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Cover: A nurturing environment at the Model Cities Community Clinic in St. Paul. Architect: Roark Kramer Roscoe/Design. Photographer: George Heinrich.

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A new Nicollet Mall

BRW of Minneapolis has unveiled its schematic design for the renovation of Minneapolis' Nicollet Mall. The \$30 million plan, developed for the Nicollet Mall Implementation Board, aims to revive the twenty-year-old pedestrian mall as the preeminent urban shopping street in the region.

Circular glass stair towers attached to skyways, a realignment of the street's present serpentine path, shuttle transit, pocket parks, new street furniture and public art would transform the now outdated mall.

"For the mall to be a successful retail environment," says Craig Amundsen, principal-in-charge of the project, "there must be visibility and easy access between skyway and street levels." The glass towers, which would house a stair wrapped around an elevator, would improve pedestrian flow from skyway to street. In addition, the towers, thus far the most controversial part of the plan, would be "image-givers," according to David Bennett, architectural principal.

The plan also proposes that the present serpentine alignment of the street would become more regimented, with one side of each block the usual fifteenfoot width and the other side 40 feet wide. "The spaces created by the present alignment are fine for objects but not fine for performances or activities," says Amundsen. "To make the street more active, we need spaces." The reconfiguration of the roadway would provide linear plazas of different sizes and shapes for performances, socializing or dining.

Trees, including native Minnesota evergreens and oaks, would be planted in boscs or used as baffles at windswept corners rather than in rows along the street. "We feel the retail facades rather than the trees should shape the volumes of space," says Amundsen.

Pocket parks that could be open or enclosed or convertible one to the other are proposed for the corner of Sixth and



Stair towers and street furniture proposed by BRW of Minneapolis for the New Nicollet Mall

Nicollet and the Midwest Federal Plaza. A more extensive system of pocket parks considered earlier was scrapped because of the unavailability of open land.

The tension between a continuous and consistent image and a sense of variety was a central one in the design process. "It is important that each of the eleven blocks has its own character," says Amundsen, "but continuity is important, especially in the central six-block area." Two-color paving of Minnesota granite, light standards, and specially designed street furniture will lend continuity. Over \$2 million worth of public art will lend variety, possibly even whimsy. Lighting by consultants Jules Fisher and Paul Marantz of New York will add drama to the spaces at night.

The preliminary schematic design was presented to the Nicollet Mall Implementation Board in January. The board, a public-private advisory group to the Minneapolis city council, will discuss the proposal further and give direction to BRW for design development. A funding package for the renovation is also being developed.

Ellerbe to design architecture school addition

The New York and Minneapolis offices of Ellerbe Associates in association with Steven Holl Associates of New York have been chosen to design the addition to the University of Minnesota School of Architecture and Landscape Architecture. The addition will nearly double the school's present facilities on the Minneapolis campus of the university.

Although design work will be done in Ellerbe's Minneapolis office, Peter Pran, design director of the New York office, will serve as lead architect on the project. "We chose Pran because we thought it would be good to have an outside perspective," says John Gaunt of Ellerbe. Pran will bring an international flair to the project, says Gaunt. He comes from Norway, has worked in New York and Chicago and has studied under Mies Van der Rohe.

Steven Holl will serve as co-designer with Pran on the design team. "Holl has a history of finely crafted work and should be a strong influence," says Gaunt. *Continued on page 56*



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Jan Dibbets Walker Art Center Closes March 27

Dutch artist Jan Dibbets explores the structure of natural and man-made worlds in his striking photomontages.

The first retrospective of Dibbets' work, organized by the Walker Art Center in association with the Stedelijk Van Abbemuseum, encompasses twenty years of his work. The exhibit includes pieces from the late 1960s series "Perspective Corrections" and his panoramic photo sequences of land, sea and sky from the '70s.

During the last decade, Dibbets has explored architectural interiors. In a series commissioned by the Walker Art Center, Dibbets depicts the soaring



Jan Dibbets, "Minneapolis," 1986-87

atrium of the Hennepin County Government Center.

For information on exhibit hours, contact the Walker Art Center, (612) 375-7600.

Insights III Walker Art Center March 8–29 Tuesdays, 7:00pm

Four influential graphic designers will present their work and thoughts on design practice and education at the third annual Insights lecture series.

Dugald Stermer, the March 8 speaker,

A Sculpture Garden Flower Show Dayton's auditorium, downtown Minneapolis March 19–April 2

A field of tulips, allees of mountain ash, jasmine-covered arbors and sparkling fountains will bring an early spring to downtown Minneapolis.

Landscape architect Michael



Barbara Stauffacher Solomon and Michael Van Valkenburgh's design for the spring flower show

Van Valkenburgh and artist/designer Barbara Stauffacher Solomon, designers of the Walker Art Center Conservatory gardens, will transform Dayton's auditorium to pay tribute to the Walker Sculpture Garden, scheduled to open this September.

A vivid range of colors lend graphic punch to a design that spatially evokes classical European gardens. A 100-foot by 40-foot field of tulips, ranging in color from orange to reds, is surrounded by allees of mountain ash, an 80-foot long fountain and blue iris. Jasmine and blue hyacinth delineate the show's exit point. One hundred moveable chairs allow visitors to sit and savor their escape into this garden landscape.

Several sculptures on loan from the Walker Art Center, including works by Henry Moore, Isamu Noguchi and Marino Marini will be displayed in the flower show.

Running from March 19 through April 2, the show is open to the public during store hours at no charge.

is known for his past art direction of *Ramparts* magazine and for his illustrations in *Time*, *The New York Times* and *The Washington Post*.

Lorraine Wild, director of the visual communications program at the California Institute of the Arts, is an awardwinning designer and lecturer. Her articles on design have been published in the *AIGA Journal*, *ID* and *Skyline*. Her presentation on March 15 focuses on whether graphic design is an expressive art or a problem-solving process.

Clement Mok, the creative director of Apple Computer, speaks on "Design Lessons on Apple's Roller Coaster" March 22. A graduate of the Art Center College of Design in California, Mok joined Apple in 1982.

Keith Godard, who speaks on March 29, has been the principal partner of WORKS in New York City since 1968. He has designed posters and exhibition installations for museums and created and published children's books. Godard was the designer of the logo, brochures and street decorations for "Liberty Weekend," the celebration marking the 100th anniversary of the Statue of Liberty.

Series tickets cost \$32 for the general public, single tickets \$9. For registration information contact the Walker Art Center box office, (612) 375-7622.

Continued on page 62



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from these pages



Wintergreen, William Gray Purcell's prophetic proposal for downtown Minneapolis, showed glass roofs over streets, "skybridges" and shopping arcades cut through buildings. Sound familiar?

The art of prophecy

By Mark Hammons

Consciously or not, the new in architecture inevitably arises from the experience of the past.

Just as we move through the course of our lives surrounded by buildings, so do the ideas given material form in those structures pass into the future. Thus is an architect also a prophet. Some prophets are better than others.

Thirty-five years ago the proposal of the French developer La Societe Generale Immobiliere (LSGI) to refashion three-and-a-half blocks of downtown Minneapolis was prophesied.

Prior to 1976, the pages of what is now Architecture Minnesota were called Northwest Architect and served as the official publication of the Minnesota Society of Architects (now MSAIA). From 1940 to 1955, one of the principal writers for the magazine was William Gray Purcell.

A former president of the Minnesota Chapter of the AIA, Purcell is most widely famed for the residential designs of his progressive architectural firm, Purcell & Elmslie, which had offices in Minneapolis from 1907 to 1921. Though after 1921 tuberculosis sapped his strength and he was living in southern California, Purcell maintained a vital interest in Minnesota architecture and for fifteen years served as an editorial associate of Northwest Architect.

Pointing out in one of his 1953 columns that weather and traffic congestion had combined to drive merchants to the suburbs, Purcell advanced an



William Gray Purcell, taken shortly before his death in 1965

imaginative plan to redevelop the downtown shopping district. With a glass dome covering the street, the plan has a remarkable conceptual resemblance to the LSGI proposal now receiving consideration over three decades later. Purcell called his idea Wintergreen.

The Wintergreen concept was based on arguments immediately recognizable to anyone following the LSGI project. Then, as now, Minneapolis faced stiffening retail competition from suburban malls. By the 1950s, the architectural attraction of Southdale and similar developments was diminishing the interest of shoppers in the traditional stores downtown.

The LSGI approach would create a "destination" shopping center in the heart of the city by renewing the commercially decayed south end of the Nicollet Mall. This 300-million-dollar project, which would require large-scale condemnation and several years of construction, has become controversial largely because of the potential enclosure of the Mall.

City officials, faced with the need to refurbish the entire length of the Mall and experienced with the unpleasant architectural results of an abdication of design control in the building of City *Continued on page 68*





s the wind sweeps inland from the North Sea, little stands in its way except the homes on the rocky coasts of northern Norway. The temperature is well below zero. And the wind makes the snow appear to fall parallel to the ground.

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Art is popping up in the most improbable places. Thanks to the Artist-**Designed Bench Project** sponsored by the Minneapolis Arts Commission, four benches will be installed at city bus stops this summer. The four designs were selected from ten models built by finalists. Bruce N. Wright



Scott Coran, alternate winner, created a back-to-back bench from fluorescent lights encased in thick, clear acrylic tubing.



In "Minneapolis Water Toy Bench" by artist Stanton Sears, a castbronze air mattress floats on metal while fish swim underneath. Slated for Block E on Sixth Street, the bench recalls both the lakes of Minneapolis and toys found in downtown window displays. **Winner**



Sculptor Irve Dell's bench hangs, like a porch swing, from a bridgelike superstructure that ends in a cast-bronze tail.



"Log Roll" by artist Phil Larson is a subtle study in geometry. It is designed to require a minimum of maintenance.



To sit on "Oasis Bench" by Leslie Hawk might transport the busgoer from the urban hurly-burly of its Seventh Street location to a tropical environment. Animal forms and other symbols incised into the surface make artistic graffiti. "I've striven for a bench that not only encourages people to sit but engages their imaginations," says Hawk. **Winner**



Brian Carpenter took the assignment literally and created a visual pun with "Bustop." A mildly brooding piece, it evokes an apocalyptic moment when buses emerge from the ground. To be located in front of the Metropolitan Community College on Hennepin Avenue, it incorporates the top of a real bus, on edge, and tubular steel for the long bench seating across the front. **Winner**



A tongue-in-cheek piece of street furniture, Tom Rose's cast-metal "Chippendale Bench," becomes both a literal and iconographic representation of a familiar form. It will welcome the tired pedestrian in front of the Minneapolis Public Library on Hennepin Avenue. **Winner**



Brian Foster's bench experiments with materials: a wrought-iron frieze forms a whimsical flourish for a bench made of glass block and trimmed in copper.



Janet Lofquist created a granite boat bench with bronze "fossils" imbedded in the surface—a reference, no doubt, to the area's geological history.



Artist Susan Warner designed a ceramic bench to give bus waiters some fun: built into the seat are a chess board and other games.

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Dr. Malcolm McCannel has discovered the fine art of ophthalmology. When McCannel wanted to move his practice to larger quarters ten years ago, he had more than medical technology in mind. His new office occupying the top floor of the Physicians and Surgeons Building in Minneapolis would be a showplace for part of his art collection.

