

**HISTORICAL RESOURCES  
INVENTORY AND EVALUATION REPORT  
Fairview Developmental Center  
Costa Mesa, California**

**PRC § 5024 AND § 5024.5 Compliance Report**



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## Executive Summary

JRP Historical Consulting, LLC (JRP), with Denise Bradley Cultural Landscapes, prepared this Historical Resources Inventory and Evaluation Report (HRIER) under direction of the California Department of General Services (DGS), and in cooperation with California Department of Developmental Services (DDS). This HRIER will assist DDS in its compliance with California Public Resources Code (PRC) Sections 5024 and 5024.5; the California Environmental Quality Act (CEQA); the National Environmental Policy Act (NEPA); and Section 106 of the National Historic Preservation Act (NHPA), as they pertain to management of state-owned historic properties on the Fairview Developmental Center campus, Costa Mesa, Orange County. This report will also aid DGS and DDS in future consultations with the State Historic Preservation Officer (SHPO) in the California Office of Historic Preservation (OHP) regarding projects that may have potential to affect historic properties on the Fairview Developmental Center campus.

Fairview Developmental Center (FDC) – originally known as the Fairview State Hospital – opened in 1959 to provide treatment and care for individuals with developmental disabilities. Located on approximately 110 acres, the complex consists of 39 individual buildings and structures that are considered to be of historic age, i.e., built in 1974 or earlier (see **Maps 1–3 in Appendix A** and **Table 1** below). Eight of these buildings, staff and transitional housing units located along Mark Lane, are included within a lease from the state to a private development company and are not currently under state management. However, they are included in this study as they are part of the historic development of the FDC complex. The 39 total resources, the “survey population,” were evaluated to determine whether they meet the criteria for listing in the National Register of Historic Places (NRHP or National Register) or California Register of Historical Resources (CRHR or California Register), either individually or as a contributor to an eligible historic district. JRP also considered whether FDC or any individual buildings meet the criteria for designation as a California Historical Landmark. Additionally, Landscape Historian Denise Bradley provided analysis to determine whether the FDC campus grounds constitute an eligible historic landscape, or whether any grounds elements contribute to an eligible historic district. The survey population resources, as well as the campus as a whole, were recorded and evaluated on a California Department of Parks and Recreation (DPR) 523 form set, consisting of a District Record and a series of Primary Records and Building/Structure/Object Records (**Appendix B**).

This study concludes that the “Fairview State Hospital Historic District,” which reflects the facility’s original name and consists of 36 contributing buildings and structures, as well as numerous landscape features, is eligible for inclusion in both the National Register and California Register under NRHP/CRHR Criteria A/1 and C/3.<sup>1</sup> The Fairview State Hospital Historic District is historically significant and is a distinguishable entity whose components lack individual distinction, but which comprise an important concentration and continuity of buildings, structures, objects, and landscape features that are united historically by plan,

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<sup>1</sup> National Park Service guidance calls for identifying a property by “the name that best reflects the property’s historic importance ... during the period of significance” (US Department of the Interior, NPS, *National Register Bulletin 16A*, 8). Although the facility is currently named Fairview Developmental Center, “Fairview State Hospital” was the name used throughout the hospital’s historic period. Therefore, JRP selected it as the name for designating the historic district.

purpose, and physical development. The historic district and its contributors retain sufficient historic integrity to convey their significance to the period of significance. The period of significance begins in 1953 with the start of construction and ends in 1969 with the beginning of the era of deinstitutionalization. The district has significance at the local level for the important role it played in the evolution of public institutional mental health care (NRHP/CRHR Criteria A/1) and at the state level as a representative example of a post-war state hospital campus (NRHP/CRHR Criteria C/3). The significance is demonstrated by the presence of buildings within the historic district that clearly convey their function in caring for people with developmental disabilities, and for their International-style architectural design. The historic district boundary encompasses all of the current FDC campus property, as well as the leased staff and transitional housing area, with the exception of the main entrance from Harbor Boulevard, the Shannon Mountain Recreational Area at the southeast corner of the campus, and the swimming pool complex. Character-defining features include the overall layout and plan of the site; the spatial and visual relationship between the contributing buildings, structures, and landscape elements; and those specific character-defining features of the 36 individual contributing elements as well as grounds and landscape features. **Table 2** lists the contributing buildings and they are graphically depicted on **Map 2, Appendix A**. Three survey population resources – two school annex buildings and a swimming pool complex – do not contribute to the historic district because they were built after the end of the period of significance. These are identified in **Table 3**. Landscape features within the historic district boundaries are listed in **Table 4** and distinguished as either contributing or non-contributing components of the district. The non-contributing landscape features within the historic district boundary are identified on **Map 3, Appendix A**. None of the survey population resources are individually eligible for the National Register or California Register.

This study also concludes that the Fairview State Hospital Historic District does not meet the eligibility requirements to be designated as a California Historical Landmark, nor do any individual resources within the FDC complex.

The following report and attendant DPR 523 forms provide an in-depth discussion of the history of Fairview Developmental Center; detailed descriptions of historic-period (survey population) buildings, structures, and landscape features on the campus; a historic district analysis; and individual evaluations for the survey population resources.

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# 1 Introduction

JRP Historical Consulting, LLC (JRP), with Denise Bradley Cultural Landscapes, prepared this Historical Resources Inventory and Evaluation Report (HRIER) for Fairview Developmental Center to assist the California Department of Developmental Services (DDS) to comply with Public Resources Code (PRC) § 5024 and 5024.5, the California Environmental Quality Act (CEQA), the National Environmental Policy Act (NEPA), and Section 106 of the National Historic Preservation Act (NHPA). With this study, DDS will proactively comply with PRC § 5024 and 5024.5 in advance of project developments, and will be able to consult more expeditiously with the California State Historic Preservation Officer (SHPO) within the Office of Historic Preservation (OHP) in regards to the historic architectural resources on the Fairview Developmental Center campus.

The purpose of this HRIER is to evaluate whether any of the historic-period (i.e. built in or before 1974) buildings, structures, objects, or landscape features located on the Fairview Developmental Center campus are eligible for listing in the National Register of Historic Places (NRHP or National Register) or the California Register of Historical Resources (CRHR or California Register), or if any of these built environment features contribute to one or more eligible historic districts. Presently located on approximately 110 acres in Orange County, Fairview Developmental Center (FDC) opened in 1959 to serve individuals with developmental disabilities and consists of 39 historic-period buildings and structures with construction dates ranging from 1953 through 1974. Eight of the resources, Staff Housing Units 3-6 and Transitional Housing Units 47-50 on Mark Lane, are currently leased by the state to a private company and are not under state management.<sup>2</sup> However, they are included in this study as they are part of the historic development of the FDC complex. The 39 total resources comprise this study's "survey population" and are evaluated herein for National Register and California Register eligibility. JRP also considered whether the complex or any individual buildings within the complex meet the criteria for designation as a California Historical Landmark.

In addition to this Introduction, this HRIER includes the following chapters: Research and Survey Methodology (Chapter 2); Historical Overview (Chapter 3); Description of Resources (Chapter 4); Cultural Landscape Features, prepared by Denise Bradley (Chapter 5); Resource Evaluations (Chapter 6); Preparer's Qualifications (Chapter 7); and References (Chapter 8). **Appendix A** includes a Project Vicinity and Location Map (**Map 1**), Study Area Maps showing the property and historic district boundaries with contributing and non-contributing buildings graphically identified (**Maps 2, 2A, 2B, and 2C**), and a map of non-contributing grounds and landscape features within the historic district boundaries (**Map 3**). Attached in **Appendix B** is a set of Department of Parks and Recreation (DPR) 523 forms that evaluate the 39 survey population resources, shown in **Table 1**, below.

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<sup>2</sup> Provisions of the lease relating to the Mark Lane housing property are contained in Amendment No. 13, December 14, 2017. The original lease between DDS and Fairview Management Company covered the Harbor Village property and was dated May 7, 1981. DDS provided JRP with copies of the lease documents.

**Table 1: List of Surveyed Properties (“Survey Population”) and Findings for this Report  
(sorted alphabetically by DPR 523 Form Name)**

Resource Name	Year Built	DPR 523 Form Name	OHP Status Code*
Fairview State Hospital Historic District	1953-1964	Fairview State Hospital Historic District	3D
Hyman Tucker Activities Center and Lava Lounge	ca. 1961	Activities Center	3D
Anthony N. Toto Auditorium	1964	Auditorium	3D
Auxiliary Electric Switchhouse	ca. 1954	Auxiliary Electric Switchhouse	3D
Central Powerplant and Laundry Building	ca. 1955	Central Powerplant & Laundry Building	3D
Covered Walkways	ca. 1955	Covered Walkways	3D
FDC Campus Grounds	1953-64	FDC Campus Grounds	3D
Alvan H. Goodell Education Center	ca. 1959	Goodell School	3D
Grounds Shop	ca. 1957	Grounds Shop	3D
Main Kitchen and Shipping / Receiving Warehouse	ca. 1954	Main Kitchen and Shipping / Receiving Warehouse	3D
Plant Operations Warehouse and Shops	ca. 1956	Plant Operations Complex	3D
Auto Shop	ca. 1956	Plant Operations Complex	3D
Vehicle Storage Shed	ca. 1956	Plant Operations Complex	3D
Glass Shop	1958	Plant Operations Complex	3D
Mason Shop	ca. 1961	Plant Operations Complex	3D
Storage Shed	ca. 1961	Plant Operations Complex	3D
Receiving and Treatment (R&T) and Administration Building	ca. 1958	R&T and Administration Building	3D
Residences 11, 12, 13, 14, 15, and 16 (Buildings D, E, F)	ca. 1958	Residences 11 through 16	3D
Residences 17, 18, 19, and 20 (Building B)	ca. 1954	Residences 17 through 20	3D
Residences 21, 22, 23, and 24 (Building K)	ca. 1958	Residences 21-24 and 41-44	3D
Residences 41, 42, 43, and 44 (Building J)	ca. 1958	Residences 21-24 and 41-44	3D
Residence 25 (Building L)	ca. 1958	Residences 25 and 40	3D
Residence 40 (Building M)	ca. 1958	Residences 25 and 40	3D
Residence 26 and 27 (Building Q)	ca. 1963	Residences 26-35	3D
Residences 28 and 29 (Building U)	ca. 1959	Residences 26-35	3D
Residences 30 and 31 (Building T)	ca. 1960	Residences 26-35	3D
Residences 32 and 33 (Building P)	ca. 1962	Residences 26-35	3D
Residences 34 and 35 (Building O)	ca. 1963	Residences 26-35	3D
Residences 36, 37, 38, and 39 (Buildings S1 and S)	ca. 1964	Residences 36-39	3D
School Annex (North Shelly Circle)	ca. 1971	School Annexes	6Z
School Annex (Pearl Way)	ca. 1974	School Annexes	6Z

Resource Name	Year Built	DPR 523 Form Name	OHP Status Code*
Shade Structures	ca. 1955-1964	Shade Structures	3D
Staff Housing Unit 3	ca. 1958	Staff Housing	3D
Staff Housing Unit 4	ca. 1958	Staff Housing	3D
Staff Housing Unit 5	ca. 1958	Staff Housing	3D
Staff Housing Unit 6	ca. 1958	Staff Housing	3D
Swimming Pool	1971	Swimming Pool	6Z
Transitional Housing Units #47 and #48	ca. 1958	Transitional Housing	3D
Transitional Housing Units #49 and #50	ca. 1958	Transitional Housing	3D
Pump Station	ca. 1953	Water Treatment Plant	3D
Well	ca. 1959	Water Treatment Plant	3D

\* 3D – Appears eligible for NRHP and CRHR as a contributor to an eligible district through survey evaluation.

\* 6Z – Appears ineligible for NRHP or CRHR through survey evaluation.

## 2 Research and Survey Methodology

JRP conducted a survey and evaluation of Fairview Developmental Center to assist DDS in obtaining OHP concurrence on PRC 5024 and 5024.5 compliance. JRP surveyed all state-owned buildings, structures, and objects constructed in or before 1974 within the historic property boundary of the Fairview Developmental Center. The residential area along Mark Lane that includes eight staff and transitional housing units is currently leased to a private development and management company and is not under direct state control. However, it was included within this study as part of the historic hospital campus. The 39 historic-era resources built in or before 1974 became the survey population for this study. JRP evaluated all the surveyed resources using both National Register and California Register criteria. Denise Bradley Cultural Landscapes surveyed and evaluated the landscape grounds and features across the entire facility. The study area for this project included the legal boundary of the developmental center property and is shown in **Map 2** (located in **Appendix A**).

DGS and DDS provided an inventory list of buildings and structures located on Fairview Developmental Center (dated June 2017) to JRP. This real property listing, which included the staff and transitional housing units, formed the basis for creating the list of survey population resources for this project. Some additional resources not included on the center's inventory list – particularly landscape features – were identified during the course of fieldwork and added to the survey. While the inventory list provides dates of construction for most of the survey population resources, occasionally JRP's research concluded that the provided date did not reflect the year that the building or structure was actually completed. In those cases, the current study reports the built date (sometimes approximate) as determined through research (see **Tables 1-4**).

JRP reviewed current and historic topographic and property maps, historic aerial photographs, and other documents including the results of previous studies of historic properties discussed in **Section 2.1**. JRP conducted general historic and site-specific research in primary and secondary source materials for Fairview Developmental Center at the DGS "Plans Vault" in West Sacramento; California State Library and California State Archives in Sacramento; the Costa Mesa Historical Society library and archives; Porterville Developmental Center Archives; JRP's in-house library, and relevant online resources including newspaper and aerial photograph databases. JRP also reviewed the California Historical Resources Information System (CHRIS), California Historical Landmarks and Point of Historical Interest publications and updates, and the National Register, California Register, and local register listings. JRP shared this information with Denise Bradley to inform the cultural landscape evaluation.

JRP and Denise Bradley conducted fieldwork during the week of May 28, 2019, to record the survey population built environment properties and landscape features, respectively. Each resource was inspected, photographed, and documented on California Department of Parks and Recreation (DPR) 523 forms. JRP prepared DPR 523 forms according to the California Office of Historic Preservation's "Instructions for Recording Historic Resources" (March 1995). Each form includes digital photographs, sketch maps, building descriptions, and an eligibility evaluation and assessment of historic integrity. Information regarding the character-defining features of resources is presented on forms of resources that are eligible for listing in the National and California registers. As part of the inventory process, JRP



grouped some buildings, structures, and objects together on forms to facilitate evaluation, per standard practice. The groupings were based on similar design or use pattern and/or functional use in a specific geographic area of Fairview Developmental Center. Please refer to **Appendix B** for DPR 523 forms.

## **2.1 Previous Surveys**

In 1998, Myra L. Frank & Associates, Inc., prepared a preliminary evaluation of historic-era buildings at the Fairview Developmental Center. The brief study concluded that none of the buildings located at the center appeared to be eligible for listing in the California Register of Historical Resources or National Register of Historic Places. Many of the buildings were less than 50 years old at the time of survey, and the report recommended that “after additional passage of time, say another 20 years, this group of buildings [referring to a cluster on the northern portion of FDC] may be considered significant if it has retained integrity.”<sup>3</sup> The report did not include preparation of DPR 523 forms for any of the buildings, nor did it appear to receive SHPO concurrence.

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<sup>3</sup> Myra L. Frank & Associates, “Preliminary Historical Resource Evaluation, Fairview Developmental Center, Costa Mesa, California,” prepared for Department of Developmental Services and Vanir Construction Management, June 9, 1998.

### 3 Historical Overview

#### 3.1 General Context: Introduction

Today, Fairview Developmental Center (FDC) is one of three state-operated facilities providing housing and around-the-clock clinical services for individuals with intellectual and developmental disabilities. The state is in the process of closing its remaining developmental centers and transitioning clients to community care programs. As of July 2019, FDC had 35 clients in residence, which includes individuals requiring general acute care, nursing care, and intermediate care for individuals with intellectual disabilities. The facility is expected to transfer all remaining clients by 2021. Porterville Developmental Center in Tulare County is likewise in the process of closing its General Treatment Program and its residential population, as of this writing, is now reduced to 235 clients. Porterville's Secure Treatment Program will continue to operate. Sonoma Developmental Center, the state's original developmental center, transitioned the last of its residential clients in the summer of 2019 and the property was transferred to the Department of General Services in July 2019. The Canyon Springs Community Center in Riverside County is a smaller state-leased facility that serves approximately 50 residential clients, but it lacks the full range of medical services that the developmental centers were established to provide.<sup>4</sup>

The Fairview center opened in 1959 as Fairview State Hospital, the third new state hospital facility to be established in the post-World War II era. The history of FDC thus parallels a larger story about the changing understanding of developmental disability in modern America. Immediately after the war, public institutions for mental health grew rapidly, with California adding new hospitals and expanding capacity in existing facilities. A medical model of care replaced an earlier custodial focus, and the facility staff increasingly benefited from advanced training. The passage of the Lanterman Mental Retardation Services Act of 1969 began a movement in the state towards deinstitutionalization in favor of community care. In California, the resident population in developmental centers peaked in 1968 at a high of 13,400. Fairview accounted for somewhat less than one-fifth of that total, with 2,659 residential clients served by 1,557 employees. Today, a network of 21 private non-profit Regional Centers provide an array of services to 347,506 consumers, including many with complex medical needs. The state's current focus is on providing services in the least restrictive setting possible. The developmental centers have thus experienced a sharp decline in population and will soon cease to function in their historic role.<sup>5</sup>

The following section presents a historical context to inform the evaluation of FDC's historical significance. The context briefly covers California's early history of treating individuals with developmental disabilities, and then focuses on the post-war developments that influenced the establishment and operation of FDC.

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<sup>4</sup> California Department of Developmental Services, "Population of Developmental Centers and State-Operated Community Facilities," July 31 2019, <http://www.dds.ca.gov/DevCtrs/AllFacPop.cfm>, accessed September 2019.

<sup>5</sup> Doug Brown, "Fairview Celebrates 25 Years of Change," *Los Angeles Times* (May 27, 1984): 1, 6; "Fairview State Hospital: The First Ten Years" (1969), 1, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California.

This history does not attempt to be exhaustive or all-inclusive, but reviews the broad trends in the medical and cultural understanding of disability.

### 3.1.1 Early History (1850–1945)

The first American institutions to provide specialized care for individuals with developmental disabilities appeared around the midpoint of the nineteenth century. Beginning in 1847, the states of the Northeast and the Upper Midwest established small, experimental schools to provide educational and vocational training to young students who were expected to then return to their communities and take up productive roles. The operators of these early schools were generally optimists who believed that mental deficiency was a largely correctable condition. In 1885, California became the first of the western states to operate a public facility for individuals with developmental disabilities when it funded the school that later evolved into the Sonoma Developmental Center.<sup>6</sup>

By the end of the nineteenth century, most of the original small schools had grown to become large asylums that increasingly provided life-long custodial care. Symbolizing the change, the second generation of leaders was composed almost universally of physicians who were tasked with managing the smooth functioning of the institutions, rather than educators whose responsibilities included developing innovative teaching methods. Physically, the expanding programs required both more land and larger buildings. The so-called Kirkbride model, named after Dr. Thomas Kirkbride of Pennsylvania, became the dominant institution form. The central Kirkbride building was a large, castle-like structure that centralized all hospital services and combined multiple floors of gender-segregated wards where patients lived and received treatment. The building was set within a rural landscape of agricultural fields and scenic walkways that was intended to offer both economic sustenance for the hospital and therapy for its inhabitants. The Sonoma home followed this model and a portion of its main Kirkbride building still survives.<sup>7</sup>

As custodial care replaced the earlier educational focus, most states combined the administration of facilities devoted to developmental disability with their programs for treating mental illness. At the time, the conditions were conceived of as interrelated and roughly comparable in their medical and social origins and affects. In 1903, the California Legislature centralized control over all of the state asylums under a newly-established Commission of Lunacy. This placed the Sonoma facility alongside the state mental hospitals of Stockton, Napa, Agnews, Patton, and Mendocino. In 1921, the state established the Department of Institutions, and gave it responsibility for all of California's prisons, reform schools, and

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<sup>6</sup> James W. Trent, *Inventing the Feeble Mind: A History of Mental Retardation in the United States* (Berkeley: University of California Press, 1994), 46-59; Philip Ferguson, "The Development of Systems of Supports: Intellectual Disability in Middle Modern Times (1800 to 1899)," in Michael Wehmeyer, ed., *The Story of Intellectual Disability: An Evolution of Meaning, Understanding, and Perception* (Baltimore: Paul H. Brookes Publishing Co., 2013), 85-90. The history of the Sonoma facility is addressed in JRP Historical Consulting and Denise Bradley, "Historical Resources Inventory and Evaluation Report, Sonoma Developmental Center," February 2018.

<sup>7</sup> Trent, *Inventing the Feeble Mind*, 79-84; Gerald Grob, *The Mad Among Us: A History of the Care of America's Mentally Ill* (New York: The Free Press, 1994), 71-74; Carle Yanni, *The Architecture of Madness: Insane Asylums in the United States* (Minneapolis: University of Minnesota Press, 2007), 51, 58-62, 123.

state hospitals. A second state facility for the care of people with developmental disabilities, Pacific Colony, opened in Southern California in the same year. Pacific Colony briefly closed in 1923 and then reopened in 1927 in a new location in the Pomona Valley.<sup>8</sup>

Economy of operations was a chief focus for the early twentieth-century institutions. States expected the hospitals to aim for self-sufficiency, even if few ever closely approached that goal. Able-bodied residents engaged in “occupational therapy” that consisted of agricultural or industrial labor in the extensive fields, orchards, kitchens, and laundries that kept the institutions functioning. At facilities for individuals with developmental disabilities, higher-functioning young adults provided care for children and adults with greater needs. Medical treatment consisted principally of hydrotherapy, used for calming agitated patients. Architecturally, the emphasis on economy produced a gradual transition away from the Kirkbride model to the Cottage Plan, which dispersed patients among numerous small buildings based upon their demographics and medical needs. The small cottages were cheaper to construct and could be added as needed without having to worry about an overall architectural model. The cottages were given a home-like appearance that were intended to be more welcoming than the massive, imposing Kirkbride edifices.<sup>9</sup>

Beginning in the late 1910s, hospital superintendents, and particularly Dr. Fred Butler at Sonoma, embraced the pseudo-science of eugenics, a field then widely popular but now thoroughly discredited. As a set of beliefs, eugenics held that heredity by itself could explain most instances of mental illness and deficiency, along with much of an individual’s propensity to crime, alcoholism, and sexual immorality. To treat these social problems, eugenicists argued for removing “deficient” individuals from the larger breeding pool. Sonoma State Home and Pacific Colony collectively performed sterilization operations on more than 7,000 patients in an attempt to realize this objective. State political and judicial officials encouraged the new role and directed a large number of juvenile offenders to the institution, even when the young men and women showed no clear evidence of developmental disabilities.<sup>10</sup>

The resulting rapid growth of the 1920s and 1930s strained the system of care for people with developmental disabilities. Nearly every facility nationwide operated in excess of its official capacity, and waiting lists ran into the hundreds or thousands. Overcrowding was at the root of a host of other problems, including unsanitary conditions, a lack of privacy, inadequate diets, and insufficient staffing levels. Through the Great Depression, states held steady their levels of spending, or even cut back, as caseloads climbed because families could no longer support the disabled at home. Educational efforts faltered, medical care became regimented, and safety hazards loomed. Parents that could afford to send their children to private facilities did so, and the public hospitals developed associations with poverty, shame, and neglect.<sup>11</sup>

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<sup>8</sup> Department of Institutions, *Second Biennial Report of the Department of Institutions* (1924), 9.

<sup>9</sup> Grob, *The Mad Among Us*, 107-109; Yanni, *The Architecture of Madness*, 80-83.

<sup>10</sup> Trent, *Inventing the Feeble Mind*, 140-146; Alex Wellerstein “State of Eugenics: Institutions and Practices of Compulsory Sterilization in California,” in Sheila Jasanoff, ed., *Reframing Rights: Bioconstitutionalism in the Genetic Age* (Cambridge: MIT Press, 2011), 30-51.

<sup>11</sup> J. David Smith, Steven Noll, and Michael L. Wehmeyer, “Isolation, Enlargement, and Economization: Intellectual Disability in Late Modern Times (1930 CE to 1950CE),” in Wehmeyer, ed. *The Story of Intellectual Disability*, 163.

World War II marked a turning point for the institutions. The draft initially drained hospitals of their physicians and hired attendants, but ultimately the military ended up training large numbers of psychiatrists, effectively doubling the supply of mental health professionals that would be available after the war. Non-combatant conscientious objectors (COs) helped to fill the manpower shortage at the nation's developmental institutions during the war, and these men became some of the most forceful critics of the deteriorated status quo. By the end of the war, a collective of COs published a monthly journal, *Psychiatric Aide*, and in 1946, they organized the National Mental Health Foundation, a layperson's organization that advocated for improved care for individuals with mental illness or disability. Journalists followed up on the critique launched by the COs and published several exposés in the immediate post-war years that drew public attention to the shortcomings of the nation's asylums.<sup>12</sup>

### 3.1.2 Post-War Expansion (1945-1962)

World War II and rapid demobilization after the end of hostilities in 1945 altered virtually every aspect of California society. Military bases and war-industry jobs drew massive numbers of migrants to the state, and whole new communities were created to accommodate them and returning service members. The state hospitals, already over capacity, accepted more patients, including large numbers of veterans. The material needs of the war prevented any significant construction at the state hospitals for the duration of the fighting, but state leaders began planning early to meet post-war needs. Governor Earl Warren, who took office in 1943, established a building fund that allocated over \$10 million for new construction. The state also moved to reorganize its mental health system. The state hospitals had been overseen by the Department of Institutions since 1921, where they were grouped together with the state prisons and reform schools. In 1945, the hospitals were separated out from other institutions and placed under the newly created Department of Mental Hygiene. Facilities for people with developmental disabilities remained grouped with mental health hospitals until 1978, when they moved to the Developmental Services Department.<sup>13</sup>

In March 1949, Governor Warren held a highly influential two-day conference that gathered experts and community members to plan the future of California's mental health care system. The participants and governor ultimately adopted a three-point program to reform the old system. Establishing community-based prevention programs would allow for the early detection and local treatment of mental illness and disability; custodial care would be replaced with modern medical and psychotherapeutic treatment; and a major construction program would update and supplement the existing hospitals. The problems that had plagued the hospitals in the past – poor living conditions, industrial therapy geared towards the

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<sup>12</sup> Trent, *Inventing the Feeble Mind*, 227-230; Albert Deutsch, *Shame of the States* (New York: Harcourt, Brace and Company, 1948) 166-168; Henry P. Pohler, Ph.D., ed., "Historical Overview," 22 in *Historical Perspectives of State Hospitals and Developmental Centers*, 1991, D-490, Box 23, Folder 4, Henry Pohler Collection, Department of Special Collections Department, University Library, UC Davis; Albert Deutsch, *Shame of the States* (New York: Harcourt, Brace and Company, 1948).

<sup>13</sup> George Nelson, *Mental Health Care in California, 1849-1974* (1975), 6, Folder 20, Box 6, D-490, Henry Pohler Collection, UC Davis, Shields Library, Department of Special Collections; "Improvements Slated for State Hospital," January 11, 1978, reprinted in 35<sup>th</sup> Porterville Developmental (PDC) anniversary edition of *Porterville Recorder*, June 3, 1988.

hospital's needs, and limited opportunities for socialization – were identified and solutions proposed.<sup>14</sup> Six months after the conference, Governor Warren appointed Dr. Frank F. Tallman as head of the Department of Mental Hygiene and tasked him with implementing the conference recommendations. By the end of the year, the state legislature had appropriated \$110 million for state hospital construction.<sup>15</sup>

The postwar building program launched with a series of dramatic demolitions. The main Kirkbride “castle” building at Napa State Hospital was demolished in early 1950 to symbolize the ending of the asylum era. Another 47 state hospital buildings were condemned throughout the state and an additional number remodeled.<sup>16</sup> New buildings were constructed at a rapid rate through the 1950s to meet the expanding demand. Nationally, more new mental health facilities were completed in the two post-war decades than in any other period of American history.<sup>17</sup> In California, two entirely new hospitals were added to serve individuals with developmental disabilities: Porterville (opening 1953) and Fairview (1959). Several state hospitals that principally focused on mental illness – DeWitt, Patton, and Agnews – also added beds for clients with developmental disabilities.<sup>18</sup> In general practice, clients were admitted to the facility nearest to their family's residence, with Sonoma receiving most of its population from northern California, Porterville from the central counties, and Pacific and Fairview from Southern California.<sup>19</sup>

The new facilities filled as rapidly as they were constructed because an increasing number of parents sought state care for their children with developmental disabilities. The population of those in care nearly doubled between 1950 and 1962 from 6,500 to 12,000, with an additional 2,000 on waiting lists.<sup>20</sup> The baby boom accounted for some of the increase, but changed attitudes also led more middle and upper-class parents to demand access to public care. In contrast to the prewar decades, when social stigma and private shame kept many families from publicly acknowledging their relatives with disabilities, a body of confessional literature in the 1950s brought the issue into the open. Writers as diverse as the Pulitzer-prize winning novelist Pearl Buck and country entertainers Dale Evans and Roy Rogers wrote about their experiences as parents of children with Down Syndrome and other conditions.<sup>21</sup> In the absence of widespread special education programs or community-based support, many parents felt unable to care for

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<sup>14</sup> Gabrielle Morris, *Earl Warren and the State Department of Mental Hygiene: Oral History Transcript / and Related Material, 1970-1973* (Regional Oral History Office, Bancroft Library, University of California Berkeley, March 1, 1973), 90-93; Susan Salter, “Toward Community Health: A History of State Policy in California, 1939–1969,” Ph.D. dissertation, University of California, Berkeley, 1978, 29-30, 119-120; California Department of Mental Hygiene, “Pattern of Progress,” 1962, 14-16.

<sup>15</sup> Gabrielle Morris, *Earl Warren and the State Department of Hygiene*, 37, 50; California Department of Mental Hygiene, *Biennial Report for 1950-1952 State of California Department of Mental Hygiene* (Sacramento: California State Printing Office, 1953), 22-24.

<sup>16</sup> California Department of Mental Hygiene, “Pattern of Progress,” 1962, 7.

<sup>17</sup> Trent, *Inventing the Feeble Mind*, 238, 250.

<sup>18</sup> “Treatment of Retarded Has Greatly Improved,” *Sonoma Index-Tribune*, November 22, 1966.

<sup>19</sup> California Department of Mental Hygiene, *Statistical Report for the Year Ending June 30, 1960* (Sacramento: California State Printing Office, 1960), 79; California Department of Mental Hygiene, “Existing and Proposed Future Programs of the Department of Mental Hygiene for the Mentally Retarded,” April 1964, 1.

<sup>20</sup> California Department of Mental Hygiene, “Pattern of Progress,” 1962, 35.

<sup>21</sup> Trent, *Inventing the Feeble Mind*, 230-237; Michael L. Wehmeyer and Robert L. Schalock, “The Parent Movement: Late Modern Times (1950 CE to 1980 CE),” Wehmeyer, ed. *The Story of Intellectual Disability*, 188-192; Smith, et al., “Isolation, Enlargement, and Economization,” 180-182.

children with developmental disabilities at home, but instead advocated for quality care at state facilities. This led to improved amenities and therapeutic programs at state hospitals including such things as nature camps and music education. Parent groups directly funded the construction of swimming pools at Fairview, Porterville, and Pacific.<sup>22</sup>

The buildings constructed at the new facilities combined fundamentals of the earlier Cottage Plan model with a modern aesthetic that fit with the state's emphasis of bringing developmental service care into a new era. The ward buildings had layouts and floor plans that drew from the Cottage Plan model, though generally on a larger scale and with greater emphasis on medical technology. Each hall housed in the neighborhood of 50 residents, segregated by age, sex, and condition. Wards were arranged to provide convenient access to community facilities such as dining rooms, recreation halls, and auditoriums. The residential buildings were intended to be attractive and welcoming, avoiding the institutional feel of bare walls and uncomfortable furniture, but they made less effort than the prior Cottage Plan model to duplicate a home-like setting. The architecture tended towards contemporary styles, including International, which was popular because of its economy and utility, as well as its forward-looking aesthetic.<sup>23</sup>

Hospital staffing was also modernized. More than 20 different types of trained professionals were added to hospital rosters, including pathologists, psychiatric nurses, chaplains, and recreational and music therapists. The bulk of ward-level employees were nonmedical personnel who had previously been identified as "attendants" and received little specialized training. Beginning in 1951, this group was renamed "Psychiatric Technicians" and began receiving year-long training that included 300 hours of classroom time and extensive ward experience. College psychology courses were occasionally taught on the hospital grounds, and in 1958, a Department of Professional Education was established to provide post-graduate education for physicians and psychiatrists. The State Department of Mental Hygiene also sought to build an active research program at every state hospital. By 1959, there were 160 separate research programs underway at the various hospitals, financed by \$2.5 million in combined state and federal funds.<sup>24</sup>

### 3.1.3 Deinstitutionalization (1963-Present)

Large institutions devoted to treating mental illness and developmental disabilities began to decline in the 1960s as the result of a national movement towards decentralized, community-based care. California was an early leader in the trend, passing the Short-Doyle Act in 1957, which implemented mental health

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<sup>22</sup> Trent, *Inventing the Feeble Mind*, 250-251; Wehmeyer and Schalock, "The Parent Movement," 182.

<sup>23</sup> California Department of Mental Hygiene, *Biennial Report for 1950-1952 State of California Department of Mental Hygiene* (Sacramento: California State Printing Office, 1953), 15, 23-24, 59; California Department of Hygiene, "The Modern Psychiatric Hospital by Dr. Lawrence Kolb," circa 1950, 4-5, on file at the California State Library. The November 1956 issue of *Architectural Record* (Vol. 120, No. 5) featured a building types study of mental hospitals that present contemporary thinking through a series of case studies, including one focused on PDC with photographs by Julius Shulman: "California Hospital for Mental Defectives," 220-225.

<sup>24</sup> California Department of Mental Hygiene, "Pattern of Progress," 1962, 8-12; Sonoma State Hospital, "Challenge: The Story of Sonoma State Hospital" [brochure] (Sacramento: State Printing Office, 1964); "State Takes New Tack on Mental Illness," *San Francisco Chronicle*, July 26, 1959.

services in each county through organizing and funding locally-controlled community mental health programs. Short-Doyle provided a 50-50 state and local funding system to develop mental health clinics. It also applied public health principles to mental illness and developmental disabilities. Politicians, psychiatrists, and hospital administrators hoped that shifting money to community care would result in a reduction of state hospital patient populations. However, populations continued to rise into the 1960s. It was not until Congress passed the National Mental Health Act of 1963 to provide federal matching funds for community health centers that significant reductions were seen at state hospitals including those for people with developmental disabilities.<sup>25</sup>

The day after Congress passed the National Mental Health Act, the California State Assembly held the initial meeting of its new Subcommittee on Mental Health Services. For the first time, the state legislature undertook an independent, systematic study of the entire mental health system. Among those serving on the subcommittee was Assemblyman Frank Lanterman, a conservative Republican representing La Canada, who shaped much of the investigation's direction and its resulting conclusions. The subcommittee ultimately proposed a series of legislative acts that fundamentally transformed the delivery of mental health care within California, shifting it away from centralized state hospitals towards community care.<sup>26</sup>

The subcommittee opened its activities by addressing the state's responsibilities in caring for individuals with developmental disabilities. The committee report, released in 1965, concluded that state hospitals were being over-utilized while community assets remained untapped. In too many cases, the subcommittee found, families were institutionalizing their children or adult dependents with developmental disabilities simply because of a lack of resources or alternatives. This practice separated individuals from their friends and families and isolated them from ordinary community social interactions, while unnecessarily increasing costs for the state. The report recommended the establishment of local centers that could assess clients' needs and provide counselling and placement assistance. The regional center concept was enacted in law in 1966, launching pilot programs in Los Angeles and San Francisco. During their first year, the two centers served 559 people, allowing many of the clients to avoid placement in a state hospital.<sup>27</sup>

In 1967, the subcommittee authored and passed the Lanterman-Petris-Short Act that overhauled the commitment process for mental illness, setting strict procedural standards for involuntary holds. The act had far reaching consequences for the state mental health system. It gave formal recognition to the civil liberties possessed by individuals with mental illness and led to large numbers of clients shifting from state

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<sup>25</sup> California Health and Welfare Agency, Department of Mental Health, "Trends in Admission, Inpatients and Discharges of the Mentally Disabled in State Hospitals 1851-1986," July 1, 1987, 5, Folder 22, Box 24, D-490 Pohler, Henry Collection, University Library, Department of Special Collections, UC Davis; Anitra Hurley, "Portia Bell Hume, MD: Architect of California's community mental health program," *California's Health* (November 1972): 9-10, 69.

<sup>26</sup> Salter, "Toward Community Mental Health," 308-311.

<sup>27</sup> Salter, "Toward Community Mental Health," 312; Association of Regional Center Agencies, "History of the Developmental Disabilities Service Delivery System in California," <http://arcanet.org/pdfs/HistoryOfSystem.pdf>, accessed September 2019; Alta California Regional Center, "History of Regional Centers & the Lanterman Act," <http://www.altaregional.org/history-regional-centers>, accessed September 2019.



hospitals to county resources. Because the commitment process for developmental disability and mental illness were separate, the act had only an indirect impact on Fairview, Porterville, Sonoma, and Pacific Colony. Several of the state hospitals specializing in mental illness were forced to either close or reinvent themselves by starting programs for people with developmental disabilities. This led to the transfer of many clients from the four developmental-focused facilities to other state hospitals.<sup>28</sup>

More directly impactful for people with developmental disabilities was the Lanterman Mental Retardation Services Act of 1969 which expanded upon the 1966 pilot programs to establish the regional center system that remains in place today. By 1971, 13 regional centers had opened, and the current total of 21 centers was reached in 1976. Services were expanded in 1973 to include individuals with other developmental disabilities such as cerebral palsy, epilepsy, and autism. It required an expansion of Medicaid in the early 1980s for the system to be fully realized, but by 1985 more than 78,000 individuals were receiving community-based services through the regional centers, compared to the approximately 7,100 residing in a state facility.<sup>29</sup>

In 1976, the Lanterman Developmental Disabilities Services Act, commonly referred to as simply “the Lanterman Act,” further developed the 1969 act by providing greater access to services and more support for independent living. The act took the important step of directly acknowledging the civil liberties of individuals with disabilities, declaring that “persons with developmental disabilities have the same legal rights and responsibilities guaranteed all other person by federal and state constitutions and laws.” The regional centers were charged with advocating for and protecting those rights. Among the specific liberties that the act recognized were the rights to dignity and privacy; access to appropriate public education; the provision of services that protected liberty and made use of the fewest possible restrictions; regular access to social interaction through community activities; and meaningful control over the choices in one’s own life. Today, the Lanterman Act remains the basic instrument for defining the state’s obligations towards Californians with developmental disabilities.<sup>30</sup>

The Department of Mental Hygiene made its own innovations during the pivotal years of the late 1960s and early 1970s. In 1970, a pilot program was launched to tailor care to each individual’s needs through the use of an Interdisciplinary Team (IDT) approach, in which clinical services were clustered into various program organizations, including orientation and mobility development; behavior intervention and autism services; and physical and social development. All clinical staff, excluding physicians, were then assigned to a particular program and supervised by that program director. This meant, for example, that teachers were no longer all grouped together under a principal but were divided up to work on the individual program IDTs, overseen by the program director. Porterville implemented the IDT system of care in 1971. In 1978, all of the state’s developmental service programs were transferred out of the vast

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<sup>28</sup> Salter, “Toward Community Mental Health,” 338-340; Dudek, “Final Historic Resource Assessment Report for Lanterman Developmental Center, Pomona, Los Angeles County, California, (February 2016), 21-22; “Historical DD Highlights at Napa State Hospital,” (File: Misc. Talks & NSH History, Manor House Archives, Napa State Hospital).

<sup>29</sup> Alta California Regional Center, “History of Regional Centers & the Lanterman Act,” Dudek, “Lanterman Developmental Center,” 23-24.

<sup>30</sup> Alta California Regional Center, “History of Regional Centers & the Lanterman Act.”

Department of Health into the new, smaller, and more-focused Department of Developmental Services (DDS).<sup>31</sup>

The tightening of federal fire, safety, and environmental regulations also led to an overhaul of the ward living units at the state hospitals. Between 1978 and 1982, California spent \$151.4 million to bring all of the state hospitals into compliance and to provide for great privacy and dignity in the living accommodations. Dormitory bay rooms that had previously been filled with as many as 100 beds were converted into either private or semi-private rooms shared by no more than four individuals. Every client now received their own furniture, to include a dresser and wardrobe. Large and noisy “days halls” were made over as cozier living rooms. Bathrooms that previously offered little to no privacy, with dozens of unscreened toilets arrayed in rows, were replaced with smaller restrooms shared between two rooms. These changes fundamentally transformed the experience of residing at a state facility and brought living conditions closer to a home environment than ever before.<sup>32</sup>

By the end of the 1970s, the era of the large custodial institution had largely passed. Disability activists had succeeded in opening up opportunities for people with developmental disabilities by expanding special education programs and finding areas for paid employment. Through greater and more favorable media coverage, and programs like the Special Olympics, the public image of disability changed. For a great number of people with mild to moderate developmental delays, life-long custodial care no longer seemed necessary, desirable, or appropriate. Between 1970 and the mid-1990s, 44 institutions in 26 states closed. The number of people in institutional care throughout the nation fell from the 1967 high of 194,650 to below 90,000 by 1990. The state hospital client base increasingly tended towards individuals with more severe disabilities that required intensive care. Yet clients remained diverse in their mental, physical, and emotional challenges as well as their individual needs. Even as their overall populations fell, the developmental centers continued to meet the needs of this diverse population by providing medical and advanced therapeutic care in a residential environment.<sup>33</sup>

### 3.2 History of Fairview Developmental Center

The above General Context section discussed broad patterns in the changing understanding of and care for people with developmental disabilities. The following section presents a more detailed account of the founding, construction, and institutional activity at the Fairview Developmental Center. As in the above general context, this section is not presented as a complete and exhaustive history of FDC, and many of the facility’s accomplishments and struggles are not herein detailed. Rather, this history is intended to

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<sup>31</sup> Doug Van Meter, “Our Mission is the Same after 100 Years,” *Sonoma Index Tribune*, November 16, 1990; Sonoma Developmental Center, “General Information Fact Sheet,” Department of Developmental Services, Historical Materials, California State Archives; Darling, “Porterville State Hospital Story,” 12.

<sup>32</sup> Doug Van Meter, “Our Mission is the Same after 100 Years,” *Sonoma Index Tribune*, November 16, 1990, 6; Teresa Murphy, “The Last 15 Years,” *Sonoma Index Tribune*, November 16, 1990, 7-8; “Improvements Slated for State Hospital,” January 11, 1978, reprinted in 35<sup>th</sup> PDC anniversary edition of *Porterville Recorder*, June 3, 1988.

<sup>33</sup> Trent, *Inventing the Feeble Mind*, 264.

broadly frame FDC's establishment and growth in order to inform the evaluation of the facility's built environment for historical significance.

### 3.2.1 Institutional Founding (1944 – 1959)

The facility that became FDC was originally planned as a state hospital for mental health. In 1944, the State Legislature authorized three new state hospitals. One was intended as a maximum-security facility for sexual and violent offenders (later Atascadero State Hospital); a second was proposed for mentally healthy individuals with epilepsy (it later became the Porterville Developmental Center); and the third, Fairview, was to serve as a general-purpose mental health hospital. Both the maximum-security facility and the hospital for epilepsy were to be the only institutions of their kind in California and would serve a statewide population. They were therefore to be located in the middle section of the state, with the high-security facility along the coast near San Luis Obispo and the epilepsy hospital in the interior between Porterville and Visalia. At this time, the specific location of the general mental health hospital was not yet certain, although the area between Santa Ana in Orange County and Oceanside in northern San Diego County was specifically preferred. The Legislature appropriated \$400,000 for the purchase of a property for the State mental hospital, with the specific property to be selected by a specially organized State Public Works Board.<sup>34</sup>

The Department of Institution's requirements for the hospital sites showed that, in 1944, they were still planning for a pre-war institutional model in which the facilities were located in rural areas and surrounded by extensive agricultural fields worked by the clients. The department wanted the hospitals located about five miles from a small city, but not near "a large industrial or metropolitan area." Each hospital would occupy between 750 and 1,000 acres, with approximately 500 acres reserved for agriculture purposes including orchards, vegetable gardens, a dairy, hog plant, and poultry ranch. Each hospital required its own water supply as it would be uneconomical to irrigate crops and pasture if connected to a municipal water system. All three hospitals were planned to have an ultimate capacity of 2,500 patients.<sup>35</sup>

California Assembly member Earl W. Stanley of Balboa Island in Newport Beach promoted a site in Orange County and helped to convince his constituents that the facility would be an economic boon to the community. In July 1948, members of the State Public Works Board and Acquisition Division selected a 746-acre tract bound between Harbor Boulevard, the Santa Ana River, and Adams and Wilson streets in the then unincorporated community of Costa Mesa. Condemnation proceedings were initiated the following year against the owner, Southern California real estate magnate George H. Capron, who reportedly acquired the land for \$100 per acre during the Great Depression. The State obtained the property in August 1950 for \$410,000 and the retention of certain mineral rights. Over the years, surplus land was leased out or sold to the City of Costa Mesa until by 1979 the hospital retained only the acreage

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<sup>34</sup> Chapter 26, *Statutes of California, 1944 4<sup>th</sup> Extra Session*, 157; Court of Appeal, 4<sup>th</sup> Dist., Div. 2, California, George H. Capron et al. v. State of California (Civ. No. 8004) (December 14, 1966), 215-216; "Possibility of State Hospital for Tulare County is Seen," *Porterville Evening Recorder*, September 28, 1944, Clippings File, Porterville Developmental Center (PDC) Archives, Porterville, California.

<sup>35</sup> "Possibility of State Hospital for Tulare County is Seen," PDC Archives.

containing the present landscaped main campus area and some outlying operations areas, totaling around 115 acres.<sup>36</sup>

The Fairview facility's treatment focus was changed from mental illness to developmental disability around 1950. In 1948, the State Legislature appropriated another \$400,000 to acquire a site to build an institution for "mental defectives" as an item in that year's Budget Act under the heading of the Postwar Construction Program. In September 1950, an additional urgency measure was passed that allowed for the Costa Mesa site acquired under the authority of the 1944 appropriation to be applied toward that need addressed in the 1948 Budget Act, stating that "an institution for mental defectives is more urgently needed than a mental hospital in order to provide facilities for the care of such defectives, including mentally retarded children."<sup>37</sup> Around this time, the waiting lists for admission to the Sonoma State Home and Pacific Colony had grown to more than 2,000 applicants.<sup>38</sup>

In about 1950, \$150,000 was reportedly appropriated to prepare preliminary design plans for the new Orange County campus. The California State Division of Architecture handled the design work and managed construction contracts for the vast majority of the Fairview campus. Assistant State Architect P. T. Poage oversaw this initial design phase, with Frank Durkee, Director of Public Works, maintaining overall management of the construction project. Preliminary drawings were submitted to the Department of Finance on January 7, 1953, and the Legislature appropriated \$11,576,550 as an urgency measure for "construction, improvement, and equipment" to develop the site on January 23.<sup>39</sup>

Around this time, the name of the site was established in honor of the former community of Fairview in the same general area. That February, the Division of Architecture initiated contracting for the Fairview State Hospital – Initial Development Construction Program (First Phase) under this appropriation:

The first phase of the program will include the construction of [an] administration and hospital building [which ultimately included three adjoined infirm wards], two units of typical wards [subsequently amended to one unit], kitchen and dining room building, covered passage, commissary building, laundry building, garage and maintenance shops, boiler plant, and site development work which will consist of general grading, roads,

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<sup>36</sup> Court of Appeal, 4<sup>th</sup> Dist., Div. 2, California, *George H. Capron et al. v. State of California* (Civ. No. 8004) (December 14, 1966), 216-218; "Costa Mesa Site Urged for Hospital," *Los Angeles Times* (October 2, 1948): 6; "George Capron, 86, Dies; Made County Land Profits," *Daily Pilot* (October 30, 1972), from Fairview State Hospital Clippings File, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California; "Purchase of Hospital Site Near Costa Mesa Approved," *Los Angeles Times* (July 10, 1950), 11; "Fairview Chronology" (ca. 1971), no pagination, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS.

<sup>37</sup> Chapter 2, *Statutes of California, 1950 3<sup>rd</sup> Extra Session*, 5.

<sup>38</sup> "Fairview State Hospital: The First Ten Years" [pamphlet], 1, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; California Department of Mental Hygiene, *Statistical Report: Department of Mental Hygiene, State of California, Year Ending June 30, 1950* (Sacramento: 1950), 19, 31.

<sup>39</sup> "Fairview State Hospital: The First Ten Years" [pamphlet], 1, and "Fairview Chronology," ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; H. S. Hunter to Frank B. Durkee, January 26, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA; Chapter 9, *Statutes of California, 1953 Regular Session*, 614-615.

walks, parking and service areas, storm drainage, water storage facilities, mechanical and electrical utilities and all related service connections.<sup>40</sup>

Contracts for sewage and water work were let in February 1953, and groundbreaking occurred soon thereafter. Subsequent contracts were awarded for the kitchen, dining, and commissary building and ward building in May and September, respectively, with the water reservoir and booster pump station completed that December. Construction of the Main Kitchen and the 280-bed Ward # 1 was completed circa 1954, with the laundry building and boiler plant under construction the following year (**Figure 1**). Final drawings for the 695-bed Receiving & Treatment and Administration Building—which included three adjoined Acute Infirm Wards (Buildings D, E, and F / Residences 11-16)—were submitted in July 1956, the construction contract was awarded that October, and construction of the buildings was completed about 1958, in time for the hospital's opening on January 5, 1959 (**Figure 2**).<sup>41</sup>

At the time of Fairview's opening, all of the components of the Initial Development Construction Program had been built as well as several buildings and structures included in subsequent construction phases (**Figure 3**). In 1956, the Department of Mental Hygiene detailed a five-year schedule of major building projects as part of the State Building Construction Program. Under this program, planning and construction of additional site development, four ward buildings, the extension of the covered passageways, a warehouse addition to the commissary, six single-family staff residences, several multi-unit staff dwellings, a school, and a firehouse were to be initiated in Fiscal Year 1956-57. In 1957-58, planning and construction for six additional wards, an auditorium, a library, occupational therapy, canteen and barber shop building, and an expansion of the boiler plant were scheduled, with four more wards and the second phase of school construction scheduled for 1958-1959. Aside from the auditorium and library-canteen, the construction of which was pushed back as a higher priority was placed on building client residences, this construction schedule was generally implemented as described, with each building constructed within a year or two of its planning and construction date.<sup>42</sup>

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<sup>40</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA.

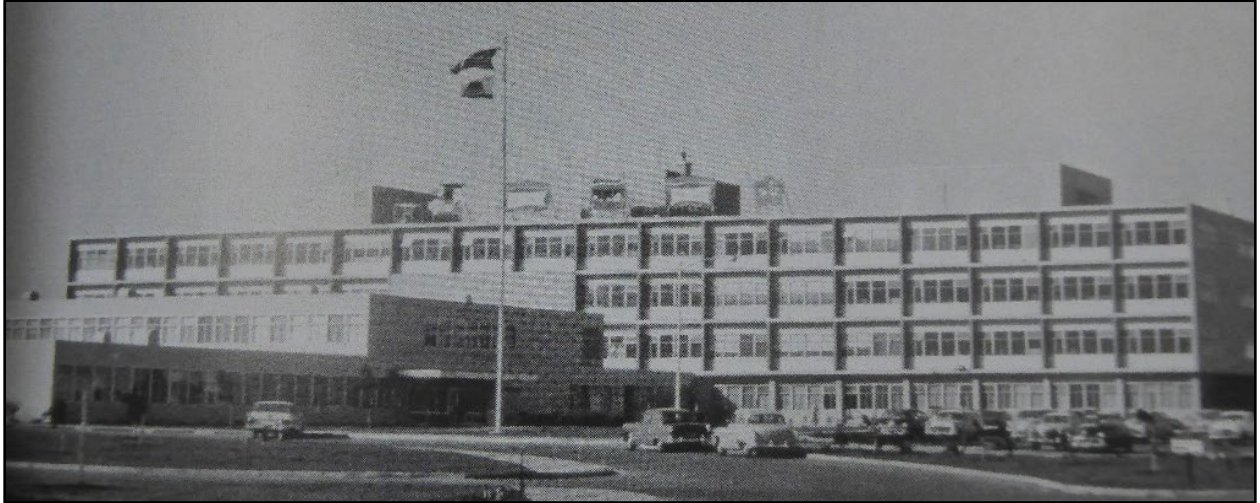
<sup>41</sup> Anson Boyd, State Architect to Frank B. Durkee, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA; Fairchild Aerial Surveys (FAS), Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); DPW, Division of Architecture, "Fairview State Hospital: Hospital-Administration & Acute Infirm Wards," W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services (DGS) Plans Vault, West Sacramento; "New Fairview Contracts Let," *Los Angeles Times* (October 28, 1956): 6; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.

<sup>42</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97-98, 103, 107



**Figure 1:** Portion of a 1955 aerial photograph, showing extent of 746-acre acquisition (top) and site development (left). In the detail image, note the completion of square water reservoir (top right), Ward # 1 / Building B / Residence 17-20 (center), and Main Kitchen and Commissary (bottom left). Foundation work for the Laundry & Central Powerplant can be seen between Ward # 1 and the kitchen (FAS, Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available UCSB (accessed June 2019).





**Figure 2:** Circa 1959 photograph of R&T and Administration Building. Photograph printed in Costa Mesa Historical Society, *Images of America: Costa Mesa, 1940-2003* (Charleston, South Carolina: Arcadia Publishing, 2016), 49.



**Figure 3:** 1958 oblique photograph of Fairview State Hospital complex under development. Note the completion of Initial Development Construction Program (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA).

The buildings at Fairview were united by a shared design in a modest expression of the International style, a variation of the Modernist architectural mode that was popular during the era. Modernism, as a broad architectural movement, emerged in Europe during the 1920s as a reaction against the ornamentation and historicity of architecture in the prior decades. In general, this approach expressed an optimism about the future and a desire to depart from conventional modes of thinking. In its origins, the movement was as much a philosophical approach as it was a definable style. Architects as varied as Walter Gropius, Le Corbusier, and Ludwig Mies van der Rohe were united by their emphasis on rationality and functionality. They insisted on the honest use of building materials and believed that a building's form should clearly express its function. Whereas past architects had concerned themselves principally with the decoration of a building's surfaces, modern architects sought to enclose volumes of space as lightly, cleanly, and clearly as possible. Ideally conceived, buildings became mere planes surrounding an open box.<sup>43</sup>

This approach arrived in America and received its name as the result of a 1932 architectural exhibition at New York's Museum of Modern Art (MoMA), curated by Philip Johnson and Henry Russell Hitchcock, and entitled "The International Style: Architecture Since 1922." The designs featured in the exhibition were primarily for large public or semi-public buildings, being hospitals, factories, department stores, apartment complexes, and administrative buildings. They were all distinguished by their rectilinear forms, taut planar surfaces, cantilevered elements, and the free use of glass, steel, and concrete. A year after the exhibition, both Gropius and van der Rohe immigrated to America, fleeing the repressive Nazi government in Germany that had forced the closure of the Bauhaus, the first Modernist school of design and architecture. The men accepted teaching positions at the Harvard School of Design and the Illinois Institute of Technology, respectively, and disseminated their philosophical and aesthetic approaches to a generation of American students. In California, leading practitioners of the style included the Viennese-born architects Rudolph Schindler and Richard Neutra.<sup>44</sup>

In the 1930s and 1940s, the International Style proved deeply influential on public and institutional architecture in the United States. Institutions favored the style because it offered a forward-looking, even futuristic, aesthetic while retaining a focus on efficiency, economy, quick construction, and functionality. In many institutional uses – such as hospitals, dormitories, libraries, or administrative buildings – economy took precedent over display, and the buildings were modest examples of the International aesthetic that lack architectural distinction.<sup>45</sup>

The visual appearance of the Fairview facility fit within this Modernist architectural mode, particularly through a restrained but unified application of the International Style. A majority of the buildings from the original phase of development, circa 1953 through 1964, were built of poured concrete, often with prominent banks of metal frame windows and doors (**Figure 4**). The buildings incorporated rectilinear

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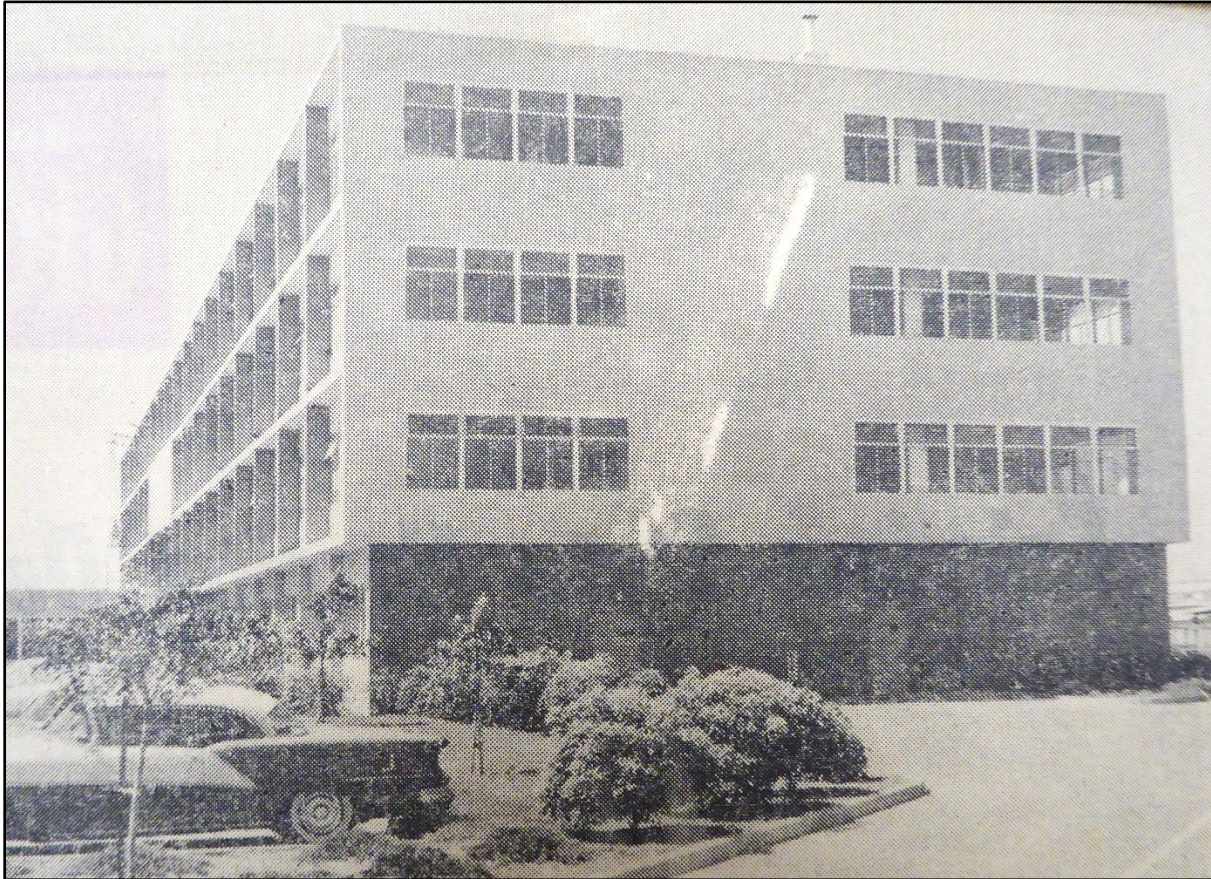
<sup>43</sup> Carol Rifkind, *A Field Guide to Contemporary American Architecture* (New York: Plume, 1998), 104, 110, 115, 245; Roy Hampton, "Historic Context for Evaluating Mid-Century Modern Military Buildings," Department of Defense Legacy Resource Management Program, May 22, 2012, 1-3, 41-60; Planning Resources Associated, Inc., "Mid-Century Modernism Historic Context," prepared for City of Fresno, September 2008, 19-20, 69.

<sup>44</sup> Planning Resources Associated, Inc., "Mid-Century Modernism Historic Context," 19-20; Henry-Russell Hitchcock and Philip Johnson, *The International Style* (New York: W.W. Norton & Company, 1995).

<sup>45</sup> Rifkind, *A Field Guide to Contemporary American Architecture*, 104, 110, 115, 245.



forms and strong horizontal lines, especially along roof lines. The nearly mile-long system of long, linear covered walkways literally connected and further enhanced the appearance of the individual International-style elements (**Figure 5**).<sup>46</sup>

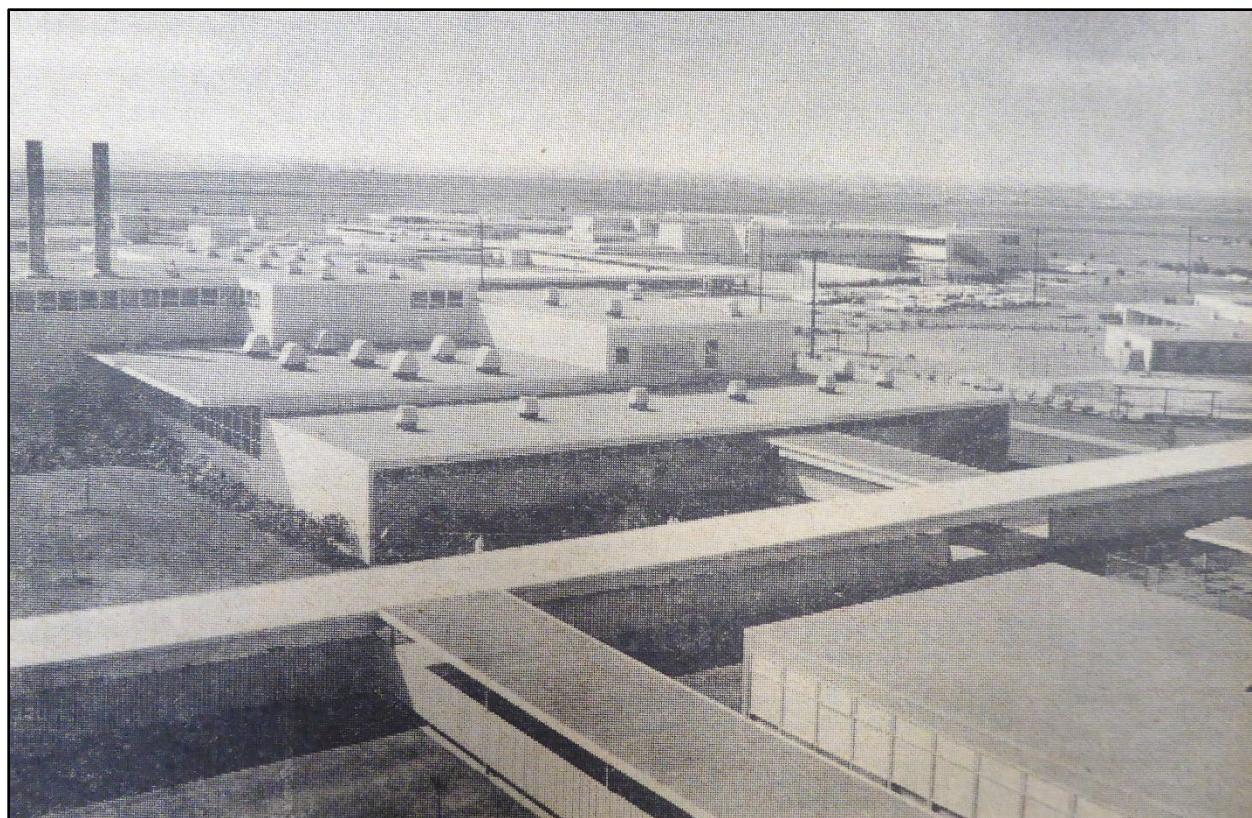


**Figure 4:** Ca. 1961 photograph of R&T and Administration Building. Note the exposed concrete and emphasized lines, signatures of the International style (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 2, from the Collections of the Costa Mesa Historical Society, Costa Mesa, California [CMHS]).

