or emergency plans should be guided by a conservation plan.

5. Respect for surviving evidence and knowledge

Conservation maintains and reveals the authenticity and integrity of a place, and involves the least possible loss of fabric or evidence of cultural heritage value. Respect for all forms of knowledge and existing evidence, of both tangible and intangible values, is essential to the authenticity and integrity of the place.

Conservation recognises the evidence of time and the contributions of all periods. The conservation of a place should identify and respect all aspects of its cultural heritage value without unwarranted emphasis on any one value at the expense of others.

The removal or obscuring of any physical evidence of any period or activity should be minimised, and should be explicitly justified where it does occur. The fabric of a particular period or activity may be obscured or removed if assessment shows that its removal would not diminish the cultural heritage value of the place.

In conservation, evidence of the functions and intangible meanings of places of cultural heritage value should be respected.

6. Minimum intervention

Work undertaken at a place of cultural heritage value should involve the least degree of intervention consistent with conservation and the principles of this charter.

Intervention should be the minimum necessary to ensure the retention of tangible and intangible values and the continuation of uses integral to those values. The removal of fabric or the alteration of features and spaces that have cultural heritage value should be avoided.

7. Physical investigation

Physical investigation of a place provides primary evidence that cannot be gained from any other source. Physical investigation should be carried out according to currently accepted professional standards, and should be documented through systematic recording.

Invasive investigation of fabric of any period should be carried out only where knowledge may be significantly extended, or where it is necessary to establish the existence of fabric of cultural heritage value, or where it is necessary for conservation work, or where such fabric is about to be damaged or destroyed or made inaccessible. The extent of invasive investigation should minimise the disturbance of significant fabric.

8. Use

The conservation of a place of cultural heritage value is usually facilitated by the place serving a useful purpose.

Where the use of a place is integral to its cultural heritage value, that use should be retained.

Where a change of use is proposed, the new use should be compatible with the cultural heritage value of the place, and should have little or no adverse effect on the cultural heritage value.

9. Setting

Where the setting of a place is integral to its cultural heritage value, that setting should be conserved with the place itself. If the setting no longer contributes to the cultural heritage value of the place, and if reconstruction of the setting can be justified, any reconstruction of the setting should be based on an understanding of all aspects of the cultural heritage value of the place.

10. Relocation

The on-going association of a structure or feature of cultural heritage value with its location, site, curtilage, and setting is essential to its authenticity and integrity. Therefore, a structure or feature of cultural heritage value should remain on its original site.

Relocation of a structure or feature of cultural heritage value, where its removal is required in order to clear its site for a different purpose or construction, or where its removal is required to enable its use on a different site, is not a desirable outcome and is not a conservation process.

In exceptional circumstances, a structure of cultural heritage value may be relocated if its current site is in imminent danger, and if all other means of retaining the structure in its current location have been exhausted. In this event, the new location should provide a setting compatible with the cultural heritage value of the structure.

11. Documentation and archiving

The cultural heritage value and cultural heritage significance of a place, and all aspects of its conservation, should be fully documented to ensure that this information is available to present and future generations.

Documentation includes information about all changes to the place and any decisions made during the conservation process.

Documentation should be carried out to archival standards to maximise the longevity of the record, and should be placed in an appropriate archival repository.

Documentation should be made available to connected people and other interested parties. Where reasons for confidentiality exist, such as security, privacy, or cultural appropriateness, some information may not always be publicly accessible.

12. Recording

Evidence provided by the fabric of a place should be identified and understood through systematic research, recording, and analysis.

Recording is an essential part of the physical investigation of a place. It informs and guides the conservation process and its planning. Systematic recording should occur prior to, during, and following any intervention. It should include the recording of new evidence revealed, and any fabric obscured or removed.

Recording of the changes to a place should continue throughout its life.

13. Fixtures, fittings, and contents

Fixtures, fittings, and contents that are integral to the cultural heritage value of a place should be retained and conserved with the place. Such fixtures, fittings, and contents may include carving, painting, weaving, stained glass, wallpaper, surface decoration, works of art, equipment and machinery, furniture, and personal belongings.

Conservation of any such material should involve specialist conservation expertise appropriate to the material. Where it is necessary to remove any such material, it should be recorded, retained, and protected, until such time as it can be reinstated.

Conservation processes and practice

14. Conservation plans

A conservation plan, based on the principles of this charter, should:

- Be based on a comprehensive understanding of the cultural heritage value of the place and assessment of its cultural heritage significance;
- Include an assessment of the fabric of the place, and its condition;
- Give the highest priority to the authenticity and integrity of the place;
- Include the entirety of the place, including the setting;
- Be prepared by objective professionals in appropriate disciplines;
- Consider the needs, abilities, and resources of connected people;
- Not be influenced by prior expectations of change or development;
- Specify conservation policies to guide decision making and to guide any work to be undertaken;
- Make recommendations for the conservation of the place; and
- Be regularly revised and kept up to date.

15. Conservation projects

Conservation projects should include the following:

- Consultation with interested parties and connected people, continuing throughout the project;
- Opportunities for interested parties and connected people to contribute to and participate in the project;
- Research into documentary and oral history, using all relevant sources and repositories of knowledge;
- Physical investigation of the place as appropriate;
- Use of all appropriate methods of recording, such as written, drawn, and photographic;
- The preparation of a conservation plan which meets the principles of this charter;
- Guidance on appropriate use of the place;
- The implementation of any planned conservation work;
- The documentation of the conservation work as it proceeds; and
- Where appropriate, the deposit of all records in an archival repository.