He hired local architect Paul Katz of Paul Katz Associates to rework the former headquarters of the Hennepin County Medical Society: The commission was something akin to designing a museum with a clinical twist.

McCannel's private office is as much a den as it is an examining room. Paneled

walls, carpeted floors, a comfortable couch, a gas-burning fireplace and walls choked full of original paintings from around the world create a relaxed, if eccentric, environment for eye exams. Patients sit in a club chair next to the fireplace.

McCannel has traveled on the Hope Ship to India, Africa, South America and Indonesia to treat patients and has collected an array of art along the way. The paintings stacking his office walls are both eclectic and personal.

Carved African statuettes occupy the fireplace mantel. An Indian mural of faces (McCannel calls them his staff) hangs above the sofa. "Many of the artists, such as Ben Shahn, have become personal friends," says McCannel. Works by Biederman, Malcolm Myers and Morris Graves rub shoulders.

But not all in McCannel's office is high art. A collage of eyes cut from magazines (a gift from one of his daughters) hangs quite comfortably alongside a painting of a Peruvian tribe.

"I once took a night course in drawing and quickly realized that my strengths lay in eye surgery and art collecting," says McCannel. That's probably a good thing. Today his patients can see a bit of the world without ever leaving the office.

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To Tom Ellerbe When the late Tom Ellerbe took over his father's architectural firm in 1921, most hospitals were Victorian mazes. Over the course of 70 years of practice, Ellerbe built a firm of national prominence largely by designing hospitals and medical buildings that were models of efficiency.

Aided by an ongoing relationship with the Mayo Clinic in Rochester, Ellerbe experimented with floor plans that moved people and supplies quickly and smoothly. The first circular care unit cut from 5.2 to 3.8 the number of miles a nurse walked a day—and cut by a third the nursing cost per patient. The cross plan, the Y plan, the penta plan, and the delta plan were further innovations. By 1969, the St. Paul firm had built more than 400 hospitals, clinics and medical school buildings around the country.

But Ellerbe is not the only Minnesota name in the medical architecture game. Just as the state has been an innovator in the delivery of health services, so have Minnesota architects been on the leading edge of medical architecture. Hammel, Green and Abrahamson, Smiley Glotter, Setter Leach and Lindstrom, Horty Elving, Hills Gilbertson, the Close Associates, among others, have contributed to the advancement of health care through the design of excellent buildings.

Thanks to the functional innovations they have made—and to the newly competitive medical market—medical clients now ask for aesthetic distinction as well as functional efficiency. Minnesota architects are happy to supply it. The corridors in the new V.A. Hospital are blue, beige, even pink—not hospital green or white. The Lakeland Medical Clinic in Texas looks more like a corporate headquarters than a clinic. Even low budget community clinics aspire to more than a lowbudget look.

In this pursuit, Tom Ellerbe's devotion to function has not been lost. Function has been enlarged to include soothing the soul as well as treating the body. With deep respect for a giant in Minnesota architecture, we devote this issue on healing architecture to Thomas Farr Ellerbe.

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Linda Mack Editor

The Freek

A pioneering St. Paul architect who built a firm—and more



Thomas Farr Ellerbe, FAIA, 1892-1987. Elected a Fellow of the American Institute of Architects in 1961, he was the second recipient of the MSAIA Gold Medal in 1981.

By Larry Millett

The death of Thomas Farr Ellerbe last November at age 94 brought to a close one of the most remarkable lives in the history of Minnesota architecture.

Over a career that spanned more than half a century, Ellerbe built the firm inherited from his father into an architectural giant that today does business around the world. His most significant achievement lay not in the making of buildings but in the shaping of his profession, to which he was passionately devoted. He instilled in his firm an ideal of practice that emphasized, above all else, service to the client.

It was an approach that brought the firm a steady stream of prestigious corporate and institutional clients, including the 3M Company, the Mayo Clinic, State Farm Insurance and Notre Dame University. If the buildings produced under Ellerbe's long tenure seldom made for memorable architectural imagery, they worked uncommonly well, in many cases setting new functional standards. This was especially true of the hospital designs for which the firm became well known.

Born in St. Paul in 1892, Ellerbe attended Murray and Mechanic Arts high schools before going on to the University of Minnesota, where he studied briefly. When he took over the firm after the sudden death of his father Franklin in 1921, Ellerbe was only 28 years old and had just one semester of architectural studies to his credit.

Almost at once, he demonstrated the decisiveness that was a hallmark of his character. When several of his father's associates announced plans to assume control of the firm, Ellerbe acted swiftly. He fired one man on the spot, then convinced the others to stay and work for him. The next day, he set off on a whirlwind tour to visit his father's major clients and win their support.

In presiding over the firm, Ellerbe always put the client first. "Tom thought that the highest calling of any architect was to serve his client," recalls John Labosky, president and chief executive officer of Ellerbe Associates, Inc. "He believed that, above all else, a building must do its practical duty well." This devotion to service won the firm consistent repeat business from its major clients. Many of the firm's best-known works were in Minnesota, including the Mayo Clinic Plummer Building and the Chateau Theater, both in Rochester and both completed in 1928; the St. Paul City Hall-Ramsey County Courthouse (as associate architects with Holabird & Root of Chicago), completed in 1932; and the 3M Corporate Headquarters in Maplewood, dating from 1960.

Not a designer himself, Ellerbe seems to have been largely uninterested in issues of style. For many years, in fact, he would not allow his employees to compete for design awards. As a result, the Ellerbe legacy is not one of inventive, eye-popping design. Even so, there were occasions when Ellerbe forsook his devotion to functionalism and pursued art.

The most notable example occurred in the design of the city hall and courthouse in St. Paul. It was Ellerbe who finally persuaded the Swedish sculptor Carl Milles, whose early schemes had been rejected, to create a statue for the building's Memorial Hall. Milles' statue, the Indian God of Peace, turned out to be a stunning contribution to the architecture of the hall, which is widely regarded as Minnesota's outstanding Art Deco space.

"Tom was not a talented person in the sense of being a great designer, but he respected that talent in other people and nurtured it," says John Gaunt, executive vice president of Ellerbe Associates.

Ellerbe nurtured his employees in other ways as well. He pioneered profit sharing and other benefit programs and took a genuine interest in his employees' welfare. His dedication to their well being became especially apparent when he retired. In an extraordinary act of generosity, he gave his shares in the company to his employees. It left him, in the words of his attorney, "a man of modest means, instead of the wealthy man he could have been." Ellerbe was also a strong believer in the cooperative movement, to which he devoted a great deal of time, energy and money.

Yet despite his high ideals and unquestioned integrity, Ellerbe was not always an easy man to love. He could be demanding and dictatorial, and his manner was at times fearfully blunt. "Tom was a man of strong opinions, and if he didn't like something, he'd





Tom c. 1900

Off for the service, after marrying Eleanor



Tom's father, Franklin Ellerbe

As devoted to his employees' welfare as to his clients' needs



Tom's wife Eleanor and Tom, Jr.



Tom with friends

tell you," Labosky says. Robert Kerr, an architect who worked for Ellerbe for many years, described him as "a complicated and a very private person. He loved his fellow man but sometimes found it difficult to express that love."

Everyone who knew Ellerbe agrees on one thing: he loved life and lived it to the fullest. He liked good food and drink, good company and a good time. "He was a very worldly, earthy kind of guy," Gaunt says. Ellerbe—whose wife of almost 70 years, Eleanor, died in 1986—also loved to boat on the St. Croix River, ride horses, and travel. Stories are still told by company veterans of some of the old man's more colorful adventures, including the time he traveled virtually all the way around the world without a passport.

In Ellerbe's last years, however, the infirmities of age finally caught up with him. He survived a couple of serious automobile accidents, but arthritis eventually confined him to a wheelchair, and pain was evident on his face. Even so, he continued to come to his office in downtown St. Paul almost every day and he never lost his interest in either his profession or the city he loved.

"What remains foremost in my mind when I think about Tom Ellerbe," says Gaunt, "is the passion he had for his life's work. He never let go of it, even at age 94." Just one day before he died, in fact, Ellerbe met with a St. Paul city official to discuss plans for restoring Memorial Hall. The project was close to Ellerbe's heart, and one of his last acts was the establishment of a fund to help preserve the hall he had done so much to create.

Fittingly, memorial services for Ellerbe were held in the hall—a dark, nave-like space that has always had a spiritual feel. A large crowd gathered to hear a series of speakers share their memories of the man. It was St. Paul Mayor George Latimer who offered perhaps the most succinct and telling eulogy: "A great city is composed of many ordinary people who together do extraordinary things," the mayor said. "But today we honor someone who was not ordinary. He was an uncommon man."

Larry Millett is the architecture critic for the St. Paul Pioneer Press & Dispatch and author of The Curve of the Arch: The Story of Louis Sullivan's Owatonna Bank.



At the Ellerbe 50th anniversary dinner, 1959



Tom on the St. Croix, 1958, with dog

Time for reflection at Nipiwaukon, his St. Croix cabin



The Freek

By Heather Beal and Ken Potts

In January of 1987, Tom Ellerbe met with us for some fifteen hours of taped interviews to share his reflections on a lifetime of experience in the field of medical design. His anecdotes traced the growth of the Ellerbe firm and the medical industry. They also revealed the maturation of a remarkable man.

Ellerbe began by telling of the personal challenge he faced when, at age 28, he took over his father's architecture firm. He then described the challenges that the Ellerbe firm and the medical industry faced as both experienced phenomenal growth. He told of the need to solidify verbal contracts with clients when he inherited the firm in 1921; of the need for crisis management when safety hazards plagued health care structures; of the need for accurate programming when hospital populations grew more rapidly than statistics could project; and of how his own experience as a patient gave him a rare insight into the design requirements of hospitals and clinics.

Tom Ellerbe had a single year of formal architectural training. Unable to rely upon technical expertise, he employed the skills that enabled him to bring the Ellerbe firm to national prominence: pragmatism, persuasive communication, and an innate sensitivity to human needs.



The Crile Clinic fire

In 1929, several years after Thomas Ellerbe successfully conquered the early challenges of establishing authority within the firm and of solidifying relationships with clients, the firm faced a deep threat to its reputation. A disastrous fire broke out in a clinic in Cleveland, Ohio that Franklin Ellerbe had designed, and the cause was undetermined.

"The fire killed around 300 people. Fifty-six years ago that was a lot of people," Ellerbe recalled. "It rocked the medical profession because nobody knew how it really happened."

As soon as Ellerbe received news of the fire, he caught a plane to Cleveland.

"On the plane I had nothing to do but wonder. I knew nothing about the incident except that people had been killed. When I arrived I went up to see Dr. Crile and a couple of his partners. When I walked in Dr. Crile got up, walked across the room and held out his hand. He said, 'Tom, this is terrible but you are going to help us.' I didn't know what he was talking about but he was terrific. He had a lot of very wealthy clients and they came to the rescue.

"For days the fire was the talk of the

papers. What actually happened: the heating plant was never used. Steam heat came in about the time that the building was completed and they had hooked up to it. They used the furnace area to store x-ray film. One of the doctors had gone down to get out an old film and had turned on a light to look at it. When he was through he put the x-rays down on the top of a boiler and put the light on top of them. The heat from the light ignited the x-rays.

"The film gave off a terrible smoke that was conveyed almost instantaneously through the building. The pipes in the boiler room led from the basement around to the outside walls and then to vertical shafts that led to each examining room. The fumes followed that path with no resistance. People who were suffocating from the smoke opened the windows to get fresh air. Instead, they'd get more smoke from the pressure within the building. They just dropped like flies.

