



UNIVERSITY OF
LEICESTER

Archaeological Services

**A Level 3 Historic Building Survey at
The Knighton Street Offices,
Leicester Royal Infirmary,
Leicester
NGR: SK 58694 03539**



**ULAS Report No 2021-143
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Site Name: Knighton Street Offices, Leicester Royal Infirmary.

Grid Ref: SK 58694 03539

Author: Andrew Hyam

Client: University Hospitals of Leicester

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Ceremonial trowel used by Matron Rogers to lay the Nurses' Home foundation stone
Source: Leicestershire Hospital virtual museum website



Matron Rogers (Matron from 1892 to 1912) and student nurses (and dog Nell)
Source: Leicestershire Hospital virtual museum website

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A Level 3 historic building survey at the Knighton Street Offices, Leicester Royal Infirmary, Leicester (SK 58694 03539)

Summary

A level 3 historic building survey was carried out at the Knighton Street Offices, Leicester Royal Infirmary. The work was commissioned by University Hospitals Leicester from University of Leicester Archaeological Services (ULAS) in advance of the proposed demolition of the building as part of a major redevelopment of the site.

The locally listed four storey building was opened in 1910 as the Edward Wood Nurses' Home and was originally built with an E-shaped floor plan. It was designed by Everard, Son & Pick. Gradual redevelopment of the crowded hospital site during the second half of the 20th century has drastically reduced the size of the building leaving only the easternmost third surviving.

Internally the physical structure and layout of the building remains generally unchanged although almost all fittings relating to its time as a nurses home have been removed. A number of fitted cupboards and wardrobes are still present as are most doors and door fittings.

The report and archive will be deposited under Accession Number Y.A13.2021

Introduction

In accordance with National Planning Policy Framework (NPPF), Section 16 Conserving and Enhancing the Historic Environment, (MHCLG 2020) this document forms the report for a level 3 historic building survey of the Knighton Street Offices, Leicester Royal Infirmary, Leicester (SK 58694 03539).

A proposed redevelopment of the area around the site of the Knighton Street Offices and around the adjacent former Outpatients Department means that these buildings will be demolished to provide adequate space for a new purpose-built structure. As the building will be permanently lost the client has requested that a historic building recording to Level 3 (Historic England, 2016) take place before any planning applications are made. The other buildings on the proposed redevelopment site do not form part of this historic building survey.

Site Location, Geology and Topography

The site of the Leicester Royal Infirmary (LRI) lies to the south of the city centre and is on the western side of the junctions of Welford Road and Aylestone Road (Fig. 1). The LRI is surrounded by Jarrom Street, to the north, Havelock Street, to the west and Walnut Street running along its southern boundary. The earliest hospital buildings are

in the north-eastern corner of the site with a variety of buildings of different periods spreading across the rest of the site. The Knighton Street Offices are located close to the centre east of the hospital site close to the line of the former Knighton Street as discussed later (Figs 2 and 3). On the north side of the Knighton Street Offices is a recently added building housing the A and E department. Immediately to the east of the Offices is the former two storey Knighton Street Outpatients building which is also proposed to be demolished in the scheme. To the south and west is the modern Sandringham and Clinical Sciences block.

The LRI site is generally level slopes down towards the south-east with a fall from around 60m aOD in the north-east down to around 57m aOD in the south-west.

The British Geological Survey indicates that the underlying geology of the area is likely to be Branscombe Mudstone Formation, overlain by Syston Member sand and gravel in places.