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<sup>46</sup> Rifkind, *A Field Guide to Contemporary American Architecture*, passim; Roy Hampton, "Historic Context for Evaluating Mid-Century Modern Military Buildings," Department of Defense Legacy Resource Management Program, May 22, 2012, passim.





**Figure 5:** Ca. 1961 photograph of covered walkways (foreground) with Laundry and Central Powerplant (center). Note the emphasis on horizontal lines and flat surfaces (Payne, *Fairview State Hospital Dedication Issue*, 9, CMHS).

In February 1957, Dr. Hyman Tucker was appointed the first superintendent and medical director of Fairview State Hospital. Tucker was the former superintendent at Agnews State Hospital in Santa Clara County. Born in Russia, Tucker earned his medical degree from Long Island College Hospital in 1921. He served as a senior physician at Elgin State Hospital in Elgin, Illinois, and Mississippi State Hospital at Meridian before moving to California in 1928 to assume the position of Senior Physician and Clinical Director at Agnews State Hospital. After serving as chief of neuropsychiatric service at four Army hospitals during World War II, Tucker resumed his career with the Department of Mental Hygiene and assumed the position of assistant superintendent of medical services at Metropolitan State Hospital in Norwalk in 1946 before he was transferred and promoted to superintendent of Agnews State Hospital in 1954. During Tucker's tenure at Fairview, he oversaw the completion and opening of the new hospital, as well as most of the subsequent building programs. Tucker additionally directed the initial staffing of the hospital, including the first round of psychiatric technician trainees in August 1958. Most of these employees transferred from other state hospitals while others were recruited locally. By the time the hospital opened four months later, it was staffed with 762 employees, consisting of 56 administrative employees, 515 employees dedicated to client care, 118 support and subsistence employees, and 73 plant operations workers. Employee housing consisted of the superintendent's residence, five single-family houses, two duplex units, and two apartment buildings with two units each, which were all constructed about 1958. Because of the pressing need to alleviate overcrowding, a formal dedication ceremony was postponed

until May 1961, more than two years after the facility first opened its doors to begin receiving patients. Tucker served at Fairview until 1963 when he retired and the position was filled by Dr. Anthony N. Toto.<sup>47</sup>

### 3.2.2 Move-in and Build-Out (1959 – 1964)

The first residents arrived at Fairview on January 5, 1959. This first group comprised 10 client transfers from Pacific State Hospital, with about 100 more individuals per month either transferred from Pacific and Sonoma State Hospitals or directly admitted from Los Angeles, Orange, and San Diego county waiting lists over the next 16 months. By May 1960, the client population consisted of 1,494 patients, including 1,034 transfers and 460 direct admissions from Southern California. The admission rate continued to increase as new residential buildings for clients were constructed. By 1964, at the end of Fairview's initial build-out, the hospital had a bed capacity of 2,622. Among direct admissions, applicants under 18 years old were committed voluntarily with the written consent of their parent guardians, who were also required to pay up to \$20 per month for hospitalization and provide clothing and other incidentals. Applicants over 18 years of age were committed through their county's superior court, and all applicants were admitted or waitlisted according to urgency.<sup>48</sup>

As with the Porterville program, treatment at Fairview was designed to return as many clients as possible to their communities. Case treatment began with the referral process, prior to admission. A team from the hospital consisting of a physician, psychologist, social worker, and a nurse completed a social-medical survey for the applicant. The team then worked to find a local solution for the client that would not require hospital admissions. Individuals requiring institutional care were admitted at the receiving ward of the hospital where an individual diagnosis and treatment plan were prepared prior to selecting a residential ward for placement. Fairview staff formulated therapeutic goals around an individual's anticipated eventual placement, whether that was returning to the home, foster care, family care home, or long-term hospitalization. Self-care, socialization, and domestic tasks were major components of the therapeutic and educational programs. The basic educational program divided clients into two categories, "educable" and "trainable," and aimed to foster in each individual the greatest degree of self-sufficiency possible.

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<sup>47</sup> "Knight Seeks Mental Chief," *San Mateo Times* (February 9, 1957): 24; "Fairview Chief Named," *Los Angeles Times* (October 18, 1963): 1; "A Hospital's Birth: Fairview Actually Began 13 Years Ago," "Meet Fairview's Chief: M.D. with Many Roles," and "Department Stresses Best Nursing Training," *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition* (May 4, 1961): 2, 5-6, from the Collections of CMHS; "Fairview State Hospital: The First Ten Years" (1969), 1-2, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; DPW, Division of Architecture, "Fairview State Hospital: Employees Housing – Ground Improvements," sheet R-2 of 2, W.O. 4007-GD-49, September 12, 1958, File 19-G-17, California Department of General Services (DGS) Plans Vault, West Sacramento.

<sup>48</sup> "Fairview State Hospital: The First Ten Years" (1969), 2, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. "Dept. of Developmental Services – Developmental Center History," Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; "Fairview Hospital for their Benefit: State has Concern for Mentally Retarded," *Daily Pilot / News Press* (February 13, 1964), Fairview State Hospital Clippings File, from the Collections of CMHS.

About 260 patients were enrolled in these educational programs. Additionally, the Rehabilitation Services Division offered industrial, vocational, music, and recreational therapy.<sup>49</sup>

Although client labor was not a major part of the hospital's operations, Fairview did offer a variety of vocational training programs. In addition to on-site assistance work, such as laundry pick-up and drop-off and hospitality service at the canteen, clients performed light jobs at the site's sheltered workshop, such as assembly, trimming, and packaging on subcontract to local industries. In 1963, the hospital's client-operated workshop reportedly grossed over \$5,000 contracting with local industries, which had clients "trimming ... rubber washing machine parts and casting ... ammunition for muzzle-loading firearms."<sup>50</sup> Fairview later incorporated a petting zoo into its facilities, although the hospital never developed a full-scale agricultural operation as had been anticipated in 1944.<sup>51</sup>

Build-out of the hospital continued through 1964 (**Figure 6**). Between 1959 and 1964, five identical, 280-bed residence buildings (Buildings O, P, Q, T, and U / Residences 26-35) and two adjoined ward buildings (Buildings S and S-1) were constructed on the west half of the campus. This final building program gave Fairview a total capacity of 44 living wards, with a rated-bed capacity of 2,622, where multiple clients shared space in a dormitory setting (**Figure 7**). Also constructed during this period were the library, occupational therapy, canteen, and barbershop building, dedicated as the "Hyman Tucker Rehabilitation Building" in 1961, and the Auditorium, which were both constructed in the southeast quadrant of the main complex.<sup>52</sup>

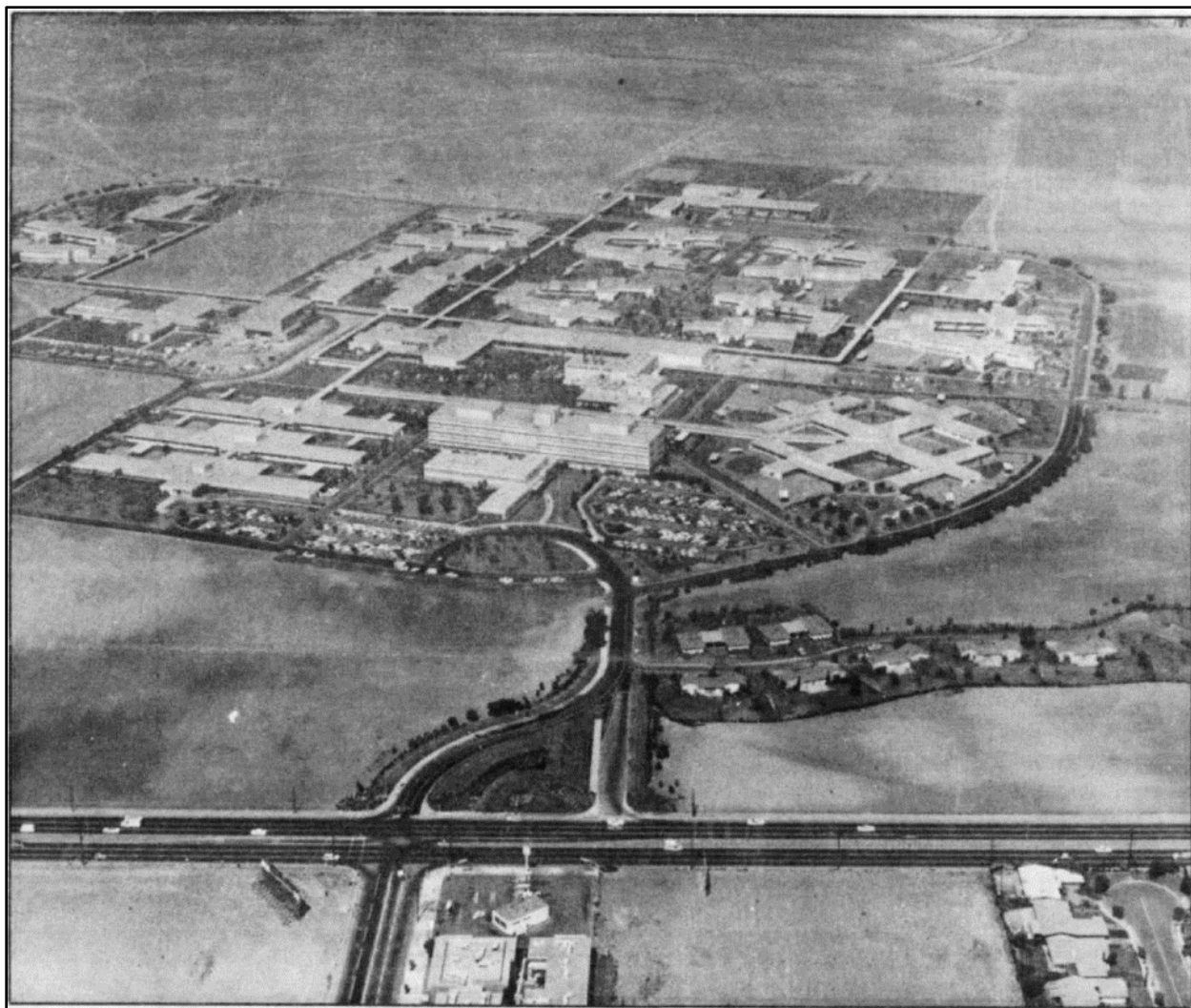
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<sup>49</sup> California Department of Mental Hygiene, *Statistical Report for the Year Ending June 30, 1960* (Sacramento: Department of Mental Hygiene, 1960), 82-83; "Program of Treatment at Porterville State Home Described by Director," *Porterville Evening Recorder* (February 12 and 13, 1953), PDC Archives; Alvan H. Goodell, School Principal, "Develop to Fullest – That's Hospital Goal," and Allan D. Toedter, Supervisor of Rehabilitation Services, "Motivation: Helping Daily Living," *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition* (May 4, 1961): 8, from the Collections of CMHS; California Department of Mental Hygiene, *Progress Report, 1963* (Sacramento: Department of Mental Hygiene, 1963), 12, PDC Archives.

<sup>50</sup> "Mental Patients Work at Therapeutic Jobs," *Los Angeles Times* (December 17, 1961): 1; California Department of Mental Hygiene, *Progress Report, 1963* (Sacramento: Department of Mental Hygiene, 1963), 12, PDC Archives.

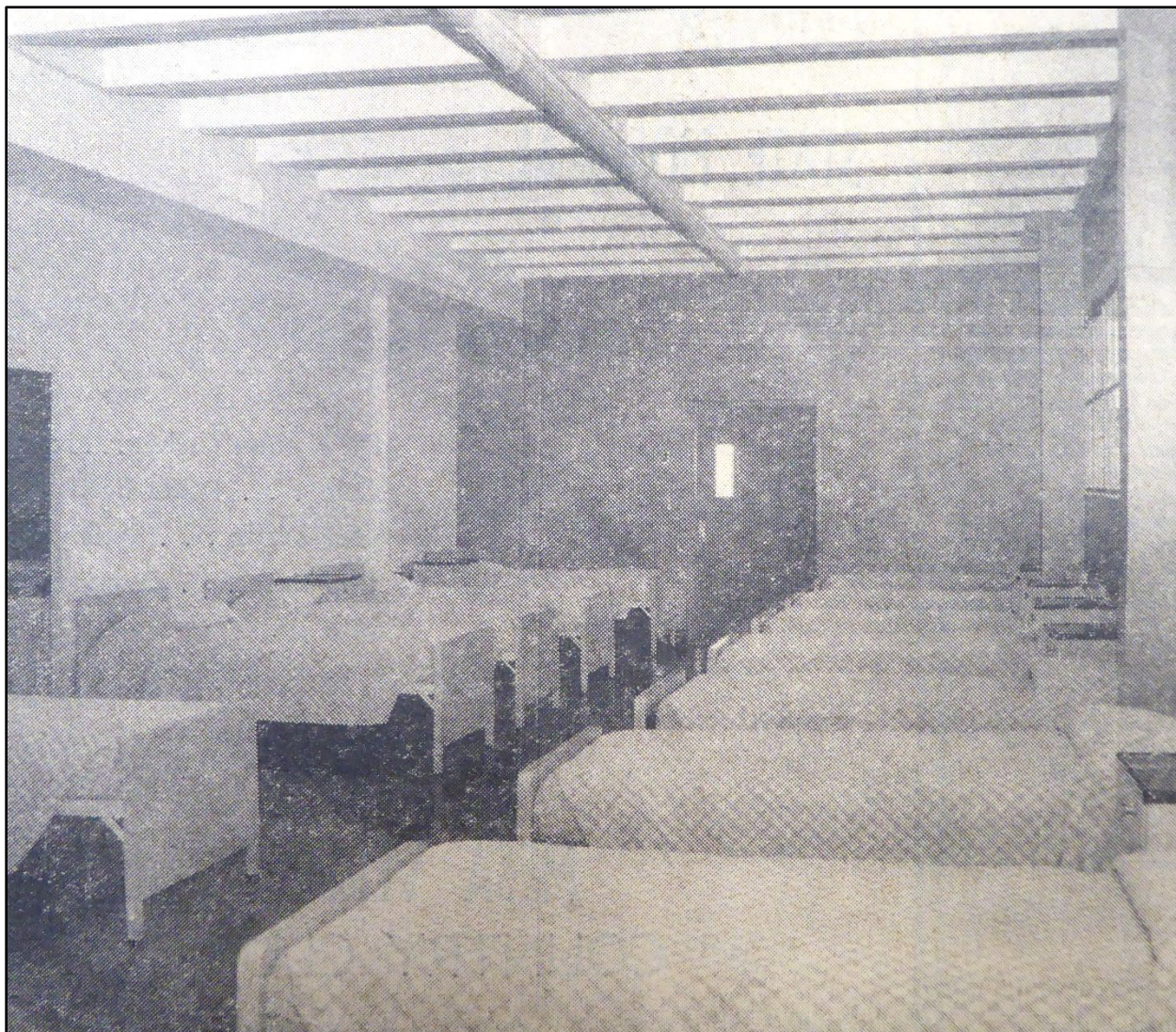
<sup>51</sup> Steve Tripoli, "Donations Sought for Caretaking at Fairview Hospital: Volunteers Built Park, Now State won't Keep it Up," *Los Angeles Times* (November 13, 1983): 10.

<sup>52</sup> "Fairview State Hospital: The First Ten Years" (1969), 2, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS.



**Figure 6:** Circa 1968 photograph of Fairview State Hospital main campus (photograph published in "Fairview: Costa Mesa State Hospital will have a New Name, Image," January 10, 1983, Fairview State Hospital Clippings File, from the Collections of CMHS).





**Figure 7:** Circa 1961 photograph of a typical male ward dormitory interior (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition*, May 4, 1961, 9).

Dr. Anthony Toto was named superintendent and medical director of Fairview State Hospital in October 1963, succeeding Hyman Tucker. Dr. Toto remained in that post for 13 years before resigning in 1976. He was a 1943 graduate of the New York Medical College, served in the U.S. Marine Corps as a ward officer at the 25<sup>th</sup> Evacuation Hospital, and later ran a private practice of internal and psychosomatic medicine in New York. Toto moved to California in 1957 and entered state service as the assistant medical director at Camarillo State Hospital, where he remained until his appointment and promotion at Fairview. Toto's appointment to superintendent in 1963 was notable because he was not certified as a psychiatrist by the American Board of Neurology and Psychiatry, unlike 11 of the 13 state hospital superintendents. He was, however, qualified as a mental hospital administrator.<sup>53</sup>

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<sup>53</sup> "Fairview State Hospital Gets New Superintendent," *Oakland Tribune* (October 18, 1963): 19; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS,

### 3.2.3 Peak Years and Post-Lanterman Changes (1964 – Present)

Dr. Toto attempted to initiate more individualized, client-centered treatment programs at Fairview State Hospital. Prior to his appointment, the Fairview center reported “a medical model of treatment prevailed, the assumption being that mental retardation responded to treatment much like any other physical condition.”<sup>54</sup>

Part of Toto’s individualized approach involved facilitating formal partnerships with volunteer organizations. Parents, volunteers, and charitable organizations from the surrounding community had donated time and resources to client care since the hospital first opened its doors in 1959. In 1964, however, Dr. Toto coordinated these parents’ efforts and assisted the formation of the 600-person, non-profit corporation, Fairview Families & Friends, Inc. (FFF) in 1964. By 1969, the organization had grown to include 1,200 members. In addition to raising funds and organizing events and activities, the FFF organized support forums for the families of new patients and published a monthly newsletter. Around this same time, the Fairview Therapeutic Pool Committee, Inc., formed in 1962, continued its efforts to raise \$50,000 for the construction of a swimming pool at Fairview. By 1969, the group had raised \$53,000, and the pool was built two years later.<sup>55</sup>

The state made several changes to the living conditions in the wards in the late 1960s. In 1967, California adopted U.S. Public Health standards setting minimum conditions for institutional living. The wards had been designed and built to provide 50 square feet per ambulatory patient and 60 square feet per non-ambulatory patient, but the new standards raised the guideline to 70 square feet per patient. This reduced the hospital’s rated-bed capacity from 2,622 to 1,915. In 1969, Fairview’s client population totaled 2,500. Around this same time, a new rehabilitation training program was introduced at Camarillo State Hospital, which allowed Fairview to transfer a number of its “moderately retarded” clients to free bed space for “severely retarded youngsters.” Between 1967 and 1969, the overcrowded hospital managed to reduce its client population from 2,635 to about 2,500 thanks to this transfer program and other programs intended to move clients into community programs.<sup>56</sup>

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Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Anthony N. Toto, M.D., Curriculum Vitae, appended to “Habilitation of the Physically Handicapped Retardate Proposal,” 1967, R384.113, Box 3 file 42, Department of Public Health Records, CSA.

<sup>54</sup> “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA.

<sup>55</sup> “Fairview State Hospital: The First Ten Years” (1969), 3, ff. “Fairview Hospital 1990-0067-066.241,” from the Collections of CMHS.

<sup>56</sup> “Fairview State Hospital: The First Ten Years” (1969), 3, ff. “Fairview Hospital 1990-0067-066.241,” from the Collections of CMHS; “Fairview State Hospital Waiting List Diminishes,” *Long Beach Independent* (September 8, 1967): B-4; Milt Brouhard, “Community, Volunteers Hailed at Fairview’s 10<sup>th</sup> Anniversary,” *Los Angeles Times* (January 13, 1969): D-1.

Program innovations of the late 1960s and early 1970s led to fundamental changes throughout the state hospital system, as is described in the General Context section above. In order to implement these structural changes throughout the state hospital system, the Department of Mental Hygiene designated a five-person task force—which included Dr. Toto—to develop a new organizational model. In December 1970, Fairview was reportedly the first developmental center to rebuild its treatment program around a developmental model with 10 separate programs (later reduced to nine) tailored to each individual's abilities and needs. This was called the Program model. In 1976, Fairview was accredited by the Accreditation Council on Services for People with Developmental Disabilities, the first institution with a population greater than 800 to receive the honor. In 1978-1982, the residential wards were remodeled to meet tightened federal fire, safety, and environmental requirements. A \$17.1 million program renovated nearly every living unit at Fairview to meet the federal regulations and provide greater privacy, normalization, and dignity. This effort included erecting partitions in the dormitories to create bedroom spaces with four beds rather than the 40-bed dormitory spaces. In 1984, then-superintendent Dr. Francis M. Crinella launched the "Silver Challenge," which launched a beautification program by removing fencing, planting trees, and replacing asphalt-paved areas with more grass lawns. Crinella's initiative also raised money to furnish rooms, supplementing the \$200,000 allocated by the State.<sup>57</sup>

The facility name changed from Fairview State Hospital to Fairview Developmental Center in May 1985 to better reflect the facility's purpose of caring for individuals with developmental disabilities. The center's population continued to decline as the state moved towards deinstitutionalization and community care. Around this time, the resident list was at around 1,100, less than half of the facility's original design capacity.<sup>58</sup>

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<sup>57</sup> "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. "Dept. of Developmental Services – Developmental Center History," Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Annette Watson, "Fairview Celebrates 25<sup>th</sup> Anniversary," *The Newport Ensign* (January 25, 1984): 6, and Mishele Pangrazio, "Fairview to Drop Fences 'Normalize,'" *The Newport Ensign* (September 7, 1983): 1-2, and William H. Boyer, "Fairview Launches a 'Silver Challenge,'" *Community Register* (January 10, 1984): 1, 3, Fairview State Hospital Clippings File, CMHS.

<sup>58</sup> Doug Brown, "Fairview Celebrates 25 Years of Change," *Los Angeles Times* (May 27, 1984): 1, Fairview State Hospital Clippings File, CMHS.



## 4 Description of Resources

This section provides a summary description of Fairview Developmental Center's 39 historic-period (built in 1974 or earlier) buildings that JRP inventoried and evaluated. Grounds and landscape features inventoried and evaluated by Denise Bradley Cultural Landscapes are described in the following section. For more photographs and detailed descriptions of individual buildings, structures, and landscape features, see DPR Forms in **Appendix B**.

Fairview Developmental Center occupies approximately 110 acres in the City of Costa Mesa, Orange County, California. The facility campus includes 39 historic-age built environment resources, as well as landscape features such as streets, walkways, outdoor furniture, and plantings. The majority of surveyed resources – including all client residential wards and medical, educational, and administrative buildings – are located in the main campus area, bounded by North Shelley Circle and South Shelley Circle and bisected by Pearl Way and Gregory Way, which both run north-south. This area contains about 106 acres, with additional historic-era operations facilities and staff housing located to the north and east. The vast majority of the built environment resources on the campus date to the period of the hospital's initial build-out between 1953 and 1964.

Client residential buildings, also known as wards, date between 1954 and 1964 and are of International-style design. The oldest ward building (Building B / Residences 17-20) is located in the northeast quadrant of the main campus. All other client residential units are located in the western half of the complex, west of Pearl and Gregory ways. The buildings are all constructed out of concrete, with Buildings J, K, O, P, Q, T, and U featuring virtually identical V-shaped footprints (**Figure 8**). The adjoined S and S-1 buildings feature irregular rectangular footprints, and Buildings L and M feature identical irregular T-shaped footprints. The buildings are all single-story with flat roofs, except for Buildings J and K, which are two storied. Client residences are set within manicured lawns and courtyards with mature trees and concrete walkways. Surrounding the residential complexes are asphalt-paved parking lots and roadways.



**Figure 8:** Building P (Residences 32-33); facing southwest, May 28, 2019.

A residential housing neighborhood is located towards the eastern edge of the campus, along Mark Lane. Since December 2017, this area has been leased to a private company for development and management. While the buildings are not currently under state control, they are included in this study as part of the historic hospital complex. Fairview Development Center Staff Housing (Units #3, 4, 5, and 6) are single-family residences and were constructed in 1958 (**Figure 9**). The four 1,786-square-foot Ranch-style houses are nearly identical in design, construction, and materials. Staff residences are located along Mark Lane just east of the main Harbor Boulevard entrance to the complex. Units #3 and #4 have yards enclosed with vinyl fencing. Units #5 and #6 have yards partially separated by vinyl fencing. Additional staff housing units, later designated as transitional housing, consist of two adjacent, nearly identical Contemporary-style duplexes built in 1958. These rectangular duplexes consist of two and three bedrooms, and are connected by a flat-roof carport. Each unit has a small lawn ornamented with mature shrubs and trees. These units also have backyards enclosed with modern vinyl, wood, and/or concrete-block fences. Each staff residential property is landscaped with lawns, mature trees, and shrubs, and have concrete driveways.



**Figure 9:** View of Staff Housing Units on Mark Lane; facing northeast, May 29, 2019.

The western edge of the campus contains an educational and recreational area. The Alvan H. Goodell Education Center, FDC's main educational facility, has an irregular 43,425-square-foot footprint, is of International-style design, and is located west of North Shelley Drive. The majority of the building is one story, with a 1.5-story gymnasium section located toward the western rear of the facility (**Figure 10**). A single-story, concrete utility addition is located on the west side of the gymnasium section. Also included in the educational and recreational complex at FDC is the Hyman Tucker Activities Center and Lava Lounge, Anthony N. Toto Auditorium, and two auxiliary portable buildings. The Activities Center is located in the southeast quadrant of the complex between Eugenia and Pearl Ways and is a 27,258-square-foot, single-story International-style building with an irregular, T-shaped footprint. The Lava Lounge, attached to the Activities Center's southernmost end, is a 1,820 square-foot, 1.5-story building. The Toto Auditorium, located in the southeast quadrant of the complex, is directly north of the Activities Center. The Auditorium is a 15,707-square-foot, two-story International-style building, which possesses a T-shaped footprint and a single-story building section wrapping around the east side elevation to form the overall "T" shape. The Goodell School, the Activities Center and Lava Lounge, and the Toto Auditorium buildings are surrounded by manicured grass lawns with mature trees and concrete walkways. The Activities Center and Auditorium have an asphalt-paved parking lot along their east sides. There are two, non-contributing school annex buildings that are associated with the educational and recreational facilities at FDC. The School Annex portable buildings were established in the 1970s, during the period of deinstitutionalization. The two portable modular buildings are located in different locations along the center dividing line of the FDC. One building is located on the north side of Pearl Way, with the other located on the west side of North Shelley Circle.



**Figure 10:** Alvan H. Goodell Education Center; facing southwest, May 29, 2019.

The eastern edge of the FDC campus contains the multi-story, International-style Receiving and Treatment (R&T) and Administration Building (**Figure 11**). Consisting of two adjoined elements, this building is located at the northeast entrance to the main complex near the intersection of Fair Drive and North Shelley Circle. The building possesses an irregular footprint encompassing an area of 155,778 square feet, which is functionally and architecturally divided between the two-story, T-shaped Administration Building at the front (east) and the four-story, T-shaped R&T Building to the rear (west). The Administration Building was constructed circa 1958. This building has a one-story rectangular section at the front (north), with a two-story L-shaped appendage forming the stem of the “T.” The Administration Building is to the front (east) of the R&T hospital building, which was built in the same year. The two facilities are connected via a narrow concrete corridor. The R&T Building’s main section consists of a four-story, concrete building, with the east and west sides divided evenly into 14 bays, with the exception of the third-story section fronting former surgery rooms. The roof of the fourth-story element houses three original concrete fan rooms, with one outfitted with corrugated metal siding. Safety metal hand railing was installed along the perimeter of the rooftop sometime in the 1990s. The R&T and Administration Building is surrounded by manicured lawns, mature trees and shrubs, and, paved walkways.





**Figure 11:** Receiving & Treatment (R&T) and Administration building; facing southwest, May 29, 2019.

The Main Kitchen and Shipping / Receiving Warehouse building is located in the center of the main complex on the west side of Gregory Way. The 74,614-square-foot, International-style building was constructed in two phases, during 1953 and 1960. The building has a dual purpose, housing kitchen facilities at the south end and a shipping and receiving warehouse at the north end. The Main Kitchen is the oldest of the two building sections, and it has an irregular, L-shaped footprint. The east and north elevations both feature prominent, above-grade concrete loading docks. From the east and west, the Main Kitchen adjoins the covered walkway that extends throughout the complex. In about 1960, the Shipping / Receiving Warehouse was added onto the Main Kitchen. It comprises a long rectangular footprint, and it has an extremely low-pitched gable roof. This section likewise has an elevated loading dock on the east side. Garage openings are located on the east side, and a single rear personnel door is located on the west side.

Built circa 1955, the Central Powerplant and Laundry Building is located at the center of the complex on the east side of Gregory way, parallel to the wing of the Shipping / Receiving Warehouse (**Figure 12**). The 49,675-square-foot, two-story, utilitarian-style Central Power Plant and Laundry Building possesses an irregular footprint and is architecturally divided between its two functions. Additions have been made to the building over time, including a dirty laundry storage section at the northeast corner, built circa 1960, and a chiller equipment room was added to the south end of the building circa 1980. A small courtyard separates the laundry section from the circa 1980 equipment room addition. The laundry facility is contained within the northernmost building sections, and also features numerous, multi-level components. The Central Powerplant and Laundry Building is surrounded by manicured grass lawns with concrete sidewalks and asphalt-paved roadways.



**Figure 12:** Oblique view of central support area of FDC main campus, showing covered walkways (foreground, left to right), Central Powerplant (right), and Main Kitchen and Shipping / Receiving Warehouse (background center and left), taken from roof R&T Building; facing west / southwest, May 28, 2019.

The Plant Operations Complex, located north of the main complex on the northwestern side of Merrimac Way, is an auxiliary support complex that consists of six historic-period buildings (**Figure 13**). The largest of these is the single-story, utilitarian-style, Plant Operations Warehouse & Shops building has a generally L-shaped footprint. Abutting the east end of the Plant Operations building is an automotive shop, which has an irregular footprint and two shed-roof extensions to the rear (northeast). Immediately adjacent to the automotive shop's northern corner is a glass shop, a temporary, elevated, wood-frame building with a rectangular footprint. Directly south of the Plant Operations building is the grounds shop, which is a 2,617-square-foot, single-story, International-style building with a rectangular footprint surrounded by chain-link and wood-slat fencing topped with barbed wire. On the eastern side of Merrimac Way are an auxiliary electric switchhouse and a water treatment plant. The switchhouse is a single-story, utilitarian-style building with concrete-block construction, and is surrounded by manicured grass lawns, concrete walkways, and asphalt-paved roadways. The water treatment plant is comprised of a pumping station and a well, and is surrounded by a modern multi-family residential development.

Smaller scale features that contribute to the character of the campus grounds include sidewalks, manicured lawns, mature trees, vegetation, masonry walls, shade structures, and open outdoor spaces. Additionally, a system of covered walkways is located throughout the central complex at FDC and links various buildings (**Figure 14**). The walkways extend a total of approximately one mile throughout the FDC campus.





**Figure 13:** Plant Operations Complex; facing north / northeast, May 29, 2019.



**Figure 14:** Intersection of Covered Walkways; facing northwest, May 28, 2019.

## 5 Landscape Features

(Prepared by Denise Bradley, Cultural Landscape Historian)

This section provides an overview of the FDC grounds and landscape features. A full recordation and evaluation are provided in the FDC Campus Grounds DPR form found in **Appendix B**.

The landscape setting around the buildings, the roads and parking lots, sidewalks, and the paved outdoor spaces for the residential wards were designed by the State Division of Architecture in conjunction with the facility's buildings. These landscape features were developed in stages between the mid-1950s, when construction started on the buildings, and 1964, when the buildings were completed. The majority of the buildings have a low profile—they are only one or two stories tall, have flat roofs, and have exteriors that are light in color. Lawns (of varying sizes) with tall trees surround the buildings within the core of the campus, around Goodell School, and within the Staff Housing area. The landscape setting is characterized by the repetition of these low buildings and parking lots interspersed with the lawns and tall trees (**Figures 15 and 16**).



**Figure 15:** Landscape setting in front of Administration Building; facing southeast; May 29, 2019 (Denise Bradley).





**Figure 16:** Landscape setting along east side of Activity Center; facing northwest; May 29, 2019 (Denise Bradley).

Pedestrian access to the main entrance of buildings is through this landscaped setting. Concrete sidewalks—generally with a linear alignment—lead to all building entrances; the width of the entrance sidewalks typically indicates the hierarchy of the entrance (i.e., the ones leading to the main entrances are wider than ones leading to secondary entrances). The main entrance sidewalk often expands near the building to form a paved entrance plaza at the same elevation as the sidewalk or at a slight slope so that no stairs are required to enter the building.

The road system and provisions for parking large numbers of automobiles were part of the original design of the Fairview campus. This component of the design was not unique to FDC but was characteristic of most campuses that were developed throughout California during the post-World War II era. These features acknowledged the importance of the automobile in the post-World War II suburban environment and the fact that visitors and staff would most likely arrive by car. The main core of the campus is surrounded by a perimeter street system comprised of Shelley Circle, Eugenia Way, and Florence Way. Streets within the core of the campus connect to this perimeter street system and provide vehicular access to specific groups of facilities and parking.

Parking lots and dedicated street-side parking areas are adjacent to all buildings or complexes. This arrangement provides parking within a short walking distance of all buildings. The street-side parking—consisting of a single row of perpendicular (90 degree) or acute angle parking spaces laid out next to the street—minimizes the need for larger group lots and thereby helps to maintain the continuity of the landscape setting between the buildings. Generally, planting islands define the entrances and the ends of rows in the parking lots; trees and shrubs in these planting islands lessen the impact of the paving and help to integrate the lots with the adjacent lawn areas. Additionally, the entrance drive and parking

arrangement for Buildings K, O, P, Q, T, and U are each organized around a large planting island (**Figures 17 and 18**).



**Figure 17:** Angled parking spaces in front of the activity center; facing southwest, May 29, 2019 (Denise Bradley).



**Figure 18:** Planting island at Building P with ficus trees; facing southwest, May 29, 2019 (Denise Bradley).

The land is level with only a slight slope from the south to the north of the campus. Topographic modifications associated with the development of the campus—grading for roads, parking lots, the foundations for buildings, lawns, and outdoor recreation spaces adjacent to the residential wards—are



not conspicuous. Shannon's Mountain in the far southeast corner of the campus is the only noticeable topographic feature on campus; the trees growing on top of the "mountain" add to the visibility of this group of low mounds, which were created between 1978 and 1982 from construction debris donated by private contractors.

Due to its level terrain and the low profile of the buildings, the mature trees are prominent vertical features in the views across the campus (**Figure 19**). Views outward from the perimeter road (Shelley Circle) are limited to the Costa Mesa Country Club golf courses and the two-story, apartment buildings of Harbor Village. These modern developments also limit views into the campus from Harbor Boulevard and from other adjacent public streets. A chain-link fence runs along the eastern, southern, and western edges of the perimeter road (Shelley Circle) creating a physical boundary between the FDC campus and the Costa Mesa Country Club golf courses. A modern wall along a portion of North Shelley Circle creates a physical boundary between FDC and the Harbor Village housing development.



**Figure 19:** Mature ficus trees along Mark Lane; facing south, May 29, 2019 (Denise Bradley).

The key change to the cultural landscape since the end of the historic period has been the alteration of many of the outdoor recreation spaces that are adjacent to each residential ward. The original design for these outdoor recreation spaces consisted of a large rectangular expanse of pavement with a shade structure at one edge of the pavement. Originally, each outdoor space was surrounded or secured by a fence; sometimes a portion of the adjacent lawn was also enclosed by the fence. Beginning in the mid-1980s and continuing through the 2000s, many of these outdoor spaces were renovated; fences were removed, part or all of the original pavement was removed, and additional grass and new patios and sidewalks were added. Additionally, there has been a gradual reduction in the overall number of trees found throughout the campus; trees have been lost through age, disease, and drought-related stress and have not been replaced. However, the overall design and character of the cultural landscape features associated with FDC retain integrity and contribute to the historic character of the property.

## 6 Resource Evaluations

### 6.1 Eligibility Criteria and Integrity

This study evaluates Fairview Developmental Center for eligibility for listing in the National Register of Historic Places (NRHP) and California Register of Historical Resources (CRHR), and for designation as a California Historical Landmark (CHL). For the NRHP and CRHR, eligibility rests on twin factors of significance and integrity. A property must have both significance and integrity to be considered eligible for listing in either register. Loss of integrity, if sufficiently great, will overwhelm the historical significance of a resource and render it ineligible. Likewise, a resource can have complete integrity, but if it lacks significance, it must also be considered ineligible.

*Historic significance* is judged by applying the NRHP or CRHR criteria of significance at either the local, state, or national level. The eligibility criteria for listing in the NRHP are codified in 36 CFR Part 60. They are further expanded upon in numerous guidelines published by the Keeper of the National Register.<sup>59</sup> The four NRHP criteria are denominated A through D, as follows:

Criterion A: association with “events that have made a significant contribution to the broad patterns of our history”

Criterion B: association with “the lives of persons significant in our past”

Criterion C: resources “that embody the distinctive characteristics of a type, period, or method of construction, or that represent the work of a master, or that possess high artistic values, or that represent a significant and distinguishable entity whose components may lack individual distinction”

Criterion D: resources “that have yielded, or may be likely to yield, information important to history or prehistory.”

The eligibility criteria for listing a property in the CRHR closely parallel those of the NRHP. To be eligible for the CRHR, a resource must meet one of four criteria, delineated 1 through 4 codified in PRC 5024.1 (1)-(4), as follows:

Criterion 1: Is associated with events that have made a significant contribution to the broad patterns of California’s history and cultural heritage.

Criterion 2: Is associated with the lives of persons important in our past.

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<sup>59</sup> The most widely accepted guidelines are contained in U.S. Department of the Interior, National Park Service, *National Register Bulletin 15: How to Apply the National Register Criteria for Evaluation* (U.S. Government Printing: 1997).

Criterion 3: Embodies the distinctive characteristics of a type, period, region, or method of construction, or represents the work of an important creative individual, or possesses high artistic values.

Criterion 4: Has yielded, or may be likely to yield, information important in prehistory or history.

In the application of these criteria significance and integrity are linked. The type of significance and period of significance provides the baseline or standard against which integrity is measured. In addition, a resource must be at least fifty years old in order to be eligible for the California Register or National Register, unless it meets specific and exacting criteria for “Historical resources achieving significance within the past fifty years,” as stated in OHP *Technical Assistance Series #6* for the California Register, or for the National Register, special significance under Criterion Consideration G “a property achieving significance within the last fifty years is eligible if it is of exceptional importance.”

*Integrity* is evaluated by regarding the property’s retention of its location, design, setting, workmanship, materials, feeling, and association to its period of significance. These seven factors can be roughly grouped into three types of integrity considerations. Location and setting relate to the relationship between the property and its environment. Design, materials, and workmanship, as they apply to historic buildings, relate to construction methods and architectural details. Feeling and association are the least objective of the seven factors and pertain to the overall ability of the property to convey a sense of the historical time and place in which it was constructed.

As stated in PRC 5031, designation as a California Historical Landmark calls for a property to fulfill any of the following requirements:

1. Be the first, last, only, or most significant of its type in the state or within a large geographic region (Northern, Central, or Southern California).
2. Be associated with an individual or group having a profound influence on the history of California.
3. Be a prototype of, or an outstanding example of, a period, style, architectural movement or construction or is one of the more notable works or the best surviving work in a region of a pioneer architect, designer or master builder.

If a resource meets the requirements for designation and is designated by the Director of California State Parks as a California Historical Landmark upon recommendation by the State Historical Resources Commission, then it will automatically be listed in the California Register. As stated in Technical Assistance Series 13, under requirements 1 and 2, “If a property has lost its historic appearance (integrity) it may be listed as a site.” It further states under Requirement 3, “an architectural landmark must have excellent physical integrity, including integrity of location.”<sup>60</sup> Integrity of a potential landmark is judged using the seven considerations as discussed above.

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<sup>60</sup> California Office of Historic Preservation, Technical Assistance Series No. 13: How to Nominate a Property as a California Historical Landmark or California Point of Historical Interest (Revised September 2011), 2.

## 6.2 Assessment of Fairview Developmental Center

This section provides a formal evaluation to determine whether Fairview Developmental Center, in whole or in part, meets the criteria for eligibility for listing in the National Register and California Register as a historic district, or if it is a California Historical Landmark. It also analyzes buildings, structures, and objects known to have been constructed in or before 1974 for individual eligibility for the National Register and California Register. The evaluations are based on the comprehensive historic context provided in **Section 3** of this report.

### 6.2.1 Significance of Fairview Developmental Center

#### 6.2.1.1 *National Register Criterion A and California Register Criterion 1*

Fairview Developmental Center is eligible under NRHP Criterion A and CRHR Criterion 1 at a local level of significance because of the important role it played in the California state mental health system from when it began receiving patients in 1959 through to 1969, when its significance began to wane with the passage of the Lanterman Mental Retardation Services Act.

FDC was the first fully modern, post-World War II California State Hospital to be established in Southern California. In the post-war, baby-boom decades, the region experienced exceptionally rapid growth, and the demand for quality housing and therapeutic care for individuals with developmental disabilities quickly exceeded the capacity of existing facilities. When Fairview was first proposed in 1944 it was intended as a state mental hospital, but it changed roles during its planning phase to meet the pressing needs of individuals with developmental disabilities in Los Angeles, San Diego, and surrounding areas. As with Porterville State Hospital (1953) in Central California, Fairview was conceived, designed, and built in order to implement wholly modern therapeutic philosophies, practices, and protocols in regard to the care and treatment of individuals with developmental disabilities. Its completion in 1959 relieved overcrowding at Pacific Colony in Pomona (1927), the only existing regional facility, and symbolized the eclipse of the earlier asylum era in favor of a modern medical model. The build-out of the facility was completed by 1964, around which point it had a population of approximately 2,651 clients and 1,557 employees.

The cultural understanding of mental illness and disability began to shift in the mid-1960s, leading to an era of deinstitutionalization. The passage of the Lanterman Mental Retardation Services Act of 1969 accelerated a trend towards providing out-patient community care in preference to long-term hospitalization. The treatment model that the Fairview center furthered at the time of its opening began to be of less influence and the center experienced a gradual but ultimately near complete draw-down in its resident population.

#### 6.2.1.2 *National Register Criterion B and California Register Criterion 2*

Fairview Developmental Center does not have historical significance under NRHP Criterion B and CRHR Criterion 2. The facility's growth and development during the historic period is closely associated with Doctors Hyman Tucker and Anthony N. Toto, who served as superintendents from 1957 to 1963 and 1963

to 1976, respectively. While Tucker and Toto played important roles in guiding the institution, their performance of their duties was consistent with their role as superintendent and did not significantly separate them from their peers at comparable facilities in the state or nation. They are not known to have innovated any particular model of therapy, nor did they conduct important research into the causes or treatments for developmental disabilities. The accomplishments of the hospital during their tenure are more appropriately captured under Criteria A/1 as discussed above.

No other staff member or client associated with the hospital possesses individual historic significance that would qualify under these criteria.

#### *6.2.1.3 National Register Criterion C and California Register Criterion 3*

Fairview Developmental Center is eligible under NRHP Criterion C and CRHR Criterion 3 at a state level as a good example of a state mental hospital of the post-war era, with a period of significance equal to the build-out between 1953 and 1964. The State Division of Architecture designed all of the buildings and landscape features of the complex as part of a unified whole. Every individual building fit within patterns of circulation and an overall aesthetic. The buildings all exhibit characteristic features of modern architectural design in the International style, including unornamented concrete construction, flat or angled roofs, and flush metal casement windows grouped into linear forms. This design presented a forward-looking aesthetic that captured the optimism of a new era, while also addressing such practical concerns as construction cost and maintenance needs. While both the Sonoma State Home and Pacific Colony added buildings of this type, neither was designed as a modern campus, but rather added to on an incremental basis.

As a property type, the post-war state hospital was frequently described as a “self-contained city,” with its own water and sewage systems and heating and power supplies. Thus, elements of the facility located outside of the main hospital campus, including the water and sewage systems, contribute to FDC’s historical design significance.

Buildings and structures added after 1964, including the swimming pool, both pool houses, and the portable school annex buildings, displayed less adherence to the Division of Architecture’s original design plans. This construction, frequently funded by parent and civic donations, was of a more *ad hoc* nature, employing whatever design was available, expedient, and affordable.

#### *6.2.1.4 National Register Criterion D and California Register Criterion 4*

FDC does not have historical significance under NRHP Criterion D and CRHR Criterion 4. The design and construction of the Fairview facility are well documented in the historical record, and the physical site is unlikely to yield important information about historic building techniques or materials that is not otherwise available.

### **6.2.2 Evaluation as a Historic District**

To be considered as an eligible historic district, a district must be both significant and an identifiable unit. As discussed in **Section 6.2.1**, Fairview Developmental Center has significance at the local and state levels

under NRHP Criteria A and C and CRHR Criteria 1 and 3 for the important role it played in the evolution of public institutional mental health care and as a representative example of a post-war state hospital campus. The period of significance runs from the start of ward construction in 1953 through to passage of the Lanterman Mental Retardation Services Act of 1969. There are 39 buildings and the hospital's historic landscape that date to the period of significance (1953-1969) and which retain sufficient integrity to contribute to the significance of a Fairview State Hospital Historic District. There are also three non-contributing historic-period resources that are located within the Fairview Developmental Center boundary.

The National Park Service guidance on historic districts states that a district gains its significance from being an entity unified by the visual or physical interrelationship of its resources, and must have "a significant concentration, linkage, or continuity of sites, buildings, structures, or objects united historically or aesthetically by plan or physical development."<sup>61</sup> Additionally, the National Park Service provides direction with regard to integrity of historic districts. In order to maintain integrity as a whole, the majority of a district's resources that contribute to its "historic character must possess integrity even if they are individually undistinguished" and "the relationships among the district's components must be substantially unchanged since the period of significance."<sup>62</sup>

The 39 buildings and structures that contribute to the Fairview State Hospital Historic District are listed in **Tables 1 and 2**. Non-contributing survey population resources are listed in **Table 3**. Both contributing and non-contributing built environment resources are graphically represented in **Map 2, Appendix A**. Elements of the grounds are also integral to the district's historic significance, and these features are identified in **Table 4** and in **Map 3, Appendix A**. Each contributing resource is further described on DPR 523 forms located in **Appendix B**.

**Table 2. List of Contributing Resources within the Fairview State Hospital Historic District  
(sorted alphabetically by Resource Name)**

Resource Name	Year Built	DPR 523 Form Name	OHP Status Code*
Fairview State Hospital Historic District	1953-1964	Fairview State Hospital Historic District	3D
Hyman Tucker Activities Center and Lava Lounge	ca. 1961	Activities Center	3D
Anthony N. Toto Auditorium	1964	Auditorium	3D
Auxiliary Electric Switchhouse	ca. 1954	Auxiliary Electric Switchhouse	3D
Central Powerplant and Laundry Building	ca. 1955	Central Powerplant & Laundry Building	3D
Covered Walkways	ca. 1955	Covered Walkways	3D
FDC Campus Grounds	1953-64	FDC Campus Grounds	3D
Alvan H. Goodell Education Center	ca. 1959	Goodell School	3D
Grounds Shop	ca. 1957	Grounds Shop	3D

<sup>61</sup> U.S. Department of the Interior, *Bulletin 15*, 5-6.

<sup>62</sup> U.S. Department of the Interior, *Bulletin 15*, 46.



Resource Name	Year Built	DPR 523 Form Name	OHP Status Code*
Main Kitchen and Shipping / Receiving Warehouse	ca. 1954	Main Kitchen and Shipping / Receiving Warehouse	3D
Plant Operations Warehouse and Shops	ca. 1956	Plant Operations Complex	3D
Auto Shop	ca. 1956	Plant Operations Complex	3D
Vehicle Storage Shed	ca. 1956	Plant Operations Complex	3D
Glass Shop	1958	Plant Operations Complex	3D
Mason Shop	ca. 1961	Plant Operations Complex	3D
Storage Shed	ca. 1961	Plant Operations Complex	3D
Receiving and Treatment (R&T) and Administration Building	ca. 1958	R&T and Administration Building	3D
Residences 11, 12, 13, 14, 15, and 16 (Buildings D, E, F)	ca. 1958	Residences 11 through 16	3D
Residences 17, 18, 19, and 20 (Building B)	ca. 1954	Residences 17 through 20	3D
Residences 21, 22, 23, and 24 (Building K)	ca. 1958	Residences 21-24 and 41-44	3D
Residences 41, 42, 43, and 44 (Building J)	ca. 1958	Residences 21-24 and 41-44	3D
Residence 25 (Building L)	ca. 1958	Residences 25 and 40	3D
Residence 40 (Building M)	ca. 1958	Residences 25 and 40	3D
Residence 26 and 27 (Building Q)	ca. 1963	Residences 26-35	3D
Residences 28 and 29 (Building U)	ca. 1959	Residences 26-35	3D
Residences 30 and 31 (Building T)	ca. 1960	Residences 26-35	3D
Residences 32 and 33 (Building P)	ca. 1962	Residences 26-35	3D
Residences 34 and 35 (Building O)	ca. 1963	Residences 26-35	3D
Residences 36, 37, 38, and 39 (Buildings S1 and S)	ca. 1964	Residences 36-39	3D
Shade Structures	ca. 1955-1964	Shade Structures	3D
Staff Housing Unit 3	ca. 1958	Staff Housing	3D
Staff Housing Unit 4	ca. 1958	Staff Housing	3D
Staff Housing Unit 5	ca. 1958	Staff Housing	3D
Staff Housing Unit 6	ca. 1958	Staff Housing	3D
Transitional Housing Units #47 and #48	ca. 1958	Transitional Housing	3D
Transitional Housing Units #49 and #50	ca. 1958	Transitional Housing	3D
Pump Station	ca. 1953	Water Treatment Plant	3D
Well	ca. 1959	Water Treatment Plant	3D

\*3D – Appears eligible for NRHP as a contributor to an NRHP eligible district through survey evaluation.

**Table 3. List of Non-Contributing / Not Eligible Resources on the Fairview Developmental Center Property (sorted alphabetically by Resource Name)**

Resource Name	Year Built	DPR 523 Form Name	OHP Status Code*
School Annex (North Shelly Circle)	ca. 1971	School Annexes	6Z
School Annex (Pearl Way)	ca. 1974	School Annexes	6Z
Swimming Pool	1971	Swimming Pool	6Z

\*6Z – Found ineligible for NRHP, CRHR, or local designation through survey evaluation.

**Table 4. List of Fairview State Hospital Historic District Landscape Features and Findings**  
(all features date to original construction phases [ca. 1953-64] unless otherwise noted)

Resource Name or Function	Year Built	OHP Status Code*
<b>CIRCULATION FEATURES</b>		
Entrance Streets		
Fair Drive (Alignment altered at intersection with Harbor Boulevard ca. 2006-07)		3D
Merrimac Way (Alignment altered between Plant Operations and intersection with Harbor Boulevard ca. mid-1980s)		3D
Core Streets		
North and South Shelley Circle		3D
Doris Way		3D
Eugenia Way		3D
Florence Way		3D
Gina Way		3D
Gregory Way		3D
Pearl Way		3D
Rosa Way		3D
Staff Housing Street		
Mark Lane		3D
Parking		
Parking Lots		3D
Street-Side Parking (single row of perpendicular or acute angle parking spaces along one side of road)		3D
North side of Florence Way (next to S end of Residences 12/14/16)		3D
Gina Way		3D
North side of Doris Way (next to Residences 38/39)		3D
North side of Rosa Way (near Residences 32/33)		3D
South side of Rosa Way (near Residences 26/27)		3D
South side of Doris Way	ca. 1982-87	6Z
Sidewalks		
Street-side sidewalks		3D
Building entrance sidewalks		3D

ADA modifications (i.e., curb ramps, ramps to building entrances, etc.)	post-1969	6Z
<b>VEGETATION CHARACTERISTICS</b>		
Lawns around buildings within the core of the campus, at Staff Housing, and around Goodell School		3D
Mature trees set within lawns and planting islands		3D
Shrubs and flowering plants	Post-1969	6Z
<b>OUTDOOR RECREATION AREAS AT RESIDENCES</b>		
Original design remains intact		
Residence 17 (two spaces on northeast side of building)		3D
Residence 18 (two spaces on northwest side of building)		3D
Residence 20 (two spaces on southeast side of building)		3D
Residence 25 / Building L (two spaces on south side of building)		3D
Residence 26 / Building Q (west side of building)		3D
Residence 27 / Building Q (east side of building)		3D
Residence 32 / Building P (west side of building)		3D
Residence 34 / Building O (west side of building)		3D
Residence 36 / Building S-1 (south sides of building)		3D
Residence 37 / Building S-1 (south side of building)		3D
Residence 38 / Building S (south side of building)		3D
Residence 39 / Building S (south side of building)		3D
Residence 40 / Building M (two spaces on north side of building)		3D
Design altered after 1969		
Residences 11-16/ Buildings D, E, F	Altered mid-to-late 1980s	6Z
Residence 19 / Building B (two spaces on southwest side of building)	Altered mid-to-late 1980s	6Z
Residences 21-24 / Building K	Altered late-1980s to mid-1990s	6Z
Residences 28 and 29 / Building U	Altered late-1980s to mid-1990s	6Z
Residences 30 and 31 / Building T	Altered late-1980s to mid-1990s	6Z
Residence 33 / Building P (east side of building)	Altered mid-to-late 1980s	3D
Residence 35 / Building O	Altered ca. 2007-09	6Z
Between Residences 36 and 39/ Buildings S and S-1	Altered ca. 2007-09	6Z
Between Residences 37 and 38/ Buildings S and S-1	Altered ca. 2007-09	6Z
Residences 42 and 43 / Building J	Altered mid-to-late 1980s	6Z

Residences 41 and 44 / Building J	Altered ca. 2007-09	6Z
<b>COURTYARDS AT RESIDENCES</b>		
Original design remains intact		
Four courtyards between wings Residences 17-20 / Building B		3D
Courtyard between wings of Residences 26 and 27 / Building Q		3D
Courtyard between wings of Residences 28 and 29 / Building U		3D
Courtyard between wings of Residence 30 and 31 / Building T		3D
Courtyard between wings of Residences 32 and 33 / Building P		3D
Courtyard between wings of Residences 34 and 35 / Building O		3D
Design altered after 1969		
Courtyard between wings of Residences 21-24 / Building K	Altered 1980s	6Z
Courtyard between wings of Residences 41-44 / Building J	Altered 1980s	6Z
<b>GOODELL SCHOOL</b>		
"Picnic Area" on west side of school		3D
Asphalt-paved area west of "Picnic Area"		3D
Field across west side and north end of school		3D
Fenced outdoor space on south side of school	Altered 1971/2017	6Z
<b>STAFF HOUSING</b>		
Front yard features (driveway, entrance sidewalk, lawn, ficus trees)		3D
Back yard features (i.e., fences, patios, vegetation, etc.)	Altered post-1969	6Z
<b>TRANSITIONAL HOUSING</b>		
Driveway		3D
Front yard features (entrance sidewalks and vegetation)	Altered post-1969	6Z
Back yard features (i.e., fences, patios, vegetation, etc.)	Altered post-1969	6Z
<b>OUTDOOR SPACES</b>		
Central Park	Mid-1970s Altered ca. 2015-17	6Z
Horse Stables	ca. 1989	6Z
Lava Lounge		
Concrete patio along south and west sides of building		3D
South side features (CMU wall and two CMU walled planters)		3D
West side features (exposed aggregate patio and two CMU walled planters)		3D
Memorial Park	ca.2000s	6Z
<b>STRUCTURES</b>		
Main Entrance		

Sign and walled planting beds at intersection of Fair Drive and Harbor Boulevard	ca. 2006-07	6Z
Entrance Circle		
Walled planter on east side	ca. 2006-07	6Z
Wooden information kiosk and four lights	ca. 1991	6Z
Fences (chain-link, metal post, vinyl, etc.)	varies	6Z
<b>SMALL-SCALE FEATURES</b>		
Streetscape (i.e., signage, streetlight fixtures, etc.)		6Z
Site Furnishings (i.e., portable shade structures, benches, tables, trashcans, bike racks, swings, plant containers, etc.)		6Z
Edging (concrete edging around planting beds)		6Z
*3D – Appears eligible for NRHP as a contributor to an NRHP eligible district through survey evaluation.		
*6Z – Found ineligible for NRHP, CRHR, or local designation through survey evaluation.		

### 6.2.3 Evaluation as a Cultural Landscape

In *Preservation Brief 36: Protecting Cultural Landscapes*, the National Park Service defined Cultural landscapes as “a geographic area, including both cultural and natural resources and the wildlife or domestic animals therein, associated with a historic event, activity, or person or exhibiting other cultural or aesthetic values,” and delineated four types of cultural landscapes: historic sites, historic designed landscapes, historic vernacular landscapes, and ethnographic landscapes. The publication further defined these types as,

**Historic Designed Landscape** – a landscape that was consciously designed or laid out by a landscape architect, master gardener, architect, or horticulturist according to design principles, or an amateur gardener working in a recognized style or tradition. The landscape may be associated with a significant person(s), trend, or event in landscape architecture; or illustrate an important development in the theory and practice of landscape architecture. Aesthetic values play a significant role in designed landscapes. Examples include parks, campuses, and estates.

**Historic Vernacular Landscape** – a landscape that evolved through use by the people whose activities or occupancy shaped that landscape. Through social or cultural attitudes of an individual, family or a community, the landscape reflects the physical, biological, and cultural character of those everyday lives. Function plays a significant role in vernacular landscapes. They can be a single property such as a farm or a collection of properties such as a district of historic farms along a river valley. Examples include rural villages, industrial complexes, and agricultural landscapes.

**Historic Site** – a landscape significant for its association with a historic event, activity, or person. Examples include battlefields and president's house properties.

**Ethnographic Landscape** – a landscape containing a variety of natural and cultural resources that associated people define as heritage resources. Examples are

contemporary settlements, religious sacred sites and massive geological structures. Small plant communities, animals, subsistence and ceremonial grounds are often components.<sup>63</sup>

While Fairview Developmental Center may be considered a designed historic landscape, it would not be defined as a historic vernacular landscape, historic site, or ethnographic landscape. Historic vernacular landscapes are more appropriately assigned to a geographic area that is unplanned in its design, but which has been shaped by the everyday functions of a person or group of people. Historic sites are those which may not have been shaped by a particular function, but are associated with historically significant events, activities, or people. Finally, ethnographic landscapes are significant heritage sites, generally associated with a particular group of people like a Native American tribe. These sites are defined by their value to and association with a particular culture and include natural and cultural resources. The developmental center campus, while associated with a particular group of people, is not considered a heritage site, and therefore is not an ethnographic landscape.

For consideration as a Cultural Landscape, it is appropriate to assess Fairview Developmental Center as a historic designed landscape, because its grounds are part of an institutional campus, one of the defined examples of cultural landscapes. As stated in *National Register Bulletin 18: How to Evaluate and Nominate Designed Historic Landscapes*, "To qualify for the National Register, a designed landscape must have significance as one of the designed historic landscape types ... and retain integrity of location, design intent, setting, materials, workmanship, feeling, and association and meet National Register criteria."<sup>64</sup>

The campus grounds have been identified as contributing to the significance of the Fairview State Hospital Historic District. However, the campus grounds do not appear to constitute a National Register or California Register-eligible historic designed landscape. The ground's significance is derived entirely from its connection to the function of FDC as a whole, and it has no independent association with important trends or events in landscape architecture. Fairview Developmental Center's campus grounds have been recorded and evaluated on a DPR 523 form located in **Appendix B**.

### 6.3 Evaluation of Individual Resources within the Study Area

As discussed above in **Section 6.2**, the overall developmental center campus meets the criteria as a historic district for both the National Register and California Register. This current study also evaluated all buildings, structures, objects, and landscape features constructed in or before 1974 at Fairview Developmental Center for individual eligibility to these registers. It is the conclusion of this study that none of the buildings, structures, objects, or landscape features evaluated herein are individually eligible for listing in the National Register and California Register. The individual buildings and landscape features do not embody the strength of association necessary to convey the significance of FDC's role in the

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<sup>63</sup> US Department of the Interior, National Park Service, *Preservation Briefs 36: Protecting Cultural Landscapes, Planning, Treatment and Management of Historic Landscapes*, (U.S. Government Printing: nd), 1-2.

<sup>64</sup> US Department of the Interior, National Park Service, *National Register Bulletin 18: How to Evaluate and Nominate Designed Historic Landscapes*, (U.S. Government Printing: nd), 3.

development of California's mental health system, nor do any of them possess significant individual architectural or design merit. These resources are significant only as part of a large complex and are interrelated and dependent on one another to collectively contribute to the successful functioning of the hospital. They are thus appropriately classified as contributors to a historic district.

Please refer to **Table 1** for a full listing of the 39 resources surveyed for this study and their statuses.

## **6.4 Evaluation as a California Historical Landmark**

Fairview Developmental Center does not meet the eligibility requirements to be designated a California Historical Landmark under any of the designation criteria. Under Criterion 1, FDC is not the first, last, nor most significant state facility for people with developmental disabilities in the Southern California region. Under Criterion 2, FDC is not associated with an individual or group that had a profound influence on the history of California. Under Criterion 3, FDC is not an excellent example nor is it a prototype of a state mental hospital of the postwar era. Under that criterion, the Porterville Developmental Center is an earlier and more notable example.

## 7 Preparers' Qualifications

This project was conducted under the general direction of Bryan Larson. A JRP partner, Mr. Larson (MA, Public History, California State University, Sacramento) has 21 years of experience conducting these types of studies. He provided overall direction and guidance, and authored and edited report and DPR 523 form text. Based on his level of experience and education Mr. Larson qualifies as a historian / architectural historian under the Secretary of the Interior's Professional Qualification Standards, as defined in 36 CFR Part 61.

Denise Bradley, ASLA (Master of Landscape Architecture, Louisiana State University) has provided documentation, evaluation, and planning guidance for the wide-ranging types of cultural landscapes found throughout California since 1993 and has worked as the sole proprietor of Denise Bradley Cultural Landscapes since 2003. She conducted fieldwork and was the primary author for the cultural landscape features section of the report. Based on her level of experience and education, Ms. Bradley meets the National Park Service's qualifications standards for Historical Landscape Architects.

JRP historian Toni Webb (B.F.A. in Historic Preservation from the Savannah College of Art & Design) directed field and research studies, and contributed to the preparation of the report and DPR 523 forms. Based on her level of experience and education Ms. Webb qualifies as a historian / architectural historian under the Secretary of the Interior's Professional Qualification Standards, as defined in 36 CFR Part 61.

JRP historian Samuel Skow (MA, Public History, California State University, Sacramento) assisted in fieldwork, research, and preparation of the report and DPR 523 forms. His education and experience in public history qualifies Mr. Skow as a historian under the Secretary of the Interior's Professional Qualification Standards.

JRP historian David Hickman (PhD, History, University of California, Davis) was a primary author of the historical overview. Mr. Hickman's education experience in public history qualifies him as a historian under the Secretary of the Interior's Professional Qualification Standards.

JRP research assistants Michelle Van Meter (MA, Historic Preservation Planning, Cornell University, Ithaca), Angela Rothman (MA, Public History, Loyola University, Chicago), and Erin Jones (MA Candidate, Public History, California State University, Sacramento, in progress) assisted in preparation of DPR 523 forms.

Graphics Technician Rebecca Flores created the graphics utilized in this report and the DPR forms.