"All this was revealed after the investigation. At the time of the fire, nobody knew the cause. It was just like a lightning strike. It was terrible. The fire even killed one of the partners and his executive secretary, whom I knew very well. "You have no idea of the ramifications of this accident. Cities, states, counties—anyone who had x-rays—were scared to death. They immediately passed laws saying you couldn't store x-ray film in any medical facility."

The Ellerbe firm responded to the crisis needs of its medical clients around the country, earning national news coverage for its efforts.

"We were doing makeshift buildings and designing separate fireproof buildings just to get the films out of the major buildings. It took a couple of years to resolve what had happened. In the meantime, Eastman Kodak invented the fireproof x-ray."



Board room at the Crile Clinic in Cleveland, Ohio, c. 1921

Crile Clinic renamed

After the fire, the Crile Clinic rebuilt and asked Ellerbe to design a new building. The doctors, admirers of the Mayo Clinic in Rochester, wanted to name the new building the Crile Clinic.

"I thought they were looking at their image the wrong way," Ellerbe commented. "Crile told me that everything they did was patterned after the Mayos. So it was up to me to explain why the two were not synonymous. Number one—there were several Mayos and only one Crile."

Ellerbe also pointed out that the doctors at Crile had a rare opportunity. Their clinic was to be located in a large city. Patients who had travelled a great distance and were groggy from illness would undoubtedly remember the name of the city but not the name of the clinic. When a cab driver asked a patient where he wanted to go, he would naturally say the Cleveland Clinic. Ellerbe encour-



aged the doctors at Crile to capitalize on this subtle marketing technique.

"I had a lot of logical reasons and they agreed. It was really something to tell the chief of a big organization and a very successful one—'you can't use your name.' I was just a kid at the time."



The "expandable" building designed for the Cleveland Clinic to accommodate future growth. The three-story base was built first, the upper floors added later.



The Plummer Building in Rochester, 1928. The second major building Ellerbe designed for the Mayo Clinic, it dominated the Rochester skyline for half a century. Bas-relief on the facade (below) shows Dr. Henry Plummer, chairman of the Mayo Clinic building committee, looking over the plans of the building which bears his name.



The Plummer Building goes up . . . and up

A phenomenal growth rate and the rapid advance of medical knowledge presented health care administrators with a new problem: how to plan for future facilities that would adequately meet the needs of growing numbers of patients. Programming—the determination of space for functions within a building—was far from a refined science when plans began for the Plummer Building in Rochester in the mid-1920s.

According to Ellerbe, "Nobody at the Mayo Clinic could have written a program for the Plummer Building because the clientele was growing like crazy. The Mayos knew they had patients coming out of their ears and thought they'd better do something about it.

"So we started planning, and with Dr. Plummer's help, we decided an Hshaped building would be ideal. The first Mayo clinic building was H-shaped.

"The Plummer Building started out as a five- or six-story building with a



Gargoyle at the base of the bell tower.

floor added as things evolved. And all of a sudden, we found out that we were at a ten-story building. We kept adding more floors, not knowing where the ceiling was going to be. Finally, we decided fifteen was enough. There were all sorts of ancillary services that had to be provided. We decided we should build another building. Well, that's an example of lack of programming.

"The bell tower on the Plummer Building was an afterthought. Dr. Mayo was in England and heard some carillon bells. He made up his mind that this was what Rochester needed and told Harry Harwick (business manager for the Mayo Clinic) to put some carillon bells on the top.

"Well, carillon bells are huge—made of cast iron—and they have to oscillate. The construction had reached the tenth or eleventh floor at the time. How were we going to put those bells on top of a building and stabilize them? We had to redesign the whole structure—go back to the bottom and make it stable for the bells."



Bronze elevator doors, designed by Carlo Brioschi.

A tentative solution

Soon after it was occupied, the Plummer Building was filled to capacity and Ellerbe received a call from Harry Harwick.

"Harry said, 'Tom, the patients are coming in droves and we can't handle them. We've decided the Plummer Building has been so successful that we'll build another building just like it someplace else.'

"I decided this was a cockeyed idea. Based on the experience of the original Mayo Building and the Plummer Building, there was no way you could design a building in one era and decide later to duplicate it.

"I prevailed upon the Mayos to forget the idea. We decided on another scheme—an exaggerated tent. We could provide facilities in it for use as long as necessary. In the meantime, we'd proceed with an intelligent analysis of the problem.

"We built a whole series of Quonset huts and hooked them up with the subway system. This solution turned out to be a phenomenal success. People would enter the buildings from the subway and couldn't tell the difference. That's just what we wanted.

"This structure was so flimsily built that if a doctor didn't like what we had, we'd ask 'What do you want?' He'd tell us and we'd tear the walls down overnight or over a weekend and build something new. This completely proved our theory that they had to use things to know whether they were right."

Buildings that grew

These experiences with overcrowded buildings and a sort of life-size rip and tear model helped the Ellerbe firm establish some basic guidelines for programming medical buildings. For the Cleveland Clinic, for example, Ellerbe devised a design innovation—the expandable building.

"Our early experience showed us that we couldn't take the owner's word for how much space was needed. We figured out that it wouldn't cost the clients much to have us put in extra footings and additional strength in case they wanted to add a couple of floors. We would put steel in the structure and tell them later.

"One of the first times we used this idea was at the Cleveland Clinic. After the fire, they had no idea how much they would grow. We built a three-story building but, using our own judgement, we put strength in for additional floors."

After the initial three-story phase, two additions were constructed and the building reached fifteen stories. By reinforcing the original structure, the Ellerbe firm saved the Cleveland Clinic an enormous sum of money compared to the cost of building an additional structure.

Loma Linda University Medical School, Loma Linda, California, 1964, a classic example of Ellerbe's radial plan for nursing units.



Inside information

Tom Ellerbe's pragmatic approach to problem-solving and excellent communicative skills combined with his personal experience to directly influence the firm's design innovations in the medical field. Ellerbe was hospitalized over 30 times and was able to translate his observations as a patient into ideas for architectural improvements, for instance, bathrooms in each patient room.

Ellerbe's first significant memory of being a patient was during World War I. He had contracted a case of mumps on the voyage to France and was sent to a hospital in Paris to recover. He referred to this experience as his worst hospital stay because it was "just like being in prison: stone walls, no plumbing, cold and damp. The army nurses were all male and didn't know a thing."

This and other hospital stays left indelible marks on Ellerbe's memory. "I was analytical, I was an architect, and I was interested in medical problems," he explained. "Apparently, my mind absorbed all that I observed and translated it into answers for problems we had in the office."

Ellerbe used the story of his best hospital stay to demonstrate how his rare insight led to designs that transcended mere functionalism to improve the environment for both patients and staff.

Shortly after the firm conceived of the radial nursing unit—one of the planning innovations of the post-war period—Ellerbe was hospitalized for a back injury.

The hospital where he was staying employed the radial design in a new wing. Ellerbe knew the hospital administrator and asked to be transferred to this radial unit as soon as possible. When the administrator explained that the new wing was "all booked up" Ellerbe persisted.

"Well, I don't give a damn. You can put me in as soon as a patient leaves," Ellerbe said. "I want to see if our design theory worked."

When he was finally moved to the radial unit he was delighted with the results.

"The atmosphere in the new wing was wonderful," he recalled. "It was like going from darkness to daylight. A nurse could stand in the center of this unit and see all of the patients. It convinced me that things worked as we claimed they would."

In addition to Ellerbe's reaction to the radial design, there was a single incident that personified the success of the innovation. "Before I was discharged, a lady came in and asked, 'You're the architect?' And I said, 'Yes.' Well, she came over and grabbed my hand and shook it very warmly and said, 'I am so happy that you designed this new unit. I've been a nurse for twenty years. All of this time when I finished work each day I was completely bushed. My husband has been trying to get me to go out after work and I've never done it. Since we've had the radial unit I'm as fresh when I leave as when I come in. Tonight, I'm going out to dinner with my husband and I have you to thank for it.'

"That was like music to my ears," Ellerbe concluded.

Heather Beal is communications director for Kodet Architectural Group in Minneapolis. Ken Potts is a graduate student at the University of Minnesota School of Architecture and Landscape Architecture and was the 1985-87 student representative to the board of the Minnesota Society of Architects.

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A cathedral to medicine



From the bronze door handles to the cresting on the bulletin board,

every detail of the Mayo Clinic's Plummer Building of 1928 was given loving attention by Ellerbe chief designer Ray Corwin and Mayo's Dr. Henry Plummer. For this unusually ornate building, over 500 detail drawings were made, many of them to full scale. They were saved from destruction by Ray's wife and Ellerbe business manager Ethel Corwin. They survive to inspire a new generation of medical architects — and us all.







Domestic diversions

Ellerbe puts a human face on a hospital for children



The addition to the James Whitcomb Riley Children's Hospital in Indianapolis brings functionalism to a human level. Avoiding a box, Ellerbe broke the 250,000-squarefoot structure into smaller modules (opposite). The modules work as individual nursing units for the different age brackets, such as infants or pre-teens. A variety of landscape elements provide experiences for patient and visitor alike. A child walks atop a parapet (above), which is enlivened by stone faces. Hospitals can be intimidating places, for patient and architect alike. Size supports medical function but does little to comfort a patient. The most recent addition to the James Whitcomb Riley Hospital for Children at Indiana University in Indianapolis breaks from the typical monolithic hospital design.

"Over the past ten years we have seen a consistent shift in the approach to medical architecture," says John Gaunt, project principal with Ellerbe Associates of Minneapolis. "There is more concern for creating comforting, humanizing environments because of the increased competition within the medical profession. Today medical architecture is aesthetically competitive with other types of architecture."

When Riley wanted to expand seven years ago, the hospital gave Ellerbe a modest mission: design the best pediatric unit in the country. The proposed 250,000 square-foot building would replace all bed units of the existing facilities and provide new radiology and surgical units. Ellerbe strove for an addition that would be sympathetic to the original Georgian-style buildings of the medical campus and would offset the imposing presence of a bland addition built in the 1970s.

To avoid a massive box, Ellerbe adopted a modified Georgian style and broke the five-story structure into manageable parts. A cascading gable roofline and a series of facade setbacks recapture the human scale of the earlier buildings. Brick and Indiana limestone trim enhance the Georgian touch.

The architects wanted to ease the anxiety of a hospital stay for children by incorporating familiar, home-like elements. The exterior "family court" just outside the main cafeteria is an abstraction of a house. Like the heart of a home, a fireplace stands at the center of the court. A doorway, an arched window and a garden become the "domestic elements around which activities take place," says Gaunt.

The outdoors becomes an important design element in the Riley hospital expansion. In addition to the family court, patients and visitors have access to several rooftop gardens and courts. A glass-roofed atrium lobby connects the newest addition to the earlier buildings. Plants, water and animals (in stuffed form) continue the outdoors theme indoors.

The architects and hospital administrators agreed that the environment plays a psychological role in the healing process. "We wanted a humanistic, personalized environment without trendy themes and cliches," says Gaunt. "We wanted something that would hold up years from now." Soft colors and subtle detailing differentiate each floor and unit. Elevator lobbies contain wall sculptures of jungles, oceans or toy stores.