A conservation project must not be commenced until any required statutory authorisation has been granted.

16. Professional, trade, and craft skills

All aspects of conservation work should be planned, directed, supervised, and undertaken by people with appropriate conservation training and experience directly relevant to the project.

All conservation disciplines, arts, crafts, trades, and traditional skills and practices that are relevant to the project should be applied and promoted.

17. Degrees of intervention for conservation purposes

Following research, recording, assessment, and planning, intervention for conservation purposes may include, in increasing degrees of intervention:

- Preservation, through stabilisation, maintenance, or repair;
- Restoration, through reassembly, reinstatement, or removal;
- Reconstruction; and
- Adaptation.

In many conservation projects a range of processes may be utilised. Where appropriate, conservation processes may be applied to individual parts or components of a place of cultural heritage value.

The extent of any intervention for conservation purposes should be guided by the cultural heritage value of a place and the policies for its management as identified in a conservation plan. Any intervention which would reduce or compromise cultural heritage value is undesirable and should not occur.

Preference should be given to the least degree of intervention, consistent with this charter.

Re-creation, meaning the conjectural reconstruction of a structure or place; replication, meaning to make a copy of an existing or former structure or place; or the construction of generalised representations of typical features or structures, are not conservation processes and are outside the scope of this charter.

18. Preservation

Preservation of a place involves as little intervention as possible, to ensure its long-term survival and the continuation of its cultural heritage value.

Preservation processes should not obscure or remove the patina of age, particularly where it contributes to the authenticity and integrity of the place, or where it contributes to the structural stability of materials.

i. Stabilisation

Processes of decay should be slowed by providing treatment or support.

ii. Maintenance

A place of cultural heritage value should be maintained regularly. Maintenance should be carried out according to a plan or work programme.

iii. Repair

Repair of a place of cultural heritage value should utilise matching or similar materials. Where it is necessary to employ new materials, they should be distinguishable by experts, and should be documented.

Traditional methods and materials should be given preference in conservation work.

Repair of a technically higher standard than that achieved with the existing materials or construction practices may be justified only where the stability or life expectancy of the site or

material is increased, where the new material is compatible with the old, and where the cultural heritage value is not diminished.

19. Restoration

The process of restoration typically involves reassembly and reinstatement, and may involve the removal of accretions that detract from the cultural heritage value of a place.

Restoration is based on respect for existing fabric, and on the identification and analysis of all available evidence, so that the cultural heritage value of a place is recovered or revealed. Restoration should be carried out only if the cultural heritage value of the place is recovered or revealed by the process.

Restoration does not involve conjecture.

i. Reassembly and reinstatement

Reassembly uses existing material and, through the process of reinstatement, returns it to its former position. Reassembly is more likely to involve work on part of a place rather than the whole place.

ii. Removal

Occasionally, existing fabric may need to be permanently removed from a place. This may be for reasons of advanced decay, or loss of structural integrity, or because particular fabric has been identified in a conservation plan as detracting from the cultural heritage value of the place.

The fabric removed should be systematically recorded before and during its removal. In some cases it may be appropriate to store, on a long-term basis, material of evidential value that has been removed.

20. Reconstruction

Reconstruction is distinguished from restoration by the introduction of new material to replace material that has been lost.

Reconstruction is appropriate if it is essential to the function, integrity, intangible value, or understanding of a place, if sufficient physical and documentary evidence exists to minimise conjecture, and if surviving cultural heritage value is preserved.

Reconstructed elements should not usually constitute the majority of a place or structure.

21. Adaptation

The conservation of a place of cultural heritage value is usually facilitated by the place serving a useful purpose. Proposals for adaptation of a place may arise from maintaining its continuing use, or from a proposed change of use.

Alterations and additions may be acceptable where they are necessary for a compatible use of the place. Any change should be the minimum necessary, should be substantially reversible, and should have little or no adverse effect on the cultural heritage value of the place.

Any alterations or additions should be compatible with the original form and fabric of the place, and should avoid inappropriate or incompatible contrasts of form, scale, mass, colour, and material. Adaptation should not dominate or substantially obscure the original form and fabric,

and should not adversely affect the setting of a place of cultural heritage value. New work should complement the original form and fabric.

22. Non-intervention

In some circumstances, assessment of the cultural heritage value of a place may show that it is not desirable to undertake any conservation intervention at that time. This approach may be appropriate where undisturbed constancy of intangible values, such as the spiritual associations of a sacred place, may be more important than its physical attributes.

23. Interpretation

Interpretation actively enhances public understanding of all aspects of places of cultural heritage value and their conservation. Relevant cultural protocols are integral to that understanding, and should be identified and observed.

Where appropriate, interpretation should assist the understanding of tangible and intangible values of a place which may not be readily perceived, such as the sequence of construction and change, and the meanings and associations of the place for connected people.

Any interpretation should respect the cultural heritage value of a place. Interpretation methods should be appropriate to the place. Physical interventions for interpretation purposes should not detract from the experience of the place, and should not have an adverse effect on its tangible or intangible values.

24. Risk mitigation

Places of cultural heritage value may be vulnerable to natural disasters such as flood, storm, or earthquake; or to humanly induced threats and risks such as those arising from earthworks, subdivision and development, buildings works, or wilful damage or neglect. In order to safeguard cultural heritage value, planning for risk mitigation and emergency management is necessary.