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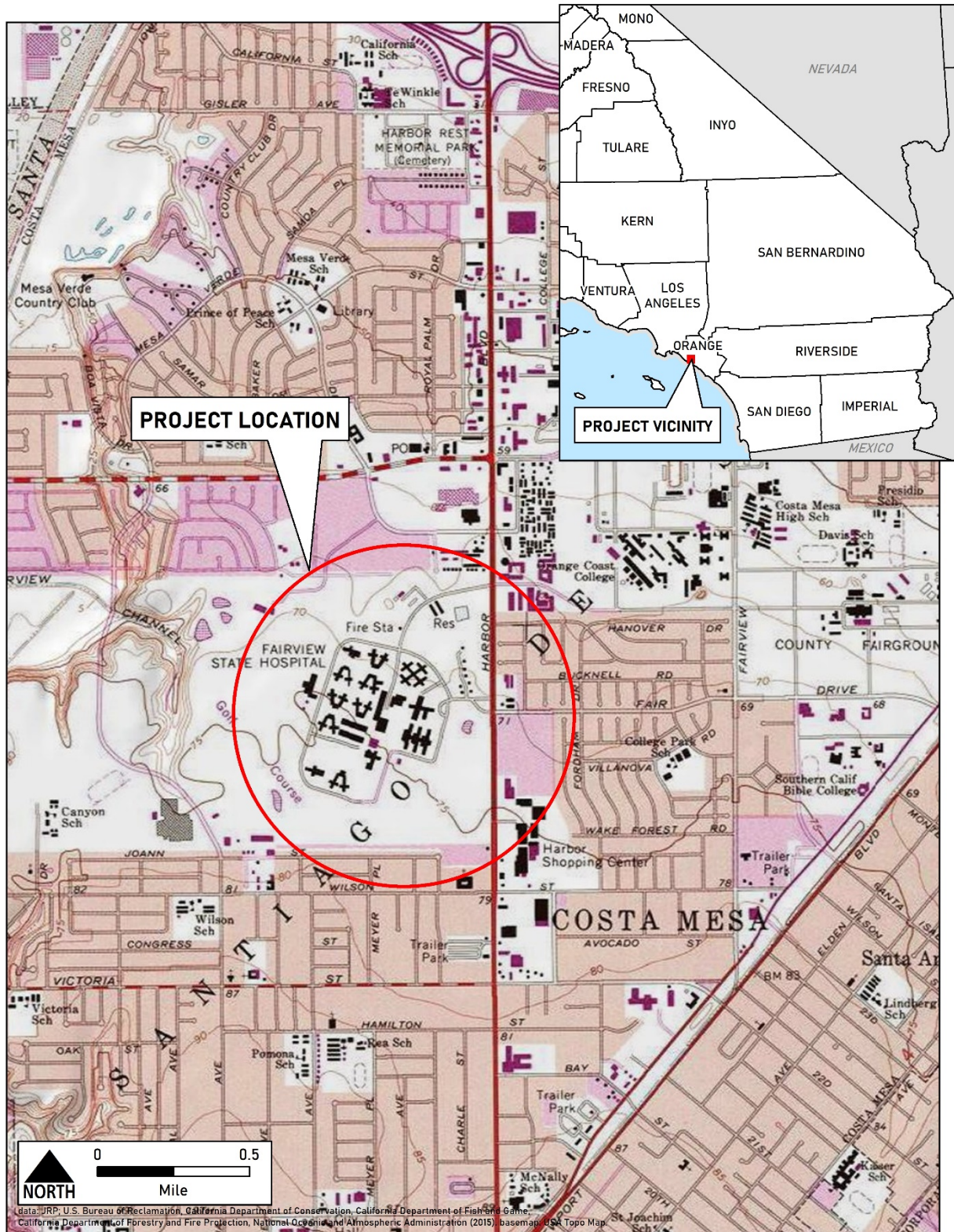
## **Attachments**



**APPENDIX A**

**Maps**







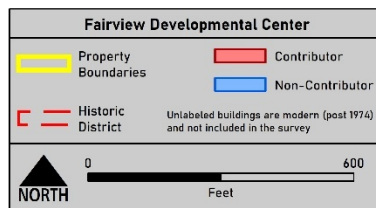
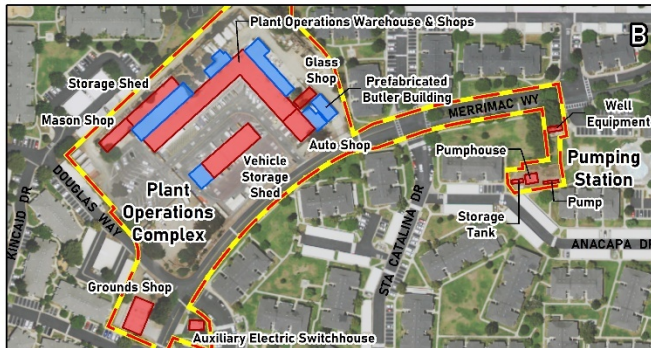




Map 2: Study Area showing Property and Historic District Boundaries







Maps 2A, 2B, and 2C: Historic District Contributors







**Map 3: Grounds and Landscape Features**

(Note: Only non-contributing landscape features are indication on this map. Where not designated, the landscape features – roads, sidewalks, lawns, etc. – contribute to the historic district.)





**APPENDIX B**

**Department of Parks and  
Recreation (DPR) 523 Forms**



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

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\*Resource Name or # (Assigned by recorder) Fairview State Hospital Historic District

**P1. Other Identifier:** Fairview Developmental Center

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1 ¼ of Sec 1; S.B. B.M.

ca. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data: (e.g., parcel #, directions to resource, elevation, etc., as appropriate)

Assessor Parcel Numbers (APNs): 420-012-16, 420-041-02, 420-041-03, and 420-061-03

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form evaluates historic-period (1974 and earlier) buildings, structures, and landscape features at Fairview Developmental Center (FDC), located in Costa Mesa, Orange County (**Site Map**), for National Register of Historic Places (NRHP), California Register of Historical Resources (CRHR), and California Historical Landmark (CHL) eligibility. The study concludes that the "Fairview State Hospital Historic District," reflecting the facility's original name, is eligible for the NRHP and CRHR. The historic district, about 100 acres in size, largely but not entirely encompasses the current boundaries of the FDC campus, bound between North Shelley Circle and South Shelley Circle, with additional areas located along Mark Lane and Merrimac Way (see **District Map**). The historic district contains distinct areas that have historically served as client residences, staff housing, medical and educational buildings, and as administrative and maintenance support facilities, and includes 39 contributing buildings and structures, as well as landscape elements. The FDC campus also includes three non-contributing historic-period buildings that were evaluated herein (see **District Record**).

\*P3b. Resource Attributes: (List attributes and codes) (HP14) Government Building; (HP41) Hospital; (HP 29) Landscape Arch.

\*P4. Resources Present: ☐ Building ☐ Structure ☐ Object ☐ Site ☒ District ☐ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:** (View, date, accession #) **Photograph 1: Receiving & Treatment (R&T) and Administration Building; facing southwest; May 29, 2019**

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
1953 - 1971 (California Department of Public Works; Department of Developmental Services)

\*P7. Owner and Address:  
California Department of Developmental Service

\*P8. Recorded by: (Name, affiliation, address)  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28-29, 2019

\*P10. Survey Type: Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation: Fairview Developmental Center," February 2020.

\*Attachments: ☐ None ☒ Location Map ☐ Sketch Map ☒ Continuation Sheet ☐ Building, Structure, and Object Record ☐ Archaeological Record  
☒ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☒ Other (list) Elements of a District

DPR 523A (1/95)

\*Required Information

\*Resource Name or # (Assigned by recorder) Fairview State Hospital Historic District

D1. Historic Name Fairview State Hospital D2. Common Name Fairview Developmental Center

**\*D3. Detailed Description:**

The Fairview State Hospital Historic District encompasses the main campus area, bound by South Shelley Circle, North Shelley Circle, Eugenia Way, and Florence Circle, with additional district contributors located along Mark Lane to the east and Merrimac Way to the north (see **District Map**). The district contains 39 contributing resources that were constructed during and retain integrity to the period of significance (1953-1969). Please refer to **Table 1** for a listing of contributing resources. Contributing features of the landscape grounds are identified in the FDC Campus Grounds DPR 523 form. There are also three non-contributing historic-period (1974 or earlier) buildings that are located on the FDC campus property (see **Table 2**). None of these were constructed during the period of significance and therefore are not contributors to the historic district. Buildings and structures constructed outside of the historic period (post-1974) were not individually evaluated. In addition, the grounds of the campus area are integral to the district's historic significance (see Continuation Sheet).

**\*D4. Boundary Description:**

As shown in the **District Map**, the majority of the 39 historic district contributors and landscape features are located within the main campus area. The historic district boundary line is generally bound between North Shelley Circle and South Shelley Circle, except in key areas. The boundary extends east along a short stretch of Fair Drive and a north-running stretch of Mark Lane to include the original staff housing units. As of December 2017, the housing units are managed by a private company under a lease agreement and are not under direct state control. However, the historic district boundary extends beyond the state-managed property limits to include this area as it is associated with the historic FDC campus. The boundary also extends north along Merrimac Way, jutting out to include the Grounds Shop, the Auxiliary Electric Switchhouse, the Plant Operations Complex, and the Water Treatment Plant. The boundary likewise extends out to the west from North Shelley Circle to include the Alvan H. Goodell Education Center and recreational field. In the southeast corner, the boundary cuts along Eugenia Way and Florence Circle to avoid including the Swimming Pool Complex and the Mount Shannon Recreation Complex, built after the historic district's period of significance.

**\*D5: Boundary Justification:**

The district boundary contains the vast majority of the main campus area as that area is commonly understood and used by staff, clients, and the public. It extends and contracts at key points to include key residential, support, and educational buildings from the period of significance and to avoid historic-period buildings outside the period of significance. The resources within the district boundary form distinct patient, residential, educational, and support areas, with landscaped grounds, roads, and pathways interconnecting the buildings. When considered as a whole, this grouping of resources has a significant concentration, linkage, and continuity to convey the general character and feeling of the historic district's period of significance.

**D6. Significance: Theme** Treatment of Developmental Disability / Modernist Architecture **Area** California

**Period of Significance** 1953-1969 **Property Type** State Hospital **Applicable Criteria** A/1 and C/3

Fairview State Hospital Historic District appears to meet the criteria for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR). It does not meet the eligibility requirements for listing as a California Historical Landmark (CHL). It is an historical resource for the purposes of the California Environmental Quality Act (CEQA), and has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code. The period of significance begins in 1953, the beginning year of construction on the new developmental center, and extends through 1969, when its significance began to wane with the passage of the Lanterman Mental Retardation Services Act and the advent of the era of deinstitutionalization (see Continuation Sheet).

**\*D7. References:** See Footnotes.

**\*D8. Evaluator:** Samuel Skow

**\*Date of Evaluation:** September 2019

**Affiliation and Address:** JRP Historical Consulting, LLC, 2850 Spafford Street, Davis, CA 95618

**D3. Description (continued):**

**Table 1. List of Contributing Resources within the Fairview State Hospital Historic District  
(sorted alphabetically by Resource Name)**

Resource Name	Year Built	DPR 523 Form Name (attached)	OHP Status Code*
Hyman Tucker Activities Center and Lava Lounge	ca. 1961	Activities Center	3D
Anthony N. Toto Auditorium	1964	Auditorium	3D
Auxiliary Electric Switchhouse	ca. 1954	Auxiliary Electric Switchhouse	3D
Central Powerplant and Laundry Building	ca. 1955	Central Powerplant & Laundry Building	3D
Covered Walkways	ca. 1955	Covered Walkways	3D
FDC Campus Grounds	1953-64	FDC Campus Grounds	3D
Alvan H. Goodell Education Center	ca. 1959	Goodell School	3D
Grounds Shop	ca. 1957	Grounds Shop	3D
Main Kitchen and Shipping / Receiving Warehouse	ca. 1954	Main Kitchen and Shipping / Receiving Warehouse	3D
Plant Operations Warehouse and Shops	ca. 1956	Plant Operations Complex	3D
Auto Shop	ca. 1956	Plant Operations Complex	3D
Vehicle Storage Shed	ca. 1956	Plant Operations Complex	3D
Glass Shop	1958	Plant Operations Complex	3D
Mason Shop	ca. 1961	Plant Operations Complex	3D
Storage Shed	ca. 1961	Plant Operations Complex	3D
Receiving and Treatment (R&T) and Administration Building	ca. 1958	R&T and Administration Building	3D
Residences 11, 12, 13, 14, 15, and 16 (Buildings D, E, F)	ca. 1958	Residences 11 through 16	3D
Residences 17, 18, 19, and 20 (Building B)	ca. 1954	Residences 17 through 20	3D
Residences 21, 22, 23, and 24 (Building K)	ca. 1958	Residences 21-24 and 41-44	3D
Residences 41, 42, 43, and 44 (Building J)	ca. 1958	Residences 21-24 and 41-44	3D
Residence 25 (Building L)	ca. 1958	Residences 25 and 40	3D
Residence 40 (Building M)	ca. 1958	Residences 25 and 40	3D
Residence 26 and 27 (Building Q)	ca. 1963	Residences 26-35	3D
Residences 28 and 29 (Building U)	ca. 1959	Residences 26-35	3D
Residences 30 and 31 (Building T)	ca. 1960	Residences 26-35	3D
Residences 32 and 33 (Building P)	ca. 1962	Residences 26-35	3D
Residences 34 and 35 (Building O)	ca. 1963	Residences 26-35	3D
Residences 36, 37, 38, and 39 (Buildings S1 and S)	ca. 1964	Residences 36-39	3D
Shade Structures	ca. 1955-1964	Shade Structures	3D

Resource Name	Year Built	DPR 523 Form Name (attached)	OHP Status Code*
Staff Housing Unit 3	ca. 1958	Staff Housing	3D
Staff Housing Unit 4	ca. 1958	Staff Housing	3D
Staff Housing Unit 5	ca. 1958	Staff Housing	3D
Staff Housing Unit 6	ca. 1958	Staff Housing	3D
Transitional Housing Units #47 and #48	ca. 1958	Transitional Housing	3D
Transitional Housing Units #49 and #50	ca. 1958	Transitional Housing	3D
Pump Station	ca. 1953	Water Treatment Plant	3D
Well	ca. 1959	Water Treatment Plant	3D

**Table 2. List of Non-Contributing / Not Eligible Resources on the Fairview Developmental Center Property (sorted alphabetically by Resource Name)**

Resource Name	Year Built	DPR 523 Form Name (attached)	OHP Status Code*
School Annex (North Shelly Circle)	ca. 1971	School Annexes	6Z
School Annex (Pearl Way)	ca. 1974	School Annexes	6Z
Swimming Pool	1971	Swimming Pool	6Z

Client residential buildings, also known as wards, date between 1954 and 1964 and are of International-style design. The oldest ward building (Building B / Residences 17-20) is located in the northeast quadrant of the main campus. The former Acute Infirm Wards (Buildings D, E, and F / Residences 11-16) are conjoined and located adjacent to the Receiving & Treatment (R&T) and Administration Building in the northeast quadrant of the main campus. All other client residential wards are located in the western half of the main complex, west of Pearl and Gregory Ways. The buildings are all constructed out of concrete, with Building B featuring a unique X-shaped footprint, Buildings D, E, and F linked by a long central corridor, and Buildings J, K, O, P, Q, T, and U featuring virtually identical V-shaped footprints. The adjoined S and S-1 buildings feature irregular rectangular footprints, and Buildings L and M feature identical irregular T-shaped footprints. The buildings are all single-story with flat roofs, except for Buildings J and K, which are two storied. Client residences are set within manicured lawns and courtyards with mature trees and concrete walkways. Surrounding the residential complexes are asphalt-paved parking lots and roadways. A population of shade structures are located throughout these client residential courtyards.

FDC Staff Housing (Units # 3, 4, 5, and 6) are single-family Ranch-style residences built in 1958 and located on the east side of Mark Lane north of Fair Drive. On the west side of Mark Lane are the former staff duplexes (Transitional Housing Units #47, 48, 49, and 50), which were likewise built about 1958 in the Contemporary style.

Along the western edge of the main campus area is an educational and recreational area. The Alvan H. Goodell Education Center, FDC's main educational facility, is a large International-style building with an irregular footprint located west of North Shelley Circle. To the rear (west) of the school building is a large recreational field. Also included in the educational and recreational complex at FDC are the Hyman Tucker Activities Center and Lava Lounge as well as the Anthony N. Toto Auditorium. The activities center and auditorium were both designed in the International style and are located adjacent to one another in the southeast quadrant of the main campus area at the intersection of Pearl and Eugenia ways. All buildings are surrounded by manicured grass lawns with mature trees, concrete walkways, and asphalt-paved parking lots.

The main medical buildings comprise the Receiving & Treatment (R&T) and Administration Building located near the entrance campus entrance. This building has two multi-story sections and an irregular footprint, and was built about 1958 in the International style.

The support buildings are clustered near the center of the complex as well as the northern fringe of the district, outside the boundaries of the main campus area. In the center of the complex are the Laundry Building and Central Powerplant, a utilitarian



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\*Resource Name or # (Assigned by recorder) Fairview State Hospital Historic District

building with Modernistic elements and an irregular footprint constructed circa 1955; and the Main Kitchen and Shipping-Receiving Warehouse, a Contemporary-style, multi-sectional building with an irregular footprint constructed about 1954. North of the main campus area are the utilitarian Grounds Shop (former fire house), the Auxiliary Electric Switchhouse, the Plant Operations Complex, and the Water Treatment Plant.

A network of covered walkways also serves as the utilities distribution system and winds throughout the main campus area. Paved roads and grass lawns are the dominant landscape features. For individual descriptions of the district elements, see the attached Primary Records and Continuation Sheets.

## D6. Significance: (Continued)

### *Research and Survey Methodology*

JRP Historical Consulting (JRP) conducted this survey and evaluation of Fairview Developmental Center (FDC) to assist the California Department of Developmental Services (DDS) in obtaining Office of Historic Preservation (OHP) concurrence on Public Resources Code (PRC) 5024 and 5024.5 compliance. JRP inventoried all state-owned buildings, structures, and objects constructed in or before 1974 (i.e., at least 45 years old at the time of survey) within the extant property boundary of the FDC. The 39 historic-era resources became the survey population for this study. JRP evaluated all the surveyed resources using National Register of Historic Places (NRHP), California Register of Historical Resources (CRHR), and California Historical Landmarks criteria. Denise Bradley Cultural Landscapes (Denise Bradley) surveyed and evaluated the landscape grounds and features across the entire facility. The study area for this project included the legal boundary of the developmental center property (see District Map).

The California Department of General Services (DGS) and DDS provided an inventory list of buildings and structures located on FDC (dated June 2017) to JRP. This real property listing formed the basis for creating the list of survey population resources for this project. Some additional resources not included on the center's inventory list – particularly landscape features – were identified during the course of fieldwork and research and added to the survey. While the inventory list provides dates of construction for most of the survey population resources, occasionally JRP's research concluded that the provided date did not reflect the year that the building or structure was actually completed. In those cases, the current study reports the built date (sometimes approximate) as determined through research (see **Tables 1** and **2**). JRP also reviewed current and historic topographic and property maps, historic aerial photographs, and other documents including the results of previous studies of historic properties.

JRP conducted general historic and site-specific research in primary and secondary source materials to develop a historic context relevant to the development of the California State Hospital system, the evolving standards of care for individual with developmental disabilities, and the architectural design of postwar public hospital complexes. Research was conducted at the DGS "Plans Vault" in West Sacramento; California State Library and California State Archives in Sacramento; the Costa Mesa Historical Society library and archives; Porterville Developmental Center Archives; JRP's in-house library; and relevant online resources including newspaper and aerial photograph databases. JRP also reviewed the California Historical Resources Information System (CHRIS), California Historical Landmarks and Point of Historical Interest publications and updates, and NRHP, CRHR, and local register listings. JRP shared this information with Denise Bradley to inform the cultural landscape evaluation.

JRP and Denise Bradley conducted fieldwork between during the week of May 28, 2019, to record the survey population of built environment properties and landscape features, respectively. Each resource was inspected, photographed, and documented within this Department of Parks and Recreation (DPR) 523 form set. JRP prepared DPR 523 forms according to the California Office of Historic Preservation's "Instructions for Recording Historic Resources" (March 1995). Each form includes digital photographs, sketch maps, building descriptions, and an eligibility evaluation and assessment of historic integrity. Information regarding the character-defining features of resources is presented on forms of resources that are eligible for listing in the NRHP and CRHR, or as a component of a California Historical Landmark. As part of the inventory process, JRP grouped some buildings, structures, and objects together on forms to facilitate evaluation, per standard practice. The groupings were based on similar design or use pattern and/or functional use in a specific geographic area of FDC.

JRP staff evaluated the built environment properties to determine their eligibility for listing in the NRHP and CRHR. Denise Bradley evaluated the landscape features to the same standard. JRP staff qualify as historians and/or architectural historians under the Secretary of the Interior's Professional Qualification Standards, as defined in 36 CFR Part 61. Ms. Bradley meets the National Park Service's qualifications standards for Historical Landscape Architects. The results of those evaluations are presented in this district form (summarized in **Tables 1 and 2**) and in the associated DPR 523 forms for the individual resources of the FDC.

### *Early History (1850-1945)*

The first American institutions to provide specialized care for individuals with developmental disability appeared around the midpoint of the nineteenth century. Beginning in 1847, the states of the Northeast and the Upper Midwest established small, experimental schools to provide educational and vocational training to young students who were expected to then return to their communities and take up productive roles. The operators of these early schools were generally optimists who believed that mental deficiency was a largely correctable condition. In 1885, California became the first of the western states to operate a public facility for individuals with developmental disabilities when it funded the school that later evolved into the Sonoma Developmental Center.<sup>1</sup>

By the end of the nineteenth century, most of the original small schools had grown to become large asylums that increasingly provided life-long custodial care. Symbolizing the change, the second generation of leaders was composed almost universally of physicians who were tasked with managing the smooth functioning of the institutions, rather than educators whose responsibilities included developing innovative teaching methods. Physically, the expanding programs required both more land and larger buildings. The so-called Kirkbride model, named after Dr. Thomas Kirkbride of Pennsylvania, became the dominant institution form. The central Kirkbride building was a large, castle-like structure that centralized all hospital services and combined multiple floors of gender-segregated wards where patients lived and received treatment. The building was set within a rural landscape of agricultural fields and scenic walkways that was intended to offer both economic sustenance for the hospital and therapy for its inhabitants. The Sonoma home followed this model and a portion of its main Kirkbride building still survives.<sup>2</sup>

As custodial care replaced the earlier educational focus, most states combined the administration of facilities devoted to developmental disability with their programs for treating mental illness. At the time, the conditions were conceived of as interrelated and roughly comparable in their medical and social origins and affects. In 1903, the California Legislature centralized control over all of the state asylums under a newly-established Commission of Lunacy. This placed the Sonoma facility alongside the state mental hospitals of Stockton, Napa, Agnews, Patton, and Mendocino. In 1921, the state established the Department of Institutions, and gave it responsibility for all of California's prisons, reform schools, and state hospitals. A second state facility for the care of people with developmental disabilities, Pacific Colony, opened in southern California in the same year. Pacific Colony briefly closed in 1923 and then reopened in 1927 in a new location in the Pomona Valley.<sup>3</sup>

Economy of operations was a chief focus for the early twentieth-century institutions. States expected the hospitals to aim for self-sufficiency, even if few ever closely approached that goal. Able-bodied residents engaged in "occupational therapy" that consisted of agricultural or industrial labor in the extensive fields, orchards, kitchens, and laundries that kept the institutions functioning. At facilities for individuals with developmental disability, higher-functioning young adults provided care for children and adults with greater needs. Medical treatment consisted principally of hydrotherapy, used for calming agitated patients. Architecturally, the emphasis on economy produced a gradual transition away from the Kirkbride model to the

<sup>1</sup> James W. Trent, *Inventing the Feeble Mind: A History of Mental Retardation in the United States* (Berkeley: University of California Press, 1994), 46-59; Philip Ferguson, "The Development of Systems of Supports: Intellectual Disability in Middle Modern Times (1800 to 1899)," in Michael Wehmeyer, ed., *The Story of Intellectual Disability: An Evolution of Meaning, Understanding, and Perception* (Baltimore: Paul H. Brookes Publishing Co., 2013), 85-90. The history of the Sonoma facility is addressed in JRP Historical Consulting and Denise Bradley, "Historical Resources Inventory and Evaluation Report, Sonoma Developmental Center," February 2018.

<sup>2</sup> Trent, *Inventing the Feeble Mind*, 79-84; Gerald Grob, *The Mad Among Us: A History of the Care of America's Mentally Ill* (New York: The Free Press, 1994), 71-74; Carle Yanni, *The Architecture of Madness: Insane Asylums in the United States* (Minneapolis: University of Minnesota Press, 2007), 51, 58-62, 123.

<sup>3</sup> Department of Institutions, *Second Biennial Report of the Department of Institutions* (1924), 9.

Cottage Plan, which dispersed patients among numerous small buildings based upon their demographics and medical needs. The small cottages were cheaper to construct and could be added to as needed without having to worry about an overall architectural model. The cottages were given a home-like appearance that were intended to be more welcoming than the massive, imposing Kirkbride edifices.<sup>4</sup>

Beginning in the late 1910s, hospital superintendents, and particularly Dr. Fred Butler at Sonoma, embraced the pseudo-science of eugenics, a field then widely popular but now thoroughly discredited. As a set of beliefs, eugenics held that heredity by itself could explain most instances of mental illness and deficiency, along with much of an individual's propensity to crime, alcoholism, and sexual immorality. To treat these social problems, eugenicists argued for removing "deficient" individuals from the larger breeding pool. Sonoma State Home and Pacific Colony collectively performed sterilization operations on more than 7,000 patients in an attempt to realize this objective. State political and judicial officials encouraged the new role and directed a large number of juvenile offenders to the institution, even when the young men and women showed no clear evidence of developmental disability.<sup>5</sup>

The resulting rapid growth of the 1920s and 1930s strained the system of care for people with developmental disabilities. Nearly every facility nationwide operated in excess of its official capacity, and waiting lists ran into the hundreds or thousands. Overcrowding was at the root of a host of other problems, including unsanitary conditions, a lack of privacy, inadequate diets, and insufficient staffing levels. Through the Great Depression, states held steady their levels of spending, or even cut back, as caseloads climbed because families could no longer support the disabled at home. Educational efforts faltered, medical care became regimented, and safety hazards loomed. Parents that could afford to send their children to private facilities did so, and the public hospitals developed associations with poverty, shame, and neglect.<sup>6</sup>

World War II marked a turning point for the institutions. The draft initially drained hospitals of their physicians and hired attendants, but ultimately the military ended up training large numbers of psychiatrists, effectively doubling the supply of mental health professionals that would be available after the war. Non-combatant conscientious objectors (COs) helped to fill the manpower shortage at the nation's developmental institutions during the war, and these men became some of the most forceful critics of the deteriorated status quo. By the end of the war, a collective of COs published a monthly journal, *Psychiatric Aide*, and in 1946, they organized the National Mental Health Foundation, a layperson's organization that advocated for improved care for individuals with mental illness or disability. Journalists followed up on the critique launched by the COs and published several exposés in the immediate post-war years that drew public attention to the shortcomings of the nation's asylums.<sup>7</sup>

#### *Post-War Expansion (1945-1962)*

World War II and rapid demobilization after the end of hostilities in 1945 altered virtually every aspect of California society. Military bases and war-industry jobs drew massive numbers of migrants to the state, and whole new communities were created to accommodate them and returning service members. The state hospitals, already over capacity, accepted more patients, including large numbers of veterans. The material needs of the war prevented any significant construction at the state hospitals for the duration of the fighting, but state leaders began planning early to meet post-war needs. Governor Earl Warren, who took office in 1943, established a building fund that allocated over \$10 million for new construction. The state also moved to reorganize its mental health system. The state hospitals had been overseen by the Department of Institutions since 1921, where they were grouped together with the state prisons and reform schools. In 1945, the hospitals were separated out from other institutions and placed under the newly created Department of Mental Hygiene. Facilities for people with developmental

<sup>4</sup> Grob, *The Mad Among Us*, 107-109; Yanni, *The Architecture of Madness*, 80-83.

<sup>5</sup> Trent, *Inventing the Feeble Mind*, 140-146; Alex Wellerstein "State of Eugenics: Institutions and Practices of Compulsory Sterilization in California," in Sheila Jasanoff, ed., *Reframing Rights: Bioconstitutionalism in the Genetic Age* (Cambridge: MIT Press, 2011), 30-51.

<sup>6</sup> J. David Smith, Steven Noll, and Michael L. Wehmeyer, "Isolation, Enlargement, and Economization: Intellectual Disability in Late Modern Times (1930 CE to 1950CE)," in Wehmeyer, ed. *The Story of Intellectual Disability*, 163.

<sup>7</sup> Trent, *Inventing the Feeble Mind*, 227-230; Albert Deutsch, *Shame of the States* (New York: Harcourt, Brace and Company, 1948) 166-168; Henry P. Pohler, Ph.D., ed., "Historical Overview," 22 in *Historical Perspectives of State Hospitals and Developmental Centers*, 1991, D-490, Box 23, Folder 4, Henry Pohler Collection, Department of Special Collections Department, University Library, UC Davis; Albert Deutsch, *Shame of the States* (New York: Harcourt, Brace and Company, 1948).

disabilities remained grouped with mental health hospitals until 1978, when they moved to the Developmental Services Department.<sup>8</sup>

In March 1949, Governor Warren held a highly influential two-day conference that gathered experts and community members to plan the future of California's mental health care system. The participants and governor ultimately adopted a three-point program to reform the old system. Establishing community-based prevention programs would allow for the early detection and local treatment of mental illness and disability; custodial care would be replaced with modern medical and psychotherapeutic treatment; and a major construction program would update and supplement the existing hospitals. The problems that had plagued the hospitals in the past – poor living conditions, industrial therapy geared towards the hospital's needs, and limited opportunities for socialization – were identified and solutions proposed.<sup>9</sup> Six months after the conference, Governor Warren appointed Dr. Frank F. Tallman as head of the Department of Mental Hygiene and tasked him with implementing the conference recommendations. By the end of the year, the state legislature had appropriated \$110 million for state hospital construction.<sup>10</sup>

The postwar building program launched with a series of dramatic demolitions. The main Kirkbride “castle” building at Napa State Hospital was demolished in early 1950 to symbolize the ending of the asylum era. Another 47 state hospital buildings were condemned throughout the state and an additional number remodeled.<sup>11</sup> New buildings were constructed at a rapid rate through the 1950s to meet the expanding demand. Nationally, more new mental health facilities were completed in the two post-war decades than in any other period of American history.<sup>12</sup> In California, two entirely new hospitals were added to serve individuals with developmental disability: Porterville (opening 1953) and Fairview (1959). Several state hospitals that principally focused on mental illness – DeWitt, Patton, and Agnews – also added beds for clients with developmental disability.<sup>13</sup> In general practice, clients were admitted to the facility nearest to their family's residence, with Sonoma receiving most of its population from northern California, Porterville from the central counties, and Pacific and Fairview from southern California.<sup>14</sup>

The new facilities filled as rapidly as they were constructed because an increasing number of parents sought state care for their children with developmental disabilities. The population of those in care nearly doubled between 1950 and 1962 from 6,500 to 12,000, with an additional 2,000 on waiting lists.<sup>15</sup> The baby boom accounted for some of the increase, but changed attitudes also led more middle and upper-class parents to demand access to public care. In contrast to the pre-war decades, when social stigma and private shame kept many families from publicly acknowledging their relatives with disability, a body of confessional literature in the 1950s brought the issue into the open. Writers as diverse as the Pulitzer-prize winning novelist Pearl Buck and country entertainers Dale Evans and Roy Rogers wrote about their experiences as parents of children with Down syndrome and other conditions.<sup>16</sup> In the absence of wide-spread special education programs or community-based

<sup>8</sup> George Nelson, *Mental Health Care in California, 1849-1974* (1975), 6, Folder 20, Box 6, D-490, Henry Pohler Collection, UC Davis, Shields Library, Department of Special Collections; “Improvements Slated for State Hospital,” January 11, 1978, reprinted in 35<sup>th</sup> PDC anniversary edition of *Porterville Recorder*, June 3, 1988.

<sup>9</sup> Gabrielle Morris, *Earl Warren and the State Department of Mental Hygiene: Oral History Transcript / and Related Material, 1970-1973* (Regional Oral History Office, Bancroft Library, University of California Berkeley, March 1, 1973), 90-93; Susan Salter, “Toward Community Health: A History of State Policy in California, 1939-1969,” Ph.D. dissertation, University of California, Berkeley, 1978, 29-30, 119-120; California Department of Mental Hygiene, “Pattern of Progress,” 1962, 14-16.

<sup>10</sup> Gabrielle Morris, *Earl Warren and the State Department of Hygiene*, 37, 50; California Department of Mental Hygiene, *Biennial Report for 1950-1952 State of California Department of Mental Hygiene* (Sacramento: California State Printing Office, 1953), 22-24.

<sup>11</sup> California Department of Mental Hygiene, “Pattern of Progress,” 1962, 7.

<sup>12</sup> Trent, *Inventing the Feeble Mind*, 238, 250.

<sup>13</sup> “Treatment of Retarded Has Greatly Improved,” *Sonoma Index-Tribune*, November 22, 1966.

<sup>14</sup> California Department of Mental Hygiene, *Statistical Report for the Year Ending June 30, 1960* (Sacramento: California State Printing Office, 1960), 79; California Department of Mental Hygiene, “Existing and Proposed Future Programs of the Department of Mental Hygiene for the Mentally Retarded,” April 1964, 1.

<sup>15</sup> California Department of Mental Hygiene, “Pattern of Progress,” 1962, 35.

<sup>16</sup> Trent, *Inventing the Feeble Mind*, 230-237; Michael L. Wehmeyer and Robert L. Schalock, “The Parent Movement: Late Modern Times (1950 CE to 1980 CE),” Wehmeyer, ed. *The Story of Intellectual Disability*, 188-192; Smith, et al., “Isolation, Enlargement, and Economization,” 180-182.

support, many parents felt unable to care for children with developmental disabilities at home, but instead advocated for quality care at state facilities. This led to improved amenities and therapeutic programs at state hospitals including such things as nature camps and music education. Parent groups directly funded the construction of swimming pools at Fairview, Porterville, and Pacific.<sup>17</sup>

The buildings constructed at the new facilities combined fundamentals of the earlier Cottage Plan model with a modern aesthetic that fit with the state's emphasis of bringing developmental service care into a new era. The ward buildings had layouts and floor plans that drew from the Cottage Plan model, though generally on a larger scale and with greater emphasis on medical technology. Each hall housed in the neighborhood of 50 residents, segregated by age, sex, and condition. Wards were arranged to provide convenient access to community facilities such as dining rooms, recreation halls, and auditoriums. The residential buildings were intended to be attractive and welcoming, avoiding the institutional feel of bare walls and uncomfortable furniture, but they made less effort than the prior Cottage Plan model to duplicate a home-like setting. The architecture tended towards contemporary styles, including International, which was popular because of its economy and utility, as well as its forward-looking aesthetic.<sup>18</sup>

Hospital staffing was also modernized. More than 20 different types of trained professionals were added to hospital rosters, including pathologists, psychiatric nurses, chaplains, and recreational and music therapists. The bulk of ward-level employees were nonmedical personnel who had previously been identified as "attendants" and received little specialized training. Beginning in 1951, this group was renamed "Psychiatric Technicians" and began receiving year-long training that included 300 hours of classroom time and extensive ward experience. College psychology courses were occasionally taught on the hospital grounds, and in 1958, a Department of Professional Education was established to provide post-graduate education for physicians and psychiatrists. The State Department of Mental Hygiene also sought to build an active research program at every state hospital. By 1959, there were 160 separate research programs underway at the various hospitals, financed by \$2.5 million in combined state and federal funds.<sup>19</sup>

#### *Deinstitutionalization (1963-Present)*

Large institutions devoted to treating mental illness and developmental disabilities began to decline in the 1960s as the result of a national movement towards decentralized, community-based care. California was an early leader in the trend, passing the Short-Doyle Act in 1957, which implemented mental health services in each county through organizing and funding locally-controlled community mental health programs. Short-Doyle provided a 50-50 state and local funding system to develop mental health clinics. It also applied public health principles to mental illness and developmental disabilities. Politicians, psychiatrists, and hospital administrators hoped that shifting money to community care would result in a reduction of state hospital patient populations. However, populations continued to rise into the 1960s. It was not until Congress passed the National Mental Health Act of 1963 to provide federal matching funds for community health centers that significant reductions were seen at state hospitals including those for people with developmental disabilities.<sup>20</sup>

The day after Congress passed the National Mental Health Act, the California State Assembly held the initial meeting of its new Subcommittee on Mental Health Services. For the first time, the state legislature undertook an independent, systematic study of the entire mental health system. Among those serving on the subcommittee was Assemblyman Frank Lanterman, a

<sup>17</sup> Trent, *Inventing the Feeble Mind*, 250-251; Wehmeyer and Schalock, "The Parent Movement," 182.

<sup>18</sup> California Department of Mental Hygiene, *Biennial Report for 1950-1952 State of California Department of Mental Hygiene* (Sacramento: California State Printing Office, 1953), 15, 23-24, 59; California Department of Hygiene, "The Modern Psychiatric Hospital by Dr. Lawrence Kolb," circa 1950, 4-5, on file at the California State Library. The November 1956 issue of *Architectural Record* (Vol. 120, No. 5) featured a building types study of mental hospitals that present contemporary thinking through a series of case studies, including one focused on PDC with photographs by Julius Shulman: "California Hospital for Mental Defectives," 220-225.

<sup>19</sup> California Department of Mental Hygiene, "Pattern of Progress," 1962, 8-12; Sonoma State Hospital, "Challenge: The Story of Sonoma State Hospital" [brochure] (Sacramento: State Printing Office, 1964); "State Takes New Tack on Mental Illness," *San Francisco Chronicle*, July 26, 1959.

<sup>20</sup> California Health and Welfare Agency, Department of Mental Health, "Trends in Admission, Inpatients and Discharges of the Mentally Disabled in State Hospitals 1851-1986," July 1, 1987, 5, Folder 22, Box 24, D-490 Pohler, Henry Collection, University Library, Department of Special Collections, UC Davis; Anitra Hurley, "Portia Bell Hume, MD: Architect of California's community mental health program," *California's Health* (November 1972): 9-10, 69.

conservative Republican representing La Canada, who shaped much of the investigation's direction and its resulting conclusions. The subcommittee ultimately proposed a series of legislative acts that fundamentally transformed the delivery of mental health care within California, shifting it away from centralized state hospitals towards community care.<sup>21</sup>

The subcommittee opened its activities by addressing the state's responsibilities in caring for individuals with developmental disability. The committee report, released in 1965, concluded that state hospitals were being over-utilized while community assets remained untapped. In too many cases, the subcommittee found, families were institutionalizing their children or adult dependents with developmental disabilities simply because of a lack of resources or alternatives. This practice separated individuals from their friends and families and isolated them from ordinary community social interactions, while unnecessarily increasing costs for the state. The report recommended the establishment of local centers that could assess clients' needs and provide counselling and placement assistance. The regional center concept was enacted in law in 1966, launching pilot programs in Los Angeles and San Francisco. During their first year, the two centers served 559 people, allowing many of the clients to avoid placement in a state hospital.<sup>22</sup>

In 1967, the subcommittee authored and passed the Lanterman-Petris-Short Act that overhauled the commitment process for mental illness, setting strict procedural standards for involuntary holds. The act had far reaching consequences for the state mental health system. It gave formal recognition to the civil liberties possessed by individuals with mental illness and led to large numbers of clients shifting from state hospitals to county resources. Because the commitment process for developmental disability and mental illness were separate, the act had only an indirect impact on Fairview, Porterville, Sonoma, and Pacific Colony. Several of the state hospitals specializing in mental illness were forced to either close or reinvent themselves by starting programs for people with developmental disabilities. This led to the transfer of many clients from the four developmental-focused facilities to other state hospitals.<sup>23</sup>

More directly impactful for people with developmental disabilities was the Lanterman Mental Retardation Services Act of 1969 which expanded upon the 1966 pilot programs to establish the regional center system that remains in place today. By 1971, 13 regional centers had opened, and the current total of 21 centers was reached in 1976. Services were expanded in 1973 to include individuals with other developmental disabilities such as cerebral palsy, epilepsy, and autism. It required an expansion of Medicaid in the early 1980s for the system to be fully realized, but by 1985 more than 78,000 individuals were receiving community-based services through the regional centers, compared to the approximately 7,100 residing in a state facility.<sup>24</sup>

In 1976, the Lanterman Developmental Disabilities Services Act, commonly referred to as simply "the Lanterman Act," further developed the 1969 act by providing greater access to services and more support for independent living. The act took the important step of directly acknowledging the civil liberties of individuals with disability, declaring that "persons with developmental disabilities have the same legal rights and responsibilities guaranteed all other person by federal and state constitutions and laws." The regional centers were charged with advocating for and protecting those rights. Among the specific liberties that the act recognized were the rights to dignity and privacy; access to appropriate public education; the provision of services that protected liberty and made use of the fewest possible restrictions; regular access to social interaction through community activities; and meaningful control over the choices in one's own life. Today, the Lanterman Act remains the basic instrument for defining the state's obligations towards Californians with developmental disabilities.<sup>25</sup>

<sup>21</sup> Salter, "Toward Community Mental Health," 308-311.

<sup>22</sup> Salter, "Toward Community Mental Health," 312; Association of Regional Center Agencies, "History of the Developmental Disabilities Service Delivery System in California," <http://arcanet.org/pdfs/HistoryOfSystem.pdf>, accessed September 2019; Alta California Regional Center, "History of Regional Centers & the Lanterman Act," <http://www.altaregional.org/history-regional-centers>, accessed September 2019.

<sup>23</sup> Salter, "Toward Community Mental Health," 338-340; Dudek, "Final Historic Resource Assessment Report for Lanterman Developmental Center, Pomona, Los Angeles County, California, (February 2016), 21-22; "Historical DD Highlights at Napa State Hospital," (File: Misc. Talks & NSH History, Manor House Archives, Napa State Hospital).

<sup>24</sup> Alta California Regional Center, "History of Regional Centers & the Lanterman Act;" Dudek, "Lanterman Developmental Center," 23-24.

<sup>25</sup> Alta California Regional Center, "History of Regional Centers & the Lanterman Act."



The Department of Mental Hygiene made its own innovations during the pivotal years of the late 1960s and early 1970s. In 1970, a pilot program was launched to tailor care to each individual's needs through the use of an Interdisciplinary Team (IDT) approach, in which clinical services were clustered into various program organizations, including orientation and mobility development; behavior intervention and autism services; and physical and social development. All clinical staff, excluding physicians, were then assigned to a particular program and supervised by that program director. This meant, for example, that teachers were no longer all grouped together under a principal but were divided up to work on the individual program IDTs, overseen by the program director. Porterville implemented the IDT system of care in 1971. In 1978, all of the state's developmental service programs were transferred out of the vast Department of Health into the new, smaller, and more-focused Department of Developmental Services (DDS).<sup>26</sup>

The tightening of federal fire, safety, and environmental regulations also led to an overhaul of the ward living units at the state hospitals. Between 1978 and 1982, California spent \$151.4 million to bring all of the state hospitals into compliance and to provide for great privacy and dignity in the living accommodations. Dormitory bay rooms that had previously been filled with as many as 100 beds were converted into either private or semi-private rooms shared by no more than four individuals. Every client now received their own furniture, to include a dresser and wardrobe. Large and noisy "days halls" were made over as cozier living rooms. Bathrooms that previously offered little to no privacy, with dozens of unscreened toilets arrayed in rows, were replaced with smaller restrooms shared between two rooms. These changes fundamentally transformed the experience of residing at a state facility and brought living conditions closer to a home environment than ever before.<sup>27</sup>

By the end of the 1970s, the era of the large custodial institution had largely passed. Disability activists had succeeded in opening up opportunities for people with developmental disabilities by expanding special education programs and finding areas for paid employment. Through greater and more favorable media coverage, and programs like the Special Olympics, the public image of disability changed. For a great number of people with mild to moderate developmental delays, life-long custodial care no longer seemed necessary, desirable, or appropriate. Between 1970 and the mid-1990s, 44 institutions in 26 states closed. The number of people in institutional care throughout the nation fell from the 1967 high of 194,650 to below 90,000 by 1990. The state hospital client base increasingly tended towards individuals with more severe disabilities that required intensive care. Yet clients remained diverse in their mental, physical, and emotional challenges as well as their individual needs. Even as their overall populations fell, the developmental centers continued to meet the needs of this diverse population by providing medical and advanced therapeutic care in a residential environment.<sup>28</sup>

#### *Fairview Developmental Center*

The above General Context section discussed broad patterns in the changing understanding of and care for people with developmental disability. The following section presents a more detailed account of the founding, construction, and institutional activity at the Fairview Developmental Center. As in the above general context, this section is not presented as a complete and exhaustive history of FDC, and many of the facility's accomplishments and struggles are not herein detailed. Rather, this history is intended to broadly frame FDC's establishment and growth in order to inform the evaluation of the facility's built environment for historical significance.

The facility that became FDC was originally planned as a state hospital for mental health. In 1944, the State Legislature authorized three new state hospitals. One was intended as a maximum-security facility for sexual and violent offenders (later Atascadero State Hospital); a second was proposed for mentally healthy individuals with epilepsy (it later became the Porterville Developmental Center); and the third, Fairview, was to serve as a general-purpose mental health hospital. Both the maximum-security facility and the hospital for epilepsy were to be the only institutions of their kind in California and would serve a statewide population. They were therefore to be located in the middle section of the state, with the high-security facility

<sup>26</sup> Doug Van Meter, "Our Mission is the Same after 100 Years," *Sonoma Index Tribune*, November 16, 1990; Sonoma Developmental Center, "General Information Fact Sheet," Department of Developmental Services, Historical Materials, California State Archives; Darling, "Porterville State Hospital Story," 12.

<sup>27</sup> Doug Van Meter, "Our Mission is the Same after 100 Years," *Sonoma Index Tribune*, November 16, 1990, 6; Teresa Murphy, "The Last 15 Years," *Sonoma Index Tribune*, November 16, 1990, 7-8; "Improvements Slated for State Hospital," January 11, 1978, reprinted in 35<sup>th</sup> PDC anniversary edition of *Porterville Recorder*, June 3, 1988.

<sup>28</sup> Trent, *Inventing the Feeble Mind*, 264.

along the coast near San Luis Obispo and the epilepsy hospital in the interior between Porterville and Visalia. At this time, the specific location of the general mental health hospital was not yet certain, although the area between Santa Ana in Orange County and Oceanside in northern San Diego County was specifically preferred. The Legislature appropriated \$400,000 for the purchase of a property for the State mental hospital, with the specific property to be selected by a specially organized State Public Works Board.<sup>29</sup>

The Department of Institution's requirements for the hospital sites showed that, in 1944, they were still planning for a pre-war institutional model in which the facilities were located in rural areas and surrounded by extensive agricultural fields worked by the clients. The department wanted the hospitals located about five miles from a small city, but not near "a large industrial or metropolitan area." Each hospital would occupy between 750 and 1,000 acres, with approximately 500 acres reserved for agriculture purposes including orchards, vegetable gardens, a dairy, hog plant, and poultry ranch. Each hospital required its own water supply as it would be uneconomical to irrigate crops and pasture if connected to a municipal water system. All three hospitals were planned to have an ultimate capacity of 2,500 patients.<sup>30</sup>

California Assembly member Earl W. Stanley of Balboa Island in Newport Beach promoted a site in Orange County and helped to convince his constituents that the facility would be an economic boon to the community. In July 1948, members of the State Public Works Board and Acquisition Division selected a 746-acre tract bound between Harbor Boulevard, the Santa Ana River, and Adams and Wilson streets in the then unincorporated community of Costa Mesa. Condemnation proceedings were initiated the following year against the owner, Southern California real estate magnate George H. Capron, who reportedly acquired the land for \$100 per acre during the Great Depression. The State obtained the property in August 1950 for \$410,000 and the retention of certain mineral rights. Over the years, surplus land was leased out or sold to the City of Costa Mesa until by 1979 the hospital retained only the acreage containing the present landscaped main campus area and some outlying operations areas, totaling around 115 acres.<sup>31</sup>

The Fairview facility's treatment focus was changed from mental illness to developmental disability around 1950. In 1948, the State Legislature appropriated another \$400,000 to acquire a site to build an institution for "mental defectives" as an item in that year's Budget Act under the heading of the Postwar Construction Program. In September 1950, an additional urgency measure was passed that allowed for the Costa Mesa site acquired under the authority of the 1944 appropriation to be applied toward that need addressed in the 1948 Budget Act, stating that "an institution for mental defectives is more urgently needed than a mental hospital in order to provide facilities for the care of such defectives, including mentally retarded children."<sup>32</sup> Around this time, the waiting lists for admission to the Sonoma State Home and Pacific Colony had grown to more than 2,000 applicants.<sup>33</sup>

In about 1950, \$150,000 was reportedly appropriated to prepare preliminary design plans for the new Orange County campus. The California State Division of Architecture handled the design work and managed construction contracts for the vast majority of the Fairview campus. Assistant State Architect P. T. Poage oversaw this initial design phase, with Frank Durkee, Director of Public Works, maintaining overall management of the construction project. Preliminary drawings were submitted

<sup>29</sup> Chapter 26, *Statutes of California, 1944 4<sup>th</sup> Extra Session*, 157; Court of Appeal, 4<sup>th</sup> Dist., Div. 2, California, George H. Capron et al. v. State of California (Civ. No. 8004) (December 14, 1966), 215-216; "Possibility of State Hospital for Tulare County is Seen," *Porterville Evening Recorder*, September 28, 1944, Clippings File, Porterville Developmental Center (PDC) Archives, Porterville, California.

<sup>30</sup> "Possibility of State Hospital for Tulare County is Seen," PDC Archives.

<sup>31</sup> Court of Appeal, 4<sup>th</sup> Dist., Div. 2, California, George H. Capron et al. v. State of California (Civ. No. 8004) (December 14, 1966), 216-218; "Costa Mesa Site Urged for Hospital," *Los Angeles Times* (October 2, 1948): 6; "George Capron, 86, Dies; Made County Land Profits," *Daily Pilot* (October 30, 1972), from Fairview State Hospital Clippings File, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California; "Purchase of Hospital Site Near Costa Mesa Approved," *Los Angeles Times* (July 10, 1950), 11; "Fairview Chronology" (ca. 1971), no pagination, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS.

<sup>32</sup> Chapter 2, *Statutes of California, 1950 3<sup>rd</sup> Extra Session*, 5.

<sup>33</sup> "Fairview State Hospital: The First Ten Years" [pamphlet], 1, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; California Department of Mental Hygiene, *Statistical Report: Department of Mental Hygiene, State of California, Year Ending June 30, 1950* (Sacramento: 1950), 19, 31.

to the Department of Finance on January 7, 1953, and the Legislature appropriated \$11,576,550 as an urgency measure for “construction, improvement, and equipment” to develop the site on January 23.<sup>34</sup>

Around this time, the name of the site was established in honor of the former community of Fairview in the same general area. That February, the Division of Architecture initiated contracting for the Fairview State Hospital – Initial Development Construction Program (First Phase) under this appropriation:

The first phase of the program will include the construction of [an] administration and hospital building [which ultimately included three adjoined infirm wards], two units of typical wards [subsequently amended to one unit], kitchen and dining room building, covered passage, commissary building, laundry building, garage and maintenance shops, boiler plant, and site development work which will consist of general grading, roads, walks, parking and service areas, storm drainage, water storage facilities, mechanical and electrical utilities and all related service connections.<sup>35</sup>

Contracts for sewage and water work were let in February 1953, and groundbreaking occurred soon thereafter. Subsequent contracts were awarded for the kitchen, dining, and commissary building and ward building in May and September, respectively, with the water reservoir and booster pump station completed that December. Construction of the Main Kitchen and the 280-bed Ward # 1 was completed circa 1954, with the laundry building and boiler plant under construction the following year (**Figure 1**). Final drawings for the 695-bed Receiving & Treatment and Administration Building—which included three adjoined Acute Infirm Wards (Buildings D, E, and F / Residences 11-16)—were submitted in July 1956, the construction contract was awarded that October, and construction of the buildings was completed about 1958, in time for the hospital’s opening on January 5, 1959 (**Figure 2**).<sup>36</sup>

At the time of Fairview’s opening, all of the components of the Initial Development Construction Program had been built as well as several buildings and structures included in subsequent construction phases (**Figure 3**). In 1956, the Department of Mental Hygiene detailed a five-year schedule of major building projects as part of the State Building Construction Program. Under this program, planning and construction of additional site development, four ward buildings, the extension of the covered passageways, a warehouse addition to the commissary, six single-family staff residences, several multi-unit staff dwellings, a school, and a firehouse were to be initiated in Fiscal Year 1956-57. In 1957-58, planning and construction for six additional wards, an auditorium, a library, occupational therapy, canteen and barber shop building, and an expansion of the boiler plant were scheduled, with four more wards and the second phase of school construction scheduled for 1958-1959. Aside from the auditorium and library-canteen, the construction of which was pushed back as a higher priority was placed on building client residences, this construction schedule was generally implemented as described, with each building constructed within a year or two of its planning and construction date.<sup>37</sup>

<sup>34</sup> “Fairview State Hospital: The First Ten Years” [pamphlet], 1, and “Fairview Chronology,” ff. “Fairview Hospital 1990-0067-066.241,” from the Collections of CMHS; H. S. Hunter to Frank B. Durkee, January 26, 1953, R386.028, Box 16, Folder 18, DPW – Director’s Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA; Chapter 9, *Statutes of California, 1953 Regular Session*, 614-615.

<sup>35</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director’s Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA.

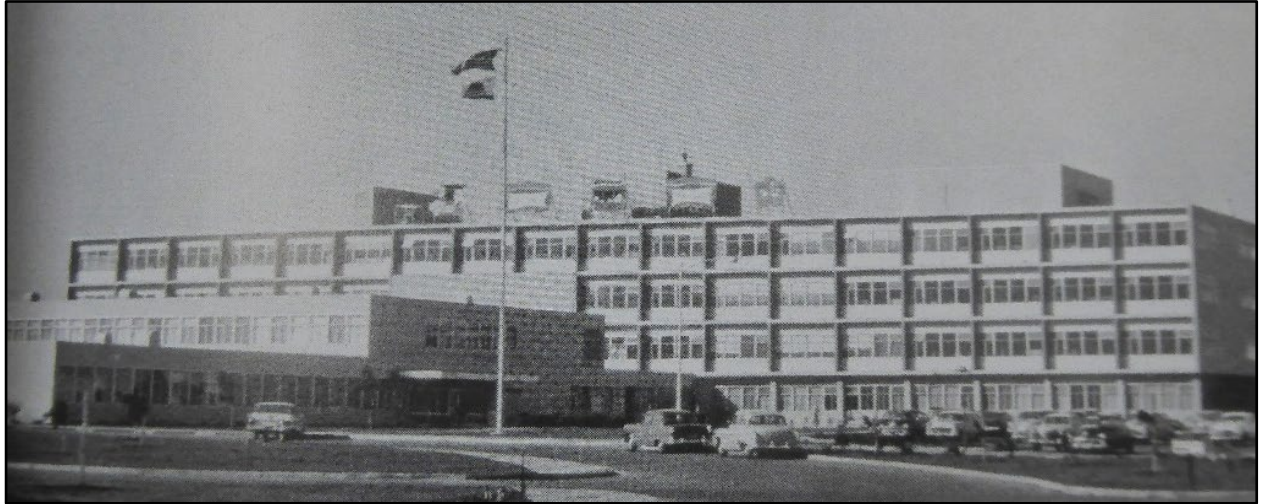
<sup>36</sup> Anson Boyd, State Architect to Frank B. Durkee, R386.028, Box 16, Folder 18, DPW – Director’s Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA; Fairchild Aerial Surveys (FAS), Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); DPW, Division of Architecture, “Fairview State Hospital: Hospital-Administration & Acute Infirm Wards,” W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services (DGS) Plans Vault, West Sacramento; “New Fairview Contracts Let,” *Los Angeles Times* (October 28, 1956): 6; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.

<sup>37</sup> California Department of Finance, “Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program,” *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97-98, 103, 107



**Figure 1:** Portion of a 1955 aerial photograph, showing extent of 746-acre acquisition (top) and site development (left). In the detail image, note the completion of square water reservoir (top right), Ward # 1 / Building B / Residence 17-20 (center), and Main Kitchen and Commissary (bottom left). Foundation work for the Laundry & Central Powerplant can be seen between Ward # 1 and the kitchen (FAS, Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available UCSB (accessed June 2019).





**Figure 2:** Circa 1959 photograph of R&T and Administration Building. Photograph printed in Costa Mesa Historical Society, *Images of America: Costa Mesa, 1940-2003* (Charleston, South Carolina: Arcadia Publishing, 2016), 49.



**Figure 3:** 1958 oblique photograph of Fairview State Hospital complex under development. Note the completion of Initial Development Construction Program (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA).

The buildings at Fairview were united by a shared design in a modest expression of the International style, a variation of the Modernist architectural mode that was popular during the era. Modernism, as a broad architectural movement, emerged in

Europe during the 1920s as a reaction against the ornamentation and historicity of architecture in the prior decades. In general, this approach expressed an optimism about the future and a desire to depart from conventional modes of thinking. In its origins, the movement was as much a philosophical approach as it was a definable style. Architects as varied as Walter Gropius, Le Corbusier, and Ludwig Mies van der Rohe were united by their emphasis on rationality and functionality. They insisted on the honest use of building materials and believed that a building's form should clearly express its function. Whereas past architects had concerned themselves principally with the decoration of a building's surfaces, modern architects sought to enclose volumes of space as lightly, cleanly, and clearly as possible. Ideally conceived, buildings became mere planes surrounding an open box.<sup>38</sup>

This approach arrived in America and received its name as the result of a 1932 architectural exhibition at New York's Museum of Modern Art (MoMA), curated by Philip Johnson and Henry Russell Hitchcock, and entitled "The International Style: Architecture Since 1922." The designs featured in the exhibition were primarily for large public or semi-public buildings, being hospitals, factories, department stores, apartment complexes, and administrative buildings. They were all distinguished by their rectilinear forms, taut planar surfaces, cantilevered elements, and the free use of glass, steel, and concrete. A year after the exhibition, both Gropius and van der Rohe immigrated to America, fleeing the repressive Nazi government in Germany that had forced the closure of the Bauhaus, the first Modernist school of design and architecture. The men accepted teaching positions at the Harvard School of Design and the Illinois Institute of Technology, respectively, and disseminated their philosophical and aesthetic approaches to a generation of American students. In California, leading practitioners of the style included the Viennese-born architects Rudolph Schindler and Richard Neutra.<sup>39</sup>

In the 1930s and 1940s, the International Style proved deeply influential on public and institutional architecture in the United States. Institutions favored the style because it offered a forward-looking, even futuristic, aesthetic while retaining a focus on efficiency, economy, quick construction, and functionality. In many institutional uses – such as hospitals, dormitories, libraries, or administrative buildings – economy took precedent over display, and the buildings were modest examples of the International aesthetic that lack architectural distinction.<sup>40</sup>

The visual appearance of the Fairview facility fit within this Modernist architectural mode, particularly through a restrained but unified application of the International Style. A majority of the buildings from the original phase of development, circa 1953 through 1964, were built of poured concrete, often with prominent banks of metal frame windows and doors (**Figure 4**). The buildings incorporated rectilinear forms and strong horizontal lines, especially along roof lines. The nearly mile-long system of long, linear covered walkways literally connected and further enhanced the appearance of the individual International style elements (**Figure 5**).<sup>41</sup>

<sup>38</sup> Carol Rifkind, *A Field Guide to Contemporary American Architecture* (New York: Plume, 1998), 104, 110, 115, 245; Roy Hampton, "Historic Context for Evaluating Mid-Century Modern Military Buildings," Department of Defense Legacy Resource Management Program, May 22, 2012, 1-3, 41-60; Planning Resources Associated, Inc., "Mid-Century Modernism Historic Context," prepared for City of Fresno, September 2008, 19-20, 69.

<sup>39</sup> Planning Resources Associated, Inc., "Mid-Century Modernism Historic Context," 19-20; Henry-Russell Hitchcock and Philip Johnson, *The International Style* (New York: W.W. Norton & Company, 1995).

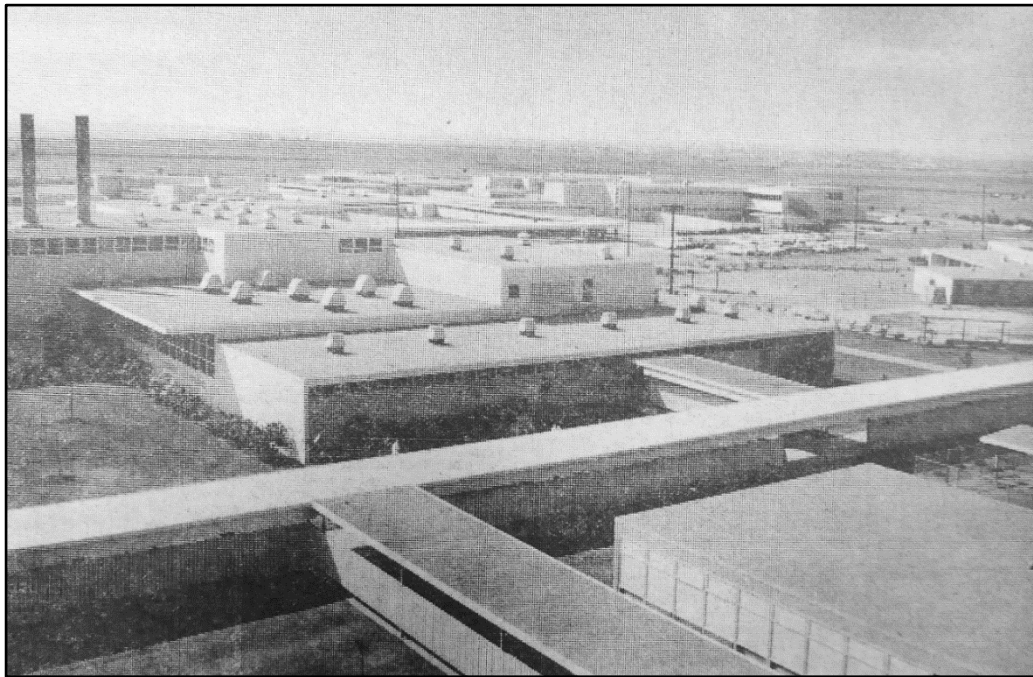
<sup>40</sup> Rifkind, *A Field Guide to Contemporary American Architecture*, 104, 110, 115, 245.

<sup>41</sup> Rifkind, *A Field Guide to Contemporary American Architecture*, passim; Roy Hampton, "Historic Context for Evaluating Mid-Century Modern Military Buildings," Department of Defense Legacy Resource Management Program, May 22, 2012, passim.





**Figure 4:** Ca. 1961 photograph of R&T Building. Note the exposed concrete and emphasized lines, signatures of the International style (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 2, from the Collections of the Costa Mesa Historical Society, Costa Mesa, California [CMHS]).



**Figure 5:** Ca. 1961 photograph of covered walkways (foreground) with Laundry & Central Powerplant (center). Note the emphasis on horizontal lines and flat surfaces (Payne, *Fairview State Hospital Dedication Issue*, 9, CMHS).

