

# CRICKET PAVILION AND OVAL WOLSTON PARK HOSPITAL CONSERVATION PLAN



*Prepared for:*  
Queensland Police Service  
Address

*Prepared by:*  
Project Services  
80 George Street, Brisbane

January 2008



## TABLE OF CONTENTS

1	INTRODUCTION.....	1
1.1	The cricket pavilion and oval – former Wolston Park hospital .....	1
1.2	This Document .....	1
1.3	Methodology .....	1
1.4	Acknowledgements .....	2
2	HISTORY .....	3
2.1	Wolston Park Hospital .....	3
2.1.1	<i>Scope</i> .....	3
2.1.2	<i>Establishment</i> .....	3
2.1.3	<i>The first buildings</i> .....	3
2.1.4	<i>Phases of development</i> .....	3
2.1.5	<i>Cottage wards and temporary timber buildings 1869-1909</i> .....	4
2.1.6	<i>Dr Ellerton's Asylum 1909-1936</i> .....	6
2.2	Sport & Recreation in the early years.....	7
2.3	Evolution in attitudes and treatment at Wolston Park Hospital .....	7
2.3.1	<i>Dr Ellerton</i> .....	7
2.3.2	<i>Occupational therapy</i> .....	7
2.3.3	<i>Using the Cricket Ground</i> .....	8
2.4	The role of cricket in linking Wolston Park Hospital to the community .....	9
2.5	The Cricket Pavilion Building.....	10
2.5.1	<i>Initial construction</i> .....	10
2.5.2	<i>The first site 1910-1935</i> .....	11
2.5.3	<i>The present site (from 1936)</i> .....	15
2.6	Recent history .....	17
3	THE CRICKET PAVILION TODAY .....	19
3.1	The Setting .....	19
3.1.1	<i>The recreation ground</i> .....	19
3.1.2	<i>The cricket pavilion site</i> .....	24
3.2	The Cricket Pavilion Building.....	26
3.2.1	<i>Verandah</i> .....	29
3.2.2	<i>Building Skin and Detail</i> .....	30
3.2.3	<i>Doors and windows</i> .....	35
3.3	The Lavatory .....	39
3.4	Services.....	40
3.5	Interpretation .....	41
4	ANALYSIS.....	43
4.1	Cultural Heritage Significance .....	43
	The significance of the cricket pavilion and oval within this complex can be described as follows: .....	45
4.2	The evolution or pattern of Queensland's history (criterion a).....	45
4.3	Demonstrating rare, uncommon or endangered aspects of Queensland's cultural heritage (criterion b) .....	46
4.4	Demonstrating the principal characteristics of a particular class of cultural places (criterion d) .....	46
4.5	Aesthetic Significance (criterion e) .....	47
4.6	Community Associations (criterion g) .....	47

4.7	Important People (criterion h) .....	47
4.8	Summary Statement of Significance .....	48
4.9	Levels of Significance.....	49
4.9.1	<i>Elements which should be removed.....</i>	<i>50</i>
5	CONDITION .....	51
5.1	The Grounds .....	51
5.2	The Cricket Pavilion Exterior .....	51
5.3	The Cricket Pavilion Interior .....	52
5.4	The Lavatory Shed .....	53
6	EXTERNAL FACTORS .....	55
6.1	Legal Constraints .....	55
6.2	Legislative processes .....	55
6.3	Meeting the requirements of building codes.....	56
6.4	Users requirements .....	56
6.5	Management regime .....	56
7	CONSERVATION POLICY .....	57
7.1	Generally .....	57
7.1.1	<i>The Cricket Pavilion and oval at Wolston Park Hospital are of cultural heritage significance and should be conserved in accordance with nationally accepted guidelines.....</i>	<i>57</i>
7.1.2	<i>Satisfy the requirements of legislation.....</i>	<i>58</i>
7.1.3	<i>The recommendations of this conservation plan should be reflected in any leasing documents or memorandum of understanding for use of the building.</i>	<i>58</i>
7.1.4	<i>This conservation plan should be assessed for review after 5 years ..</i>	<i>58</i>
7.2	Setting - Oval.....	58
7.2.1	<i>Maintain the natural character of the setting. ....</i>	<i>58</i>
7.2.2	<i>Restore and maintain views across the oval between the surrounding wards and the cricket pavilion. ....</i>	<i>58</i>
7.2.3	<i>Maintain the existing boundaries to the oval, defined by earth banks and drains. ....</i>	<i>58</i>
7.2.4	<i>Emphasise remaining historic planting. ....</i>	<i>59</i>
7.3	Ownership and use .....	59
7.3.1	<i>Ownership and ongoing use by the Police Academy is appropriate ...</i>	<i>59</i>
7.3.2	<i>Ongoing use of the cricket pavilion and oval as a cricket facility is recommended. ....</i>	<i>59</i>
7.3.3	<i>Ongoing use of the toilet block as existing is not essential .....</i>	<i>59</i>
7.3.4	<i>The cricket pavilion and oval should retain some public interface and function. ....</i>	<i>59</i>
7.3.5	<i>Storage should be accommodated in existing secondary storage areas. Flammable substances should not be stored within the building .....</i>	<i>59</i>
7.4	Management .....	59
7.4.1	<i>Building managers and users should be aware of the significance of the Cricket Pavilion and oval and should be clear about their responsibilities for maintaining the heritage values of the place and abiding by the provisions of the Queensland Heritage Act 1992. ....</i>	<i>59</i>
7.4.2	<i>Efforts to keep the building occupied should be maintained. ....</i>	<i>59</i>
7.4.3	<i>Excess furnishings should be removed from the building .....</i>	<i>60</i>
7.4.4	<i>Regular inspections should be made, particularly for termites .....</i>	<i>60</i>

7.4.5	Prevention of fire should be considered .....	60
7.4.6	Impacts on the Cricket Pavilion should be considered in managing surrounding buildings and landscape areas and should not be allowed to reduce the potential ongoing use of the building .....	60
7.5	Repair and Maintenance .....	60
7.5.1	Maintain the building structure secure and weather tight and discharge rainwater away from the base of the building. Maintain protective coatings on exterior timberwork and treat rot. ....	60
7.5.2	Repair and reuse benches remaining from the hospital complex.....	60
7.5.3	Elements of high significance should be retained and preserved and should not be changed or compromised. ....	60
7.5.4	Elements of high significance that have been changed or compromised should be restored and preserved.....	61
7.5.5	Elements of medium cultural heritage significance should be retained and maintained.....	61
7.5.6	Elements of low significance which are later alterations may be removed providing the original form of the building including associated elements of higher significance are restored or reconstructed as appropriate and applicable. ....	61
7.5.7	Elements which have no significance may be removed or altered in ways that are not visually obtrusive to support compatible use.....	62
7.6	Reconstruction .....	62
7.6.1	Introduced fabric should be date-marked in a discrete location with a metal punch or stencil with the date of the repair.....	63
7.6.2	When repairs are carried out, new work should be carried out to match original fabric. ....	63
7.6.3	Conjectural reconstruction should be carried out to recover the architectural quality of the pavilion building, in particular, of the verandah, windows and doors.....	63
7.6.4	The ground levels of and around the oval should be maintained and a section of the grass terraced batters should be considered for reconstruction to match photographic evidence from the 1930s.....	64
7.7	Removal .....	64
7.7.1	Remove elements which detract from the significance of the place as opportunity arises. ....	64
7.8	Adaptation .....	64
7.8.1	Alterations to significant fabric should only be carried out where they are essential for the conservation of the place as a whole and should be reversible as far as possible. Alterations should be discrete but identifiable as modern fabric. 64	
7.8.2	The owner should make and retain responsibility for any alterations to the pavilion and oval and any changes required by users or tenants should be accommodated in reversible way. ....	64
7.8.3	A non intrusive approach to servicing should be considered if services need to be upgraded .....	64
7.8.4	Improved tie down and possibly bracing may be considered at the time of repair 65	
7.8.5	Suspended ceilings should not be installed.....	65
7.8.6	Upgrades for the provision of fire services in the pavilion and lavatory block should be considered in the context of the rest of the site complex and integrated with the fire service strategy for the whole site. If physical upgrades for fire services are required they should be done in a reversible way.....	65
7.8.7	Ground Levels should be changed around the base of the building to provide clearance for maintenance and ventilation. ....	65



7.8.8	<i>Facilities for equal access requirements should be considered in the context of the rest of the site complex and integrated with the equal access strategy for the whole site. ....</i>	65
7.8.9	<i>Upgrades to the oval and pavilion should not compromise the natural and open character of the site. ....</i>	65
7.8.10	<i>Any additional building work to the site should be freestanding, should retain the visual connection between the wards, the oval and the pavilion and views from the oval out to the natural landscape to the north Any such addition should be modern and elegant in design and should not interfere with natural light and ventilation to the site. ....</i>	65
7.9	Interpretation .....	66
7.9.1	<i>The significance of the cricket pavilion, oval and setting should continue to be interpreted to the public. ....</i>	66
7.9.2	<i>Reconstruct colour schemes. ....</i>	66
7.9.3	<i>Furnishing.....</i>	66
7.10	Priorities .....	66
8	APPENDICES .....	69
8.1	Chronology .....	69
8.2	Room Schedule .....	74
8.3	Door and Window Schedules .....	76
8.4	Measured Drawings .....	80
8.5	The Burra Charter .....	81
8.6	Entry in the Heritage Register .....	81

## **1 INTRODUCTION**

### **1.1 *The cricket pavilion and oval – former Wolston Park hospital***

The cricket pavilion and oval stand within the Wolston Park Hospital complex the earliest institution in Queensland for the treatment of the mentally ill, which was developed in 1865. The cricket pavilion and oval stand on a part of the site which accommodated the male wards built between 1914 and 1935. This area is within part of the hospital complex acquired by the Department of Police for establishing a Police Academy.

The oval was established around 1895 and the pavilion was built in 1910 by adapting an earlier warders' mess room (constructed by 1896) and moving it to the south west corner of the oval. The pavilion and score board were moved to its existing position on the south east corner of the oval in 1936 at which time the toilets were also constructed.

The oval and cricket pavilion are important for their association with the philosophy of 'moral treatment' introduced by Dr HB Ellerton who was Superintendent of the Institution from 1908 – 1936. Key aspects of this philosophy were the establishment of a pleasant environment and the encouragement of activities like sport. Ellerton was himself a keen cricketer and was also responsible for the establishment of the cricket pavilion. The oval is a focus for the male wards which are grouped around the western and southern boundaries with views across the oval.

Cricket provided a public face to the institution through cricket matches with visiting teams and community attachment to the oval has continued through the use of the building and pitch by the Wolston Park Centenary Cricket Club.

Wolston Park Hospital, including the cricket pavilion, toilet block and oval, is entered in the Queensland State Heritage Register (Place ID 600340), listed in the Register of the National Estate (100630) and is listed by the National Trust of Queensland (BNE 371).

### **1.2 *This Document***

This document was commissioned by the Department of Police to assist in making decisions about the repair and further use of the cricket pavilion. The conservation plan addresses the building and its setting.

Section 2 of this document contains the history of the site and the building, whilst section 3 describes the place as it remains today. Section 4 discusses the cultural heritage significance of the place and assigns levels of significance to the various components. Section 5 contains an overview of the condition of the building. Section 6 discusses external issues such as legislative requirements and owner's needs. Section 7 contains recommended conservation policies to conserve the significance of the place taking into account the owner's needs. Section 8, Appendix A, contains a site chronology, bibliography, a detailed schedule, a copy of the Burra Charter and copies of measured drawings.

The document was prepared in 2007-2008 by Project Services in Brisbane. Jeff Davidson was the project manager. Karen Riedy researched and wrote most of the report under the guidance of Jinx Miles and prepared the drawings. David Pagendam assisted in the preparation of measured drawings.

### **1.3 *Methodology***

Preparation of the Conservation Plan has been guided by the Burra Charter and associated guidelines as revised in 1999 and *The Conservation Plan* JS Kerr Fifth Edition May 2000. The

plan places particular emphasis on the ongoing care and repair of the place in the context of the provisions of the *Queensland Heritage Act 1992*.

Much of the research had already been carried out by the Department of Public Works. Further research was carried out in the Queensland State Archives and established the earlier date of the building than previously established.

Site inspection was carried out between September and December 2007 by Karen Riedy, David Pagendam and Jinx Miles.

#### **1.4 Acknowledgements**

\*, commissioned the study on behalf of the Department of Police. \*\* provided comments on drafts of the report.

Jo Besley provided copies of photographs from Brisbane City Council's Museum of Brisbane display about Wolston Park. Stephen Murray provided copies of earlier reports carried out by the Department of Works.

Brad Freeman of the Wolston Park Centenary Cricket Club provided access to the building facilitated by Amanda Brownhill of the Department of Police.

The staff of the Queensland State Archives and John Oxley Library assisted in providing access to files and copies of documents, photographs and drawings.



## **2 HISTORY**

### **2.1 *Wolston Park Hospital***

#### *2.1.1 Scope*

This history is an overview of information relevant to the Wolston Park Hospital recreation ground and the cricket pavilion. Refer to the *Wolston Park Hospital Conservation Plan 1992* for a more detailed history of the Wolston Park Hospital.

#### *2.1.2 Establishment*

Wolston Park Hospital, established in 1865, was initially known as the Lunatic Asylum Woogaroo.<sup>1</sup> The first 69 lunatics arrived at the asylum on 10 January 1865. Before the establishment of the asylum at Woogaroo, lunatics were incarcerated at the gaol on Petrie Terrace in Brisbane, which was opened in 1860.

Charles Tiffin, the Colonial Architect, became involved in the design and site selection for an asylum in Queensland as early as 1861. There were two sites considered, both near the town of Woogaroo. The site chosen for the asylum was the land formerly occupied by the residence of Dr Simpson, the first Commissioner of Lands. In 1861 and 1862, Tiffin noted that desirable qualities of the sites near the town of Woogaroo included the abundance of land available there and the general ambience of the environment which it was thought would be conducive to the patients' mental health.

Good drainage was considered to be desirable, but unfortunately the site chosen for the asylum was subject to flooding throughout the early history of the hospital. Flooding was first recorded in 1864, then again in 1890 and 1893. Flooding influenced changes to the early master plan for the site and the sites chosen for buildings over time.<sup>2</sup>

#### *2.1.3 The first buildings*

The first asylum buildings were sited close to the Brisbane River on flood prone land. After flooding in 1864 a new female division was established on higher ground.<sup>3</sup>

In 1866 the asylum housed a total of 113 patients, with 82 males and 31 females, in one building. Staff included the surgeon superintendent, a clerk and storekeeper, a chief wards man and 6 male warders, a matron, 3 female warders, a cook, and a labourer. There were auxiliary buildings for staff. The superintendent had a half acre garden and there was also a large reservoir and a cemetery within the asylum grounds.<sup>4</sup>

Inquiries into the conditions at the hospital were held between 1866 and 1869 by select committees of Parliament chaired by various medical professionals. They concluded the asylum was deficient in condition and management, and not conducive to the successful treatment and restoration of mental health. Overcrowding was a principal complaint. A key recommendation was to build hard wood cottage wards and later to replace them with brick buildings. Another recommendation was that further building in the male division be carried out on higher ground near the female division.<sup>5</sup>

Much subsequent work was in response to the recommendations that came out of the 1860's inquiries as well as to the need to avoid floodland.

#### *2.1.4 Phases of development*

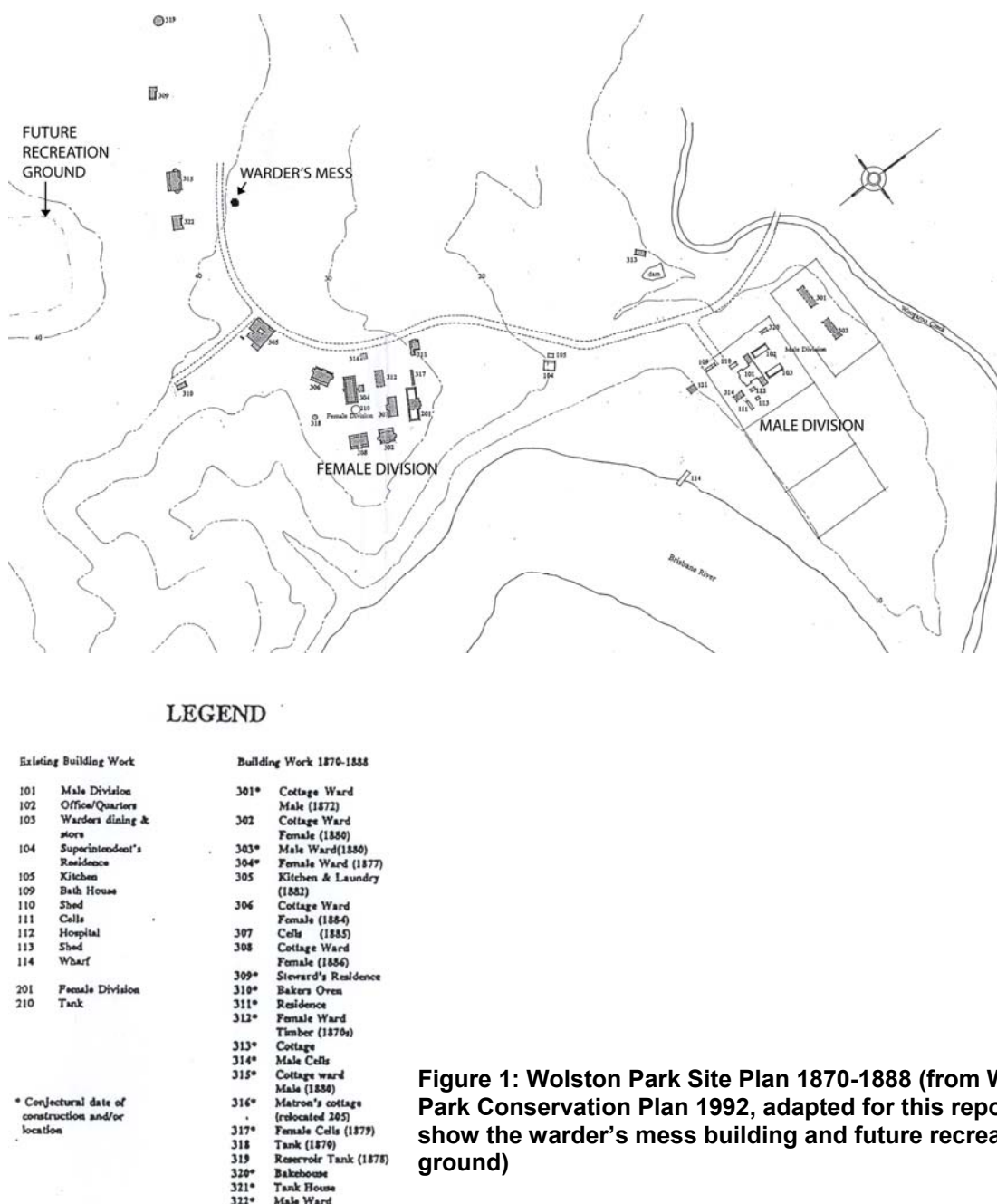
The statement of significance from the entry in the heritage register for Wolston Park hospital notes,

*It [the Wolston Park hospital] demonstrates the changing practices in the treatment of mental illness: from a 19<sup>th</sup> century asylum founded on confinement and separation, through moral treatment or therapy from 1909 to the 1930s, the drug and medical therapies of the 1940s (Mental Hygiene) and 1960s (Psychiatric Services) to the trend towards deinstitutionalization and community based services by the 1980s.<sup>6</sup>*

The development of the hospital site at Woogaroo can be followed in detail on the series of site block plans in the appendices of the *Wolston Park Hospital Conservation Plan 1992*. The two eras of building particularly of interest to this report are the era of cottage wards and temporary timber buildings that occurred directly after the 1860s inquiries, continuing to 1909; and the golden era of building under the influence of Dr B Hyam Ellerton who was superintendent at the hospital from 1909 to 1936 through the era of 'moral treatment'.