Potential risks to any place of cultural heritage value should be assessed. Where appropriate, a risk mitigation plan, an emergency plan, and/or a protection plan should be prepared, and implemented as far as possible, with reference to a conservation plan.

Definitions

For the purposes of this charter:

Adaptation means the process(es) of modifying a place for a compatible use while retaining its cultural heritage value. Adaptation processes include alteration and addition.

Authenticity means the credibility or truthfulness of the surviving evidence and knowledge of the cultural heritage value of a place. Relevant evidence includes form and design, substance and fabric, technology and craftsmanship, location and surroundings, context and setting, use and function, traditions, spiritual essence, and sense of place, and includes tangible and intangible values. Assessment of authenticity is based on identification and analysis of relevant evidence and knowledge, and respect for its cultural context.

Compatible use means a use which is consistent with the cultural heritage value of a place, and which has little or no adverse impact on its authenticity and integrity.

Connected people means any groups, organisations, or individuals having a sense of association with or responsibility for a place of cultural heritage value.

Conservation means all the processes of understanding and caring for a place so as to safeguard its cultural heritage value. Conservation is based on respect for the existing fabric, associations, meanings, and use of the place. It requires a cautious approach of doing as much work as necessary but as little as possible, and retaining authenticity and integrity, to ensure

Conservation plan means an objective report which documents the history, fabric, and cultural heritage value of a place, assesses its cultural heritage significance, describes the condition of the place, outlines conservation policies for managing the place, and makes recommendations for the conservation of the place.

Contents means moveable objects, collections, chattels, documents, works of art, and ephemera that are not fixed or fitted to a place, and which have been assessed as being integral to its cultural heritage value.

Cultural heritage significance means the cultural heritage value of a place relative to other similar or comparable places, recognising the particular cultural context of the place.

Cultural heritage value/s means possessing aesthetic, archaeological, architectural, commemorative, functional, historical, landscape, monumental, scientific, social, spiritual, symbolic, technological, traditional, or other tangible or intangible values, associated with human activity.

Cultural landscapes means an area possessing cultural heritage value arising from the relationships between people and the environment. Cultural landscapes may have been designed, such as gardens, or may have evolved from human settlement and land use over time, resulting in a diversity of distinctive landscapes in different areas. Associative cultural landscapes, such as sacred mountains, may lack tangible cultural elements but may have strong intangible cultural or spiritual associations.

Documentation means collecting, recording, keeping, and managing information about a place and its cultural heritage value, including information about its history, fabric, and meaning; information about decisions taken; and information about physical changes and interventions made to the place.

Fabric means all the physical material of a place, including subsurface material, structures, and interior and exterior surfaces including the patina of age; and including fixtures and fittings, and gardens and plantings.

Hapu means a section of a large tribe of the tangata whenua.

Intangible value means the abstract cultural heritage value of the meanings or associations of a place, including commemorative, historical, social, spiritual, symbolic, or traditional values.

Integrity means the wholeness or intactness of a place, including its meaning and sense of place, and all the tangible and intangible attributes and elements necessary to express its cultural heritage value.

Intervention means any activity that causes disturbance of or alteration to a place or its fabric. Intervention includes archaeological excavation, invasive investigation of built structures, and any intervention for conservation purposes.

Iwi means a tribe of the tangata whenua.

Kaitiakitanga means the duty of customary trusteeship, stewardship, guardianship, and protection of land, resources, or taonga.

Maintenance means regular and on-going protective care of a place to prevent deterioration and to retain its cultural heritage value.

Mātauranga means traditional or cultural knowledge of the tangata whenua.

Non-intervention means to choose not to undertake any activity that causes disturbance of or alteration to a place or its fabric.

Place means any land having cultural heritage value in New Zealand, including areas; cultural landscapes; buildings, structures, and monuments; groups of buildings, structures, or monuments; gardens and plantings; archaeological sites and features; traditional sites; sacred places; townscapes and streetscapes; and settlements. Place may also include land covered by water, and any body of water. Place includes the setting of any such place.

Preservation means to maintain a place with as little change as possible.

Reassembly means to put existing but disarticulated parts of a structure back together.

Reconstruction means to build again as closely as possible to a documented earlier form, using new materials.

Recording means the process of capturing information and creating an archival record of the fabric and setting of a place, including its configuration, condition, use, and change over time.

Reinstatement means to put material components of a place, including the products of reassembly, back in position.

Repair means to make good decayed or damaged fabric using identical, closely similar, or otherwise appropriate material.

Restoration means to return a place to a known earlier form, by reassembly and reinstatement, and/or by removal of elements that detract from its cultural heritage value.

Setting means the area around and/or adjacent to a place of cultural heritage value that is integral to its function, meaning, and relationships. Setting includes the structures, outbuildings, features, gardens, curtilage, airspace, and accessways forming the spatial context of the place or used in association with the place. Setting also includes cultural landscapes, townscapes, and streetscapes; perspectives, views, and viewshafts to and from a place; and relationships with other places which contribute to the cultural heritage value of the place. Setting may extend beyond the area defined by legal title, and may include a buffer zone necessary for the long-term protection of the cultural heritage value of the place.

Stabilisation means the arrest or slowing of the processes of decay.

Structure means any building, standing remains, equipment, device, or other facility made by people and which is fixed to the land.