Riley Children's Hospital was one of seven winners last year of *Modern Healthcare*'s second annual Healthcare Facilities Design Awards contest, cosponsored by the Committee on Architecture for Health of the American Institute of Architects. The "family court" won a 1987 merit award from the Minnesota Chapter of the American Society of Landscape Architects.

The Riley Children's Hospital was designed with the ultimate client in mind: the children. The result is a pediatric hospital that acknowledges emotional needs while avoiding tacked-on cliches.



Beyond the box, inside and out



Photos: Hedrich Blessing

The new addition joins with the two earlier buildings by doming a former outdoor space to make a lobby. The brick facade of the original Georgian-style building is a striking contrast to the Modernism of the 1970s addition (left). The balconies, which were built onto an exterior wall of phase two, connect with the latest addition for easy access between the buildings. They step out as they rise, reflecting a stepped roof above.


"We wanted the patient rooms to resemble as closely as possible a bedroom, even though we knew that all the requisite medical equipment would make that difficult," says John Gaunt of Ellerbe. But a few touches such as stuffed animals and playful wall covering above the windows soften the edges (above). A window by the nurses' station allows observation.



A dramatic view from the old to the new (above). The interior balconies serve as small lounges, as well as circulation corridors. The entire campus for the children's hospital fits onto a single block (site plan), the latest addition on the lower right. The addition is compact compared to the Ushaped footprint of the original building with its projecting wings. The rectangular phase two connects with both buildings.



A hospital with heart

HGA, Smiley Glotter and HDR carve warmth into a darn big place



From the main entry to the Veterans Administration Hospital, visible above, visitors enter the hospital via a low-ceilinged vestibule which opens suddenly to the dramatic atrium (below). Four stories high, 135-by-135-feet, and enlivened by a large American flag, this first of three atria houses the information desk surrounded by park-like coves with waiting benches. On the first level, half of the atrium is enclosed for a chapel and an auditorium that can be combined for larger functions. Their skylights borrow light from the skylit courtyard.



"It's hard to love a building with a 500foot facade," the architects for the new Veterans Administration hospital in Minneapolis often began their presentation to the client and they always got a laugh. But it's no joke trying to make a comforting environment out of something by nature so large and institutional.

The MVA Group, a joint venture of Hammel Green and Abrahamson and Smiley Glotter Associates of Minneapolis and Henningson, Durham and Richardson of Omaha, attacked the problem by carving three atria out of the 1.5 million-square-foot building. Sky-lit and filled with greenery, the atria combine with soft-colored corridors and rooms overlooking plant-filled terraces to make a hospital that resembles a hotel more than a government institution.

Planning for what is officially called the V. A. Replacement Medical Center began in the 1970s when a study of the existing hospital and clinic buildings by Ellerbe Associates revealed they were woefully inadequate and inefficient. A melange of structures built from 1927 to 1954, they were tied together by tunnels negotiable only by the able-bodied and understandable only by the cognoscenti. Rooms were not air-conditioned and structural problems made renovation a major undertaking.

The Veterans Administration agreed to build a new facility, reopened the interview process and selected the MVA Group, a joint venture formed specifically for the project.

"HGA and Smiley Glotter both had considerable experience in hospital design," explains Joel Glotter, principalin-charge of project administration. The V. A. required the hospital be interstitial—all mechanical and engineering equipment is housed between floors—and Smiley Glotter had designed the only interstitial hospital in this area for Hennepin County; HGA had a reputation for design, and HDR of Omaha had both appropriate experience and a national image.

Planning, design and engineering expertise from the three firms were centralized in one office for the four-year process of design.

The Veterans Administration claims to be the largest hospital builder in the world, and brought to the process both wide experience and strict guidelines on everything from mechanical systems to patient rooms.

It mandated, for instance, that every patient room have an exterior view. With 847 rooms, that meant a heck of a lot of perimeter. Though a tall tower would provide perimeter, the promixity of the site to the Minneapolis/St. Paul airport limited height to four stories. The building footprint became an enormous square with two wings extending out and three courtyards carved out of it. At that time, the courtyards were outdoor.

"We always hoped that the courtyards would be enclosed," says Joel Glotter. "We wanted the greenery, the open space, the sense of movement and interaction." But Hyatt-like courtyards were not on the V. A. list of specs.

"Finally," Jerry Olson, project coordinator with HGA, explains, "the V.A. agreed to let us enclose them if it could be done without spending a penny more." Since exterior landscaping, insulation of walls, use of exterior materials and mechanical costs were no small items, putting roofs over the courts could be justified, especially when on-going energy savings were calculated.

Thus was born a V. A. hospital that breaks the mold of its predecessors. Three plant-filled atria provide sun-lit space for essential functions—information desk, meeting rooms, waiting lobbies, and cafeterias—as well as giving patients a view that's better than outside. They also help orient visitors in a building that occupies seven acres.

"We couldn't use the usual northsouth orientation," explains Olson, "because the building had to be turned 45 degrees to the compass points to avoid airplane flight patterns." Major circulation patterns go to the atriums, each distinct in function and feel.

The same challenge—of minimizing perceived size and orienting people determined the design of the exterior.

"It was important to break down the length of the building without making it too complex," says Kurt Rogness, project designer with HGA. A pre-cast concrete shell unifies the structure. Set within that framework, a brick section designates the patient area and helps relate the building to its residential neighbors. A green metal panel on the front designates the high-tech areas: outpatient services, surgery, and treatment. The massive ends, with their ventilating louvers an almost surreal ornament, house mechanical equipment.

In a hospital, making entries clear is especially important. Canopies along a 500-foot-long arcade establish a hierarchy of entries.

With its strong form, the V. A. Hospital establishes its presence from the highways on two sides of it. If it does not follow the prototype of V. A. hospitals around the country ("You could spot them ten miles down the road," notes Robert McDivitt, assistant to the director of the V. A. Hospital), it is readily identifiable.

The largest V. A. hospital to be built to date, the replacement facility is also the least expensive per square foot. The MVA Group provided the Veterans Administration with an efficient, stateof-the-art facility and came in \$80 million under budget. "We'll have every piece of technological equipment," says McDivitt. "And all our functions have been logically arranged. In terms of patient care, it is a major leap forward." For the veterans themselves, it will be a source of pride as well. *L.M.*



A statue called "The Price of Freedom is Visible Here" by Minnesota sculptor Rodger Brodin gives poignant form to the function of the new hospital facility: healing those who served.

Hyatt-like spaces defy the V.A.'s institutional origins



Dental chairs overlooking a terrace seating area (left) are hardly the norm for a V. A. hospital or any hospital. Park-like coves give those who wait a pleasant spot (below). Each patient room in the V. A. Hospital looks either to the out-of-doors or onto one of the atriums, and it is arguable which is the better view. The height and denseness of the foliage preserve privacy of those in the first-floor rooms; the view of people moving about promises to relieve the monotony of hospital stays, especially long-term ones.







In the dining atria (above), the first level accommodates both open seating and an enclosed cafeteria. On the second level, a hotel-like terrace complete with potted palms provides welcome relief from hospital-room visiting. A circulation corridor bisects the large square building diagonally, bringing people back to the atriums for orientation and relief from long corridors (plan, left). The three public entries are arrayed only the front, staff entry and entry for the psychiatric area to the rear.

A center of courage

Rafferty, Rafferty, Mikutowski laid firm foundations for growth



Courage Center, a rehabilitation facility for disabled children and adults, sprawls across ten rolling acres near the Theodore Wirth golf course in Golden Valley. At first glance, the three-story brick building is more noticeable for its 170,000-square-foot size than for any distinct architectural feature.

But a closer look reveals an architecture that is more inspirational than institutional. Inside, some 15,000 people a year are served by more than 70 rehabilitation programs, in an entirely barrier-free environment. The result of a close working relationship between Courage Center and the St. Paul architectural firm of Rafferty, Rafferty, Tollefson, the facility has grown over a twenty-year period to meet the changing needs of those it serves.

The foundation of CouragetCenter is as much determination and vision as it is the usual concrete. Formerly known as the Minnesota Society for Crippled Children and Adults, Courage Center was founded in 1928. Its early efforts were aimed at public policy and legislation to aid disabled children—one of the organization's first legislative victories came in 1931 when Governor Olson signed a bill that provided school transportation for disabled children in rural areas.

During the 1940s and '50s, the or-

ganization continued its lobbying efforts but also offered rehabilitation services to both disabled adults and children. By the 1960s, Courage Center was serving the physically disabled in the metro and state area with major services such as the Minneapolis Curative Workshop, an outpatient therapy program and preschool for children with cerebral palsy, Minnesota Homecrafters and administrative services. Virtually every program was housed in a different leased location.

A bequest from a wealthy Minnesota man allowed for a consolidated facility. With one building, Courage Center could help disabled people to progress not only physically, but also emotionally, socially and vocationally. The bequest also established the pay-as-you-go motto that has served the center well through three major building phases. As Wilko Schoenbohm, former Courage Center executive director, explains, "It is much easier to raise money *before* you build."

A building committee chose the then eight-year old architecture firm Rafferty, Rafferty, Mikutowski (now Rafferty, Rafferty, Tollefson) to transfer its desires into reality. The commission represented the firm's first venture into rehabilitative or medical architecture.

According to James Beaton, the associate executive director of Courage Center, "We wanted a building that was aesthetically pleasing and avoided an institutional feel. It had to be absolutely free of architectural barriers and flexible enough to change over the years."

The architects began the design process with a year-long search for a site. Seven acres in Golden Valley with views of a golf course and Sweeney Lake had all the inspiration that nature can provide. The land was purchased in 1968 from a nearby hospital with the stipulation that a building could not exceed three floors.

The first stage of the center, completed in 1973, housed a medical rehabilitation area for physical therapy and speech and hearing services. A gymnasium allowed for recreational activities and also doubled as an auditorium. A cafeteria, administrative space and a visitor's lobby completed the original 80,000 square feet.

The building's L-shaped plan would allow for additions. Its low-flung form grew from both the height restriction and a desire to make interior spaces unlike those of a hospital. Numerous windows and high quality materials such as Glengery brick and quarry tile became design characteristics used in all future building.

As the program has grown, so has the facility. Three years later in 1976,



two more significant programs were added to the center's repertoire. A 92degree swimming pool, a cornerstone of the center's physical therapy program, was designed with special features such as a water-level deck and ramp.

The addition of in-house living space provided another architectural challenge. Courage Residence, which also opened in 1976, provides spacious rooms for 64 disabled adults. It is a place for young men and women to gain independent living skills over an average stay of nine months. The residence is designed to look like a college dormitory: Rooms are organized around common areas and picture windows bring in the daylight and views of Sweeney Lake. Each room contains a shower or bath facility, as well as a private balcony or patio and residents are encouraged to personalize their living spaces.

What had seemed like a luxury of space in 1976 was eight years later filled to capacity. Not only had the number of people served per year grown from 13,000 to 15,000, but more and more programs were being added. Closets and hallways had been converted to offices and waiting lists grew for services that had limited room. An additional threeand-a-half acres of site were needed to

Since Rafferty, Rafferty, Mikutowski designed the initial Lshaped Courage Center building in 1973, the rehabilitation center has virtually doubled in size. The most recent expansion completed in fall 1986 and designed by the same firm dramatically changed the back side of the building (above). An extra floor was added to the residential wing (far left) for additional outreach programs. The building's middle was filled in with two floors added above the dining area, which also doubled in size. What appears to be a greenhouse is really the most recent expansion to the visitor's lobby (above and below). The glass wall brings the outdoors to a space that looks more like a clubhouse than an institutional lobby (below).