### 2.1.5 Cottage wards and temporary timber buildings 1869-1909

The first cottage ward was constructed from timber in 1870, to accommodate 36 female patients.



**Figure 1: Wolston Park Site Plan 1870-1888 (from Wolston Park Conservation Plan 1992, adapted for this report to show the warder's mess building and future recreation ground)**



## LEGEND

## Existing Building Work

101	Male Ward 1&2
104	Old Med Superintendent's Residence
201	Female Ward 2
210	Tank
302	Female Ward 3
304	Female Ward 4
305	Kitchen & Laundry
306	Female Ward 6
307	Cells
308	Female Ward 5
309	Steward's Residence
310	Bakchouse
311	Doctor's Residence
312*	Female Ward 3/
315	Female Ward 1
316	Male Ward 5
317	Matron's Residence
318	Cells
319	Tank
322	Reservoir Tank
322	Male Ward 6

## Building Work 1889-1908

401*	Male Ward (8)
402	Timber (1890)
402	Recreation Hall (1890)
403	Cottage Ward
404*	Male (1891/92)
404*	Ass. Medical Superintendent's Residence (1892)
405	Male Ward (3)
406	Timber (1893)
406	Male Ward (4)
407	Timber (1893)
407	Asylum Store (1893, reconstructed old male ward 4)
408	Male Ward (1895)
409*	Male Ward (1890's)
410	Offices (1896)
411	Medical Superintendent's Residence (1897)
412	Male Ward (1899/1900)

413	2nd Ass. Medical Superintendent's Residence (1900)
414	Mortuary (1901)
415	Female Bath (1901)
416	Male Bath (1901)
417	Store
418	Nurses' Quarters (1890's)
419	Stables
420	Shed

\* Conjectural date of construction and/or location

**Figure 2: Wolston Park Site Plan 1889-1908 (Wolston Park Conservation Plan 1992, adapted for this report to show future recreation ground, male & female divisions and warder's mess building which was to become the core of the cricket pavilion)**

After the great floods of 1890 and 1893, a number of new timber wards were constructed in the process of relocating the male division to higher ground. These timber cottage wards were considered temporary buildings to be demolished later in the history of the hospital. <sup>7</sup>

### 2.1.6 Dr Ellerton's Asylum 1909-1936

A detailed account of the physical improvements made to the hospital under the influence of Dr Ellerton can be found in the *Wolston Park Hospital Conservation Plan 1992*.

A number of temporary buildings were demolished during this period. Dr Ellerton was remembered for *a heritage of good buildings, spacious grounds, well equipped hospital wards, and ... an atmosphere, one of tolerance (if not freedom)*.<sup>8</sup> The existing recreation ground and the cricket pavilion were established during the time Dr Ellerton was the superintendent at the hospital.



### LEGEND

#### Existing Building Work

104	Night Nurse's Quarters
201	Female Ward 1&2
210	Tank
304	Female Ward 4
306	Female Ward 6
307	Female Ward 8
309	Steward's Residence
310	Bakehouse
311	Matron's Residence
315	Male Ward 5/Male Ward 3
317	Female Cells
318	Tank
322	Male Ward 6/Male Ward 2
402	Recreation Hall
403	Male Ward 7/Male Ward 1
407	Store
408	Male Ward 9/Male Ward 5
411	Medical Superintendent's Residence
412	Male Ward 10/Male Ward 4

413	2nd Ass. Medical Superintendent's Residence
414	Mortuary
415	Needlework Room
416	Store
417	Store
418	Nurse's Quarters
419	Stables
420	Shed

#### Building Work 1909-1936

501	Cricket Pavilion (1910)
502	Bush House (1911)
503	Ass. Medical Superintendent's Residence (1911)
504	1st Ass. Medical Superintendent's Residence (1911)
505	Stables (1911)
506	Reservoir (1911)
507	Pumping Station (1911)
508	Male Ward (1914)
509	Male Ward (1914)
510	Male Ward (1915)
511	Hospital Ward (1916)
512	Power House (1916)
513	Kitchen (1916)
514	Laundry (1916)
515	New Bridge (1916)
516	Disinfecting Room (1916)
517	Female Admission Ward (1917)
518	Administration (1917)
519	Isolation Block (1918 - prev 410)

520	Ward (1929/30)
521	Chief Warder's Quarters (1932/33)
522	Ward (1932/33)
523	Male Ward (1936)
524	Male Ward (1936)
525	Male Ward (1936)
526	Cricket Pavilion (1936 - prev 501)
527	Female Ward 3&5 (1936 - prev 308 & 302)
528	Male Occupational Therapy (1936)
529	Blacksmith
530	Sawmill
531	Carpenter's Shop
532	Paintshop
533	Store
534	Electrician's Quarters
535	Water Tower
536	Shelter Shed (1929)
537	Septic Tank
538	Shelter Shed
539	Garage
540	Boiler Room & Tank
541	Shelter Shed
542*	New Wharf (1914)
543	Septic Tank

**Figure 3 Wolston Park Site Plan 1909-1936 showing the recreation ground surrounded by male division wards. (Wolston Park Conservation Plan 1992, adapted for this report)**



## **2.2 Sport & Recreation in the early years**

The inquiries of the 1860s were critical of the recreation facilities at the hospital, finding the hospital in want of recreation grounds and lacking employment and amusements for the inmates.

A recreation ground was established by 1870 on a site close to the water when fencing of the recreation grounds was extended.<sup>9</sup> After an inquiry by the Royal Commission in 1877, shade trees were planted in the recreation ground.<sup>10</sup>

The first record of a cricket ground at the hospital was in relation to the flood in 1893. The cricket ground, located on the river flats below the male wards was reported ruined and was put under crop. A new cricket ground was laid out in 1895 with weekly matches held and football in winter.<sup>11</sup> It is likely that this is the existing cricket pitch but the evidence is not conclusive.

Richard Scholes was the inspector for the Insane at this time and his obituary recalled his love for sports... in particular cricket.

## **2.3 Evolution in attitudes and treatment at Wolston Park Hospital**

### **2.3.1 Dr Ellerton**

The present recreation ground and cricket pavilion were established during the era of 'moral treatment' or therapy from 1909 to the 1930s when Dr B Hyam Ellerton was superintendent.

Dr Ellerton immigrated to Australia from England just before taking the position of medical superintendent of the Hospital for the Insane, Goodna.<sup>12</sup> He had a passion for cricket and had a reputation as a good cricket player.<sup>13</sup>

Dr Ellerton incorporated his passion for cricket into his new position at the hospital by incorporating the construction of the cricket field and pitch into his program of occupational therapy and the cricket matches as a participation and spectator sport into his plan for 'moral treatment' of patients.

Important to Dr Ellerton's philosophy was that patients were not to be treated as prisoners.<sup>14</sup> He can be credited with bringing the standard of the physical facilities at the hospital to a level conducive to the moral treatment philosophy of his time.<sup>15</sup>

### **2.3.2 Occupational therapy**

The *Wolston Park Hospital Conservation Plan 1992* notes,

*'As to the therapeutic role played by work, Dr Ellerton commented in 1913 that suitable work is found for as many patients as is desirable as occupation is one of the most useful aids we have at our hands to help firstly towards the recovery of hopeful cases, secondly in providing good and regular habits among the chronic and hopeless cases, and preventing the development of bad habits, which those mentally afflicted are so apt to acquire....'*<sup>16</sup>

Employment was coupled with wholesome food and regular exercise and patients were compensated for their work by tobacco, parole, and other privileges.<sup>17</sup> Dr Ellerton advocated that voluntary labour involving sport was particularly beneficial to patients' mental health,

*.... An apparent refinement of the work as therapy theory was that work must be voluntary labour, and moreover that voluntary labour involving sport, especially golf, was particularly beneficial, Dr Ellerton noting in 1930 that many patients prefer to work at something connected with sport than at ordinary everyday avocations for example working on the golf*

course, and he quoted figures showing that some 33 of the 79 patients who had worked on the golf course had been discharged....'<sup>18</sup>

In the annual report of the inspector for hospitals for the insane of 1910 Ellerton reported:

*'...Every effort is made to persuade the patients to work. Suitable outdoor work is a great help to improving the patients physical and mental conditions. The big undertaking of laying out the recreation ground, which has now been going on for 1 ½ years, has supplied a very convenient work, as it is situated close to the wards, and thereby we have been able to supply a great number of patients with healthy work...'*<sup>19</sup>

The recreation ground established by Ellerton commenced use in 1910. In addition to the cricket pitch, the works completed by the patients included terraced seating on the sides of the oval for all patients who could attend the games.<sup>20</sup>

### 2.3.3 Using the Cricket Ground

Statements concerning the importance of the recreation grounds in the treatment and well being of the patients were regularly made throughout Dr Ellerton's era as superintendent.<sup>21</sup>

For instance in 1911 he reported *'...the ground has been in regular use, affording an agreeable change to patients who are not fit mentally to be otherwise allowed beyond the ward gardens...'*<sup>22</sup>

In 1912 he stated that the recreation ground provided the *'chief form of spectacular amusements for patients, although a few patients are able to take a more active part occasionally... Cricket.. matches are arranged regularly practically every week and on public holidays against visiting teams... to some it is the only opportunity they may have of seeing people from the outside world...'*<sup>23</sup>

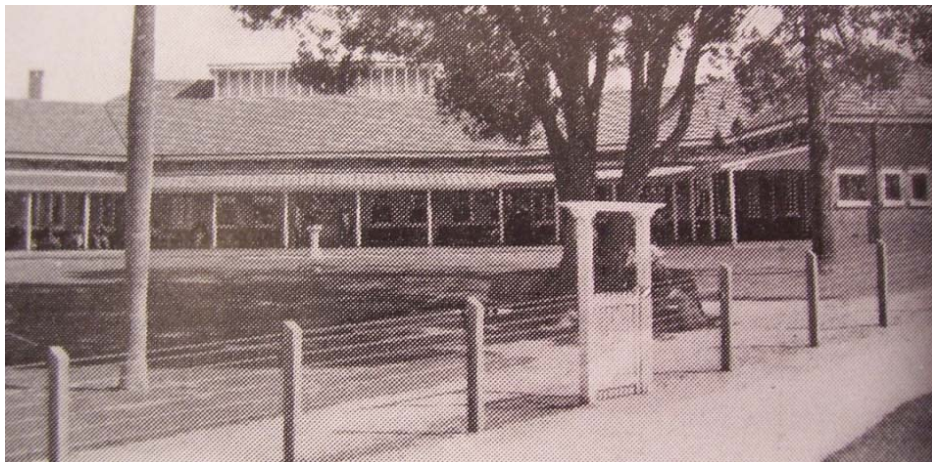
Dr Ellerton also influenced the siting of new male wards around the recreation ground. Lewis, McDonnell and Noble House were built to overlook the cricket grounds prior to 1920. By 1936 Osler and Pearce House were two more male ward blocks sited to overlook the recreation ground.<sup>24</sup>

In 1914 Dr Ellerton had the recreation ground enclosed by a 10 foot K-wire fence so that the new male wards overlooking the recreation ground required only low fences. The annual report of the inspector for hospitals for the insane of 1913 explained, *'this arrangement will allow the patients greater liberty, and present a lessor sense of confinement...'*<sup>25</sup>

Evidence of this ambition coming to fruition is in the annual report of the inspector for hospitals for the insane of 1934. It noted that the fencing surrounding the garden of the new male ward no. 8 overlooking the recreation ground was only 5 foot high and the gate to the recreation ground was unlocked.<sup>26</sup> This situation was much in contrast to the early form of the asylum which concentrated more on confinement and a prison-like approach to accommodation.

Other developments made in relation to the recreation ground during Dr Ellerton's era included the establishment of the cricket pavilion in 1910 and a bandstand in 1913 for the patients' benefit as well as boat swings for use of the boy patients in 1918.<sup>27</sup>





**Figure 4: Photograph showing the low fence and gate surrounding the garden of new male ward no. 8 (1936) (Annual Report for superintendent for hospitals for the insane 1935-1936, held by the library at Wolston Park Hospital)**

#### **2.4 The role of cricket in linking Wolston Park Hospital to the community**

The cricket facilities at the hospital quickly became well known. They were a source of pride for the hospital and helped to build a good relationship between the hospital and the outside community.

Dr Ellerton commented in 1913 that the recreation ground is '*...now well known among athletes as the best of its kind in Queensland, so that there is no difficulty in inducing the best teams to visit here from far and near... practically all the leading interstate [cricket] players have visited this ground during the past two seasons..*'<sup>28</sup>

At a parliamentary visit to the mental hospital in 1913 visitors saw the patients watching a cricket match. The new cricket pavilion was noted in the report of their visit on the list of improvements to the facility since May 1909.<sup>29</sup>

In 1914 Dr Ellerton again alluded to the pride and excitement conjured by the cricket grounds and matches,

*'...Matches with outside teams are regularly held, and the grounds are always kept in first-class order. During the present cricket season, the hospital cricket team has been playing in the Brisbane A Grade senior competition, so that patients have had the greater interest and pleasure of seeing the best-known players in Queensland. The terraced sides of the recreation ground supply ample and very convenient accommodation for all the patients who it is possible to allow to watch the matches..'*<sup>30</sup>

Further evidence of how the physical appearance of the hospital grounds affected the reputation of the hospital generally is found in comments by the Minister for Health and Home Affairs Hon A Jones MLA in 1948 in relation to the Wolston Park Hospital,

*'...The grounds and location are truly beautiful – spacious, well-kept, and with the serene atmosphere of the country. There are great lawns, beautifully kept... the immediate impression is that here is a place where people do care, and where every effort is made to provide the patients with surroundings most conducive to their recovery...'*<sup>31</sup>

During the war Brisbane A Grade cricket matches were discontinued and it was only possible to arrange miscellaneous matches for the patients to watch.<sup>32</sup>

However, the annual report of the inspector for hospitals for the insane for 1919 refers again to weekly cricket matches with visitors.<sup>33</sup>

## 2.5 The Cricket Pavilion Building

### 2.5.1 Initial construction

The initial date of construction for the cricket pavilion building is not known. However the cricket pavilion building was originally a warder's mess room and appears on a site plan in 1896.<sup>34</sup> It can be identified by its distinctive shape as well as the note on the plan.



**Figure 5 Site Plan from 1896 showing location of warder's mess room building (QSA PD389 with note enlarged for this report)**

The earliest mention of a warder's mess room found was in the Annual Report of the surgeon superintendent of 1870-1871.<sup>35</sup> A warder's mess room was used as temporary dormitory accommodation for patients during the era when the institution was overcrowded. There is also record of timber warder's quarters built in 1875.<sup>36</sup> It is not known if either of these are the building shown on the 1896 plan.

The only conclusive statement that can be made about the origin of the warder's mess room building that forms the core of the cricket pavilion is that the building dates back to at least 1896 and it is a fragment of the nineteenth century phase of cottage wards and temporary timber buildings.

The shape of the verandah is shown on the site plan in 1896.

Another site plan from 1909 provides more information.<sup>37</sup> This site plan formed a part of the documentation for a sunken wall that was constructed behind the original location of the warder's mess building. The building outline on this site plan shows that in 1909 the building footprint was the same as the existing three main rooms (now the meeting room (R1), and the back of house rooms (R2 & R3)) plus the verandah. The verandah was wider than the rooms and access to the building was by steps to the back of the verandah. This site plan does not show stairs at the front of the building that presently exist.

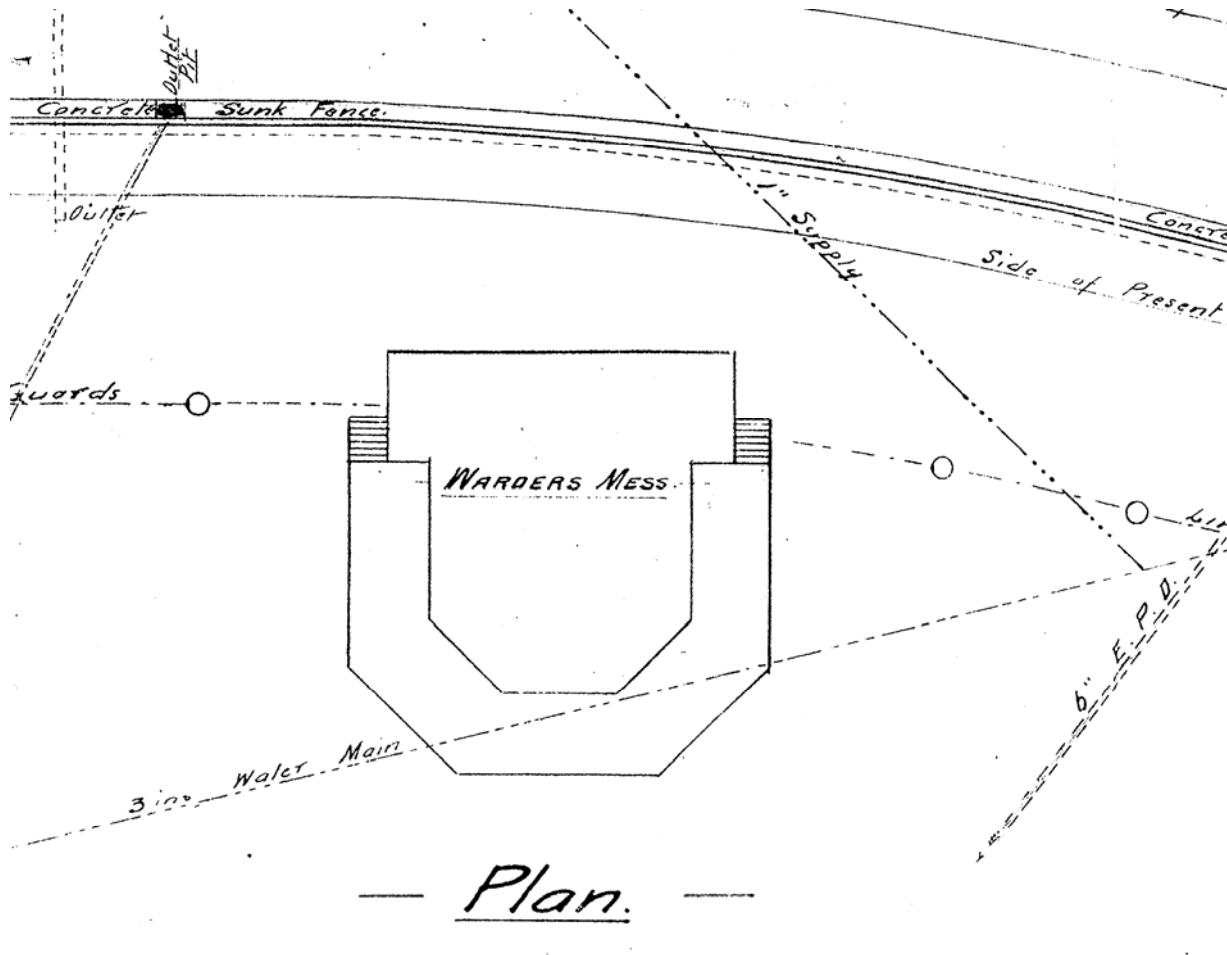


Figure 6 Part of a plan from 1909 which formed part of the documentation for a new sunken wall (QSA WOR/A695 Item ID 108407)

### 2.5.2 The first site 1910-1935

The warders' mess room building was relocated to a position on the southern corner of the recreation ground in 1910 to become the cricket pavilion under the direction of Dr Ellerton.<sup>38</sup>

A memorandum dated 5 October 1910 notes '...repairs to the old mess room, which is being removed and refixed on the Sports Ground for use as a Pavilion.'<sup>39</sup>

There is record that jacks were hired in August 1910.<sup>40</sup> It is possible that they were for use in the relocation of the cricket pavilion building.