Tangata whenua means generally the original indigenous inhabitants of the land; and means specifically the people exercising kaitiakitanga over particular land, resources, or taonga.

Tangible value means the physically observable cultural heritage value of a place, including archaeological, architectural, landscape, monumental, scientific, or technological values.

Taonga means anything highly prized for its cultural, economic, historical, spiritual, or traditional value, including land and natural and cultural resources.

Tino rangatiratanga means the exercise of full chieftainship, authority, and responsibility.

Use means the functions of a place, and the activities and practices that may occur at the place. The functions, activities, and practices may in themselves be of cultural heritage value.

Whanau means an extended family which is part of a hapu or iwi.

Appendix 2: Ranking heritage values and significance

Physical

Archaeology

High	has the potential for national or regional archaeological values i.e. rare site types, sites from the first phase of settlement, particularly intact physical remains
Moderate	has the potential for local archaeological values i.e. relatively early, possibility of relativity intact physical remains, representative types
Low	known to be pre-1900, or has the possibility of pre-1900 evidence, but unlikely to have high or moderate archaeological values

Architecture

High	highly original, early, ideal, landmark or innovative design, style, use of materials, or craftsmanship for the period
Moderate	good design, style, use of materials, or craftsmanship for the period
Low	typical design, style use of materials, or craftsmanship for the period

Technology

High	highly original, ideal, innovative or early construction design for the period
Moderate	good example of construction design for the period
Low	common construction design for the period

Rarity

High	first, only remaining or one of very few of the period, locally/regionally/nationally
Moderate	one of few of the period, locally/regionally/nationally
Low	common for the period, locally/regionally/nationally

Representativeness

High	has all the key characteristics of architecture or technology of the period
Moderate	has many of the characteristics of the architecture or technology of the period
Low	has few characteristics of the architecture or technology or period

Integrity

High	unchanged or has had important modifications since construction retaining heritage values
Moderate	unimportant changes since construction but essential character and most heritage values retained

Low	character changed significantly with few heritage values remaining
Group	
High	principal contributor to the dominant values of the group
Moderate	compatible with the group but not a principal contributor to the dominant values of the group
Low	of little importance to the group

Historic

People	
High	intimately associated with a group or person of national or regional significance
Moderate	intimately associated with a group or person of local significance
Low	minor or peripheral connection to a locally significant group or person
Events	
High	intimately associated with events of national or regional significance
Moderate	intimately associated events of local significance
Low	minor or peripheral connection to a locally significant event
Pattern	
High	intimately associated with pattern of national or regional significance
Moderate	intimately associated with pattern of local significance
Low	minor or peripheral connection to a locally significant pattern

Cultural

Identity	
High	focus of national or regional community identity, sense of place or social value or has special age value such as constructed within the first 30 years of settlement
Moderate	focus of local community identity, sense of place or social value or has age value such as construction between 1870 and 1900
Low	has minor community focus, sense of place or social value
Public esteem	
High	focus of national or regional community identity, sense of place or social value, recommended for listing, discussed in national publications, or received an award at the national, or local level
Moderate	focus of local community identity, sense of place or social value, or recommended for listing and discussed in local publications
Low	has minor community focus, sense of place or social value

Commemorative

High	commemorates national or regional endeavours or people at a national, regional or local level
Moderate	commemorates local endeavours or people at a local level
Low	has minor commemorative value

Education

High	has a very high potential for education of heritage values at a national or regional level
Moderate	has a high potential for education about heritage values at a local level
Low	has minor potential for education

Assessment of significance

The values of the place or object

High	at a national, regional or local level it is ranked highly in a number of heritage areas and has high integrity or has very significant values in one heritage value
Moderate	at a local level it has few high heritage values and/or has moderate integrity
Low	it has few heritage values

The place or object has significant heritage values:

National	at a national level
Regional	at a regional level
Local	at a local level

Appendix 3: Schedule of Elements and Fabric

Detailed schedule of elements and fabric

Fabric used to construct and line the building is listed with each space and is defined as original or early historic fabric (hf), reproduction/replacement fabric (rf), old but not original fabric (of), and non-historic fabric (nhf).

Exterior

Element	Fabric	Type
Roof	Painted corrugated galvanised steel	Hf/rf
	Painted metal guttering	Rf
	Painted metal guttering	Rf
	Plastic downpipes	Nhf
	Painted galvanised steel flashings	Hf/rf
	Painted timber fascia	Hf
	Painted timber exposed framing to eaves	Hf
	Painted timber clerestory to east, west, central and south wings	Hf
	Brick chimneys to central wing (removed to underside of roof)	Hf
	Painted timber barge boards to gables	Hf
	Painted timber framed hood over east door to west wing corridor	Hf
	Aerials	Nhf
	Painted metal vents	Hf?
East wing	Painted splayed plastic rusticated weatherboards	Nhf
	Painted timber shiplap weatherboards to south	Hf
	Painted timber casements, some with toplights	Hf
	Painted timber ledged and braced door from toilets and from ward to west	Hf
	Painted timber architraves and sills to doors and windows	Hf
	Painted cast iron vents	Hf
	Concrete base to south	Hf