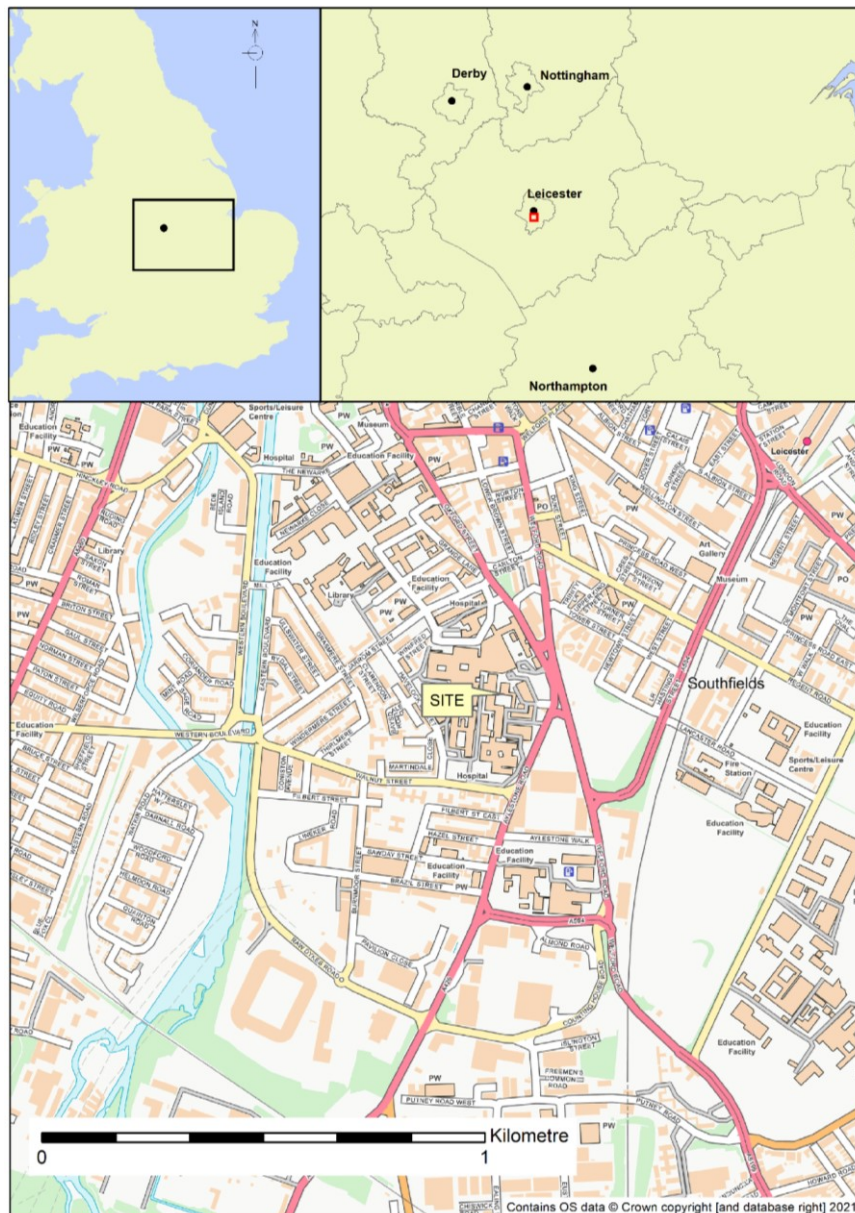


Figure 1 Site Location

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Figure 2 Aerial view of Leicester Royal Infirmary site
 Knighton Street Offices highlighted in yellow. Havelock Street on left, Aylestone Road/Welford Road on right

Imagery ©2021 Bluesky, CNES/Airbus. Getmapping plc. Infoterra Ltd & Bluesky. Maxar Technologies. Map data ©2021



Figure 3 Site plan
 North to right of picture. Knighton Street Offices shown in centre of site in yellow
 Source: Leicester Royal Infirmary

Historical Background

The Leicester Royal Infirmary was founded in 1771 by the Reverend William Watts although at this time it was simply known as the Leicester Infirmary. The new hospital was built on open land to the south of the Leicester town limits which at that time were defined by the town walls and associated defences. The hospital was constructed on a five-hectare site which was known as 'Chapel Close'.

After the severe damage caused during the Civil War in 1645, the town gates were finally taken down in 1774 just three years after the opening of the hospital. This removal of any physical barriers provided the impetus for settlement to expand beyond the earlier town limits and, within a few years, the expansion of the town was already threatening to engulf the hospital site. This was a problem which has followed the hospital up to the present day. By around 1808 the original 40 bed hospital had increased to 60 beds and a fever house was added in 1820. This steady growth meant that in the 1830s the Leicester Infirmary acquired more land. The enlarged hospital limits at this time were defined by Cow Lane (Bridge Street), Infirmary Street and Parliament Street (Frizelle 1971). Nurses were first trained on site in 1870 but not at the Knighton Street buildings which had yet to be built. St. Luke's Chapel was added in 1887. In the 19th century, there was further expansion of the hospital site southwards resulting in the demolition of houses on Parliament Street, which dated to the 1820s.

The name of the hospital was expanded to become the Leicester Infirmary and Children's Hospital in 1911 with the word Royal being added in 1914. The hospital became part of the new National Health Service in 1948.

Since the early 20th century, the Royal Infirmary had been buying houses and land close to the hospital with a view to expansion. A large scale programme of 'slum clearance' was undertaken in the middle of the century in order to make way for further expansion of both the Royal Infirmary and the former Polytechnic (now De Montfort University). This expansion began with the partial truncation of Knighton Street in the 1930s which continued until the 1970s (Courtney and Courtney 1992). Expansion and redevelopment of the site has been a constant theme throughout the history of the hospital. This reflects both the ever expanding population and advances in medical treatment.

As noted, nurses began to receive training in 1870 and it would appear that they lived in the Goddard and Paget designed house on the corner of Aylestone Road and Filbert Street. This building was built between 1878 and 1880 and is now a Grade II listed structure. Evidently the growth of the hospital and the need to train and house a greater number of nurses led to the construction a new purpose-built structure within the heart of the hospital. Local architects Everard, Son and Pick were the designers of the first phase of the new building. This building, which was known as the Edward Wood Nurses' Home, was opened by Mrs Fielding Johnson the wife of Thomas Fielding Johnson who was chairman and vice-chairman of the Board of Governors at the Hospital for a number of years. The building was named after Sir Edward Wood who was another prominent Leicester businessman and philanthropist. He had close links with the hospital as chairman and was a significant benefactor contributing both to the new nurses' home and to the children's hospital. A plaque on the ground floor of the building marks the opening of the building (Fig. 4). The present location of the plaque is in what was a back corridor suggesting that it was once sited in a much more prominent position, presumably in the now demolished entrance hall.

One of the key figures in the opening of the new nurses' home was Matron Rogers. Gertrude Rogers came to the Leicester Infirmary in 1888 and rose to the position of Matron which she held until 1912. Under her leadership standards in nurse training and overall nursing effectiveness rose significantly. A silver trowel was presented to her after laying one of the foundation stones for the new nurses' home (see frontispiece of this report).

Initially the nurses' home consisted of an E-shaped structure with the main axis following the line of Knighton Street (Fig. 5). Subsequent years saw additional wings and rear elements being added until a maximum size was reached in the 1950s. The growth of the hospital complex meant that in later years the nurses' home has been reduced in size leaving only around 40% of the original. The growth of the building is discussed in more detail in the cartographic section below.

The four-storey nurses' home included separate rooms for each nurse with communal dining, study and relaxation rooms. A brochure produced when the building was at its maximum size either in the 1940s or 1950s indicates that the home had 220 bedrooms with several bathrooms on each floor. It also states that there were well-furnished sitting rooms, library and recreation, lecture and writing rooms. For use of these additional facilities nurses were expected to pay between 2d and 8d a month which was presumably linked to pay scales. It may also be imagined that different sitting rooms were allocated to different grades of student nurse. The recreation room included a small stage for concerts and theatrical entertainment. In the late 1930s a tennis court was added in front of the building on the line of the former Knighton street which had been completely removed by this time (Fig. 6). More photographs from this brochure are shown within the results section of this report. The building continued in use as a nurses' home until the later 1980s. More recently it has served as offices and training rooms for a range of hospital services.