There is also a record of the materials and quantities required for repairs to the old warders' mess in conjunction with its relocation for use as a cricket pavilion.<sup>41</sup>

R. N. J. Quinn

Department of Public Works,

5<sup>th</sup> Oct. 1910

To The Under Secretary & Govt Architect

Memorandum.

PUBLIC WORKS OFFICE, QUEENSLAND  
08820  
5 OCT. 1910

Re Materials required, Hospital for the Incurable, Goodna

Referring to 1077687 I have the honor to report that the undermentioned material is required for repairs to the old Mess-room, which is being removed and replaced on the Sports ground for use as a Pavilion. I submit cost hereunder. Messrs Jas. Campbell & Sons Ltd. quotation.

12 Sheets Green Head gal. iron 6'3" x 24 gauge @ 2/2	£ 1. 15. 0
12 " " " 6'3" x 26 " @ 2/3	1. 9. 0
14' of gal. 4 lb. lead, 14" wide, @ 0.2.11 @ 1/4	1. 0. 3
14 Sheets Oak gal. corr. iron, 9' of sheet, x 24 gauge @ 1/4	2. 16. 0
2 lengths 16" x 24 gauge Ridge Capping @ 1/4	2. 6
56 lbs 2" L. H. nails . 9/4 gauge @ 23/4	11. 6
112 " 2 1/2 " " " "	1. 3. 0
400 Sigs. gal 6' x 1 Pine Shingles @ 11/6 per 100 lbs.	4. 12. 0
100 " 6' x 1 " " " "	1. 3. 0
200 " 4' x 1 " " " "	2. 11. 6
<b>Total</b>	<b>£ 17. 7. 3</b>

*Am unable to recommend any estimate on this subject.*

*H. R. Quinn*  
Inspector of Works

Figure 7 Memorandum dated 5 Oct 1910 regarding materials and quantities required for repairs to old mess room (QSA WOR/A695 Item ID 108407)

The materials and quantities detailed in the memorandum match up with the amount and type of material that would have been required for the construction of the shower room addition on the west of the original building footprint as well as the new score board.

There is also record of painting work.<sup>42</sup> The pigments used were red oxide, brunswick green and white lead, which are an indication of the paint scheme used at that time.



**HOSPITAL FOR THE INSANE.**  
29 Sept 1910

08169

NAME OF ARTICLES REQUIRED:

Red Oxide Paint (250)	1500
Prussian Blue (250)	500
Turquoise	4900
White Lead (Chambers)	3000
Pinked Oil B+S	1500
Raw Oil	200

The Deputy Govt Architect  
P.O. Box  
for painting Pavilion -  
H. B. E. E. E.  
Medical Superintendent.

Please give the number of this Requisition on Voucher.

**Department of Public Works,**  
S. Hamington  
21 Oct 1910

08927

**Memorandum.**

Re Hospital for Insane Goodna

Referring to copy of paper 10/8/69

I have the honor to report that the painting material for painting the new cricket pavilion lately erected out of old store room & cost will be as follows -

3000 White Lead 2 1/2	£ 4. 13. 0
Oil 3500 150 1/2 1/2 1/2 1/2	9. 3. 4
Turquoise 4000 2 1/2 1/2	2. 4. 0
White Oxide 500 2 1/2 1/2	2. 1. 6

no funds available £ 18. 11. 10

S. Hamington  
Depy of Works.

25. 11. 10

10. 11. 10

no action -

Figure 8: Quote dated 29 Sept 1910 and memorandum dated 21 Oct 1910 concerning paint materials required for painting the cricket pavilion (QSA WOR/A695 Item ID 108 407)

Photos of the cricket pavilion just after it was established show the main entry pediment and timber steps at the front of the building. The pavilion is sited on a raised platform in the corner of the recreation ground. The building and timber steps address the recreation ground.

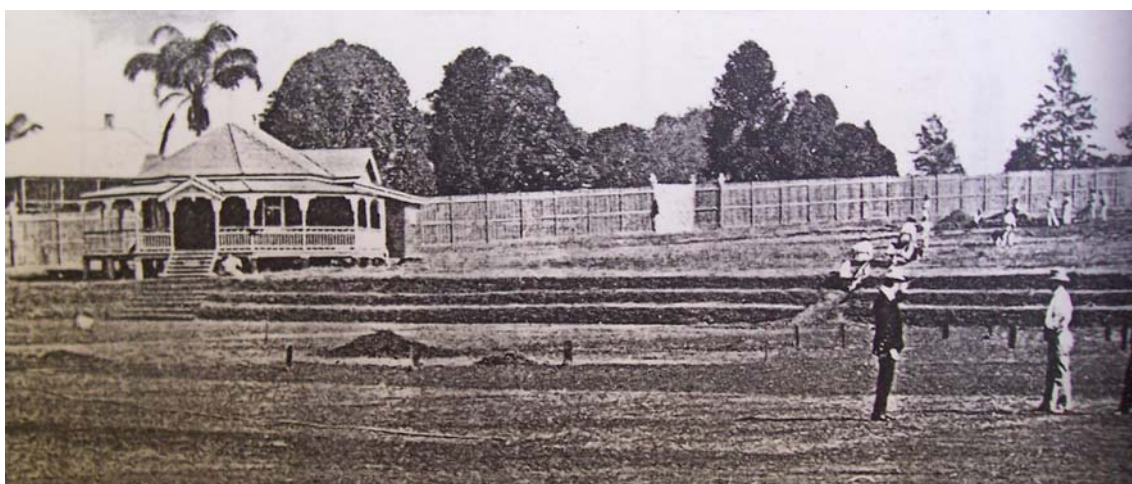


Figure 9 Cricket Pavilion in first location showing setting and patients working on the terraces 1911. The palm tree behind the building survives. (Annual Report of the superintendent for hospitals for the insane 1911, held by the library at Wolston Park Hospital)

In the photograph reproduced above the grassed terraces can be seen around the boundary of the cricket ground. There are three terraced levels and shallower grassed steps leading up

to the cricket pavilion. The shower room presently on the west is visible as an enclosure extending past the right hand side of the verandah. The score board has not yet been built.

Part of the handrail in the photographs is a light colour. The architraves around the windows are also a pale colour. In the photo it appears somebody is painting both the handrail and the verandah floor edge suggesting the refurbishment of the building was still being completed. This would suggest that the colour of the verandah floor edge and fascia is the same as the handrail. The brackets don't appear to be as ornate as they appear in later photographs however they are a similar profile and the quality of the photo makes it difficult to distinguish.



**Figure 10 Cricket Pavilion Building from the north in its first location with the score board now constructed on the right hand side and some substantial masonry steps (exact date unknown, but it is later than 1911 and before 1936). (framed photograph held by the cricket club)**

The photograph above shows the extensions after 1911 including the shower room to the west and the score board. The building is aligned slightly askew to the opening in the white picket fence and the concrete stair down to the recreation ground itself.

The verandahs have not been closed in at all and the existing eastern lean to extensions have not yet been built. Part of a window hood is visible through the verandah on the left hand side. The balustrade is slightly different to that existing today. There are different numbers of balusters and the handrail and balusters appear to be a different size to the existing. At this time the colours were fairly dark for the walls (possibly red oxide), very dark for the gutters, handrail and door leaf (possibly Brunswick green) and white for the detail including balusters, mid and bottom rails of the balustrade, verandah posts, beams and brackets, finials and fascias, window frames and windows and stair trim. The panels in the French doors at the entrance are a lighter colour than the frames – possibly similar to the wall colour. The score board is a dark colour with white text. The fretwork in the pediment at the front can be seen in this photo, as well as the detail of the verandah brackets. There is a



white picket fence with decorative tops to the pickets. The concrete stair with concrete dwarf walls is shown, with grassed terraces butting up to either side of it.

A toolshed was added to the rear of the cricket pavilion in 1913.<sup>43</sup>

### 2.5.3 The present site (from 1936)

The cricket pavilion was relocated in 1936 to the opposite side of the recreation ground. In the annual report of the inspector of hospitals for the insane of 1936, Dr Ellerton justified this move stating that the cricket pavilion in its original location was '*directly in the line of vision*' between the new male ward 8 and the cricket ground, that is, it obstructed the patients' view of the cricket.<sup>44</sup>

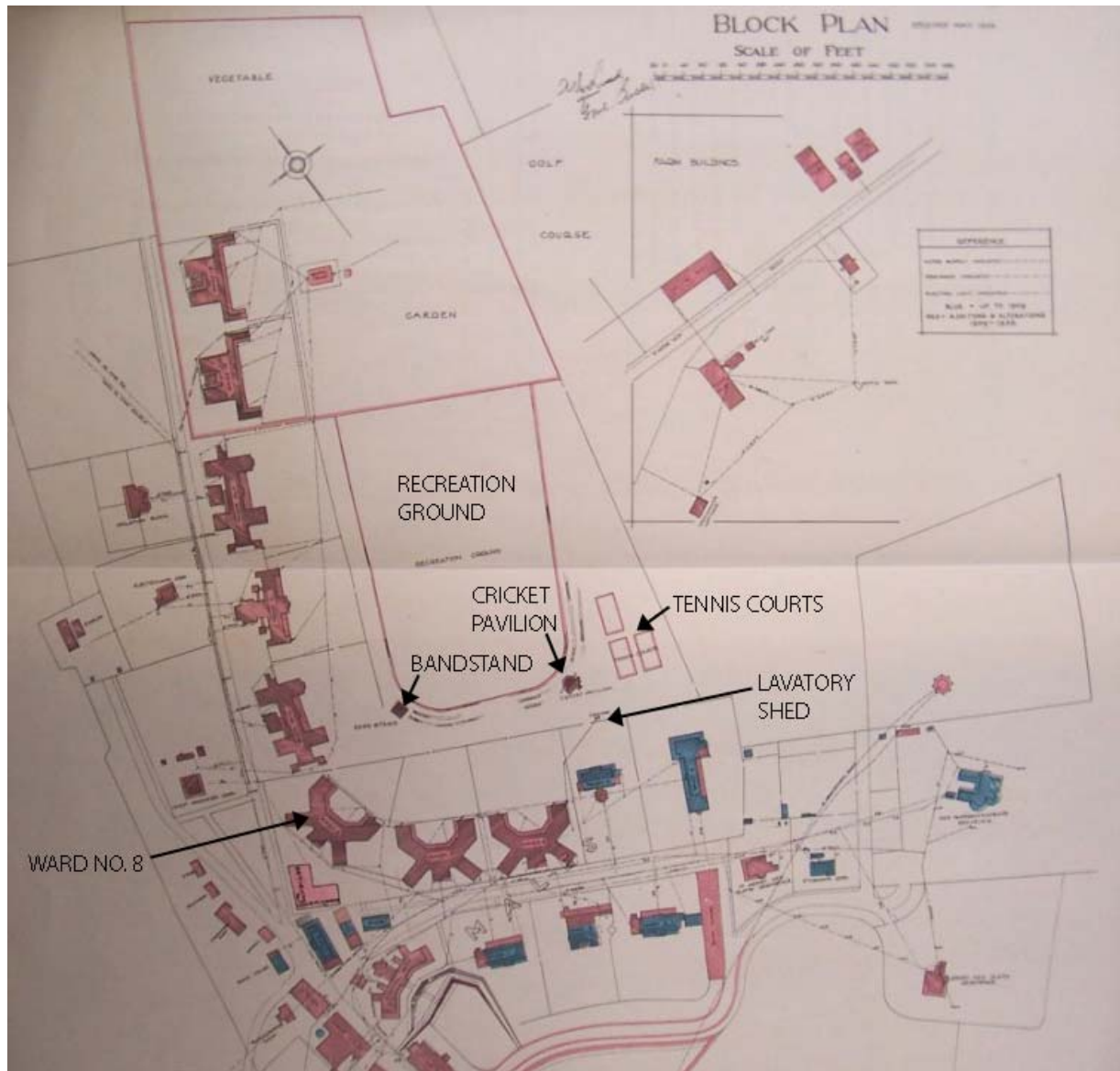
On the vacated site, a platform for a bandstand was made.



**Figure 11 Cricket Pavilion on its new site on the left hand side of the photo (part visible) and Bandstand behind the steps on the right. (Annual Report of the Superintendent of hospitals for the insane 1936, held by the library at Wolston Park Hospital)**

The photograph reproduced above shows the form of the bank around the oval and the deep earth drain around the bottom of the bank. The terraces in this north corner of the recreation ground are not as clearly defined as those in the eastern corner. The existing concrete stairs are not yet in place in the north corner and a grass terraced stair appears to have been set out but not completed. A 'goat track' runs around the top of the bank. Note the low fence between the crab shaped male wards in the distance and the recreation ground with gates from at least three of the ward gardens providing access to the grounds. The bandstand is in the east corner of the grounds with the concrete stair in front. This was just a platform without a structure. There is no planting around the cricket pavilion and limited planting in front of the wards. The score board is not visible.

The new location of the cricket pavilion and the bandstand are shown on a block plan from the annual report of the inspector of hospitals for the insane of 1936.<sup>45</sup>



**Figure 12** Part block plan of Goodna Hospital for the Insane in 1936 with annotations added for this report. (Annual Report of the Inspector of hospitals for the insane 1935-1936, held by the library at Wolston Park Hospital)

Note the siting of the male wards overlooking the recreation ground and the fences to the ward gardens with gate openings from each onto the recreation ground. All the lean-to additions are shown in the building outline of the cricket pavilion. The terraces are shown continuing around past the new location of the cricket pavilion in the north corner of the grounds. The lavatory shed, cricket pavilion, tennis courts and bandstand are shown. The recreation ground has a definitive boundary where the earth drain runs.

The 1936 statement showing expenditure by the Department of Public Works notes connecting up the cricket pavilion WCs to sewerage for 33£, 14s 4d.<sup>46</sup> A lavatory shed is shown on the block plan from the annual report of the inspector of hospitals for the insane of 1936 as separate and behind but close to the cricket pavilion. This corresponds approximately to its present location.<sup>47</sup>

At some unknown date between 1911 and 1936, possibly as part of the relocation, parts of the verandah on both sides of the building were enclosed to form stores and an additional store and pantry were added to the east side of the building. Photos from around 1911 show the pavilion without the additions and the block site plan from the annual report of the inspector of hospitals for the insane of 1936 shows the additions included in the building outline.

### **2.6 Recent history**

The cricket pavilion remained in the ownership of the hospital and hospital teams played cricket on the pitch until the 1970s.



**Figure 13: Undated studio photograph of the Wolston Park cricket team outside the pavilion with Dr Ellerton (captain) on the right (front row).**



- 
- <sup>1</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p18
  - <sup>2</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p11-14
  - <sup>3</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p11, 12
  - <sup>4</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p18
  - <sup>5</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p20-24
  - <sup>6</sup> Qld Gov., Environmental Protection Agency (2006), p2
  - <sup>7</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p23, 29, 30
  - <sup>8</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p36
  - <sup>9</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p24
  - <sup>10</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p25
  - <sup>11</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p31
  - <sup>12</sup> The telegraph, Brisbane, Friday Evening, July 2 1937, p15
  - <sup>13</sup> The telegraph, Brisbane, Friday Evening, July 2 1937, p15
  - <sup>14</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p35
  - <sup>15</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p36
  - <sup>16</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p38
  - <sup>17</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p36
  - <sup>18</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p38
  - <sup>19</sup> Ellerton (1910), p4
  - <sup>20</sup> Ellerton (1910), p4
  - <sup>21</sup> Ellerton (1910-1930s), Annual Reports for the inspector of hospitals for the insane
  - <sup>22</sup> Ellerton (1911), p5
  - <sup>23</sup> Ellerton (1912), p5
  - <sup>24</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992; Ellerton (1935-36), p10
  - <sup>25</sup> Ellerton (1913), p32
  - <sup>26</sup> Ellerton (1935-36), p10
  - <sup>27</sup> Ellerton (1910) p4, (1913) p31, (1918) p10
  - <sup>28</sup> Ellerton (1913), p6
  - <sup>29</sup> Ellerton (1913), p33, 34
  - <sup>30</sup> Ellerton (1914), p7
  - <sup>31</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p71
  - <sup>32</sup> Ellerton (1915), p9
  - <sup>33</sup> Ellerton (1919), p6
  - <sup>34</sup> QSA 1896 Plan of Woogaroo Asylum PD 389
  - <sup>35</sup> Surgeon Superintendent (at Woogaroo Asylum), (1870-1871)
  - <sup>36</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p23
  - <sup>37</sup> QSA WOR/A695 Item ID 108407
  - <sup>38</sup> QSA WOR/A695 Item ID 108407
  - <sup>39</sup> QSA WOR/A695 Item ID 108407
  - <sup>40</sup> QSA WOR/A695 Item ID 108407
  - <sup>41</sup> QSA WOR/A695 Item ID 108407
  - <sup>42</sup> QSA WOR/A695 Item ID 108407
  - <sup>43</sup> Ellerton (1913), p31
  - <sup>44</sup> Ellerton (1936), p10
  - <sup>45</sup> Ellerton (1936)
  - <sup>46</sup> DPW (1936) in Ellerton (1936), p47
  - <sup>47</sup> Ellerton (1936)

### 3 THE CRICKET PAVILION TODAY

#### 3.1 *The Setting*

##### 3.1.1 *The recreation ground*

The recreation ground is physically demarcated through level changes and appears as a level platform constructed within the natural landscape of the hospital estate.