Element	Fabric	Type
Joining corridor to east wing	Painted splayed plastic rusticated weatherboards	Nhf
	Painted timber shiplap weatherboards to south	Hf
	Painted timber casements, some with toplights	Hf
	Painted timber architraves and sills to windows	Hf
	Painted timber glazed panelled door to south	Hf
	Painted timber glazed panelled French doors with toplights	Hf
	Concrete verandah to French doors	Hf
	Electrical fittings	Nhf?
Central wing	Painted splayed plastic rusticated weatherboards	Nhf
	Painted concrete base	Hf
	Painted timber windows and door joinery	Hf
	Painted timber architraves and sills to doors and windows	Hf
	Painted timber three panelled doors	Hf
	Painted timber casements with toplights	Hf
	Marble plaque “Queen Mary hospital for soldiers of the dominion opened by the Hon C W Russell Minister of Public Health 3rd June 1916.”	Hf
	Brass and timber plaque “This verandah was erected by the late Duncan Rutherford Esq. to whose patriotism and generosity the soldiers owe many kindnesses”	Hf
	Painted timber verandah posts to central wing	Hf
	Painted timber brackets to overhang over exterior doors to end wings	Hf
	Painted timber French doors with toplights to east wing	Hf
	Painted timber verandah with tg&v sarking, exposed rafters and timber posts	Hf
	Cement rendered brick verandah flooring	Hf

Element	Fabric	Type
West wing	Painted splayed plastic rusticated weatherboards	Nhf
	Painted timber shiplap weatherboards to south	Hf
	Painted timber casements with toplights	Hf
	Painted timber ledged and braced doors from ward and toilets	Hf
	Painted timber architraves and sills to doors and windows	Hf
	Painted timber steps from ward	Hf
Joining corridor to west wing	Painted splayed plastic rusticated weatherboards	
	Painted timber shiplap weatherboards to south	Hf
	Painted timber casements with toplights	Hf
	Painted timber architraves and sills to windows	Hf
	Painted timber glazed panelled French doors with toplights	Hf
South wing	Painted timber shiplap weatherboards to south	Hf
	Painted timber casements, some with toplights, some leaded	Hf
	Louvred windows	Hf/nhf
	Painted timber ledged and braced door from toilets	Hf
	Painted timber architraves and sills to doors and windows	Hf
	Painted timber verandah with timber posts and uncoated flooring	Hf
	Painted timber walkway with shiplap weatherboards, painted timber fixed windows, timber posts and painted timber flooring	(Hf
	Cast iron vents	Hf
	Concrete base	Hf
	Timber steps	

Interior

Note that there are three types of radiator, a decorative and plain cast iron that are hf and steel panel radiators that are nhf.

Space	Surface/element	Fabric	Fabric type
Central wing dining hall	Ceiling	Painted tg&v sarking over exposed timber rafters, purlins	Hf
		Painted timber trusses	Hf
		Painted timber knee brackets to facetted bay	Hf
	Walls	Painted timber tg&v	Hf
		Painted timber architraves	Hf
		Painted timber coved skirting	Hf
	Floor	Timber strip (hardwood, jarrah?)	Hf
	Windows	Painted casements with top hung casement toplights	Hf
		Standard casement stays, curved sliding top casement stays	Of/hf?
	Doors	Painted timber panelled and glazed double to exterior with glazed toplights	Hf
		Painted timber panelled double to south wing	Hf
		Hardware	Nhf
	Fixtures and fittings	Painted cast iron radiators	Of
		Painted brick fire surrounds with painted timber mantle and concrete hearth	Hf

		Fire hose reel	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Toilets either side of dining hall (men's to east and women's to west)	Ceiling	Painted hardboard	Nhf
		Painted timber scotia	Nhf
		Painted hardboard	Nhf
	Walls	Formica dado	Nhf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Aluminium louvre	Nhf
	Doors	Painted flush hollow core	Nhf
	Fixtures and fittings	Ceramic basins	Nhf
		Ss urinal	Nhf
		Cast iron radiator	Of
		TOILET Partitions	Nhf
		Coat hooks	Of?
		Mirrors	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Kitchen off dining hall and ante room	Ceiling	Painted hardboard	Nhf
		Painted timber scotia	Nhf
	Walls	Painted hardboard	Nhf
		Painted timber skirting and architraves	Nhf

	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Aluminium louvre	Nhf
	Doors	Painted three panel with toplight	Hf
		Painted flush hollow core	Nhf
	Fixtures and fittings	Ss sink and timber cupboards	Nhf
		Painted timber shelves	Nhf
		Electrical switchboard	Nhf
		Cast iron radiator	Of
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
East side reading room/dispensary	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted softboard with timber battens	Of
		Painted timber architraves and skirtings	Hf
	Floor	Lino	Hf
		Uncoated timber strip	Hf?
	Windows	Painted timber casement with top hung casement toplights	Hf
		Casement stays as above	Of
	Doors	Painted double flush hollow core with glass panels	Of
		Painted timber panelled and glazed with toplight	Hf

	Fixtures and fittings	Painted cast iron radiators	Hf
		Painted brick fireplace with timber mantelpiece and concrete hearth	Hf
		Coat hooks on painted timber block	Hf?
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
East corridor	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted hardboard with timber battens	Of
		Painted architraves and skirtings	Nhf
	Floor	Lino	Of
		Uncoated timber strip	Hf
	Windows	Painted timber casement with fixed toplight	Hf
		Painted timber fixed six light	Hf
		Furniture	
	Doors	Painted timber French panelled and glazed with toplights	Hf
		Painted timber panelled and glazed with toplights (to bedrooms)	Hf
		Furniture	Hf
	Fixtures and fittings	Painted cast iron radiator	Hf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf

Typical single bedroom	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted softboard	Of
		Painted timber architraves and skirtings	Of/hf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	-	
	Doors	Painted timber French panelled and glazed with toplight	Hf
		Furniture including rimlock and knob with winder to toplight	Hf
		Painted timber three panelled from corridor with toplight	Hf
		Furniture	Hf
	Fixtures and fittings	Painted cast iron radiator	Hf
		Painted timber cupboards	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
East octagonal wing	Ceiling	Painted timber tg&v sarking	Hf
		Painted timber framing, posts brackets	Hf
	Walls	Painted tg&v sarking	Hf
		Painted timber architraves	Hf
	Floor	Carpet	Nhf
		Uncoated timber strip	Hf

	Windows	Clear-coated timber, single hung sash windows with bottom hung casement toplights	Hf
	Doors	Painted double timber four panel	Hf
		Rim lock and knob	Hf
		Painted flush hollow core	Nhf
		Painted double flush hollow core with glass panel	Nhf
		Sliding flush hollow core to south	Nhf
	Fixtures and fittings	Painted cast iron radiators	Hf
		Painted softboard timber framed partitions	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
		Switchboard	Nhf
Central octagonal room	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted tg&v under sill	Hf
		Painted timber architraves	Hf
		Painted timber coved skirting	Hf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Clear and obscure glazed coated timber fixed 9 panes per side	Hf
		Unpainted timber sliding	Hf?
		Painted timber 4 panes top hung casement per side to	Hf

		lantern with winder openers	
	Doors	Painted panelled and glazed	Hf
		Rim lock and knob	Hf
	Fixtures and fittings	Painted cast iron decorative radiator	Hf
		Painted timber tg&v cupboards and bench	Hf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Corridor to toilet block	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted tg&v sarking	Hf
		Painted architraves	Hf
		Painted timber coved skirting	Hf
	Floor	Uncoated timber strip	Hf
		Lino	Hf
	Windows	Louvres in timber frame	Hf
	Doors	Painted timber three panel with rim lock	Hf
		Wire mesh toplight	Hf
	Fixtures and fittings	Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Bedrooms either side of corridor to toilet block	Ceiling	Painted timber tg&v with exposed timber rafters	Hf
	Walls	Painted tg&v sarking	Hf
		Painted architraves	Hf
	Floor	Uncoated timber strip	Hf

	Windows	Painted timber casement	Hf
		Casement fasteners	Hf
	Doors	Painted timber three panel with rim lock	Hf
		Wire mesh toplight	Hf
	Fixtures and fittings	Painted timber shelf	Hf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Toilet block off east octagonal wing	Ceiling	Painted timber tg&v with exposed timber truss	Hf
	Walls	Painted tg&v sarking	Hf
		Painted architraves	Hf
	Floor	Ceramic tile	Hf
	Windows	Painted timber casement	Hf
		Casement fasteners	Hf
		Timber framed louvres (original glass)	Hf
	Doors	Painted ledged and braced double	Hf
		Rim lock	Hf
		Painted timber ledged and braced toilet	Hf
	Fixtures and fittings	Painted timber tg&v partitions	Hf
		“Adamant” urinals set in tiled surround	Hf
		Concrete toilet? with cast iron cistern	Hf
		Ceramic wcs with cast iron	Hf

		cistern	
		Light fitting	Hf
		Electrical fittings, sprinkler pipes and heads etc.	Nhf
Room off octagonal ward	Ceiling	Painted softboard and timber battens	Nhf
	Walls	Painted softboard and timber battens	Nhf
		Painted architraves and skirtings	Nhf
	Floor	Lino	Nhf
		Uncoated timber strip	Hf
	Windows	Painted timber casement	Hf
		Casement fasteners	Nhf
	Doors	Painted flush hollow core double with glass panel	Nhf
		Furniture	Nhf
	Fixtures and fittings	Painted cast iron decorative radiator	Hf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
East wing south toilets	Ceiling	Painted hardboard	Nhf
		Painted timber scotia	Nhf
	Walls	Painted hardboard	Nhf
		Formica dado	Nhf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Painted timber casement	Nhf

		Chrome casement stays	Nhf
		Aluminium louvres to toilet and bathroom	Nhf
		Painted timber framed louvred	Hf
	Doors	Painted three panelled	Of
		Furniture	Of?
	Fixtures and fittings	Ss basins	Nhf
		Bath	Nhf
		Toilet	Nhf
		Cast iron radiator	NHF
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
West corridor	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted hardboard	Of
		Painted architraves and skirtings	Nhf
	Floor	Lino	Of
		Uncoated timber strip	Hf
	Windows	Painted timber casement with fixed toplight	Hf
		Furniture	Hf
	Doors	Painted timber panelled and glazed with toplights to bedrooms	Hf
		Painted timber double four panel to east	Hf
		Furniture	Hf