Figure 4 Commemorative plaque marking the opening of the building Presently located in the ground floor of the Knighton Street Offices although this is unlikely to be its original position



Figure 5 The Edward Wood Nurses' Home as built in 1910

The low brick wall in the foreground marks the line of Knighton Street. Only the building to the right of the yellow line remains – see Figure 18

Source: Leicestershire Hospital virtual website

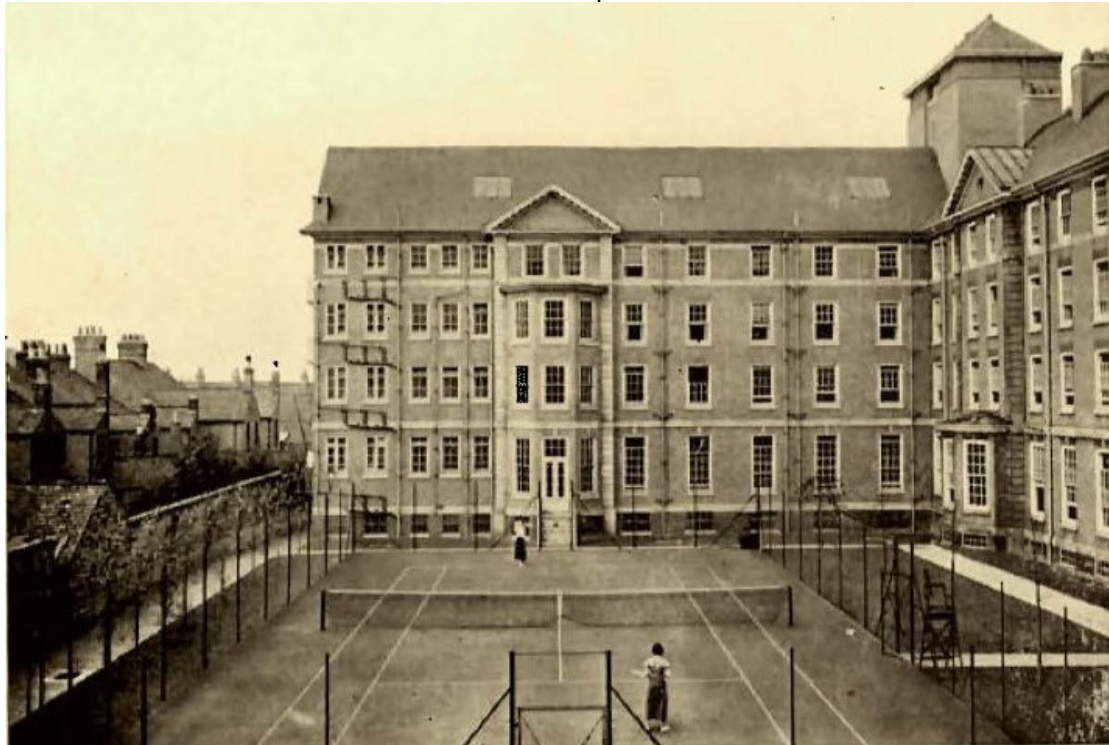


Figure 6 Tennis court on south side of the nurses home

The range directly ahead is a later addition to the 1910 building (compare this with Figure 5). None of the building in this picture remains today. Rear yards of Aylestone Street on left

Cartographic Evidence

The first available map showing any clear details of the hospital site is the First edition Ordnance Survey 25 inch scale map published in 1888 (Fig. 7). This map shows the LRI site significantly smaller than it is at present. The original 1771 block is shown to the north of the site with a fever house added to one wing (now known as the Victoria building). A large open space is shown covering most of the rest of the site with what appear to be laid out gardens and a tennis lawn. On the site of the nurses' home is a small area of possible orchards or gardens belonging to the hospital. Parliament Street and Knighton Street are still present with terraced housing running down both sides of each street. Hotels are located on both corners of Knighton Street where it joins Aylestone Road.

By the time of the second edition of the 25 inch Ordnance Survey map, published in 1915, the site has undergone a number of significant changes (Fig. 8). The main body of the hospital has had an extension added to its southern range cutting across the gardens and the 1887 chapel is now identified. More buildings have been constructed along the western boundary of the site and the open space is beginning to diminish. Most importantly two new buildings have also appeared; one is the outpatients department which has truncated part of Parliament Street with the other being the new Edward Wood Nurses' Home. Most of the houses along the northern side of Knighton Street have been removed to make space for the home. At this date the home is shown as a single range sitting close to the line of the Knighton Street back yards as shown in the postcard in Figure 5. On the north side of the main range are three wings linked by two corridors with light wells. There are no wings extending out to the south and the building must have been clearly visible from the houses along the south side of Knighton Street. A six inch to the mile OS map was published in 1902 which shows less detail but still clearly shows all of the houses as still being present on Knighton Street which indicates that they were demolished specifically to make way for the new nurses' home.

The next available Ordnance Survey map was published in 1930 which shows that a new wing has been added to the south-eastern corner of the nurses' home which extends southwards as far as the edge of Knighton Street (Fig. 9). There is no similar wing shown on the south-western corner at this date. There are no other changes to the home apart from what looks like a covered walkway extending from the northern side to reach the chapel and other parts of the main hospital. Elsewhere on site another range has been added to the hospital roughly where the Balmoral Building is now. The Outpatients Building to the east of the nurses' home has also been extended south to meet Knighton Road and now has an angled frontage. This extension has removed more houses along the northern side of Knighton Street.

It is not clear if the 1930 map is a snapshot of the extensions as they were being built because by the time of the 1938 map the nurses' home has more than doubled in size (Fig. 10). This map shows two large wings extending southwards across the former Knighton Street which has now completely disappeared. The wings reach as far as the back yards of the houses along Aylestone Street. Two smaller blocks have been inserted to the rear (north) side of the home. One of these is the small theatre/recreation room which survives today. This layout of buildings appears to remain constant over the war years up to and including the 1952 edition of the Ordnance Survey map. This map is not shown in this report but it does record a tennis court between the two new wings (see Fig. 6).