There are vistas out towards the north of the natural landscape within which the recreation ground and the hospital itself are sited.



**Figure 14** The vista north from the cricket pavilion platform. The general ambience of the environment surrounding the hospital estate was noted from 1861 as a desirable quality of place for an asylum conducive to the health of patients. The views and vistas from the cricket pavilion and wards across the recreation ground and out to the natural landscape remain peaceful and attractive to the cricketers.

The cricket oval is approximately 208 metres by 116 metres in size and stands to the north-west of the crab shaped male wards established in the 1930s.<sup>48</sup> The cricket pavilion stands on the southern corner of the recreation ground. There is a bowling club, tennis courts, cricket practice nets and store building to the north.



**Figure 15** Photo from the north showing cricket pavilion within its setting

There is a relatively even height bank rising above the recreation ground level on the south west boundary and diminishing banks rising on the south east and north west boundaries. Both these banks diminish towards the north east.



**Figure 16 Photo showing diminishing bank from the cricket pavilion platform in the southern corner towards the north west down the south east and north west boundaries of the recreation ground**

There are two sets of unused ward buildings that address the recreation ground. One set is to the southwest and dated to 1936. The other set is to the northwest and dated to 1914 and 1915.<sup>49</sup> Both sets are sited beyond the banks of the recreation ground boundary.



**Figure 17 Photo showing example of an old crab shaped male ward on the south west boundary dated to 1936**



**Figure 18 Photo showing wards to the north west dated to 1914. This photo also shows some of the large shade trees planted in front of the ward buildings along the north west boundary since Ellerton's time.**



The banks are no longer terraced and they appear different in height and form than to photos of the terraced bank from 1910.

Large shade trees have been planted on the boundaries of the recreation ground, particularly in front of the two sets of ward buildings to the southwest and northwest.

There is no evidence of a raised platform or a concrete stair in the west corner of the recreation ground, which was the first location of the cricket pavilion, then the bandstand.



**Figure 19 Photo showing the west corner of the recreation ground today which was the first location of the cricket pavilion.**

This photo also shows the large shade trees which have been planted in front of the old male ward no. 8 which dated back to 1936. The view from the ward to the recreation ground was considered important. The cricket pavilion was moved from this location to the north corner of the recreation ground on account of it blocking the view of the recreation ground from this ward.

There is a triangular raised platform and concrete stair with rendered dwarf walls in the south corner of the recreation ground where the present site of the cricket pavilion stands. The lavatory shed is located behind the cricket pavilion building on the opposite side of the narrow lane.



**Figure 20 Photo showing concrete stair with rendered dwarf walls in the south corner of the recreation ground. It is similar to the one that stood on the previous site but has two more risers.**

There are two brick pillars in front of the old male ward no. 8 beyond the west corner of the recreation ground which are possibly indicative of the low fence and gate that show in photos and are mentioned in the annual report for the superintendent of hospitals for the insane in 1935-6.<sup>50</sup>



**Figure 21 Photo of two brick pillars in front of the old male ward no. 8**

There is a bitumen road along the south eastern edge of the recreation ground. There is a narrow gravel lane along the north eastern edge behind the bowling club building and a narrow broken bitumen lane along the south western edge of the recreation ground behind the cricket pavilion, but in front of the lavatory shed. Currently cars park on the side of the lane behind the cricket pavilion and on the opposite side of the road under the large shade tree.



**Figure 22 Photo showing lane between the cricket pavilion and the lavatory shed with cars parked on either side of the road and under the large shade tree on the opposite side of the road to the cricket pavilion**



The bowling club building dates to 1951/52 and is a low elongated brick structure with an asbestos roof that defines the north eastern edge of the recreation ground platform beyond which the landscape falls away to a fairly steep bank. The bowling club building and green is disused and in disrepair. The green is surrounded on the south west, north west and north east by a hedge.



**Figure 23** Photo showing south western elevation of the bowling club building. This low, elongated building demarcates the south western edge of the recreation ground. It defines the edge of the cricket oval without being visually obtrusive. Beyond the bowling club building the land falls away down a relatively steep bank which can not be seen from the north east boundary.



**Figure 24** Photo showing the hedge around the bowling green with the cricket practice nets to the north and the goal posts in front



**Figure 25** Photo showing bank and lane behind the bowling club building

There are two sets of concrete steps with crudely constructed brick edge walls in the bank to the north west of the cricket pitch.

The store building in the north corner of the recreation ground is a recent building erected by the cricket club. It is a standard prefabricated corrugated metal shed on a concrete slab.



**Figure 26 Photo showing recent store building and cricket practice nets in the north corner of the recreation ground**

### *3.1.2 The cricket pavilion site*

The cricket pavilion building is sited on a raised platform at the south corner of the site and faces north.



**Figure 27 Cricket Pavilion and raised triangular platform in the southern corner of the recreation ground today**

The edge of the raised platform at the top of the bank is lined by a series of rectangular garden beds with concrete and stone edging.

There is a concrete stair that looks very similar to the one that appeared in photographs and was in the south west corner of the recreation ground. There is no indication in the render that the banks were terraced when the stair was established. The ends of two drains discharge low in the bank located symmetrically on either side of the concrete stair.



**Figure 28 Drain discharging low in the bank to side of concrete stair**



A rock in front of the pavilion with a concrete edge is believed to be a recent memorial to a guardsman who died but there is no plaque.

There is a low concrete block retaining wall running along the east edge of the platform behind the cricket pavilion. There are treated pine bollards lining the southern edge of the raised platform, along the edge of the road.

The raised platform on which the pavilion stands is fairly densely planted along the top of the retaining wall to the east, sheltering the pavilion from the road. There is also a group of palm trees in the south west corner of the site. The planting around the cricket pavilion building is recent.



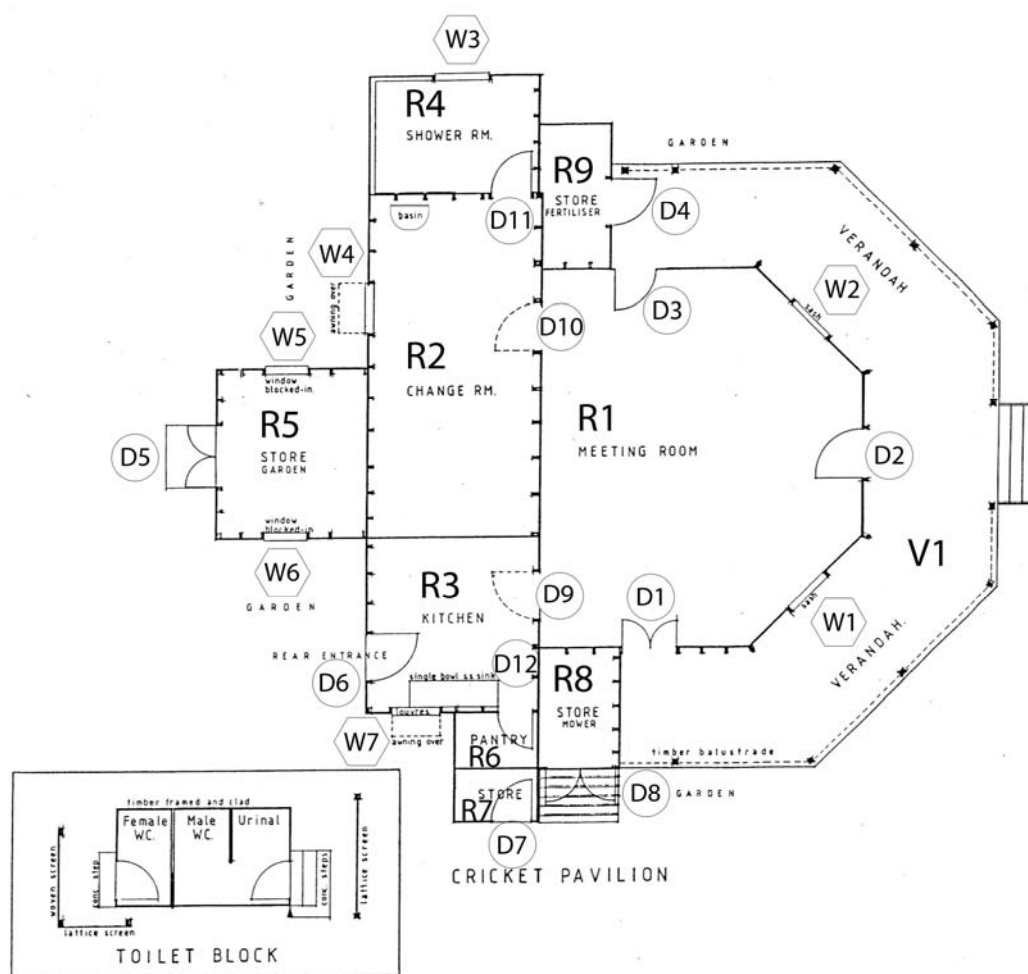
**Figure 29 Photo showing palm trees in the south west corner of the cricket pavilion site. This photo also shows the garden beds and edging along the top of the bank and the bollards along the road edge**

The cricket pavilion as presently sited faces the recreation ground. However, similarly to its original siting, its axis is aligned slightly askew towards the north to the concrete stair leading down to the recreation ground level itself.

The score board is orientated to face the bank on the opposite side of the pitch in front of the two storey ward buildings.

### 3.2 The Cricket Pavilion Building

(For the survey of room interiors refer to the appendix of this report. All photographs date to September 2007).



→ **N** (for the cricket pavilion)

**Figure 30 Existing Cricket Pavilion and Lavatory Building Floor Plan (adapted from the Wolston Park Hospital Building Elevation, Dept. of Works, October 1987)**

The cricket pavilion building today is a single storey timber structure with an orb profile corrugated iron roof in short sheet lengths with quad profile gutters. Some brackets are earlier than others with riveted flaps. The building is mostly supported on low timber stumps with some early round metal ant caps with beaded edges. Some stumps have been replaced in concrete.



**Figure 31 Photo of quad gutter showing two different types of gutter brackets**





**Figure 32 Cricket Pavilion today from north. The timber stair at the front and the pediment do not show on an early historical site plan in 1896.**

The front is octagonal in plan enclosing a single main meeting room (R1), with verandahs following the east, west and north edges of that room.

There are two main auxiliary rooms (R2, R3) to the south accessed via the main room that are rectangular in plan.

The roof reflects these two different parts of the building. There is a triangular vent in the gablet where the two parts meet. To this extent the building form is symmetrical.



**Figure 33 The southern elevation of the cricket pavilion, showing two parts of the roof meeting and the triangular vent as well as the lean-to additions. The lean-to on the left is the shower room that shows on photographs as early as 1911. The lean-to addition in the foreground is the toolshed and dates to 1913. The lean-to addition on the right shows on the historical block plan from 1936. None of the lean-to additions show in the building outline on historical site plans from 1909 and 1896.**

There are three lean-to structures that all appear as additions to the original structure evident from joints in the external cladding. There is a shower room to the back on the western elevation, attached to R2. There is a tool shed/garden store (R5) about centre to the southern elevation, accessed externally, and a store/pantry addition to the east elevation attached to R3.

The rear sections of verandah on both east and west sides of the building have been closed in to make two more stores both accessed externally.



**Figure 34 Photos showing rear sections of the verandah enclosed**



**Figure 35 Joint and end of stop chamfered verandah beam still present inside the enclosed verandah store R9 at the back of R4.**

The main access to the building is via timber stairs to the verandah at the front. The verandah roof reflects this with a pediment over the entrance. The timber fretwork within the pediment has been replaced with solid panel. Beyond the main eaves, the pediment soffit is lined with VJ boards and the end of the ridge has been repaired with a spliced end. It is possible this is a modification made in 1910 when the building was converted to a cricket pavilion.



### 3.2.1 Verandah

The height to the underside of the verandah beam is 2140mm. Original verandah posts and beams survive. Verandah posts are turned timber posts and two have been replaced recently evident from minor variations to the mouldings and shape. Corner posts are specially shaped. Two verandah posts have been moved in conjunction with the two verandah enclosure additions for stores.



**Figure 36 turned timber verandah posts. The fillets around the bases are not original. The faceted surfaces in some areas suggest they may have been hand finished although this may also be the result of subsequent refinishing.**

**Stumps have been replaced.**

There are two different sizes of timber handrails, possibly from different times. Both are slightly different to the original balustrade that existed in photos when the building became a cricket pavilion. The spacing and size of balusters appears different in early photographs the existing. The handrail itself appears to start slightly lower and might be a smaller profile. Two sections of balustrade have been removed where the verandah has been enclosed.

Timber verandah brackets visible in early photos have been removed however the paint layers show where they were fixed.

The stair treads at the front entry have been replaced with smaller ones than original.



**Figure 37 Photo showing replace stair treads at the front entry**

### *3.2.2 Building Skin and Detail*

Generally, the building is single skin to the verandah and internal walls, clad by chamfer boards with 135mm wide cover to all originally external walls of R1, R2 and R3. The boards are beaded on the inside face. Studs are exposed on the verandah. Lean-to and verandah enclosure additions are also clad in chamfer boards, beaded on the inside face with studs exposed internally. The partition between the main room R1 and the back rooms R2 and R3 is clad in horizontal beaded boards. Other internal partition walls between R2 & R3 and R6 & R7 are clad with VJ boards. The cladding to the toolshed and stores is second hand material in matching size and profiles probably from original hospital buildings.



**Figure 38 Photo inside the toolshed showing second hand material and dado paint stripe from a previous location. The tall window sashes on the right have also been recycled. This photo also shows the brown colour (possibly red oxide) on the northern wall inside the toolshed.**

The northern wall inside the toolshed is still painted in the brown colour (possibly red oxide) that would have been a previous external colour of the cricket pavilion.



The shower room has a galvanised flat iron shower recess with beaded edge and an early shower fixture. The manufacturer's mark is visible but is illegible.



**Figure 39 Photo inside the shower room**

R1 has triangular section vertical corner moulds and quad skirting. It is the only room with skirting.



**Figure 40 Photo showing internal elevation to the north inside R1. The four panel door has been recycled in the opening originally intended for French doors. The fanlight is original.**

Ceilings internally are generally beaded tongue and groove boards with 150mm cover and are flat, except for the verandah, pantry and shower room which are raking. There is no ceiling in the toolshed.



**Figure 41 Ceiling and ceiling rose in R1**

Ceiling height is generally 3010mm to the top of the studs and 3080mm to the ceiling lining. There are pressed zinc ceiling roses in R1, R2 & R3. The ceiling rose itself is missing from R3. Cornices, where they exist, are generally scotia profile except in R3 which has a batten cornice.

Floors are generally hardwood tongue and groove with 90mm coverage both inside and on the verandah and show the wear of years of cricket shoes crossing the floors. The floor in the toolshed has tongue and groove boards with 100mm coverage. The shower room has a concrete floor to the shower recess, which is formed by screed on top of timber. The shower room has a moulded concrete upstand around the shower.



**Figure 42 Photo showing raking verandah ceiling, hardwood tongue and groove floor and D4 into R9. To the right the French door opening survives.**



**Figure 43 Bookcase in R1**

The main room R1 has a bookcase in similar moulded style and painted the same colour as the room linings.

The change room (R2) contains an early locker which appears to have stood in the main room R1 against the back wall. This is evident from a break in the quad skirting trim and marks on the floor which correspond with the size and shape of the locker.



**Figure 44: Original locker stored in Room 2**





**Figure 45 Photos of basin (above) and hooks (right) in R2**



The change room R2 has some early coat hooks with porcelain ends (unpainted) on the rail, a timber shelf and a wall basin with metal splashback and hung mirror reused from elsewhere.



**Figure 46 Photo showing underside of timber shelf in R6 and recycled chamfer boards**

There is an early timber shelf in the pantry R6.



### 3.2.3 Doors and windows

Door and window framing into R1, R2 and R3 is consistently tusk tenon jointed. Door framing to doors into lean-to additions are consistent but without the tusk tenon joint. Doors into the stores accessed externally on the eastern elevation and the toolshed on the southern elevation are battened.



**Figure 47** Example of tusk tenon jointed framed door opening onto the verandah reduced for a 4 panel door. This would have original been a set of French doors with a fanlight.



**Figure 48** Elevation of W1 with tusk tenon joints



**Figure 49 Elevation of D1, French doors that have been boarded up.**

One set of French doors, D1, survives onto the verandah. The other French doors, D2 & D3, have been replaced but the frame and fanlights remain. D2 and D3 openings have been reduced for 4 panel doors. It is possible that the door leaf from D10 is now in D2.

Door leaves of internal doors D9 and D10 are missing.

All tusk tenon jointed door frames incorporate fanlights. Some fanlight buttons still remain. The fan lights internally are larger than those on verandah walls.

None of the doors have architraves.



**Figure 50 internal elevation towards the south in R1 showing D9, including fan light. This door probably incorporated a four panel door leaf.**

There are two double hung colonial sash windows in R1. The glass is missing to the bottom sash in both W1 and W2. Both windows are missing glazing bars to the bottom sashes. The layout evident from the mortises suggests they would have been 6 pane. Upper sashes are two pane with a vertical glazing bar and moulded horns. Both windows have architraves. Both windows have flaps to the window jambs to support the upper sashes, although the flaps are mostly missing from W1.



**Figure 51 Elevations of W4 (above left) and W7 (above right and below left) and photo showing perspective view of hood to W7. Both W4 and W7 have original external hoods. Note W7 has original sill.**

All other windows, except for the toolshed windows are now louvres. Some of the louvres have Georgian wired glass. W4 & W7 are early window openings that have been reduced for louvres. W4 & W7 both have original external hoods the same as they are partly visible in the photo C.1911 figure 10.





**Figure 52 Internal elevations of W5 (left) and W6 (right)**

The windows in the toolshed, W5 & W6, now blocked up, are both pairs of 3 pane casement sashes, possibly recycled. The sashes are tall and narrow and appear to be early, possibly from the original hospital. The window opening size is similar to what the original opening sizes of W4 and W7 appear to have been.

Internally there is a slatted high level opening between R2 and R3.



**Figure 53 Photo showing slatted high level opening between R2 and R3. This photo also shows the ceiling rose missing in R3 and the mortise in the rail of the single skin wall for the power to come down to the power point above the fridge.**



### **3.3 The Lavatory**

The lavatory shed is located on the opposite side of the narrow lane that runs behind the cricket pavilion building.

The lavatory shed is a single storey, single skinned timber building with a skillion corrugated metal roof. It sits on a raised concrete base with concrete steps at both entries into a ladies section and into a gents section. Lattice screens of recent detail have been erected.