Access to light and air opens up determined lives



Windows, outdoor terraces and patios allow Courage Center clients to enjoy the seasonal scenery provided by the Theodore Wirth golf course, Sweeney Lake and a trickling stream. The facility's Modernist form allows flexibility for programs within to grow and change. The original vocabulary of brick and square windows has worn well over the years. A central corridor (below) runs the length of the building and exhibits the highquality materials—brick and quarry tile—used through the three building stages.

meet the expansion needs.

Completed in 1986, the addition provides space for Courage Center's counseling services, vocational programs, and independent living services such as driver education.

An education center, also part of the recent expansion, allows Courage Center to share information through seminars and workshops. It houses a highly sophisticated audio-visual room with an infrared hearing amplification facility. Essentially one large room with moveable walls, it works as well for wheelchair polkas as it does for seminars.

To meet spiritual needs as well as physical ones, Rafferty, Rafferty, Tollefson designed a meditation room. "Here," says architect George Rafferty, "the space had to have a different character. It had to have more reserve and offer a spiritual feeling." An abstract stained glass window by artist Michael Pilla brings an uplifting feeling to this small, tranquil space.

Courage Center offers a sunny, noninstitutional environment. The front lobby with a recent glass-walled addition, high ceilings, interior brick walls and quarry tile lacks the sterile pallette usually found in medical lobbies.

Every effort has been made to connect the interior with the outside. Windows, donated by the Andersen Corporation, are numerous. Terraces and patios (several were added as part of the stage three expansion) extend most areas to the outdoors.

Art enlivens the interior and exterior. The aquatic therapy room has windows on one side and on the other a colorful mural by artist Kate Hersey. Corridor walls are used as impromptu galleries to display the work of Courage Center clients. A sculpture by Paul Granlund, "The Spirit of Courage," graces an outdoor terrace.

The dining room, also doubled in the recent expansion, has a window wall that allows views of the golf course. Its coffered ceiling is an elegant alternative to acoustical tile. An atrium, built to bridge office space with the dining area and the education center, works equally well at bringing in light.

Courage Center looks better today than it did twenty years ago. The additions have added variety to the Modern form and allowed the architects to constantly re-evaluate the space. It is a testament to good design that the programs housed within can grow and change.

Twenty years ago, no building type or model existed to show Rafferty, Rafferty, Mikutowski what this building should be. Courage Center has become the model. K.O.





Once an outdoor court, an atrium (left) now serves the dual functions of letting light in and linking an older part of the facility with newer construction. The atrium connects the original medical rehabilation area (right side of photo) to the dining area on ground level, the education center on the second and office space on the third. Within Courage Center's sprawling form, functions are loosely organized (see plan below). To the left of the main entrance and lobby are the pool. locker rooms and gymnasium. To the right are the medical rehabilitation wing, the education center, dining room. Courage Residence (in-house living space) and administrative space. As architect George Rafferty explains, "A central corridor is the street from which all activities branch off



Photo: Rafferty, Rafferty, Tollefson



A physical therapy session (left) occurs in a room cheered by sunshine.

An environment that frees

According to architect George Rafferty, "The most difficult part of Courage Center's design was to constantly put ourselves in the position of handicapped people. The client was really our instructor."

The building is designed to be barrier-free and completely usable by the disabled. All entrances are on grade. Doors are extra wide, many with automatic opening devices and none with round handles that are difficult to grasp. Walls have Formica wainscoting to protect against bumps by wheelchairs and grab rails for both adults and children.

Minimum codes won't work here, and the most minute detail has been considered at the beginning of the design process, rather than as an afterthought to meet code. Floors are quarry tile and brick, much easier for wheelchairs to maneuver than carpeting. Sight lines of people in wheelchairs are carefully considered, and guard rails and window mullions do not obstruct views. Pay phones, water fountains and elevator buttons are at the right height.

Minnesota has made significant contributions to improved legislation for eliminating architectural barriers for the handicapped and Courage Center is an integral part of these improvements.

Julee Quarve-Peterson, an accessibility specialist in private practice, believes that Courage Center's completion in 1973 might have influenced certain parts of Chapter 55 of the State Building Code (now Chapter 1340), which passed in November 1975. Chapter 55 required all new construction exclusive of single family residences to be accessible to the physically handicapped.

Says Quarve-Peterson, "When Courage Center was first under construction, it was like reinventing the wheel. Nothing was standard at that point. The success of Courage Center's programs and structure provided the perfect example of what 'barrier-free' meant." K.O.

Second home

Close Associates: No golden arches but friendly form for the Ronald McDonald House



The Ronald McDonald House near the University of Minnesota Hospitals serves as a retreat from the anxiety of hospital visits. Children share a playful moment (above). The playhouse facade is built onto the back of the first phase. Form and detailing follow the Colonial style of the other houses in the project. University neighborhoods generally lack the kind of civic pride that infuses more typical residential boroughs. After all, student ghettoes are transient and landlords know it takes little maintenance to rent rooms. Thus once-sturdy buildings slip into disrepair. Stadium Village surrounding the University of Minnesota Hospitals is one such neighborhood. Here peeling paint and overgrown front lawns are commonplace.

Standing apart from its deteriorating neighbors is the Ronald McDonald House, a group of white clapboard buildings designed by the Close Associates of Minneapolis. Built in three phases, this project has infused the neighborhood with a new vitality while retaining the scale of the surrounding houses.

The Ronald McDonald house provides overnight shelter for parents whose children are undergoing cancer treatment at the University of Minnesota Hospitals. Children's Oncology Services Upper Midwest operates the house in Minneapolis. Philadelphia and Chicago provided the first two sites for the Ronald McDonald program more than ten years ago. Since then, more than 100 houses have been built worldwide. Although the houses carry the Mc-Donald name, they are funded largely through foundation grants and are operated by non-profit organizations.

The first two phases of the Minneapolis version, built in 1977 and 1984, are modeled after the New England farmstead in which all buildings are interconnected. According to the architect, Gar Hargens of the Close Associates, the complex is meant to create a "homelike" atmosphere that encourages interaction among the guests. "Because many of the guests are coming from rural areas we wanted an architectural style that would evoke images of the farm home," says Hargens.



The first phase, completed in 1977, saw the renovation of a former boarding house. Exterior work was straightforward: replacing lap siding and moving the front entrance to the side under a porte cochere. The interior was reworked into small dormitory-style rooms with two beds and a basin. Each floor has a shared bath. A library in the porte cochere serves as a common area.

The oversized kitchen in which the guests do their own cooking is the social focal point of the Ronald McDonald House. "The kitchen is always the heart of the family home," says Hargens. "It is here that guests come together and share the anxieties they are experiencing. One of the values of the house is that it brings people together and helps them realize that others have the same fears and frustrations."

Phase two, finished in 1984, serves



the same function and continues in the rural vernacular tradition. Here the image is the barn, not the farmhouse. The porte cochere built with phase one connects the two buildings. Guests pass freely throughout the two houses via the library. The two phases combined offer eighteen rooms.

Generally guests stay a night or two. The need for lengthier stays for parents whose children were undergoing bone marrow transplants led to phase three. Completed this past winter across the alley from the first two houses, phase three goes a step further by providing apartments for people staying a month or more.

Hargens calls this Colonial-style house the "hotel" of the three phases. Though bigger than the other residential houses on the block, the house is designed to respect the scale of the streetscape. The roofline shares the peak of its turn-ofthe-century neighbors. A porte cochere at the center breaks the house in half, minimizing its size.

Inside, the apartments provide one bedroom, a small living area and a kitchenette with a hot plate. The kitchen on the main level is still the social core of the house.

The positive impact the Ronald McDonald house has had on the neighborhood was cited by the Committee on Urban Environment. Phase one won a CUE award in 1977 and phase two was an honorable mention in 1984.

With the opening of phase three, the Ronald McDonald House serves a broader range of needs. The program sets a social precedent by providing a caring place for people who need it. The image is rural but the setting is urban. The Close Associates of Minneapolis modeled the Ronald McDonald House (above) after the New England farmstead. Phase one resembles the house, phase two the barn, though both serve the same functions. Phase one was a renovation and phase two was new construction. The porte cochere connects the buildings.

Whether short-term or long, the stay is made pleasant



This is architecture that confronts emotional needs. A country kitchen, the main gathering place (left), creates a relaxed atmosphere. Though the floor plans in each phase differ, they contain the same functions: a kitchen, lounge and first-level bathroom. The caretaker's house is built onto the back of the first phase, with storage sheds next to it.





Phase three, completed this past winter, unobtrusively slips onto the residential street (right), despite its three-story height. A twolevel enclosed porch extends the back and front of the house. Beige vinyl siding contrasts with the natural wood porch. This latest phase is built across the alley from the first two phases, its length wedged onto a narrow lot (isometric, above right). Apartments replace dormitory-style rooms. The first floor (plan, below) contains business offices, a conference room and two apartments. A main lounge is not included. Instead, the kitchen serves as the gathering place.





FIRST FLOOR PLAN

In the neighborhood

Roark Kramer Roscoe/Design puts architecture into the community clinics' hands





Architect Peter Kramer reworked this former storefront (above) for the Beltrami clinic on Minneapolis' northeast side by resurfacing the exterior in stucco and replacing the windows. "Stucco is inexpensive and durable," says Kramer. Patients often come with their children or other members of the family, so the reception lobby is large and offers different settings. A pediment (left) marks the children's play area.

oto: Datar Kramar



The community clinics are designed to be integral parts of the neighborhood streetscape. The West Side clinic in St. Paul, built in 1984, meets the street at an angle. A barrel-vaulted skylight above the reception lobby enlivens the rectangular box. Offices and conference rooms are located in the center of the building, examination rooms along the back. The Beltrami clinic (below) comes flush with the sidewalk, its facade an unbroken part of the other storefronts on the street.

Boarded up storefronts and abandoned gas stations seem likely candidates for the wrecking ball, but a handful are finding new purpose as non-profit community-supported clinics. Born of neighborhood efforts in the late '60s and early '70s, the clinics grew from the "perceived need for quality health care in lower-income areas," says Peter Kramer of Roark Kramer Roscoe/Design of Minneapolis.

Kramer has designed seven of the seventeen clinics in the Minneapolis/ St. Paul area. Twin Cities architects Jackson Griswold of Griswold Rauma Egge & Olson and Jerry Allen of Criteria & Associates also have designed clinics; others were renovated by the staff itself.

The first community clinics started twenty years ago in house basements and storefronts. In the 1980s they have become "real buildings that express the needs of the communities," says Kramer.

Each clinic is run by a board of neighborhood residents which hires doctors, administrators and personnel. Once independent of each other, the clinics banded together in 1973 to form



Ingenuity at work, from rehabbed gas stations to building anew



"You have to work with what you've got," says Kramer. What Kramer started with for the Freemont clinic on Minneapolis' north side was a former service station. A space once perfect for auto maintenance led to this rather odd but workable floor plan (above). Wood siding and rectangular windows (below) hide the building's repair-shop origins.



the Community Clinics Consortium. While retaining their ties to individual neighborhoods, the clinics are now able to conduct joint fundraising efforts to improve services and push for legislation benefiting the poor and uninsured.