There is a large gap until the publication of the next Ordnance Survey map in 1979. This map cannot be shown due to copyright reasons but shows that the whole hospital site has been transformed. All of the streets to the south down to Walnut Street have been removed leaving, at this time, a large open area south of the nurses' home. A major change has also happened to the nurses' home which has had its western side demolished to make way for the Balmoral Building which is located approximately at the western edge of the home. A gap between the two buildings is shown which will soon be filled by the northern end range of the Sandringham Building and Clinical Sciences block. Since that date a range of new buildings have been inserted into spaces in and around the hospital leaving the remnant of the nurses' home rather isolated among more modern buildings.



Figure 7 Detail from the first edition 1888 Ordnance Survey map
 Approximate location of the current building which has not yet been built is highlighted in red.
 Sheet: Leicestershire XXXI.14
 Original scale 25 inch to 1 mile



Figure 8 Detail from the 1915 Ordnance Survey map
 Location of current building highlighted in red. Note that at this date the two southern wings had not been added.

Sheet: Leicestershire XXXI.14. Original scale 25 inch to 1 mile

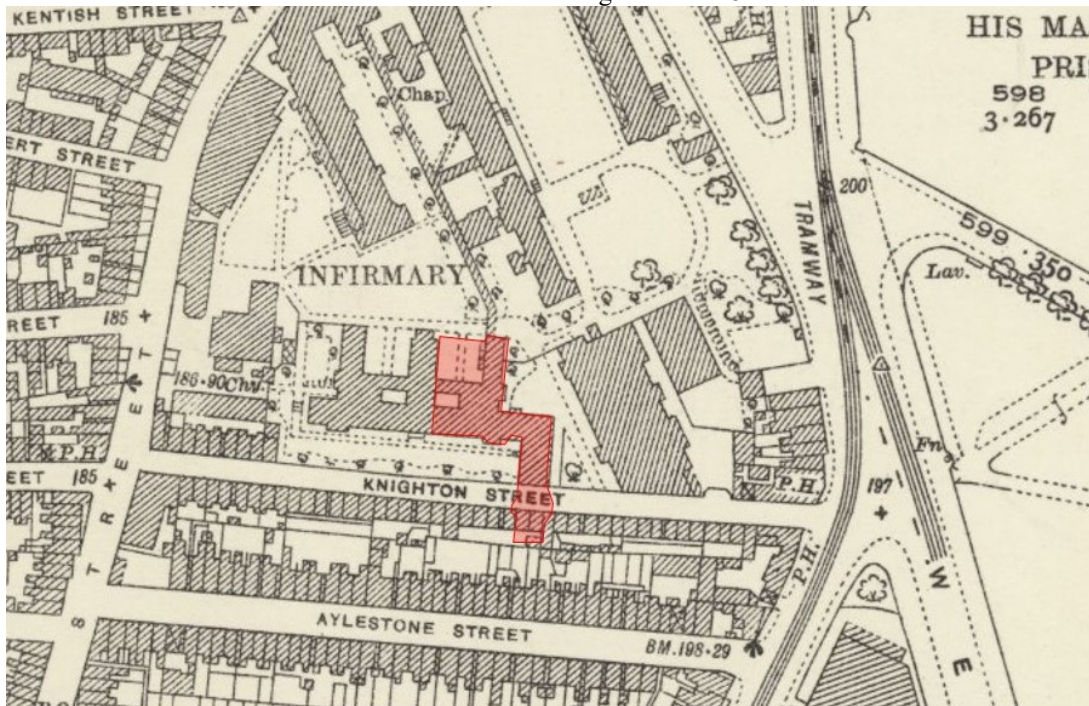


Figure 9 Detail from the 1930 Ordnance Survey map
 Location of current building highlighted in red. Note that at this date only part of the south-eastern wing had been added.