In February 1957, Dr. Hyman Tucker was appointed the first superintendent and medical director of Fairview State Hospital. Tucker was the former superintendent at Agnews State Hospital in Santa Clara County. Born in Russia, Tucker earned his medical degree from Long Island College Hospital in 1921. He served as a senior physician at Elgin State Hospital in Elgin, Illinois, and Mississippi State Hospital at Meridian before moving to California in 1928 to assume the position of Senior Physician and Clinical Director at Agnews State Hospital. After serving as chief of neuropsychiatric service at four Army hospitals during World War II, Tucker resumed his career with the Department of Mental Hygiene and assumed the position of assistant superintendent of medical services at Metropolitan State Hospital in Norwalk in 1946 before he was transferred and promoted to superintendent of Agnews State Hospital in 1954. During Tucker's tenure at Fairview, he oversaw the completion and opening of the new hospital, as well as most of the subsequent building programs. Tucker additionally directed the initial staffing of the hospital, including the first round of psychiatric technician trainees in August 1958. Most of these employees transferred from other state hospitals while others were recruited locally. By the time the hospital opened four months later, it was staffed with 762 employees, consisting of 56 administrative employees, 515 employees dedicated to client care, 118 support and subsistence employees, and 73 plant operations workers. Employee housing consisted of the superintendent's residence, five single-family houses, two duplex units, and two apartment buildings with two units each, which were all constructed about 1958. Because of the pressing need to alleviate overcrowding, a formal dedication ceremony was postponed until May 1961, more than two years after the facility first opened its doors to begin receiving patients. Tucker served at Fairview until 1963 when he retired and the position was filled by Dr. Anthony N. Toto.<sup>42</sup>

The first residents arrived at Fairview on January 5, 1959. This first group comprised 10 client transfers from Pacific State Hospital, with about 100 more individuals per month either transferred from Pacific and Sonoma State Hospitals or directly admitted from Los Angeles, Orange, and San Diego county waiting lists over the next 16 months. By May 1960, the client population consisted of 1,494 patients, including 1,034 transfers and 460 direct admissions from Southern California. The admission rate continued to increase as new residential buildings for clients were constructed. By 1964, at the end of Fairview's initial build-out, the hospital had a bed capacity of 2,622. Among direct admissions, applicants under 18 years old were committed voluntarily with the written consent of their parent guardians, who were also required to pay up to \$20 per month for hospitalization and provide clothing and other incidentals. Applicants over 18 years of age were committed through their county's superior court, and all applicants were admitted or waitlisted according to urgency.<sup>43</sup>

As with the Porterville program, treatment at Fairview was designed to return as many clients as possible to their communities. Case treatment began with the referral process, prior to admission. A team from the hospital consisting of a physician, psychologist, social worker, and a nurse completed a social-medical survey for the applicant. The team then worked to find a local solution for the client that would not require hospital admissions. Individuals requiring institutional care were admitted at the receiving ward of the hospital where an individual diagnosis and treatment plan were prepared prior to selecting a residential ward for placement. Fairview staff formulated therapeutic goals around an individual's anticipated eventual placement, whether that was returning to the home, foster care, family care home, or long-term hospitalization. Self-care, socialization, and domestic tasks were major components of the therapeutic and educational programs. The basic educational program divided clients into two categories, "educable" and "trainable," and aimed to foster in each individual the greatest

<sup>42</sup> "Knight Seeks Mental Chief," *San Mateo Times* (February 9, 1957): 24; "Fairview Chief Named," *Los Angeles Times* (October 18, 1963): 1; "A Hospital's Birth: Fairview Actually Began 13 Years Ago," "Meet Fairview's Chief: M.D. with Many Roles," and "Department Stresses Best Nursing Training," *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition* (May 4, 1961): 2, 5-6, from the Collections of CMHS; "Fairview State Hospital: The First Ten Years" (1969), 1-2, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; DPW, Division of Architecture, "Fairview State Hospital: Employees Housing – Ground Improvements," sheet R-2 of 2, W.O. 4007-GD-49, September 12, 1958, File 19-G-17, California Department of General Services (DGS) Plans Vault, West Sacramento.

<sup>43</sup> "Fairview State Hospital: The First Ten Years" (1969), 2, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. "Dept. of Developmental Services – Developmental Center History," Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; "Fairview Hospital for their Benefit: State has Concern for Mentally Retarded," *Daily Pilot / News Press* (February 13, 1964), Fairview State Hospital Clippings File, from the Collections of CMHS.

degree of self-sufficiency possible. About 260 patients were enrolled in these educational programs. Additionally, the Rehabilitation Services Division offered industrial, vocational, music, and recreational therapy.<sup>44</sup>

Although client labor was not a major part of the hospital's operations, Fairview did offer a variety of vocational training programs. In addition to on-site assistance work, such as laundry pick-up and drop-off and hospitality service at the canteen, clients performed light jobs at the site's sheltered workshop, such as assembly, trimming, and packaging on subcontract to local industries. In 1963, the hospital's client-operated workshop reportedly grossed over \$5,000 contracting with local industries, which had clients "trimming ... rubber washing machine parts and casting ... ammunition for muzzle-loading firearms."<sup>45</sup> Fairview later incorporated a petting zoo into its facilities, although the hospital never developed a full-scale agricultural operation as had been anticipated in 1944.<sup>46</sup>

Build-out of the hospital continued through 1964 (**Figure 6**). Between 1959 and 1964, five identical, 280-bed residence buildings (Buildings O, P, Q, T, and U / Residences 26-35) and two adjoined ward buildings (Buildings S and S-1) were constructed on the west half of the campus. This final building program gave Fairview a total capacity of 44 living wards, with a rated-bed capacity of 2,622, where multiple clients shared space in a dormitory setting (**Figure 7**). Also constructed during this period were the library, occupational therapy, canteen, and barbershop building, dedicated as the "Hyman Tucker Rehabilitation Building" in 1961, and the Auditorium, which were both constructed in the southeast quadrant of the main complex.<sup>47</sup>

Dr. Anthony Toto was named superintendent and medical director of Fairview State Hospital in October 1963, succeeding Hyman Tucker. Dr. Toto remained in that post for 13 years before resigning in 1976. He was a 1943 graduate of the New York Medical College, served in the U.S. Marine Corps as a ward officer at the 25<sup>th</sup> Evacuation Hospital, and later ran a private practice of internal and psychosomatic medicine in New York. Toto moved to California in 1957 and entered state service as the assistant medical director at Camarillo State Hospital, where he remained until his appointment and promotion at Fairview. Toto's appointment to superintendent in 1963 was notable because he was not certified as a psychiatrist by the American Board of Neurology and Psychiatry, unlike 11 of the 13 state hospital superintendents. He was, however, qualified as a mental hospital administrator.<sup>48</sup>

<sup>44</sup> California Department of Mental Hygiene, *Statistical Report for the Year Ending June 30, 1960* (Sacramento: Department of Mental Hygiene, 1960), 82-83; "Program of Treatment at Porterville State Home Described by Director," *Porterville Evening Recorder* (February 12 and 13, 1953), PDC Archives; Alvan H. Goodell, School Principal, "Develop to Fullest – That's Hospital Goal," and Allan D. Toedter, Supervisor of Rehabilitation Services, "Motivation: Helping Daily Living," *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition* (May 4, 1961): 8, from the Collections of CMHS; California Department of Mental Hygiene, *Progress Report, 1963* (Sacramento: Department of Mental Hygiene, 1963), 12, PDC Archives.

<sup>45</sup> "Mental Patients Work at Therapeutic Jobs," *Los Angeles Times* (December 17, 1961): 1; California Department of Mental Hygiene, *Progress Report, 1963* (Sacramento: Department of Mental Hygiene, 1963), 12, PDC Archives.

<sup>46</sup> Steve Tripoli, "Donations Sought for Caretaking at Fairview Hospital: Volunteers Built Park, Now State won't Keep it Up," *Los Angeles Times* (November 13, 1983): 10.

<sup>47</sup> "Fairview State Hospital: The First Ten Years" (1969), 2, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS.

<sup>48</sup> "Fairview State Hospital Gets New Superintendent," *Oakland Tribune* (October 18, 1963): 19; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. "Dept. of Developmental Services – Developmental Center History," Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Anthony N. Toto, M.D., Curriculum Vitae, appended to "Habilitation of the Physically Handicapped Retardate Proposal," 1967, R384.113, Box 3 file 42, Department of Public Health Records, CSA.

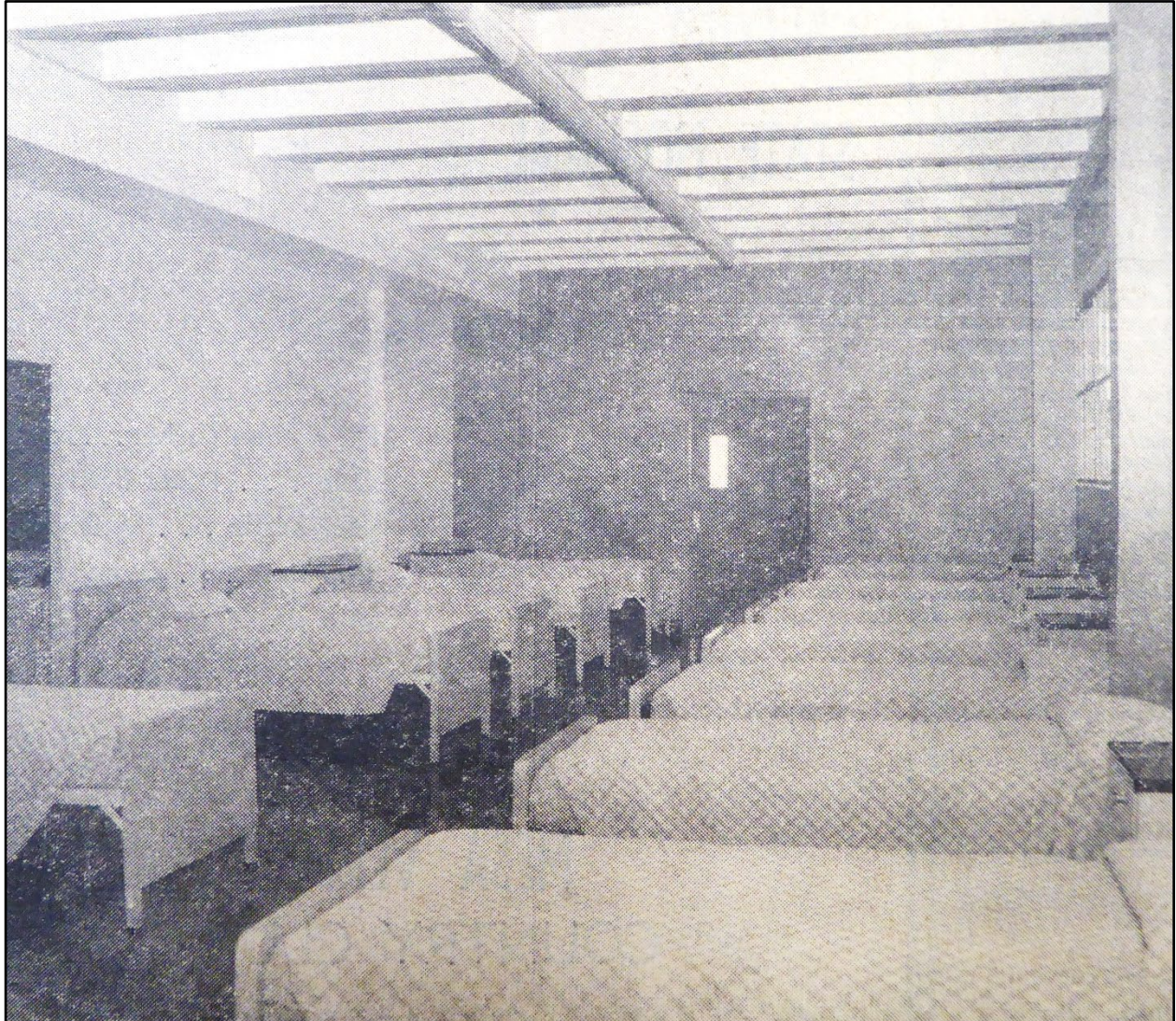


**Figure 6:** Circa 1968 photograph of Fairview State Hospital main campus (photograph published in “Fairview: Costa Mesa State Hospital will have a New Name, Image,” January 10, 1983, Fairview State Hospital Clippings File, from the Collections of CMHS).

Dr. Toto attempted to initiate more individualized, client-centered treatment programs at Fairview State Hospital. Prior to his appointment, the Fairview Developmental Center reported “a medical model of treatment prevailed, the assumption being that mental retardation responded to treatment much like any other physical condition.”<sup>49</sup>

<sup>49</sup> “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA.





**Figure 7:** Circa 1961 photograph of a typical male ward dormitory interior (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition*, May 4, 1961, 9).

Part of Toto's individualized approach involved facilitating formal partnerships with volunteer organizations. Parents, volunteers, and charitable organizations from the surrounding community had donated time and resources to client care since the hospital first opened its doors in 1959. In 1964, however, Dr. Toto coordinated these parents' efforts and assisted the formation of the 600-person, non-profit corporation, Fairview Families & Friends, Inc. (FFF) in 1964. By 1969, the organization had grown to include 1,200 members. In addition to raising funds and organizing events and activities, the FFF organized support forums for the families of new patients and published a monthly newsletter. Around this same time, the Fairview Therapeutic Pool Committee, Inc., formed in 1962, continued its efforts to raise \$50,000 for the construction of a swimming pool at Fairview. By 1969, the group had raised \$53,000, and the pool was built two years later.<sup>50</sup>

The state made several changes to the living conditions in the wards in the late 1960s. In 1967, California adopted U.S. Public Health standards setting minimum conditions for institutional living. The wards had been designed and built to provide 50 square feet per ambulatory patient and 60 square feet per non-ambulatory patient, but the new standards raised the guideline to 70 square feet per patient. This reduced the hospital's rated-bed capacity from 2,622 to 1,915. In 1969, Fairview's client population totaled 2,500. Around this same time, a new rehabilitation training program was introduced at Camarillo State

<sup>50</sup> "Fairview State Hospital: The First Ten Years" (1969), 3, ff. "Fairview Hospital 1990-0067-066.241," from the Collections of CMHS.  
**DPR 523J (Rev. 1/1995)(Word 9/2013)** **\*Required Information**



Hospital, which allowed Fairview to transfer a number of its “moderately retarded” clients to free bed space for “severely retarded youngsters.” Between 1967 and 1969, the overcrowded hospital managed to reduce its client population from 2,635 to about 2,500 thanks to this transfer program and other programs intended to move clients into community programs.<sup>51</sup>

Program innovations of the late 1960s and early 1970s led to fundamental changes throughout the state hospital system, as is described in the General Context section above. In order to implement these structural changes throughout the state hospital system, the Department of Mental Hygiene designated a five-person task force—which included Dr. Toto—to develop a new organizational model. In December 1970, Fairview was reportedly the first developmental center to rebuild its treatment program around a developmental model with 10 separate programs (later reduced to nine) tailored to each individual’s abilities and needs. This was called the Program model. In 1976, Fairview was accredited by the Accreditation Council on Services for People with Developmental Disabilities, the first institution with a population greater than 800 to receive the honor. In 1978-1982, the residential wards were remodeled to meet tightened federal fire, safety, and environmental requirements. A \$17.1 million program renovated nearly every living unit at Fairview to meet the federal regulations and provide greater privacy, normalization, and dignity. This effort included erecting partitions in the dormitories to create bedroom spaces with four beds rather than the 40-bed dormitory spaces. In 1984, then-superintendent Dr. Francis M. Crinella launched the “Silver Challenge,” which launched a beautification program by removing fencing, planting trees, and replacing asphalt-paved areas with more grass lawns. Crinella’s initiative also raised money to furnish rooms, supplementing the \$200,000 allocated by the State.<sup>52</sup>

The facility’s name changed from Fairview State Hospital to Fairview Developmental Center in May 1985 to better reflect the facility’s purpose of caring for individuals with developmental disability. The center’s population continued to decline as the state moved towards deinstitutionalization and community care. Around this time, the resident list was at around 1,100, less than half of the facility’s original design capacity.<sup>53</sup>

#### Evaluation

Fairview Developmental Center is eligible under NRHP Criterion A and CRHR Criterion 1 at a local level of significance because of the important role it played in the California state mental health system. The period of significance under these criteria extends from 1959, when the facility began receiving patients, through 1969, when the facility’s significance began to wane with the passage of the Lanterman Mental Retardation Services Act and the advent of the era of deinstitutionalization.

FDC was the first fully modern, post-World War II California State Hospital to be established in Southern California. In the post-war, baby-boom decades, the region experienced exceptionally rapid growth, and the demand for quality housing and therapeutic care for individuals with developmental disabilities quickly exceeded the capacity of existing facilities. When Fairview was first proposed in 1944 it was intended as a state mental hospital, but it changed roles during its planning phase to meet the pressing needs of individuals with developmental disabilities in Los Angeles, San Diego, and surrounding areas. As with Porterville State Hospital (1953) in Central California, Fairview was conceived, designed, and built in order to implement wholly modern therapeutic philosophies, practices, and protocols in regard to the care and treatment of individuals with developmental disabilities. Its completion in 1959 relieved overcrowding at Pacific Colony in Pomona (1927), the only existing regional facility, and symbolized the eclipse of the earlier asylum era in favor of a modern medical model. The build-out of the facility was completed by 1964, around which point it had a population of approximately 2,651 clients and 1,557 employees. The cultural understanding of mental illness and disability began to shift in the mid-1960s, leading to an era of deinstitutionalization. The passage of the Lanterman Mental Retardation Services Act of 1969 accelerated a trend towards

<sup>51</sup> “Fairview State Hospital: The First Ten Years” (1969), 3, ff. “Fairview Hospital 1990-0067-066.241,” from the Collections of CMHS; “Fairview State Hospital Waiting List Diminishes,” *Long Beach Independent* (September 8, 1967): B-4; Milt Brouhard, “Community, Volunteers Hailed at Fairview’s 10<sup>th</sup> Anniversary,” *Los Angeles Times* (January 13, 1969): D-1.

<sup>52</sup> “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Annette Watson, “Fairview Celebrates 25<sup>th</sup> Anniversary,” *The Newport Ensign* (January 25, 1984): 6, and Mishele Pangrazio, “Fairview to Drop Fences ‘Normalize,’” *The Newport Ensign* (September 7, 1983): 1-2, and William H. Boyer, “Fairview Launches a ‘Silver Challenge,’” *Community Register* (January 10, 1984): 1, 3, Fairview State Hospital Clippings File, CMHS.

<sup>53</sup> Doug Brown, “Fairview Celebrates 25 Years of Change,” *Los Angeles Times* (May 27, 1984): 1, Fairview State Hospital Clippings File, CMHS.



providing out-patient community care in preference to long-term hospitalization. The treatment model that the Fairview center furthered at the time of its opening began to be of less influence and the center experienced a gradual but ultimately near complete draw-down in its resident population.

Fairview Developmental Center does not have historical significance under NRHP Criterion B and CRHR Criterion 2. The facility's growth and development during the historic period is closely associated with Doctors Hyman Tucker and Anthony N. Toto, who served as superintendents from 1957 to 1963 and 1963 to 1976, respectively. While Tucker and Toto played important roles in guiding the institution, their performance of their duties was consistent with their role as superintendent and did not significantly separate them from their peers at comparable facilities in the state or nation. They are not known to have innovated any particular model of therapy, nor did they conduct important research into the causes or treatments for developmental disabilities. The accomplishments of the hospital during their tenure are the result of the efforts of countless staff members and policy makers, and are more appropriately captured under Criteria A/1 as discussed above.

No other staff member or client associated with the hospital possess individual historic significance that would qualify under these criteria.

Fairview Developmental Center is eligible under NRHP Criterion C and CRHR Criterion 3 at a state level of significance as a good example of a state mental hospital of the post-war era, with a period of significance equal to the build-out between 1953 and 1964. The State Division of Architecture designed all of the original buildings and landscape features of the complex as part of a unified whole. Every individual building fit within patterns of circulation and an overall aesthetic. The buildings all exhibit characteristic features of modern architectural design in the International Style, including unornamented concrete construction, flat or angled roofs, and flush metal casement windows grouped into linear forms. This design presented a forward-looking aesthetic that captured the optimism of a new era, while also addressing such practical concerns as construction cost and maintenance needs. While both the Sonoma State Home and Pacific Colony added buildings of this type, neither was designed as a modern campus, but rather added to on an incremental basis.

As a property type, the post-war state hospital was frequently described as a "self-contained city," with its own water and sewage systems and heating and power supplies. Thus, elements of the facility located outside of the main hospital campus, including the water and sewage systems, contribute to FDC's historical design significance.

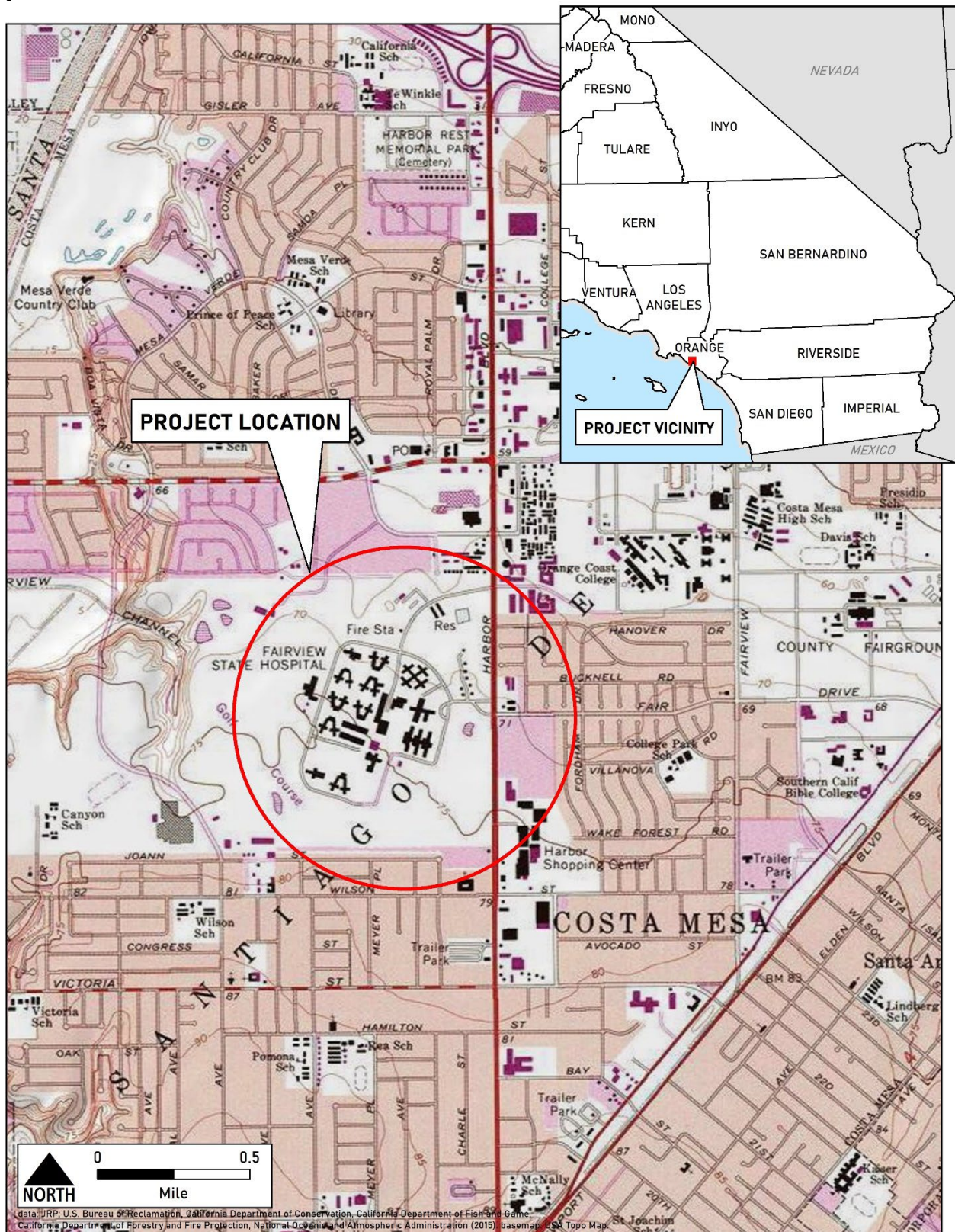
Buildings and structures added after 1964, including the swimming pool, both pool houses, and the portable school annex buildings, displayed less adherence to the Division of Architecture's original design plans. This construction, frequently funded by parent and civic donations, was of a more ad hoc nature, employing whatever design was available, expedient, and affordable.

FDC does not have historical significance under NRHP Criterion D and CRHR Criterion 4. The design and construction of the Fairview facility are well documented in the historical record, and the physical site is unlikely to yield important information about historic building techniques or materials that is not otherwise available.

Character-defining features of Fairview State Hospital Historic District include those features that date to the period of significance (1953-1969). They consist of the layout, arrangement, and location of buildings, roads, and pathways; the general setting with green space, including its vegetation (i.e. lawn, bushes, and mature trees), architectural styles of buildings included as contributors to the district (i.e. International, utilitarian, utilitarian with Modernistic elements, Contemporary, and Ranch); the materials of built environment contributors (i.e. exposed concrete cladding, original wood-sash windows; concrete pathways with metal frame shelters, asphalt-paved roads and parking lots); and the general form and massing of buildings. For more detailed descriptions of contributors' character-defining features, see individual evaluations in the appended Primary Records.

Fairview Developmental Center does not meet the eligibility requirements to be designated a California Historical Landmark under any of the designation criteria. Under Criterion 1, FDC is not the first, last, nor most significant state facility for people with developmental disabilities in the Southern California region. Under Criterion 2, FDC is not associated with an individual or group that had a profound influence on the history of California. Under Criterion 3, FDC is not an excellent example nor is it a prototype of a state mental hospital of the postwar era. Under that criterion, the Porterville Developmental Center is an earlier and more notable example.

**Site Map:**





**District Map:**



Map 2. Project Study Area and Historic District Boundaries





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 9

\*Resource Name or # (Assigned by recorder): Activities Center

**P1. Other Identifier:** Hyman Tucker Activities Center and Lava Lounge

\*P2. Location: ☐ Not for Publication ☒ Unrestricted

\*a. County Orange

and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; \_\_\_ ¼ of Sec \_\_\_; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located in the southeast quadrant of the complex between Eugenia and Pearl ways at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 27,258-square-foot, single-story International-style Hyman Tucker Activities Center and Lava Lounge building, which possesses an irregular T-shaped footprint and pebble-stucco exterior wall cladding. The building is surrounded by manicured grass lawns with mature trees, concrete walkways, and an asphalt-paved parking lot along its east side (**Photograph 1**). The main entrance to the Activities Center is located in the elbow of the northeast quadrant and is accessed via modern replacement glass-and-metal automatic doors, while the Lava Lounge wing comprises a 1,820-square-foot, 1.5-story section at the building's southernmost end (**Photographs 2 and 3**). The majority of the building features a flat roof throughout, except for slanted-roof sections at the westernmost and southernmost ends, with both roof sections covered with modern Sarnafil membranes (**Photograph 4**) (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Southeast quadrant of Activities Center; facing north / northwest, May 28, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both

ca. 1961 (California Department of Developmental Services / Costa Mesa Historical Society / Los Angeles Times)

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record

☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record

☐ Other (list) \_\_\_\_\_

DPR 523A (1/95)

\*Required Information

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 9

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Activities Center

B1. Historic Name: Library, Occupational Therapy, Canteen & Barber Shop Building; Hyman Tucker Rehabilitation Building

B2. Common Name: Hyman Tucker Activities Center and Lava Lounge

B3. Original Use: Library, therapy treatment, and recreational center

B4. Present Use: Activity and recreational center

\*B5. Architectural Style: International

\*B6. Construction History: Built ca. 1961; glass-and-metal automatic doors and Sarnafil-membrane roofing installed at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Hyman Tucker Activities Center and Lava Lounge appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as a multi-purpose building during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

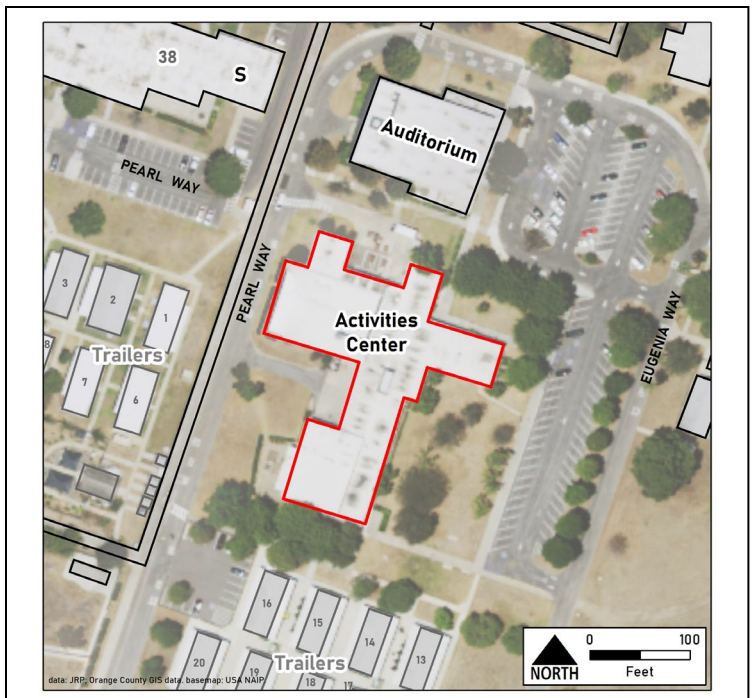
California Department of Finance, *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 103; Cal. Stats. 1958, 2<sup>nd</sup> Ex. Sess., Ch. 1, p. 547; “\$4.8 Million to Be Spent on Hospital,” *Los Angeles Times* (October 4, 1959): 10; “Governor to Speak at Hospital Dedication,” *Los Angeles Times* (May 4, 1961): 2; and see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)





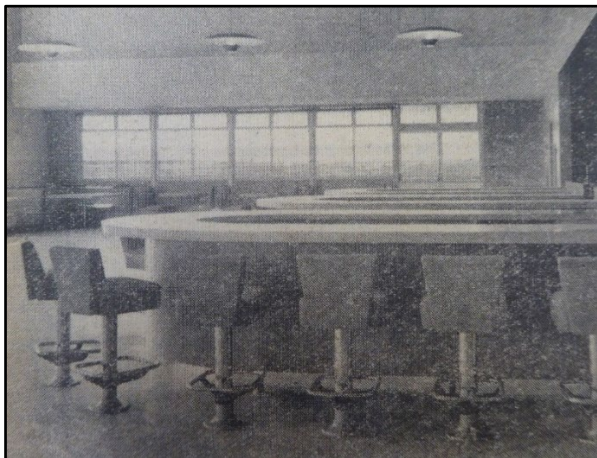
### P3a. Description (continued):

Wide overhanging eaves with concrete soffits are present along most of the building, in addition to metal coping along the roofline. Fenestration consists of multi-part, metal-frame, fixed-pane, and casement windows that extend the lengths of the building's sides, along with a variety of door styles: replacement glass-and-metal; flush; and flush with glazing. The northwest quadrant also features flush personnel doors with louvre vents and a roll-up metal garage door (**Photograph 5**). This element is likewise outfitted with an above-grade loading dock with modern metal handrails, a large wall-mounted louvre vent, and a metal ladder permitting roof access behind a chain-link enclosure. The two 1.5-story, slanted-roof building sections are both supported by buttresses, with the westernmost section featuring four bays along its south side (**Photograph 4**). The southernmost building section containing the Lava Lounge also features a large flat concrete canopy above the west entrance, with its southern courtyard framed along the east side by a wall constructed from concrete masonry units (**Photographs 6 and 7**).

The Activities Center's hallways and lobby area has original vinyl tile flooring, plaster walls with baseboards, and acoustic ceiling tiles (ACTs), with fluorescent lighting suspended from the ceiling and flush personnel doors throughout (**Photographs 8 and 9**). Glass and metal panel partitions and doors separate the hallway from the lobby. The former canteen, presently occupied by the Lava Lounge, features vinyl tile flooring, plaster walls, and a two-part ceiling, with the lower portion comprised of ACTs, and the elevated ceiling portion consisting of exposed beams and planks (**Photograph 10**). Light fixtures with round bulbs are suspended from the ceiling via wires.

### B10. Significance (continued):

The Activities Center, which was originally the Library, Occupational Therapy, Canteen, and Barbershop Building, was scheduled for construction in the 1957-58 Fiscal Year at an initial projected cost of \$236,400 according to the State Building Construction Program five-year plan. However, only working plans were funded that year at \$33,000. The building was designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. Construction of the building was deferred as a higher priority was placed on residential construction, which would help alleviate hospital overcrowding. In 1958, \$595,000 was appropriated for the building's construction in that year's Budget Act. Construction was completed by 1961, and the building was dedicated that May (**Figure 1**). The building was also called the "Hyman Tucker Rehabilitation Center" in honor of Fairview's first superintendent and medical director. The building, now called the "Hyman Tucker Activities Center," retains its multi-functionality and continues to house a library, habilitation services, and a cafeteria (now called "Lava Lounge").<sup>1</sup>



**Figure 1:** Interior view of former canteen (currently called "Lava Lounge"), ca. 1961. Note the presence of bar seating and hooded ceiling-suspended light fixtures, since removed at unknown date (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 12, from the Collections of the Costa Mesa Historical Society).

<sup>1</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 103; Cal. Stats. 1958, 2<sup>nd</sup> Ex. Sess., Ch. 1, p. 547; "\$4.8 Million to Be Spent on Hospital," *Los Angeles Times* (October 4, 1959): 10; "Governor to Speak at Hospital Dedication," *Los Angeles Times* (May 4, 1961): 2.

Page 4 of 9

\*Resource Name or # (Assigned by recorder) Activities Center

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

### Evaluation

The Activities Center at FDC was completed about 1961 as a second-phase addition to Fairview State Hospital. The building served in continual use as a multi-functional building, hosting habilitation services, occupational therapy, library, and a canteen that are directly associated with the Fairview facility's role in providing care for people with developmental disabilities. As such, the building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the hospital as a multi-purpose habilitation facility, this function alone does not rise to the level of historic significance, and the Activities Center is not individually eligible for listing under these criteria.

The Activities Center is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level.

The Activities Center was designed to complement the initial development of Fairview State Hospital, and it was completed in about 1961 near the end of the hospital's initial build out. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a significant example of post-war state hospital design. The Activities Center is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The Activities Center retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The only known modifications are the addition of glass-and-metal automatic doors, recent utility connections, Sarnafil-membrane roof covering, and some limited modern exterior lights. These alterations have a minimal impact on the building's integrity of materials. The building retains strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the Activities Center include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International-style architectural details including the building's angular massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; the open canteen area with exposed wood-plank ceiling; original vinyl tile flooring; and any remaining doors that date before 1969.

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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Activities Center

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Northeast quadrant of Activities Center, showing main entrance; facing southwest, May 28, 2019.



**Photograph 3:** Southwest quadrant of Activities Center, showing Lava Lounge (center, center right); facing southeast, May 28, 2019.



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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Activities Center

☒ Continuation ☐ Update



**Photograph 4:** Westernmost wing of Activities Center, showing slanted roof; facing northeast, May 28, 2019.



**Photograph 5:** Northwest quadrant loading-dock area of Activities Center; facing southeast, May 28, 2019.

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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Activities Center

☒ Continuation ☐ Update



**Photograph 6:** Detail view of Lava Lounge west entrance; facing southeast, May 28, 2019.



**Photograph 7:** Southern courtyard of Lava Lounge, showing south entrance and CMU wall; facing northeast, May 28, 2019.



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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Activities Center

☒ Continuation ☐ Update



**Photograph 8:** Interior view of Activities Center hallway; facing southwest, May 28, 2019.



**Photograph 9:** Interior view of Activities Center lobby; facing northeast, May 28, 2019.



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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Activities Center

☒ Continuation ☐ Update



**Photograph 10:** Interior view of Lava Lounge; facing north / northwest, May 28, 2019.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D  
Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 6

\*Resource Name or # (Assigned by recorder): Auditorium

**P1. Other Identifier:** Anthony N. Toto Auditorium

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located in the southeast quadrant of the complex between Eugenia and Pearl ways at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 15,707-square-foot, two-story International-style auditorium building, which possesses a T-shaped footprint and exposed concrete walls. It is surrounded by manicured lawns with mature trees and concrete walkways and an asphalt-paved parking lot along its east side (**Photograph 1**). The building features a symmetrical, east-facing façade, with a single-story building section wrapping around the east side elevation to form the overall “T” shape. It has a flat roof with parapets on both the single- and double-story sections, with both sections covered with modern Sarnafil membranes and featuring metal coping along the roofline. The east (front) façade features a deeply recessed entrance comprising glass-and-metal, floor-to-ceiling wall panels with two pairs of modern replacement glass-and-metal sliding doors sheltered beneath the single-story element’s wide overhanging eaves with concrete soffits (**Photograph 2**). A geometric relief pattern is present in the second-story frieze above the entrance (see Continuation Sheet).

\*P3b. Resource Attributes: (HP12) Civic Auditorium; (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** East and north sides of Anthony M. Toto Auditorium; facing southwest, May 28, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
1964 (The Long Beach *Independent*)

\*P7. Owner and Address:  
California Department of  
Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter “none.”) JRP Historical Consulting, LLC, “Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA,” February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 6

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Auditorium

B1. Historic Name: Auditorium

B2. Common Name: Anthony N. Toto Auditorium

B3. Original Use: Auditorium B4. Present Use: Auditorium

\*B5. Architectural Style: International

\*B6. Construction History: Built 1964; replacement glass-and-metal automatic double doors installed at front (east) entrance at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: G. H. Peters Construction Company

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Anthony N. Toto Auditorium appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as an auditorium during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

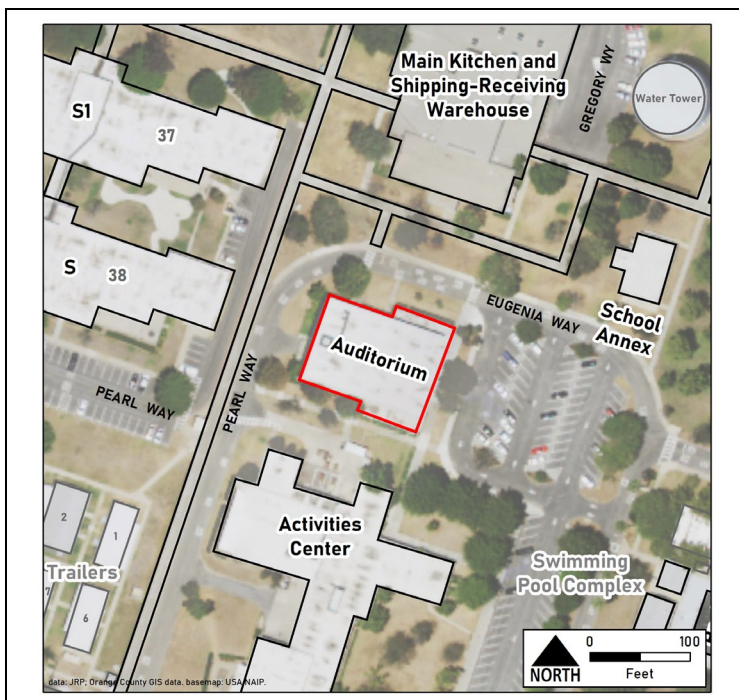
California Department of Finance, *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 103; "Contracts Let for Auditorium," *Los Angeles Times* (October 20, 1963): 25; "Fairview Hospital's Auditorium Finished," *Long Beach Independent* (December 12, 1964): C5; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)





### **P3a. Description (continued):**

The building's concrete framing is exposed along all sides, with concrete buttressing dividing the south, west, and north elevations into six, four, and six bays, respectively (**Photograph 3**). Large metal louvre vents are distributed throughout the bays at irregular intervals. The majority of the windows are located in the single-story east section along the north and south sides, and consist of metal-frame, fixed-pane, casement, and replacement horizontal-sliding windows. Secondary personnel entrances are located on the south, north, and west sides and consist of double and single flush metal doors, with the rear (west) entrance accessed via concrete stairs with modern metal railing.

The building's interior is dominated by the auditorium space, which features vinyl tile flooring, acoustic ceiling tiles, an elevated wood stage to the rear (west), and wood and metal audience seating to the front (east) (**Photograph 4**). Flood lights are embedded in the ceiling tiles. The lobby features identical ceiling and floor tiles, and also has plaster walls, original wood baseboards, and double flush wood doors (**Photograph 5**).

### **B10. Significance (continued):**

#### Historic Context

The auditorium was originally scheduled for construction in the 1957-1958 Fiscal Year at an initial projected cost of \$311,260 according to the State Building Construction Program five-year plan. However, only working plans were funded that year at \$23,000. The building was designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. Construction of the building was deferred as a higher priority was placed on residential construction, which would help alleviate overcrowding at the hospital. The California Division of Architecture submitted the final plans for the building in August 1963, and the general construction contract of \$273,800 was awarded that October to the G. H. Peters Construction Co. of Los Angeles. Completion of construction was announced the following December 1964, thus marking the close of Fairview State Hospital's historic period of development. By 1982, the building was renamed the "Anthony N. Toto Auditorium," in honor of the Fairview State Hospital's second superintendent and medical director. Since its construction, the 800-person auditorium with stage and movie projector has continued to host entertainment functions for the residents of Fairview.<sup>1</sup>

#### Evaluation

The auditorium at FDC was completed in 1964 as a second-phase addition to Fairview State Hospital. The building served in continual use as a civic auditorium, hosting a variety of hospital functions that are directly associated with the Fairview facility's role in providing care for people with developmental disabilities. As such, the auditorium is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the hospital as a civic auditorium, this function alone does not rise to the level of historic significance, and the auditorium is not individually eligible for listing under these criteria.

The auditorium is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level.

The auditorium was designed to complement the initial development of Fairview State Hospital, and it was completed in early 1964 near the end of the hospital's initial build out. The building is thus significant under NRHP Criterion C and CRHR

<sup>1</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 103; California Department of Public Works – Division of Architecture, "Fairview State Hospital: Auditorium," W.O. AE 05 021C, August 23, 1963, File 19-G-12, California Department of General Services Plans Vault, West Sacramento, California; "Contracts Let for Auditorium," *Los Angeles Times* (October 20, 1963): 25; "Fairview Hospital's Auditorium Finished," *Long Beach Independent* (December 12, 1964): C5; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 31, on file at Fairview Developmental Center, Costa Mesa, California.



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\*Resource Name or # (Assigned by recorder) Auditorium

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a significant example of post-war state hospital design. The auditorium is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The auditorium retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The only known modifications are the addition of glass-and-metal automatic doors, recent utility connections, and some limited modern exterior lights. These alterations have a minimal impact on the building's integrity of materials. The building retains strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the auditorium include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International-style architectural details including the building's massing; flat roof; reinforced concrete construction; all doors and windows that date before 1969; and the concrete relief pattern along the facade. Contributing interior features include the layout and floorplan with an open auditorium, stage, entry vestibule, projection room, and dressing rooms; the wood floor finish in select rooms; original auditorium seating; and any remaining doors that date before 1969.

### Photographs (continued):



**Photograph 2:** Detail view of Anthony M. Toto Auditorium primary entrance; facing west / northwest, May 28, 2019.

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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Auditorium

☒ Continuation ☐ Update



**Photograph 3:** Northwest corner of Anthony M. Toto Auditorium; facing southeast, May 28, 2019.



**Photograph 4:** Interior view of Anthony M. Toto Auditorium; facing northwest, May 28, 2019.

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\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

\*Resource Name or # (Assigned by recorder) Auditorium

☒ Continuation ☐ Update



**Photograph 5:** Interior view of Anthony M. Toto Auditorium front (east) lobby; facing northeast, May 28, 2019.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 4

\*Resource Name or # (Assigned by recorder): Auxiliary Electric Switchhouse

**P1. Other Identifier:** Auxiliary Electric Switchhouse

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1/4 of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located at the north end of the complex at the southwest corner of Merrimac Way and Santa Catalina Drive at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 469-square-foot, single-story, utilitarian-style auxiliary electric switchhouse building, which possesses a rectangular footprint and concrete-block construction, and is surrounded by manicured grass lawns, concrete walkways, and asphalt-paved roadways (**Photograph 1**). The building features a shed roof covered with modern Sarnafil membranes, with narrow eaves, wood fascia, and metal coping. A double metal flush personnel door permits access to the building on the west side, with a single, slightly recessed, metal-frame, six-light, awning window with a concrete sill located on the south side (**Photograph 2**).

\*P3b. Resource Attributes: (HP9) Public Utility Building; (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** North and west sides of auxiliary electric switchhouse; facing southeast; May 29, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both  
ca. 1954 (aerial photography)

\*P7. Owner and Address:

California Department of  
Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 4

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Auxiliary Electric Switchhouse

B1. Historic Name: Substation

B2. Common Name: Auxiliary Electric Switchhouse

B3. Original Use: Substation B4. Present Use: Storage

\*B5. Architectural Style: Utilitarian

\*B6. Construction History: Built ca. 1954; no known alterations.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability // Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The auxiliary electric switchhouse appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as an auxiliary utility support building during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

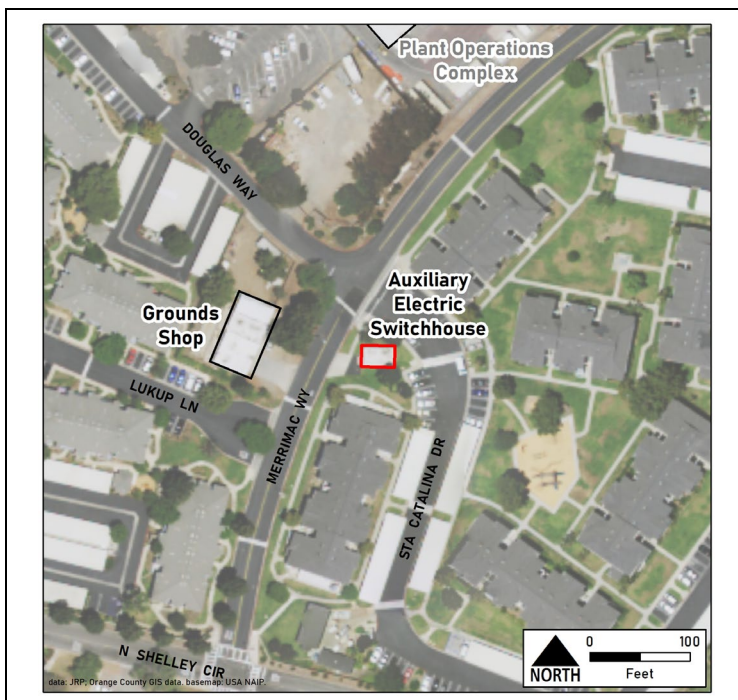
Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives, Sacramento; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)





## B10. Significance (continued):

The Auxiliary Electric Switchhouse was built circa 1954. This building was part of one component—"mechanical and electrical utilities and all related service connections"—in the State Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in 1953. As a utilitarian building, the switchhouse had little architectural embellishment, although its angular form and concrete construction fit with the hospital campus's overall modern appearance. The building appears to have no longer functioned as a substation / switchhouse by 1982, when it was referred to as the "Old Electrical Sub-Station" in site mapping from that year. It currently functions as a storage space.<sup>1</sup>

### Evaluation

The FDC auxiliary electric switchhouse was completed about 1954 as an early service support facility for Fairview State Hospital. The building served through the hospital's early history, supporting Fairview's primary mission of providing care for people with developmental disabilities. The switchhouse functioned as a component of the complex's electrical utilities and thus allowed the site to maintain operability. This contributed to the facility's identity as a self-contained institution. As such, the auxiliary electric switchhouse is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided decades of electrical service, this function alone does not rise to the level of historic significance, and the switchhouse is not individually eligible for listing under these criteria.

The switchhouse is not significant for its association with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level.

The auxiliary electric switchhouse was designed as part of the initial development of the campus plan for Fairview State Hospital, and it was completed about 1954 during the hospital build out. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is an excellent example of post-war state hospital design. The switchhouse is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. Independently, the switchhouse is a modest example of electrical utilitarian infrastructure, although its concrete construction and angular form fit with the modern appearance of the hospital campus as a whole. It is not exceptional in its design or scale, and shows no evidence of technological innovation. Similar type facilities may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The auxiliary electric switchhouse retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The building's principal features remain present and readily visible. The building retains strong integrity of design, materials, workmanship, location, setting, and feeling. Because the building no longer serves as a switchhouse, and is currently used for storage, it suffers a loss of integrity of association. Similarly, as its surroundings have been altered by the modern construction of multi-unit residential housing, its integrity of setting has been somewhat diminished.

<sup>1</sup> Pacific Air Industries, Flight AXK-1953, Frame AXK-6K-70, 1:20,000, June 2, 1953, flown for US Department of Agriculture – Production and Marketing Division, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); Fairchild Aerial Surveys, Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available at UCSB; Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives, Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 31, on file at Fairview Developmental Center, Costa Mesa, California.

**Photographs (continued):**



**Photograph 2:** Detail view of auxiliary electric switchhouse window; facing north / northeast, May 29, 2019.

State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

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\*Resource Name or # (Assigned by recorder): Central Powerplant & Laundry Building

**P1. Other Identifier:** Central Powerplant & Laundry Building

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1 ¼ of Sec 1; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located in the center of the complex on the east side of Gregory Way at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 49,675-square-foot, two-story, utilitarian-style central powerplant and laundry building, which possesses an irregular footprint and a combination of exposed concrete and corrugated metal siding. It is surrounded by manicured grass lawns with concrete walkways and asphalt-paved roadways (**Photograph 1**). Originally constructed circa 1955, the central powerplant and laundry building is a multi-sectional facility that has been expanded over time by two additions: the dirty laundry storage section at the northeast corner (built sometime between 1960 and 1963); and a chiller equipment room at the south (built circa 1980) (see Continuation Sheet).

\*P3b. Resource Attributes: (HP8) Industrial Building; (HP9) Public Utility Building; (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Western section of central powerplant and laundry building; facing northeast, May 28, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both  
Circa 1955 (Fairchild Aerial Surveys / California Department of Public Works, Division of Architecture)

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28, 2019

\*P10. Survey Type: (Describe)

Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_



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\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

B1. Historic Name: Laundry – Boiler Plant

B2. Common Name: Central Powerplant & Laundry

B3. Original Use: Laundry and boiler plant B4. Present Use: Laundry and boiler plant

\*B5. Architectural Style: Utilitarian with International elements

\*B6. Construction History: Built ca. 1955; third smokestack added ca. 1960; dirty laundry storage added to northeast corner 1961-1963; chiller equipment room with open-air enclosure and cooling towers added to south side ca. 1980; Sarnafil-membrane roof sheathing and north metal staircase and shed-roof enclosure added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The central powerplant and laundry building appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as a powerplant and laundry facility during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

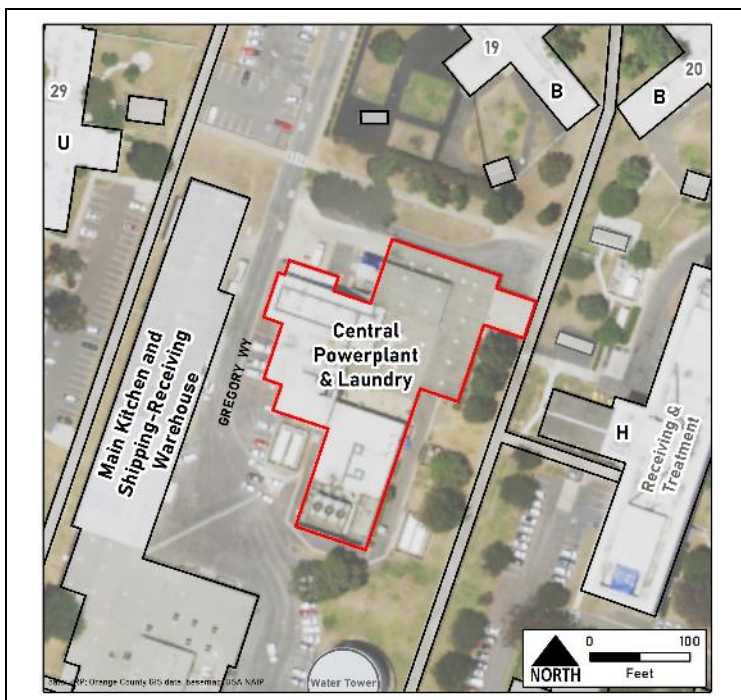
California Department of Public Works, "Fairview State Hospital: Hospital Administration– Plot Plan," July 27, 1956, File 19-G-9, California Department of General Services Plans Vault, West Sacramento; "19 Buildings: Maintenance is vast Job," *Costa Mesa Daily Globe-Herald and Pilot*, (May 4, 1961): 10, 15, Costa Mesa Historical Society, Costa Mesa, California; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)





### P3a. Description (continued):

The central powerplant and laundry building is architecturally divided between those two functions (see detail **Sketch Map** on Continuation Sheet). Comprising the southernmost building sections, the power plant features one- and two-story sections, both with flat roofs with parapets, metal coping, and modern Sarnafil-membrane roofing (**Photograph 1**). Both the original sections and the circa 1980 addition are clad with metal-slat siding. A row of steel-sash, awning windows extends below the roofline of both the original, northernmost one- and two-story sections, with louvered vents regularly distributed along the west side of the second story. These original powerplant building sections contain entrances consisting of original paired flush wood personnel doors with upper glazing as well as a roll-up metal garage door at the south end of the two-story section, which features two original metal smokestacks and one added about 1960. In about 1980, a one-story chiller equipment room with corrugated metal siding was constructed immediately south of the original powerplant (**Photographs 2 and 3**). The addition features corrugated metal siding, and has a metal roll-up garage door, a flush metal personnel door, and a large metal louvre vent along the west side. At the south end of the addition is an open-air enclosure with three cooling towers.

The laundry facility is contained within the northernmost building sections, and also features numerous, multi-level components (**Photograph 4**). As with the power plant sections described above, prominent laundry building sections likewise feature corrugated metal siding, flat roofs with parapets, steel-sash ribbon windows, and modern Sarnafil-membrane roof coverings. However, these building sections also feature concrete-block loading docks, with original tar-and-gravel roofs on most of the laundry building sections. Most laundry building section roofs are outfitted with regularly distributed, original metal hooded roof vents (**Photograph 5**). A modern metal staircase and corrugated metal shelter were constructed along the north side at an unknown date (**Photograph 6**). Sometime between 1960 and 1963, the dirty laundry storage addition was constructed at the far northeast corner of the facility (**Photograph 7**). This addition features a square footprint, corrugated metal siding and roofing, and two metal roll-up garage doors on the north side. A small courtyard separates the laundry section from the circa 1980 equipment room addition described above (**Photograph 8**).

### B10. Significance (continued):

The central powerplant and laundry building was included as two components—“laundry building” and “boiler plant”—in the Legislature’s initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in 1953. The California Division of Architecture submitted final plans for the facility in December 1954, and construction was completed about 1955 (**Figure 1**). Like most of the major buildings on the hospital grounds, the building was constructed from site-cast concrete with a rough board-form finish, although the central powerplant and laundry building also made prominent use of corrugated metal siding. Its utilitarian design incorporated a number of International-style features, such as its angular massing, flat roof, and extended rows of metal-sash windows. The powerplant originally housed three high-pressure, gas-fired boilers that each generated 25,000 pounds of steam per hour, which was then circulated throughout the hospital complex for heating, cooking, laundry, and other purposes. The plant additionally housed water-softening equipment for the kitchen and laundry. By 1961, the laundry reportedly processed around 100,000 pounds of bed linens and clothing per week. Although additional facilities have been added (see **B6**), this building continues to function in its historic industrial capacity.<sup>1</sup>

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director’s Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives, Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; California Department of Public Works, Division of Architecture, “Fairview State Hospital: Laundry-Boiler Plant,” W.O. 2428GC, December 30, 1954, File 19-G-17, California Department of General Services Plans Vault, West Sacramento; Fairchild Aerial Surveys, Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); California Department of Public Works, Division of Architecture, “Fairview State Hospital: Hospital Administration & Acute Infirm Wards – Plot Plan, Electrical Symbols & Details,” sheet E-1 of 14, W.O. 2428 GC, July 27, 1956, File 19-G-9, California Department of General Services Plans Vault, West Sacramento; “19 Buildings: Maintenance is vast Job,” and “Every Duty is Giant Size Job,” *Costa Mesa Daily Globe-Herald and Pilot: Fairview Hospital Special Edition* (May 4, 1961): 10, 15, on file at Costa Mesa Historical Society, Costa Mesa, California (CMHS).

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\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Figure 1:** Portion of 1958 oblique photograph of Fairview State Hospital, showing central powerplant and laundry building as originally constructed. Not shown: third smokestack, added ca. 1960; dirty laundry storage building, added 1961-1963; and chiller equipment room with open enclosure, added ca. 1980 (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, California State Archives, Sacramento).

### Evaluation

The FDC central powerplant and laundry building was completed about 1955 as an integral part of the original campus plan for Fairview State Hospital. The building has been in continual use since, generating steam power and providing essential laundry services for the institution. The building's operation supported Fairview's primary mission of providing care for people with developmental disabilities, and it contributed to the hospital's identity as a self-contained institution. As such, the central powerplant and laundry building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided important services to the hospital, these functions alone do not rise to the level of historic significance, and the building is not individually eligible for listing under these criteria.

The central powerplant and laundry building is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level.

The central powerplant and laundry building was designed as part of the original campus plan for Fairview State Hospital, and it was completed about 1955 during the first phase of build out. Essentially utilitarian in design, the steel-frame building had walls constructed of site-cast concrete and corrugated metal siding, and incorporated such International-style features as angular massing, flat multi-part roof line, and extended window rows that allowed it to contribute to the overall campus's modern appearance. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The building is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is an unexceptional example of institutional use of the utilitarian construction with International-style elements. The design and construction prioritized economy, permanence, and ease of

Page 5 of 9

\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The central powerplant and laundry building retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The largest alteration to the building was the construction of the southern chiller equipment room about 1980. Additionally, a modern metal staircase, shed-roof shelter, and Sarnafil-membrane roof covering were added at unknown date. Despite these alterations, the central powerplant and laundry building retains generally good integrity of location, setting, design, materials, workmanship, feeling, and association.

Character-defining features of the building include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its utilitarian and International-style architectural details including the building's massing; multi-part flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; the concrete flooring; and any remaining doors or interior windows that date before 1969. The early 1960s dirty laundry storage room, built within the period of significance, contributes to the historic property; the 1980 chiller equipment room addition does not.

### Photographs (continued):



**Photograph 2:** Non-contributing chiller building section of central powerplant and laundry building, constructed ca. 1980; facing northeast, May 28, 2019.



Page 6 of 9

\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 3:** Detail view of ca. 1980 power plant addition entrances; facing northeast, May 28, 2019.



**Photograph 4:** Northwest corner of central powerplant and laundry building, showing laundry portion; facing southeast, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 5:** Detail view of original laundry roof vent; facing southwest, May 28, 2019.



**Photograph 6:** Detail view of modern metal staircase and shelter additions to north side of laundry building sections; facing southeast, May 28, 2019.

Page 8 of 9

\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 7:** Northeast corner of central powerplant and laundry building, with contributing dirty laundry storage addition at left; facing southwest, May 28, 2019.



**Photograph 8:** East side of central powerplant and laundry building, with courtyard (center) and equipment room (left); facing northwest, May 28, 2019.



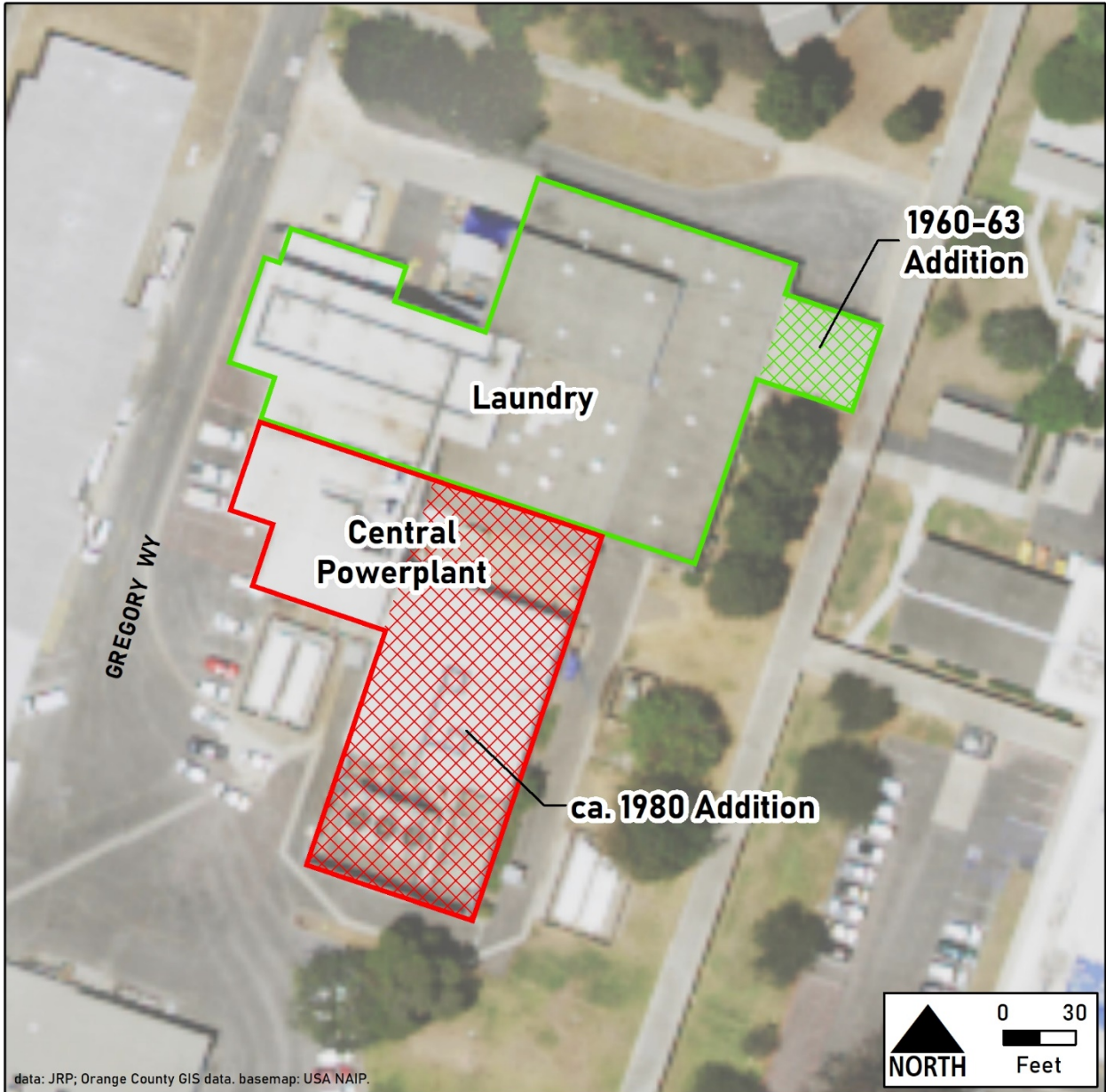
Page 9 of 9

\*Resource Name or # (Assigned by recorder) Central Powerplant & Laundry Building

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

**Site Map:**







State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 8

\*Resource Name or # (Assigned by recorder): Covered Walkways

**P1. Other Identifier:** Covered Walkways

**\*P2. Location:** ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

**\*a. County** Orange

**\*b. USGS 7.5' Quad** Newport Beach **Date** 2018 **T** 6S; **R** 10W;     ¼ of Sec    ; **S.B. B.M.**

**c. Address** 2501 Harbor Boulevard **City** Costa Mesa **Zip** 92626

**d. UTM:** (give more than one for large and/or linear resources) Zone    ;     mE/     mN

**e. Other Locational Data:**

Located throughout the central complex at Fairview Developmental Center.

**\*P3a. Description:** (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 80,892-square-feet of covered walkways that extend approximately one linear mile throughout Fairview Developmental Center (FDC), linking the various buildings throughout the complex (see **Sketch Map** on Continuation Sheet). The system comprises concrete slab walkways sheltered beneath steel-framed shelters topped with corrugated metal sheets and supported by round metal posts linked by metal I-beams (**Photograph 1**). Extending between most of the support posts—except where they have been removed—are corrugated metal screens (**Photograph 2**). The shelters provide continuous cover of the FDC's walkways, except where those walkways intersect roadways (**Photograph 3**). In addition to sheltering and lighting passage between the various facilities, the covered walkways are additionally outfitted with overhead light fixtures and carry steam and other utility distribution networks throughout the campus (**Photograph 4**).

**\*P3b. Resource Attributes:** (HP11) Engineering Structure; (HP14) Government Building; (HP39) Other (covered walkway); (HP41) Hospital

**\*P4. Resources Present:** ☐ Building ☒ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Central intersection of covered walkways; facing northwest, May 29, 2019.