The clinic buildings are expressions of community concerns rather than architectural ego. Construction budgets come from grants and donations, which means modest designs that get the job done.

For instance, the Freemont clinic on Minneapolis' north side moved from a house basement to a nearby gas station in 1980. The exterior was cleaned up and resurfaced in wood. Offices, exam rooms, consultation areas and a waiting lobby were arranged within the odd spaces of the former gas station.

Kramer says that the idea behind each clinic is to create a comforting environment that is a visible part of the neighborhood. Beltrami clinic in northeast Minneapolis occupies a former storefront. A cleaned-up front with new windows and a plain column that marks the entrance enhance the urban streetscape along Central Avenue.

As in most of the clinics, the waiting room provides a variety of settings. A pediment in the corner marks the children's play area. Large windows infuse the room with natural light. Wood filing cabinets and trim in the nurses' station, carpeting and fabric-covered chairs in the lobby soften the environment.

The Model Cities clinic in St. Paul's Midway area diverges from the modest detailing of the other clinic buildings. This clinic, once run by the St. Paul health department, wanted more pizzazz for its new facility. A single-story building like the rest, Model Cities is distinguished by a peaked glass ceiling running down the center. The building is divided into distinct parts and color schemes highlight the various functions: medical, dental, educational and day care.

Community involvement separates these clinics from typical health centers. Emphasis is on education. Fee assessments are adjusted to a patient's income and family size.

The community clinics have given many lower-income neighborhoods a stronger say in their medical needs. The new clinic buildings give architectural status to a neighborhood-based innovation. E.K.



Model Cities (above) on the Midway in St. Paul is an architectural departure from the simple functionalism that marks the other clinics. A peaked entrance (above) leads to a reception area brightly lit by the skylight.



Soft and soothing colors in the reception lobby (above) help ease the tension associated with clinic visits. Each section (isometric below) serves a particular need: infant daycare occupies the sawtooth section, the community room the square section and the examination rooms and offices the large rectangular portion.



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A cherubic landscape Projects as large as hospitals create the opportunity (and the necessity) for detailing at many scales, from doorknobs to outdoor spaces. At the James Whitcomb Riley Hospital for Children in Indianapolis, landscape architect Bryan Carlson of Ellerbe Associates developed a variety of themes for the design of indoor and outdoor courtyards. Beginning with some heroic stuffed animals in the "animal court," Carlson used fanciful statuary as a common thread throughout the complex. Cast stone cherubim, supplied by Kenneth Lynch & Sons of Wilton, Connecticut, are strategically located to offer surprise and delight at every turn. The small figures and masks are cast from rubber molds taken directly from the classical originals found in Italy. In the "family court," faces adorn the chimney of an exotic fireplace. Designed to be functional-hot dog and marshmallow roasts are among the hospital's programs-the fireplace's exaggerated proportions and warm imagery are meant to evoke feelings of comfort and familiarity and ease the trauma of hospitalization for children. Bill Beyer



The "fountain of faces," (above) features masks of lions and cherubs cast from originals found in a Florentine garden. The fireplace is truly the focus of the family court (below) serving a variety of outdoor programs.



coming soon

Ritter, Suppes, Plautz/ Architects, Ltd. Project: Raptor Research & Rehabilitation Program Facility, Univ. of MN St. Paul, MN

Upon completion in 1989, this new 20,000 sf, \$1.6 million facility will be the first in the nation to provide areas for raptor education, treatment and research under one roof. The design recalls the form of a raptor in flight—wings stretch from a central backbone of circulation and educational bird displays. An outdoor aviary connects and anchors two separate zones for the program's work. One level houses treatment/surgery areas, laboratories and bird holding areas. The other provides public access to administrative and educational areas. 612/339-0313.



The Associated Architects Project: The Riverwood Apartments Lilydale, MN

This 138 unit apartment building currently under construction on the river bluff near the intersection of Hwy. 13 and Interstate 35E has been designed to take full advantage of the outstanding views from the site. Nearly 70% of the units over-

Opus Corporation Project: Tech West II Plymouth, MN

Tech West II, a 37,500 s.f. office/service center complements its neighbor Tech West 55 through the use of striking architectural metal, glazed masonry and reflective glass providing its tenants with a high tech image. Interior spaces are custom designed to meet tenant needs while architecturally

Opus Corporation Project: Ramada Hotel Bloomington, MN

Designed for the business traveler, this Ramada Hotel features 209 guest rooms, including 15 suites. The articulated form containing the core, suites and entrance canopy are capped by gabled roofs clad in bronze standing seam metal. Contrasting buff and brown brick blend with bronze-tinted glass to create a warm, inviting fadesigned entrances provide each tenant with visibility and individual identity. Landscaping is an integral part of the design, creating a green buffer between surrounding buildings, enhancing tenant entries and unifying the building with the site. Located two blocks W of I-494, on Hwy. 55, it's very accessible to the metro area. Construction was completed in January, 1986. 612/936-4444.

cade. A swimming pool, exercise facility, 86-seat restaurant, lounge and 5100 s.f. of banquet and meeting space are among the hotel's amenities. Completion is scheduled for Autumn, 1988. For more information, please call (612) 936-4463.



Coming Soon announcements are placed by the firms listed. For rate information call AM at 612/338-6763





coming soon

Vedi Associates, Inc. Project: West Side Parking Facility St. Cloud, MN

This architectural concept was developed for the Housing and Redevelopment Authority of St. Cloud. The brick towers and ground level facade were designed to compliment the historical surrounding community. It accommodates 400 cars as well as serves as a bus shelter. It is constructed of precast

Vedi Associates, Inc. Project: 1015 South 6th Street Parking Facility (J.R.W. Properties, Inc.) Minneapolis, MN

Setter, Leach & Lindstrom, A/E, retained Vedi Associates, Inc. as parking consultants and project coordinators for this block long structure. It affords an underground truck dock for city trucks and courier

Vedi Associates, Inc. Project: City of Columbia Heights Parking Facility Columbia Heights, MN

This three-tier parking facility was recently completed to meet the needs of the Housing and Redevelopment Authority and the surrounding community. It can accommodate 310 cars and has a post-tensioned structural system. The architectural precast concrete facade with its

Vedi Associates, Inc. Project: Parking Facility North Memorial Medical Cntr. Robinsdale, MN

As parking ramp consultants and architects, Vedi Associates, Inc. has recently completed this six tier parking facility equipped with landing facilities for three helicopters, hanger, 17-bay ambulance garage, dispatchers room, crew quarters for ambulance and air concrete spandrel panels with a glass-backed elevator for security. For more information, please call 612/333-4670.

vans to serve the adjacent office building. Constructed of precast spandrel panels, it supports stair towers with glassbacked hydraulic elevators for security measures. For more information regarding parking, please call 612/333-4670.

warm red/brown aggregate delights clinic patients/visitors, and area merchants and shoppers. As part of a security measure, it supports a glass-side hydraulic elevator. For more information, please call 612/ 333-4670.

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news briefs

Continued from page 5

The addition will include studios, seminar rooms, conference and exhibition space and classrooms. "Although we don't know what the building will look like, we will strive for a timeless style that will avoid trends," says Gaunt. Design work will include renovation of the existing 1960 building, which was designed by Thorshov and Cerny.

Ellerbe was among five finalists interviewed by the State Designer Selection Board. The other finalists were Machado & Silvetti of Boston with Milo Thompson of Bentz/Thompson/Rietow of Minneapolis, Rafferty Rafferty Tollefson of St. Paul with Henning Larsen of Minneapolis, Leonard Parker Associates of Minneapolis, and Ritter Suppes Plautz Architects of Minneapolis with Mitchell/Giurgola Architects, New York. The open competition elicited 21 submissions.

Although 1987 legislation has allocated funding for planning and design, construction funding awaits action by the 1988 Minnesota Legislature.

A home for art

The University of Minnesota Art Museum has narrowed its list of candidates to design the new Arts Center to four finalists.

They are Cesar Pelli of Cesar Pelli Associates, New Haven, Connecticut; Frank Gehry of Frank O. Gehry Associates, Venice, California; Machado & Silvetti of Boston; and Arato Isozaki of Tokyo with Setter, Leach & Lindstrom of Minneapolis.

The new facility, to be constructed along the banks of the Mississippi near Coffman Memorial Union, will contain permanent exhibition galleries, seminar rooms, an auditorium and galleries for traveling exhibits. The museum galleries are now spread through Northrop Auditorium.

The finalists were selected from nearly 40 submittals. A short list of twelve teams compiled last fall included Minnesota firm Hammel Green and Abrahamson.

The final interview date and process is still undetermined. Although the architects will not be requested to present specific design proposals, they will be

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We invite your questions and inquiries. Paul H. Lutton, AIA President, CADD Midwest Corp. asked to discuss their approach to museum design.

Proposed private funding of the museum exempted the project from the usual process administered by the State Designer Selection Board. Construction date is undetermined.

Lauding public art

Six organizations and activities were honored by the Twin Cities mayors for their contributions to public art. The seventh annual Twin Cities Mayors' Public Art Awards program acknowledges art activities that enhance the general welfare of the community.

"Lost and Found Traditions: Native American Art 1965–1985" was selected to receive the Mayors' Award of Distinction. The exhibit, the largest contemporary Native American art exhibition ever assembled, contained almost 400 objects by more than 200 artists.

Other winners included the "Life Force" mural painted by Harrison neighborhood youths; "The Gospel at Colonus," a Guthrie Theater production featuring Twin Cities performers; and Crystal Quilt Performance, a part of the Whisper Minnesota Project in the IDS Crystal Court.

Also cited was COMPAS Community Art Fund, which provides support to art projects that encourage grassroots neighborhood and community participation; and Music in the Parks–Summer 1987, a concert series at the Lake Harriet Bandstand and the Nicollet Island Amphitheater in Minneapolis.

The awards program is sponsored by the Minneapolis Arts Commission, United Arts and the St. Paul Department of Planning and Economic Development. The awards were presented in February.

Ellerbe designers shoot for the stars

Karl Ermanis and Brad Vokes, both of Ellerbe Associates, received honorable mention in a national competition for their design of a memorial commemorating American astronauts who died in flight. Nearly 800 artists, sculptors, architects and designers from across the United States participated in the competition sponsored by the Astronauts Memorial Foundation in collaboration with Southern Bell, Bendix Field Engineering and A T & T. Eight design proposals were cited for excellence.

Ermanis' and Vokes' design proposal is a 32-foot-diameter bowl-shaped space made of polished metal and completely open to the sky. It is contained inside a square dish finished in white Neaparium tile and black marble.

The memorial, located in the middle of a three-acre pond, is reached by an arc-shaped walkway which leaves the



The astronauts memorial, designed by Karl Armanis and Brad Vokes of Ellerbe Associates

edge of an existing plaza at Kennedy Space Center. The walkway passes through the dish where visitors see the names of astronauts etched on the interior walls.

The first place entry, "Space Mirror," was designed by San Francisco architects Paul Holt, Marc Hinshaw, Peter Pfau and Wes Jones. The proposed memorial is a 50-foot wide by 40-foot high mirror-finished surface of granite. The names of fourteen fallen astronauts, grouped together by the final mission on which they flew, are cut through the granite. Behind each grouping of names are mirrors which direct sunlight through the names toward the sky.