Sheet: Leicestershire XXXI.14

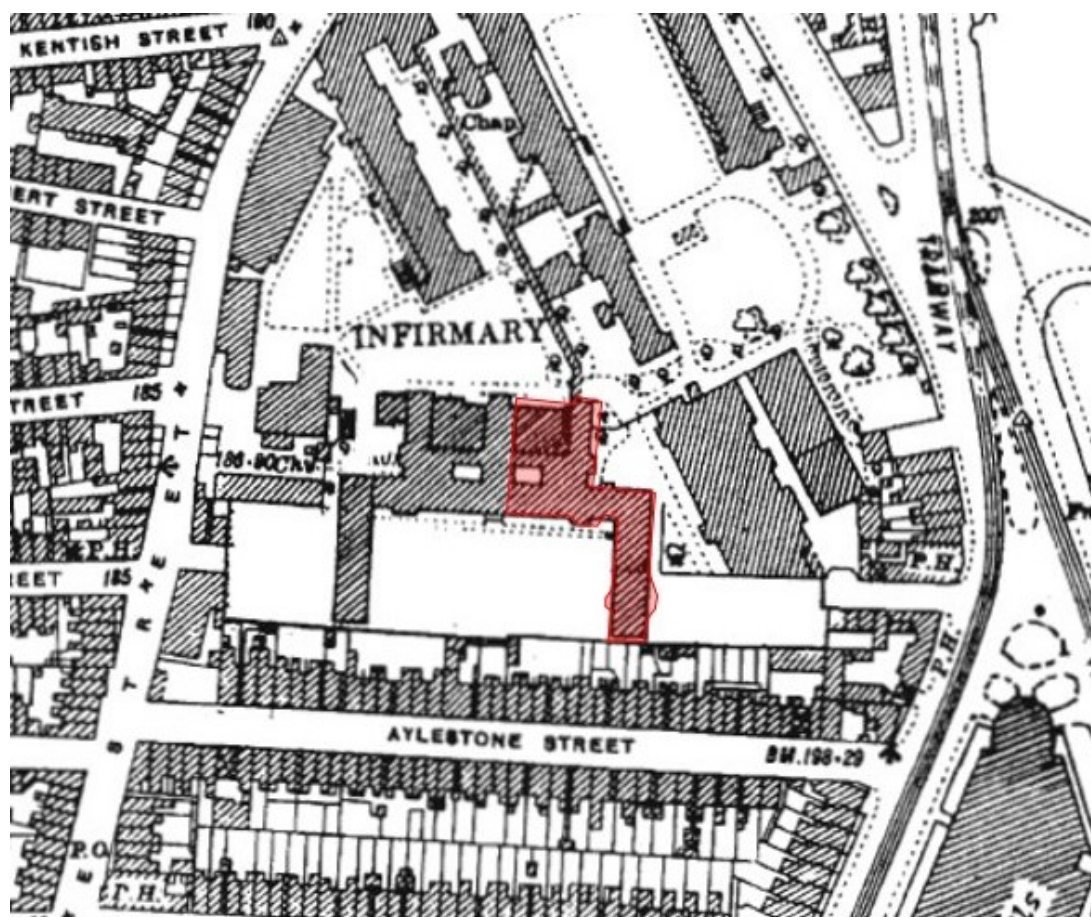


Figure 10 Detail from the 1938 Ordnance Survey map

Location of current building highlighted in red. Both wings are fully built by now and the rear ranges have been infilled. No houses survive along Knighton Street.

Sheet: Leicestershire XXXI.14

Other documentary sources

Extracts and photographs from a brochure describing the hospital and the nurses' home were supplied by Jon Currington, Head of Partnerships and Business Development, at the LRI. This document must have been produced either just before the Second World War or soon afterwards as the photographs show the building with both side wing extensions which only appear on the 1938 map. What appears to be an artist's impression of the complete building is shown with both wings but without any bays which are an integral feature of the final building (Fig. 11). The recreation room to the rear is not shown on this picture. A number of other photographs from this and from the online Leicestershire Hospital virtual website have been used as comparison photographs throughout the results section of this report.

Another potential source of information are the large number of commemorative plaques currently stored within the basement of the building. There are several memorial and foundation stones and plaques from many of the former buildings. The possible presence of asbestos in this part of the building during the visit meant that none of these could be moved. However, one important plaque was observed which was a memorial to Matron Rogers (Fig. 12). These may be of significant historic interest both to the LRI and to Leicester's social history.



Figure 11 Architect's drawing on the full building
The final building differed in detail but not in size or extent. Source J. Currington, LRI



Figure 12 Some of the memorials stored in the basement
Inset: Memorial to Matron Rogers

Conservation Area and listed buildings

The closest conservation area to the Knighton Street Offices is the New Walk Conservation Area which lies along the opposite side of Welford Road and includes the prison. The closest listed building is the Grade II listed original 1771 part of the hospital. Despite not being listed, the nurses' home is included on the Leicester City Council Local List as Number LL/107. This list records buildings of local historic or architectural value which do not have the national importance required for nationally listed buildings.

Objectives

A Written Scheme of Investigation (WSI) was produced by ULAS defines the project and details the scope of the historic building project. Within the stated project objectives, the principal aim of the building recording was to provide a photographic, written and drawn record of the historic building and associated structures prior to the commencement of any redevelopment or demolition work.

In brief, the objectives of the Level 3 historic building Survey were to:

- To provide a photographic, written and drawn record of all the affected parts of the historic fabric prior to the commencement of works.
- To ensure the long-term preservation of the information through deposition of the record and a summary written report with an appropriate depository.

Methodology

The methodology and recording system employed for the Level 3 historic building recording was as stated in the ULAS WSI. The survey followed Historic England's guidelines *Understanding Historic Buildings: A guide to good recording practice* (2016). Only the Knighton Street Offices to be demolished (highlighted in Figures 2 and 3) were surveyed although some photographs of other buildings on site were taken in order to place the building into its current context.

A Level 3 historic building recording is an analytical record, and comprises an introductory description followed by a systematic account of the building's origins, development and use. The record at this level should include an account of the readily available evidence on which the analysis has been based, allowing the validity of the record to be re-examined in detail. It should also include all drawn and photographic records required to illustrate the building's appearance and structure and to support an historical analysis. The Historic Building Survey involves the preparation of written, drawn and photographic records as discussed in the WSI.

No architectural drawings of the elevations were available at the time of the survey but would be supplied at a later date. Existing floor plans were used during the site visit and modified for the purposes of this report.

All work followed the Chartered Institute for Archaeologists (CIfA) *Code of Conduct* (2014).

The fieldwork was undertaken between the 25th and 31st of August 2021.

Drawings

Architectural drawings of each elevation were created for the client and modified for the requirements of this report. All of the elevations are shown in Appendix 3 of this report. Plans of each floor are shown in the results section below.



Figure 13 Principal elevations

Modified from drawings supplied by Client. See Appendix 1 for larger scale drawings

Results

The site was visited between the 25th and 31st of August 2021. The weather was dry and generally cloudy. The building was still in use as offices and teaching rooms at the time.

As noted earlier, the former nurses' home lies within a busy modern hospital with a range of modern buildings of varying ages fitted into a relatively restricted space. Less than half the original full extent of the building now survives with the main entrance and everything west of it being demolished in the later 1960s or early 1970s, certainly before 1979 (Fig. 14). Comparing the existing building with earlier photographs shows that the front entrance which faced south towards Knighton Street and everything west of the entrance have been removed. Vestiges of the alignment of Knighton Street running from east to west can also be detected especially at the junction with Aylestone Road (Fig 15). Elsewhere around the building other alignments of later buildings show the presence of earlier street layouts and structures (Figs 16 and 17).

When first built the nurses' home faced away from the main hospital buildings and site. It is not clear why unless it was to project a more attractive face to the general public rather than being insular and inward looking. The original buildings can be seen from the eastern rear wing of the nurses' home but have been hemmed in on most sides by later development (Fig. 18).