**\*P6. Date Constructed/Age and Sources:**

☒ Historic ☐ Prehistoric ☐ Both  
ca. 1955 (California Department of Public Works, Division of Architecture)

**\*P7. Owner and Address:**

California Department of Developmental Services

**\*P8. Recorded by:**

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

**\*P9. Date Recorded:** May 28-30, 2019

**\*P10. Survey Type:** (Describe)  
Intensive

**\*P11. Report Citation:** (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

**\*Attachments:** ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 8

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Covered Walkways

B1. Historic Name: Covered Passages to Link Buildings

B2. Common Name: Covered Walkways

B3. Original Use: Covered walkways B4. Present Use: Covered walkways

\*B5. Architectural Style: Utilitarian with International elements

\*B6. Construction History: Built ca. 1955; expanded to west side of complex ca. 1958; food services extension ca. 1961; additions at various times as residence buildings constructed; mechanical upgrades to utilities at various unknown dates.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Multiple

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The covered walkways at FDC collectively appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this network of covered passageways is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The covered walkways are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The passageways have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

These covered passageways were designed and constructed as part of Fairview State Hospital, and they served continually as auxiliary support structures during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (See Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

Anson Boyd, State Architect, Work Order No. 2428 GC, Chapter 9, 1953, February 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives, Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

### **Sketch Map**

(See Continuation Sheet)

## B10. Significance (continued):

The system of covered walkways was included in the Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in 1953. These passageways were planned not only to link the various buildings, but also to distribute utilities throughout the hospital complex, which allowed for the rapid development of the Fairview site because it bypassed the costly, time-consuming processes of excavation and burial entirely. Drawings of the first build-out of the walkways were submitted in December 1954 as a component of the laundry and central boiler plant building, which generated the steam and power that the passageways conveyed. Essentially utilitarian, the passageways nonetheless incorporated International-style elements in keeping with the campus's overall modern aesthetic, such as the pronounced horizontal emphasis. The initial construction connected the northeast quadrant of the complex, which contained the kitchen / commissary building and Ward Building #1 (among the oldest buildings at Fairview), and the main administration building and the Acute Infirm Wards upon their completion by 1958 (**Figure 1**). In 1956, an additional \$249,000 was identified for planning and construction of an expansion of the covered passageways as a component of the State Building Construction Program five-year plan, with an additional \$147,750 for planning and constructing a food-service-specific extension in the 1959-1960 Fiscal Year (this extension was built circa 1961). The California Division of Architecture submitted final plans for the westward expansion of the covered walkway network in January 1957, which included the construction of the original, no-longer-extant transformer stations, and the contract was awarded in April to general contractor Robert E. McKee of Los Angeles as part of a larger \$3,121,970 building project that included four ward buildings. With the completion of this second phase of passageway construction by 1958—which connected Wards J, K, L, and M and the school, then under construction—the vast majority of the extant network was complete (**Figure 2**). As more ward buildings were added to the complex, they were also connected to the covered distribution network. The covered walkways continue to provide sheltered passage and overhead utility distribution for the complex.<sup>1</sup>



**Figure 1:** View of covered walkway facing southeast Kitchen entrance, ca. 1961 (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 16, from the Collections of the Costa Mesa Historical Society).

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives, Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; California Department of Public Works, Division of Architecture, "Fairview State Hospital: Laundry-Boiler Plant," W.O. 2428GC, December 30, 1954, File 19-G-17, California Department of General Services Plans Vault, West Sacramento; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, California State Archives, Sacramento; California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate*, 1956 Reg. Sess. (Sacramento: California State Senate, 1956), 97, 110; [oblique photograph], December 15, 1961, P00500, Photo Album P00401 – P00600, on file at Costa Mesa Historical Society, Costa Mesa, California; California Department of Public Works, Division of Architecture, "Fairview State Hospital: Covered Passages to Link Buildings," W.O. 3718 GC-57, January 25, 1957, File 19-G-1, California Department of General Services Plans Vault, West Sacramento; "Construction Contracts Awarded and Miscellaneous Personnel Data," *Architect and Engineer* (April 1957): 41.



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\*Recorded by T. Webb & S. Skow \*Date May 28-30, 2019

\*Resource Name or # (Assigned by recorder) Covered Walkways

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**Figure 2:** 1958 oblique photograph of Fairview State Hospital complex. The long, linear covered walkways are in their current general configuration by this date (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, California State Archives, Sacramento).

### Evaluation

The FDC covered walkways were largely completed by about 1958 as an integral part of the original and expanded campus plan for Fairview State Hospital. The passageways / utility distribution network has been in continual use since, providing essential services for the institution. The network supported Fairview's primary mission of providing care for people with developmental disabilities, and it contributed to the hospital's identity as a self-contained institution. As such, the network of covered walkways is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the network provided important services to the hospital, these functions alone do not rise to the level of historic significance, and the walkways are not individually eligible for listing under these criteria.

The covered walkways are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any



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\*Resource Name or # (Assigned by recorder) Covered Walkways

\*Recorded by T. Webb & S. Skow \*Date May 28-30, 2019

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hospital superintendent, staff member, patient, or other individual directly associated with these walkways made demonstrably important contributions to history at the local, state, or national level.

The covered walkways were designed as part of the original and expanded campus plan for Fairview State Hospital, and they were generally completed about 1958 during subsequent phases of development. The passageways are essentially utilitarian in design and incorporated a strongly horizontal emphasis in keeping with the campus's overall International-style aesthetic. The network of covered walkways is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The walkways are not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the network as a component of a larger campus plan, rather than as a stand-alone structure. Independently, the walkways / utility distribution network is an unexceptional example of institutional use of utilitarian infrastructure with International-style elements. The design and construction prioritized economy, efficiency, and ease of maintenance over architectural flourishes. Similar type designs may be found at other institutions and this network is not an important example of the type. Likewise, although extensive in length, the system of covered passageways is not significant for its engineering, as it is not exceptional in its design or scale, and shows no evidence of technological innovation.

The covered walkways are not significant as a source (or likely source) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The covered walkway system retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The largest alteration to the passageways has been the removal of the corrugated metal screens and periodic mechanical upgrades to the utilities. Despite these alterations, the covered walkways retain generally good integrity of location, setting, design, materials, workmanship, feeling, and association.

Character-defining features of the covered walkways include the elements that date to the district's period of significance: the distribution network's location and orientation, its general setting, and its utilitarian and International-style architectural details including its metal frame, corrugated metal shelter roof, metal post-and-beam construction, and horizontal emphasis.

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\*Recorded by T. Webb & S. Skow \*Date May 28-30, 2019

\*Resource Name or # (Assigned by recorder) Covered Walkways

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**Photographs (continued):**



**Photograph 2:** Detail view of corrugated metal screen; facing north/northeast, May 30, 2019.



**Photograph 3:** Example of a location where a roadway (North Shelly Circle) intersects and interrupts a covered walkway; facing southwest, May 30, 2019.

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\*Resource Name or # (Assigned by recorder) Covered Walkways

\*Recorded by T. Webb & S. Skow \*Date May 28-30, 2019

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**Photograph 4:** Detail view of steam and utility distribution network carried via covered walkways; facing southwest, May 30, 2019.



**Sketch Map:**



Covered walkways denoted in red. P1 through P4 refer to locations of Photographs 1 through 4.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D  
Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

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\*Resource Name or # (Assigned by recorder): FDC Campus Grounds

**P1. Other Identifier:** Fairview Developmental Center Grounds and Landscape Features

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2019 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address Harbor Boulevard city Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Entirety of Fairview Developmental Center campus.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the grounds and landscape features of the Fairview Developmental Center (FDC) (**Figure 1**). The FDC campus occupies approximately 110 acres in the City of Costa Mesa, Orange County (see **Sketch Map**). The majority of the landscape features are found in the main campus area, which encompasses approximately 106 acres, bound by North Shelley Circle and South Shelley Circle roads and bisected by Pearl Way and Gregory Way, both of which run north-south. Additional landscape features are found north of the main campus area along Merrimac Way and associated with the plant operations complex. Landscape features east of the core campus are associated with staff housing along Mark Lane, and the facility's main entrance at the intersection of Fair Drive and Harbor Boulevard (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital; (HP29) Landscape Architecture

\*P4. Resources Present: ☐ Building ☒ Structure ☒ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1.** Grounds in front of the R&T and Administration Building; facing southeast, May 29, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
1953-1964 with subsequent additions  
(see B6. Construction History)

\*P7. Owner and Address:  
California Department of  
Developmental Services

\*P8. Recorded by:  
Denise Bradley Cultural Landscapes  
520 Frederick Street, No. 37  
San Francisco, CA 94117

\*P9. Date Recorded: May 29–30, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☒ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

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\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

B1. Historic Name: Fairview State Home Grounds; Fairview State Hospital Grounds

B2. Common Name: Fairview Developmental Center Grounds

B3. Original Use: Landscaping B4. Present Use: Landscaping

\*B5. Architectural Style: n/a

\*B6. Construction History: Landscape features were developed in stages accompanying building construction between 1953 and 1964; Central Park constructed beginning in mid-1970s and renovated repeatedly, most recently between 2015-2017; Shannon's Mountain created between 1978-1982; multiple ward outdoor recreation spaces were renovated between the mid-1980s and 2000, to include removing security fences and replacing pavement with grass and modern patios

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1968 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The FDC campus grounds appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP/CRHR Criteria A/1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, the FDC campus grounds are a historical resource for the purposes of the California Environmental Quality Act (CEQA). The contributing and non-contributing elements of the grounds are listed in **Table 1** below and are depicted on the attached **Sketch Map**. The various elements that comprise the grounds and formal landscaping do not appear to be individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The grounds have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

**\*B12. References:**

Fairview State Hospital clippings file, Costa Mesa Historical Society; Advisory Committee of Family Developmental Services, *Fairview Handbook* (2<sup>nd</sup> ed., 1982); DPW, Division of Architecture, assorted plans, California Department of General Services (DGS) Plans Vault, West Sacramento; and see footnotes.

B13. Remarks:

\*B14. Evaluator: Denise Bradley; Samuel Skow

\*Date of Evaluation: October 2019

(This space reserved for official comments.)

**Sketch Map**

See Continuation Sheet

**P3a. Description (continued):**

**Table 1: List of Fairview State Hospital Historic District Landscape Features and Findings**  
(all features date to original construction [ca. 1953–64] unless otherwise noted)

Resource Name or Function	Year Built	OHP Status Code*
<b>CIRCULATION FEATURES</b>		
Entrance Streets		
Fair Drive (alignment altered at intersection with Harbor Boulevard ca. 2006-07)		3D
Merrimac Way (alignment altered between Plant Operations and intersection with Harbor Boulevard ca. mid-1980s)		3D
Core Streets		
North and South Shelley Circle		3D
Doris Way		3D
Eugenia Way		3D
Florence Way		3D
Gina Way		3D
Gregory Way		3D
Pearl Way		3D
Rosa Way		3D
Staff Housing Street		
Mark Lane		3D
Parking		
Parking Lots		3D
Street-Side Parking (single row of perpendicular or acute angle parking spaces along one side of road)		3D
North side of Florence Way (next to S end of Residences 12/14/16)		3D
Gina Way		3D
North side of Doris Way (next to Residences 38/39)		3D
North side of Rosa Way (near Residences 32/33)		3D
South side of Rosa Way (near Residences 26/27)		3D
South side of Doris Way	ca. 1982-87	6Z
Sidewalks		
Street-side sidewalks		3D
Building entrance sidewalks		3D
ADA modifications (i.e., curb ramps, ramps to building entrances, etc.)	post-1969	6Z
<b>VEGETATION CHARACTERISTICS</b>		
Lawns around buildings within the core of the campus, at Staff Housing, and around Goodell School		3D
Mature trees set within lawns and planting islands		3D
Shrubs and flowering plants	Post-1969	6Z
<b>OUTDOOR RECREATION AREAS AT RESIDENCES</b>		
Original design remains intact		
Residence 17 (two spaces on northeast side of building)		3D
Residence 18 (two spaces on northwest side of building)		3D
Residence 20 (two spaces on southeast side of building)		3D
Residence 25 / Building L (two spaces on south side of building)		3D
Residence 26 / Building Q (west side of building)		3D
Residence 27 / Building Q (east side of building)		3D
Residence 32 / Building P (west side of building)		3D
Residence 34 / Building O (west side of building)		3D

State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**CONTINUATION SHEET**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_

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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update

Resource Name or Function	Year Built	OHP Status Code*
Residence 36 / Building S-1 (south sides of building)		3D
Residence 37 / Building S-1 (south side of building)		3D
Residence 38 / Building S (south side of building)		3D
Residence 39 / Building S (south side of building)		3D
Residence 40 / Building M (two spaces on north side of building)		3D
Design altered after 1969		
Residences 11-16 / Buildings D, E, F	Altered mid-to-late 1980s	6Z
Residence 19 / Building B (two spaces on southwest side of building)	Altered mid-to-late 1980s	6Z
Residences 21-24 / Building K	Altered late-1980s to mid-1990s	6Z
Residences 28 and 29 / Building U	Altered late-1980s to mid-1990s	6Z
Residences 30 and 31 / Building T	Altered late-1980s to mid-1990s	6Z
Residence 33 / Building P (east side of building)	Altered mid-to-late 1980s	3D
Residence 35 / Building O	Altered ca. 2007-09	6Z
Between Residences 36 and 39 / Buildings S and S-1	Altered ca. 2007-09	6Z
Between Residences 37 and 38 / Buildings S and S-1	Altered ca. 2007-09	6Z
Residences 42 and 43 / Building J	Altered mid-to-late 1980s	6Z
Residences 41 and 44 / Building J	Altered ca. 2007-09	6Z
<b>COURTYARDS AT RESIDENCES</b>		
Original design remains intact		
Four courtyards between wings Residences 17-20 / Building B		3D
Courtyard between wings of Residences 26 and 27 / Building Q		3D
Courtyard between wings of Residences 28 and 29 / Building U		3D
Courtyard between wings of Residence 30 and 31 / Building T		3D
Courtyard between wings of Residences 32 and 33 / Building P		3D
Courtyard between wings of Residences 34 and 35 / Building O		3D
Design altered after 1969		
Courtyard between wings of Residences 21-24 / Building K	Altered 1980s	6Z
Courtyard between wings of Residences 41-44 / Building J	Altered 1980s	6Z
<b>GOODELL SCHOOL</b>		
"Picnic Area" on west side of school		3D
Asphalt-paved area west of "Picnic Area"		3D
Field across west side and north end of school		3D
Fenced outdoor space on south side of school	Altered 1971/2017	6Z
<b>STAFF HOUSING</b>		
Front yard features (driveway, entrance sidewalk, lawn, ficus trees)		3D
Back yard features (i.e., fences, patios, vegetation, etc.)	Altered post-1969	6Z
<b>TRANSITIONAL HOUSING</b>		
Driveway		3D
Front yard features (entrance sidewalks and vegetation)	Altered post-1969	6Z



Resource Name or Function	Year Built	OHP Status Code*
Back yard features (i.e., fences, patios, vegetation, etc.)	Altered post-1969	6Z
<b>OUTDOOR SPACES</b>		
Central Park	Mid-1970s Altered ca. 2015-17	6Z
Horse Stables	ca. 1989	6Z
Lava Lounge		
Concrete patio along south and west sides of building		3D
South side features (CMU wall and two CMU walled planters)		3D
West side features (exposed aggregate patio and two CMU walled planters)		3D
Memorial Park	ca.2000s	6Z
<b>STRUCTURES</b>		
Main Entrance		
Sign and walled planting beds at intersection of Fair Drive and Harbor Boulevard	ca. 2006-07	6Z
Entrance Circle		
Walled planter on east side	ca. 2006-07	6Z
Wooden information kiosk and four lights	ca. 1991	6Z
Fences (chain-link, metal post, vinyl, etc.)	varies	6Z
<b>SMALL-SCALE FEATURES</b>		
Streetscape (i.e., signage, streetlight fixtures, etc.)		6Z
Site Furnishings (i.e., portable shade structures, benches, tables, trashcans, bike racks, swings, plant containers, etc.)		6Z
Edging (concrete edging around planting beds)		6Z

\*3D – Appears eligible for NRHP as a contributor to an NRHP eligible district through survey evaluation.

\*6Z – Found ineligible for NRHP, CRHR, or local designation through survey evaluation.

## CIRCULATION FEATURES

### Roads

The road system and provisions for parking large numbers of automobiles were both part of the original design of the Fairview campus. This component of the design was not unique to FDC but was characteristic of most campuses that were developed throughout California during the post-World War II era. These features acknowledged the importance of the automobile in the post-World War II suburban environment and the fact that visitors and staff would most likely arrive by car.

The main entrance to the campus is along Fair Drive, which is laid out in a gently curved alignment from Harbor Boulevard to the front of the R&T and Administration Building. Fair Drive's west end forms a semi-circular drop-off that provides access to the main entrance of the R&T and Administration Building. Originally, the east end of the street split near Mark Lane into two separate roads—the extant curved section, which aligns with the extension of Fair Drive on the opposite of Harbor Boulevard, and a straight section. This split occurred just east of Mark Lane and the straight section continued for approximately 300 feet to Harbor Boulevard; its intersection with Harbor Boulevard was located approximately 55 feet north of the current intersection. This straight section of Fair Drive was removed around 2006-07 as part of the infrastructure developments for the housing along Cornerstone Lane. Today, Cornerstone Lane intersects with Fair Drive near the original split, and a sidewalk now runs along the alignment of the removed straight section of road. Other than this alteration, the alignment and width of Fair Drive appear to be the same as when the street was laid out (**Photograph 2**).

Merrimac Way, which originally served as the service entrance, also provides access to the core of the FDC campus from Harbor Boulevard. The street's alignment curves slightly from its intersection with Harbor Boulevard to its intersection with Shelley Circle. Merrimac Way provides direct access to the Plant Operations complex, located just north side of the street. The street continues westward at its intersection with Shelley Circle as Gregory Way to provide access to the Kitchen, Central

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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update

Power Plant, Laundry, and Shipping/Receiving Warehouse. The street retains most of its original alignment. However, in the mid-1980s, the portion of the street east of the Plant Operations complex was widened as part of the Harbor Village development, and planting islands were added to the center, creating a divided roadway. At this same time, the east end of the street was shifted slightly northward to align with the continuation of Merrimac Way on the east side of Harbor Boulevard.

The main core of the campus is surrounded by a perimeter street system comprised of Shelley Circle, Eugenia Way, and Florence Way. Streets within the core of the campus connect to this perimeter street system and provide vehicular access to specific groups of facilities and their parking lots. However, the streets do not provide cross-campus access; cross-campus access is via a series of covered walkways. The north-to-south aligned streets include Pearl Way and Gregory Way. The east-to-west aligned streets include Gina Way, Doris Way, and Rosa Way. The streets are two lanes wide and are paved with asphalt; the edges of the streets are often defined by a concrete curb and gutter (**Photographs 3 and 4**).

### Parking

Parking lots and dedicated street-side parking areas are adjacent to all buildings or complexes. This arrangement provides parking within a short walking distance of all buildings. Generally, planting islands define the entrances and the ends of rows in the parking lots; trees and shrubs in these planting islands lessen the impact of the paving and help to integrate the lots with the adjacent lawn areas. The entrance drive and parking for Buildings K, O, P, Q, T, and U are each organized around a large planting island which is also planted with grass and trees (**Photographs 5 and 6**).

Street-side parking, consisting of a single row of perpendicular (90 degree) or acute-angle parking spaces laid out next to the street, augments the parking lots. The street-side parking minimizes the need for larger group lots and thereby helps to maintain the continuity of the landscape setting between the buildings. With the exception of the street-side parking along the south side of Doris Way, across from Building S, all of the street-side parking was part of the original design for the campus (**Photograph 7**).

### Pedestrian Circulation

Covered walkways provide a key part of the internal circulation system across the campus, between the facilities within the core, and to the Goodell School; these structures are described in detail on a separate “Covered Walkways” DPR 523 form.

Street-side sidewalks are laid out immediately adjacent to the street without a planting strip and are found along the south side of Fair Drive, along one side of the Fair Drive entrance loop, and along much of inner side of Shelley Circle. Sidewalks are also located along the length of the street-side parking spaces and along some of the edges of parking lots; these sidewalks, in turn, connect to ones leading to the entrances to the buildings (**Photograph 8**).

Sidewalks lead to all building entrances; the width of the entrance sidewalks typically indicates the hierarchy of the entrance (i.e., the ones leading to the main entrances are wider than ones leading to secondary entrances). The main entrance sidewalk often expands near the building to form a paved entrance plaza at the same elevation as the sidewalk or at a slight slope so that no stairs are required to enter the building. For example, this arrangement is found at the main entrance to the R&T and Administration Building, the Auditorium, the Activity Center, Goodell School, and Building S-1.

The sidewalks which were laid out as part of the historic development have several common characteristics. They generally have a linear alignment;<sup>1</sup> they are constructed of concrete with a plain broom finish and are scored with a perpendicular line at regular intervals; they have integrated concrete curbs and gutters next to streets and parking. Although, it is likely that some of the original sidewalks have been rebuilt and widened to meet current standards, their locations typically correspond to the locations shown in aerial photographs from the historic period. Accessibility modifications (i.e., ramp cuts, the addition of ramps to circumvent stairs, etc.) were made after the end of the historic period (**Photograph 9**).

The sidewalk system and pavement associated with the complex of prefabricated buildings (Trailers 1-12) in the southwest quadrant of the campus, Central Park, the south side of Goodell School, and Memorial Park were added after the end of the

<sup>1</sup> The historic-era main entrance sidewalk leading to the main entrance of the R&T and Administration Building and the street-side sidewalks along the Fair Drive entrance loop and Shelley Circle have slightly curved alignments.

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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

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historic period. Additionally, sidewalks and paving—often with curvilinear alignments—have been added to many of the outdoor recreation areas adjacent to the residential wards since the end of the historic period; these additions are described in more detail under the “Outdoor Recreation Areas” subsection.

## VEGETATION FEATURES

### Lawn and Trees

The design for the primary vegetation features—the lawns and trees—was developed in conjunction with the buildings. Lawns (of varying sizes) with tall trees provide the landscaped setting around the buildings within the core of the campus, around Goodell School, and within the Staff Housing area. Pedestrian access to the main entrance of buildings is through this landscaped setting (**Photographs 10–13**).

Trees are used to extend and link the landscaped setting within the parking areas. For example, trees are growing in a planting strip along the east side of the parking lot on the eastern side of Residence 11, in front of the Auditorium, in the planting strip along the east side of the parking lot at the Activity Center, and in the planting islands that separate the entrance drives/parking at Buildings P, Q, T, and U from Rosa Way.

The most commonly used trees on campus include a species of ficus (*Ficus macrophylla*), several species of pine (*Pinus* spp.), and several species of eucalyptus (*Eucalyptus* spp.).<sup>2</sup> The ficus trees are used extensively throughout the campus including within the Fair Drive entrance loop, along the edge of the front lawn at the Activity Center, in front of Goodell School, in planting islands in parking lots, along the sides of the covered walkway between buildings, and around the Staff Housing on Mark Lane (**Photographs 14–16**). The pines and eucalyptus trees are interspersed with deciduous trees in the lawn areas adjacent to the Administration Building and Activity Center, around the Residence Wards, in planting strips next to roads and parking lots, and scattered along the outer edges of portions of Shelley Circle.

The locations of the extant lawn areas correspond to those on aerial photographs from the historic period. Based on their size and the consistent locations of their canopies in aerial photographs, the ficus, pine, eucalyptus, and other mature trees were planted during the historic period. However, the overall number of trees found throughout the campus has been reduced by a number of factors. Trees have been lost through age, disease, and drought-related stress and have not been replaced.<sup>3</sup>

### Shrubs and Flowering Plants

Shrubs and flowering plants are found along the foundations of some of the buildings. For example, the R&T and Administration Building currently has a variety of roses growing along the foundation at the front of the building and trimmed hedges along the east-facing facades (visible from South Shelley Circle) (**Photograph 1**). Some of the residence wards (including Residences 21, 25, 41, and 43) have foundation plantings, but others (including Residences 11–16) lack this vegetation feature and grass extends all the way to the building’s foundation. A variety of low-growing shrubs are found in some of the planting islands in parking lots. Hedges are planted throughout the campus to mark or suggest boundaries; for example, along fence lines around the outdoor recreation areas next to the residential wards. The shrubs and flowering plants are commonly available species and generally, none are old enough to have been planted during the original construction phases of the campus or within the historic period. This category of vegetation has a limited life span and is routinely replaced, as preferences or tastes change and in response to maintenance and irrigation issues (**Photograph 17–19**).

## OUTDOOR RECREATION SPACES FOR RESIDENTIAL WARDS

The outdoor recreational areas adjacent to each residence ward have varying designs and features. In some cases, the outdoor space consists of a large rectangular expanse of paving attached to one or more wings of the building; some of these areas are now used for parking. At other residence wards, the outdoor area consists of a smaller paved area or patio—some rectangular, some round, and some biomorphic in shape—set within a lawn; in these instances, paved paths provide access between the

<sup>2</sup> No campus-wide planting plan or plant list was found during the research phase of this report. FDC’s plant operations does not have a current plan or list of all trees, and a survey for all trees was outside of the scope of this evaluation report.

<sup>3</sup> Robert Sterling (FDC), personal communication, May 29, 2019.

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building and the patio. The boundaries for the outdoor spaces are defined in a number of different ways—by a fence, a wall, a hedge, or some combination of these features. Typically, there are one or more shade structures and a variety of site furnishings (tables, benches, swings, barbeque grills, potted plants, etc.) on the paved area (**Photographs 20 and 21**).

Outdoor spaces were part of the original construction for each residence ward; however, the designs for some of the outdoor spaces have been modified. The original design consisted of a large rectangular expanse of pavement with a shade structure at one edge of the pavement. Originally, each outdoor space was surrounded or secured by a fence; sometimes a portion of the adjacent lawn was also enclosed by the fence. This original arrangement for the outdoor spaces (minus the fence) remains extant at Residences 17, 18, and 20 / Building B (two separate spaces for each residence), Residence 25 / Building L (two separate spaces), Residences 26 and 27 / Building Q, Residence 32 / Building P, Residence 34 / Building O, Residences 36 and 37 / Building S-1, Residences 38 and 39 / Building S, and Residence 40 / Building M (two separate spaces).

During the mid-1980s, the outdoor recreation spaces at the residences began to be renovated in conjunction with renovations to the interior living spaces. The changes to the exterior physical environment were meant to reflect current treatment philosophies and were implemented as part of the “Silver Challenge” launched by then-superintendent Dr. Francis M. Crinella. According to a 1983 newspaper article, one of the first changes to the outdoor spaces was the removal of the “six to eight foot [tall] fences” that enclosed the “play areas adjoining some patient dormitories.”<sup>4</sup> This article explained that “...the fence removal, although partially symbolic, is important because it enhances the implementation of his [Dr. Crinella’s] philosophy of ‘normalization’ for the hospital. Even the most severely retarded should live in an environment that reflects ‘normal’ life as it is lived beyond the confines of the institution.”<sup>5</sup> These initial renovations were implemented during the mid-to-late 1980s. In some of the outdoor spaces, the renovations also included removing part of the original pavement and adding grass. New sidewalks (with linear alignments) were then added around the perimeter and sometimes through the central portion of the new lawn area to provide paved access to the shade structures. This arrangement remains extant in the outdoor spaces at Residences 11-16 / Buildings D, E, F, Residence 19 / Building B, Residence 33 / Building P, and at Residences 42 and 43 / Building J (**Photographs 22–24**).

More renovations were undertaken between 1987 and 1995. At this time, new concrete patios were added to the lawn areas; the new patios had either a biomorphic or round footprint. New curvilinear concrete paths were added to provide a connection between the patios and the buildings. These changes remain extant at Residences 21-24 / Building K, Residences 28 and 29 / Building U, and Residences 30 and 31 / Building T. Between 2007 and 2009, similar renovations were undertaken at the outdoor spaces at Residence 35 / Building O, between Residences 36 and 39, between Residences 37 and 38, and at Residences 41 and 44 / Building J (**Photographs 25 and 26**).

## COURTYARDS AT RESIDENTIAL WARDS

The wings which radiate from the central core of Building B form an X-shaped footprint and enclose four courtyards. The original configuration of features within each courtyard remains intact. Two of the courtyards (between wings of Residences 16 and 17 and Residences 18 and 19) provide public access into the residential wards. Here, a sidewalk from an adjacent parking lot wraps around the perimeter of each courtyard; the central portion of each courtyard contains grass and tall trees. A covered walkway, which terminates at Building B, runs through the courtyards between wings of Residences 16 and 19. The courtyard between wings of Residences 17 and 18 is paved and provides access to a loading dock (**Photograph 27**).

The original designs for the courtyards at Buildings O, P, Q, U, and T remain intact. In each building, the two residential wings form a V-shaped footprint, and a courtyard with a lawn and informally arranged large trees are located between these two wings. A straight concrete sidewalk (aligned north-to-south) bisects this lawn and connects to an entrance door. Another sidewalk (aligned east-to-west) runs across the open end of the “V.”

The entrance courtyards for Buildings J and K were modified in the 1980s to create fenced outdoor spaces for the residents of each building. At each building, the original sidewalks were removed and new curvilinear concrete sidewalks and other

<sup>4</sup> “Fairview to Drop Fences, ‘Normalize,’” *The Newport Ensign/Costa Mesa News/Irvine Today*, September 7, 1983, Fairview State Hospital Clippings File, CMHS.

<sup>5</sup> “Fairview to Drop Fences, ‘Normalize,’” *The Newport Ensign/Costa Mesa News/Irvine Today*, September 7, 1983.



features were added. A new raised concrete platform and three, square planters/seatwalls were added to the courtyard in Building J. At Building K, the new features included wood tables mounted onto round concrete pads, a ditch lined with river rock, two wooden bridges, and a round concrete slab with a three-tiered, semi-circular concrete seat wall surrounding a small fire pit. The new recreation space in Building K was dedicated to Enid M. Lathrop.<sup>6</sup> Both of these ca. 1980s designs remain in place (**Photographs 28–30**).

## GOODELL SCHOOL

Goodell School sits on the west side of Shelley Circle at the outer edge of the campus where there is enough open land for a range of outdoor facilities. A half-acre “picnic area” with grass, scattered trees, and portable shelters is west of the school building. A chain-link fence surrounds this area; gates on the east, north, and south sides provide access. Asphalt pavement is immediately to the west and north of the picnic area. These features have been part of the school complex since the late 1950s (**Photograph 31**).

An open field (approximately 5.3 acres) extends to the west and north of the school. This large grass field has been a part of the school complex since its construction. Originally, this land was divided into two separate fields by a sidewalk that led from the school to a building along the western edge. This sidewalk was removed around 2008, and the land was renovated for its current use as a soccer field.

The fenced outdoor space on the south side of the school has been altered. It originally included a concrete patio (extending along the south side of the building) and grass; these features remain. However, the School Annex, on the west side of the space, and a U-shaped concrete path, which extends southward from the patio, were added in 1971 and 2017, respectively (**Photograph 32**).

## STAFF HOUSING

The original staff housing complex is located just east of the main core of the FDC campus. A row of four single-family houses (Staff Housing Units 3, 4, 5, and 6) are located along the east side of Mark Lane. Each house has a concrete driveway leading to its garage and a concrete sidewalk, parallel to the house, leading to the front door. Vegetation features in the front yards include a lawn, large ficus trees, and foundation plants. The foundation plantings vary from house to house and have undoubtedly been replaced more than once since the original construction. Otherwise, this arrangement of features in the front yards is similar to what is visible in aerial photographs from the historic period. Each backyard, which provides a private outdoor space, has a small concrete patio, grass, and some trees; the patios have been altered and many of the trees added since the end of the historic period (**Photograph 33**). For a detailed discussion of the single-family houses, see the “Staff Housing” DPR 523 form.

Four duplexes (Transitional Housing Units 47, 48, 49, and 50) occupy the western side of Mark Lane. A concrete driveway provides access to the carport between Units 47 and 48; a similar arrangement exists for Units 49 and 50. These two driveways are the only unaltered landscape feature for this row of duplexes. The original concrete sidewalks that led to the front doors have been modified or replaced with ADA compliant ramps and handrails. Each duplex has a small front yard with varying foundation plantings; none of which are old enough to have been planted during the historic period. Unit 47 has a bed of different types of small succulents; and Units 48, 49, and 50 each have a low hedge. Fences or walls enclose the backyards whose original patios and lawns have been modified over the years by the addition of new pavement (**Photograph 34**). For a detailed discussion of the two duplex units, see the “Transitional Housing” DPR 523 form.

## LAVA LOUNGE

A community outdoor space wraps around the south and west sides of the Lava Lounge in the Activity Center Building. The dates of construction of these features are not known; however, based on their appearances and range of construction materials, the features in this area were likely added in stages. The concrete pavement that wraps around the south and west sides of the

<sup>6</sup> A metal plaque at the western edge of the courtyard in Building K reads “1982 / ENID M. LATHROP PARK / REALIZED THROUGH THE CARD AND CONCERN OF OUR COMMUNITY OF FRIENDS.”

building was constructed with the building. The wall (concrete masonry blocks) that extends from the building enclosing the east side of the space and the two square raised planters (concrete masonry blocks walls topped with a wood bench [three 4-inch wood boards]) in the lawn on the south side were likely also constructed around the same time as the building. The patio (exposed aggregate concrete with wood board inserts) on the west side of the building and two raised planters (concrete masonry block walls topped with a wood bench [single wood board]) on this patio were added later; a patio with this same footprint is legible on an aerial photograph from 1967 (**Photograph 35 and 36**).

## CENTRAL PARK AND HORSE STABLES

Central Park and the horse stable occupy land in the southwest quadrant of the campus core. According to the 1982 edition of the *Fairview Handbook*, this area—sometimes called “the Farm”—was developed as “a therapeutic center where clients have the opportunity to become familiar with the appearance, habits, and sounds of different types of animals and birds.”<sup>7</sup> The park was begun in the mid-1970s by volunteers including Boy Scouts, 4-H clubs, building contractors, and families of residents (**Photograph 37 and 38**).

The park, at the corner of Shelley Circle and Doris Way, occupies about two-and-a-quarter acres of land. Its features are organized around a curvilinear concrete-paved path which forms a large loop. Exercise equipment stations, which are mounted onto small, rectangular, concrete pads, are located at varying intervals along the loop. Two octagonal-shaped wooden gazebos, on an octagonal-shaped concrete slab, occupy the northwest corner of the park. Inside the eastern edge of the loop are a small shed and metal pipe fencing, which encloses a small corral (.05 acre). Picnic tables, benches, and swings—of varying materials—are scattered throughout the park. The park has been renovated several times since its original construction, and the latest arrangement and the majority of the features, including the two gazebos, date from 2015-17.

A concrete path leads from the park eastward to a corral, a horse stable, and a tack room. The horse corral covers approximately a quarter acre and is enclosed by metal pipe fencing. The horse stable sits at the eastern side of the corral, and the tack room sits outside the corral and a few feet to the northeast of the stable. The stables, along with the corral and tack room, were added in the late 1980s. According to a newspaper article, volunteers built the “2-horse stable, tack room, and corral” in 1989. The article explained that community groups had worked for two years to raise more than \$24,000 to finance the construction.<sup>8</sup>

## MEMORIAL PARK

Memorial Park at the northwest corner of Fair Drive and Shelley Circle provides a place for commemorative plaques that honor FDC residents and personnel. Two low stone walls and a hedge enclose a small paved area, around which are planted pine trees and various flowering plants including roses, agapanthus, and bird of paradise. Curving concrete sidewalks connect to the park from sidewalks along both Fair Drive and Shelley Circle (**Photograph 39**).

Dedication features include three metal plaques, each mounted on top of a separate low stone base and a row of small metal plaques mounted on the top of each of the two walls. A sign for the park (a metal plaque mounted on a low stone base) is located near the entrance to the park.

Memorial Park was not part of the original landscape design for the campus. The exact date when it was added has not been determined, and no construction drawings were found for its features. The sidewalks and pine trees are first seen on aerial photographs from the early 2000s.

## SHANNON’S MOUNTAIN

Shannon’s Mountain, an informal arrangement of several open-sided shelters and picnic tables in the far southeast corner of the campus, is the only noticeable topographic feature on campus. The trees growing on top of the “mountain” add to the visibility of this group of low mounds which were created between 1978 and 1982 from construction debris donated by private contractors. The area is named for Jackie Shannon, who was formerly a recreational therapist at FDC. She had the idea of

<sup>7</sup> Advisory Committee of Family Developmental Services, *Fairview Handbook* (2nd ed. November 1982), 11.

<sup>8</sup> “Center’s Disabled Residents to Get Equestrian Facility,” *The Register*, January 12, 1989.

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creating this outdoor space for the “clients to experience the thrill of a picnic, of playing outdoors, or of camping away from the standard hospital scene.”<sup>9</sup>

## STRUCTURES

A range of small structures are found in the landscape throughout the FDC campus—portable shade structures, signs, fences, walls, etc. The dates when these structures were added are difficult to determine. With the exceptions of the main entrance structure and information kiosk at the Fair Drive entrance loop (described in detail below), they are typical examples of their type and are not critical to the historic character of the cultural landscape.

The main entrance structure at the intersection of Fair Drive and Harbor Boulevard consists of two parts. A low wall (tan cast stone with a red tile cap) encloses a planting bed on the north side of Fair Drive; a large sign sits in the center of this bed. A low wall, of similar materials, encloses another planting bed on the south side of Fair Drive. Both parts of this entrance structure were added after the alignment of Fair Drive was modified around 2006-07 in conjunction with the construction of the housing along Cornerstone Drive. A low wall enclosing a planting bed on the southwest corner of Fair Drive and Shelley Circle is constructed of the same materials and was probably added at the same time (**Photographs 40–42**).

The information kiosk on the north side of the Fair Drive entrance loop is constructed of wood; the east and south sides are partially enclosed by wood panels; a campus sign is mounted onto the panel on the east side (i.e., the “front” of the kiosk). A streetlight fixture, constructed of same style of wood, is located a few feet away on the east, south, and north sides of the kiosk. This kiosk and lights were constructed around 1991.<sup>10</sup>

## SMALL-SCALE FEATURES

Many types and styles of objects and small-scale features are found throughout the FDC campus including streetscape features (streetlights and signs) and site furnishings (benches, tables, swings, trashcans, etc.). Small-scale features are one of the more ephemeral aspects of any cultural landscape; these objects and small structures are routinely replaced, and, typically, there are few historical records about them. The dates the small-scale features at FDC were added is difficult to determine. The exceptions to this generalization are the flagpoles in front of the R&T and Administration Building and Goodell School, which have been consistent features in the landscape. Some examples, such as the streetlights, have been altered. All of the small-scale features are typical examples of their type; they are not critical to the historic character of the cultural landscape; and all are considered to be non-contributing cultural landscape features (**Photograph 43**).

## SUMMARY

The landscape setting around the buildings, the roads and parking lots, sidewalks, and the paved outdoor spaces for the residential wards were designed by the State Division of Architecture in conjunction with the facility’s buildings. These landscape features were developed in stages between the mid-1950s, when construction started on the buildings, and 1964, when the buildings were completed. The majority of the buildings have a low profile—they are only one or two stories tall, have flat roofs, and have exteriors that are light in color. Lawns (of varying sizes) with tall trees surround the buildings within the core of the campus, around Goodell School, and within the Staff Housing area. The landscape setting is characterized by the repetition of these low buildings and parking lots interspersed with the lawns and tall trees.

Pedestrian access to the main entrance of buildings is through this landscaped setting. Concrete sidewalks—generally with a linear alignment—lead to all building entrances; the width of the entrance sidewalks typically indicates the hierarchy of the entrance (i.e., the ones leading to the main entrances are wider than ones leading to secondary entrances). The main entrance sidewalk often expands near the building to form a paved entrance plaza at the same elevation as the sidewalk or at a slight slope so that no stairs are required to enter the building.

<sup>9</sup> “Special Projects at Fairview,” Fairview State Hospital Clippings File, CMHS.

<sup>10</sup> A dedication plaque mounted on the west side of the kiosk reads: “With Sincere Appreciation / for Dedicated Service / FRED A. WHITE / February 3, 1959 – July 23, 1986 / Date of Dedication March 13, 1991.”

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The road system and provisions for parking large numbers of automobiles were part of the original design of the Fairview campus. The main core of the campus is surrounded by a perimeter street system comprised of Shelley Circle, Eugenia Way, and Florence Way. Streets within the core of the campus connect to this perimeter street system and provide vehicular access to specific groups of facilities and parking. Parking lots and dedicated street-side parking areas are adjacent to all buildings or complexes. The street-side parking—consisting of a single row of perpendicular (90 degree) or acute angle parking spaces laid out next to the street—minimizes the need for larger group lots and thereby helps to maintain the continuity of the landscape setting between the buildings. Generally, planting islands define the entrances and the ends of rows in the parking lots; trees and shrubs in these planting islands lessen the impact of the paving and help to integrate the lots with the adjacent lawn areas. Additionally, the entrance drive and parking arrangement for Buildings K, O, P, Q, T, and U are each organized around a large planting island.

The land is level with only a slight slope from the south to the north of the campus. Topographic modifications associated with the development of the campus—grading for roads, parking lots, the foundations for buildings, lawns, and outdoor recreation spaces adjacent to the residential wards—are not conspicuous. Shannon’s Mountain in the far southeast corner of the campus is the only noticeable topographic feature on campus; the trees growing on top of the “mountain” add to the visibility of this group of low mounds, which were created between 1978 and 1982 from construction debris donated by private contractors.

Due to its level terrain and the low profile of the buildings, the mature trees are prominent vertical features in the views across the campus. Views outward from the perimeter road (Shelley Circle) are limited to the Costa Mesa Country Club golf courses and the two-story apartment buildings of Harbor Village. These modern developments also limit views into the campus from Harbor Boulevard and from other adjacent public streets. A chain-link fence runs along the eastern, southern, and western edges of the perimeter road (Shelley Circle) creating a physical boundary between the FDC campus and the Costa Mesa County Club golf courses. A modern wall along a portion of North Shelley Circle creates a physical boundary between FDC and the Harbor Village housing development.

The key change to the cultural landscape since the end of the historic period has been the alteration of many of the outdoor recreation spaces that are adjacent to each residential ward. The original design for these outdoor recreation spaces consisted of a large rectangular expanse of pavement with a shade structure at one edge of the pavement. Originally, each outdoor space was surrounded or secured by a fence; sometimes a portion of the adjacent lawn was also enclosed by the fence. Beginning in the mid-1980s and continuing through the 2000s, many of these outdoor spaces were renovated; fences were removed, part or all of the original pavement was removed, and additional grass and new patios and sidewalks were added. Additionally, there has been a gradual reduction in the overall number of trees found throughout the campus; trees have been lost through age, disease, and drought-related stress and have not been replaced. However, the overall design and character of the cultural landscape features associated with FDC retain integrity and contribute to the historic character of the property.

#### **B10. Significance (continued):**

##### Historic Context

The landscaped grounds of Fairview State Hospital were designed and constructed as a component of the campus’s initial development. For the historic context of the hospital as a whole, see the “Fairview State Hospital Historic District” DPR 523 form and the associated Historical Resources Inventory and Evaluation Report.

The California State Architect developed landscape designs in concert with building designs for Fairview State Hospital. Historical evidence did not identify the identity or identities of individual contractors. For dates of construction and development phases, see above section.

##### Evaluation

The original Fairview State Hospital grounds were completed in conjunction with building construction between 1953-1964, and were an integral part of the overall campus design. While various grounds and landscape features have been altered, removed, or added over the intervening decades, the grounds today still showcase the major design features of the original



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layout and remain true to the feeling and character of the early campus. The campus grounds are therefore significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District.

The grounds are not individually eligible under NRHP Criterion A or CRHR Criterion 1 as their significance is entirely connected to that of the FDC as a whole, and they have no important historical significance separate from the larger program of care and campus design at the facility.

The grounds are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with the landscaping made demonstrably important contributions to history at the local, state, or national level.

Under NRHP Criterion C or CRHR Criterion 3, the FDC campus grounds are not significant as an important example of a type, period, or method of construction; nor are they the work of a master. The landscape design was of a common type for large post-war institutions. At no point did the grounds attract any apparent attention from professional landscape architects. There is nothing about the plantings or the construction of roads, walls, and minor structures that displayed innovation or meaningfully differed from examples found at comparable institutions.

The campus grounds are not significant as a source (or likely source) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

While the FDC campus grounds and landscape features have continued to evolve since the end of the period of significance for the Fairview State Hospital Historic District (1953–1969), they collectively retain sufficient integrity to convey their significance and contribute to the district. The outdoor recreation spaces at many of the residential wards were modernized beginning in the mid-1980s through the removal of security fencing and the replacement of some pavement with grass and updated patios and sidewalks. Central Park and Shannon's Mountain are also modern features that were added outside of the historic period. These changes and other alterations to small-scale features of the landscape design have not appreciatively affected the grounds' ability to convey their strong association with the establishment and growth of the Fairview Developmental Center. The grounds remain open and scenic, and the pathways and roads remain in their general original alignment. Therefore, the grounds retain adequate integrity of design, materials, workmanship, location, feeling, and association to convey their significance.

The contributing and non-contributing features of the FDC campus grounds are listed in **Table 1** above and depicted on the attached **Sketch Map**.

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**Photographs (continued):**



**Photograph 2:** Fair Drive; facing west near its intersection with Harbor Boulevard; May 29, 2019.



**Photograph 3:** South Shelley Circle showing portion of the perimeter street system; facing south at intersection with Fair Drive; May 29, 2019.



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**Photograph 4:** Rosa Way, a typical example of one of the interior streets; facing east; May 29, 2019.



**Photograph 5:** Parking lot between Residences 27 and 28; typical example showing the incorporation of planting islands into parking lot layout; facing northwest. Source: Google Earth, March 2019.



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**Photograph 6:** Entrance drive and parking for Building K on North Shelley Circle is organized around large planting island; facing southwest. Source: Google Earth, March 2019.



**Photograph 7:** Street-side parking on south side of Gina Way between Residences 11, 13, and 15; facing southwest, May 29, 2019.



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**Photograph 8:** Typical example of street-side sidewalk; South Shelley Circle facing south; May 29, 2019.



**Photograph 9:** Typical example of connection between parking lot and entrance sidewalks; Residence 43 facing northwest; May 29, 2019.



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**Photograph 10:** Landscape setting along east side of Administration Building; facing northwest; May 29, 2019.



**Photograph 11:** Landscape setting along east side of Building F; facing northwest; May 29, 2019.



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**Photograph 12:** Landscape setting along east side of Activity Center; facing northwest; May 29, 2019.



**Photograph 13:** Landscape setting along north side of Residence 25; facing southwest; May 29, 2019.



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**Photograph 14:** Example of ficus trees; facing southwest toward Activity Center, May 29, 2019.



**Photograph 15:** Example of ficus trees; planting island at Building P on Rosa Way; facing southwest, May 29, 2019.



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**Photograph 16:** Example of ficus trees; facing south on Mark Lane; May 29, 2019.



**Photograph 17:** Example of use of foundation plantings at main entrance; Residence 21, facing west; May 29, 2019.



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**Photograph 18:** Example of lack of foundation plantings; east side of Residence 11; facing southwest, May 29, 2019.



**Photograph 19:** Example of a hedge used to define limits of outdoor space at Residence 39 / Building S; facing northeast; May 29, 2019.



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**Photograph 20:** One of the two outdoor recreation spaces on the north side of Residence 40; the concrete strip, in the grass, shows the original location of the fence (nonextant) which enclosed the pavement, shade structure, and small lawn area; facing east. Source: Google Earth, March 2019.



**Photograph 21:** Paved patio, enclosed by fence, on the south side of Residence 39 retains its original configuration; facing northeast; May 29, 2019.



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**Photograph 22:** Outdoor recreation space for Residence 11 where much of the original pavement was replaced with grass (ca. mid-to-late 1980s); facing southeast; May 29, 2019.



**Photograph 23:** Outdoor recreation space for Residence 19 where portions of the pavement were replaced with grass (ca. mid-to-late 1980s); facing west; May 29, 2019.



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\*Recorded by D. Bradley \*Date May 29–30 2019

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**Photograph 24:** Outdoor recreation space for Residence 34 where portions of the original pavement were replaced with grass (ca. mid-to-late 1980s); facing east/southeast. Source: Google Earth, March 2019.



**Photograph 25:** Small round patio added to outdoor recreation space for Residence 21 between late-1980s and mid-1990s; facing west; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 26:** Pavement with a curvilinear character added to outdoor space between Residences 37 and 38 between 2007-09; facing west; May 29, 2019.



**Photograph 27:** Entrance courtyard for Building B; facing east, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 28:** Outdoor recreation space (ca. 1980s) in the former courtyard at Building J; facing north; May 29, 2019.



**Photograph 29:** Outdoor recreation space (ca. 1980s) in the former courtyard of Building K; facing south; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 30:** Outdoor recreation space on south side of Goodell School; facing north; May 29, 2019.



**Photograph 31:** "Picnic Area" on west side of Goodell School; facing southwest; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 32:** Outdoor recreation space on south side of Goodell School; facing north; May 29, 2019.



**Photograph 33:** Typical front yard for the Staff Housing Units; facing east; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 34:** Typical front yard and ramp entrance for the Transitional Housing Units; facing northwest, May 29, 2019.



**Photograph 35:** Landscape features on south side of Lava Lounge; facing east; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 36:** Landscape features on west side of Lava Lounge; facing east; May 29, 2019.



**Photograph 37:** Central Park; looking northeast. Source: Google Earth, March 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 38:** Horse stable and corral; facing northeast, May 29, 2019.



**Photograph 39:** Memorial Park; facing west; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 40:** Main entrance structure on north side of Fair Drive; facing north; May 29, 2019.



**Photograph 41:** Planting bed wall on south side of Fair Drive; facing northwest; May 29, 2019.



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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 42:** Planting bed wall at entrance circle; facing east; May 29, 2019.

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\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

\*Recorded by D. Bradley \*Date May 29–30 2019

☒ Continuation ☐ Update



**Photograph 43:** Flag pole at Administration Building; facing west; May 29, 2019.



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\*Recorded by D. Bradley \*Date May 29–30 2019

\*Resource Name or # (Assigned by recorder) FDC Campus Grounds

☒ Continuation ☐ Update

## Sketch Map:



(Note: Only non-contributing landscape features are indicated on the sketch maps. Where not designated, the landscape features – roads, sidewalks, lawns, etc.—contribute to the historic district.)



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 9

\*Resource Name or # (Assigned by recorder): Goodell School

**P1. Other Identifier:** Alvan H. Goodell Education Center

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located on the west side of the complex on the west side of North Shelley Circle at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 43,425-square-foot, International-style Alvan H. Goodell Education Center, which possesses an irregular footprint and exposed concrete walls, and is surrounded by manicured grass lawns, concrete walkways, and asphalt-paved roadways (**Photograph 1**). The majority of the building is one story, with a 1.5-story gymnasium section located toward the rear (west) of the facility. Both one- and 1.5-story building sections have flat roofs with modern Sarnafil-membrane roof coverings and metal coping, with the single-story sections featuring wide, closed, overhanging eaves with concrete soffits supported by steel pipe columns. The building's primary entrance is located along the east façade, is deeply recessed, and contains a modern replacement glass-and-metal electronic sliding door flanked by glass-and-metal panels (**Photograph 2**; see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP15) Educational Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Alvan H. Goodell Education Center; facing southwest, May 29, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both  
ca. 1959 (Aerial photography)

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)

Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 9

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Goodell School

B1. Historic Name: Goodell School; Fairview School

B2. Common Name: Alvan H. Goodell Education Center

B3. Original Use: School B4. Present Use: \_\_\_\_\_

\*B5. Architectural Style: International

\*B6. Construction History: Built ca.1959; north addition ca. 1960; surrounding recreational facilities, landscaping ca. 1961; modern Sarnafil-membrane roof sheathing and automatic glass-and-metal doors installed at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Alvan H. Goodell Education Center appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as a school during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

**\*B12. References:**

California Department of Finance, "State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956) 97, 98, 107; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

See Continuation Sheet

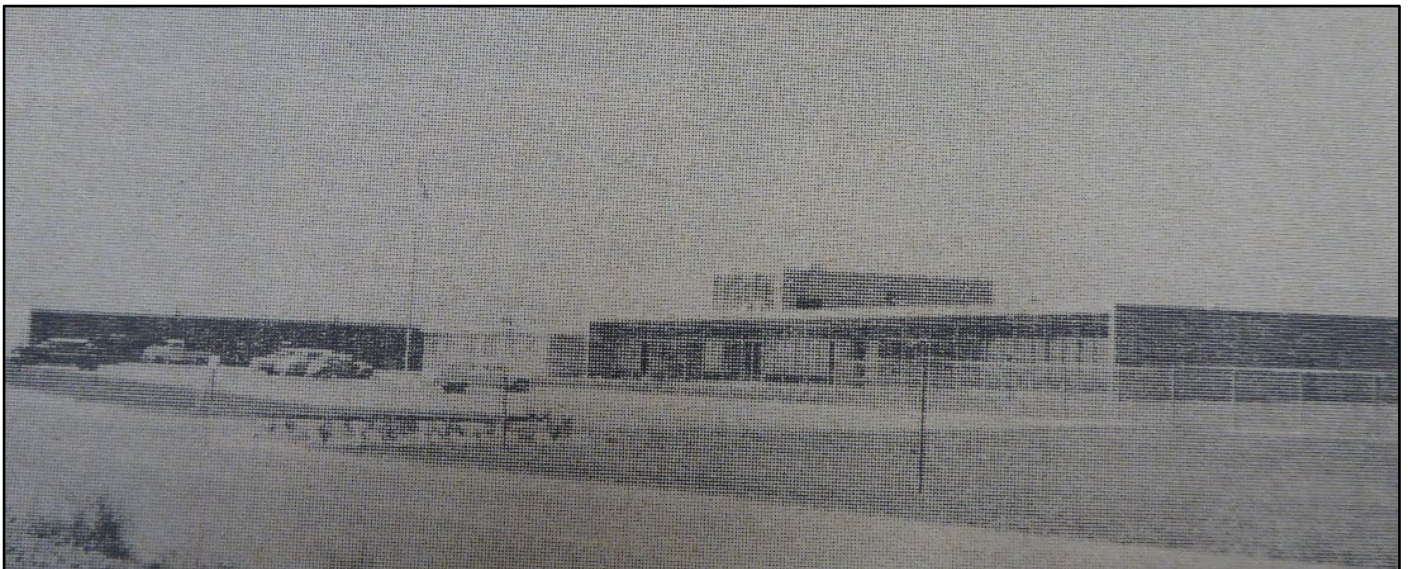
### **P3a. Description (continued):**

The majority of the building's exterior wall surfacing consists of glass-and-metal paneling, with the exception of the 1.5-story gymnasium section and the building's north, west, and south ends, which feature exposed concrete (**Photographs 3 and 4**). Flush metal personnel entrances are located at these ends, with an elevated loading dock with metal roll-up garage door located on the south side of the gymnasium section (**Photograph 5**). A single-story, concrete utility addition is located on the west side of the gymnasium section, and a modern shed-roof, shade-structure addition is located adjacent to the loading dock on the south side. Large metal louvre vents are distributed throughout.

The school's front (east) lobby features original vinyl tile flooring, plaster walls with original baseboards, acoustic ceiling tiles, and overhead fluorescent lighting (**Photograph 6**). Doors consist of flush wood doors with prominent upper glazing, and paired flush wood doors with metal kickplates and narrow vertical lights (**Photograph 7**).

### **B10. Significance (continued):**

In 1956, \$484,540 was identified for working plans and construction of the first phase of the development of school facilities at the Fairview State Hospital site. This allocation provided for the development of a multi-purpose room, an administration area, classrooms, and shops in Fiscal Year 1956-57 as part of the State Building Construction Program five-year plan. In that same building program, \$87,000 and \$30,000 were identified for Fiscal Years 1956-57 and 1957-58, respectively, to develop recreational yards, play courts, a visiting area, grading, paving, and landscaping, with \$400,000 for Fiscal Year 1958-59 for the second phase of development, which entailed adding an administration unit, eight classrooms, and four shops. The building was designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. Three contracts totaling \$437,289 for school facilities were awarded in January 1958, and phase 1 construction was complete by May the following year. By May 1960, Phase II construction was complete, and the development of surrounding landscaping and recreational areas was complete by December 1961 (**Figure 1**).<sup>1</sup>



**Figure 1:** Circa 1961 photograph of "Fairview School" (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 8, from the Collections of the Costa Mesa Historical Society [CMHS]).

<sup>1</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956) 97, 98, 107; "School Work Awarded," *San Bernardino Daily Sun* (January 25, 1958): A-2; Fairchild Aerial Surveys (FAS), Flight C-23578, Frame 4-507, 1:12,000 – 1:24,000, May 5, 1959, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); FAS, Flight C-23870, Frame 341, 1:14,400 May 7, 1960, available at UCSB; "Fairview" [aerial photograph], August 27, 1961, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.



The first principal appointed to what was then called “Fairview School” was Alvan H. Goodell, the facility’s current namesake. Having worked in education with the California Department of Mental Hygiene since 1948, Goodell transferred to Fairview from Pacific State Hospital, the other state developmental center in Southern California. Under Goodell’s tenure, the school implemented a two-point program, which essentially divided patients into “educable” and “trainable” categories, with some objectives including “teaching a child to understand his abilities and limitations; to help him develop the abilities to their limit; to teach him to live happily with himself and those in his community and immediate environment; to develop in him ideals, attitudes, habits and emotional control necessary for adequate social adjustment.” In 1961, the school had seven teachers, with each possessing the classifications of “teacher of mentally retarded children, elementary teacher, speech correction teacher, instructor in recreation and physical education, and arts and crafts.”<sup>2</sup> Volunteers were likewise involved at the school. Goodell left Fairview by 1967, when he transferred to Sacramento to serve as supervisor for the Bureau of Rehabilitation and Education’s Compensatory Education Program. He died in 1972, and the facility was renamed in his honor that year. The building continued to function as a school through 2017.<sup>3</sup>

### Evaluation

The school at FDC was completed by 1959 as a second-phase addition to Fairview State Hospital. The building served in continual use as a school, hosting central treatment functions that are directly associated with the Fairview facility’s role in providing care for people with developmental disabilities. As such, the Alvan H. Goodell Education Center is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the hospital as a school, this function alone does not rise to the level of historic significance, and the school is not individually eligible for listing under these criteria.

The school is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project revealed that while Alvan H. Goodell may have played an important role in pioneering Fairview’s educational program, he did not significantly impact the larger field of education at the local, state, or national level. Nor did research reveal that any other hospital superintendent, principal, staff member, patient, or other individual directly associated with the school made demonstrably important contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

The school was designed to complement the initial development of Fairview State Hospital, and it was completed by 1960. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a significant example of post-war state hospital design. The school is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The school retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The only known modifications are the addition of glass-and-metal automatic doors, recent utility connections, and some limited modern exterior lights. These alterations have a minimal impact on the

<sup>2</sup> Alvan H. Goodell, School Principal, “Develop to Fullest – That’s Hospital Goal,” *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 8, from the Collections of the CMHS.

<sup>3</sup> “Obituaries: Alvan H. Goodell,” *Pomona Progress-Bulletin* (April 20, 1972): A-4; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 10, on file at Fairview Developmental Center, Costa Mesa, California.



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\*Resource Name or # (Assigned by recorder) Goodell School

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

building's integrity of materials. The building retains strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the school include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International style architectural details including the building's massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; the vinyl tile flooring; and any remaining doors that date before 1969.

### Photographs (continued):



**Photograph 2:** Detail view of Alvan H. Goodell Education Center primary entrance; facing northwest, May 29, 2019.

Page 6 of 9

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Goodell School

☒ Continuation ☐ Update



**Photograph 3:** Northern quadrant of the Alvan H. Goodell Education Center; facing southeast, May 29, 2019.



**Photograph 4:** 1.5-story gymnasium and rear (west) section of Alvan H. Goodell Education Center; facing northeast, May 29, 2019.



Page 7 of 9

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Goodell School

☒ Continuation ☐ Update



**Photograph 5:** South side of gymnasium section, showing one-story utility addition, elevated loading dock, and shed-roof shade structure addition; facing northeast, May 29, 2019.



**Photograph 6:** Interior view of Alvan H. Goodell Education Center front (east) lobby; facing southeast, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Goodell School

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 7:** Interior alternate view of Alvan H. Goodell Education Center front (east) lobby; facing northwest, May 29, 2019.

Page 9 of 9

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Goodell School

☒ Continuation ☐ Update

**Sketch Map:**







State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 5

\*Resource Name or # (Assigned by recorder): Grounds Shop

**P1. Other Identifier:** Grounds Shop

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1/4 of Sec    ; S.B. B.M.

c. Address \_\_\_\_\_ City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located north of the main complex on the west side of Merrimac Way between Douglas Drive and Lukup Lane at Fairview Developmental Center (APN 420-041-02).

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records a 0.381-acre area surrounded by chain-link and wood-slat fencing topped with barbed wire, located immediately north of the Fairview Developmental Center's (FDC) main complex, that contains the current landscape department grounds shop, formerly the FDC fire house (**Photograph 1**). The grounds shop comprises a 2,617-square-foot, single-story, International-style building with a rectangular footprint, a flat, multi-level roof with modern Sarnafil-membrane roof covering, metal coping, and flush eaves, and a modern roll-up metal garage door installed sometime before 2018. The building is clad with replacement pebble stucco, except for the front (east) entrance area, which features original vertical boards (**Photograph 2**). This area has two entrances: a flush wood door topped with a tilt-up, wood-frame transom window; and an above-grade, flush wood door with prominent upper glazing accessed via concrete step (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Grounds shop; facing north/northwest, May 29, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both  
ca.1957 (California Department of Finance / California Department of Developmental Services [DDS])

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 5

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Grounds Shop

B1. Historic Name: Fire House

B2. Common Name: Landscape Department / Grounds Shop

B3. Original Use: Fire station B4. Present Use: Shop building

\*B5. Architectural Style: International

\*B6. Construction History: Built ca.1957; north shed-roof extension added 1981-1987; metal roll-up garage door installed pre-2018; Sarnafil-membrane roof sheathing added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The grounds shop building, formerly the FDC fire house, appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as an auxiliary support building during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

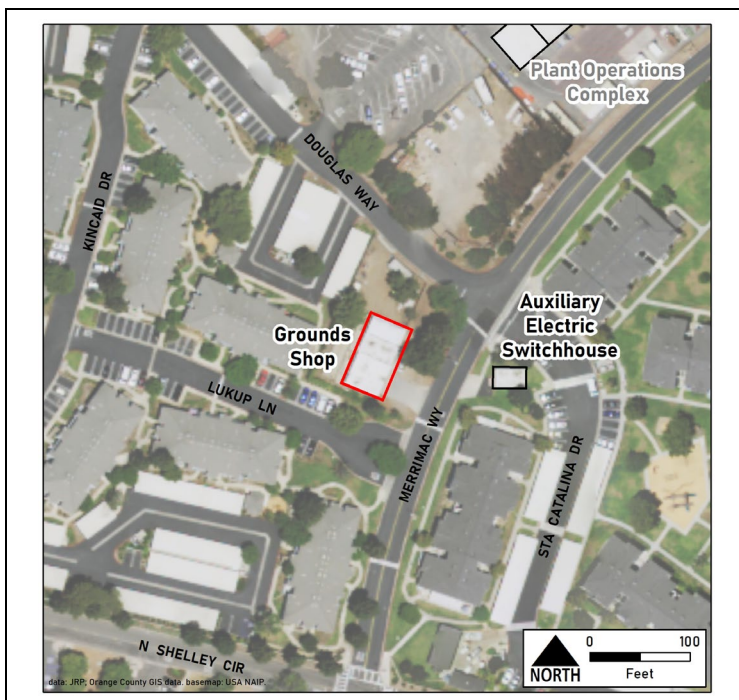
California Department of Finance, "State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 98; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 31, on file at Fairview Developmental Center, Costa Mesa, California; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)





### **P3a. Description (continued):**

Fenestration consists of original, wood-frame, multi-light, awning windows with wood surrounds and sills, with one resized, replacement window located on the building's north side (**Photograph 2**). Sometime between 1981 and 1987, a corrugated metal, shed-roof shelter extension supported by metal poles with cylindrical concrete bases was added to the north side.