Homes for the homeless

Minnesota architects and students participated in a design charette this fall to seek solutions for housing the homeless. The charette was part of a nationwide program of the American Institute of Architects called "Search for Shelter." The local charette was organized by a task force of the Minnesota Society of architects which seeks solutions to housing the homeless.

Students of the University of Minnesota School of Architecture and

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(612) 937-9430 Sales Office 15300 State Hwy. 5 Eden Prairie, Minn. 55344 Landscape Architecture and professional leaders formed five teams. Each team examined existing buildings in the Twin Cities and developed plans for converting them into adequate shelters for the homeless.

For instance, one team developed proposals for improving the Theresa Living Center, a transitional shelter for women in a former convent. The team's proposal called for expanding small dormitory rooms, turning unused space into lounges and social areas and enclosing an outdoor court with dense vegetation to increase privacy and security.

St. Paul architect Louis R. Lundgren, coordinator of the local task force, says



Theresa Living Center

that the purpose of the task force and design charette is to "coordinate the efforts of students and practitioners and make them aware of the opportunities to make significant contributions to our search for sheltering the homeless."

Local task force members include John Klockeman, Matthew Gilbertson, student representative, Dennis W. Grebner, Thomas Hoskens, John Cuningham, Sally Grans and Cherry Lundgren.

The northeast chapter of the Minnesota Society of Architects will sponsor a design charette the weekend of April 15, 16 and 17 in Duluth. Students and professionals will locate existing buildings and develop rehabilitation plans.

Coldwell forecasts the real estate future

The Twin Cities office market slackened in 1987 as vacancies rose slightly,



The Lakeland Medical Center in Athens, Texas, designed by Ellerbe Associates

according to representatives of Coldwell Banker Commercial Real Estate Services.

With the opening of Lincoln Centre and Plaza VII office towers, downtown Minneapolis saw its vacancy rate climb from 13.8 percent at the beginning of the year to 16.7 percent by year's end. "Plaza VII and Lincoln Centre are likely to be the last speculative buildings built in the city for some time," predicted Coldwell representatives at the annual Coldwell Banker Forecast Breakfast. "Proposed projects without a committed tenant simply will not receive construction financing."

The opening of the World Trade Center nearly doubled downtown St. Paul's vacancy rate, increasing it from 8.5 percent to 16.9 percent. Two pending projects in 1988, one for the St. Paul Company and the other for First Minnesota, could shove the vacancy rate even higher.

Retail should prove the bright spot in the Twin Cities real estate market in 1988. Of the 30 million square feet of available shopping space, only 5.6 percent of it stood vacant in 1987. Despite the strong retail market, the forecasters warned that the economic impact of proposed developments such as the LSGI project on Nicollet Mall and the Fashion Mall of America in Bloomington has yet to be fully assessed.

Health buildings awarded

Two projects designed by Ellerbe Associates were honored in the second annual Healthcare Facilities Design Awards competition.

The addition to the James Whitcomb Riley Hospital for Children at Indiana University in Indianapolis, featured in this issue of AM, was cited by the jury for creating an environment for children "that is playful and effective both inside and outside."

Receiving a citation was the Lakeland Medical Center in Athens, Texas, completed in 1986. The 115-bed hospital was noted for bringing daylight, water and vegetation into the building. Many of the patient rooms have patios that overlook the landscaped atrium lobby and dining areas.

The eight-man jury included Tom Van Housen, the AIA Upper Midwest regional representative and manager of project development for M. A. Mortensen Co., Minneapolis, Ted P. Pappas of Pappas Associates, Jacksonville, Florida and president of the AIA, and James Walters, vice president for design and construction for Humana.

In all, twenty projects were honored in the awards program sponsored by *Modern Healthcare* magazine and the Committee on Architecture for Health of the American Institute of Architects.

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previews Continued from page 7

The Art of Specialty Gardens: **Design and Planting** March 15-April 30 Saturdays, 10:00-2:30

Noted authors and experienced horticulturists will offer practical gardening tips in this series geared to beginning and experienced gardeners, designers, landscape architects and nurserymen. Site selection, color schemes, plant materials and planting techniques are among the topics to be discussed.

The lecture series runs Saturdays. March 5 through April 30 and will be held at various locations. Advance registration is required; lectures cost \$15 and include lunch. For more information, contact the Minnesota Landscape Arboretum at (612) 443-2460 or the Minnesota State Horticultural Society, (612) 624-7752.

Herman Miller Art Furniture Geometrie, Minneapolis March 1-May 20

Geometrie, a gallery of modern design and decorative arts, continues to showcase historical and contemporary furniture designs.

A retrospective of the Herman Miller Company, on the leading edge of furniture design over the last 50 years,



"Potato Chip" chair by Charles Earnes for Herman Miller

will include designs by Charles Eames, George Nelson, Gilbert Rhode and Isamu Noguchi. This exhibit will be on display through April 1.

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Burnsville, Minnesota (612) 894-5111 Lighting, furniture and accessories by local artists and designers will be featured in the next exhibit, opening on April 9.

For information on exhibit hours, call Geometrie at (612) 340-1635.

The Art and Meaning of Architectural Drawings Minneapolis College of Art and Design March 22—April 19

Architect Marc Partridge leads this workshop that investigates a variety of issues surrounding the art of architectural drawing. The workshop is intended for those who are interested in architecture and want to learn more about the process and the product.

The program includes both slide lectures and class discussion. Participants will learn about the evolution of architectural depiction, from the Renaissance to today, and explore the varied purposes that architectural drawing serves. The parallels between two-dimensional imaginings and the realities and constraints of three dimensions will be discussed. A panel of guest architects will present their varied styles and approaches and discuss drawing's role in their creative process.

The workshop costs \$85. For registration information, contact the extension program at the Minneapolis College of Art and Design, (612) 870-3065.

The Spirit of H.H. Richardson on the Midland Prairies University of Minnesota Art Museum March 13—May 22

The Spirit of H.H. Richardson on the Midland Prairies documents the highly personal style of architect Henry Hobson Richardson. Richardson's buildings are marked by rock-faced masonry, broad arches, towers, and carved foliate detailing. In the years following Richardson's death in 1886 the Richardsonian Romanesque style spread like wildfire throughout the midcontinental states.

The exhibition focuses on ten states— Minnesota and the Dakotas, Iowa, Illinois, Kansas, Nebraska, Missouri, Oklahoma and Texas. Photographs, original drawings and watercolors, as well as samples of building stones and actual building artifacts are displayed.

The exhibition is organized by the University of Minnesota Art Museum and curated by architectural historian Paul Clifford Larson. After it closes on May 22, the exhibit will tour to each of the prairie states whose buildings are featured in the exhibition.

A lecture series, "Medievalism in America: Thinking Like the Richardsonians," will be held in conjunction with the exhibit. On April 7, Cynthia Jara and Philip Larson will speak on



Wichita City Hall and County Courthouse, Proudfoot & Bird, 1890-92

"Richardsonian Architecture: Encountering Manifest Destiny." "Richardson on the Rails" will be the topic discussed April 14 by architectural historian Paul Clifford Larson and architectural critic Larry Millett. Architects Robert Mack and Foster Dunwiddie will discuss the restorations of the Minnehaha County Courthouse in South Dakota and St. Paul's James J. Hill House on April 21.

All lectures will be held at 7:30pm at the James J. Hill House in St. Paul. For more information on the exhibit or the lecture series, call (612) 624-9876.

Faces of Swedish Design Cranbrook Academy of Art Museum Bloomfield Hills, Michigan March 15–April 24

Organized by Svensk Form, the Swedish Society of Crafts and Design, this exhibition presents an overview of

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Moisture-Guard Systems 7711 Computer Avenue Minneapolis, Minnesota 55435 Swedish design in the 1980s. Featuring fabrics, furniture, glass, porcelain, light fixtures, and industrial products, the exhibit marks Sweden's renewed interest in handicrafts and quality in industrial design.

For more information, contact the Cranbrook Academy of Art Museum, (313) 645-3323.

Frank Lloyd Wright Symposium and Museum Opening Ann Arbor, Michigan March 24–27

The third annual Frank Lloyd Wright Symposium, sponsored by Domino's Pizza and the University of Michigan, will focus on Wright's interiors and decorative arts.

Brendan Gill, architecture critic of *The New Yorker* and author of a book about Frank Lloyd Wright entitled *Many Masks*, will give the keynote address. The symposium will feature other notable speakers including David Hanks, a Wright scholar; Dean Robert M. Beckley, the University of Michigan College of Architecture and Urban Design; and R. Craig Miller, the Metropolitan Museum of Art.

The symposium coincides with the opening of the Frank Lloyd Wright Museum located at Domino's Pizza World Headquarters.

For more information, contact the University of Michigan, (313) 764-5305.

Contemporary Crafts for the Home International Design Center, Minneapolis March 31–April 14

Crafts are taken from the pedestal and placed on the table at this juried exhibit, a collaboration between the Craft Council and International Design Center. More than 50 Minnesota artists will be featured in this show and sale of works made from clay, fiber, glass, metal, mixed media, paper and wood.

The exhibit opens March 31 with a reception held from 6:00pm-9:00pm at the International Design Center. For more information call (612) 333-7789.

The Turned Message Grand Avenue Gallery, St. Paul April 1–April 29 Woodturning, the art of shaping or turning wood on a lathe, is a practice that dates back to ancient times. In more recent years, the lathe has allowed woodworkers to explore form, function and aesthetics in wood.

This exhibit of fine woodturning includes the work of 25 national and international woodturners including Russ Hurt of Wisconsin and Liam O'Neill of Ireland.

For more information, contact the Grand Avenue Gallery, (612) 224-9716.

American Craft Expo St. Paul Civic Center April 8–10

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Floating back rocker by Robert Erickson

persons, including 53 Minnesota artists, will display and sell their new works at the American Craft Expo '88.

"You don't have to go to New York to find the best works that the craft industry has to offer," says Sam Grabarski, executive director of the Minnesota State Arts Board. "They're in our own back yard at the Expo."

The Expo's hours are Friday, April 8 from 11:00am-8:00pm; Saturday, April 9, 11:00am-8:00pm and Sunday, April 10, 11:00am-5:00pm. For more information call (612) 349-0576.

Poor Richard's Almanac Minneapolis College of Art and Design gallery April 11–May 6

"Poor Richard's Almanac," an installation by Seattle artist Richard Posner, explores the intentions and consequences of national monuments and commemorative public sculpture. The installation, a hybrid of painting, sculpture and architecture, records Posner's three-year pilgrimage across the United States to visit war memorials and battlefields. The installation consists of a slide-projection area, modeled on a National Park Service information station, drawings, photo-constructions and sculpture.

A free public reception will be held Friday, April 15 from 5:30-8:30 pm. For more information, call the MCAD gallery at (612) 870-3285.

American Art Deco Minnesota Museum of Art Landmark Center Galleries April 24–July 10

Organized by the Renwick Gallery of the National Museum of American Art at the Smithsonian Institution, "American Art Deco" brings together 200 exemplary Art Deco objects. The Art Deco style and its modernist stylizations, prevalent in the 1920s and '30s, transformed the design of everything from skyscrapers to automobiles.

This exhibit includes sculpture, furniture, textiles, glass, ceramics and silver as well as 24 architectural photographs. Sculpture by Paul Manship and furniture by Donald Deskey, two Minnesotans whose contributions to the American Art Deco movement were substantial, will be featured in this exhibit.