Figure 14 Location of the entire nurses’ home within the hospital North to right of picture. Knighton Street Offices shown in centre of site in yellow. Demolished portion and full extent of entire building shown in blue hashed outline. Line of Knighton Street shown as purple dots. Source: Modified from Leicester Royal Infirmary map



Figure 15 Remnant of Knighton Street seen from Aylestone Road Looking west. Only one of the two pubs on Knighton Street survive. The slate roof of the nurses’ home can be seen just below the skyline



Figure 16 Location of the Knighton Street Offices

Looking north from approximate location of where Aylestone Street was. Original range in centre, later east wing gable end on right. Sandringham Building on left



Figure 17 Knighton Street Offices seen from the north

Looking south. Truncated main range on right



Figure 18 View of the earliest hospital buildings
Looking north-east from the third floor of the Knighton Street Offices

The Knighton Street Offices – Outside

The entire four-storey building follows a loosely Georgian classical style and is constructed of red brick with a slate roof. Wooden-framed sash windows follow a repetitive and regular pattern across all of the elevations and have cream coloured limestone sills with gauged brick lintels. This style follows the general style of the original hospital buildings which it was clearly designed to compliment. The ground floor windows are taller reflecting the use of the ground floor as communal spaces with smaller domestic rooms on the floors above. The bricks are laid in an English bond consisting of alternating courses of headers and stretchers. Limestone string courses above the ground and second floor windows break the starkness of the brick walls. Pedimented bays project beyond the wall line at various points of symmetry around the building. The chimney stacks are relatively plain and functional and sit astride the ridges.

The 1910 range

As discussed, the original 1910 range consisted of a long 23 bay wide building with a central projecting bay with a pillared entrance in the centre and flanking projecting bays either side (See Figure 5). The entrance on the south facing elevation, and everything west, has now been removed leaving only the eastern end (Fig. 19). Only one projecting bay now survives which has limestone quoins and an angled ground floor bay (Fig. 20). The later east wing extension is keyed into the original range leaving very little evidence of this modification. Similarly, the original hipped roof has been modified to form a continuous ridge with the later extension. Despite the loss of the western end, the south facing elevation is remarkably unchanged with only one ground floor on the west being modified to provide a fire escape. The small openings to the basement also

appear to have had new grilles added in some places replacing the metal-framed tilting windows.

The removal of the western part of the building has resulted in a crude west facing elevation covered with grey cement render and modern non-matching Fletton type bricks (Figs 21 and 22). On the north side of the 1910 range this scarring left by the partial demolition shows where one of the central rear wings extended to the south. The map shows that this missing wing was slightly wider than the flanking wings and may have had an important entrance facing towards the hospital site. One of the former light wells remains with windows on each floor facing westwards into it (Fig. 23). Because of the demolition only part of the light well remains. A single storey connecting corridor runs to the north of this light well and, presumably, ran the entire length of the building.

Tucked into the space left by the central and eastern rear wings is the recreation room/theatre which was added in the 1930s (Figs 24 and 25). This is a single storey structure with Crittall windows set out in an Art Deco style reflecting the period when it was built. The western wall of this building is formed by a remnant of the former central wing wall. In addition to the north facing doors and window the room was lit by a large metal-framed circular dome (Fig. 26). The dome has been painted black which may have been simply to shade the room within during theatrical productions or may be an example of Air Raid Precaution blackout measures.

To the west of the recreation room/theatre is the northward extending rear, eastern, wing of the 1910 range (Fig. 27). The north facing windows are smaller sash windows with obscured glass behind which is a toilet block on each floor. Presumably the other wings also had matching blocks. At ground floor level an undecorated doorway now provides the main entrance into the building although its wide appearance suggests that when first built it was more likely to have acted as a service entrance. On the western side of the rear wing is a rectangular projecting block with an ornate roof (Fig. 28). This presently houses a modern lift shaft and, whilst it is possible that it was built for an earlier lift, the presence of sash windows (now blocked) suggests another purpose such as a water tank with service rooms on each floor. A metal fire escape has been added to the north-eastern corner of the wing although the internal layout suggests that this was an original feature. On the eastern side of the rear wing is a projecting bay of identical style to that seen on the main south facing elevation with the only difference being that this bay does not have limestone corner decoration (Fig. 29). This style of bay must have been repeated on the now missing parts of the 1910 building.

The original 1910 range only projected eastwards beyond the rear wing by two bays, when the later south-extending wing was added in the 1930s an additional two bays were added (Fig. 30). Exactly the same style was used for the extension including window treatment, stone stringing and brick courses. The change in brickwork can only be seen by a slightly different weathering of the later bricks suggesting that the joint with the extension would have barely be detectable when first built. At ground floor level on the 1910 range is a small porch leading to a doorway. A bell and painted sign indicates that this may have been a visitor or delivery entrance. The sign was painted in the likeness of a brass plaque and has been repainted at least once in its life (Fig. 31).

The 1930s extensions

Historic map evidence indicates that the flanking wings extending southwards from the 1910 range were constructed in phases. The first appears to have been half of the present

east wing which extended as far as Knighton Street which was soon followed by the remainder of this wing. It is not entirely clear when the now-demolished west wing was added or if it was also built in one phase or in two. Map evidence suggests that it was around the time of the second extension to the east wing. As seen with the north face of the 1910 range, great care seems to have been taken to create a matching and seamless extended building.

The west facing elevation of the 1930s extension consists of 12 bays including a projecting bay (Figs 32 and 33). In order to allow light into the basement the ground level has been reduced immediately in front of the building in the same way as seen on the 1910 range. The earliest part of the wing consisted of 5 bays with the southernmost bay having windows to the toilet blocks on each floor. The slightly later 1930s extension had a projecting bay of the same style as the 1910 range but with the exception of having its three-sided bays extending to the second floor height rather than being just a ground floor feature (Fig. 34). This projecting bay also has French windows at ground level with a concrete bridge leading from the doors across to ground level (Fig. 35). The simple bridge has a distinct flowing 1930s style.