**Figure 54 North eastern elevation of lavatory shed**



**Figure 55 south eastern elevation of the lavatory shed**

External cladding is chamfer board, recycled in some areas. External doors are VJ ledged and braced. Internal cladding is VJ boarding, partly covered with FC on the ladies' side. Internal doors are  $\frac{3}{4}$  height and undercut.



**Figure 56 (left) through the entry door onto the gents**

**Figure 57 (right) photo showing urinal cistern in gents, as well as recycled external cladding and internal VJ cladding. The external cladding has the same colouring and dado stripe detail as other recycled materials in the cricket pavilion building itself.**



High level cisterns have been removed.



**Figure 58 Location of previous high level cast iron cistern in ladies.**

### **3.4 Services**

The cricket pavilion is linked to electricity, sewerage and potable water. There are lights and power points in the main rooms. The electrical switch board is located in the kitchen R3 adjacent the door.

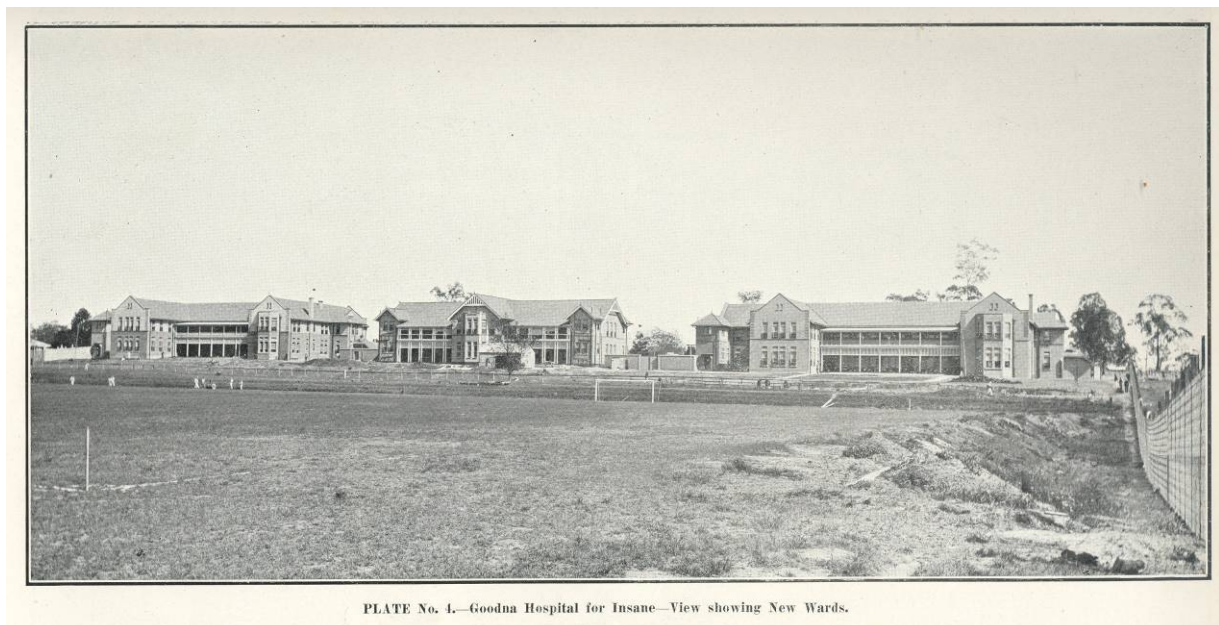
Potable water is connected to a trough basin in the kitchen R3, a wall mounted porcelain basin with metal splashback in the change room R2, the shower room R4 and a hose cock on the external back wall to R3. Potable water is also connected to the cisterns and basins in the lavatory building.

Sewerage is connected to both the pavilion and the lavatory building.

### **3.5 Interpretation**

The physical evidence is consistent with the documentary evidence but provides further insights into the history of the building.

- It is likely that all the rooms and additions date to 1936 or earlier except possibly for the verandah enclosures R9 and R8. The toilet also dates to 1936.
- The verandah is quite intact but it appears the balustrade has been rebuilt twice.
- When it was a ward building there may not have been a front pediment and stair. The windows in R1 may have been 6 pane sashes.
- The conversion to a cricket pavilion probably incorporated recycled material from the cottage wards.
- Originally all the doors to the front verandah were French doors. Internal doors were four panel.
- The edge of the oval has been modified although the general character remains.
- Although always open and semi natural, the growth trees around the oval have changed its character from the time of first construction.



**Figure 59: Illustration of the cricket pitch from the Annual Report of 1915**



---

<sup>48</sup> Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992, p42

<sup>49</sup> Refer plans in appendices to Qld Gov., Project Services, Wolston Park Hospital Conservation Plan 1992

<sup>50</sup> Ellerton (1935-36), p10

## 4 ANALYSIS

### 4.1 Cultural Heritage Significance

This section of the report discusses the cultural heritage significance of the historic cricket pavilion at Wolston Park Hospital. Cultural heritage significance is assessed using standard criteria and a summary statement of cultural significance is then prepared. The statement of cultural significance describes why a place is important and is used as a basis for determining conservation policy.

In Queensland the criteria used for assessing cultural heritage significance set out in the *Queensland Heritage Act 1992* are:

- (a) *the place is important in demonstrating the evolution or pattern of Queensland's history;*
- (b) *the place demonstrates rare, uncommon or endangered aspects of Queensland's cultural heritage;*
- (c) *the place has potential to yield information that will contribute to an understanding of Queensland's history;*
- (d) *the place is important in demonstrating the principal characteristics of a particular class of cultural places;*
- (e) *the place is important because of its aesthetic significance;*
- (f) *the place is important in demonstrating a high degree of creative or technical achievement at a particular period;*
- (g) *the place has a strong or special association with a particular community or cultural group for social, cultural or spiritual reasons;*
- (h) *the place has a special association with the life or work of a particular person, group or organisation of importance in Queensland's history.*

The statement of significance from the entry in the Register for Wolston Park complex is reproduced here. Sections have been highlighted in bold for this report which relate to the period of the cricket pavilion and the reasons for its construction.

**“Wolston Park Hospital Complex** is a place of cultural significance and satisfies one or more of the criteria specified in s.34(1) of the *Queensland Heritage Act 1992* as evidenced by, but not exclusive to, the following statement of cultural heritage significance, based on **criteria A, C, D, E and G.**

<b>Criterion A</b>	As the earliest and best-known public institution providing care and treatment for mentally ill and intellectually disabled people in Queensland, Wolston Park Hospital Complex is important in demonstrating the evolution of Queensland's history. The Woogaroo Asylum was founded by the Queensland government as the first publicly-funded, mental health institution in the colony in the early 1860s and by the 1950s became the largest such institution not only in Queensland, but in Australia. The provision of health and welfare services was regarded as the responsibility of charitable and religious organizations in the 19th century; the care and treatment of mental illness was the one exception, thus the Wolston Park Hospital Complex demonstrates the role of the state in the care of mentally ill people since the 1860s. It demonstrates the changing practices in the treatment of mental illness: from a 19th century asylum founded on confinement and separation, through <b>moral treatment or therapy from 1909 to the 1930s</b> , the drug and medical therapies of the 1940s (Mental Hygiene) and 1960s (Psychiatric Services) to the trend towards deinstitutionalization and community-based services by the 1980s. The physical evolution of the site highlights these changes as the complex has developed incrementally across the substantial 450hectare reserve, rather than intensively in layers in one area.
--------------------	--

	The site is also significant in demonstrating the development of specialist mental health services for returned service personnel and intellectually disabled people.
<b>Criterion C</b>	The site of an early graveyard at the western end of what is now the Wolston Park Golf Course, near the confluence of Woogaroo Creek and the Brisbane River and associated with the first asylum buildings on the reserve, is an area of archaeological interest with potential to yield information that will contribute to an understanding of Queensland's history.
<b>Criterion D</b>	<p>Wolston Park Hospital Complex demonstrates the principal characteristics and evolution of a major public health institution. The expansive grounds and distinctive groups of buildings at the complex evoke a strong sense of place. The self contained nature of the place is reflected in the range of buildings and facilities on the site including ward accommodation, health and hospital facilities, administration buildings, staff quarters, recreation facilities, chapels and service buildings such as kitchens, laundries and a powerhouse. <b>The grounds and landscaping are also important elements with recreation and agricultural facilities demonstrating the role of useful employment and recreation in the hospital's operations.</b> The relationships between the buildings and other site elements are fundamental to our understanding of the functioning of the place as a mental health institution since the 1860s. A substantial number of buildings, structures and grounds elements survive from each major phase in the development of the institution. Significant 19th century elements include Female Wards 1&amp;2 (1866), Bostock House (1885), the Recreation Hall (1890), Fleming House (1898), the former Medical Superintendent's Residence (1898) and <b>the recreation ground (1895, redeveloped into cricket oval in 1910).</b> The remnants of a sandstone quarry along the riverbank dates from the 1860s and was one of the first sandstone quarries developed in Queensland. <b>Early 20th century elements include</b> the three male blocks Lewis House (1915), Noble House (1915) and McDonnell House (1915), former male and female bathroom blocks (1902), the female ward Anderson House (1917), the former hospital ward block (1917), the Administration Building (1917) and the assistant Medical Superintendent's residence (1912); service facilities such as the morgue (1902), the reservoir (1914), pump house (1914), powerhouse (1917) and laundry 1918) and <b>recreation facilities such as the cricket oval (1910) and the Cricket Pavilion (1910).</b> Significant elements of the former farm ward complex include the Farm Ward (1916), two farm sheds (1916) and Quarter Way House (1918). Important elements from the capital works program of the 1920s and 30s include the visitor's Pavilion (1920), Osler House (1929), the shelter shed at the rear of Female Wards 1&amp;2 (1929), Pearce House (1934), Kelsey House (1936), Gladstone House (1936), Jenner House (1936) and the Gales Golf Course (1922-25). Postwar elements include Dawson House (1944), the Female Recreation Area encompassing the cafeteria (1955), workroom (1950) and shelter sheds (1955). The remaining chapel (1961) demonstrates the provision of religious services and chaplaincy at the complex. Significant elements of the Wacol Repatriation Pavilion established post World War Two include Ward A (1948), Ward B (1948), Ward C (1948), kitchen and canteen (1948), and Recreation Hall (1950). The former Farm Ward Block (1957), now part of the Basil Stafford Centre, is also important.</p>
<b>Criterion E</b>	<b>The Wolston Park Hospital Complex is important because of its aesthetic significance, which derives from the massing, architectural form and detailing of the buildings, the relationships between the buildings and the interplay between the buildings and the landscape and grounds. The aesthetic impact of the complex is heightened by its location on the top of a hill and its setting within extensive grounds that have a distinctive,</b>



	natural landscape character. The complex includes a range of architectural styles and forms; from modest timber visitor pavilions through to imposing brick ward and administration buildings. Care in the design of hospital buildings and grounds reflects efforts to mitigate the stigma attached to mental illness, while at the same time the substantial and formal character of many of the buildings demonstrates strong State control and regulation of mentally ill people in Queensland.
Criterion G	<b>Wolston Park Hospital Complex is the longest operating mental health facility in the State and a distinct culture has developed around the institution. As such, Wolston Park Hospital Complex has a strong and special association for the Queensland mental health community including staff, patients, families, friends and advocates, both past and present. The complex also has social significance for the Queensland community in general, being synonymous with the treatment of mental illness in the State.</b>

The significance of the cricket pavilion and oval within this complex can be described as follows:

#### ***4.2 The evolution or pattern of Queensland's history (criterion a)***

The cricket pavilion building itself is a remnant from the early temporary building and cottage ward phase which started at Wolston Park in the 1860s and continued until 1909. The complex developed at this period was a product of the philosophies of confinement and separation. The building complex was changed in the early twentieth century to reflect new philosophies of moral treatment and occupational therapy, the era when the cricket pavilion assumed its present form.

The core of the cricket pavilion building, as a warders' mess dating to before 1896, is an example of this early phase of construction and is some of the earliest accommodation provided for warders at Woogaroo.

The siting of the recreation ground, which became the oval, relates to the history of flooding which made the earlier building complex, which was closer to the river bank untenable.

The cricket pavilion, as it is today, with the scoreboard and oval demonstrates the implementation of the phase of moral treatment and therapy at Wolston Park from 1909 to the 1930s, which was important in the evolution of practice in the treatment of mental illness.

The cricket pavilion and oval demonstrate the implementation of occupational therapy at Wolston Park which was an important strategy for achieving moral treatment, and frequently involved sport. The oval was constructed and maintained by patients and the facility used by patients both as players and spectators.

The siting of wards around the oval, with views and vistas from those wards across the oval and the provision of free access onto the oval from those wards, were outcomes of the ideas that were realised during the phase of moral therapy and treatment. The change of site of the cricket pavilion in 1936 was directly related to the requirement to provide views and vistas from new wards across the oval. The orientation of the scoreboard on its present site corresponds with the location of spectators on the north west terraced bank and with the view from the wards.

Views and vistas from the oval of the surrounding semi-natural landscape, which have been preserved throughout the history of Wolston Park, represent the ongoing value placed on the

perceived benefits of such views and 'natural' character of the environment in the treatment of mental illness and wellness of patients.

The value of the ambience of the natural setting at Wolston Park was voiced as early as 1860 by the Government Architect involved in selecting the Wolston Park site for the treatment of mental illness. The development of the Wolston Park site to enhance the natural ambience was advanced during the phase of moral treatment and therapy with importance placed on the development of gardens and increased access from the wards to green spaces and views of the natural environment. Although the oval was formal in its planning, the elevated siting of the oval and cricket pavilion within the greater landscape and use of hedges and minimal fencing has contributed to wider views and vistas of the surrounding natural landscape from the cricket oval and the wards surrounding the cricket oval.

Recent research confirms the benefits of the natural setting and characteristics of facilities for the treatment of mental illness. Surviving historic examples of these aspects of moral treatment and therapy will potentially be important in informing future design.

Cricket matches at this site have also played an important role in mitigating the stigma attached to mental illness, which is important in the evolution of public attitudes to those with mental illness. During the phase of moral treatment and therapy at Wolston Park when the cricket pavilion and oval were famous, cricket matches brought many visitors to the hospital and allowed the patients to have contact with the outside world.

#### ***4.3 Demonstrating rare, uncommon or endangered aspects of Queensland's cultural heritage (criterion b)***

Although an important aspect of Queensland's cultural heritage in the treatment of mental illness, natural settings for acute care mental health institutions are becoming uncommon in Queensland with more of these facilities now co-located within major, high-density general hospital sites.

Wolston Park is one of 3 early surviving facilities for the treatment of mental illness that demonstrate the period of moral treatment and therapy. The other two are the Baillie Henderson Hospital in Toowoomba and the Challinor Centre at Ipswich (now University of Queensland campus). Wolston Park is probably the most extensive surviving facility and, of the three, Wolston Park retains the most intact example of a recreation ground and associated sporting facilities. It is also potentially endangered with the land at Wolston Park being sub-divided and sold for development and alternate uses.

The cricket pavilion is a rare surviving example of a reasonably intact early twentieth century cricket pavilion in Queensland.

#### ***4.4 Demonstrating the principal characteristics of a particular class of cultural places (criterion d)***

Wolston Park at Goodna is one of a network of asylums constructed in Queensland from the 1860s including Baillie Henderson Hospital at Toowoomba and the Challinor Centre at Ipswich. The philosophies of moral therapy popular from 1909-1930's significantly influenced the design of the asylums, resulting in pavilion style buildings addressing a park like setting, incorporating extensive recreational facilities and the pleasant aspects of nature.

Occupational therapy was an important principal of moral therapy and the institutions at Goodna, Toowoomba and Ipswich all offered useful employment in some form. Building and landscaping work by patients is characteristic of asylums constructed during the era of moral treatment. The three institutions all had recreation grounds and recreation halls.

Together, the cricket pavilion, score board, lavatory block and oval at Wolston Park are a particularly good example of a recreational facility at an institution from the first half of the twentieth century. Constructed, maintained and used by patients they are also evidence of the implementation of occupational therapy.

Of the three institutions at Goodna, Toowoomba and Ipswich, the recreation ground at Wolston Park is particularly intact retaining the key components of the oval, pavilion, scoreboard, toilets and visual links with the surrounding wards.

#### **4.5 Aesthetic Significance (criterion e)**

The design and detail of the cricket pavilion has attributes generally valued by the community, including its scale, architectural form (such as the faceted plan and verandah) and the refined timber detailing of the building including the intricate roof, timber detailing and turned verandah posts even though detail of the verandah brackets and pediments has been lost.

There is significant natural beauty in the setting, particularly in relation to the views and vista out to the surrounding landscape with low rise development integrated into the landscape. The open space, pavilion form buildings, sensitive treatment of boundaries and changes in level contribute to this character.

The interplay between the buildings and the grounds has picturesque attributes which are important to the relationship between the facility and the surrounding natural landscape and the role of this in defining place.

#### **4.6 Community Associations (criterion g)**

Throughout the history of the hospital and particularly during the extensive phase of the moral treatment and therapy era, the cricket oval and pavilion were a source of pride to the community at Wolston Park as well as the wider community. It was also a signature of Wolston Park in the interaction between the facility and the wider community.

The oval and pavilion have been used continuously for cricket from 1911. The wear and tear to the floor boards from cricket shoes from the front steps and into the main room is evidence of the continuity of use of the building.

During the era of moral treatment and therapy the site of the cricket pavilion and oval was a popular meeting and gathering place for the community. The place was valued for its sporting matches and attracted interstate teams and important visitors. The oval and cricket pavilion were the public face of the institution and were important in the acceptance of the institution within the wider community and in helping to mitigate the stigma of mental health.

Thus the cricket oval and pavilion became a place of essential community function that lead to a special attachment for groups within the community including in particular the mental health and cricket communities. The local cricket club still uses the grounds and pavilion today. Their attachment to the place is evident in their effort to encourage its retention.

#### **4.7 Important People (criterion h)**

Dr B Hyam Ellerton was medical superintendent at the Goodna Hospital for the Insane as well as Inspector of Hospitals for the Insane from 1909 to 1936.

He was an advocate of moral therapy and applied the philosophy to the Queensland asylums that he was responsible for, including the Baillie Henderson Hospital, the Challinor Centre and Wolston Park. Dr Ellerton instigated the provision of occupational therapy and recreation facilities for patients at Wolston Park.



Wolston Park was Queensland's leading asylum at the time Dr Ellerton was superintendent there. He was responsible for much of the master planning of Wolston Park after the 1890s floods and the temporary building and cottage ward era. The siting of the cricket pavilion and oval, and the siting of the buildings around the oval are directly associated with the work and philosophy perpetuated by Dr Ellerton as was the removal of the pavilion to its new site in 1936.

As a result of Dr Ellerton's support, use of the cricket oval for sporting matches with outside teams contributed to the successful relationship that Wolston Park had with the wider community at that time.

#### **4.8 Summary Statement of Significance**

Wolston Park Hospital is significant as an early and important Queensland institution which demonstrates changing patterns in the care of mentally ill people.