To the immediate rear (northwest) of this former fire house is an original rectangular concrete ramp framed by metal railing, previously used for drying fire hoses.

### **B10. Significance (continued):**

In 1956, \$36,000 was identified for working plans and construction of a fire house with an employee area for the Fairview site in Fiscal Year 1956-1957 as part of the State Building Construction Program five-year plan. The building had an essentially utilitarian design, with few architectural embellishments, although the flat roof, angular form, and wide eaves fit with the modern appearance of the other campus buildings. Construction was complete by March 1958 (**Figure 1**). The fire station was under the authority of the maintenance department, and by 1982 the landscaping department had moved its operations to the building, which it shared with the fire-prevention department through 1997. Today, the building only houses the landscape department's grounds shop.<sup>1</sup>



**Figure 1:** Fairview State Hospital Fire Station, ca. 1961. Note original wood tilt-up garage door, signage, and wall-mounted light fixture (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 10, from the Collections of the Costa Mesa Historical Society).

<sup>1</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 98; California Department of Public Works, Division of Highways, "Fairview State Hospital" [oblique photograph], March 19, 1958, negative no. 5917-4, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, California State Archives, Sacramento; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 31, on file at Fairview Developmental Center, Costa Mesa, California; California DDS, "Building Utilization Report and Recurring Maintenance Data: Fairview," January 8, 1997, no pagination, on file with DDS, Sacramento.



Evaluation

The former FDC fire house, currently the landscape department's grounds shop, was completed about 1957 as a service support facility for Fairview State Hospital. The building originally served as the institution's fire station, providing support for Fairview's primary role of providing care for people with developmental disabilities. The Fairview fire house and fire crew contributed to the hospital's identity as a self-contained institution. As such, the former fire house is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building once provided an important fire protection service to the hospital, this function alone does not rise to the level of historic significance, and the FDC former fire house is not individually eligible for listing under these criteria.

The grounds shop is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

The grounds shop / former fire house was designed as part of the expanded campus plan for Fairview State Hospital, and it was completed about 1957 during the hospital build out. While generally of utilitarian design, the building fit the overall modern appearance of the campus through its flat roof, angular form, and wide eaves. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The building is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the former fire house as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest utilitarian building. Fire stations are present at all of the state hospital campuses and many of them are of more elaborate design than the Fairview station. This building is therefore not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The former fire house retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The main bay door is a modern, metal, roll-up door that replaced the original door at an unknown date, a shed-roof shelter was added to the north side in the 1980s, and modern Sarnafil-membrane roof covering was added at an unknown date. No other alterations are known. The building thus retains generally strong integrity of location, design, materials, workmanship, and feeling. Because the building no longer houses fire-prevention services as it has been adapted for use as the grounds shop, and due to the construction of modern multi-unit residential housing in the immediate abutting area, the building suffers somewhat diminished integrity of association and setting.

Character-defining features of the former fire house include the elements that date to the district's period of significance: the building's location and orientation, and its utilitarian architectural details including the building's massing; flat roof; wide eaves; wood-frame construction; and all doors and windows that date before 1969. Additionally, the concrete hose-drying rack to the rear (west) of the building is a contributing feature. Contributing interior features include the layout and floorplan; flooring materials; and any interior doors that date before 1969.

Page 5 of 5

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Grounds Shop

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Detail view of grounds shop entrance; facing north / northwest, May 29, 2019.



**Photograph 3:** North and west sides of grounds shop, showing north shed-roof extension and concrete hose-drying dock; facing southwest, May 29, 2019.





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 12

\*Resource Name or # (Assigned by recorder): Main Kitchen and Shipping / Receiving Warehouse

**P1. Other Identifier:** Main Kitchen and Shipping / Receiving Warehouse

\*P2. Location: ☐ Not for Publication ☒ Unrestricted \*a. County Orange

and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1 ¼ of Sec 1; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located in the center of the main complex on the west side of Gregory Way at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 74,614-square-foot, Contemporary-style main kitchen and shipping / receiving warehouse building, which was constructed in two phases during 1954 and 1960. The building comprises two sections: the main kitchen wing at the south end and the shipping / receiving warehouse at the north end (**Photograph 1** and **Photograph 2**). The main kitchen is the older of the two building sections. It has an irregular, L-shaped footprint, multi-sectional flat and low-pitched gable roofing with a narrow roof ridge monitor, and exposed site-cast concrete walls with a rough board-form finish. The east and north sides both feature prominent, above-grade concrete loading docks with a flat concrete porch roof supported by steel pipe columns (**Photograph 1** and **Photograph 3**). The north dock is framed by metal tubular railing and features several concrete staircases and entrances (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** North side of main kitchen wing; facing southwest, May 28, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1954 (California Department of Public Works, Division of Architecture)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

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\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

B1. Historic Name: Food Services, Commissary, and Warehouse Addition

B2. Common Name: Main Kitchen & Diet Office and Shipping / Receiving Warehouse & Print Shop

B3. Original Use: Food service and warehouse B4. Present Use: Food service and warehouse

\*B5. Architectural Style: Contemporary

\*B6. Construction History: Built ca.1954; warehouse addition ca. 1960; glass-and-metal automatic doors installed at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture

b. Builder: M. J. Brock & Sons, Inc. (Kitchen / Commissary); unknown (Warehouse Addition)

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The main kitchen and shipping / receiving warehouse building appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as an auxiliary support facility during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

Anson Boyd, State Architect, *Approval No. 2839* – Fairview State Hospital, June 19, 1953, ff. R386.028 Box 16, Folder18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954; DPW, Division of Architecture, "Fairview State Hospital: Commissary and Warehouse Addition," January 15, 1960, File 19-G-17, DGS Plans Vault, West Sacramento; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

### **Sketch Map**

See Continuation Sheet

### **P3a. Description (continued):**

The original commissary / warehouse is located in the northernmost part of the main kitchen section and features both metal roll-up garage bay doors and flush metal personnel doors (**Photograph 4**). The north loading dock has flush metal personnel doors with upper glazing. Fenestration throughout the main kitchen section generally consists of original, recessed, multi-part, metal-frame awning windows. From the east and west, the main kitchen adjoins the covered walkway that extends throughout the complex and is accessed by replacement glass-and-metal automatic doors installed at an unknown date (**Photograph 5**). Flanking the west entrance is an external basement access point, comprising a concrete staircase encased with chain-link fencing leading to a flush metal personnel door (**Photograph 6**).

The kitchen interior features tile flooring and wainscoting and exposed concrete ceiling beams and girders. The upper walls include square cutouts and industrial ventilation. Tiled half walls partition the kitchen into a series of smaller working spaces and entryways (**Photograph 7**).

The “diet office” wing is located in the southernmost portion of the main kitchen and comprises a rectangular building section with a low-pitched, side-gable roof with prominent “Chevron-style” metal louvered vents in the gable ends (**Photograph 8**). This building section has three entrances. The east entrance consists of a flush metal personnel door with upper glazing, sheltered beneath a flat concrete canopy with four-part, metal-frame awning windows directly overhead. The south entrance is located within a concrete pop-out enclosure and consists of glass-and-metal double doors surrounded by window wall panels (**Photograph 9**). The west entrance is located in a low-pitched gable projection and consists of glass-and-metal double doors flanked by tall narrow sidelights and topped by a large transom (**Photograph 10**).

In about 1960, the shipping / receiving warehouse wing was added onto the main kitchen. It has a long rectangular footprint, extremely low-pitched gable roof, and exposed site-cast concrete walls (**Photograph 11**). This section likewise has an elevated loading dock on the east side, which is sheltered beneath a wood-frame awning with exposed wood brackets and supported by pipe steel columns. Garage openings are located on the east side, and a single rear metal personnel door with four-light upper glazing and a metal kickplate accessed via concrete ramp with metal tubular railing is located on the west side (**Photograph 12**). Fenestration in this section generally consists of multi-part, metal-frame, awning windows, and is principally located on the north and east sides.

### **B10. Significance (continued):**

The oldest section of the main kitchen and warehouse building included two components—“kitchen and dining room building” and “commissary building”—in the Legislature’s initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in 1953. The building’s design in the Contemporary style, with taut surfaces and angular projections, distinguished it on the campus, where most of the other buildings were designed in an International or utilitarian style. The kitchen stands out for its low-pitched, multi-part roof and brick accents. The Los Angeles-based general contracting firm M. J. Brock & Sons, Inc., was awarded the contract in June 1953 for the low bid of \$574,200 and began work that September. Construction was complete by December the following year (**Figure 1**). In 1956, in response to a projected increasing capacity requiring greater storage space, an additional \$25,500 was identified for planning and construction of an extension to the commissary building as a component of the State Building Construction Program five-year plan in the 1957-1958 Fiscal Year. The California Division of Architecture submitted final plans in January 1960, and construction was completed about that same year.<sup>1</sup>

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director’s Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives (CSA), Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; Anson Boyd, State Architect to Frank B. Durkee re: Approval No. 2839 – Fairview State Hospital, June 19, 1953, ff. R386.028 Box 16, Folder 18, DPW – Director’s Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, CSA, Sacramento; “\$11,500,000 Hospital’s First Unit Being Built,” *Los Angeles Times* (September 6, 1953): 24; DPW, Division of Architecture, “Fairview State Hospital: Laundry & Boiler Plant – Plot Plan,” sheet R-1 of 2, W.O. 2428 GC, December DPR 523L (1/95)



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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

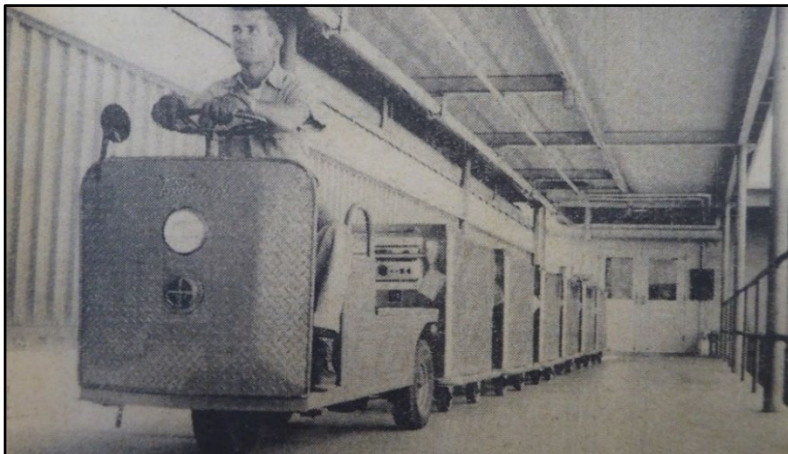
\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Figure 1:** Portion of 1958 oblique photograph of Fairview State Hospital, showing main kitchen and commissary building as originally constructed. Not shown: ca. 1960 warehouse addition at north end (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento).

The main kitchen and commissary building housed the Food Administration Department. In 1961, this department was staffed by 157 employees, including dietitians, cooks, butchers, bakers, and food service assistants. After meals were prepared in the kitchen, they were then transported to their respective ward kitchen in a temperature-regulating truck cart. All of the buildings in the complex were outfitted with concrete ramps to accommodate this meal-transportation system, reportedly the first of its kind in the California state hospital system (**Figure 2**).<sup>2</sup>



**Figure 2:** View of temperature-regulating truck cart towing prepared meals, ca. 1961 (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue* (May 4, 1961), 16, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California).

30, 1954, File 19-G-18, Department of General Services (DGS) Plans Vault, West Sacramento; California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; DPW, Division of Architecture, "Fairview State Hospital: Commissary and Warehouse Addition," W.O. 4307 GC-9 and 4393 GC, January 15, 1960, File 19-G-17, DGS Plans Vault, West Sacramento; FAS, Flight C-23870, Frame 341, 1:14,400 May 7, 1960, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); "Fairview" [aerial photograph], August 27, 1961, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.

<sup>2</sup> Marjorie Giberson, Hospital Food Administrator, "Mr. Milkman: 1,180 Quarts!: Food is a Big Item, Even on Daily Scale," *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue* (May 4, 1961), 13, from the Collections of the CMHS, Costa Mesa, California.

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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

### Evaluation

The FDC kitchen building and shipping / receiving warehouse was completed about 1954 as an integral part of the original campus plan for Fairview State Hospital. The building remained in continual use through the historical period, providing essential food preparation services for the institution. The building's operation supported Fairview's primary mission of providing care for people with developmental disabilities, and it contributed to the hospital's identity as a self-contained institution. As such, the kitchen building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided important services to the hospital, the kitchen and employee dining room functions alone do not rise to the level of historic significance, and the building is not individually eligible for listing under these criteria.

The kitchen-warehouse is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level.

The kitchen-warehouse building was designed as part of the original campus plan for Fairview State Hospital, and it was completed about 1954 during the first phase of build out. Like nearly all of the major buildings on the hospital campus, the main kitchen was constructed from reinforced concrete. However, the kitchen-warehouse was distinguished from surrounding buildings by its design in the Contemporary style, employing low-pitched, multi-part roof and brick accents. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The kitchen is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is an unexceptional example of institutional use of the utilitarian construction with Contemporary style elements. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The kitchen-warehouse building retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The building has experienced few exterior modifications, including the addition of glass-and-metal automatic doors to key entrances at an unknown date, and the warehouse addition constructed about 1960. This alteration was built during the period of significance and therefore contributes to the historic district. The building retains good integrity of location, setting, design, materials, workmanship, feeling, and association.

Character-defining features of the kitchen-warehouse building include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its Contemporary-style architectural details including the building's irregular form and massing; the multi-sectional, low-pitched roof; reinforced concrete construction; brick accents; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; floor and wall tiling, and any kitchen machinery or ventilation hoods from before 1969.



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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** North and east sides of shipping / receiving warehouse element; facing southwest, May 28, 2019.



**Photograph 3:** East side of main kitchen (center), with covered walkway (left); facing northwest, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 4:** Detail view of doors in original commissary section of main kitchen; facing west / southwest, May 28, 2019.



**Photograph 5:** Detail view of eastside entrance to main kitchen; facing southwest, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 6:** Detail view of basement access along west side of main kitchen; facing east / northeast, May 28, 2019.



**Photograph 7:** Kitchen interior; May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 8:** Southeast corner of main kitchen; facing northwest, May 28, 2019.



**Photograph 9:** Detail view of south entrance; facing north, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 10:** Detail view of west entrance; facing northeast, May 28, 2019.



**Photograph 11:** Shipping / receiving warehouse; facing north / northwest, May 28, 2019.

Page 11 of 12

\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 12:** Detail view of west entrance of shipping / receiving warehouse; facing south / southeast, May 28, 2019.



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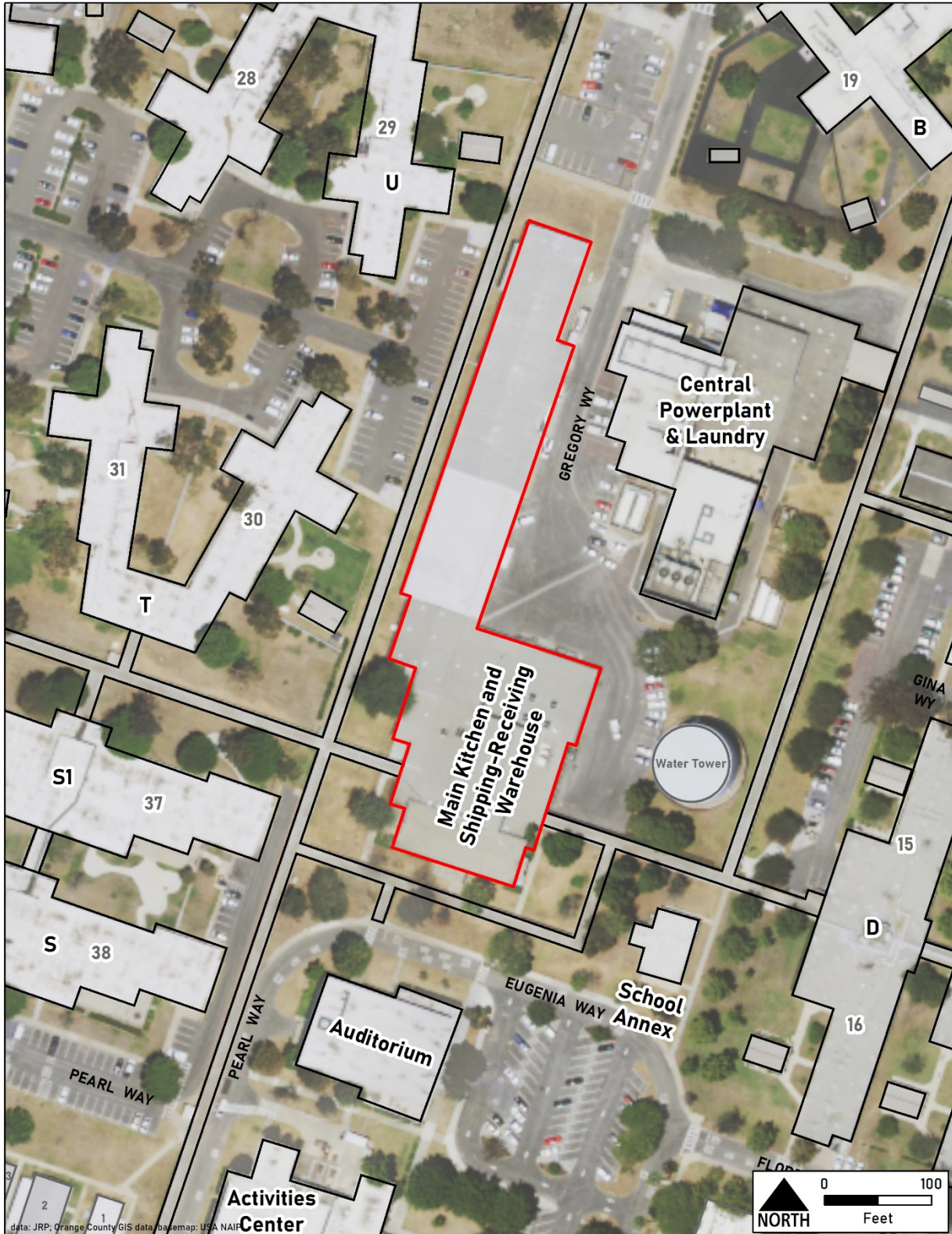
\*Resource Name or # (Assigned by recorder) Main Kitchen and Shipping / Receiving Warehouse

\*Recorded by T. Webb & S. Skow

\*Date May 28, 2019

☒ Continuation ☐ Update

### Sketch Map:





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 12

\*Resource Name or # (Assigned by recorder): Plant Operations Complex

**P1. Other Identifier:** Plant Operations Complex

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1 ¼ of Sec 1; S.B. B.M.

c. Address \_\_\_\_\_ City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located north of the main complex on the north side of Merrimac Way between Douglas and Santa Catalina drives at Fairview Developmental Center (APN 420-041-03).

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records a 4.557-acre parcel surrounded by chain-link and wood-slat fencing topped with barbed wire, located to the north of the Fairview Developmental Center's (FDC) main campus, that contains the FDC Plant Operations Complex (**Photograph 1**). This complex consists of six historic-period buildings built between ca. 1956 and 1961: the plant operations warehouse and shops building; the automotive shop; the glass shop; the mason shop; a vehicle storage shed; and a storage shed (**Site Map**). There is also a modern Butler building in the complex, which was noted but not formally evaluated (see Continuation Sheet).

\*P3b. Resource Attributes: (HP8) Industrial Building; (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Plant Operations Complex, showing (left-to-right) mason shop and plant operations warehouse and shops; facing north / northeast, May 29, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both

See **Table 1** in P3a. Description on Continuation Sheet.

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

B1. Historic Name: Garage & Maintenance Shops

B2. Common Name: Plant Operations

B3. Original Use: Plants operations B4. Present Use: Plant operations

\*B5. Architectural Style: Utilitarian

\*B6. Construction History: See Table 1 in P3a. Description on Continuation Sheet.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1968 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Plant Operations Complex buildings evaluated on this form (Table 1) appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these buildings are historical resources for the purposes of the California Environmental Quality Act (CEQA). The buildings are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This complex of buildings was designed and constructed as part of Fairview State Hospital, and it served continually as auxiliary support during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

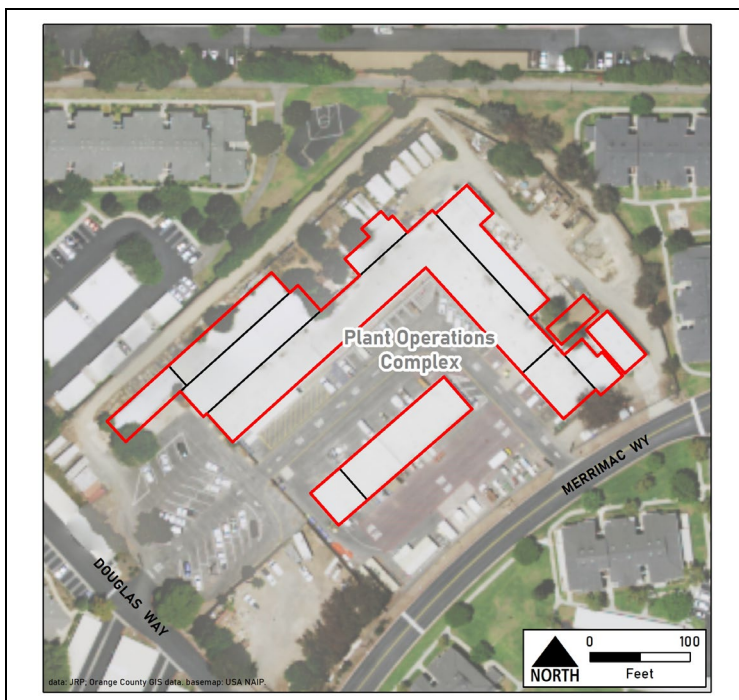
California Department of Finance, *California State Legislature, Appendix to the Journal of the Senate, 1956*. (Sacramento: California State Senate, 1956), 97; DPW, Division of Architecture, "Fairview State Hospital: Covered Passages to Link Buildings – Plot Plan," 1957, File 19-G-1, DGS Plans Vault, West Sacramento; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



### **P3a. Description (continued):**

The 23,284-square-foot, single-story, Utilitarian-style, plant operations warehouse and shops building has a generally L-shaped footprint, a concrete foundation, a flat roof with modern Sarnafil-membrane roof covering, metal coping, and various original and modern metal roof vents, and corrugated siding (**Photograph 2**). Located at the southwest end of the building, the plant operations warehouse wing features a truck-bed-height concrete loading dock accessed from the southwest end by concrete stairs with metal handrails and from the northeast end via concrete ramp. Entrance to this building section is permitted through an original metal roll-up garage door sheltered beneath a long wood canopy with wood fascia and exposed rafters. Fenestration consists of recessed, metal-frame, four-light, awning windows with steel sashes and sills. Situated at grade, the rest of the building comprises the plant operations office and the various shops, including electric, metal, plumbing, carpenter, paint, and engineering shops (**Photographs 3 and 4**). This building section has similar windows to the operations wing, both original and replacement roll-up garage doors, flush metal personnel doors with and without upper glazing, and several large metal louvre vents. Several shed-roof extensions have been constructed to the rear (northwest and northeast) of the building, including the most recent, comprising a steel frame shelter with corrugated-metal roofing connecting the plant operations warehouse to the storage shed sometime between 1995 and 2002 (**Photograph 5**).

Abutting the east end of the plant operations shops building is the 1,864-square-foot automotive shop, which has an irregular footprint and identical corrugated metal siding, Sarnafil-membrane roofing, and steel-frame windows as the shops building, featuring two prominent metal roll-up garage doors and a steel-frame carport on the southeast side supported by steel tube columns (**Photograph 6**). This building has two shed-roof extensions to the rear (northeast), with the most recent added sometime between 1972 and 1987.

Immediately adjacent to the garage's northern corner is the 912-square-foot glass shop, which, according to the California Department of Developmental Services' 2017 facilities report, was constructed in 1973 (**Photograph 7**). Historic aerial photographs show that the building was constructed in 1958 behind the automotive shop, approximately 75 feet southeast of its current location. It was relocated sometime between 1987 and 1995. The glass shop is an elevated, wood-frame, temporary building with a rectangular footprint, plywood wall cladding, and a low-pitched gable roof with wide open eaves, exposed rafters, wood fascia, and modern composition shingle roofing. Fenestration consists of metal-frame horizontal-sliding windows with wood surrounds topped by awning windows.

In the center of the complex is the open, 6,695-square-foot vehicle storage shed, which has a rectangular footprint and a flat roof with modern Sarnafil-membrane roofing (**Photograph 8**). The building is supported by regularly distributed steel tube columns with cylindrical concrete bases connected via steel I-beams, which carry the roof structure comprising wood rafters and planks (**Photograph 9**). Sometime between 1972 and 1987, a corrugated metal carport addition was constructed at the southwest end.

At the far western corner of the complex is the 1,600-square-foot, prefabricated Butler-type mason shop, which has a rectangular footprint, a moderately pitched gable roof with flush eaves, and corrugated metal siding and roofing (**Photograph 10**). Fenestration consists of flush metal personnel doors with upper glazing and multi-light, steel-sash, awning windows with metal sills.

Adjacent to and northeast of the mason shop is a 1,404-square-foot storage shed, with a rectangular footprint and a wood-frame, corrugated-metal shed roof (**Photograph 11**). The building is supported by a combination of metal post-and-beam supports and concrete block walls, and it features large sliding doors clad with corrugated metal.

An additional prefabricated, modern Butler-type building is present on the complex, located to the immediate rear (northeast) of the automotive shop (**Photograph 12**). This building has a rectangular footprint, a low-pitched gable roof, and corrugated metal roofing and siding. A metal roll-up door is located on the northeast side.



**Table 1: Date Constructed / Alterations**

Building Designation	Built Date	Alterations
Plant Operations Warehouse & Shops	ca.1956	Addition 1 (north corner, Engineering Shop and shed-roof extension), 1967-1972; Addition 2a (northwest side shed-roof extension) and 2b (northeast side shed-roof extension), 1972-1987; Addition 3 (shed-roof extension connecting to Storage Shed, see below), 1995-2002
Automotive Shop	ca. 1956	Rear (northeast) shed-roof addition, 1972-1987
Vehicle Storage Shed	ca. 1956	Southwest addition, 1972-1987
Glass Shop	1958	Moved a short distance within the Plant Operations Complex to its present location 1987-1995
Mason Shop	ca. 1961	No known alterations
Storage Shed	ca. 1961	Shed-roof extension connecting to Plant Operations Warehouse (see above), 1995-2002

## B10. Significance (continued):

The Plant Operations Complex was included in the State Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in 1953. The individual buildings in the complex were essentially utilitarian designs, with concrete foundations and corrugated metal siding, although they employed some International-style elements in keeping with the hospital's overall modern aesthetic, such as flat roofs and extended rows of metal-frame windows. In 1956, an additional \$102,100 was identified for planning and construction of a second phase of garage and maintenance shops as a component of the State Building Construction Program five-year plan in the 1956-1957 Fiscal Year. In about 1956, the plant operations warehouse and shops building, the automotive shop, the vehicle storage shed, and a no-longer-extant building with an attached concrete ramp were constructed, with the glass shop built at an alternate site in the operations complex in 1958 (**Figure 1**). In about 1961, the mason shop and its abutting storage shed were built, with the prefabricated Butler building added circa 1984.<sup>1</sup>

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives (CSA), Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; California Department of Public Works (DPW), Division of Architecture, "Fairview State Hospital: Hospital, Administration and Acute Infirm Wards – Plot Plan Vicinity Map and Index," sheet M-1 of Three, W. O. 2428 GC, July 27, 1956, File 19-G-8, California Department of General Services (DGS) Plans Vault, West Sacramento; DPW, Division of Architecture, "Fairview State Hospital: Covered Passages to Link Buildings – Plot Plan," sheet 1 of 2, W.O. 3718 GC-57, January 25, 1957, File 19-G-1, DGS Plans Vault, West Sacramento; DPW, Division of Highways, "Fairview State Hospital" [aerial photograph], negative no. 5917-4, March 19, 1958, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services (DDS), CSA, Sacramento; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, DDS, CSA, Sacramento; Fairchild Aerial Surveys, Flight C-23870, Frame 341, 1:14,400 May 7, 1960, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019); "Fairview" [aerial photograph], August 27, 1961, ff. 2012-075 # 2 – Oversized Photographs, DDS, CSA, Sacramento; Aerial Map Industries, Flight AMI-OC-81, Frame 11058, 1:36,000, March 15 – April 5, 1981, available at UCSB; "Costa Mesa, 1987" [aerial photograph], on file at Costa Mesa Historical Society, Costa Mesa, California.

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\*Resource Name or # (Assigned by recorder) Plant Operations Complex

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Figure 1:** Portion of 1958 oblique photograph of Fairview State Hospital, showing Plant Operations Complex. Note the glass shop at the right edge of the photograph, behind the automotive shop. It was later moved approximately 75 feet northwest (left in photo), to its current location. The mason shop, storage shed, and prefabricated Butler building had not yet been constructed. The building and concrete ramp at left, possibly an incinerator, are not extant (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, DDS, CSA, Sacramento).

### Evaluation

The historic-period buildings that comprise the FDC Plant Operations Complex were constructed between ca. 1956 and 1961 as an integral part of the original and expanded campus plan for Fairview State Hospital. The buildings have remained in continual use through the historical period, providing essential plant operations services for the institution. The complex supported Fairview's primary mission of providing care for people with developmental disabilities, and it contributed to the hospital's identity as a self-contained institution. As such, the Plant Operations Complex is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the buildings provided important support services to the hospital, these functions alone do not rise to the level of historic significance, and the complex nor any of its components are not individually eligible for listing under these criteria.

The Plant Operations Complex is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with these buildings made demonstrably important contributions to history at the local, state, or national level.

The Plant Operations Complex was designed as part of the original and expanded campus plan for Fairview State Hospital, and it was completed between 1956 and 1961 during the original and secondary phases of build out. Essentially utilitarian in design, the steel-frame buildings that comprise the Plant Operations Complex had corrugated metal siding, and incorporated such International-style features as flat roofs and extended metal-sash windows that allowed them to contribute to the overall campus's modern appearance. The complex is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The Plant Operations buildings are not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the buildings as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building complex is an unexceptional example of institutional use of the utilitarian construction. The design and construction prioritized economy and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and these building are not an important example of the type.

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\*Resource Name or # (Assigned by recorder) Plant Operations Complex

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

The Plant Operations Complex is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The Plant Operations Complex retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The buildings generally have experienced few exterior modifications. Additions were constructed for the plant operations warehouse and shops building, automotive shop building, vehicle storage shed, and storage shed, but these alterations did not meaningfully impacted the complex's overall integrity of design or materials. The glass shop was more seriously altered as a result of being moved within the Plant Operations Complex from behind the automobile shop to its present location about 75 feet to the northwest behind the plant operations shops buildings between 1987 and 1995. However, the shop retains its original orientation, setting, and general environment, and possesses good integrity in the design, materials, and workmanship that convey its architectural significance. This building thus meets the requirements of NRHP Criteria Consideration B, relating to moved properties, to to be eligible as a contributor to the historic district. The complex as a whole continues to function in a manner consistent with its historic use and retains good integrity of location, design, materials, workmanship, feeling, and association, with slightly diminished integrity of setting as a result of the surrounding development of multi-unit residential housing.

Character-defining features of the Plant Operations Complex include the elements that date to the district's period of significance: the buildings' locations and orientations, and its utilitarian and International-style architectural details including the buildings' rectangular form and massing; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; and any doors from before 1969.

### Photographs (continued):



**Photograph 2:** Southeast side of plant operations warehouse; facing northwest, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Plant Operations Complex

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 3:** Southeast side of plant operations office and shops; facing north / northwest, May 29, 2019.



**Photograph 4:** Southwest side of northeast end of plant operations shops building, showing automotive shop at right; facing east, May 29, 2019.

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\*Resource Name or # (Assigned by recorder) Plant Operations Complex

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

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**Photograph 5:** Southwest side of plant operations warehouse, showing modern shelter addition (center); facing east / northeast, May 29, 2019.



**Photograph 6:** Front (southwest) view of automotive shop; facing northeast, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Plant Operations Complex

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

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**Photograph 7:** Northeast and northwest sides of glass shop; facing south / southeast, May 29, 2019.



**Photograph 8:** Northwest and southwest sides of vehicle storage shed; facing east / northeast, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Plant Operations Complex

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

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**Photograph 9:** Detail view of vehicle storage shed ceiling; facing west / northwest, May 29, 2019.



**Photograph 10:** Southwest and southeast sides of mason shop; facing north / northeast, May 29, 2019.



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\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Plant Operations Complex

☒ Continuation ☐ Update

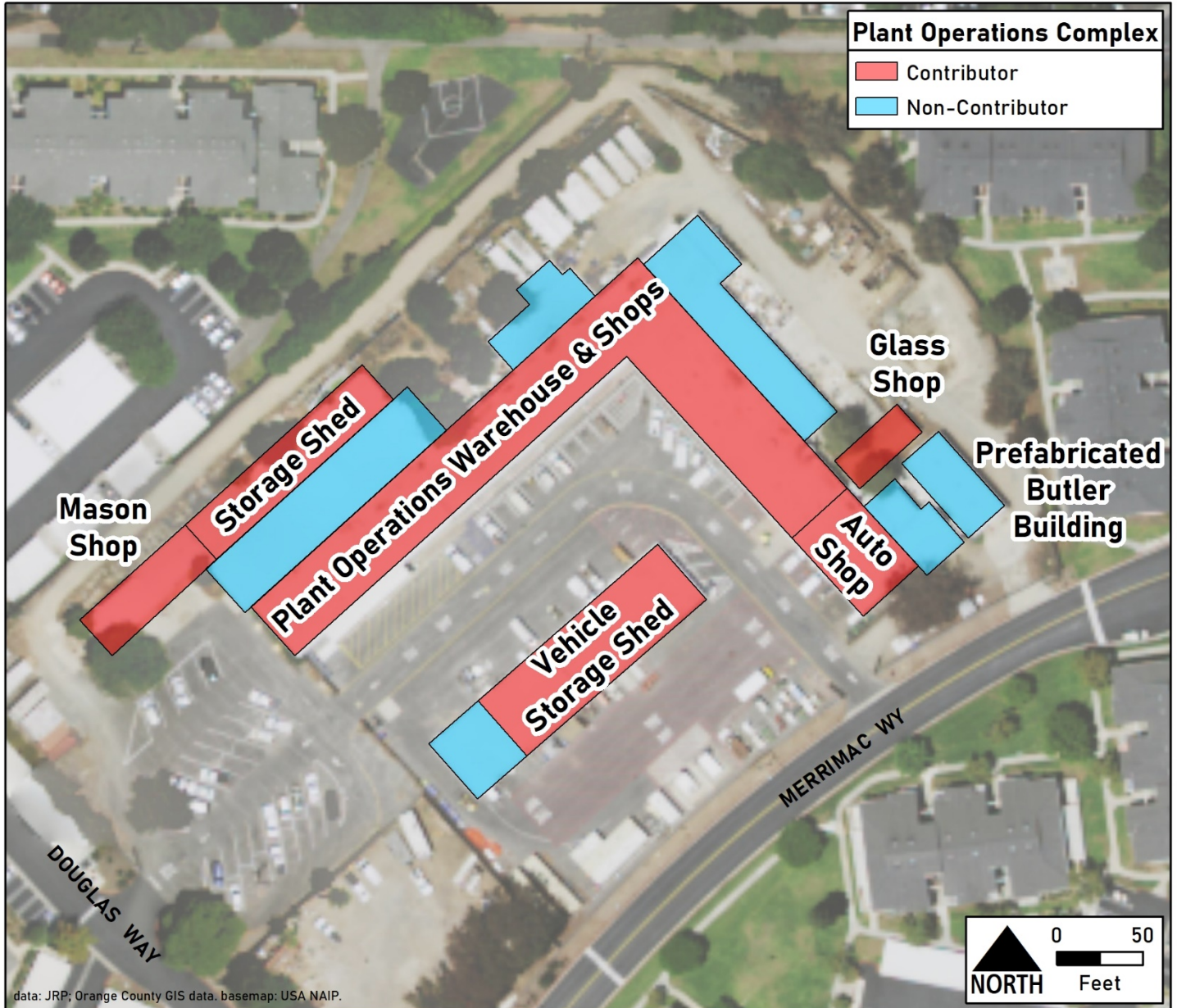


**Photograph 11:** Detail view of northeast end of storage shed; facing north / northeast, May 29, 2019.



**Photograph 12:** Modern prefabricated Butler-type building, showing rear (northeast) shed-roof shade structure of automotive shop (left); facing north / northeast, May 29, 2019.

**Site Map:**





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

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\*Resource Name or # (Assigned by recorder): R&T and Administration Building

**P1. Other Identifier:** Receiving & Treatment and Administration Building

\*P2. Location: ☐ Not for Publication ☒ Unrestricted \*a. County Orange

and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1/4 of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located at the northeast entrance to the main complex near the intersection of Fair Drive and North Shelley Circle at the Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 155,778-square-foot, multi-story, International-style, Receiving & Treatment (R&T) and Administration Building, which possesses an irregular footprint, a flat roof with metal coping and no eaves, and exposed concrete construction. The building is surrounded by manicured grass lawns with mature trees and concrete walkways and asphalt-paved parking lots (**Photograph 1**). The building is functionally and architecturally divided between the four-story, T-shaped R&T Building to the rear (west) and the two-story, T-shaped Administration building at the front (east)(see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1.** Receiving & Treatment and Administration Building; facing southwest, May 29, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1958 (California Department of Developmental Services / California Department of Public Works, Division of Architecture)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

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\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) R&T and Administration Building

B1. Historic Name: Hospital / Wing H; Administration Building / Wing G

B2. Common Name: Receiving & Treatment Building / Administration Building; Residences 1-10

B3. Original Use: Hospital / Administration B4. Present Use: Administration

\*B5. Architectural Style: International

\*B6. Construction History: Built ca.1958; metal louvered shades added to windows 1958-1961; modern Sarnafil-membrane roof covering added and automatic glass-and-metal doors added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture

b. Builder: Robert E. McKee General Contractors, Inc.

\*B10. Significance: Theme Treatment of Developmental Disability/ Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Receiving & Treatment (R&T) / Administration Building appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as a hospital and administration building during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

DPW, Division of Architecture, "Fairview State Hospital: Hospital-Administration & Acute Infirm Wards," W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services (DGS) Plans Vault, West Sacramento; "New Fairview Contracts Let," *Los Angeles Times* (October 28, 1956); also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

**Sketch Map**

See Continuation Sheet

### **P3a. Description (continued):**

The R&T Building wing's main section consists of a four-story concrete building, with the east and west sides divided evenly into 14 bays framed by concrete buttressing and ledges (**Photograph 2**). With the exception of a third-story section fronting former surgery rooms—with vertical concrete slats extending across three bays (**Photograph 3**)—each bay uniformly features four pairs of metal-frame casement windows topped by horizontal, metal-frame, awning windows, with the windows on floors two, three, and four shaded by metal louvres added about 1960. The building's north and south ends, along with the four- and one-story sections of the building, are flush, with similar casement and awning windows (**Photograph 4**). Entry to the building is permitted via modern, glass-and-metal, electronic sliding doors located on the north side and the north and south side of the four-story "T" stem, which are all sheltered by non-original, flat metal awnings added at an unknown date (**Photograph 5**). Flush metal personnel doors are distributed throughout the building, including sub-grade basement access, which is accessible via concrete steps enclosed by chain-link fencing (**Photograph 6**). The roof of the fourth-story section houses three original concrete fan rooms, with one outfitted with corrugated siding (**Photograph 7**). Safety metal handrailings were installed along the perimeter of the rooftop sometime in the 1990s.

Constructed at the same time as the R&T Building and connected via a narrow concrete corridor is the Administration Building wing, a two-story, T-shaped building to the front (east) of the hospital building (**Photograph 8**). This building has a one-story rectangular section at the front (north), with a two-story, L-shaped appendage forming the stem of the "T." The entrance is located in the center of the (north) façade, comprising modern glass-and-metal electronic sliding double doors flanked by glass-and-metal wall paneling sheltered beneath a curved concrete awning with metal coping outfitted with three replacement overhead light fixtures (**Photograph 9**). This building likewise features casement and awning windows that extend throughout both the first- and second-story sections. Exterior access to the second-story is permitted via a metal staircase on the south side (**Photograph 10**).

The lobby area of the Administration Building was renovated at an unknown date, as the vinyl tile flooring, overhead light fixtures, and metal staircase railing appear to be modern replacements (**Photograph 11**). The plaster walls and ceiling and wood baseboards appear to be original, as well as the tile flooring and flush wood doors with metal kickplates located in the adjacent hallway (**Photograph 12**).

### **B10. Significance (continued):**

The Receiving & Treatment (R&T) and Administration Building was included in the State Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State hospital site in 1953. The California Division of Architecture submitted final plans for the facility in July 1956, and the contract for its construction was awarded that October to Robert E. McKee General Contractors, Inc., based in Los Angeles. The building was designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. As projected, construction was completed by 1958 (**Figure 1**).<sup>1</sup>

Fairview State Hospital began receiving clients in January 1959 at a rate of about 100 per month for 16 months. The R&T and Administration Building served as the primary headquarters for treating the physical ailments of the hospital's population, which suffered at higher rates than the general population due to their disabilities. The Administration Building served as the base of operations for the Assistant Superintendent of General Medical and Surgical Services, with the four-story, 310-bed R&T Building dedicated to more intensive medical treatment. With the top three floors divided between contagious wards,

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives (CSA), Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; DPW, Division of Architecture, "Fairview State Hospital: Hospital-Administration & Acute Infirm Wards," W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services (DGS) Plans Vault, West Sacramento; "New Fairview Contracts Let," *Los Angeles Times* (October 28, 1956): 6; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.



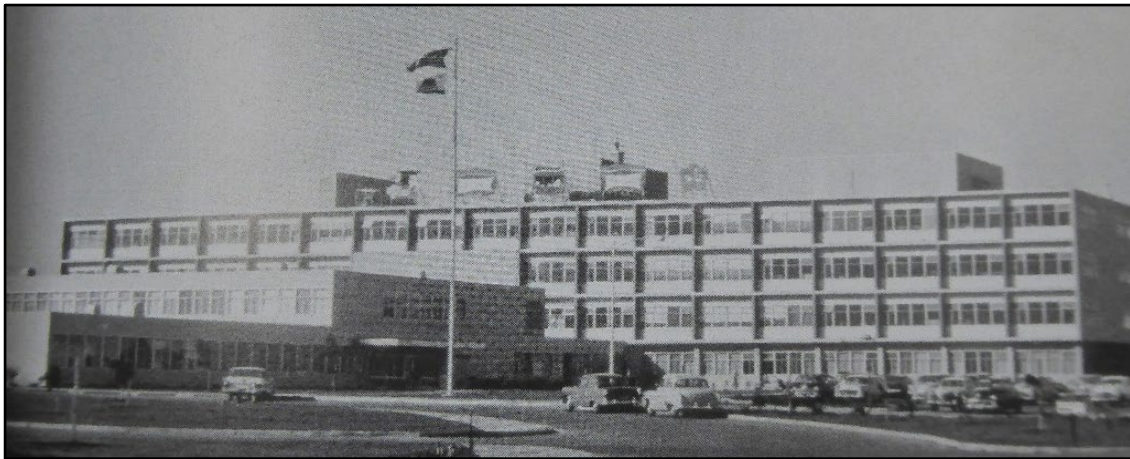
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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

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☒ Continuation ☐ Update

medical wards, surgical wards, and receiving wards, the first floor of the R&T Building housed the physical medicine department, laboratories—including electrocardiograph, electroencephalograph, clinical, and X-ray laboratories—the pharmacy, the dental office, and the chiropody (or podiatry) department (**Figure 2** and **Figure 3**). Pathology laboratories were housed in the basement.<sup>2</sup> These services appear to have been available through 1982, when the building additionally housed the Continuing Medical Care / Physical Development Program, which provided life support and 24-hour skilled nursing care to those patients with multiple severe disabilities. Today, several departments of the R&T Building are vacant, although skilled nursing programs and general acute-care facilities remain onsite.<sup>3</sup>



**Figure 1:** View of R&T and Administration Building, 1958-1960. Note the absence of metal louvered shades over the windows on floors 2-4 of R&T building section (photograph printed in Costa Mesa Historical Society, *Images of America: Costa Mesa, 1940-2003* (Charleston, South Carolina: Arcadia Publishing, 2016), 49).

<sup>2</sup> Hermann K. Sachs, MD, Assistant Superintendent, General Medical and Surgical Service, “Medical Needs Met with Care,” *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue* (May 4, 1961): 11, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California.

<sup>3</sup> “Fairview State Hospital Admits First Patients,” *Los Angeles Times* (January 6, 1959): 9; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 8, 14-15, on file at Fairview Developmental Center, Costa Mesa, California; DDS, “Fairview Developmental Center BUM Report,” June 23, 2017, on file at DDS, Sacramento.

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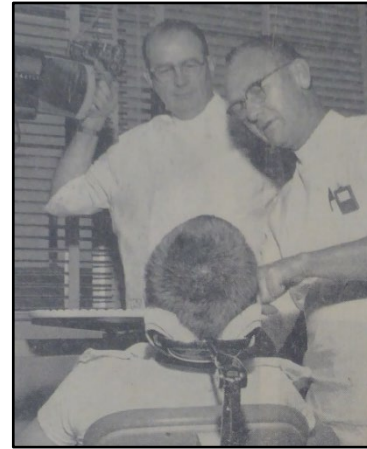
\*Resource Name or # (Assigned by recorder) R&T and Administration Building

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**Figure 2:** Interior view of third-floor Operating Room, ca. 1961 (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue* (May 4, 1961), 7, from the Collections of the CMHS).



**Figure 3:** First-floor dentist's office, ca. 1961 (Payne, *Fairview State Hospital Dedication Issue*, 15).

### Evaluation

The Receiving & Treatment (R&T) and Administration Building at FDC was completed about 1958 as an integral part of the original campus plan for Fairview State Hospital. The building served in continual use as a hospital and administrative building, hosting central functions associated with the Fairview facility's role in providing care for people with developmental disabilities. As such, the R&T and Administration Building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the complex as a hospital and administrative building, this function alone does not rise to the level of historic significance, and the FDC R&T and Administration Building is not individually eligible for listing under these criteria.

The R&T and Administration Building is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

The R&T and Administration Building was designed as part of the original campus plan for Fairview State Hospital, and it was completed in about 1958 during the first phase of build out. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The building is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

The R&T and Administration Building retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The building has been modified somewhat by the addition of modern glass-and-metal automatic doors and Sarnafil-membrane roof covering at unknown dates, as well as the addition of metal louvered windows shades by 1961, within the district's period of significance. These alterations have a minimal impact on the building's integrity of materials and design. The building retains strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the FDC R&T and Administration Building include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International-style architectural details including the building's massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

### Photographs (continued):



**Photograph 2:** West and south sides of R&T Building wing; facing northeast, May 29, 2019.



Page 7 of 13

\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 3:** Detail view of exterior of former surgery rooms; facing northwest, May 29, 2019.



**Photograph 4:** Detail view of single-story rear (west) section of R&T Building; facing southwest, May 29, 2019.

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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 5:** Detail view of modern glass-and-metal automatic sliding door of R&T Building; facing south / southeast, May 29, 2019.

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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 6:** Detail view of R&T Building basement access; facing southwest, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 7:** Detail view of R&T Building rooftop utility buildings; facing north / northeast, May 29, 2019.



**Photograph 8:** South side of corridor linking Administration Building (right) and R&T Building (left); facing northeast, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 9:** Detail view of Administration Building entrance; facing southwest, May 29, 2019.



**Photograph 10:** Southernmost section of Administration Building, with R&T Building (background left); facing northwest, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 11:** Interior view of Administration Building lobby; facing east / southeast, May 29, 2019.



**Photograph 12:** Interior view of Administration Building hallway; facing northeast, May 29, 2019.



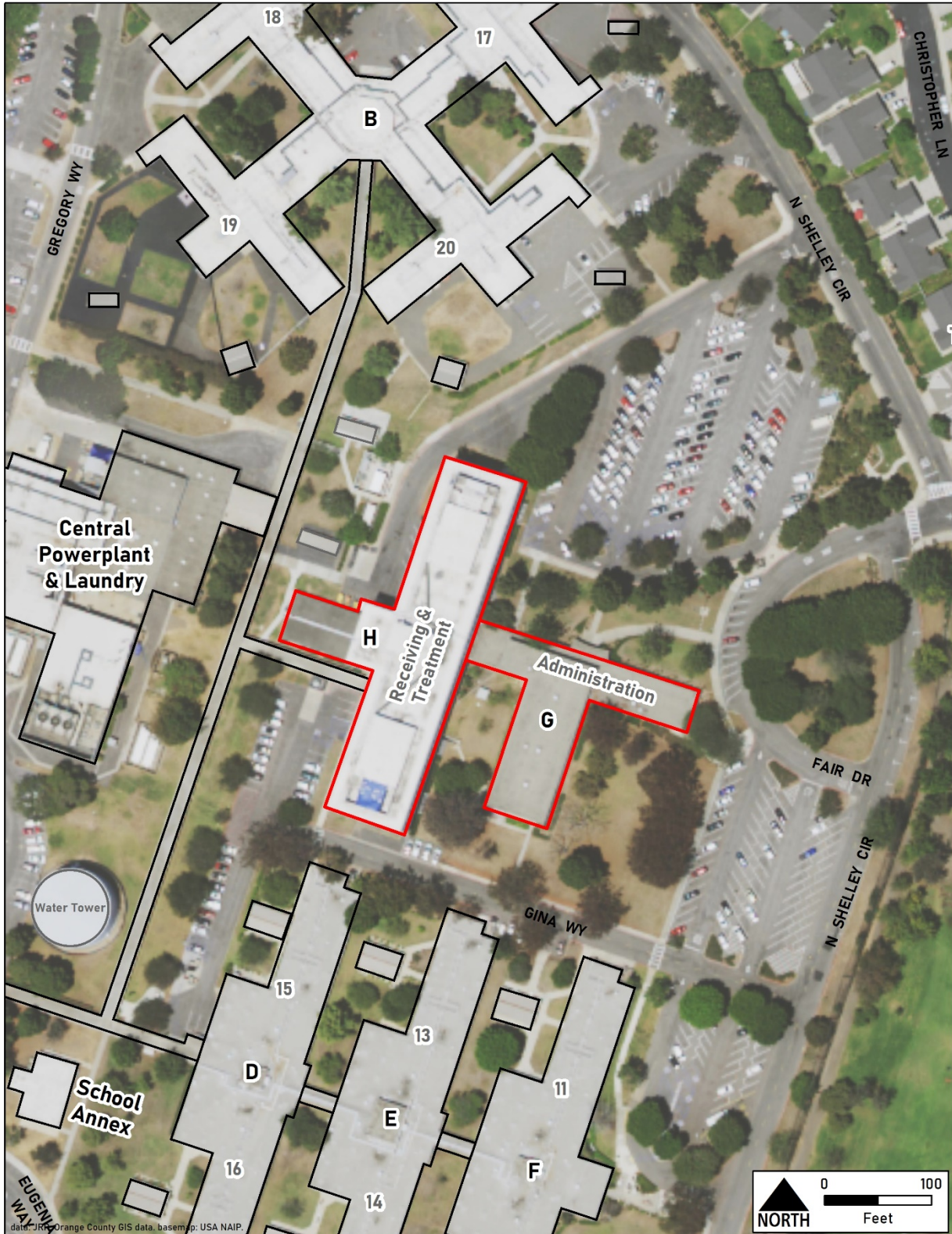
Page 13 of 13

\*Resource Name or # (Assigned by recorder) R&T and Administration Building

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

**Sketch Map:**







State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code \_\_\_\_\_ 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 10

\*Resource Name or # (Assigned by recorder): Residences 11, 12, 13, 14, 15, and 16

**P1. Other Identifier:** Residences 11, 12, 13, 14, 15, and 16 / Buildings D, E, F (adjoined)

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located on the east side of the main complex at the northwest corner of the intersection of Florence and South Shelley circles at Fairview Developmental Center (FDC).

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 77,834-square-foot, single-story, International-style, three-part building that houses (east-to-west) Residences 11 and 12 (Building F), 13 and 14 (Building E), and 15 and 16 (Building D) (**Photograph 1**). With each virtually identical, individual building section possessing a squat, T-shaped footprint, the parallel buildings are adjoined by a long central corridor and collectively comprise an irregular three-pronged, H-shaped footprint. The building is surrounded by asphalt-paved roadways and courtyards featuring manicured grass lawns with concrete walkways and mature trees. Each building section features a flat roof with rolled asphalt covering, metal coping, and wide, open eaves along the east and west sides and flush eaves at the north and south ends. The building is clad with stucco, and prominent metal louvered vents are located in the north and south ends where the HVAC rooms are located (**Photograph 2**) (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Southwest corner of Residence 16; facing east / southeast, May 28, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1958 (California Department of Developmental Services / California Department of Public Works, Division of Architecture)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28-29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_



**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 10

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Residences 11, 12, 13, 14, 15, and 16

B1. Historic Name: Acute Infirm Wards D, E, and F

B2. Common Name: Residences 11 and 12, 13 and 14, and 15 and 16

B3. Original Use: Residential treatment wards B4. Present Use: Residential treatment wards

\*B5. Architectural Style: International

\*B6. Construction History: Built ca. 1958; bays infilled for concrete seismic retrofitting 1990s; glass-and-metal automatic doors added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture

b. Builder: Robert E. McKee General Contractors, Inc.

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Residence 11 through 16 building appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is an historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

These adjoined building sections were designed and constructed as part of Fairview State Hospital, and they served continually as acute infirm wards during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

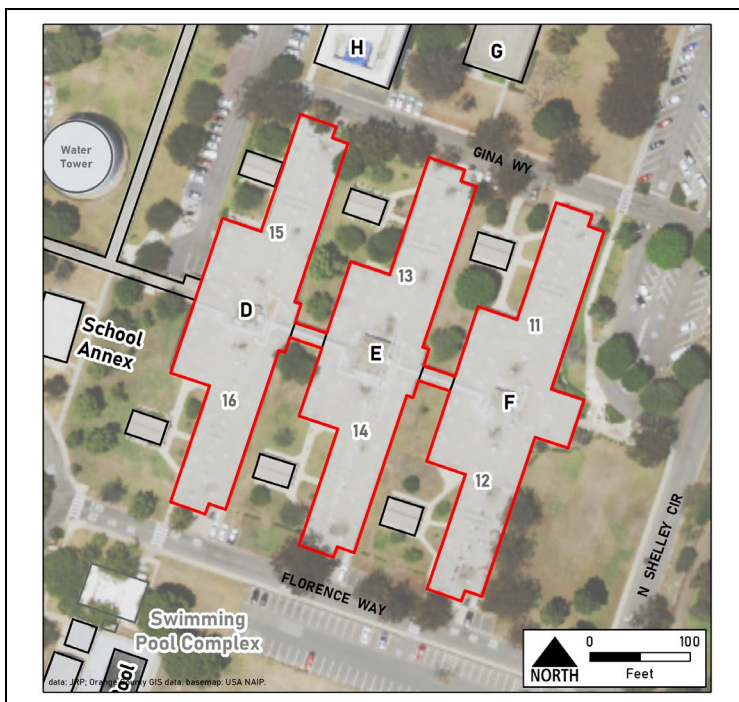
“Fairview State Hospital Admits First Patients,” *Los Angeles Times* (January 6, 1959): 9; “Fairview: Fact Sheet” (April 1, 1984), 2, ff. “Fairview Developmental Center,” Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



### **P3a. Description (continued):**

Along the east and west sides, each residential unit—comprising one half of a building section—is evenly divided into bays framed by concrete buttressing (**Photograph 3**). Fenestration consists of paired, metal-frame casement windows topped by awning transom windows, all behind prominent aluminum louvered shades that hang from the roofline and extend the length of the building. The building was seismically retrofitted in the 1990s, a project that resulted in several bays being infilled with wide concrete buttressing (**Photograph 4**). The multi-part building's primary entrance is located in a square, flush concrete projection in the center of the easternmost unit's (Building F) east side, which features a deeply recessed modern glass-and-metal automatic sliding door flanked to the north by glass-and-metal wall paneling (**Photograph 5**). Additional personnel entrances are located at the north and south ends, consisting of flush metal doors within deeply recessed alcoves, and along the building sides that open onto courtyards (**Photographs 6 and 7**). At the far interior end of the courtyard is the narrow concrete corridor linking each of the building sections; this corridor features a ribbon of recessed, metal-frame, paired casement windows with concrete sills (**Photograph 8**). Roof access is permitted via modern metal staircase located within a chain-link enclosure along the west side of the west unit (Building D) (**Photograph 9**). On the roof is located a corrugated-metal-clad, square utility room and a network of metal piping (**Photograph 10**).

The survey effort for this project focused on the publicly-accessible interior spaces of the residences in deference to client privacy. The interior layout of the residences consists generally of a shared dining hall, with limited serving and preparation space, around which are organized multiple long corridors leading to the separate wards. All of the ward rooms open off of the main hallways and include large sleeping bays; single bedrooms; day rooms; visiting rooms; toilet, shower, and changing rooms; and various offices and therapy rooms. Within this building, only the vacant wing (Building F) was recorded. The main entry corridor features drop ceilings, vinyl tile flooring, modern fluorescent lights, and multiple flush personnel doors, some with small viewing windows. A wooden reception counter, accessed by swinging half-door, is located at the corridor intersection. Residential areas open off the double-load hallway and feature semi-private bedrooms with three-quarter height walls (**Photograph 11**).

### **B10. Significance (continued):**

The three adjoined Acute Infirm Wards appear to have been included as a component of the hospital and administration building in the State Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in 1953.<sup>1</sup> The California Division of Architecture submitted final plans for the buildings in July 1956, which were included with the hospital and administration buildings, and the contract for their construction was awarded that October to Robert E. McKee General Contractors, Inc., based in Los Angeles. The building was designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. As projected, construction was completed about 1958 (**Figure 1**).<sup>2</sup>

Fairview State Hospital began receiving clients in January 1959 at a rate of about 100 per month for 16 months. Those clients determined to require a greater-than-average level of skilled-nursing care but not 24-hour supervision were assigned to the Acute Infirm Wards. In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized individualized developmental and habilitation programming. By 1982, Residences 11-16 hosted the Physical and Social Development Program for juvenile clients.<sup>3</sup> Patients in this program were described as "mobile but

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives (CSA), Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615.

<sup>2</sup> DPW, Division of Architecture, "Fairview State Hospital: Hospital-Administration & Acute Infirm Wards," W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services (DGS) Plans Vault, West Sacramento; "New Fairview Contracts Let," *Los Angeles Times* (October 28, 1956): 6; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.

<sup>3</sup> "Fairview State Hospital Admits First Patients," *Los Angeles Times* (January 6, 1959): 9; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. DPR 523L (1/95)

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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update

not fully ambulatory,” with few possessing language skills. Program objectives were “to foster clients’ motor development, promote awareness through increased environmental contacts, and develop communicative and self-help skills.”<sup>4</sup> These buildings remained occupied through 1997. As of 2017, Residence 14 (southern half of Building E) and Building F were vacant, with the other facilities serving as Day Training Activity Centers or hosting skilled-nursing programs.<sup>5</sup>



**Figure 1:** Portion of 1958 oblique photograph of Fairview State Hospital, showing Acute Infirm Wards nearing completion. Note how covered passageway has not yet been constructed to connect the three conjoined buildings to the utilities distribution network (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento).

### Evaluation

The Residence 11 through 16 building, consisting of adjoined building sections D, E, and F, was completed about 1958 as an integral part of the original campus plan for Fairview State Hospital. The building served in continual use as client ward, hosting central functions associated with the Fairview facility’s role in providing care for people with developmental disabilities. As such, the building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the complex as a client ward building, this function alone does not rise to the level of historic significance, and the building is not individually eligible for listing under these criteria.

The building is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important

1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 8, on file at Fairview Developmental Center, Costa Mesa, California.

<sup>4</sup> “Fairview: Fact Sheet” (April 1, 1984), 2, ff. “Fairview Developmental Center,” Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA.

<sup>5</sup> DDS, “Building Utilization Report and Recurring Maintenance Data: Fairview” (January 8, 1997), on file at DDS, Sacramento; DDS, “Fairview Developmental Center BUM Report,” June 23, 2017, on file at DDS.



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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update

contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

The building was designed as part of the original campus plan for Fairview State Hospital, and it was completed in about 1958 during the first phase of build out. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The building is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The Residence 11 through 16 building retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The building has been modified somewhat by the addition of modern glass-and-metal automatic doors, Sarnafil-membrane roofing, and concrete seismic retrofitting at unknown dates. These alterations have a minimal impact on the building's integrity of materials and design. The building retains strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the building include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International-style architectural details including the building's conjoined three-part massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** North end of Residence 11; facing southwest, May 28, 2019.



**Photograph 3:** East side of Residence 12; facing northwest, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update



**Photograph 4:** Detail view of east side of Residence 12, showing seismic retrofit; facing northwest, May 28, 2019.



**Photograph 5:** Detail view of Residence 11-16 primary entrance; facing west / southwest, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update



**Photograph 6:** Detail view of Residence 12 personnel entrance; facing north / northeast, May 28, 2019.



**Photograph 7:** Detail view of courtyard entrance along east side of Residence 14; facing northwest, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update



**Photograph 8:** Detail view of south side of corridor between Buildings E (Residence 13-14) and F (Residence 11-12); facing northeast, May 28, 2019.



**Photograph 9:** Detail view of roof access along Building D (Residence 15-16); facing south / southeast, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Residence 11, 12, 13, 14, 15, and 16

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update



**Photograph 10:** Oblique view of Building D (Residence 15-16) rooftop, taken from Receiving & Treatment and Administration Building roof; facing southwest, May 29, 2019.



**Photograph 11:** Typical view of interior hallway, May 29, 2019.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 9

\*Resource Name or # (Assigned by recorder): Residences 17, 18, 19, and 20

**P1. Other Identifier:** Residences 17, 18, 19, and 20 / Building B

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located in the northeast quadrant of the main complex southeast of the intersection of Gregory Way and North Shelley Circle at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 59,948-square-foot, single-story, International-style building that houses Residences 17, 18, 19, and 20 (also known as Building B). It consists of a single building that possesses an X-shaped footprint comprising four virtually identical T-shaped wings with exposed site-cast concrete walls with a rough board-form finish, a flat roof with modern Sarnafil-membrane covering, both wide and flush eaves, and metal coping, gutters, and downspouts. The building is surrounded by manicured lawns with mature trees and concrete walkways and asphalt-paved parking lots and roadways (**Photograph 1**). Courtyards are located where the four wings intersect, with the eastern, western, and southern courtyards featuring lawns and the northern courtyard featuring an asphalt-paved lot leading to an elevated, concrete loading dock accessed via concrete stairs with metal handrail (**Photograph 2**; see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Oblique view of Residence 19 (left) and 20 (right), from R&T Building rooftop; facing northwest, May 29, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1954 (California Department of Developmental Services / California Department of Public Works, Division of Architecture)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28-29, 2019

\*P10. Survey Type: (Describe)

Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 9

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Residences 17, 18, 19, and 20

B1. Historic Name: Ward # 1; Building B

B2. Common Name: Residences 17, 18, 19, and 20

B3. Original Use: Residential treatment ward B4. Present Use: Residential treatment ward

\*B5. Architectural Style: International

\*B6. Construction History: Built ca. 1954; Sarnafil-membrane roof sheathing and numerous replacement doors and windows added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Ruane Corporation

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Residence 17 through 20 building appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as a residence during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

Fairview Developmental Center, *A Collection of Histories*, by DDS, Residential Services Division (Sacramento: California Department of Developmental Services, ca. 1995), Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

**Sketch Map**

See Continuation Sheet

### **P3a. Description (continued):**

At the northern loading dock area, access to the building's interior is permitted via flush metal personnel door and double, metal, personnel doors with metal bottom plates and upper glazing, which lead directly to the central, 1.5-story kitchen area. This section features an octagonal footprint and has metal roof vents, infilled, metal-frame windows, and metal louvered vents above the surrounding, single-story roofline. Flanking the loading dock is a sub-grade, basement-level access point enclosed by a chain-link fence and gate with concrete stairs and metal handrails leading to a flush personnel door with metal louvered vent (**Photograph 3**). Additional entrances are spread ubiquitously along all sides of the building, with a variety of original and replacement door types permitting access to the interior: original flush wood doors (**Photograph 4**); original flush wood doors with large square, small square, or vertical light glazing (**Photograph 5**); original flush wood doors with long, vertical, metal louvered vents, where the residential HVAC equipment is located (**Photograph 6**); and replacement glass-and-metal doors with prominent glazed panels (**Photograph 7**). The windows largely consist of replacement vinyl one-over-one and fixed-pane units.