Because the initial 1930s extension butted against the 1910 range no joint can be seen. However, the joint between the two 1930s extensions shows that great care was taken to create a larger but homogenous building. The joint between the extensions is barely visible and only detectable by the use of slightly wider bricks on each header course (Fig. 36).

At the southernmost end of the east wing there is evidence that there was provision for extending the building even further southwards. The south facing gable end has alternating brick courses at each corner which would allow for easy keying in of new brickwork (Fig. 37). The stone string courses also project slightly too. The bricks used in the plain gable end wall are of lower quality and have been affected by frost and weather which suggests that they were not intended to be exposed for long before another extension was added. These suggest that each phase was carefully thought out with the intention of adding to each phase.

The east facing elevations of the 1930s extensions follow the general style of the rest of the building with one significant difference of a decorative ground floor bow-fronted window. The earliest 1930s phase is fairly plain with seven bays including the toilet block windows at its southern junction with the later phase (Fig. 38). The stone detailing is present but no bay. The later phase of the extension is dominated by a projecting bay with an attractive bow window at ground floor level (Figs 39 and 40). The bow window and bay has received a much lighter, almost Adam style, decorative touch than the rest of the building (Fig. 41). At present it is almost hidden behind a modern building but when first built, according to the 1938 map, it faced eastwards towards a large open space (see Figure 10). Beneath the wooden-framed window are panels of decorated lead above mahogany doors to the basement. At first floor level scalloped fan decorative panels can be seen (Fig. 42). The third floor of the bay is slightly recessed with curved alcoves holding a pair of stone urns (Fig. 43).

Descriptions and photographs of the internal details follow the external photographs.



Figure 19 South facing elevation of the 1910 range
Looking north. The original main entrance was to the left of the current edge of
building. Compare with Fig. 5. See also Appendix 1



Figure 20 Bay on south facing elevation of 1910 range
Looking north-west. 1m scale



Figure 21 South facing elevation of the 1910 range
Looking north-east. Later east wing extension on right



Figure 22 Scarring left on north side of 1910 range
Note the new bricks on the right mark where one of the rear ranges extended towards the white van in the foreground. Looking south. 1m scale



Figure 23 North side of the 1910 range. Former light well
Looking east



Figure 24 Rear of the 1910 range and 1930s theatre
Looking south-east. Clinical Sciences building on right.



Figure 25 Close-up of the north facing elevation of the theatre
Looking south



Figure 26 Round dome rooflight of the recreation room
Looking north from second floor. Original hospital buildings on far right



Figure 27 Rear, eastern, wing of the 1910 range
Looking south-west. Corner of Knighton Street Outpatients Building on left



Figure 28 Rear, eastern, wing of the 1910 range
Looking north-east. The projection holds a modern lift shaft. Recreation room roof on left



Figure 29 East facing elevation of rear wing, 1910 range
Looking west



Figure 30 North facing elevation of 1910 range and later extension
Looking south. The joint between the 1910 range (on right) and the 1930s extension (on left) is shown
by the arrow



Figure 31 Porch on north face of 1910 range
Looking south. Inset: detail of doorbell and sign



Figure 32 West facing elevation of 1930s extensions
Looking east. 1910 range on left. Compare with Figure 33



Figure 33 East wing of the 1930s range soon after completion
Probably taken from the first floor of the now-demolished west wing. Source J. Currington, LRI



Figure 34 Detail of the 1930s extension west facing bay
Looking east. Note the small bridge from the French windows. 1m scale



Figure 35 Bridge leading to the 1930s bay
Looking north. 1m scale



Figure 36 1930s west facing wing, joint between the two phases
Looking east. Arrow points to the joint, earliest extension on left



Figure 37 South facing gable end of 1930s wing
Looking north-west. Note the alternating projecting brick courses for future keying of new brickwork



Figure 38 East facing elevation of earliest 1930s extension phase
Looking north-west. Rear of 1910 range visible above the white van. Outpatients Building on right



Figure 39 East facing elevation of later 1930s extension
Looking north-west



Figure 40 East facing elevation of later 1930s extension
Looking south-west



Figure 41 Detail of bay window
Looking west



Figure 42 Decorative detail of east facing bay
Looking west



Figure 43 Decorative urn at third floor level
Looking west

The Knighton Street Offices – Inside

As noted the building consists of four storeys plus a basement. For the purposes of this report each floor will be dealt with as a whole rather than separating it into phases of construction.