Although part of the fabric of the cricket pavilion dates to the earliest phase of the hospital's development, the cricket pavilion and oval are primarily significant for the evidence they provide of the period 1909 -1936 when Dr B Hyam Ellerton was Superintendent of the Asylum and instigated new philosophies of moral treatment and occupational therapy.

The cricket oval and its surrounding banks were constructed by the patients and the pavilion and oval were used by patients throughout this period both as players and spectators. The oval also formed the nucleus for the layout for new wards which overlooked the facility. The location of the oval (formerly the recreation ground) was chosen in response to the earlier history of flooding on the site. The change of site of the cricket pavilion in 1936 was in response to the construction of new wards around the oval and, with the reorientated score board, demonstrates the importance placed on the visual links between the ward buildings and the oval.

The wide views and vistas to and from the oval and the scale and architecture of the ward buildings surrounding it demonstrate the approach to improving mental health by creation of a sympathetic environment with an open and 'natural' character rather than the prison-like character associated with earlier approaches to treatment of the mentally ill.

The provision of recreational facilities for the patients was characteristic of large mental health institutions in Queensland in the early twentieth century. Similar arrangements were made at both Challinor and Baillie Henderson hospitals. The cricket pavilion, surviving furnishings and fittings, scoreboard, toilets and oval at Wolston are the most complete recreational facility to survive at these three institutions and the layout shows a particularly strong connection between the ward layout and the recreation ground.

The cricket pavilion is a rare surviving example of an early twentieth century cricket pavilion in Queensland.

The cricket pavilion and the oval at Wolston Park have aesthetic significance arising from the scale and form of the building with its open verandah, steeply pitched roof and decorative timber elements and because of the relationship of the pavilion with the oval and open spaces surrounding, including vistas. The style of the building and its pavilion form is of a type generally well liked by the community.

The cricket pavilion and oval have important community associations. The facility was the interface between the hospital and the broader community and was well regarded as a cricket pitch in its time. The oval and probably the score board were constructed by patients. The facility has remained in use for cricket since 1910, most recently in community use. The

evidence of use can be found in the marks of cricket shoes on the flooring which has been abraded by the studs and in surviving furniture and photographs.

The cricket pavilion and oval have a strong association with Dr B Hyam Ellerton, who was important for being Superintendent of the facility from 1909 – 1936 and for his innovations in the area of mental health, particularly the introduction of moral treatment and occupation therapy into Queensland Institutions in the early twentieth century. Apart from including sport in the treatment regime, Dr Ellerton was himself a keen cricketer and personally initiated the construction of the pavilion from an earlier recycled building.

#### 4.9 Levels of Significance

Assessment of relative significance allows a range of strategies to be developed to suit the varying constraints and opportunities within a place.

The levels of significance at the cricket pavilion and recreation ground at Wolston Park Hospital are summarised in the following table:

<i>Level of significance</i>	<i>Feature</i>	<i>Examples</i>
High	Evidence of the warders' mess	Plan form of the pavilion including the main room and the two back rooms, early recycled elements, for example, the windows in the tool shed and evidence of early colour schemes.
	Evidence of the 1910 location of the cricket pavilion	The palm
	Pavilion building fabric to c. 1936	Octagonal plan of the main room, verandahs, pediment entry, the shower room including original shower linings and fittings, the tool shed, roof sheeting, timber walls and floors, French doors and double hung windows and four panel doors, double hung windows, architectural mouldings, mortice and tennon and tusk tenon framing, single skin structure with exposed studs, stop chamfered verandah framing, turned verandah posts, beaded linings, ceiling roses, coat hooks with porcelain knobs
	Loose furnishings	Framed picture of pavilion on its earlier site (1910), the locker
	Scoreboard	Posts, roof, board, stay, evidence of figures
	The oval	Banks bordering oval, the platform forming the oval, archaeological evidence of drains around the oval, any archaeological evidence of the bandstand, the steps to the pavilion*, early pedestrian routes around the oval, including any remaining evidence of gates of access points to the oval from the wards or cricket pavilion

	Elements constructed and maintained by patients	The drainage system, the foundation to the pitch, the banks , possibly the score board
	The institutional landscape relating to the period of moral therapy	Sight lines from the ward buildings and the pavilion to oval, orientation of ward buildings and the pavilion to the oval, early trees, the general form, size and shape with contours of the oval, sensitive definition and treatment of oval boundaries, the setting that is natural and open in character mitigating any emphasis on confinement, any evidence of the fences and gates that once enclosed the gardens in front of the wards around the oval
	Evidence of continuity of use	Wear and tear on floors from cricket shoes, the locker, photographic evidence
	Elements of aesthetic value	Domestic quality of small timber building, open verandahs and steep pitched roof, verandahs and verandah detail, hoods, timber mouldings and joinery, relationship to setting. Open character of setting, soft landscaping, natural features of setting retained.
Medium	Later developments associated with 1936 site	Lean to additions other than the shower room and tool shed, lavatory block, hand basins, evidence of earlier light fitting locations
Low	Additions after 1936	Closed in verandahs to pavilion, sink, original louvres, existing wiring
	Later developments associated with recreation	Other landscape elements that define the boundary of the cricket oval, for example, the bowling green and club house, additional shade trees surrounding the oval, additional stairs with brick edges, memorial rock,
	Reconstructed elements	Entry stairs, replacement posts, gutters
None	Later developments which are located without reference to the history or form of the oval	The prefabricated metal shed, the cricket practice nets, the tennis courts, planting around pavilion including palm trees and retaining wall and tipuana,
	Temporary repairs	Materials used for temporary securing of the buildings *
	Recent alterations	Ramp to store on east, screens around the toilets, door leafs not original to the building, louvres in original window openings, concrete and steel stumps,
	Internal furnishings not related to the history of the building	Shelving, chairs, lockers, tables not related to the building

#### 4.9.1 Elements which should be removed

Some elements should be removed because they obscure the significance of the pavilion. These are:

Temporary repairs including non original doors

Planting which blocks significant views between the pavilion and the hospital complex



## 5 CONDITION

*A detailed schedule of rooms and room numbers is included as Appendix A section 9.4 to this report. Details of the extent of deterioration are also shown on the measured drawings in Appendix \* to this report. The building was inspected from the ground. The roof space was inspected from the top of a ladder but was not entered. The underfloor was not inspected due to lack of access. Two of the store rooms on the verandah were locked and could not be accessed. Photographs date to September 2007.*

### 5.1 The Grounds

The grounds are generally in good condition. The grass drain around the edge of the oval is blocked causing flooding to the north west corner. There is excessive vegetation around the cricket pavilion preventing proper inspection and air flow under the building. The tipuana tree north west of the pavilion is causing blockage in the gutter.



**Figure 60** Photo on left shows blocked grass drain around the edge of the oval. Photo on the right shows excessive vegetation around the cricket pavilion

### 5.2 The Cricket Pavilion Exterior

The roof is nearing the end of its life but does not appear to be leaking at this time. The paint work has failed and many of the fixings are loose. There may be some rusting in the laps and there is evidence of earlier patching from inside. Flashings around the finials and between the verandah and main wall are damaged or missing. The gutters are rusted or missing in parts. Gutters to the west are blocked. Some down pipes are missing. Roof framing needs to be further investigated for extent of termite damage. There is evidence of some termite damage to ends of rafters. The portion of room framing over the rooms to the south is probably in worst condition. Louvres in the gable vent are intact but are distorted.



**Figure 61** Roof at front showing finial and sheeting

Walls framing is generally in good condition. Exterior chamfer board cladding has termite damage in parts.

Some window panes are broken or missing.

Substructure is deteriorated and subsidence has occurred. Some stumps are missing due to rot. Part of the floor framing and bottom plates at the south has deteriorated due to rot. Extent of termite damage to substructure needs to be further investigated.



**Figure 62 deteriorated bottom plate at the south**

Verandah is generally in good condition. There is some damage to the floor boards due to rot, particularly around the bases of the posts. The floor boards are worn in the places where there has been the most traffic and is very thin in some places. There is some termite damage to the ceiling boards. The ends of some of the rafters have rotted and failed. Some have previously been repaired. The post by the entrance steps has been repaired in the past and is failing due to subsidence of the floor. The pediment has also dropped as a consequence.

The ramp to the storage room on the east has rotted.

### **5.3 The Cricket Pavilion Interior**

The interior of the cricket pavilion is generally in good condition. There is some termite damage to parts of wall and ceiling lining. Wall framing is generally sound. There is also termite damage to some trims and door frames. Paint is generally in fair condition.



**Figure 63 Note termite damage to ceiling and wall**

The water pressure to the sink is very low, probably due to rusted pipes.

#### **5.4 The Lavatory Shed**

The toilet block is generally in worse condition than the pavilion and not really functional. There is extensive termite damage to the lavatory shed, particularly the southern wall, including wall studs and chamfer board cladding. The door inside the men's section has collapsed.

The fixtures are supposedly connected to the sewerage but there is blockage.



**Figure 64 (above left) Note extensive termite damage to southern wall of lavatory block**

Some rafters have been previously reinforced with sister fixing.

Some linings may incorporate asbestos cement.





## 6 EXTERNAL FACTORS

### 6.1 Legal Constraints

The Cricket Pavilion and oval at Wolston Park is held in freehold by the Queensland Government (represented by the Queensland Police Service). The site is not designated for community infrastructure under the *Integrated Planning Act 1997*\*\*\* check

Wolston Park Hospital (File no.600340) is entered in the register established under the *Queensland Heritage Act 1992* and as a consequence development is regulated to avoid or minimise the loss of cultural heritage significance associated with inappropriate development.

To facilitate development approval in Queensland, the State has enacted the *Integrated Planning Act 1997* (IPA). Many of the development control provisions within Queensland legislation have been 'rolled in' to the Integrated Development Assessment System (IDAS) established under IPA. The definition of development includes:

- (a) carrying out building work;
- (b) carrying out plumbing or drainage work;
- (c) carrying out operational work;
- (d) reconfiguring a lot; and
- (e) making a material change of use of premises.

Section 1.2.5 of IPA provides additional information on the terms used in the definition of development, including an additional definition of *building work* for administering IDAS under the *Queensland Heritage Act 1992*:

- (a) painting or plastering that substantially alters the appearance of the place;
- (b) renovations, alterations or additions to the place;
- (c) excavations, disturbances or changes to landscape or natural features of land that substantially alters the appearance of the place;
- (d) work on furniture, fittings and other objects—
  - i. associated with the place; and
  - ii. that contributes to the place's cultural heritage significance.

While the development provisions of the *Queensland Heritage Act* have been 'rolled in' to IDAS, in some cases the provisions for development approval available to the State are excluded from this system, such as work for which an exemption certificate has been issued by the Heritage Council, emergency work and development by the State. The process and the responsibilities of the parties are set out in more detail below (see 6.2).

Some Commonwealth legislation is also relevant, including the *Disability Discrimination Act 1992* (Cth). Where compliance with this act requires changes that are within the definition of 'development' in Queensland, relevant State approvals are still required.

The asbestos management code and the *Workplace Health and Safety Regulation 1997* require that owners of workplaces keep an accurate register of asbestos-containing materials.

### 6.2 Legislative processes

Legislative processes continually change and in practice the way IPA is applied varies between Local Governments. At present the processes for obtaining development approval before making changes to the Cricket Pavilion at Wolston Park have been summarised in the table that follows. QHA refers to the *Queensland Heritage Act 1992*. The delegate for the Queensland Police Force is at present believed to be Stephen Spanner, Manager Property and Facilities Branch.

Proposed activity	Applicant carrying out the work	Process (for land not designated for community infrastructure)
Material change of use Change in intensity of use Reconfiguring a lot in certain cases (for instance subdivision for sale)	Queensland Police Service	IDAS application with local government as assessment manager <u>and</u> a separate application under the QHA s.45 which is independent of the IDAS process.
Reconfiguring a lot within a government use (IPA Sch 8 Table 3 (f))	The Queensland Police Service	Self assessable under IPA but application under QHA s.45 still required
Building works carried out by the State or on behalf of the State (IPA sch 8 pt 2)	The Queensland Police Service	Self assessable under IPA but a QHA s.45 application required signed by the appropriate delegate for the Department
Any activity which would have no impact on cultural heritage significance	The Queensland Police Service	Application for an exemption certificate under QHA s.46 signed by the Departmental delegate
	An occupier or lessee (within the terms of the lease) who is not the owner	Process as above <u>but</u> an application for an exemption certificate under QHA s.46 must have written approval from the Queensland Police Service delegate
Emergency work	The Queensland Police Service	Demolition not allowed. Emergency work defined in IPA

With the changes to the Queensland Heritage Act expected in 2008 the EPA will be responsible for approvals for works carried out by private owners but the Heritage Council will remain responsible for approving work initiated a government agency.

### 6.3 Meeting the requirements of building codes

There is no requirement to upgrade the building to meet the provisions of the Building Code of Australia unless change of use or major alterations occurs. Exempt development under the *Building Act 1975* is detailed in Schedule 1 of the *Building Regulation 2006*.

### 6.4 Users requirements

It is understood that the Queensland Police Force intend using the oval and pavilion as a cricket pavilion and that the Wolston Park Centenary Cricket Club will share the facility under a memorandum of understanding.

There is no proposal to upgrade the accommodation beyond necessary repair.

Changing rooms will not be required.

Toilet facilities may either be in the existing facility, upgraded, or in other buildings on the site.

### 6.5 Management regime

The building has fallen into disrepair because of lack of maintenance. The Wolston Park Cricket Club is at present responsible only for the grounds and there are no guidelines concerning the use of the pavilion.



## 7 CONSERVATION POLICY

### 7.1 Generally

*7.1.1 The Cricket Pavilion and oval at Wolston Park Hospital are of cultural heritage significance and should be conserved in accordance with nationally accepted guidelines.*

It is recommended that the principles set down in the Burra Charter be followed in conserving the Cricket Pavilion and oval at Wolston Park Hospital. This requires that the cultural significance of the place should be the basis for future planning and work. Managers, occupants, consultants, tradespeople and maintenance workers should be made aware that special practices apply to the Cricket Pavilion and oval at Wolston Park Hospital, which may be different to those commonly adopted at other places.

Key strategies in the conservation of the place are:

- Using the place in a way that does not damage its significance. Ongoing use as a cricket pavilion and oval is appropriate.
- The buildings have been damaged by termites, which may still be active. Eradication of termites and improving access and ventilation under the floor are priorities.
- Conserving the cricket pavilion and oval to the period 1936 and retaining all related parts of the setting.
- Retaining the cricket pavilion and oval as a part of the larger complex that includes the setting and surrounding wards. Retaining the place as a part of a major government institution like the Police Academy is appropriate.
- Presenting the facility as a public interface for the Queensland Police Academy as occurred under the ownership of the hospital from 1910 to the 1970s. Public access through shared use of the pavilion with the local community cricket club and visiting cricket teams is appropriate.
- Retaining and reinforcing the historic context of the cricket pavilion, particularly the visual relationship between the cricket pavilion, oval and extended landscape, as well as the visual relationships between the oval and the surrounding wards facing it.
- Ensuring building occupants adopt management provisions to conserve the place.
- Ensuring restoration and reconstruction work as well as basic maintenance is carried out in accordance with the guidelines prepared by the Environmental Protection Agency for maintenance of places on the Register and with the provisions of this plan.
- Carrying out conjectural reconstruction of decorative elements like the brackets and fretwork to recover aesthetic value of the place.
- Managing change with the assistance of appropriate heritage advice.
- Improving interpretation of the significance of the place including its association with Dr Ellerton and his philosophy of moral treatment.
- Using this conservation plan as a guide.

### *7.1.2 Satisfy the requirements of legislation*

Future maintenance, building work and use of the place must satisfy the provisions of the *Queensland Heritage Act 1992* and other relevant legislation that may apply.

### *7.1.3 The recommendations of this conservation plan should be reflected in any leasing documents or memorandum of understanding for use of the building.*

The recommendations of this conservation plan should form the basis of any future lease or occupancy agreement.

### *7.1.4 This conservation plan should be assessed for review after 5 years*

Conservation plans generally have a currency of 5-10 years. After 5 years this plan should be assessed to determine whether a review is necessary.

## **7.2 Setting - Oval**

### *7.2.1 Maintain the natural character of the setting.*

The natural character of the surrounding landscape and country setting of the facility was important to the original siting of the hospital in the nineteenth century and the philosophies of moral treatment in the first half of the twentieth century. The sense of spaciousness and views into the distance to the north of the oval contribute to natural character of the place. The natural character of the oval contributes to an atmosphere appropriate to country cricket which is well liked by the community and the present users. This can be maintained through sensitive redevelopment of surrounding landscape and new structures.

Maintain the access paths around the oval as informal, soft surfaced and primarily pedestrian. The road to the east is used for vehicular access. Any future development to that road should not encroach onto the oval or the earth bank on that side.

### *7.2.2 Restore and maintain views across the oval between the surrounding wards and the cricket pavilion.*

These views were historically important and are important for the integration of the pavilion into the complex and for demonstrating the role of cricket in moral therapy in the early twentieth century.

Restore and maintain the open space between the wards and the oval and restore and maintain the open space around the cricket pavilion.

Further investigation should be done on the use of the scoreboard including how it is read. Then the face should be might be repainted with the appropriate figures.

No additional planting should be introduced around the cricket pavilion or in front of the old ward buildings surrounding the oval that would block views between the wards and the ovals. Views from the cricket pavilion and wards across the oval are of high significance and should be preserved.

Planting surrounding the cricket pavilion should be removed so that the view to the oval and from the oval and wards to the scoreboard is not obstructed.

### *7.2.3 Maintain the existing boundaries to the oval, defined by earth banks and drains.*

The bowling club house on the north eastern boundary may be demolished. However any structure that replaces it should similarly compliment and enhance the definition of the oval edge. Existing contours should be respected. Maintain the soft landscaped edges to the oval.

#### *7.2.4 Emphasise remaining historic planting.*

The palm, in front of the old ward no. 8 should be preserved as it is indicative of the original location of the cricket pavilion. Other shade trees blocking views from the ward buildings which were planted after 1936 should be considered for removal.

### **7.3 Ownership and use**

#### *7.3.1 Ownership and ongoing use by the Police Academy is appropriate*

The cricket pavilion and oval are significant as a part of the historic Wolston Park Hospital as well as for containing a rare surviving example of an early cricket pavilion. They should remain as a part of the larger complex and ongoing use by a public institution is recommended.

#### *7.3.2 Ongoing use of the cricket pavilion and oval as a cricket facility is recommended.*

The buildings and oval were purpose built as a cricket facility and this use was important in the history of the hospital. Ongoing use is recommended and can be accommodated in the existing complex with minor modification. Use of the building as a pavilion with servery and tea making facilities along with toilet facilities in the lavatory block behind is also appropriate for other events on the oval, such as fetes and other sporting matches.