The survey effort for this project focused on the publicly-accessible interior spaces of the residences in deference to client privacy. The interior layout of the residences consists generally of a shared dining hall, with limited serving and preparation space, around which are organized multiple long corridors leading to the separate wards. All of the ward rooms open off of the main hallways and include large sleeping bays; single bedrooms; day rooms; visiting rooms; toilet, shower, and changing rooms; and various offices and therapy rooms. Only the main hallways were recorded within this building. These double-load corridors have drop ceilings, vinyl tile flooring, modern fluorescent lights, and multiple flush personnel doors, some with small viewing windows (**Photograph 8**).

### **B10. Significance (continued):**

The Residence 17-20 building (Building B), originally called the Ward #1 building, was included in the State Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in January 1953. The building was designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. That October, the Ruane Corporation was awarded the construction contract with a low bid of \$563,800. Construction was completed by late December 1954, making it the oldest building at the Fairview Developmental Center primarily dedicated to client care.<sup>1</sup>

Fairview State Hospital began receiving clients in January 1959 at a rate of about 100 per month for 16 months. Originally, the Ward # 1 building reportedly housed young children at the complex. In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized individualized developmental and habilitation programming.<sup>2</sup> By 1982, Residences 17-20 hosted the Habilitation Program, which included "adults who possess basic self-help skills, can follow simple directions, and can benefit from vocational training," with the program dedicated to preparing them for "the least restrictive environment possible."<sup>3</sup> By 1997, Residences 17 and 20 (the easternmost wings) were unoccupied.

<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, and Anson Boyd, State Architect to Frank B. Durkee, Re: Approval No. 2971 – Fairview State Hospital, October 16, 1953, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives (CSA), Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; DPW, Division of Architecture, "Fairview State Hospital: Laundry-Boiler Plant – Plot Plan, Finish Schedule, Etc.," sheet 1 of 11, W.O. 2428 GC, December 30, 1954, File 19-G-17, California Department of General Services (DGS) Plans Vault, West Sacramento.

<sup>2</sup> "Fairview State Hospital Admits First Patients," *Los Angeles Times* (January 6, 1959): 9; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: California Department of Developmental Services (DDS), ca. 1995), 3, ff. "Dept. of Developmental Services – Developmental Center History," Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA.

<sup>3</sup> "Fairview: Fact Sheet" (April 1, 1984), 3, ff. "Fairview Developmental Center," Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: Department of Developmental Services (DDS) – Administration – Customer Support Section, CSA.



Page 4 of 9

\*Resource Name or # (Assigned by recorder) Residence 17, 18, 19, and 20

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

As of 2017, the remaining wings hosted a Day Training Activity Center and was occupied by clients assigned to an intermediate care program.<sup>4</sup>

#### Evaluation

The Residence 11-17 building (Building B) was completed about 1954 as an integral part of the original campus plan for Fairview State Hospital. The building served in continual use as client ward, hosting central functions associated with the Fairview facility's role in providing care for people with developmental disabilities. As such, the building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the complex as a client ward building, this function alone does not rise to the level of historic significance, and the building is not individually eligible for listing under these criteria.

Building B is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

Building B was designed as part of the original campus plan for Fairview State Hospital, and it was completed in about 1954 during the first phase of build out. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The building is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

Building B is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

Building B retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The building has been modified somewhat by the addition of several replacement doors and windows and Sarnafil-membrane roofing at unknown dates. These alterations have a minimal impact on the building's integrity of materials and design. The building retains strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the building include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International-style architectural details including the building's massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

<sup>4</sup> DDS, "Building Utilization Report and Recurring Maintenance Data: Fairview" (January 8, 1997), on file at DDS, Sacramento; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS.

Page 5 of 9

\*Resource Name or # (Assigned by recorder) Residence 17, 18, 19, and 20

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Northern loading dock area of Residence 17-20; facing south, May 28, 2019.



**Photograph 3:** Detail view of basement-level entrance adjacent to loading dock area, Residence 17-20; facing southeast, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Residence 17, 18, 19, and 20

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 4:** Detail view of flush wood door adjacent to Residence 18 courtyard; facing east / northeast, May 28, 2019.



**Photograph 5:** Detail view of entrance adjacent to Residence 17 parking lot area; facing southwest, May 28, 2019.



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\*Resource Name or # (Assigned by recorder) Residence 17, 18, 19, and 20

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 6:** Detail view of wood panel personnel door with metal louvre vent at northeast end of Residence 20; facing southwest, May 28, 2019.



**Photograph 7:** Detail view of replacement glass-and-metal door along Residence 17; facing northwest, May 28, 2019.

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\*Resource Name or # (Assigned by recorder) Residence 17, 18, 19, and 20

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update



**Photograph 8:** Typical interior hallway, May 28, 2019.



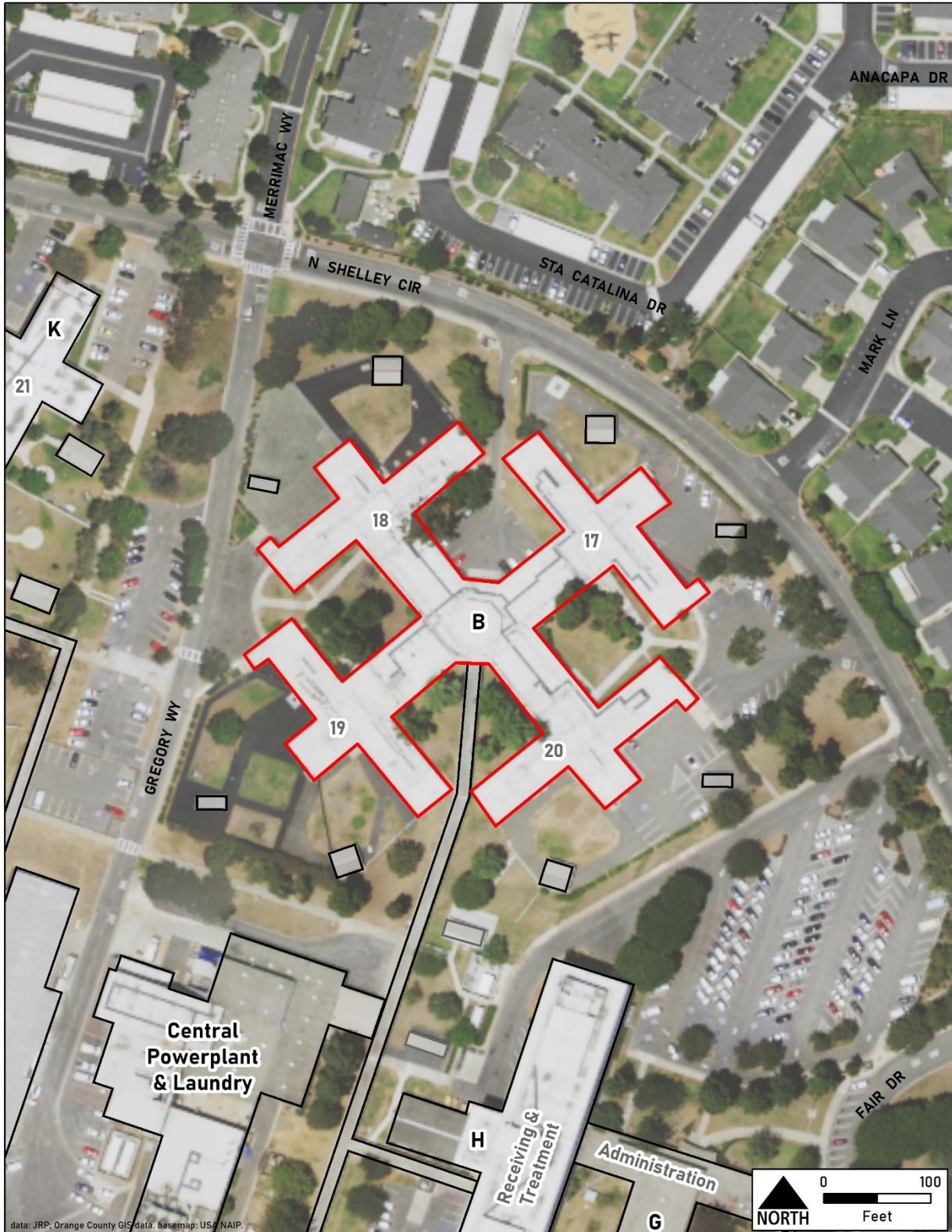
Page 9 of 9

\*Resource Name or # (Assigned by recorder) Residence 17, 18, 19, and 20

\*Recorded by T. Webb & S. Skow \*Date May 28, 2019

☒ Continuation ☐ Update

**Sketch Map:**







State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 10

\*Resource Name or # (Assigned by recorder): Residences 21-24 and 41-44

**P1. Other Identifier:** Residence 21, 22, 23, and 24 (Building K) & Residence 41, 42, 43, and 44 (Building J)

**\*P2. Location:** ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

**\*a. County** Orange

**\*b. USGS 7.5' Quad** Newport Beach **Date** 2018 **T** 6S; **R** 10W;     ¼ of Sec    ; **S.B. B.M.**

**c. Address** 2501 Harbor Boulevard **City** Costa Mesa **Zip** 92626

**d. UTM:** (give more than one for large and/or linear resources) Zone    ;     mE/     mN

**e. Other Locational Data:**

Located at the north and south ends of the main complex, on the south side of North Shelly Circle and the north side of South Shelly Circle, at Fairview Developmental Center.

**\*P3a. Description:** (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records two virtually identical, approximately 55,862-square-foot, two-story, International-style buildings, with the northernmost building housing Residences 21, 22, 23, and 24 (Building K) and the southernmost building housing Residences 41, 42, 43, and 44 (Building J; **Photograph 1**). Both buildings feature generally V-shaped footprints, flat roofs with modern Sarnafil-membrane covering, metal coping, and flush eaves, and exposed site-cast concrete walls throughout the majority of the exterior, with wood-slat cladding present where the V-wings conjoin (**Photograph 2**). Both buildings are surrounded by courtyards with manicured lawns, mature trees, and concrete walkways, as well as asphalt-paved parking lots and adjacent roadways. Entrances are distributed at irregular intervals, principally consisting of flush, wood personnel doors, some with glazing, with doors to HVAC sections featuring square metal louvered vents (**Photographs 3 and 4**; see Continuation Sheet).

**\*P3b. Resource Attributes:** (HP14) Government Building; (HP41) Hospital

**\*P4. Resources Present:** ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Residences 21-24 (Building K); facing south / southwest, May 29, 2019.

**\*P6. Date Constructed/Age and Sources:**  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1958 (California Department of Developmental Services)

**\*P7. Owner and Address:**  
California Department of Developmental Services

**\*P8. Recorded by:**  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

**\*P9. Date Recorded:** May 29, 2019

**\*P10. Survey Type:** (Describe)  
Intensive

**\*P11. Report Citation:** (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

**\*Attachments:** ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 10

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

B1. Historic Name: Ward K / Ward J

B2. Common Name: Residence 21, 22, 23 and 24 (Building K) / Residence 41, 42, 43, and 44 (Building J)

B3. Original Use: Residential treatment wards B4. Present Use: Residential treatment wards

\*B5. Architectural Style: International

\*B6. Construction History: Both buildings constructed ca. 1958; metal louvered awnings added to windows ca. 1962; Sarnafil-membrane roofing added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Robert E. McKee

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Residence 21-24 and 41-44 buildings appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these buildings are historical resources for the purposes of the California Environmental Quality Act (CEQA). The buildings are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

These buildings were designed and constructed as part of Fairview State Hospital, and they served continually as residences during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

“Fairview State Hospital Admits First Patients,” *Los Angeles Times* (January 6, 1959): 9; Fairview Developmental Center, *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS 3; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

### Sketch Map

See Continuation Sheet



### **P3a. Description (continued):**

The buildings feature wood-frame windows, with casement-and transom-type windows forming first- and second-story ribbons along the courtyards (**Photograph 5**). Aluminum slat awnings were added to several windows outside the courtyards circa 1962 (**Photograph 6**). Exterior metal staircases with metal pipe railing enclosed by chain-link fencing are distributed along both buildings, permitting exterior access to the second floor (**Photograph 7**).

The survey effort for this project focused on the publicly-accessible interior spaces of the residences in deference to client privacy. The interior layout of the residences consists generally of a shared dining hall, with limited serving and preparation space, around which are organized multiple long corridors leading to the separate wards. All of the ward rooms open off of the main hallways and include large sleeping bays; single bedrooms; day rooms; visiting rooms; toilet, shower, and changing rooms; and various offices and therapy rooms. Only the vacant residences were surveyed within these buildings. The double-load main corridors featured drop ceilings, vinyl tile flooring, modern fluorescent lights, and multiple flush personnel doors, some with small viewing windows (**Photograph 8**). The former client rooms include small entryway and individual closet. The room interiors are much like the hallways, with vinyl tile floors, drop ceilings, and high sliding windows.

### **B10. Significance (continued):**

In 1956, \$2,334,300 was identified for planning and constructing two 560-patient-capacity ward buildings in the 1956-1957 Fiscal Year as part of the State Building Construction Program five-year plan. The California Division of Architecture submitted final plans in January 1957, and the general construction contract of \$2,224,000 for the construction of four wards total was awarded that April to Robert E. McKee of Los Angeles. The buildings were designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. Construction of Wards J and K was completed about 1958.<sup>1</sup>

Fairview State Hospital began receiving clients in January 1959 at a rate of about 100 per month for 16 months. Adolescent male and female clients were divided between Wards J and K, respectively. In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized individualized developmental and habilitation programming. By 1982, the buildings housed both male and female adolescent clients.<sup>2</sup> Building K (Residences 21-24) housed the Social Development Program for “active, ambulatory males and females” between the ages of 12 and 21, with the stated goals to “provide education and training in the areas of behavior management, self-help skills, sensory motor, prevocational and independent living skills for development and growth in a normalized, least restrictive environment.” Building J (Residences 41-44) housed the Behavior Adjustment Program for “adolescent and adult male and female ambulatory clients who present problem behaviors so severe they cannot function in the community or participate in other programs,” with the stated goal to “alleviate the maladaptive behaviors and improve social skills to the point that they can move into a less

<sup>1</sup> California Department of Finance, “Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program,” *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; California Department of Public Works (DPW), Division of Architecture, “Fairview State Hospital: Two Ward Buildings ‘J’ & ‘K,’” W.O. 3718-GC-12, January 25, 1957, File 19-G-4, California Department of General Services (DGS) Plans Vault, West Sacramento; “Contracts Awarded for State Hospital,” *Los Angeles Times* (April 7, 1957): 2; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.

<sup>2</sup> “Fairview State Hospital Admits First Patients,” *Los Angeles Times* (January 6, 1959): 9; “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 8, on file at Fairview Developmental Center, Costa Mesa, California.

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\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

restrictive environment.”<sup>3</sup> These buildings remained occupied through 1997. As of 2017, Residence 22 serves as a Day Training Activity Center, while all other residences are vacant.<sup>4</sup>

### Evaluation

FDC Residence 21-24 (Building K) and Residence 41-44 (Building J) were completed about 1958 as an integral part of the expanded campus plan for Fairview State Hospital. The buildings served in continual use as client wards, hosting central functions associated with the Fairview facility’s role in providing care for people with developmental disabilities. As such, the buildings are significant under NRHP Criterion A and CRHR Criterion 1 as contributors to the Fairview State Hospital Historic District. While the buildings provided an important service to the complex as client ward buildings, this function alone does not rise to the level of historic significance, and the buildings are not individually eligible for listing under these criteria.

Buildings J and K are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with these buildings made demonstrably important contributions to history at the local, state, or national level.

Buildings J and K were designed as part of the expanded campus plan for Fairview State Hospital, and they were completed in about 1958 during the secondary phase of build out. The buildings are thus significant under NRHP Criterion C and CRHR Criterion 3 as contributors to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The buildings are not individually eligible under these criteria as the works of a master or as important examples of a type, period, or method of construction. The State Division of Architecture designed the buildings as components of a larger campus plan, rather than as stand-alone facilities. Independently, the buildings are modest examples of institutional use of the International Style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and these buildings are not an important example of the type.

Buildings J and K are not significant as sources (or likely sources) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

Buildings J and K retain sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as district contributors. The buildings have been modified somewhat by the addition of Sarnafil-membrane roofing at an unknown date and metal louvered window awnings circa 1962, within the district’s period of significance. These alterations have a minimal impact on the buildings’ integrity of materials and design. The buildings retain strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the buildings include the elements that date to the district’s period of significance: the buildings’ location and orientation, their general setting, and their International-style architectural details including the buildings’ massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

<sup>3</sup> “Fairview: Fact Sheet” (April 1, 1984), 3, ff. “Fairview Developmental Center,” Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: Department of Developmental Services (DDS) – Administration – Customer Support Section, CSA.

<sup>4</sup> DDS, “Building Utilization Report and Recurring Maintenance Data: Fairview” (January 8, 1997), on file at DDS, Sacramento; DDS, “Fairview Developmental Center BUM Report,” June 23, 2017, on file at DDS.

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\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Southwest corner of Residence 21-24 (Building K), showing wood-slat cladding; facing east / southeast, May 29, 2019.



**Photograph 3:** Detail view of main, north entrance to Residence 21-22 (Building K), showing double flush wood personnel doors with square upper glazing; facing southwest, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 4:** Detail view of exterior access to HVAC area of Building K; facing southwest, May 29, 2019.



**Photograph 5:** View of windows along east side of Building K courtyard; facing southeast, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 6:** View of windows at northwest corner of Building K, showing aluminum awnings; facing southeast, May 29, 2019.



**Photograph 7:** View of second-floor access at south end of Residence 41-44 (Building J); facing northwest, May 29, 2019.

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\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 8:** Typical interior hallway, May 29, 2019.



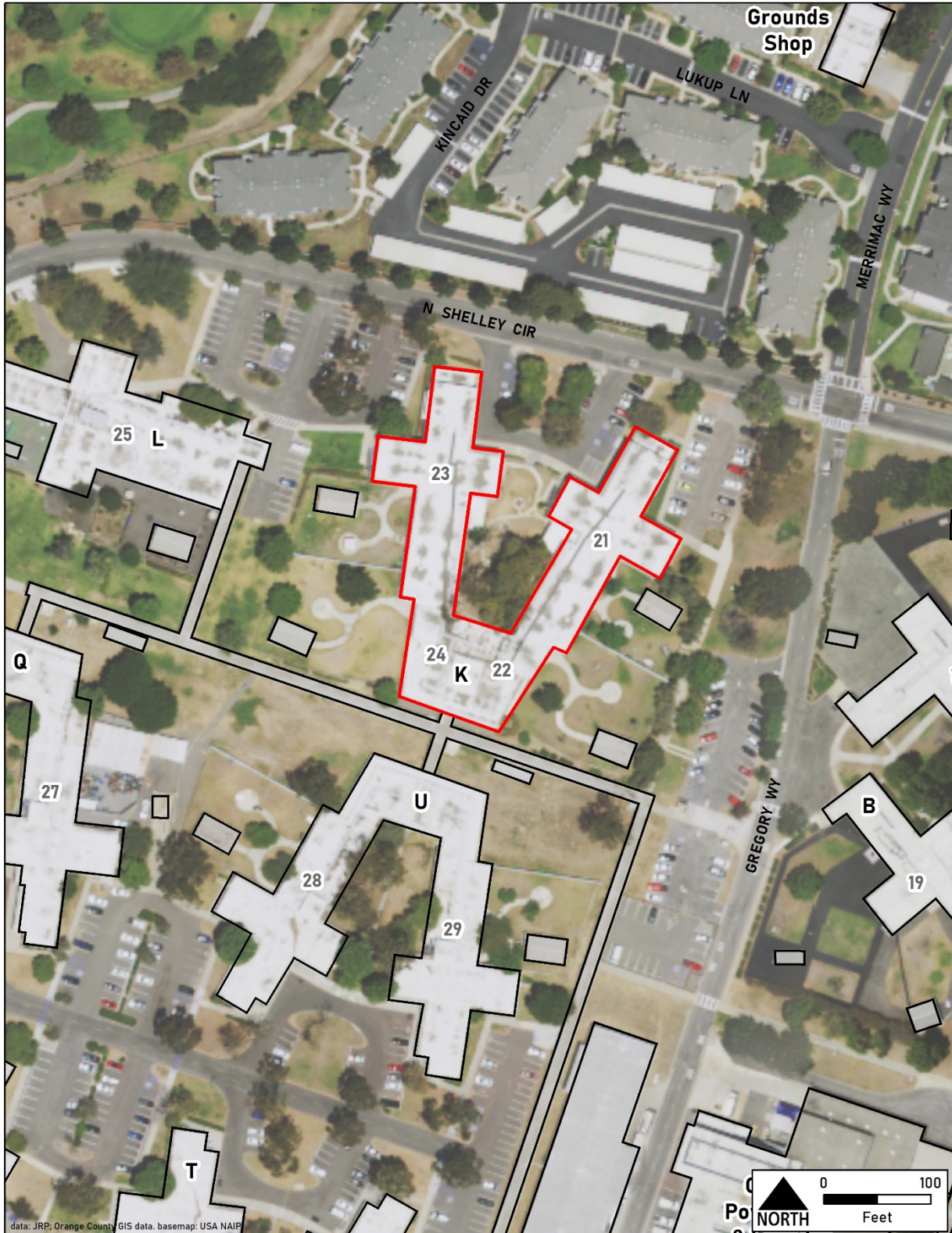
Page 9 of 10

\*Resource Name or # (Assigned by recorder) Residences 21-24 and 41-44

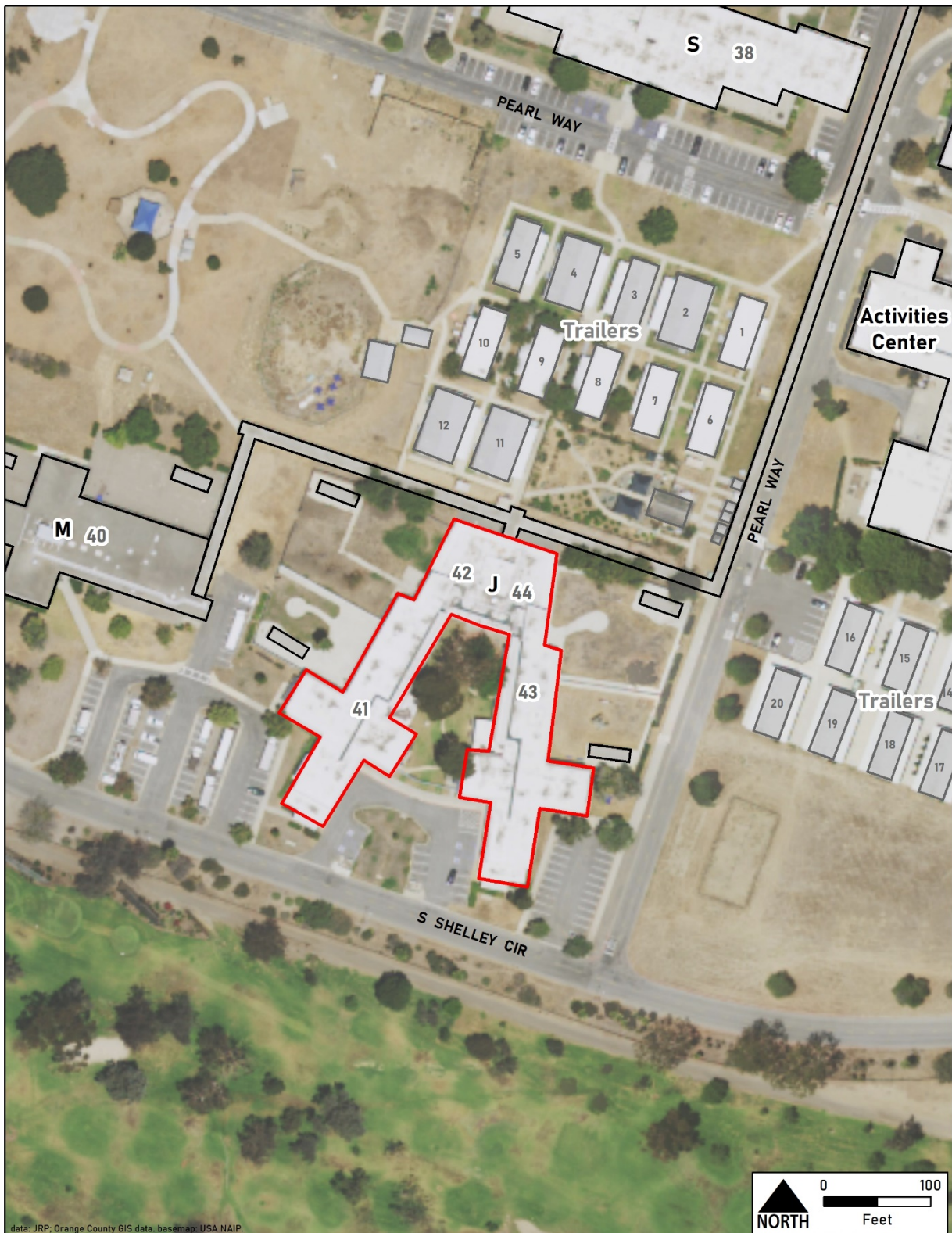
\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

### Sketch Maps:







State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 7

\*Resource Name or # (Assigned by recorder): Residences 25 and 40

**P1. Other Identifier:** Residence 25 (Building L) and Residence 40 (Building M)

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located at the north and south ends of the main complex, on the south side of North Shelly Circle and the north side of South Shelly Circle, at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records two virtually identical, 19,477-square-foot, single-story, International-style buildings, with the northernmost building housing Residence 25 (Building L) and the southernmost building housing Residence 40 (Building M) (**Photograph 1**). Both buildings feature irregular footprints and flat roofs with modern Sarnafil-membrane covering, metal coping, and wide eaves with concrete soffits, and have walls of site-cast exposed concrete. Both buildings are likewise surrounded by courtyards with manicured lawns, mature trees, and concrete walkways, with each featuring an adjacent asphalt-paved parking lot. Entrances are distributed at irregular intervals and consist of flush personnel doors with square glazing; the primary entrance is located in a deeply recessed alcove along the north side and features wood-frame multi-part transom and side lights (**Photograph 2**). Fenestration consists of multi-part, wood-frame, awning windows with concrete sills (**Photograph 3**).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Residence 25 (Building L); facing southwest, May 29, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1958 (California Department of Developmental Services)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_



**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 7

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Residences 25 and 40

B1. Historic Name: Security Ward L; Security Ward M

B2. Common Name: Residence 25 (Building L); Residence 40 (Building M)

B3. Original Use: Residential treatment ward B4. Present Use: Residential treatment ward

\*B5. Architectural Style: International

\*B6. Construction History: Built ca. 1958; Sarnafil-membrane roof sheathing added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Robert E. McKee

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Residence 25 and Residence 40 buildings appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these buildings are historical resources for the purposes of the California Environmental Quality Act (CEQA). The buildings are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

These buildings were designed and constructed as part of Fairview State Hospital, and they served continually as residences during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

**\*B12. References:**

California Department of Finance, *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; DDS, "Building Utilization Report and Recurring Maintenance Data: Fairview" (January 8, 1997), on file at DDS, Sacramento; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

**Sketch Map**

See Continuation Sheet

## B10. Significance (continued):

In 1956, \$826,050 was identified for planning and constructing two 130-patient capacity security ward buildings in the 1956-1957 Fiscal Year as part of the State Building Construction Program five-year plan. The buildings were designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. In April 1957, the general construction contract of \$2,224,000 for the construction of four wards total was awarded to Robert E. McKee of Los Angeles. Construction of Wards L and M was completed about 1958.<sup>1</sup>

Fairview State Hospital began receiving clients in January 1959 at a rate of about 100 per month for 16 months. High-risk and potentially violent female and male clients were divided between Security Wards L and M, respectively. In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized individualized developmental and habilitation programming.<sup>2</sup> By 1982, those clients with “maladaptive behavior patterns” were reassigned to Building J, with neither former security ward participating in the facilities client programing during that time.<sup>3</sup> Both buildings were retained for client day-use and office space through 1997. As of 2017, Building L was used as a Day Training Activity Center and Building M was vacant.<sup>4</sup>

### Evaluation

FDC Residence 25 (Building L) and Residence 40 (Building M) were completed about 1958 as an integral part of the expanded campus plan for Fairview State Hospital. The buildings served in continual use as client wards, hosting central functions associated with the Fairview facility’s role in providing care for people with developmental disabilities. As such, the buildings are significant under NRHP Criterion A and CRHR Criterion 1 as contributors to the Fairview State Hospital Historic District. While the buildings provided an important service to the complex as client ward buildings, this function alone does not rise to the level of historic significance, and the buildings are not individually eligible for listing under these criteria.

Buildings L and M are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with these buildings made demonstrably important contributions to history at the local, state, or national level.

Buildings L and M were designed as part of the expanded campus plan for Fairview State Hospital, and they were completed in about 1958 during the secondary phase of build out. The buildings are thus significant under NRHP Criterion C and CRHR Criterion 3 as contributors to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The buildings are not individually eligible under these criteria as the works of a master or as important examples of a type, period, or method of construction. The State Division of Architecture designed the buildings as components of a larger campus plan, rather than as stand-alone facilities. Independently, the buildings are modest examples of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design

<sup>1</sup> California Department of Finance, “Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program,” *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; “Contracts Awarded for State Hospital,” *Los Angeles Times* (April 7, 1957): 2; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento.

<sup>2</sup> “Fairview State Hospital Admits First Patients,” *Los Angeles Times* (January 6, 1959): 9; “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA.

<sup>3</sup> Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 23, on file at Fairview Developmental Center, Costa Mesa, California.

<sup>4</sup> DDS, “Building Utilization Report and Recurring Maintenance Data: Fairview” (January 8, 1997), on file at DDS, Sacramento; DDS, “Fairview Developmental Center BUM Report,” June 23, 2017, on file at DDS.

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\*Resource Name or # (Assigned by recorder) Residences 25 and 40

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and these buildings are not an important example of the type.

Buildings L and M are not significant as sources (or likely sources) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

Buildings L and M retain sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey their significance as district contributors. The buildings have been modified somewhat by the addition of Sarnafil-membrane roofing at an unknown date. These alterations have a minimal impact on the buildings' integrity of materials and design. The buildings retain strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the buildings include the elements that date to the district's period of significance: the buildings' location and orientation, their general setting, and their International-style architectural details including the buildings' massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

### Photographs (continued):



**Photograph 2:** Detail view of Residence 25 (Building L) main entrance; facing southwest, May 29, 2019.



Page 5 of 7

\*Resource Name or # (Assigned by recorder) Residences 25 and 40

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 3:** Detail view of windows along north side of Building L; facing south / southeast, May 29, 2019.

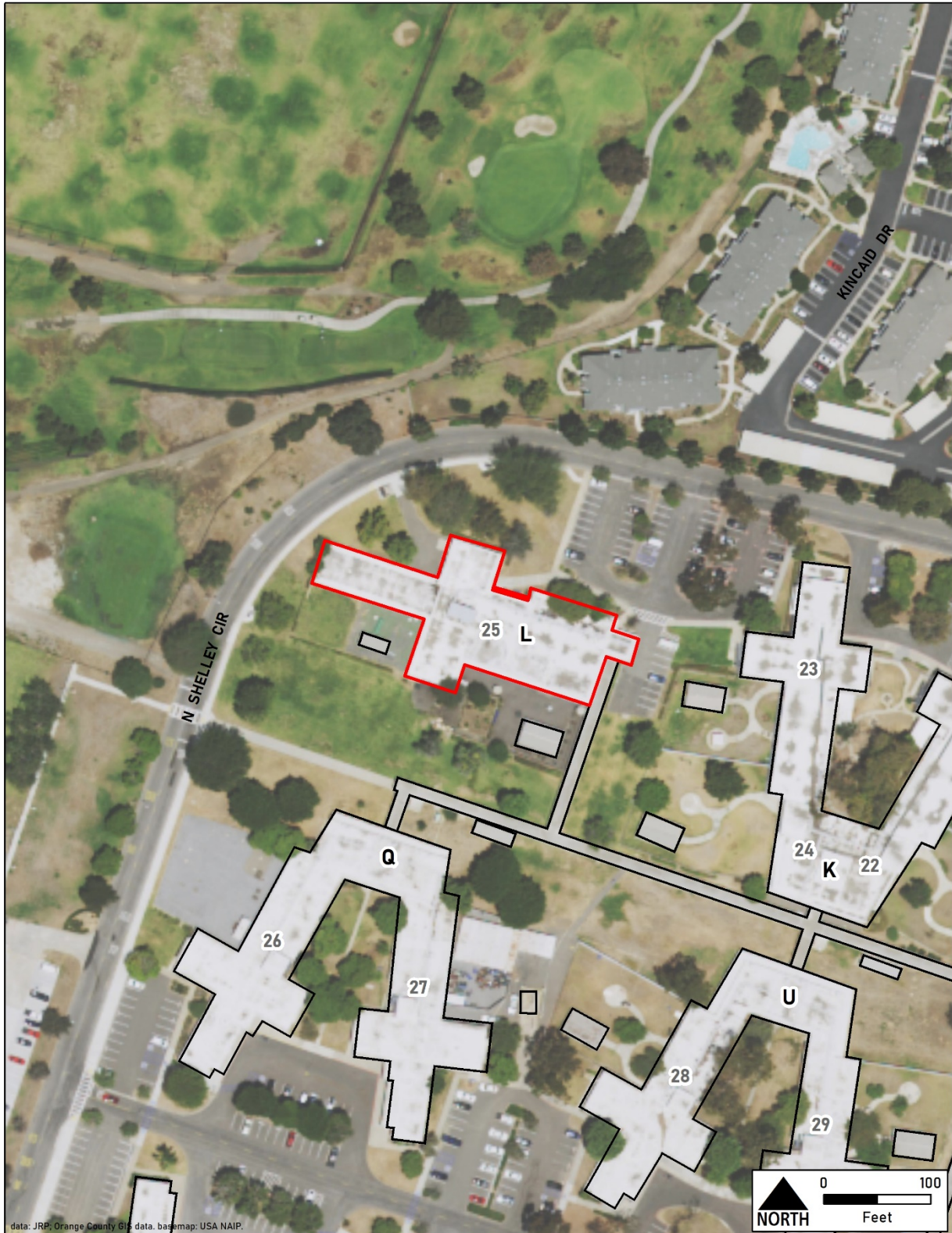
Page 6 of 7

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Residences 25 and 40

☒ Continuation ☐ Update

### Sketch Maps:











State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 8

\*Resource Name or # (Assigned by recorder): Residences 26-35

**P1. Other Identifier:** Residence 26 and 27 (Building Q), 28 and 29 (U), 30 and 31 (T), 32 and 33 (P), and 34 and 35 (O)

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W;     ¼ of Sec    ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone    ;     mE/     mN

e. Other Locational Data:

Located on the west side of the main complex north and south of Rosa Way at Fairview Developmental Center.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records five virtually identical, approximately 14,377-square-foot, single-story, International-style buildings, housing Residence 26-27 (Building Q), Residence 28-29 (Building U), Residence 30-31 (Building T), Residence 32-33 (Building P), and Residence 34-35 (Building O), clustered on either side of Rosa Way (**Photograph 1**). All five buildings feature V-shaped footprints, flat roofs with modern Sarnafil-membrane covering, metal coping, and both wide and flush eaves, with exposed site-cast concrete walls throughout the majority of the exterior and wood-slat cladding present along portions of the northern and southern ends (**Photograph 2**). The buildings are surrounded by courtyards with both asphalt-paved patio areas and manicured lawns with mature trees and concrete walkways, as well as asphalt-paved parking lots and adjacent roadways. Entrances are irregularly distributed along all buildings, and generally consist of original, flush, wood personnel doors, some with glazing, with doors to HVAC sections featuring square metal louvered vents (**Photographs 3 and 4**) (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Residence 32-33 (Building) P; facing south/southeast, May 29, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both

See **P6.** on Continuation Sheet.

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)

Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record

☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record

☐ Other (list) \_\_\_\_\_

DPR 523A (1/95)

\*Required Information

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 8

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Residences 26-35

B1. Historic Name: Building Q / Building U / Building T / Building P / Building O

B2. Common Name: Residence 26 and 27 / Residence 28 and 29 / Residence 30 and 31 / Residence 32 and 33 / Residence 34 and 35

B3. Original Use: Residential treatment ward B4. Present Use: Residential treatment ward

\*B5. Architectural Style: International

\*B6. Construction History: Buildings constructed various times between 1959 and 1963; Sarnafil-membrane roofing and glass-and-metal automatic doors added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture

b. Builder: Ten Construction Companies; and other(s)

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Residence 23-27, 28-29, 30-31, 32-33, and 34-35 buildings appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these buildings are historical resources for the purposes of the California Environmental Quality Act (CEQA). The buildings are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

**\*B12. References:**

Oakland Tribune, *State Awards 4 Hospital Pacts*, (March 27, 1962): 43; "Fairview State Hospital: The First Ten Years" (1969), 1, ff. Fairview Hospital 1990-0067-066.241, on file at Costa Mesa Historical Society, Costa Mesa, California; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

**Sketch Map**

See Continuation Sheet



### P3a. Description (continued):

The buildings likewise feature entrances outfitted with modern replacement double glass-and-metal doors (**Photograph 5**). Fenestration generally consists of recessed, multi-part, metal-frame casement windows, with ribbons extending along the longitudinal elevations.

Building interiors were not accessible at the time of recordation to respect client privacy.

### P6. Date Constructed/Age and Sources (continued):

Building Designation	Built Date	JRP Source(s)
Residence 26 and 27 (Building Q)	ca. 1963	"Fairview" [aerial photograph], August 27, 1961, ff. 2012-075, DDS, CSA; 1963 aerial photograph.
Residence 28 and 29 (Building U)	1959	Photo No. 1264, April 23, 1958, ff. 2012-075: Folder 1: Dept. of Developmental Services (DDS), Matted Photographs, California State Archives (CSA); FAS, Flight C-23578, Frame 4-507, 1:24,000, May 5, 1959, available at <a href="http://mil.library.ucsb.edu/ap_indexes/FrameFinder/">http://mil.library.ucsb.edu/ap_indexes/FrameFinder/</a> (UCSB; accessed May 2019).
Residence 30 and 31 (Building T)	ca. 1960	FAS, 1959, UCSB; FAS, Flight C-23870, Frame 341, 1:14,400, May 7, 1960, UCSB.
Residence 32 and 33 (Building P)	ca. 1962	"Fairview" [aerial photograph], August 27, 1961, ff. 2012-075, DDS, CSA; 1963 aerial photograph.
Residence 34 and 35 (Building O)	ca. 1963	"Fairview" [aerial photograph], August 27, 1961, ff. 2012-075, DDS, CSA; 1963 aerial photograph.

### B10. Significance (continued):

#### Historic Context

These buildings were designed and constructed as part of Fairview State Hospital, and they served continually as residences during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report.

Initially, eight "typical" 280-patient capacity ward buildings were scheduled for construction in the 1957-1958 and 1958-1959 Fiscal Years as part of the State Building Construction Program. In fact, site plans from 1957 even show as many as 13 proposed V-shaped wards sited throughout the complex, including the five buildings recorded on this form. However, in 1959 the State Legislature appropriated \$3,594,200 for five ward buildings in that year's Budget Act. The buildings were designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. As shown in **P6** above, construction of Buildings U and T was completed between 1959 and about 1960. In April 1962, a general construction contract of \$2,000,090 for five new ward buildings was awarded to The Ten Construction Companies of Long Beach, referring to Buildings P, O, and Q and Buildings S and S-1. Construction of Building P was complete about 1962, with Buildings O and Q completed about 1963.<sup>1</sup>

By 1962, Fairview State Hospital's inpatient population stood around 1,950, a figure that roughly matched the site's bed capacity. In 1964, with the completion of the building program described above, the rated bed capacity reached 2,622. In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized

<sup>1</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 103, 107; California Department of Public Works, Division of Architecture, "Fairview State Hospital: Two Ward Buildings 'J' & 'K' – Plot Plan," sheet 1 of 10, W.O. 3718-GC-12, January 25, 1957, File 19-G-4, California Department of General Services Plans Vault, West Sacramento; Cal. Stats. 1959, Reg. Sess. 1959, Ch. 1300, p. 3541; "State Awards 4 Hospital Pacts," *Oakland Tribune* (March 27, 1962): 43.

individualized developmental and habilitation programming. By 1982, Buildings T and U hosted the Physical and Social Development Program.<sup>2</sup> Patients in this program were described as “developmentally disabled male and female clients, 18 years of age or older, who walk unsteadily or not at all, have a diagnosed physical handicap, and whose priority needs are in the areas of life support, self-help and skills development and mobility skills development.” Program objectives focused on “maximizing independent living skills, especially self-help and mobility skills.”<sup>3</sup> These buildings remained occupied through 1997. As of 2017, Residence 28-29 (Building U), Residence 30-31 (Building T), and Residence 32-33 (Building P) were vacant, with the remaining residences and buildings hosting administrative offices, plant operations facilities, a Day Training Activity Center, and intermediate care program facilities.<sup>4</sup>

### Evaluation

FDC Residence 26-27 (Building Q), Residence 28-29 (Building U), Residence 30-31 (Building T), Residence 32-33 (Building P), and Residence 34-35 (Building O) were completed at various times between 1959 and 1963 as integral components of the expanded campus plan for Fairview State Hospital. The buildings served in continual use as client wards, hosting central functions associated with the Fairview facility’s role in providing care for people with developmental disabilities. As such, the buildings are significant under NRHP Criterion A and CRHR Criterion 1 as contributors to the Fairview State Hospital Historic District. While the buildings provided an important service to the complex as client ward buildings, this function alone does not rise to the level of historic significance, and the buildings are not individually eligible for listing under these criteria.

Buildings O, P, Q, T, and U are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with these buildings made demonstrably important contributions to history at the local, state, or national level.

Buildings O, P, Q, T, and U were designed as part of the expanded campus plan for Fairview State Hospital, and they were completed between 1959 and 1963 during the secondary and final phases of build out. The buildings are thus significant under NRHP Criterion C and CRHR Criterion 3 as contributors to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The buildings are not individually eligible under these criteria as the works of a master or as important examples of a type, period, or method of construction. The State Division of Architecture designed the buildings as components of a larger campus plan, rather than as stand-alone facilities. Independently, the buildings are modest examples of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and these buildings are not an important example of the type.

Buildings O, P, Q, T, and U are not significant as sources (or likely sources) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

Buildings O, P, Q, T, and U retain sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey their significance as district contributors. The buildings have been modified by the addition of Sarnafil-

<sup>2</sup> California Department of Mental Hygiene, 1963 *Progress Report*, 12, on file at Porterville Developmental Center Archives, Porterville, California; “Fairview State Hospital: The First Ten Years” (1969), 1, ff. Fairview Hospital 1990-0067-066.241, on file at Costa Mesa Historical Society, Costa Mesa, California; “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 8, on file at Fairview Developmental Center, Costa Mesa, California.

<sup>3</sup> “Fairview: Fact Sheet” (April 1, 1984), 3, ff. “Fairview Developmental Center,” Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: Department of Developmental Services (DDS) – Administration – Customer Support Section, CSA.

<sup>4</sup> DDS, “Building Utilization Report and Recurring Maintenance Data: Fairview” (January 8, 1997), on file at DDS, Sacramento; DDS, “Fairview Developmental Center BUM Report,” June 23, 2017, on file at DDS.

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\*Resource Name or # (Assigned by recorder) Residences 26-35

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

membrane roofing and glass-and-metal automatic doors at an unknown date. These alterations have a minimal impact on the buildings' integrity of materials and design. The buildings retain strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the buildings include the elements that date to the district's period of significance: the buildings' location and orientation, their general setting, and their International-style architectural details including the buildings' massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

### Photographs (continued):



**Photograph 2:** Southwest corner of Residence 30-31 (Building T), showing wood-slat cladding; facing east / northeast, May 29, 2019.



Page 6 of 8

\*Resource Name or # (Assigned by recorder) Residences 26-35

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 3:** Detail view of entrance to Residence 32-33 (Building P), showing double personnel doors with glazing; facing northeast, May 29, 2019.



**Photograph 4:** Detail view of entrance to the Building P HVAC section, showing personnel doors with square metal louvre vents; facing southwest, May 29, 2019.

Page 7 of 8

\*Resource Name or # (Assigned by recorder) Residences 26-35

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



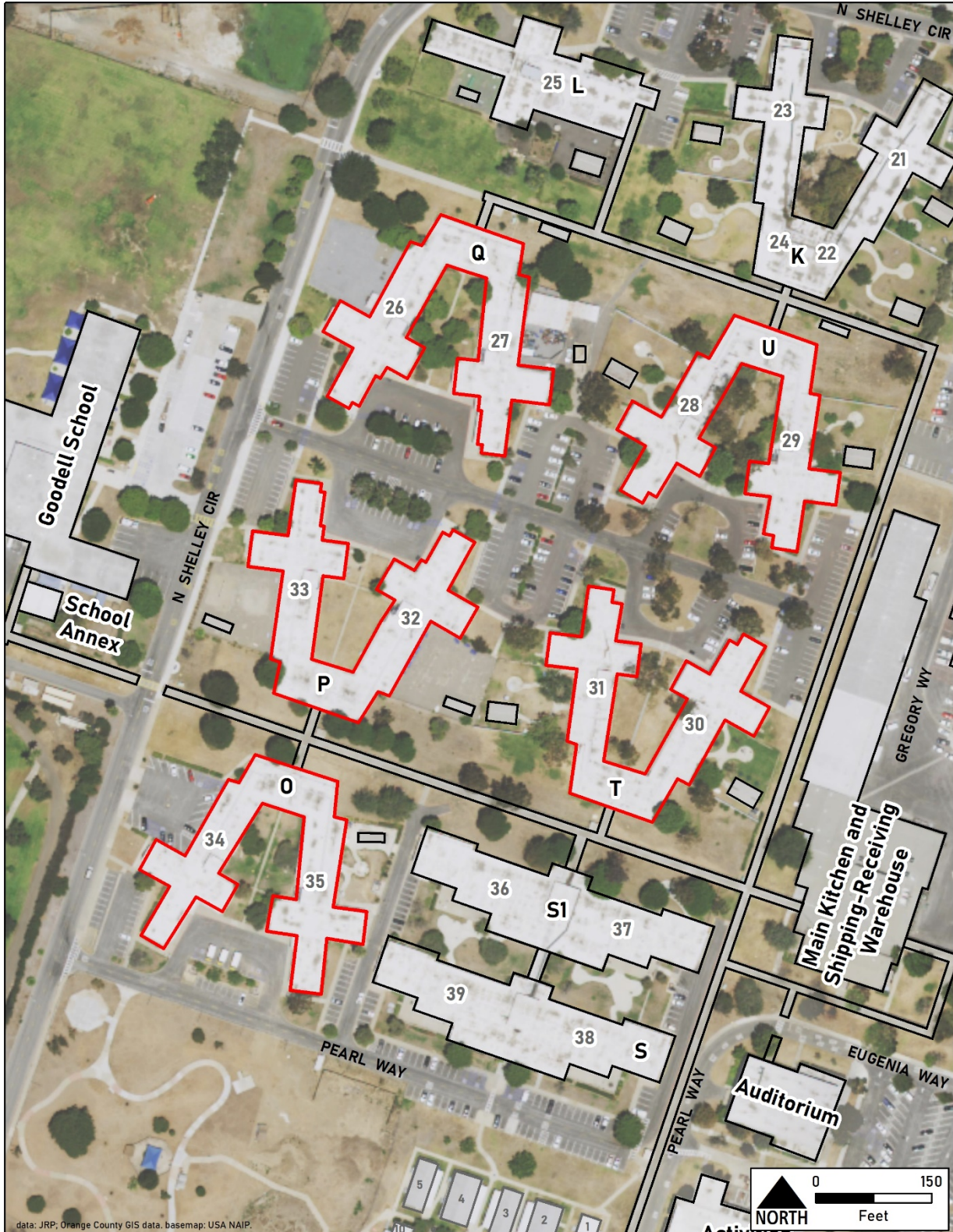
**Photograph 5:** Detail view of north entrance to Building P, showing replacement modern glass-and-metal personnel doors; facing west / northwest, May 29, 2019.



**Photograph 6:** Interior courtyard of Residence 28-29 (Building U); facing northeast, May 29, 2019.



**Sketch Map:**





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 5

\*Resource Name or # (Assigned by recorder): Residences 36-39

**P1. Other Identifier:** Residences 36 and 37 (Building S1) and Residences 38 and 39 (Building S)

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1 ¼ of Sec       ; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone       ;        mE/        mN

e. Other Locational Data:

Located in the southwest quadrant of the Fairview Developmental Center (FDC) complex, on the west side of Pearl Way.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the 51,780-square-foot, single-story, International-style, two-part building that houses Residences 36-37 (Building S1) to the north and Residences 38-39 (Building S) to the south (**Photograph 1**). With both building sections possessing slightly irregular rectangular footprints, the parallel buildings are conjoined by a narrow central corridor and collectively comprise a generally H-shaped footprint. The building is surrounded by asphalt-paved roadways and courtyards featuring manicured grass lawns with concrete walkways and mature trees. Each building section features a flat roof with replacement Sarnafil-membrane roof covering, metal coping, and wide, open eaves along the north and south sides and flush eaves at the east and west ends. The building's exterior walls are clad with stucco (see Continuation Sheet).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1. Southern entrance to Building S; facing northeast, May 29, 2019.**

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1964 (Pacific Air Industries)

\*P7. Owner and Address:  
California Department of  
Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 5

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Residence 36-39

B1. Historic Name: Buildings S1 and S

B2. Common Name: Residence 36-37 (Building S-1) and Residence 38-39 (Building S)

B3. Original Use: Residential treatment ward B4. Present Use: Residential treatment ward

\*B5. Architectural Style: International

\*B6. Construction History: Built ca. 1964; Sarnafil-membrane roofing, floor-to-ceiling wood and metal louvered shades, and glass-and-metal automatic doors added at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Ten Construction Companies

\*B10. Significance: Theme Treatment of Developmental Disability Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Residence 36-39 building appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this building is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The building is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The building has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This building was designed and constructed as part of Fairview State Hospital, and it served continually as a residence during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (See Continuation Sheet.)

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

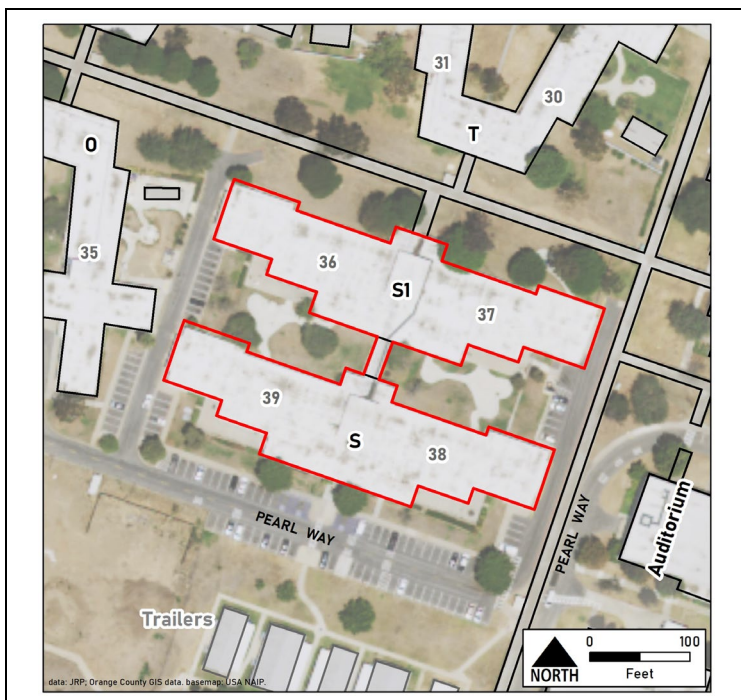
Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 8, on file at Fairview Developmental Center, Costa Mesa, California; Fairview Developmental Center, *Fairview: Fact Sheet* (April 1, 1984), 3, Box 9 of 21: Subject Files, 1890-2004; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



### **P3a. Description (continued):**

Both building elements feature floor-to-ceiling wood or metal louvered shades added to the east and west ends at unknown dates (**Photograph 2**). Fenestration consists of paired, metal-frame casement windows topped by awning lights, with aluminum louvered shades extending from the roofline and extending along the north sides. The two-part building's primary entrance is located in the center of Building S's south façade, which features modern glass-and-metal, double automatic doors (**Photograph 1**). Additional personnel entrances are distributed along both buildings, consisting of flush metal doors, with some featuring single vertical lights. The narrow corridor connecting the two building sections is a concrete construction and features a ribbon of recessed, metal-frame, paired casement windows with concrete sills (**Photograph 3**). Roof access is permitted via modern metal staircase located within a chain-link enclosure on the north side of Building S. Both building sections' roofs have corrugated-metal-clad, square utility rooms and a network of metal piping.

JRP did not have access to the buildings' interior spaces because they were occupied by clients at the time of recordation.

### **B10. Significance (continued):**

In April 1962, a general construction contract of \$2,000,090 for five new ward buildings was awarded to The Ten Construction Companies of Long Beach, referring to Buildings S and S-1 and Buildings P, O, and Q. The buildings were designed in the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. Construction of Buildings S and S-1 was completed about 1964.<sup>1</sup>

By 1962, Fairview State Hospital's inpatient population stood around 1,950, a figure that roughly matched the site's bed capacity. By 1964, with the completion of the building program described above, the rated bed capacity reached 2,622. In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized individualized developmental and habilitation programming. By 1982, Buildings S and S-1 hosted the Social Development Program.<sup>2</sup> Patients in this program were described as "ambulatory, and present developmental deficits in sensory motor functioning, self-help skills, communication skills, education, socialization, recreation, behavior and environmental awareness." Program objectives were "to reduce these deficits and provide care, protection, independence, and growth development in a normalized, least restrictive setting."<sup>3</sup> These buildings remained occupied as 24-hour Consumer Residences as of 2017.<sup>4</sup>

#### Evaluation

FDC Residence 36-39, consisting of adjoined Buildings S and S-1, was completed about 1964 as an integral part of the expanded campus plan for Fairview State Hospital. The building served in continual use as a client ward, hosting central functions associated with the Fairview facility's role in providing care for people with developmental disabilities. As such, the building is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the building provided an important service to the complex as a client ward building, this function alone does not rise to the level of historic significance, and the building is not individually eligible for listing under these criteria.

The building is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital

<sup>1</sup> "State Awards 4 Hospital Pacts," *Oakland Tribune* (March 27, 1962): 43.

<sup>2</sup> California Department of Mental Hygiene, 1963 *Progress Report*, 12, on file at Porterville Developmental Center Archives, Porterville, California; "Fairview State Hospital: The First Ten Years" (1969), 1, ff. Fairview Hospital 1990-0067-066.241, on file at Costa Mesa Historical Society, Costa Mesa, California; "Fairview Developmental Center: Historical Data," in *The Developmental Center System: A Collection of Histories*, by DDS, Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. "Dept. of Developmental Services – Developmental Center History," Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA; Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 8, on file at Fairview Developmental Center, Costa Mesa, California.

<sup>3</sup> "Fairview: Fact Sheet" (April 1, 1984), 3, ff. "Fairview Developmental Center," Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: Department of Developmental Services (DDS) – Administration – Customer Support Section, CSA.

<sup>4</sup> DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS.



superintendent, staff member, patient, or other individual directly associated with this building made demonstrably important contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

The building was designed as part of the expanded campus plan for Fairview State Hospital, and it was completed in about 1964 during the final phase of build out. The building is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The building is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The State Division of Architecture designed the building as a component of a larger campus plan, rather than as a stand-alone facility. Independently, the building is a modest example of institutional use of the International style, with angular massing, taut surfaces, long rows of metal-sash windows, and modern interiors. The design and construction prioritized economy, permanence, and ease of maintenance over architectural flourishes. Similar type building designs may be found at other institutions and this building is not an important example of the type.

This building is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The adjoined Building S and S-1 retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey their significance as a district contributor. The buildings have been modified somewhat by the addition of modern glass-and-metal automatic doors, Sarnafil-membrane roofing, and floor-to-ceiling louvered shades at unknown dates. These alterations have a minimal impact on the buildings' integrity of materials and design. The buildings retain strong integrity of location, setting, workmanship, design, feeling, and association.

Character-defining features of the building include the elements that date to the district's period of significance: the building's location and orientation, its general setting, and its International-style architectural details including the building's conjoined two-part massing; flat roof; reinforced concrete construction; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; original flooring; and any remaining doors that date before 1969.

Page 5 of 5

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Residence 36-39

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Southwest corner of Building S; facing northeast, May 29, 2019.



**Photograph 3:** Connecting corridor between Building S (left) and Building S1 (right); facing northwest, May 29, 2019.





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 6Z

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 6

\*Resource Name or # (Assigned by recorder): School Annexes

**P1. Other Identifier:** School Annex Buildings

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; \_\_\_\_ ¼ of Sec \_\_\_\_; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_; \_\_\_\_ mE/ \_\_\_\_ mN

e. Other Locational Data:

Located along the center dividing line of the Fairview Developmental Center (FDC) complex, with one building located on the north side of Pearl Way, and the other building located on the west side of North Shelley Circle.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the two School Annex buildings, which are located at different locations in the Fairview Developmental Center (FDC) complex. Both buildings are portable modular buildings situated on poured concrete platforms (**Photograph 1** and **Photograph 2**). The 1,248-square-foot building near North Shelly Circle has a nearly square footprint, a flat roof with narrow open eaves, and vertical plywood siding. Consisting of flush metal personnel doors with single lights, the entrances are above grade and accessible by concrete ramps with metal handrails. Windows consist of metal-frame horizontal sliders. The 2,238-square-foot building near Pearl Way has a T-shaped footprint, a flat roof with Sarnafil-membrane covering and a wide overhang along the east façade, and T1-11 vertical-groove plywood siding. All entrances are accessible via concrete ramp, and consist of flush metal personnel doors. Fenestration consists of metal-frame window wall panels.

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☐ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** School Annex near Pearl Way; facing southwest, May 28, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both  
ca. 1971-1974 (aerial photography)

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

Page 2 of 6

\*NRHP Status Code 6Z

\*Resource Name or # (Assigned by recorder) School Annexes

B1. Historic Name: \_\_\_\_\_

B2. Common Name: School Annex Buildings

B3. Original Use: Educational B4. Present Use: Educational

\*B5. Architectural Style: Utilitarian

\*B6. Construction History: Built circa 1970-1974; no known alterations.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: Unknown b. Builder: Unknown

\*B10. Significance: Theme n/a Area n/a  
Period of Significance n/a Property Type n/a Applicable Criteria n/a

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

These buildings do not appear to meet the criteria for listing in the National Register of Historic Places (NRHP) or the California Register of Historical Resources (CRHR), nor are they an historical resource for the purposes of the California Environmental Quality Act (CEQA). These buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

#### Historic Context

These portable buildings were built as part of the Fairview State Hospital in the 1970s, during the period of deinstitutionalization, which saw a decline in population. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

#### \*B12. References:

Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 24, on file at Fairview Developmental Center, Costa Mesa, California; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

#### Sketch Map

See Continuation Sheet

## **B10. Significance (continued):**

The two portable School Annex buildings were added to the Fairview Developmental Center (FDC) complex in the 1970s. The North Shelly Circle building was added about 1971, with the Pearl Way building added circa 1974. These buildings were presumably added to Fairview to aid in the expansion of its education program, which grew to include special education services for adult clients, the Compensatory Education Project for clients under the age of 21, the Deaf / Blind Project for clients with multiple disabilities, and a wide range of vocational programs. As of 2017, the buildings continued to function as educational facilities.<sup>1</sup>

### Evaluation

The School Annex buildings are not eligible for listing under NRHP Criterion A or CRHR Criterion 1, either individually or as a contributor to the Fairview State Hospital Historic District. Constructed circa 1971 and 1974, these buildings were added to the campus after the district's period of significance (1953-1969). Nothing about these particular buildings suggest that they played any specifically significant role in expanding care for people with developmental disabilities. Rather, these buildings were built to supplement existing educational facilities and thus do not meet eligibility criteria for individual listing.

The buildings documented on this form are not significant for associations with the lives of persons important to history and are not individually or collectively eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, client, or other individual directly associated with these buildings made demonstrably important contributions to history at the local, state, or national level.

Under NRHP Criterion C or CRHR Criterion 3, these buildings are not individually significant as important examples of a type, period, or method of construction, nor are they the work of a master. Architecturally, these buildings are modest examples of mid-twentieth-century portable educational facilities, with their basic wood-frame construction with flat roofing and vertical plywood siding. The buildings' overall design is largely functional and temporary, which is in line with the tenets of the architectural style. As these buildings are typical examples of buildings constructed at other state institutions and hospitals, they are not significant with respect to its style or hospital design under NRHP Criterion C or CRHR Criterion 3.

These buildings are also not significant as sources (or likely sources) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

These buildings do not appear to have been altered and thus retain their integrity of design, materials, workmanship, setting, location, association, and feeling to their original construction. However, they lack significance under all criteria are not eligible for listing in the NRHP or CRHR.

<sup>1</sup> [oblique photograph], "Costa Mesa Golf Course – aerial/looking NE Fairview State Hospital upper right," No. P00649, August 24, 1970, Album P00601 – P00800, from the Collections of the Costa Mesa Historical Society; Aerial Map Industries (AMI), Flight AMI-OC-72, Frame 6011, 1:36,000, January 5 – April 20, 1972, available at [http://mil.library.ucsb.edu/ap\\_indexes/](http://mil.library.ucsb.edu/ap_indexes/) (UCSB; accessed May 2019); Teledyne Geotronics, Flight TG-7400, Frame 9-31, 1:24,000, December 9, 1974 (UCSB); AMI, Flight AMI-OC-81, Frame 11058, 1:36,000, March 15 – April 5, 1981 (UCSB); Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 24, on file at Fairview Developmental Center, Costa Mesa, California; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS.



Page 4 of 6

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

\*Resource Name or # (Assigned by recorder) School Annexes

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** School Annex building near North Shelly Circle; facing west / southwest, May 29, 2019.

Page 5 of 6

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

\*Resource Name or # (Assigned by recorder) School Annexes

☒ Continuation ☐ Update

### Sketch Maps:









State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 8

\*Resource Name or # (Assigned by recorder): Shade Structures

**P1. Other Identifier:** Shade Structures

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1/4 of Sec \_\_\_\_\_; S.B. B.M.

c. Address 2501 Harbor Boulevard City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Shade structures are ubiquitous throughout the Fairview Developmental Center (FDC) complex, located in virtually every residential courtyard area.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the numerous shade structures distributed throughout the Fairview Developmental (FDC) complex, which are located in virtually every courtyard or parking lot adjacent to the residential buildings (see **Sketch Map** on Continuation Sheet). The earliest of these structures was added to the complex circa 1955. After this point, a given shade structure was typically constructed at the same time as the courtyard where it is located. The structures are fairly uniform, comprising either a shed-roof or gable-roof, metal-frame canopy cover with corrugated-metal roofing supported by three, four, six, or eight steel wide flange posts (**Photographs 1 through 4**). Modern era, timber encasements have been added to the steel support posts and roofing elements of some of these structures, with metal-frame, fiberglass benches and tables attached to others (**Photograph 2, Photograph 5, and P6**).