	Fixtures and fittings	Painted cast iron radiators	Hf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Typical single bedroom	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted softboard with timber battens	Hf
		Painted timber architraves and skirtings	Of/hf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	-	
	Doors	Painted timber French panelled and glazed with toplight	Hf
		Furniture including rimlock and knob with winder to toplight	Hf
		Chrome handles	Nhf
		Painted timber three panelled from corridor with toplight	Nhf
		Furniture	Nhf
	Fixtures and fittings	Painted cast iron radiator	Hf
		Painted timber cupboards	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
West octagonal ward	Ceiling	Painted timber tg&v sarking	Hf
		Painted timber framing,	Hf

		posts brackets	
	Walls	Painted tg&v sarking	Hf
		Painted timber architraves	Hf
	Floor	Uncoated timber strip?	Hf
	Windows	Clear-coated timber, single fixed sash windows with toplights	Hf
		Painted timber six light sashes	Of?
		Painted timber small single pane	Of?
	Doors	Painted timber three panel	Hf
		Rim lock and knob	Hf
		Flush hollow core to partitions	Nhf
	Fixtures and fittings	Painted cast iron radiators	Hf
		Painted hard board timber framed partitions	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Central octagonal room	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted tg&v under sill	Hf
		Painted timber architraves	Hf
	Floor	Lino	Hf
		Uncoated timber strip?	Hf
	Windows	Clear coated timber fixed 9 panes per side	Hf
		Painted timber 4 panes top hung casement per side to	Hf

		lantern with winder openers	
	Doors	Painted panelled and glazed	Hf
		Rim lock and knob	Hf
	Fixtures and fittings	Painted cast iron decorative radiator	Hf
		Painted timber tg&v cupboards	Hf
		Fire hose reel	Nhf
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Corridor to toilet block	Ceiling	Painted asbestos with timber battens	Hf
	Walls	Painted tg&v sarking	Hf
		Painted architraves	Hf
		Painted timber coved skirting	Hf
	Floor	Uncoated timber strip	Hf
		Lino	Hf
	Windows	Louvres in timber frame	Hf
	Doors	Painted timber three panel (1 x glazed)	Hf
		Rim lock	Hf
		Wire mesh toplight	Hf
	Fixtures and fittings	Coat hooks	Hf?
		Lights, electrical fittings, sprinkler pipes and heads etc.	Nhf
Bedrooms either side of corridor to toilet block – locked			

Toilet block off west octagonal ward	Ceiling	Painted timber tg&v with exposed timber truss	Hf
	Walls	Painted tg&v sarking	Hf
		Painted architraves	Hf
	Floor	Ceramic tile	Hf
		Concrete coved	Hf?
	Windows	Painted timber casement	Hf
		Casement fasteners	Hf
		Timber framed louvres	Hf
	Doors	Painted ledged and braced double	Hf
		Rim lock	Hf
		Painted timber ledged and braced toilet	Hf
	Fixtures and fittings	As east	Hf
		Radiator	Nhf
		Sink	Nhf
		Tim,ber shelving	Nhf
Corridor behind recreation hall – note extensive rat and possum infestation	Ceiling	Painted asbestos and timber battens	Of
		Painted timber lined skylight	Hf
	Walls	Painted hardboard	Nhf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	-	
	Doors	Painted panel three panel	Nhf

	Fixtures and fittings	-	
Whare iti – recreation hall – locked, description here from 2010	Ceiling	Painted tg&v sarking on painted timber trusses	Hf
		Painted timber framed lantern light	Hf
	Walls	Painted tg&v sarking	Hf
		Painted hardboard dado	Nhf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Painted timber casement with top hung casement	Hf
		Casement stays and sliding casement stays	Hf
	Doors	Painted timber ledged and panelled	Hf
		Painted timber 3 pane	Hf
	Fixtures and fittings	Painted cast iron radiators	Hf
Room behind Whare iti – locked			Hf
Corridor behind whare iti	Ceiling	Painted asbestos and timber battens	Hf?
		Painted hardboard to west	Nhf
	Walls	Painted hardboard	Nhf
		Painted timber architraves and skirting	Hf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Painted timber fixed to east	Nhf?

		exit	
		Painted timber casement to west corridor	Nhf
		Furniture	Nhf
	Doors	Painted timber five panel	Nhf
		Painted timber three panel to courtyard	Hf
	Fixtures and fittings		
Rooms at south	Ceiling	Painted asbestos and timber battens	Of
	Walls	Painted softboard and timber battens	Nhf
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Painted timber casement with top hung casement toplight	Of
	Doors	Painted panel and glazed	Nhf
		Fixtures and fittings	Hf
	Fixtures and fittings	Painted cast iron radiator	Hf
		Painted timber cupboard	Of
Corridor between west corridor and south	Ceiling	Painted hardboard	Nhf
	Walls	Painted hardboard	Nhf
		Painted timber architraves and skirting (nhf?)	Nhf?
	Floor	Lino	Nhf
		Uncoated timber strip?	Hf
	Windows	Painted timber casement	Nhf

	Doors	Painted timber three panel to courtyard	Hf
	Fixtures and fittings	-	Hf
South wing		Locked	

Appendix 5: Brief history of construction materials and technology used

Materials Used

The following is an outline history of the main materials used to construct the Soldiers' Block.

Timber

The earliest recorded European use of timber in New Zealand was in Captain Cook's journal of 9 October 1769: '… after landing as above mentioned we had not gone a hundred yards into the woods before we found a tree that girted 19 feet eight inches, six feet above the ground, and having a quadrant with me, I found its length from the root to the first branch to be 89 feet; it was as straight as an arrow and tapered very little in proportion to its length, so that I judged that there was 356 solid feet of timber in this tree, clear of the branches… Here are forests of vast extent full of the straightest and cleanest trees we have ever seen'.