#### *7.3.3 Ongoing use of the toilet block as existing is not essential*

Although the toilet block is a part of the 1936 fabric, it is a secondary use not important in the understanding of the broader significance of the site. The building should be retained but might be upgraded or adapted.

#### *7.3.4 The cricket pavilion and oval should retain some public interface and function.*

The cricket pavilion and oval are historically significant as a public interface of the Wolston Park Hospital and may have helped to alleviate some of the stigma attached to mental illness at that time. The preferred conservation option is that the place becomes a public interface of the Police Academy in their future use of the site.

#### *7.3.5 Storage should be accommodated in existing secondary storage areas. Flammable substances should not be stored within the building*

The building contains existing storage areas which may be reused. Flammable substances, like fuels and paints, should not be stored inside the buildings.

### **7.4 Management**

#### *7.4.1 Building managers and users should be aware of the significance of the Cricket Pavilion and oval and should be clear about their responsibilities for maintaining the heritage values of the place and abiding by the provisions of the Queensland Heritage Act 1992.*

Building managers and users should understand special requirements for the care of the building, for instance responsibilities regarding cleaning and maintenance. They should be informed of the provisions of the *Queensland Heritage Act*, which covers maintenance as well as building work, and of guidelines published by the Environmental Protection Agency that describe appropriate repairs.

#### *7.4.2 Efforts to keep the building occupied should be maintained.*

Unoccupied timber buildings are at great risk of deterioration. The building should stay occupied as a cricket and sporting pavilion with regular attendance and use.

#### *7.4.3 Excess furnishings should be removed from the building*

The building is presently filled with furnishings which obstruct proper inspection and care of the building. Furnishings which are not of historical value and are not essential for the use of the building should be removed.

#### *7.4.4 Regular inspections should be made, particularly for termites*

Regular inspections are important to identify any problems with the building before they become difficult to address. The building is particularly at risk of termites.

#### *7.4.5 Prevention of fire should be considered*

The electrical wiring should be checked to ensure it is safe and fire extinguishers should be provided. Fire fighting should be considered in the context of the site as a whole. If the building is raised, it may be necessary to provide a barrier to prevent unauthorised access under the building.

#### *7.4.6 Impacts on the Cricket Pavilion should be considered in managing surrounding buildings and landscape areas and should not be allowed to reduce the potential ongoing use of the building*

The cricket pavilion is a very small part of a major redevelopment and can be easily overlooked. In considering surrounding development options, potential impacts on the pavilion and its ongoing use should also be considered.

### **7.5 Repair and Maintenance**

#### *7.5.1 Maintain the building structure secure and weather tight and discharge rainwater away from the base of the building. Maintain protective coatings on exterior timberwork and treat rot.*

Keeping the building secure and weather tight is central to its ongoing conservation. The base of the building should be clear of the earth allowing ventilation and room for inspections. Gutters and down pipes should be reconstructed where missing or damaged, and maintained. Alternative methods for discharging the roof water from the bases of down pipes should be investigated to avoid dampness and water pooling around the base of the building.

#### *7.5.2 Repair and reuse benches remaining from the hospital complex*

Some of the slatted benches remain from the original hospital complex. These should be repaired and reused.

#### *7.5.3 Elements of high significance should be retained and preserved and should not be changed or compromised.*

Elements of high significance are important for understanding and appreciating the significance of the Cricket Pavilion and should be retained.

Elements of high significance include:

- Evidence of the warder's mess remaining in the fabric
- Evidence of the 1910 location of the building including archaeological evidence
- Pavilion building fabric to c. 1936
- Loose furnishings that were a significant part of the pavilion
- Scoreboard
- The oval with its banks, drains and steps
- Elements constructed and maintained by patients like the banks of the oval
- The institutional landscape relating to the period of moral therapy
- Evidence of continuity of use
- Elements of aesthetic value



Refer to the summary schedule of significance at the end of Section 4 Analysis of Cultural Significance for more detail concerning the elements of high significance.

Discrete and reversible additions of a minor nature would not compromise these elements.

Where adaptation is required for ongoing use, ensure that it can be reversed without introducing new material and that adaptation does not obscure significant features of the place.

Do not replace fabric unless it is essential. It is better to patch and to keep original fabric than to replace it because it is slightly damaged or worn. For example, the original verandah posts are of high significance and as much of the original fabric should be retained as is possible.

Investigate removable floor matting to be installed in high traffic areas of the verandah to protect existing flooring against further wear and tear from sports shoes and retain evidence of ongoing use.

Any evidence of the fences that once enclosed the gardens in front of the wards around the oval, including gates onto the oval from the gardens, should be preserved.

*7.5.4 Elements of high significance that have been changed or compromised should be restored and preserved.*

Door frames that have been boxed in to alter the opening size of the doorway should be restored to original opening size and detail. This specifically includes doors D2 and D3.

Door leafs that have been moved should be reinstated in original locations. The door leaf in D2 is originally from the opening D10 and should be relocated there.

Original furniture that has been retained should be preserved and reinstated in its original location. For example the timber locker that is currently located in R2 should be preserved and reinstated in its original position against the southern internal wall of R1, where the trim applied at skirting level has been cut to accommodate it.

*7.5.5 Elements of medium cultural heritage significance should be retained and maintained.*

A medium level of cultural heritage significance has been ascribed to elements of secondary importance in the history of use of the pavilion and oval from around 1936 should not be removed unless essential for the long term conservation and compatible use of the building.

Elements of medium significance also include later developments associated with the 1936 site for instance later lean to additions and hand basins.

If removed, elements of medium significance should be recorded but should not be reconstructed at a later date.

The existing toilets may be refurbished, converted to storage or upgraded and extended in accordance with the policies for adaptation.

*7.5.6 Elements of low significance which are later alterations may be removed providing the original form of the building including associated elements of higher significance are restored or reconstructed as appropriate and applicable.*

Elements of low significance comprise fabric added after 1936 and may be removed without impact on the significance of the building.

Elements of low significance include:

- Additions after 1936 like closed in verandahs to pavilion, sink, original louvres, existing wiring
- Later developments associated with recreation like the bowling green and club house, additional shade trees surrounding the oval, additional stairs with brick edges, memorial rock,
- Reconstructed elements like entry stair treads and risers, replacement posts, gutters, handrails

Elements of low significance which are important as part of the structure and building envelope and have been replicated in the past (like replacement verandah posts) may be removed without impact on the significance of the building. They should be reinstated to more closely match the original.

In the case of stair treads and risers, non original verandah posts and handrails, and gutters, careful dismantling will be required in case any evidence of the original remains.

*7.5.7 Elements which have no significance may be removed or altered in ways that are not visually obtrusive to support compatible use.*

Elements which have no significance may be removed or altered in ways that are not visually obtrusive and do not compromise the ongoing use of the building.

Some elements detract from the architectural value of the building and should be removed.

Removal should be carried out in a way that does not damage surrounding fabric or compromise the stability of the structure.

Elements of no significance include:

- Later developments which are located without reference to the history of form of the oval
- Temporary repairs
- Recent alterations
- Internal furnishings not related to the history of the building

Refer to the summary schedule of significance at the end to Analysis Section for more detail concerning the elements of no significance.

## **7.6 Reconstruction**

The Burra Charter definition of reconstruction states that:

*'Reconstruction means returning a place to a known earlier state and is distinguished from restoration by the introduction of new material into the fabric.'*

There are two types of reconstruction: repair by patching or replacing an existing original deteriorated element and conjectural reconstruction where an element is missing. Conjectural reconstruction refers to the reconstruction of original parts of the building that are no longer there but their known earlier state can be deduced from other evidence including photographic evidence, physical evidence in the surrounding building fabric and other documentary evidence including drawings and specifications. Conjectural reconstruction may be used to recover the architectural quality of the building and improve interpretation.

The decision of whether or not to reconstruct to match the original is not easy. On the one hand it is important to repair significant elements to match the original. It is also important to reconstruct when 'one of a set' is missing, for instance a window in a set of windows.

However too much reconstruction can detract from existing fabric and confuse the interpretation of a place and the understanding of what is original. Incorrect reconstruction is misleading. If the original or earlier state of the missing or damaged part can not be known reconstruction should not be attempted and a modern sympathetic solution should be sought. New work should be modern and unobtrusive in form.

*7.6.1 Introduced fabric should be date-marked in a discrete location with a metal punch or stencil with the date of the repair*

Reconstructed elements should be date marked to avoid misinterpretation of the extent of original fabric or the location of the joint between old and new fabric. This is not necessary in minor patches.

*7.6.2 When repairs are carried out, new work should be carried out to match original fabric.*

Damaged window and door frames should be repaired. Glazing bars should be reconstructed to match the photographic evidence of the early cricket pavilion showing 2 pane sashes. Physical evidence that the sashes were original 6 pane sashes probably dates to use of the buildings as warders quarters or is evidence that the windows were recycled from the early hospital buildings. This evidence should be preserved by retaining the original patches. . Missing flaps to window jambs should be reconstructed so the windows can be propped open. Fixed flaps should be restored to their original working condition.

Reconstruction work to repair termite damage and rot should be carried out so that the building is structurally sound and weather tight. This includes repair to damaged cladding, lining, window and door frames, skirting and scotia cornice as well as timber framing in roof walls and substructure.

The extent of reconstruction work to repair damaged timber should be minimised to preserve the maximum original building fabric. Alternative strengthening and preservation strategies should also be considered for instance the use of introduced ties and plates. Replacement work should match the original in size and profile. Patching should be in the same species. The joint between new and original should be discrete but identifiable to avoid misinterpretation of what is original building fabric. New pine elements should be treated with preservative.

Roof sheeting and guttering should be reconstructed in galvanised steel (not zincalume) in short lengths.

Damaged and missing flashings should be reconstructed, for example, around finials and under eaves, to ensure the building is watertight and to preserve timber underneath.

*7.6.3 Conjectural reconstruction should be carried out to recover the architectural quality of the pavilion building, in particular, of the verandah, windows and doors.*

Missing or altered windows and doors including frames should be reconstructed. For example, in reconstructing windows W4 and W7, enough evidence remains on site to reconstruct the original opening sizes and locations and original window frames.

Sufficient evidence survives on site to restore and preserve original door frames and reconstruct missing and non original door leafs.

There is also sufficient surviving evidence on site to reconstruct original verandah posts which have been wrongly reconstructed. There is enough evidence surviving on site and in photographs to reconstruct the detail on the verandah including fretwork in the pediment, verandah brackets, and balustrade.

If the building is raised to its 1910 level to deter termites, the stumps and new stairs should be in a modern unobtrusive form.

The picket fence which was evident on the 1910 site should not be reconstructed on the 1936 site.

*7.6.4 The ground levels of and around the oval should be maintained and a section of the grass terraced batters should be considered for reconstruction to match photographic evidence from the 1930s.*

The gutter around the edge of the oval should be reinstated. This is important for the use and drainage of the oval.

A length of grass terracing may be reconstructed for informal seating based on photographic and archaeological evidence.

## **7.7 Removal**

*7.7.1 Remove elements which detract from the significance of the place as opportunity arises.*

Some elements are intrusive and/or detract from the significance of the place. These elements should be removed when the opportunity arises. They comprise:

- Temporary repairs including non original doors
- Planting around the pavilion including the palms and tipuana tree
- Planting which blocks significant views between the pavilion and the hospital complex
- Above ground electrical cabling and associated poles and structures that are on the original site of the cricket pavilion and block the view of the oval from the old ward no. 8.

## **7.8 Adaptation**

*7.8.1 Alterations to significant fabric should only be carried out where they are essential for the conservation of the place as a whole and should be reversible as far as possible. Alterations should be discrete but identifiable as modern fabric.*

Alterations should be avoided as far as possible. Where they are essential they should be carried out in a modern discrete form without removal of original fabric.

*7.8.2 The owner should make and retain responsibility for any alterations to the pavilion and oval and any changes required by users or tenants should be accommodated in reversible way.*

Any use and tenancy arrangements should only incorporate compatible building use and any new fit out and furnishing should be reversible.

It is important for the building to remain in use and the requirements of Queensland Police should be accommodated as far as possible. However new partition walls are not acceptable in the front room. Any new fit out must not cut into existing fabric and services should be surface mounted in discrete locations. Installation and use of upgraded or new facilities and fit out should not damage existing fabric.

*7.8.3 A non intrusive approach to servicing should be considered if services need to be upgraded*

The building has good natural lighting and natural ventilation. Air conditioning is not appropriate. New plumbing work should be minimised. Toilets should remain separate from the main pavilion building. Any additional lighting should be as unobtrusive as possible and reversible. The existing sink facility in R3 may be upgraded but any upgrades should be



reversible and the room should only function as a tea room and servery, not a kitchen which would require adaptation to meet current health requirements.

*7.8.4 Improved tie down and possibly bracing may be considered at the time of repair*

At the time of repair upgrading the structure through improved tie down and bracing carried out in a reversible and unobtrusive manner.

*7.8.5 Suspended ceilings should not be installed.*

Suspended ceilings would not be appropriate because they would conceal original significant fabric and destroy room volumes. The beaded timber boards, pressed metal ceiling roses and tall room volumes are key surviving features of the building and have aesthetic value.

*7.8.6 Upgrades for the provision of fire services in the pavilion and lavatory block should be considered in the context of the rest of the site complex and integrated with the fire service strategy for the whole site. If physical upgrades for fire services are required they should be done in a reversible way.*

Any additions for the provision of fire services should not damage original building fabric and should be done in a reversible way. Ideally any required fixtures should be to new or reconstructed fabric.

*7.8.7 Ground Levels should be changed around the base of the building to provide clearance for maintenance and ventilation.*

Original ground levels should be established and reinstated.

If reinstatement of original ground levels does not provide sufficient clearance, the building should be raised marginally and built up earth around the base of the building should be removed.

When the building is raised the new height should match the height of the pavilion in its original 1910 position, shown in photographs by the number of front steps.

The garden beds around the base of the building should be removed, including any earth build up. Surface water should be directed away from the base of the building.

The building should be restumped in the process of raising it.

*7.8.8 Facilities for equal access requirements should be considered in the context of the rest of the site complex and integrated with the equal access strategy for the whole site.*

The pavilion is a small part of the site which is not essential for the effective functioning of the police academy, even though its cultural significance is high. Access to sporting facilities should be considered in the context of the use of the site as a whole.

*7.8.9 Upgrades to the oval and pavilion should not compromise the natural and open character of the site.*

There should be no additions that compromise the natural character of the site, such as pole mounted flood lights and obtrusive shade structures. Seating should be limited to the grass terracing on the banks and removable park benches in a style compatible with the character of the place.

*7.8.10 Any additional building work to the site should be freestanding, should retain the visual connection between the wards, the oval and the pavilion and views from the oval out to the natural landscape to the north Any such addition should be modern*

*and elegant in design and should not interfere with natural light and ventilation to the site.*

The impact of any structure to the north of the oval beyond the banked boundary would be dependent on the architectural quality of the design and its contribution to preserving significant views and appropriate treatment of the oval edge.

## **7.9 Interpretation**

### *7.9.1 The significance of the cricket pavilion, oval and setting should continue to be interpreted to the public.*

The cricket pavilion and oval already have strong associations with the local community including the hospital and cricket communities. An early photo of the building is hung in the main room of the pavilion and photos of the grounds and early facilities are on display in the main administration building at the Park Centre for Mental Health. The cricket pavilion and oval have been reported in newspaper articles and have featured in a recent exhibition for the hospital at the Museum of Brisbane.

Reconstructing the original doors and detail on the verandah, correcting the external and internal colour schemes and reducing the amount of furnishings inside would assist interpretation.

An interpretive display inside the building should also be considered which recognises Dr Ellerton's philosophies and role in establishing the oval.

### *7.9.2 Reconstruct colour schemes.*

The existing exterior and internal colour scheme should be corrected to match the information in the specification and the photographs next time the building is painted.

A professional colour analysis should be carried out based on the specifications and on physical evidence which survives.

### *7.9.3 Furnishing*

Furnishing should be limited, particular in the main room. The provision of additional seating should be controlled and restricted to avoid obscuring the significance of the building. Introduced furnishing should be modern and low key in design.