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☐ Building ☒ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1.** Shade structure located in parking lot in northeast corner of Building B; facing northeast, May 28, 2019.

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
ca. 1955-1964 (Aerial photography)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28-29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 8

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Shade Structures

B1. Historic Name: \_\_\_\_\_

B2. Common Name: \_\_\_\_\_

B3. Original Use: Shade structure B4. Present Use: Shade structure

\*B5. Architectural Style: Utilitarian

\*B6. Construction History: Built at various times between circa 1955 and 1964 with construction of corresponding ward building; fiberglass benches and wood encasements added to posts and roof of some structures at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The shade structures appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these structures are historical resources for the purposes of the California Environmental Quality Act (CEQA). The structures are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The structures have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

These structures were designed and constructed as part of Fairview State Hospital, and they served continually as exterior components of the residential buildings during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

“Fairview State Hospital: Acute Infirm Wards – Plot Plan Layout,” sheet R-1 of 6, W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services Plans Vault, West Sacramento; Fairchild Aerial Surveys, Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available at UCSB, (accessed June 2019); also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)

**Sketch Map**

See Continuation Sheet

Page 3 of 8

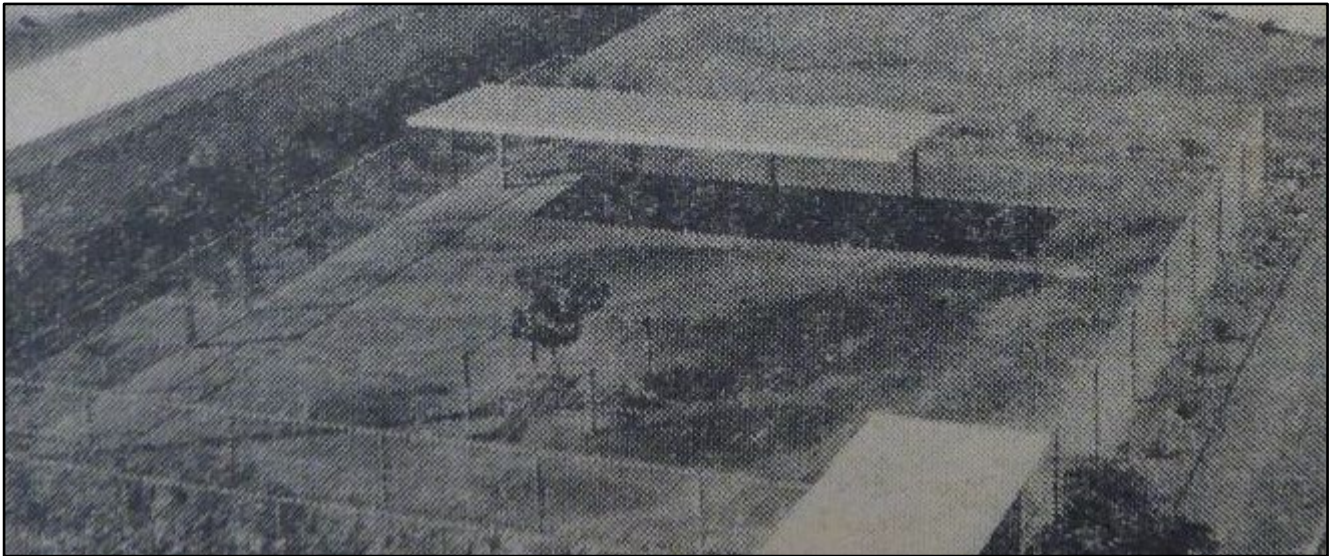
\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

\*Resource Name or # (Assigned by recorder) Shade Structures

☒ Continuation ☐ Update

## B10. Significance (continued):

The various types of shade structures located throughout the Fairview Developmental Center (FDC) complex were generally built as a component of the landscape following the construction of the corresponding ward building. The exception to this general rule were those shelters associated with the X-shaped Ward #1 building (Residence 17-20) (**Figure 1**). While the building was constructed about 1954, the shelters were added a short time later. Essentially utilitarian, the shade structures nonetheless incorporated International-style elements in keeping with the campus's overall modern aesthetic, such as the pronounced horizontal emphasis.<sup>1</sup>



**Figure 1:** ca. 1961 photograph of Ward # 1 courtyard, with four-post, shed-roof shade structure in foreground. Note the no-longer-extant chain-link fencing enclosing the courtyard (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Globe-Herald and Pilot: Fairview Hospital Special Edition*, May 4, 1961, 4).

### Evaluation

The FDC shade structures were constructed on an individual basis between circa 1955 and 1964, corresponding to the built dates of the FDC client wards. The structures have been in continual use since.

The FDC shade structures were largely completed by about 1958 as a part of the original and expanded campus plan for Fairview State Hospital. The structures supported Fairview's primary mission of providing care for people with developmental disabilities. As such, the shade structures are significant under NRHP Criterion A and CRHR Criterion 1 as contributors to the Fairview State Hospital Historic District. While the structures provided important client services to the hospital, these functions alone do not rise to the level of historic significance, and the structures are not individually eligible for listing under these criteria.

The shade structures are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any

<sup>1</sup> United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA, Sacramento; California Department of Public Works, Division of Architecture, "Fairview State Hospital: Hospital-Administration and Acute Infirm Wards – Plot Plan Layout," sheet R-1 of 6, W.O. 2428 GC, July 27, 1956, File 19-G-7, California Department of General Services Plans Vault, West Sacramento; Fairchild Aerial Surveys, Flight C-21960, Frame 21960-9 (8-32), 1:14,400, September 4, 1955, flown for Orange County Participants, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (UCSB) (accessed June 2019);



Page 4 of 8

\*Resource Name or # (Assigned by recorder) Shade Structures

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update

hospital superintendent, staff member, patient, or other individual directly associated with these structures made demonstrably important contributions to history at the local, state, or national level.

The shade structures were designed as part of the expanded campus plan for Fairview State Hospital, and they were generally completed about around the same times as their corresponding client ward units during second and final phases of development. The shade structures are essentially utilitarian in design and incorporated a strongly horizontal emphasis in keeping with the campus's overall International-style aesthetic. The shade structures are thus significant under NRHP Criterion C and CRHR Criterion 3 as contributors to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The structures are not individually eligible under these criteria as the works of a master or as important examples of a type, period, or method of construction. The State Division of Architecture designed the structures as components of a larger campus plan, rather than as a stand-alone structure. Independently, the shade structure are unexceptional examples of institutional use of utilitarian infrastructure with International-style elements. The design and construction prioritized economy, efficiency, and ease of maintenance over architectural flourishes. Similar type designs may be found at other institutions and these structures are not important examples of the type.

The shade structures are not significant as sources (or likely sources) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The shade structures retain sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey their significance as district contributors. The most common alteration to the structures has been the addition of wood encasements along the support posts and roofs to several structures. Despite these alterations, the shade structures retain generally good integrity of location, setting, design, materials, workmanship, feeling, and association.

Character-defining features of the shade structures include the elements that date to the district's period of significance: the location and orientation, their general setting, and their utilitarian and International-style architectural details including their metal-framing, corrugated metal roofing, and horizontal emphasis.

Page 5 of 8

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

\*Resource Name or # (Assigned by recorder) Shade Structures

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Shade structure with four support posts and fiberglass bench and table, located in the east courtyard of Building P; facing southwest, May 28, 2019.



**Photograph 3:** Shade structure with six support posts located in courtyard in northeast corner of Building B; facing southeast, May 28, 2019.



Page 6 of 8

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

\*Resource Name or # (Assigned by recorder) Shade Structures

☒ Continuation ☐ Update



**Photograph 4:** Shade structure with eight support posts with added wood encasements, located in southwest courtyard of Building F; facing northwest, May 28, 2019.



**Photograph 5:** Shade structure with eight support posts with added wood encasements and added fiberglass benches, located in the northwest courtyard of Building K; facing northwest, May 28, 2019.



Page 7 of 8

\*Resource Name or # (Assigned by recorder) Shade Structures

\*Recorded by T. Webb & S. Skow \*Date May 28-29, 2019

☒ Continuation ☐ Update



**Photograph 6:** Shade structure with three support posts with added wood encasement along roofing and three added fiberglass benches, located in southwest courtyard of Building B; facing northeast, May 29, 2019.

**Sketch Map:**



Shade structures outlined in red.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 6

\*Resource Name or # (Assigned by recorder): Staff Housing Units #3, 4, 5, and 6

P1. Other Identifier: \_\_\_\_\_

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; \_\_\_\_ ¼ of Sec \_\_\_\_; S.B. B.M.

c. Address 3, 4, 5, and 6 Mark Lane City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_; \_\_\_\_ mE/ \_\_\_\_ mN

e. Other Locational Data:

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

The four single-family residences known as Staff Housing Units # 3, 4, 5, and 6 at Fairview Development Center (FDC) are located along Mark Lane just east of the main Harbor Boulevard entrance to the complex (**Photograph 1**). These buildings are currently managed by a private company under a lease agreement with the state but are part of the historic hospital campus. Addressed north-south as 3 - 6 Mark Lane, each residential property is landscaped with lawns, mature trees and shrubs, and concrete driveways. Vinyl fencing encloses the yards of Units #3 and #4 and partially separates the yards of Units #5 and #6 (**Photograph 2**). Constructed in 1958, the four 1,786-square-foot, Ranch-style houses are nearly identical in design, construction, and materials. All generally have a rectangular footprint; concrete perimeter foundations; façades primarily clad in board-and-batten wood siding with shiplap at gable ends; stucco on secondary façades; and low-pitched, cross-gable roofs with replacement composition shingles, projecting open eaves, shaped bargeboards, and modern metal gutters and downspouts (**Photograph 3**) (see Continuation Sheet).

\*P3b. Resource Attributes: (HP2) Single Family Property; (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1.** View of Staff Housing from the intersection of Mark Lane and Fair Drive; facing northeast, May 29, 2019

\*P6. Date Constructed/Age and Sources:  
☒ Historic ☐ Prehistoric ☐ Both  
1958 (Department of Developmental Services / Department of Public Works, Division of Architecture)

\*P7. Owner and Address:  
California Department of Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_



**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 6

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Staff Housing Units #3, 4, 5, and 6

B1. Historic Name: Staff Housing Units #3, 4, 5, and 6

B2. Common Name: Staff Housing Units #3, 4, 5, and 6

B3. Original Use: Staff housing B4. Present Use: Staff housing

\*B5. Architectural Style: Ranch

\*B6. Construction History: Built in 1958; concrete ramps and wood balustrade added to Units #4 and #5, modern garage door added to Unit #4, and modern screen doors installed on Units #3 and #6, and replacement roofing to all residences likely in or after the late 1990s; wood flower boxes added to Unit #6 at unknown date; vinyl fencing likely added in the 2010s.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Unknown

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1969 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Staff Housing Units appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these buildings are historical resources for the purposes of the California Environmental Quality Act (CEQA). The buildings are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

These buildings were designed and constructed as part of Fairview State Hospital, and they served continually as staff housing during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

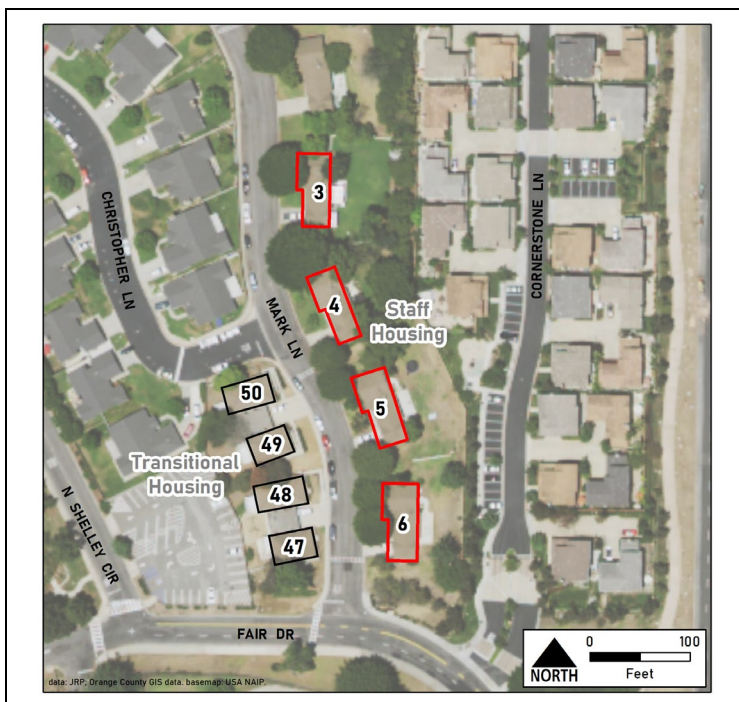
California Department of Public Works, *Fairview State Hospital: Employees Housing*, sheet R-2 of 2, W.O. 4007-GD-49, 1958, File 19-G-17, California Department of General Services Plans Vault, West Sacramento; Kenneth Jackson, *Crabgrass Frontier: The Suburbanization of the United States* (New York: Oxford University Press, 1985), 240; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



### **P3a. Description (continued):**

Windows consist of original aluminum-frame sliding sashes in varying sizes with wood trim. A metal-frame sliding window was added to the south side of Unit #3 at an unknown date. Inoperable wood shutters adorn most of the windows on the main façades. All main entrances are sheltered beneath pent roofs supported by simple square posts decorated by shaped brackets. The entrances are accessed either by original concrete walkways as found on Unit #3 and 6, or concrete ramps with metal handrails (Unit #4 and 5) that lead from driveways. The ramps were likely added in the late 1990s, likely at the same time that simple wood balustrades were added to the concrete porches of these residences. All doors are original with lower wood panels with nine upper lights and a single full-height sidelight of obscured glass. The door of Unit #3 includes a modern metal security door, while Unit #6 has a modern wood-frame screen door. Decorative wood flower boxes were also added beneath some façade windows of Unit #6 at an unknown date.

Each residence includes an interior brick chimney, decorative wood dovescotes at one gable end, and an attached one-car garage. Original wood tilt-up garage doors are found on Unit #3, 5, and 6 while a modern paneled roll-up garage door was added to Unit #4. All residences have concrete backyard patios; only Unit #3 includes a modern wood-frame awning covered by fiberglass panels. Building interiors were not accessible at time of recordation.

### **B10. Significance (continued):**

In 1956, \$112,500 was identified for planning and construction of six residences for the superintendent and five staff members in Fiscal Year 1956-1957 as part of the State Building Construction Program five-year plan. An additional \$250,000 was planned for more housing for single employees the following Fiscal Year. Construction of five 1,786-square-foot houses, one 2,200-square-foot superintendent's residence, and a construction service road, present-day Mark Lane, was complete in 1958, and the road was paved by 1960 (Figure 1).<sup>1</sup>

The California Division of Architecture drafted plans for five identical houses and one larger but similar plan for the superintendent's residence in the Ranch style. Characterized by elongated, linear floor plans that tend to maximize the primary façade along the parcel frontage, Ranch-style houses first emerged in the 1930s during the post-Bungalow phase of residential architecture in California. The style became especially popular in the first two decades following World War II, as the sprawling houses perfectly fit the expansive tendencies of the postwar suburban landscape. The smaller postwar houses were deemed inadequate as young families grew in size and prospered in the postwar economic boom, and developers responded with larger, more expansive houses on bigger lots. A typical Ranch-style suburban house's features include elongated, asymmetrical one-story plans with low-pitched hip, cross-gable, or side-gable roof forms. Eaves are usually wide and create an overhanging shelter for a walkway along the sides of the house. A recessed entry is also common, as are large picture windows on the main façade. Sliding metal-frame windows are most common. Siding can be wood, brick, stucco, or a combination. Garages are usually attached. Most Ranch houses were mass-produced in postwar housing tracts and were unassuming in both size and design.<sup>2</sup>

<sup>1</sup> California Department of Finance, "Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program," *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services (DDS), California State Archives, Sacramento; California Department of Public Works, Division of Architecture, "Fairview State Hospital: Employees Housing – Ground Improvements," sheet R-2 of 2, W.O. 4007-GD-49, September 12, 1958, File 19-G-17, California Department of General Services Plans Vault, West Sacramento; Fairchild Aerial Surveys, Flight C-23870, Frame 341, 1:14,400, May 7, 1960, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (accessed July 2019).

<sup>2</sup> David Gebhard, et al, *Architecture in San Francisco and Northern California* (Salt Lake City, Utah: Gibbs Smith Publisher, 1985), 579; US Department of the Interior (USDI), National Park Service (NPS), "Historic Residential Suburbs: Guidelines for Evaluation and Documentation for the National Register of Historic Places," *National Register Bulletin* (USDI, NPS, 2002), 66; Kenneth Jackson, *Crabgrass Frontier: The Suburbanization of the United States* (New York: Oxford University Press, 1985), 240; Virginia McAlester, *A Field Guide to American Houses: The Definitive Guide to Identifying and Understanding America's Domestic Architecture* (New York: Alfred A. Knopf, 2015), 596-611; Cliff May, *Western Ranch Houses, 1958* (Santa Monica, California: Hennessey and Ingalls, 1997), 13-  
**DPR 523L (1/95)**



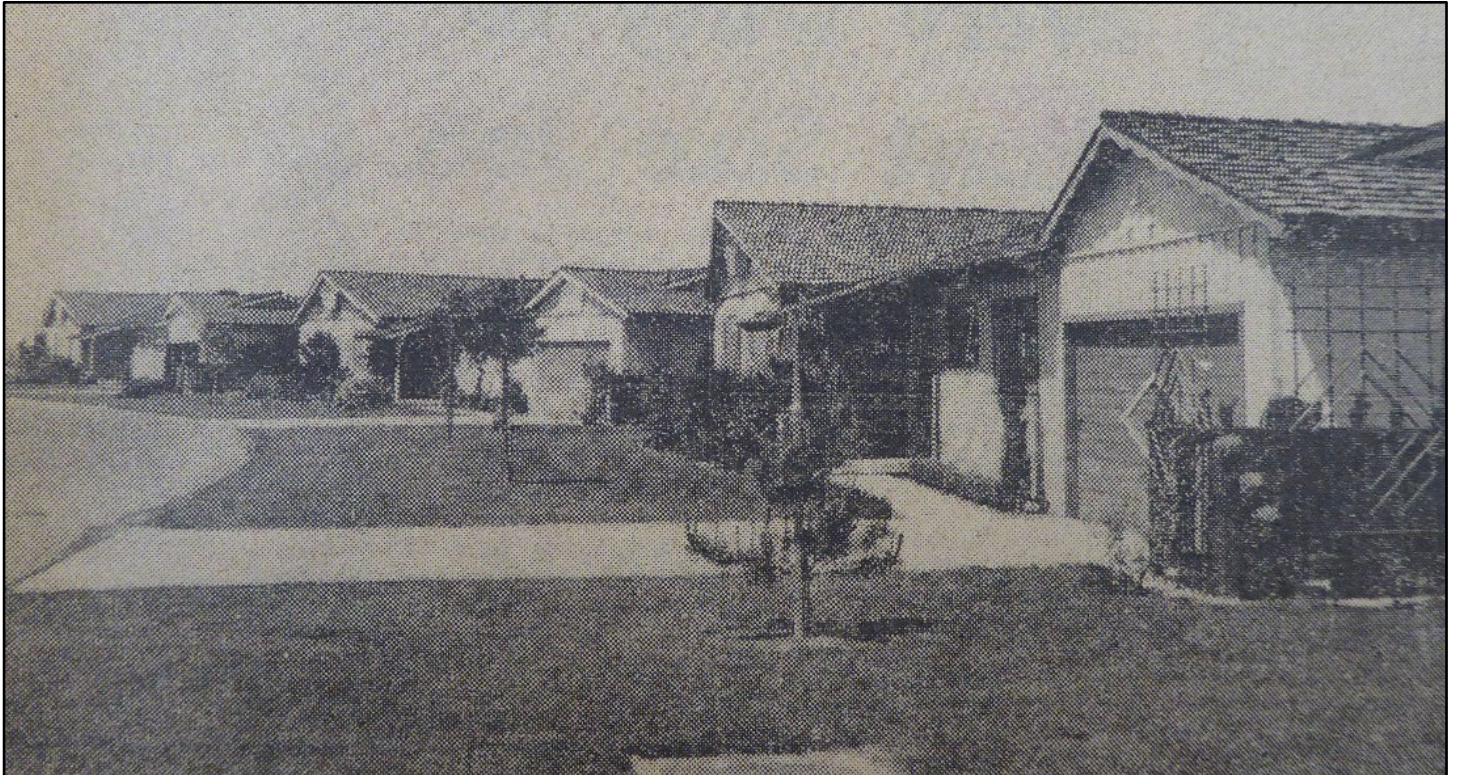
Page 4 of 6

\*Resource Name or # (Assigned by recorder) Staff Housing Units #3, 4, 5, and 6

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

The six Staff Housing units continued to provide housing for the superintendent and ranking staff through 1982. By 1997, Unit #1 was being used as a training center. In December 2017, DDS leased the Mark Lane properties, including eight staff and transitional housing units, to Fairview Management Company, a private company that had previously developed the Harbor Village residential neighborhoods at FDC. Under the terms of the lease, the former staff housing units are to be managed by the company to give priority housing to individuals with developmental disabilities who receive services through a regional center and then to individuals in need of affordable housing. In early 2019, Units #1 and #2 were demolished.<sup>3</sup>



**Figure 1:** View of Staff Residence Nos. 1-6 (left to right), ca. 1961. Note original wood roof shingles (Lee Payne, Staff Photographer, photograph published in *Costa Mesa Daily Globe-Herald: Fairview State Hospital Dedication Issue*, May 4, 1961, 16, from the Collections of the Costa Mesa Historical Society).

### Evaluation

The staff residences were completed in 1958 and were an integral part of the expanded campus plan for Fairview State Hospital. The buildings served as employee housing, allowing the hospital to attract and retain staff. The buildings provided support for Fairview's primary mission of providing care for people with developmental disabilities, and contributed to the hospital's identity as a self-contained institution. As such, the staff residences are significant under NRHP Criterion A and CRHR Criterion 1 as contributors to the Fairview State Hospital Historic District. Staff housing is not a function that

24; California Department of Transportation (Caltrans), *Tract Housing in California, 1945-1973: A Context for National Register Evaluation*. (Sacramento: Caltrans, 2011), 70-70.

<sup>3</sup> Advisory Committee of Family Developmental Services, *Fairview Handbook*, 2<sup>nd</sup> ed. (November 1982), 33, on file at Fairview Developmental Center, Costa Mesa, California; DDS, "Building Utilization Report and Recurring Maintenance Data: Fairview" (January 8, 1997), on file at DDS, Sacramento; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS; City of Costa Mesa, Building Permits BC18-01048 and BC18-01049, December 10, 2018; Google Street View, "1 Mark Lane, Costa Mesa, CA," March 2019. Provisions of the lease relating to the Mark Lane housing property are contained in Amendment No. 13, December 14, 2017. The original lease between DDS and Fairview Management Company, dated May 7, 1981, covered the Harbor Village property.



Page 5 of 6

\*Resource Name or # (Assigned by recorder) Staff Housing Units #3, 4, 5, and 6

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

independently rises to the level of historic significance, and the residences are thus not eligible individually or as a group for listing under these criteria.

The staff residences are not significant for their association with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital staff member directly associated with the residences made a demonstrably important contributions to history at the local, state, or national level. Thus, they are not eligible for listing for the NRHP or CRHR under these criteria.

The staff residences were designed as part of the expanded campus plan for Fairview State Hospital, and were completed by 1958 during the secondary phase of build out. The buildings are thus significant under NRHP Criterion C and CRHR Criterion 3 as contributors to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The residences are not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The residences are modest tract-type homes in the Ranch style, as illustrated by their elongated linear forms. This is a ubiquitous building type across the California postwar suburbs. These residences are not important examples of that type, and they are not individually eligible under these criteria.

These buildings are not significant as a source (or likely source) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The staff residences retain sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey their significance as district contributors. While the buildings have been altered somewhat—concrete ramps and a wood balustrade were added to Units# 4 and #5; a modern garage door was added to Unit #4; modern screen doors were added to Units #3 and #6; wood flower boxes were added to Unit #6; replacement roofing was added to all the units; and Units #1 and #2 were recently demolished—the buildings generally retain strong integrity of location, feeling, and association, if somewhat diminished integrity of design, materials, workmanship, and setting.

Character-defining features of the residences include the elements that date to the district's period of significance: the buildings' location and orientation, their general setting, and the Ranch-style architectural details including the buildings' massing; low-pitched gable roofs; stucco and board-and-batten siding; and all doors and windows that date before 1969. Contributing interior features include the layout and floorplan; and any remaining cabinets, doors or fixtures that date before 1969.

Page 6 of 6

\*Resource Name or # (Assigned by recorder) Staff Housing Units #3, 4, 5, and 6

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** Northwest corner of Staff Housing Unit #3, showing vinyl fencing (left); facing southeast, May 29, 2019.



**Photograph 3:** West façade of Staff Housing Unit #4; facing northeast, May 29, 2019.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 6Z

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 3

\*Resource Name or # (Assigned by recorder): Swimming Pool

**P1. Other Identifier:** Swimming Pool Complex

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1/4 of Sec    ; S.B. B.M.

c. Address \_\_\_\_\_ City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located in the southeast quadrant of the main Fairview Developmental Center (FDC) complex, on the east side of Eugenia Way.

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the Fairview Developmental Center (FDC) Swimming Pool Complex, which consists of a concrete pool, a restrooms building, and a dressing-room building surrounded by chain-link fencing, asphalt-paved roads and parking lots, and vacant fields (**Photograph 1**). Constructed in 1971, the rectangular swimming pool measures approximately 1,980 square feet, features tubular metal rails and a submersible pool chair, and is obscured by a canvas mesh pool cover. The pool is surrounded by a concrete patio area. Along the west side of the Swimming Pool Complex are the restrooms and dressing-room buildings, which were both added in the 1980s.

\*P3b. Resource Attributes: (HP14) Government Building; (HP41) Hospital

\*P4. Resources Present: ☒ Building ☒ Structure ☐ Object ☐ Site ☐ District ☐ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1: Swimming Pool Complex; facing southwest, May 28, 2019.**

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both

1971 (California Department of Developmental Services)

\*P7. Owner and Address:

California Department of Developmental Services

\*P8. Recorded by:

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 28, 2019

\*P10. Survey Type: (Describe)

Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record

☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record

☐ Other (list) \_\_\_\_\_

DPR 523A (1/95)

\*Required Information



Page 2 of 3

\*NRHP Status Code 6Z

\*Resource Name or # (Assigned by recorder) Swimming Pool

B1. Historic Name: Fairview Developmental Center Swimming Pool

B2. Common Name: Fairview Developmental Center Swimming Pool

B3. Original Use: Swimming pool B4. Present Use: Unused

\*B5. Architectural Style: Utilitarian

\*B6. Construction History: Pool built 1971; restrooms building built 1980; dressing rooms building built 1987

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: Unknown b. Builder: Unknown

\*B10. Significance: Theme n/a Area n/a

Period of Significance n/a Property Type n/a Applicable Criteria n/a

(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The Swimming Pool Complex does not appear to meet the criteria for listing in the National Register of Historic Places (NRHP) or the California Register of Historical Resources (CRHR), nor is it an historical resource for the purposes of the California Environmental Quality Act (CEQA). This pool and associated buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This swimming pool was built at the Fairview State Hospital in 1971, during the period of deinstitutionalization, which saw a decline in population. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

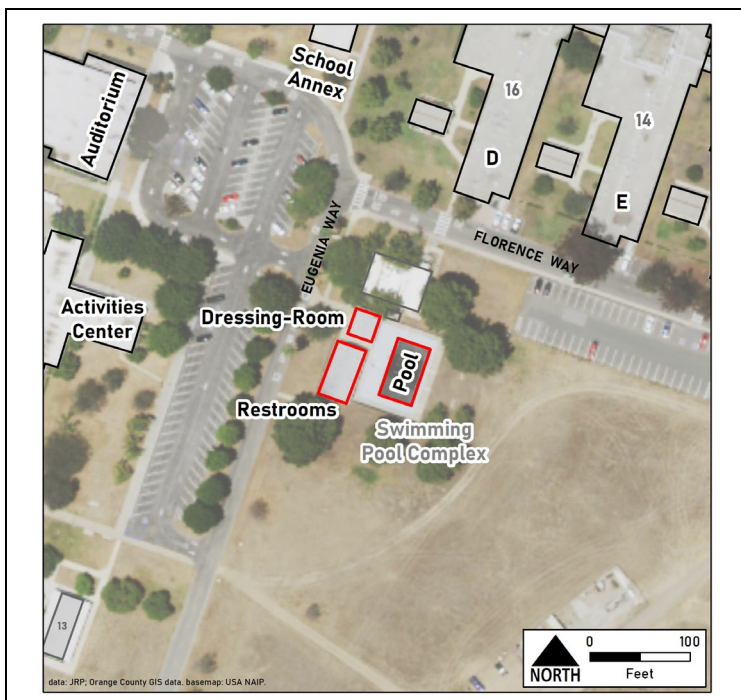
Fairview Hospital, *The First Ten Years*, 1969, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California; "Fairview Hospital for Their Benefit: State has Concern for Mentally Retarded," *Daily Pilot News Press* (February 13, 1964), Fairview State Hospital Clippings File, from the Collections of CMHS; California Department of Developmental Services (DDS); also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



## **B10. Significance (continued):**

In the early 1960s, the Fairview Developmental Center grew increasingly reliant on volunteers and non-profit organizations in delivering client care. One such volunteer group, the Fairview Therapeutic Pool Committee, Inc., was formed in 1962 by citizens from Costa Mesa, Newport Beach, and other nearby cities for the express purpose of raising \$50,000 to construct a swimming pool for patient use at the complex. By 1969, the organization had raised over \$53,000, and plans for the pool had been drafted and approved. Construction was reportedly completed in 1971. Additional funds were raised, possibly by the Fairview Therapeutic Pool Committee, and restrooms and a dressing room were added in 1980 and 1987, respectively. The pool was drained and the adjacent facilities vacated sometime between 2011 and 2017.<sup>1</sup>

### Evaluation

The Swimming Pool Complex is not eligible for listing under NRHP Criterion A or CRHR Criterion 1, either individually or as a contributor to the Fairview State Hospital Historic District. Constructed in 1971, this complex was added to the campus after the district's period of significance (1953-1969). Nothing about this swimming pool or its associated buildings suggests that they played any specifically significant role in expanding care for people with developmental disabilities. Rather, these buildings were built to supplement existing treatment facilities and thus do not meet eligibility criteria for individual listing.

The Swimming Pool Complex is not significant for associations with the lives of persons important to history and is not individually or collectively eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, client, or other individual directly associated with this facility made demonstrably important contributions to history at the local, state, or national level.

Under NRHP Criterion C or CRHR Criterion 3, the swimming pool and its two associated buildings are not individually significant as important examples of a type, period, or method of construction, nor are they the work of a master. Architecturally, this swimming pool complex is a modest example of mid-twentieth-century recreational facilities, and reflects common concrete construction practice for the time. As these facilities are typical examples of swimming pools constructed at other state institutions and hospitals, the complex is not significant with respect to its design or engineering under NRHP Criterion C or CRHR Criterion 3.

The Swimming Pool Complex is also not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

These facilities do not appear to have been altered and thus retain their integrity of design, materials, workmanship, setting, location, association, and feeling. However, they lack significance under all criteria and are not eligible for listing in the NRHP or CRHR.

<sup>1</sup> "Fairview State Hospital: The First Ten Years," no pagination, 1969, ff. Fairview Hospital, 1990-0067-0066.241, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California; "Fairview Hospital for Their Benefit: State has Concern for Mentally Retarded," *Daily Pilot News Press* (February 13, 1964), Fairview State Hospital Clippings File, from the Collections of CMHS; California Department of Developmental Services (DDS), "Building Utilization Report and Recurring Maintenance Data: Fairview" (January 8, 1997), on file at DDS, Sacramento; Google Earth Pro, "Fairview Developmental Center, Costa Mesa, California," March 2011; DDS, "Fairview Developmental Center BUM Report," June 23, 2017, on file at DDS.





State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D  
Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 7

\*Resource Name or # (Assigned by recorder): Transitional Housing Units #47, 48, 49, and 50

**P1. Other Identifier:** \_\_\_\_\_

**\*P2. Location:** ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; \_\_\_\_ ¼ of Sec \_\_\_\_; S.B. B.M.

c. Address 47, 48, 49, and 50 Mark Lane City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_; \_\_\_\_ mE/ \_\_\_\_ mN

e. Other Locational Data:

**\*P3a. Description:** (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

The transitional housing units at Fairview Developmental Center (FDC) consist of two adjacent and nearly identical Contemporary-style duplexes, comprising Units #47, #48, #49, and #50, respectively located from south to north along Mark Lane just east of the main Harbor Boulevard entrance to the complex (**Photographs 1-5**). These buildings are currently managed by a private company under a lease agreement with the state but are part of the historic hospital campus. Small lawns with shrubs and few mature trees surround each duplex; backyards are enclosed by modern vinyl, wood, and/or concrete-block fences. A concrete-block retaining wall is located to the northeast corner of Unit #50 (**Photograph 5**). Completed circa 1958, each rectangular duplex consists of two- and three-bedroom, wood-frame residences (950 and 1,150 square feet in size, respectively) connected by a 440-square-foot, flat-roof carport. The duplexes sit on concrete slab foundations, are stucco clad, and have low-pitched, composition-shingle hip roofs with projecting closed eaves and wide wood fascia boards. All windows appear to be original aluminum-frame fixed and sliding sashes sans wood sill or trim (see Continuation Sheet.)

**\*P3b. Resource Attributes:** (HP14) Government Building; (HP41) Hospital; (HP3) Multiple Family Property

**\*P4. Resources Present:** ☒ Building ☐ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1.** Transitional housing duplexes along Mark Lane; facing northwest; May 28-30, 2019

**\*P6. Date Constructed/Age and Sources:**

☒ Historic ☐ Prehistoric ☐ Both  
ca. 1959 (California Department of Public Works)

**\*P7. Owner and Address:**

California Department of Developmental Services

**\*P8. Recorded by:**

Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

**\*P9. Date Recorded:** May 29, 2019

**\*P10. Survey Type:** (Describe)

Intensive

**\*P11. Report Citation:** (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

**\*Attachments:** ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_

**BUILDING, STRUCTURE, AND OBJECT RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_

Page 2 of 7

\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Transitional Housing Units #47, 48, 49, and 50

B1. Historic Name: Residences 47, 48, 49, and 50

B2. Common Name: Transitional Housing Units #47, 48, 49, and 50

B3. Original Use: Staff residences B4. Present Use: Transitional housing (47 & 49 Mark Lane)

\*B5. Architectural Style: Contemporary

\*B6. Construction History: Built ca. 1959; replacement metal doors, concrete ADA-compliant ramps, and handrails added 1999; replacement of original wood shake roofing and wood window trim post-1979; original redwood fencing replaced by vinyl and concrete block fences at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect: California Department of Public Works – Division of Architecture b. Builder: Flowers & Shirley Co.

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1968 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The two FDC transitional housing buildings appear eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as contributors to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, these buildings are historical resources for the purposes of the California Environmental Quality Act (CEQA). The buildings are not individually eligible for the NRHP or CRHR because they lack historical significance independent of the larger district. The buildings have been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

Historic Context

These buildings were designed and constructed as part of Fairview State Hospital, and they served continually as staff housing during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

\*B12. References:

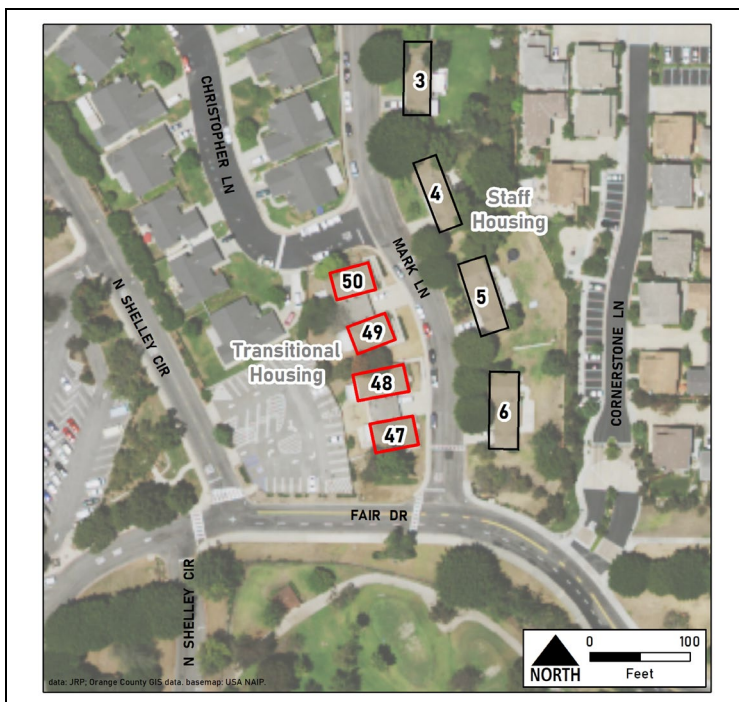
California Department of Public Works, "Fairview State Hospital: Employees Housing Units," 1958, File 19-G-17, California Department of General Services Plans Vault, West Sacramento; Fairview Developmental Center, *Fact Sheet* (April 1, 1984) "Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075 DDS, CSA; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



### **P3a. Description (continued):**

Original wood doors have been replaced and now consist of flush metal doors installed in 1999 at the same time that ADA-compliant concrete ramps and their associated metal pipe handrails were added on all sides of both buildings. Each carport is divided into two, 220-square-foot spaces separated by a solid wall. Metal handrails separate the parking area and walkway to the main entrances, which are sheltered beneath the carport roof. The rear (west) walls of the carports are clad with T1-11 vertical wood siding. Enclosed laundry areas for each unit are sited on the west side of each carport. Concrete patios are sheltered by metal awnings attached to each unit's west side.

### **B10. Significance (continued):**

In 1956, funds were allocated for planning and construction of multiple phases of staff housing for Fairview State Hospital as part of the State Building Construction Program five-year plan. In addition to funding for six single-family staff houses, \$250,000 was to be used in Fiscal Year 1957-1958 for planning and construction of multiple-unit housing for physicians and single employees. In September 1958, the California Division of Architecture submitted final plans for employee housing units, including the two duplex units recorded on this form as well as two, no-longer-extant, four-unit apartment buildings sited to the north near the Plant Operations Complex. The duplex units appear to have incorporated the same designs used earlier at Porterville Developmental Center in Tulare County, which employed modest elements of the Contemporary style with limited architectural embellishments. The FDC units featured T1-11 grooved plywood siding, aluminum-frame windows, and hip roofs with moderate eaves, all of which were common for California residences of the era. That November, the Flowers & Shirley Company of Costa Mesa was awarded the \$190,700 general construction contract, and construction was completed by May 1959 (**Figure 1**).<sup>1</sup>

In December 1970, Fairview became the first state facility to implement a new organizational model of treatment that emphasized individualized developmental and habilitation programming. In 1977, the two duplexes—then designated Residences 47, 48, 49, and 50—were incorporated into this programming and hosted the Transition Home Project, reportedly the first transitional program of its kind on state hospital grounds.<sup>2</sup> This program included “adults who possess basic self-help skills, can follow simple directions, and can benefit from vocational training,” with the program dedicated to preparing them for “the least restrictive environment possible” in preparation for semi-independent living.<sup>3</sup> By 1997, Units #47 and #48 remained client-occupied, but #49 and #50 were day-use only. In December 2017, DDS leased the Mark Lane properties, including eight transitional and staff housing units, to Fairview Management Company, a private company that had previously developed the Harbor Village residential neighborhoods at FDC. Under the terms of the lease, the former transitional housing

<sup>1</sup> California Department of Finance, “Report to the Joint Legislative Budget Committee, State of California: State Building Construction Program,” *California State Legislature, Appendix to the Journal of the Senate, 1956 Reg. Sess.* (Sacramento: California State Senate, 1956), 97; California Department of Public Works, Division of Architecture, “Fairview State Hospital: Employees Housing Units,” W.O. 4007-GC-49, September 12, 1958, File 19-G-17, California Department of General Services Plans Vault, West Sacramento; “Hospital Contract Let,” *Los Angeles Times* (November 2, 1958): 12; California Legislative Analyst to the Joint Legislative Budget Committee, *Analysis of the Budget Bill of the State of California for the Fiscal Year July 1, 1957, to June 30, 1958* (Sacramento: The Analyst, 1958), 963;

<sup>2</sup> “Fairview Developmental Center: Historical Data,” in *The Developmental Center System: A Collection of Histories*, by California Department of Developmental Services (DDS), Residential Services Division (Sacramento: DDS, ca. 1995), 3, ff. “Dept. of Developmental Services – Developmental Center History,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, California State Archives (CSA); Dawn Marie Noll, Project Director, Transition Home Project, Fairview State Hospital, “Fairview Transition Home Project Improves Quality of Life for Clients,” *Bare Facts: Department of Developmental Services Employee Publication* (May 1979): 4-5, 7, ff. “Dept. of Developmental Services – Updates,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA.

<sup>3</sup> “Fairview: Fact Sheet” (April 1, 1984), 3, ff. “Fairview Developmental Center,” Box 9 of 21: Subject Files, 1890-2004, Acc. # 2012-075: Department of Developmental Services (DDS) – Administration – Customer Support Section, CSA.



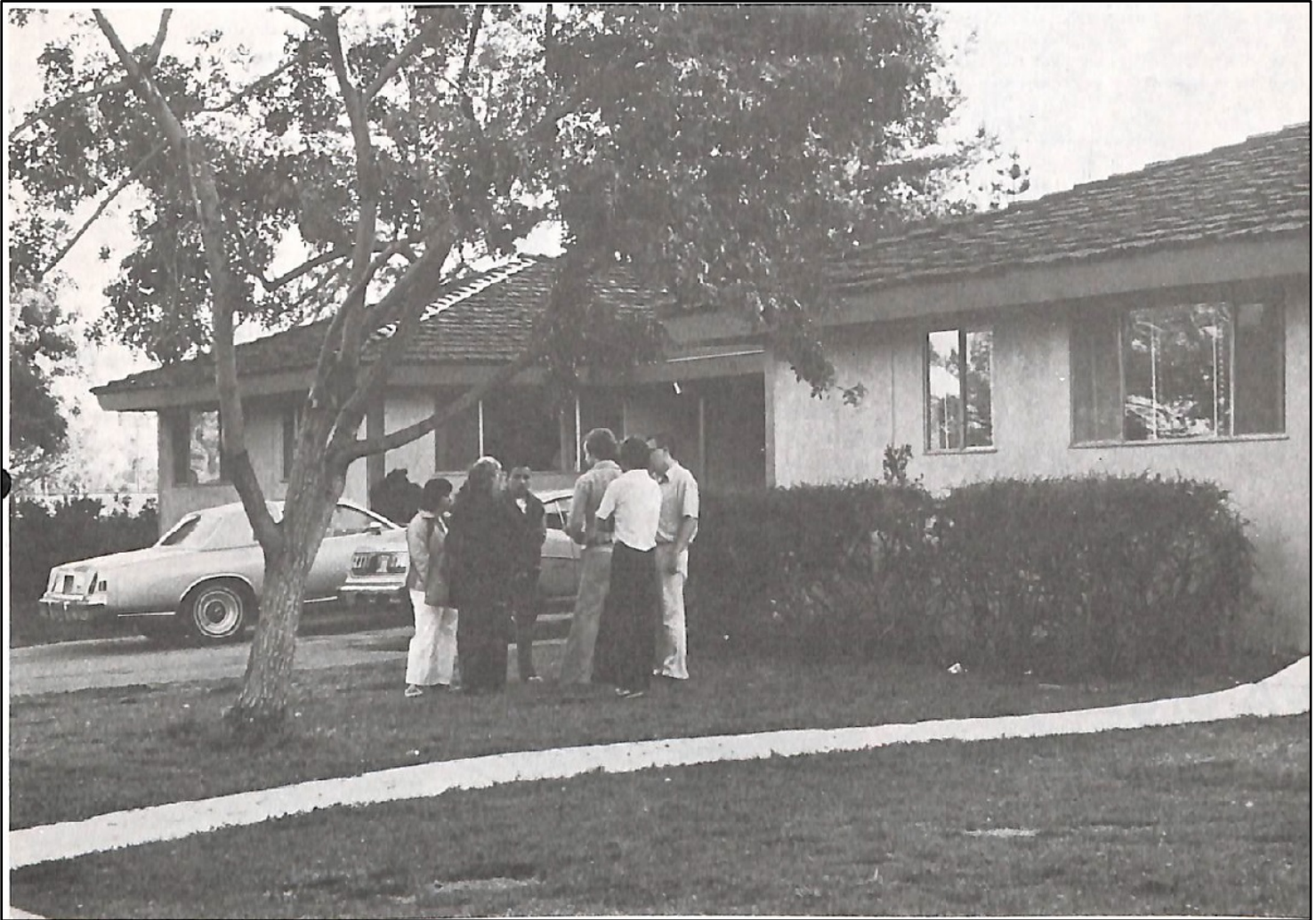
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\*Resource Name or # (Assigned by recorder) Transitional Housing Units #47, 48, 49, and 50

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

units are to be managed by the company to give priority housing to individuals with developmental disabilities who receive services through a regional center and then to individuals in need of affordable housing.<sup>4</sup>



**Figure 1:** Circa 1979 photograph of Duplex Units #47 (left) and #48 (right). Note the original wood shake-shingle roofing and wood window trim (*Bare Facts: Department of Developmental Services Employee Publication* (May 1979), cover photo, ff. “Dept. of Developmental Services – Updates,” Box 2 of 21: Subject Files, 1890-2004, Acc. # 2012-075: DDS – Administration – Customer Support Section, CSA).

### Evaluation

The transitional housing duplexes were completed about 1958 and were included in the expanded campus plan for Fairview State Hospital. The buildings were historically used as employee housing, allowing the hospital to attract and retain staff. The buildings provided support for Fairview’s primary mission of providing care for people with developmental disabilities, and contributed to the hospital’s identity as a self-contained institution. As such, the duplexes are significant under NRHP Criterion A and CRHR Criterion 1 as contributors to the Fairview State Hospital Historic District. Staff or transitional housing is not a

<sup>4</sup> DDS, “Building Utilization Report and Recurring Maintenance Data: Fairview” (January 8, 1997), on file at DDS, Sacramento; DDS, “Fairview Developmental Center BUM Report,” June 23, 2017, on file at DDS. Provisions of the lease relating to the Mark Lane housing property are contained in Amendment No. 13, December 14, 2017. The original lease between DDS and Fairview Management Company, dated May 7, 1981, covered the Harbor Village property.

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\*Resource Name or # (Assigned by recorder) Transitional Housing Units #47, 48, 49, and 50

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

function that independently rises to the level of historic significance, and the duplexes are thus not eligible individually or as a group for listing under these criteria.

The duplexes are not significant for associations with the lives of persons important to history and are not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital staff member directly associated with the duplexes made a demonstrably important contributions to history at the local, state, or national level.

These duplexes were designed as part of the expanded campus plan for Fairview State Hospital, and were completed about 1958 during the secondary hospital build out. While modest in design, the buildings were in a Contemporary style that matched the modern appearance of the hospital campus. The buildings are thus significant under NRHP Criterion C and CRHR Criterion 3 as contributors to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The duplexes are not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. The duplexes are modest tract-type buildings in the Contemporary style. This is a ubiquitous building type across the California post-war suburbs, and the duplexes are not important examples of that type. They are thus not individually eligible under these criteria.

These buildings are not significant as a source (or likely source) of important information regarding history. They do not appear to have any likelihood of yielding important information about historic construction materials or technologies and are not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The former staff duplexes retain sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey their significance as district contributors. Replacement metal doors have been added as well as concrete ADA-compliant ramps and handrails, and the original wood-shake shingle roofing has been replaced with composition shingles. However, the buildings retain generally good integrity of location, setting, design, materials, workmanship, feeling, and association.

Character-defining features of the former staff duplexes include the elements that date to the district's period of significance: the buildings' location and orientation, their general setting, and the Contemporary architectural details including the buildings' massing; moderately-pitched hipped roofs; stucco cladding; and all doors and aluminum-frame windows that date before 1969. Contributing interior features include the layout and floorplan, and any remaining cabinets, doors or fixtures that date before 1969.



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\*Resource Name or # (Assigned by recorder) Transitional Housing Units #47, 48, 49, and 50

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

**Photographs (continued):**



**Photograph 2:** East sides of Units #47 (left) and #48 (right); facing west, May 29, 2019.



**Photograph 3:** North and east sides of Units# 47 (left) and #49 (right); facing southwest, May 29, 2019.



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\*Resource Name or # (Assigned by recorder) Transitional Housing Units #47, 48, 49, and 50

\*Recorded by T. Webb & S. Skow

\*Date May 29, 2019

☒ Continuation ☐ Update



**Photograph 4:** East sides of Units #49 and #50; facing northwest, May 29, 2019.



**Photograph 5:** North and east sides of Units #49 and #50; facing southwest, May 29, 2019.



State of California – The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION  
**PRIMARY RECORD**

Primary # \_\_\_\_\_  
HRI # \_\_\_\_\_  
Trinomial \_\_\_\_\_  
NRHP Status Code 3D

Other Listings \_\_\_\_\_  
Review Code \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Page 1 of 7

\*Resource Name or # (Assigned by recorder): Water Treatment Plant

**P1. Other Identifier:** Pumping Station and Well

\*P2. Location: ☐ Not for Publication ☒ Unrestricted  
and (P2b and P2c or P2d. Attach a Location Map as necessary.)

\*a. County Orange

\*b. USGS 7.5' Quad Newport Beach Date 2018 T 6S; R 10W; 1/4 of Sec       ; S.B. B.M.

c. Address \_\_\_\_\_ City Costa Mesa Zip 92626

d. UTM: (give more than one for large and/or linear resources) Zone \_\_\_\_\_; \_\_\_\_\_ mE/ \_\_\_\_\_ mN

e. Other Locational Data:

Located north of the main Fairview Developmental Center complex to the rear (east) of the apartment complex at 2554 Anacapa Drive (APN 420-006-03).

\*P3a. Description: (Describe resource and its major elements. Include design, materials, condition, alterations, size, setting, and boundaries)

This form records the Fairview Developmental Center (FDC) water treatment plant, which is comprised of a pumping station, metal storage tank, and a well located to the north of the main FDC complex and surrounded by modern multiple-family residential development. Both components are surrounded by modern brick-masonry walls (**Photograph 1**) (see Continuation Sheet).

\*P3b. Resource Attributes: (HP9) Public Utility Building; (HP11) Engineering Structure; (HP14) Government Building

\*P4. Resources Present: ☒ Building ☒ Structure ☐ Object ☐ Site ☐ District ☒ Element of District ☐ Other (Isolates, etc.)

P5a. Photo or Drawing (Photo required for buildings, structures, and objects.)



**P5b. Description of Photo:**

**Photograph 1:** Pumping station;  
facing southeast, May 29, 2019.

\*P6. Date Constructed/Age and Sources:

☒ Historic ☐ Prehistoric ☐ Both  
1953 and ca. 1959 (California  
Department of Public Works /  
Department of Developmental  
Services)

\*P7. Owner and Address:  
California Department of  
Developmental Services

\*P8. Recorded by:  
Toni Webb & Samuel Skow  
JRP Historical Consulting, LLC  
2850 Spafford Street  
Davis, CA 95618

\*P9. Date Recorded: May 29, 2019

\*P10. Survey Type: (Describe)  
Intensive

\*P11. Report Citation: (Cite survey report and other sources, or enter "none.") JRP Historical Consulting, LLC, "Historical Resources  
Inventory and Evaluation Report: Fairview Developmental Center, Costa Mesa, CA," February 2020.

\*Attachments: ☐ None ☐ Location Map ☐ Sketch Map ☒ Continuation Sheet ☒ Building, Structure, and Object Record ☐ Archaeological Record  
☐ District Record ☐ Linear Feature Record ☐ Milling Station Record ☐ Rock Art Record ☐ Artifact Record ☐ Photograph Record  
☐ Other (list) \_\_\_\_\_



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\*NRHP Status Code 3D

\*Resource Name or # (Assigned by recorder) Water Treatment Plant

B1. Historic Name: \_\_\_\_\_

B2. Common Name: \_\_\_\_\_

B3. Original Use: Water treatment B4. Present Use: Water treatment

\*B5. Architectural Style: Utilitarian

\*B6. Construction History: Water reservoir and booster pump Station built 1953; well drilled ca. 1959; sub-grade pump installed 1963-1972; reservoir infilled 1981-1987; brick masonry wall built 1987-1995; modern equipment added to well at unknown date.

\*B7. Moved? ☒ No ☐ Yes ☐ Unknown Date: \_\_\_\_\_ Original Location: \_\_\_\_\_

\*B8. Related Features: \_\_\_\_\_

B9. Architect / Engineer: California Department of Public Works – Division of Architecture b. Builder: Fred J. Early, Jr., Company

\*B10. Significance: Theme Treatment of Developmental Disability / Modernist Architecture Area California

Period of Significance 1953-1968 (District) Property Type State Hospital Applicable Criteria A/1 and C/3  
(Discuss importance in terms of historical or architectural context as defined by theme, period, and geographic scope. Also address integrity.)

The FDC water treatment plant appears eligible for listing in the National Register of Historic Places (NRHP) and the California Register of Historical Resources (CRHR) as a contributor to the Fairview State Hospital Historic District. The historic district meets NRHP Criterion A and CRHR Criterion 1 at a local level of significance for its leading role in housing, educating, and medically treating people with developmental disabilities in Southern California. The district also meets NRHP Criterion C and CRHR Criterion 3 at a state level of significance as an important example of post-war state hospital architecture. Therefore, this treatment plant is a historical resource for the purposes of the California Environmental Quality Act (CEQA). The plant is not individually eligible for the NRHP or CRHR because it lacks historical significance independent of the larger district. The property has been evaluated in accordance with Section 15064.5(a)(2)-(3) of the CEQA Guidelines, using the criteria outlined in Section 5024.1 of the California Public Resources Code.

### Historic Context

This water treatment plant was designed and constructed as part of Fairview State Hospital, and it served continually as auxiliary utility support during the entirety of the historic period. For the historic context of the hospital as a whole, see the Fairview State Hospital Historic District form and the associated Historical Resources Inventory and Evaluation Report (see Continuation Sheet).

B11. Additional Resource Attributes: \_\_\_\_\_

### \*B12. References:

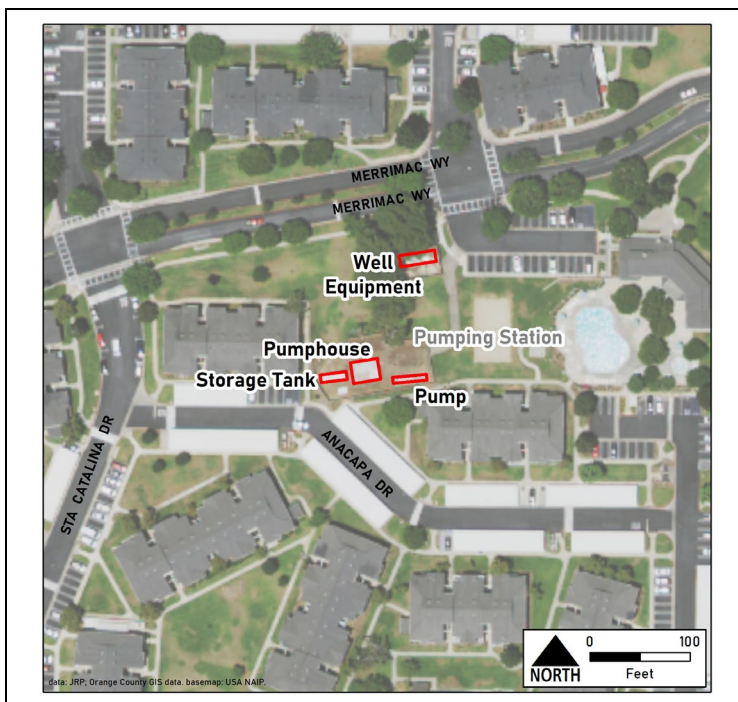
“Award Contract,” *Wilmington Press-Journal* (April 2, 1953): 1; “Planners Okay Fairview Employee Housing,” *Costa Mesa News* (1979), Fairview State Hospital Clippings File- Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California; also see footnotes.

B13. Remarks:

\*B14. Evaluator: Samuel Skow

\*Date of Evaluation: September 2019

(This space reserved for official comments.)



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\*Resource Name or # (Assigned by recorder) Water Treatment Plant

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

### **P3a. Description (continued):**

The water treatment plant was originally built in 1953 and consists of a prefabricated metal pumphouse, a metal storage tank, and a sub-grade pump installed sometime between 1963 and 1972 (**Photograph 2, Photograph 3, and Photograph 4**). The pumphouse has a square footprint, a front-gable roof, and corrugated metal roofing and siding. Fenestration is all original and consists of four-light, metal-frame, fixed-pane windows and a wood panel personnel door with upper glazing. To the rear (west) of the pumphouse is a horizontal metal storage tank affixed to two concrete cradles. To the front (east) of the pumphouse is the sub-grade pump with concrete box framing topped by metal tubular railing.

North of the pumping station is the well, constructed about 1959 (**Photograph 5 and Photograph 6**). This area contains an assortment of mechanical equipment, a modern eye-washing station, and a modern prefabricated shed.

### **B10. Significance (continued):**

The oldest components of the water treatment plant were included in the State Legislature's initial appropriation of \$11,576,550 for the first phase of development of the Fairview State Hospital site in January 1953. The water facilities were essentially utilitarian, with a prefabricated pumphouse and equipment. That April, the Fred J. Early, Jr. Company of Torrance was awarded the \$68,749 contract to construct a 1.5 million-gallon-capacity concrete water reservoir and a booster pump station, and construction was completed that December (**Figure 1**). In about 1959, a well was drilled immediately north of and adjacent to the pumping plant. In the early 1980s, the Costa Mesa Planning Commission approved a motion to build about 500 apartment units of affordable employee housing on state-owned land immediately north of the Fairview Developmental Center. By 1987, the area surrounding Fairview's early water-treatment plant had been comprehensively built out with two-story, multi-unit residential buildings, a process that required infilling the reservoir and erecting masonry brick walls around the remaining water facilities.<sup>1</sup>

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<sup>1</sup> Anson Boyd, State Architect to Dr. Frank F. Tallman, Director of Mental Hygiene, Re: Fairview State Hospital – Initial Development, Construction Program (First Phase), Work Order No. 2428 GC, Chapter 9, 1953, February 13, 1953, and Anson Boyd, State Architect to Mr. Frank B. Durkee, Director of Public Works, Re: Fairview State hospital, Water Reservoir & Booster Pump Station – Work Order No. 2428 – Contract No. 3573, January 6, 1954, R386.028, Box 16, Folder 18, DPW – Director's Office Records – Division of Architecture, Fairview State Hospital, 1953-1954, California State Archives (CSA), Sacramento; Cal. Stats. 1953, Reg. Sess. 1953, Ch. 9, p. 614-615; "Award Contract," *Wilmington Press-Journal* (April 2, 1953): 1; "\$11,500,000 Hospital's First Unit Being Built," *Los Angeles Times* (September 6, 1953): 24; United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA; Fairchild Aerial Surveys, Flight C-23870, Frame 341, 1: 14,400, May 7, 1960, available at [http://mil.library.ucsb.edu/ap\\_indexes/FrameFinder/](http://mil.library.ucsb.edu/ap_indexes/FrameFinder/) (July 2019); "Planners Okay Fairview Employee Housing," *Costa Mesa News* (May 17, 1979), Fairview State Hospital Clippings File, from the Collections of the Costa Mesa Historical Society (CMHS), Costa Mesa, California; "Will Fairview Attract Undesirables?" Fairview State Hospital Clippings File, CMHS; "Costa Mesa, 1987" [aerial photograph], CMHS;

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\*Resource Name or # (Assigned by recorder) Water Treatment Plant

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update



**Figure 1:** Portion of 1958 oblique photograph of Fairview State Hospital, showing the water reservoir (no longer extant) and pumphouse. Not shown: well, added ca. 1959 (United Aerial Survey, [aerial photograph], April 23, 1958, photograph no. 1264, ff. 2012-075 # 2 – Oversized Photographs, California Department of Developmental Services, CSA).

### Evaluation

The components that comprise the water treatment plant were completed in 1953 and 1959, with the pumphouse being the earliest extant built environment feature constructed in support of Fairview State Hospital. The pumphouse and well served the hospital campus by collecting and distributing water resources throughout the facilities. This contributed to the state hospital's identity as a self-contained institution. As such, the water treatment plant is significant under NRHP Criterion A and CRHR Criterion 1 as a contributor to the Fairview State Hospital Historic District. While the plant provided decades of water treatment service, this function alone does not rise to the level of historic significance, and the water treatment plant is not individually eligible for listing under these criteria.

The water treatment plant is not significant for associations with the lives of persons important to history and is not individually eligible for listing under NRHP Criterion B or CRHR Criterion 2. Research conducted for this project did not reveal that any hospital superintendent, staff member, patient, or other individual directly associated with this plant made demonstrably important contributions to history at the local, state, or national level. Thus, it is not individually eligible for listing for the NRHP or CRHR under these criteria.

The water treatment plant was designed as a crucial component of the original and expanded campus plan for Fairview State Hospital. The plant is thus significant under NRHP Criterion C and CRHR Criterion 3 as a contributor to the Fairview State Hospital Historic District that is a good example of post-war state hospital design. The water treatment plant is not individually eligible under these criteria as the work of a master or as an important example of a type, period, or method of construction. Independently, the water treatment plant is a modest example of utilitarian water-treatment infrastructure. It is not exceptional in its design or scale, and shows no evidence of technological innovation. Similar types of facilities may be found at other institutions and this plant is not an important example of the type.

This facility is not significant as a source (or likely source) of important information regarding history. It does not appear to have any likelihood of yielding important information about historic construction materials or technologies and is not eligible for listing under NRHP Criterion D or CRHR Criterion 4.

The water treatment plant retains sufficient integrity to the Fairview State Hospital Historic District period of significance (1953-1969) to convey its significance as a district contributor. The residential development of the surrounding area in the 1980s has resulted in the considerable downsizing of the historic facilities, including infilling a no-longer-extant reservoir. In that same period, non-original brick masonry walls were erected to enclose the facilities. Additionally, modern equipment has been added to the well at an unknown date. However, the facility as a whole remains clearly identifiable, and there has been little to no alteration to the remaining pumping structures. The water treatment plant thus retains strong integrity of location, setting, design, materials, workmanship, feeling, and association.



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\*Resource Name or # (Assigned by recorder) Water Treatment Plant

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

☒ Continuation ☐ Update

Character-defining features of the water treatment plant include the elements that date to the district's period of significance: the location and orientation of the individual structures, the prefabricated, corrugated metal construction of the pumphouse, and those original infrastructural components that date before 1969.

### Photographs (continued):



**Photograph 2:** Pumping station pumphouse; facing west / southwest, May 20, 2019.

Page 6 of 7

\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Water Treatment Plant

☒ Continuation ☐ Update



**Photograph 3:** Pumping station storage tank; facing southwest, May 29, 2019.



**Photograph 4:** Pumping station pump; facing southeast, May 29, 2019.



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\*Recorded by T. Webb & S. Skow \*Date May 29, 2019

\*Resource Name or # (Assigned by recorder) Water Treatment Plant

☒ Continuation ☐ Update



**Photograph 5:** Brick masonry enclosure containing well; facing northwest, May 29, 2019.



**Photograph 6:** Well equipment; facing northwest, May 29, 2019.