In conjunction with the exhibit, the Minnesota Museum of Art will present a musical performance, a lecture and film series, gallery tours and bus tours of local Art Deco architecture led by architect Gary Reetz on April 24 and May 1.

For more information on the exhibit or the related events, contact the Minnesota Museum of Art at (612) 292-4349.

Skyline 1990 Minneapolis Public Library May 3, 10, 17, 24

The skyline's the limit at the spring lecture series, Skyline 1990, sponsored by the Friends of the Minneapolis Public Library.

On May 3, John Burgee will discuss the Landmarks Towers, a development proposed for the Sheraton Ritz hotel block. Plans for the Convention Center Hotel and the J. C. Penney site will also be discussed.

BRW will present its design progress for the new Nicollet Mall on May 10. "Everything Old is New Again" is the topic for May 17 and the renovation of the Baker Center, the Foshay Tower, the Northstar Center and the U. S. Post Office will be presented.

The series finishes on May 24 with Arvid Elness Architects presenting the progress on Laurel Village, HGA on the Mann Theater renovation and KMR Architects' presentation of the new basketball arena. A review of the design proposals for Block E will also be included.

All lectures will be held in Heritage Hall at the Minneapolis Public Library beginning at noon and are free and open to the public. For more information, contact the Friends of the Minneapolis Public Library, (612) 372-6667.

Diamond Jubilee The 75th Anniversary of the University of Minnesota's School of Architecture and Landscape Architecture May 27, 28

The University of Minnesota School of Architecture and Landscape Architecture (SALA) turns 75 this year. A Diamond Jubilee celebration will mark this occasion with a variety of events including class mixers, class photographs and an audio-visual presentation of SALA graduates' work.

The celebration will culminate with a gala affair held at International Market Square in Minneapolis. The keynote address will be given by Brendan Gill, the architecture critic for *The New Yorker*.

SALA graduates should call Annie Vaughn at (612) 624-7866 for registration information. AM

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from these pages

Continued from page 11

Center, have struggled with the questions raised by the LSGI proposal. Their concerns center on the development's impact on the commercial fabric of downtown as a whole and the feasibility of competing with rivals such as the Bloomington megamall.

Purcell perceived that any proposal to revitalize the older marketplace would have to offer a new and exciting experience. "For a large majority of people buying is itself a form of entertainment," he noted. Wintergreen would have to be both dramatic and big, effectively integrate multiple city blocks, and provide more than just commercial space similar to the suburban malls.

To accomplish these goals, Wintergreen offered a number of solutions to some basic difficulties with downtown shopping which are even yet not fully resolved. A series of plant-filled domed courtyards spanning the streets would have interconnected downtown buildings. Parking was to be incorporated underneath a new "civic level" which started at the fourth floor. To elevate pedestrians above the dangers of vehicular traffic and insulate them from bad weather, the Purcell design emphasized that "transparent sky bridges" carrying shoppers from building to building high above street level would generate whole new areas of valuable retail space. His sense of prophecy was good, as the present success of the skyway system and the surrounding arcade shops amply attests, though the connections are made only one floor above grade. Parking remains an unresolved problem.

For all the effort that Purcell put into presenting his idea, though, Wintergreen was not meant as a specific solution. He expanded on the concept only to get people thinking about an architectural solution to the pressing problem of downtown retail.

He also pointed out that his own bold approach was firmly anchored in some famous, elegantly functional historic precedents. The fundamental problems of keeping the downtown Minneapolis shopping district commercially competitive and physically comfortable were first addressed, Purcell said, in the solutions of the Crystal Palace built by Thomas Paxton for a London exposition in 1851. The idea of the exposition was essentially to sell English goods to the world. By housing this function in glass and metal vaulted over open thoroughfares of retail display, greenhouse architect Paxton married architecture and civic interest in the name of the consumer.

The same consummation is being contemplated by LSGI and the city of Minneapolis on a far vaster scale.

Since the days of the Crystal Palace, merchandising, along with commercial architecture, has come a long way. When Purcell was a child, window displays on the street led into narrow, standingroom aisles. It was a long way from the current theory of "the impulse to buy" created at the sidewalk. Gone are those long glass-topped counters, replaced today by the department store boutique strategy, where the merchandise and cash register, if not always salesperson, are conveniently at hand. Commercial architecture originated these dramatic changes, in part, by opening up the barriers of walls and doorways to the flow of customer traffic in the concourses of suburban malls.

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However, it is also part of the problem itself. The commercial decline of the south end of the Mall was in some measure due to the creation of City Center, an introspective shopping mall that siphoned off shoppers from businesses down the street which lacked either convenient parking or weatherprotected access through the skyways. One of the points strenuously made by LSGI is the need for climate control for the whole project, hence the notion of "doming" or otherwise "creatively crossing" the street.

Covering the street brings into conflict pedestrian and vehicular traffic, a conflict Wintergreen and LSGI address in different ways. The original LSGI proposal called for ramping vehicles below grade and thereby making possible some form of enclosure at street level. City interests question whether the Mall would remain a public rightof-way if such a private enclosure were allowed. In the Wintergreen design, people and machines are separated by elevating the pedestrian above the street (something the skyways now do, perhaps too well).

Another disagreement between our prophet and the LSGI project involves the use of existing buildings. Purcell suggested that existing buildings could well be integrated into the Wintergreen center, in order to retain architectural character. The original LSGI designs called for wholesale demolition of the site. While many smaller buildings might be useless and be brought down without great loss to the city, the LSGI site includes the historically important Young-Quinlan building, an elegant retail structure recently refurbished by the owner.

While the suggestion is made by LSGI spokesmen that the facade of the Young-Quinlan building could be retained in the final design, this proposition does not recognize the concerns of those interested in preserving the integrity of the building as a whole, specifically the finely detailed interior.

Efforts to preserve the Young-Quinlan building might recall the experience of Crystal Palace architect Paxton, whose implacable opponent to the design, an irascible Colonel Sibthrop, persuaded Parliament to legislate preservation of some ancient elm trees which occupied the center of the only available site. In what may be the penultimate relationship of building to site, Paxton cast his glass and metal over and around the protected arboretum, a solution which greatly magnified the distinction and effectiveness of the design.

In the end, whether built or unbuilt, both Wintergreen and the LSGI proposal reflect the needs and purposes of people. To William Gray Purcell, it was paramount to acknowledge that these considerations must reach beyond the interests of the present; architecture must be bold enough to question the future. Only time allows the fulfillment of prophecy.

Mark Hammons is an architectural historian who compiled a guide to the papers of William Gray Purcell. AM



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Project: James Whitcomb Riley Hospital for Children Location: Indianapolis, Indiana Client: Indiana University Architects: Ellerbe Associates. Inc

Associate architects: Boyd-Sobieray Assoc., Indianapolis Principal-in-charge: John C. Gaunt, AIA Project manager: John C. Gaunt, AIÁ

Project architect: Brooks Swanson Project designer: Richard D. Olson, AIA

Structural engineers: Ellerbe Assoc. and Boyd-Sobieray Assoc. Mechanical engineers: Ellerbe Assoc. and Boyd-Sobieray Assoc. Electrical engineers: Ellerbe Assoc. and Boyd-Sobieray Assoc. Contractor: Kettelhut Construction Interior design: Kasler Assoc Landscape architect: Ellerbe As-SOC.

Project: Replacement Medical Center

Location: Minneapolis Client: Veterans Administration Architects: MVA Group, a joint venture of Hammel Green & Abrahamson, Smiley Glotter Asso-ciates, Henningson Durham & Richardson Principals-in-charge: George T. Riches, AIA, HGA; Joel Glotter, AIA, Smiley Glotter; Larry Haw-thorne, AIA, HDR Project manager: Jerrald B. Olson, AIA Project architect: Don Andrews

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Proiect team leaders: Ramv Gill. Rick Hintz, Bill Palmer, Frank Fauble

Structural engineers: MVA Group Mechanical engineers: MVA Groun

Electrical engineers: MVA Group Contractor: M.A. Mortenson Co. Interior design: MVA Group Landscape architect: MVA Group Acoustical consultant: Copley Associates Lighting consultant: MVA Group Materials handling consultant: Lerch-Bates Assoc Cost consultant: C.P.M.I.

Project: Courage Center

Location: Golden Valley Client: Courage Center Architects: Rafferty Rafferty Tollefson Principal-in-charge: George Rafferty, FAIA Gatzlaff, Dick Rafferty, AIA Project architect: Craig Rafferty, AIA; Frank Mikutowski, AIA; Craig D. Roney D. Honey Project designer: George Rafferty, FAIA, Craig Rafferty, AIA Project team: George Rafferty, FAIA, Craig Rafferty, AIA, Frank Mikutowski, AIA, Angela DeLong Gatzlaff Structural engineers: Bakke Koppe Ballou & McFarlin Mechanical engineers: Lundquist Wilmar Shultz & Martin Electrical engineers: Lundquist Wilmar Shultz & Martin Contractor: James Steele Con-struction, Madsen Construction Interior design: Rafferty Rafferty Tollefson, Dayton's Commerical Interiors Lighting consultant: Lundquist Wilmar Shultz & Martin Specialized sound consultant: AVC Sound

Project: Ronald McDonald House, Phase I, II & III

Location: Minneapolis Client: Children's Oncology Services Upper Midwest, Inc. Architects: Close Associates, Inc. Principal-in-charge: Gar Hargens, AIA Project manager and designer: Gar Hargens, AIA, Phase I & II, Greg Oltveldt, AIA, Phase III Project team: Fred Kirschman Structural engineers: Meyer, Borgman & Johnson Mechanical engineers: Horty, Elving & Assoc Electrical engineers: Horty, Elving & Assoc. Contractor: R. P. Vogel Co., Phase I.; M. A. Mortenson Co., Phases II & III Interior design: Dayton's Commer-ical Interiors, Phases I and II; Close Associates, Phase III Landscape architect: Robert Close

Correction

In the credits for The Conservatory on Nicollet in the Jan/Feb issue of AM, Steve Rengel, AIA, should have been listed as project architect/designer, Arthur B. Weeks, AIA, as project architect implementation, and Paul Mittendorff, AIA as associate project architect.

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The demise of the county tuberculosis sanatorium in Wabasha was a quiet affair, for the building was too modern to have gathered the sympathies of preservationists. But it was an extraordinary structure for 1916, precisely because of its dramatic yet simple expression of Modernist architectural values. Less than 25 feet deep, it gathered the sun with a sweeping 216-foot glass curtain wall.

The plans for the sanatorium were drawn up by a specially appointed commission consisting of a physician, a cleric and a builder. They probably had little notion of the architectural drama they were creating, for their motivating concern was functional. The broad glass exposure served prevailing wisdom that sunshine was the best healer of chronic illness, particulary tuberculosis. Placing all of the rooms on a single axis permitted isolation of the more serious patients both from the staff and from their less ill neighbors.

In 1940 the WPA landscaped the expansive grounds in front of the building. Continuous foundation plantings obscured the concrete of the foundation and made the structure appear even more like an endless bank of glazed openings. Is it too fanciful to see in the design a functionalized version of the long open Neo-Classical colonnades that had recently invaded the nation's parks and memorial gardens?

Paul Clifford Larson

Buena Vista Sanatorium, Wabasha, Minnesota, 1916-c. 1950