## **7.10 Priorities**

Priorities for conservation are recommended as:

Priority 1 (important for survival of the buildings)

Repair substructure and eradicate termites in pavilion and toilets

Check safety of wiring

Repair roof framing of pavilion and either repair or renew roof sheeting and rainwater goods

Repair walls of pavilion and repaint exterior

Remove vegetation around pavilion

Reduce amount of furnishings inside and reinstate locker

Priority 2 (important for presentation of the buildings)

Reconstruct missing doors and windows to pavilion (main room)

Reconstruct verandah detail

Repair toilet block

Reinstate earth gutter on east side of oval

Priority 3 (improved presentation and interpretation)

Reconstruction of remaining windows in pavilion  
Reconstruction of internal colour schemes  
Refurbishment of toilet block or adaptation  
Additional interpretation for instance displays, terraced banks





## 8 APPENDICES

### 8.1 Chronology

Date	Detail
August 1862 Tiffin's design for a complete lunatic asylum for the colony forwarded to the Under Secretary of Public Works	Tiffin consulted the work of Dr Connolly regarding the <i>building of reception of the insane, and humane views upon their mental and physical treatment</i> , who advocated that a size of no more than 360 or 400 and the need to provide for future expansion, otherwise an <i>asylum becomes subject to every atmospheric and terrestrial influence unfavourable to life</i> .  Tiffin's plans were received unfavourably by the Under Secretary who responded that <i>the present circumstances of the Colony do not admit of such a building.. upon a scale as elaborately designed... being erected</i> .
1867 & 1869	Further inquiries by the select committee of the Legislative Assembly into the Woogaroo Asylum  Unfavourable reports
1869 Inquiry mark 1	Commissioner Hutchison wrote a special report on the <i>defects in the condition and management of the Lunatic Asylum at Woogaroo</i>  The commissioner commented that Tiffins plan for the asylum was excellent but had not been carried out...
1869 Inquiry mark II	A second inquiry was held in 1869, composed of a joint select committee of both Houses of Parliament, chaired by Arthur Palmer MLA.  In their report they noted the <i>want of recreational grounds</i> to be in the principal causes of mismanagement.
1870 AR (Works) 1870-1875; Specifications held on QSA WOR/P1	As a part of some miscellaneous works: considerable extension of fencing of recreation grounds at a cost of 486 pounds (1870)
1870	EPA File No. 600340 historical chronology: 1870 – a female cottage ward was completed with accommodation for 36 patients was erected, as well as a <b>building containing a dining room and quarters for the female staff</b> . (likely the current cricket pavilion).
1877 Report and Minutes of Evidence of the Royal Commission into the Management of the Woogaroo Lunatic Asylum and	The recommendations of the Royal Commission included the following (influenced by Dr Manning, Superintendent for the Gladesville Hospital for the Insane, like the Report of Joint Select Committee in 1869):  .... and the planting of shade trees in the recreation ground

the Lunatic Reception Houses of the Colony 1877 in V&P (1877) p1073	
187*-1898	<p>Richard Scholes was the first Inspector for the Insane under the new legislation The Insanity Act 1884. He was the Inspector for the Insane during the time of the first mention of cricket at the hospital for the insane, Goodna, and the fencing of the recreational grounds in 1870.</p> <p>His obituary notes that Scholes was for a short time Assistant Medical Officer to Henry Manning at Gladesville Hospital for the insane. Scholes was a popular man within the Goodna, Ipswich and Brisbane communities – so much so that a special train was put on from Ipswich to Goodna, so that people could attend his funeral in the township.</p> <p>The obituaries also recalled his love for sports in particular... cricket... .</p>
1890	Completion of fencing by D Carew for 432.16 pounds (1890)
1893	Flood. The cricket ground, located on the river flats below the male wards was reported ruined and was put under crop
1895	New cricket ground laid out at with weekly matches held and football in winter
1896	Block plan shows <b>warder's mess</b> in the old location, before it was repaired and relocated as a cricket and sporting pavilion. No tool shed at this time.
14 May 1909	Dr H Byam Ellerton became Medical Superintendent of the Hospital for the Insane, Goodna and Inspector of the Insane of Queensland. He was English, coming to Australia just prior to commencing the position.
1960	Then division of mental hygiene, Dr Basil Stafford, recalled that Dr Ellerton had left .... and described the atmosphere (under Dr Ellerton's era) as <i>one of tolerance (if not freedom)</i> .
Aug 1910	<p><i>'The recreation ground is rapidly reaching completion, and now gives ample seating accommodation on the terraces on the sides for all patients who can attend the games. For a year, owing to the alterations to the ground, we were unable to make use of it, but since August it has reached a sufficient stage of completion that it could be used, and games have been resumed..'</i> Annual Report of the inspector of hospitals for the insane 1910, p4.</p> <p>Annual report of 1910:  <i>'Every effort is made to persuade the patients to work. Suitable outdoor work is a great help to improving the patients physical and mental conditions. The big undertaking of laying out the recreation ground, which has now been going on for 1 ½ yrs, has supplied a very convenient work, as it is situated close to the wards, and thereby we have been able to supply a great number of patients with healthy work.</i></p> <p><i>I have attempted to work out an estimate of the monetary value of</i></p>

	<i>the work which will have been put into this ground when finished, if paid labour had been employed for two years. Roughly counting the amount of work done by three patients as equal to that done by one paid labourer, the estimate works out at about 4000 pounds.'</i>
Aug 1910	QSA WORB/40 Refer reference for year 1911 no. 11531 in batch no. 15.
Oct 1910	6 August 1910, reference to loan of jacks from Queensland rail  5 Oct 1910 11 Oct 1910 Reference to materials for repairs to the old mess room in connection with the hospital for the insane, Goodna, reported to be in course of removal to the sports ground to be used as a pavilion there.  21 Oct 1910 Letter to the government architect, from S. Harrington, Inspector of Works regarding the painting of the new pavilion, which was recently relocated (previously being the mess room).
1910	Pavilion erected on one corner of the recreation ground. It was intended to build a bandstand in the opposite corner.  <i>'The erection of a pavilion on one corner adds significantly to the appearance of the ground. When quite complete, this ground will form one of the prettiest, if not the best, in Queensland.'</i> Annual Report of the inspector of hospitals for the insane 1910, p4.
1911	Annual Report of the inspector of hospitals for the insane 1911, p5.  <i>'During the past summer the ground has been in regular use, affording an agreeable change to patients who are not fit mentally to be otherwise allowed beyond the ward gardens.'</i>
1912	The annual report records that the recreation ground provided the <i>chief form of spectacular amusements for patients, although a few patients are able to take a more active part occasionally... Cricket... matches are arranged regularly practically every week and on public holidays against visiting teams... to some it is the only opportunity they may have of seeing people from the outside world...</i>
1912	Annual report, p5 – the asylum orchestra, started in Aug 1911, is successful and growing, performing concerts, playing at patient dances and potentially will play at the staff ball.
1913	The Recreation Ground was reported as <i>now well known among athletes as the best of its kind in Queensland, so that there is no difficulty in inducing the best teams to visit here from far and near ... practically all the leading interstate [cricket] players have visited this ground during the past two seasons.</i>
1913	Toolshed was built behind the cricket pavilion (I am sure this was the lean-to noted STORE-GARDEN on the plan.) This was noted in the Annual Report, p31 – Report of the Inspector of Asylums, Recreation Grounds.  The annual report also notes the intention to build the bandstand on the opposite corner of the recreation ground to the cricket pavilion so that patients watching the games can also have the pleasure of having music on Saturday afternoons. (see p31)

1913	5 <sup>th</sup> September, annual report notes parliamentary visit to the mental hospital. The visitors visited the recreation ground and after lunch revisited the recreation ground and saw the patients watching a cricket match. The new recreation ground pavilion was noted in their report of the visit on the list of improvements to the facility since May 1909.
1914	Annual report p7 <i>'The recreation ground... with the sections set apart for cricket, football and tennis games, continues to afford spectacular amusements for the patients and healthy exercise and recreation for the staff. Matches with outside teams are regularly held, and the grounds are always kept in first-class order. During the present cricket season, the hospital cricket team has been playing in the Brisbane A Grade senior competition, so that patients have had the greater interest and pleasure of seeing the best-known players in Queensland. The terraced sides of the recreation ground supply ample and very convenient accommodation for all the patients who it is possible to allow to watch the matches.'</i>
1914	The recreation ground was enclosed by a 10foot K-wire fence so that the new Male Wards overlooking the ground required only low fences.  This is noted at proposed in the Annual report of 1913, p32. <i>'This arrangement will allow the patients greater liberty, and present a lessor sense of confinement..'</i>
During the great European war 1915	Sporting events were rare, but the hospital held its own patriotic events in the recreations hall Annual report, p9 <i>'Owing to the war, the Brisbane A Grade cricket matches have been discontinued, and it is only possible to arrange miscellaneous matches as a spectacular amusement for the patients....'</i>
1917	Proposed orchard along the south east side of the cricket ground and the new vegetable garden
1918	36 returned soldiers were reported as certified insane since commencement of the war and in care at the hospital. Refer annual report, p10
1918	Boat swings were installed in 1918 on the side of the recreation ground for the use of the boy patients. Refer annual report p10.  The annual report for this year also notes the continued regular sporting entertainment provided by the recreation ground, but does not mention the Brisbane A Grade cricket matches.
1919	Annual report refers to weekly cricket matches with visitors. Annual report also refers to the recreation ground (maintenance?) as being the occupation for 18 patients.
Prior to 1920, up to 1936	Lewis, McDonnell and Noble House (Male Ward buildings) built to overlook the cricket grounds.  Osler and Pearce House (two more Male ward blocks) overlooking the recreation ground
1934 annual report	Fencing surrounding the garden of male ward 8 (525) was only 5 foot high and the gate to the recreation ground was unlocked
1936	The cricket pavilion was moved to the opposite side of the ground because it was <i>'directly in the line of vision</i> between the new Male Ward 8 and the cricket ground, that is, it obstructed the view of the



	<p>cricket. On the vacated site, a platform for a bandstand was made. Refer annual report 1936, p10.</p> <p>Annual Report also refers to the maintenance of the recreation ground as occupational therapy for patients.</p>
20 Feb 1936	<p>The new male wards 6,7,8 were opened by the governor, Sir Leslie Wilson, .... Director General of Health, Dr Sir Raphael Cilento paid tribute to Dr Ellerton:</p> <p><i>The building of these wards represents Dr Ellerton's prime achievement....</i></p>
1936	<p>Department of Public Works, Statement showing expenditure... Notes, K-wire fencing to new ward 8 for 181pounds, 11s 5d. Connecting up cricket pavilion WCs to sewerage for 33pounds, 14s 4d. Refer annual report for the inspector of hospitals for the insane, p47.</p>
1937	<p>The Telegraph, Brisbane, Friday Evening, July 2, 1937, p15</p> <p>A Loss to Queensland Golf, Dr H. B. Ellerton leaves Gaiels, Lasting Monument to His Enthusiasm.</p> <p><i>'....Dr. H.B. Ellerton has been upwards of thirty years in Queensland and a great patron of all sport from the day he landed amongst us, ... The subject of our sketch has always put his whole heart and soul into anything he has undertaken and if there is a word for him it is 'thorough'. Originally an ardent cricketer like every Englishman, he quickly had a cricket field and pitch in the hospital grounds, and it was not long before he had got an excellent team together. In fact both ground and team were soon famous....'</i></p>
1948	<p>Minister for Health and Home Affairs Hon A Jones MLA commented: <i>The grounds and location are truly beautiful – spacious, well-kept, and with the serene atmosphere of the country. There are great lawns, beautifully kept..... The immediate impression is that here is a place where people do care, and where every effort is made to provide the patients with surroundings most conducive to their recovery...</i></p>
1951	<p>Superintendent Boyce reporting that occupational therapy was being reorganised with recreational therapy and physical training to be connected on an organised basis.</p>
1952	<p>Bowling green for male patients constructed</p>
1955	<p>Annual report: proclaimed that now there were even more recreational activities available.... Cricket...</p>
1956	<p>The Works Dept. erected visitors pavilion for visiting relatives, which the annual report of the hospital refers to as No.9 gate, where public access is available to the cricket ground, but which the Works Dept Annual Report refers to as being at Male Ward 11. Cost of construction was some 13 000 pounds.</p>
1958	<p>Grandstand erected</p>
	<p>The recreation grounds were maintained by the patients</p>
	<p>The provision of balconies and even the siting of the male wards was in part determined by the views of the oval</p>
	<p>Improved maintained grounds for good morale effect on visitors</p>
	<p>The changes to the site over time to some extent, illustrate changes in attitudes of treatment, for example, the development of the</p>

	gardens as therapy.... The relationship between the community and the hospital in terms of cricket...
	Architectural quality as record of community attitude to place – care and importance of place
	Contribution to Australian cricket history

## 8.2 Room Schedule

Room	Ceilings, walls and floors	Mouldings and joinery	Other
<b>R1 - Meeting Room</b>	Ceiling – beaded boards, walls – horizontal boards beaded 135mm, floor - 82mm hardwood tongue and groove boards	Pressed zinc ceiling rose, cornice scotia, triangular section vertical corner moulds 50mm side to side, skirting quad	Bookcase in similar moulded style and painted same as room linings.
<b>R2 – Change Room</b>	Ceiling – beaded tongue and groove, Ceiling Height – 3010mm to top of stud, 3080mm to ceiling lining.  Walls – single skin 140mm beaded boards, south wall – 137mm horizontal beaded boards, east wall, 140mm vertical beaded boards, 100 x 50mm studs.  Floors – same as R1.	Pressed zinc ceiling rose, cornice scotia, slatted high level opening on east wall, hooks on rail on south wall (early), basin with metal splashback on west wall next to D11,  No skirting, bottom plate of wall exposed.	
<b>R3 - Kitchen</b>	Ceiling same as for R2, walls – single skin, vertical boards on the west wall with the high opening, corner post 100mm x 100mm, studs 54mm x 100mm, floor same as for R1	Ceiling rose missing, batten cornice, rail on wall to R2 cut, switchboard with circuit breakers next to D9,  No skirting, bottom plate of wall exposed.	
<b>R4 – Shower Room</b>	Ceiling on rake, 150mm beaded tongue and groove, 100mm x 48mm chamfered rafters,  East wall chamferboard, other wall, 142mm horizontal beaded board,  Concrete floor to shower recess,	Galvanised flat iron shower recess with beaded edge, early shower (date unknown),  No cornice.	

Room	Ceilings, walls and floors	Mouldings and joinery	Other
	screed on top of timber,		
<b>R5 – Store (Garden)</b>	<p>unlined roof, possibly second hand iron, framing fixed with modern tie down straps.</p> <p>north wall 135mm chamfer board – early dark brown painted boards, second hand materials on other walls, note dado rail paint stripe,</p> <p>floor, 100mm tongue and groove.</p>		
<b>R6 - Pantry</b>	east wall 90mm VJ, south wall second hand horizontal boards, west wall second hand chamfer boards.	Quad cornice on east wall only, high, deep timber shelf on south wall	
<b>R7, 8, 9 - Stores</b>	Did not enter.		
<b>Verandah</b>	<p>Height to underside of verandah beam is 2140mm, 138mm beaded tongue and groove ceiling,</p> <p>walls 137mm chamferboards, turned verandah posts from 96-100mm x 100mm, corner posts from 115mm x 115mm,</p> <p>floor 90mm tongue and groove.</p>	<p>146mm x 101mm verandah beam, 103mm x 55mm rafters stop chamfered, 130mm x 50mm hip</p> <p>100mm x 53mm wall plate, 100mm x 55mm door posts,</p> <p>ant caps out the front replaced, timber fascia, 914 high handrail, varying periods, verandah brackets have been removed, would have measured 420 x 495 (480-500) and would have been 32 thick.</p>	Treads have been replaced with smaller size.
<b>Structure underneath the pavilion</b>		timber stumps, some original ant caps	
<b>Lavatories</b>			
<b>Gents (west)</b>	external: 120mm rafters, external walls 152mm chamfer board, concrete base	external door to the gents 90mm VJ ledged and braced.  internally doors are	Chamfer boards are recycled.

Room	Ceilings, walls and floors	Mouldings and joinery	Other
	rendered and scored,  internal: 50mm wide rafters, VJ ceiling, walls single skin, 95mm x 60mm studs, 85mm VJ partitions, floor concrete.	$\frac{3}{4}$ height and undercut, high level cisterns have been removed.	
Ladies (east)	Similar to gents. FC over 95mm beaded tongue and groove partition, south wall where cistern is fixed is VJ.	Pressed metal rim lock on back of door.	

### 8.3 Door and Window Schedules

#### Door Schedule

Door	Type	Mouldings and detail	Other
D1	French doors closed up, with fan light which would have been glass.	moulded transom, transom and lintel tusk tenon jointed, 90mm stiles, 245mm bottom rail, planted moulds to panels.	
D2	Originally french doors with a fan light. Opening has been reduced for 4 panel door now 905mm x 2100mm.	Transom boxed over, opening width has been reduced for a recycled door, transom and lintel tusk tenon jointed,  108mm stiles, 232mm bottom rail, 273mm middle rail, 95mm top rail, 107mm muntin, planted moulds to panels similar to D1.  Door hung on cast iron hinges. Door had a whole series of locks, the earliest an early rim lock and presently a modern rim lock.  42mm door leaf thickness, 32mm door jamb lining beaded frame.	Possibly door leaf taken from D10.



Door	Type	Mouldings and detail	Other
		Fan light has original pivot latch.  Door jambs 100mm x 55mm.	
D3	Originally French doors with fan light. Door has been reduced for panel high waisted door with moulded frame.	Transom boxed over, opening width has been reduced, transom and lintel tusk tenon jointed.  165mm bottom rail, 207mm mid rail, 95mm muntin.  Still has the glass in the fan light, sheeted over from the front.	
D4	4 panel flush beaded door, door leaf size 890mm x 2127mm.	240mm bottom rail, 240mm middle rail, 106mm top rail, 108mm stile, 115mm muntin,  Original handle and key plate,  30mm wide frame without architrave.	Weather boards on that wall 135-150 cover  Door currently boarded shut.
D5	Pair of battened doors	72mm x 48mm stiles, 145 x 30mm bottom rail, 145mm x 30mm middle rail, 95mm x 30mm top rail, 75mm x 18mm battens,  No frame externally concealed by chamfer boards,  Wrought iron latch (for padlock) T hinges	
D6	Panel door covered/sheeted over with fan light similar to D9.	moulded transom modified jambs/stops 25mm thick (which is thicker than original), without architraves,  fan light still has its catch.	
D7	VJ boarded door	90mm boards  Without architraves	
D8	Pair VJ boarded door	102mm boards  T hinges	
D9	Door leaf missing.	Has original transom.	

Door	Type	Mouldings and detail	Other
	Has fan light. Door leaf would have been 915mm x 2130mm.	Transom and lintel tusk tenon jointed. Still has keeper from the rim lock on the jamb.  Without architraves.  Note fanlight size for internal doors differs from external doors.	
D10	Same as D9. Opening 910mm x 2135mm.	Still has fan light button on fan light.	Original door leaf now possibly in D2.
D11	Stable door, 50mm thick. Top leaf has panels inserted in original glazed areas. This was probably a single leaf modified to fan 2 leaves.	68mm bottom rail (trimmed), 95mm stiles, 98mm top rail, 85mm muntin,  Bottom leaf has shelf fitted to top, 2 panel, frame stop chamfered, 105 mm stiles, 175mm top rail, 230mm bottom rail  Beaded jamb lining/stop,	Probably a later opening in the wall.
D12	Boarded 85mm VJ. Ledged and braced. Unpainted on back.	Door frame similar style to D11.	

\* note: none of the doors had architraves

#### Window Schedule

Window	Type	Mouldings and detail	Other
W1	Double hung colonial sash, 2 pane upper sash. One pane at the top is cracked.  Bottom sash glazing bars are missing but originally 6 pane. The glazing is missing. Temporary Perspex sheet over.	Moulded horns on upper sash only  58mm x 14mm architraves, 42mm x 48mm window sashes meeting rail (the (42) does not include the rebate), 45mm (with 9mm rebate) window stiles.  Internally, safety bars across both W1 & W2, pressed metal sashlifts,  Tusk tenon joints at	Parting beads are damaged.  Window jamb did have flaps, the flaps are now missing except for part of the west.

Window	Type	Mouldings and detail	Other
		sill and lintel.	
W2	Same as W1.	Flaps in tact. But painted in. Glazing bars are missing.	
W3	2 panels of louvres, 1000mm x 880mm window opening.	Part Georgian wired glass  jamb lining without architraves.	
W4	Early window opening reduced in height and width for 2 panels of louvres. Present opening 890mm x 1400mm Earlier opening 1760 high.	Has original hood externally. Internally, the lintel is tusk tenoned.  jamb lining without architraves.	Has mortise in top plate suggesting a stud was removed. New framing inserted inside original. (photo 60) Early internal sill still intact. (photo 59)
W5	Pair of 3 pane casement sashes, wired over, possibly recycled, each 362mm x 1640mm, with central mullion.	Tusk tenoned joints, 25mm thick beaded stops, pivot catches, 45mm wide central mullion.	Tool shed generally built out of second hand material. 135mm chamfer boards.
W6	Same as W5.		
W7	2 panels of louvres with security bars. Early window opening reduced for louvres, probably in height and width.	Original hood externally same as for W4.  jamb lining without architrave, tusk tenon joints for original lintel.	Opening may have been widened as suggested by 2 mortise holes inside window jambs to suggest the studs have been moved.

#### **8.4 *Measured Drawings***



**8.5 *The Burra Charter***

Insert text here

**8.6 *Entry in the Heritage Register***

Insert text here