The timber was pit sawn, a method of cutting timber that was common until the 1860s. An extensive timber trade developed following Cook's observations, as England needed a dependable supply of timber following the American declaration of independence in 1776 (the United States had supplied much of England's timber requirements). In particular there was a need for masts and other ship timbers for the English navy in India.

Sealing and whaling industries required timber for boats and housing, storehouses, casks (for oil) and wharves. Missionaries became involved in the timber industry, felling and selling timber to pay for their missions as well as constructing boats to travel around the coast. The first, built for Samuel Marsden, was a 20-ton flat-bottomed boat.

The first circular saws were in action in Mercury Bay in 1837, with this form of sawing timber superseding pit sawing by the 1860s. The Nelson Examiner of 15 February 1845 reported on a circular saw two feet in diameter cutting 100 feet per hour in a mill in Waimea South. The first circular saws were water powered followed by steam and finally electricity, with the first electric machine used in 1906.

Kauri was used for masts, spars, ships, wharves, bridges, sleepers, tramways, struts for underground mines, general building construction and weatherboards, and was split for shingles. Rimu was used for house construction, weatherboards and framing and is now used for furniture and veneers. Matai was used for piles, bridges, wharves, sleepers, bedplates for machinery, flooring and weatherboards. Totara was used for piles, railway sleepers, tramways, house timbers, bridges, shingles, window joinery and exterior verandah flooring.

Galvanised corrugated iron

The strengthening effect of crimping or corrugating flat sheets had been known for centuries, but the technique was commercially unsuccessful until the early 1840s. Henry Robinson Palmer (1795-1844), the founder of the English Institute of Civil Engineers, is credited with

inventing corrugating iron in London in 1828.[154]

Uniformity in the product was not developed until the 1860s. Iron and steel, whilst strong materials, were subject to corrosion, but their use as a durable building material became possible with the development of a galvanising process to coat sheet steel. The process coated thin layers of zinc by hot dipping, which was perfected in 1837. At first the dipping was done by hand, but with advent of electro-plating meant that larger sheet sizes could be galvanised.

Initially, corrugated iron was made from wrought iron but by the 1850s galvanised corrugated iron sheets were available. Wrought iron was gradually replaced with mild steel from the 1890s.

From 1839 galvanised roofing was used in the United States and later in Australia and India. Since the late 1850s corrugated iron has been widely used in New Zealand for roof and wall cladding, and has become part of the New Zealand vernacular.

Corrugated iron was produced in Australia from the 1860s, and in 1921 the English firm John Lysaght set up a large-scale corrugating and galvanising plant in Newcastle.[155] In 1864 R. and T. Haworth, the first manufacturer in New Zealand, started producing galvanised iron in Dunedin from imported steel plate.[156] Production was based on a single sheet system but in 1961 continuous sheet rolling and galvanising plants were established, the product coming to be known as ‘long run’.

Early catalogues for corrugated iron showed several profiles were made. These varied in both the depth of the corrugations and their pitch or spacing. The greater the depth of corrugation, the wider the span between roof supports.

Figure 15 Wares made by the Southern Cross Galvanized Iron Manufacturing Company Limited, Auckland, 1906. Reference number: PA1-o-371-38

Brick

The chimneys in the Soldier’s Block are of brick. The first recorded brickfields in the colony were two in Auckland, four in Wellington and four in Nelson in 1844. Probably the oldest brick kiln in New Zealand is at Upkokgaro near Wanganui, which dates from 1857.[157] The earliest brickworks in Christchurch was Jackson and Bishop, which was established in 1861. By the 1880s, additional brick-makers in the Canterbury region by 1879 included George Reynolds in Hereford Street, the Farnley Brick, Drain Pipe and Pottery Works operating from St Martins and Malvern Hills owned by Austin and Kirk, Langdon and Company, W. Neighbours and three other brickyards. In 1877 Thomas Hill of Rangiora constructed a circular Hoffmann kiln

[154] http://www.corrugated-iron-club.info/iron1.html.

[155] http://www.heritage.vic.gov.au/pages/pdfs/Roofing.pdf.

[156] Corrugated iron, Te Ara: The Encyclopedia of New Zealand, http://www.teara.govt.nz/EarthSeaAndSky/MineralResources/IronAndSteel/5/en.

[157] Thornton, G., New Zealand’s Industrial Heritage (Reed, 1982): 115.

for his firm Rangiora Brick and Tile Works.[158] Ruins of the kiln still exist, with parts of the tunnel chamber still intact as are his own brickworks in Invercargill built in 1863.

[158] Hills, D., Thomas Hills, A Brickmaker, Rangiora (DA Hills, Christchurch, 1977).

Appendix 7: Photos of major elements and spaces

The following photos were taken by the author on 8 July 2022

Figure 16 North west corner

Figure 17 North elevation

Figure 18 East elevation

Figure 19 South elevation

Figure 20 South elevation

Figure 21 West elevation

Figure 22 Dining hall

Figure 23 Dining hall

Figure 24 West toilets

Figure 25 Dispensary

Figure 26 Kitchen west side

Figure 27 East corridor

Figure 28 Bedroom off east corridor

Figure 29 East wing

Figure 30 Original cast iron radiator

Figure 31 Original cast iron radiator

Figure 32 Central observation room, east wing

Figure 33 East wing toilets

Figure 34 Original toilet

Figure 35 Central corridor

Figure 36 West wing

Figure 37 West wing observation room