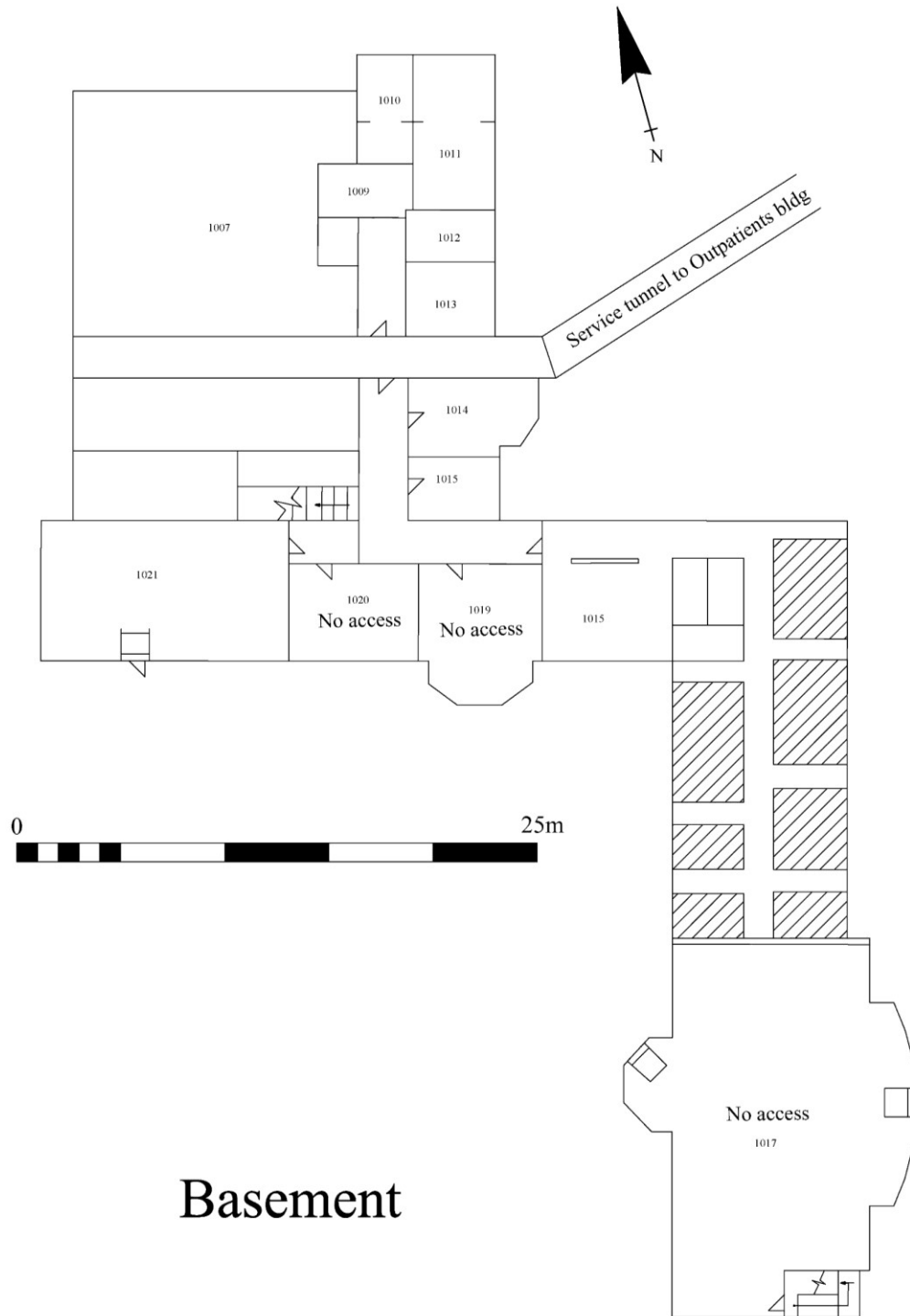
At the time of the survey the building was in use for a range of offices with some ground floor teaching and meeting rooms using the larger spaces. With the exception of modern lighting the building has undergone remarkably little in the way of structural alteration and modification since its use as a nurses' home in the mid to late 1980s.

Because the original main entrance has been demolished, the rather inconspicuous entrance at the northern end of the rear wing now faces northwards towards the main hospital.

Basic floor plans were supplied by the client showing room numbers allocated by the Estates Department. These have been used for this report although, in some cases original number plates on doors indicate a different number.

Most rooms were accessed during the survey with the exception of a small number for which keys could not be obtained. No access to the roof space could be gained safely. A small asbestos risk was present in the basement meaning that appropriate masks and monitoring equipment had to be used. A minimal amount of time was therefore spent in the basement and therefore photographs without the use of a scale were taken here.

The Basement



Basement

Figure 44 Basement plan
Modified from drawing supplied by client

The basement is reached via a set of stairs within the corridor to the rear (north) of the 1910 range. Despite being part of the service area of the building the wooden handrail is still of good quality and matches the rest of this staircase which continues up to the top floor (Fig. 45). The basement is divided into a number of low-ceilinged corridors and small rooms reflecting the layout of the floors above. In most cases the walls are bare or painted brick with concrete floors and cast concrete ceilings.

In the north-east part of the basement is the space beneath the recreation room/theatre which has a step in the ceiling reflecting the sunken floor of the room above (Fig. 46). This is a later extension beneath the 1930s room and contains a number of commemorative plaques and stone as discussed earlier.

The modern lift shaft extends down to the basement as well as to all floors above (Fig. 47). Very few original fittings, if any were ever present, survive although some panelled cupboard doors are present in the north-east corner of the basement in Room 1012 (Fig. 48).

A low and narrow service tunnel runs from east to west following the line of the 1910 range. This was not entered but could be seen to turn towards the Knighton Street Outpatients Building at its eastern end (Fig. 49). It could not be seen how far west beyond the limit of the current building the tunnel extends although it presumably ran the length of the entire building.

At the western end of the basement is a large boiler room (Room 1021) which lies beneath the 1910 range (Fig. 50). A set of wooden steps leads out to the front, south face, of the building. The adjacent rooms were locked and could not be entered. The eastern end room below the 1910 range (Room 1015) appears to have been the original coal store and has a coal chute on its eastern wall (Fig. 51). The addition of the 1930s extension meant that this was blocked by the new floors above.

A corridor leads past the coal store room and turns to the south to enter the space beneath the first phase of 1930s extension (Fig. 52). The basement here consists of a narrow corridor with shoulder-high shafts on either side leading to small openings. The rest of the area beneath this phase appears to be solid and has no access. The end of this corridor stops at a brick where the later 1930s phase begins. No access could be gained into the adjacent space and the two basement areas are not interconnected.

The description of the ground floor follows the basement photographs.



Figure 45 Basement stairs looking up towards ground floor
Facing west. Note Wooden hand rail



Figure 46 Basement room beneath the theatre
Looking north-east. Note the step in the ceiling



Figure 47 Basement corridor with lift shaft on left
Looking north-west



Figure 48 Basement: panelled cupboard in Room 1012
Looking north-east



Figure 49 Basement: service tunnel
Looking east. Corridor leads towards the Outpatients Building



Figure 50 Basement: Room 1021 beneath 1910 range
Looking south-west



Figure 51 Basement: coal store and former chute
Looking south-east. Blocked chute on left hand wall



Figure 52 Basement: corridor beneath 1930s extension
Looking south

The Ground Floor

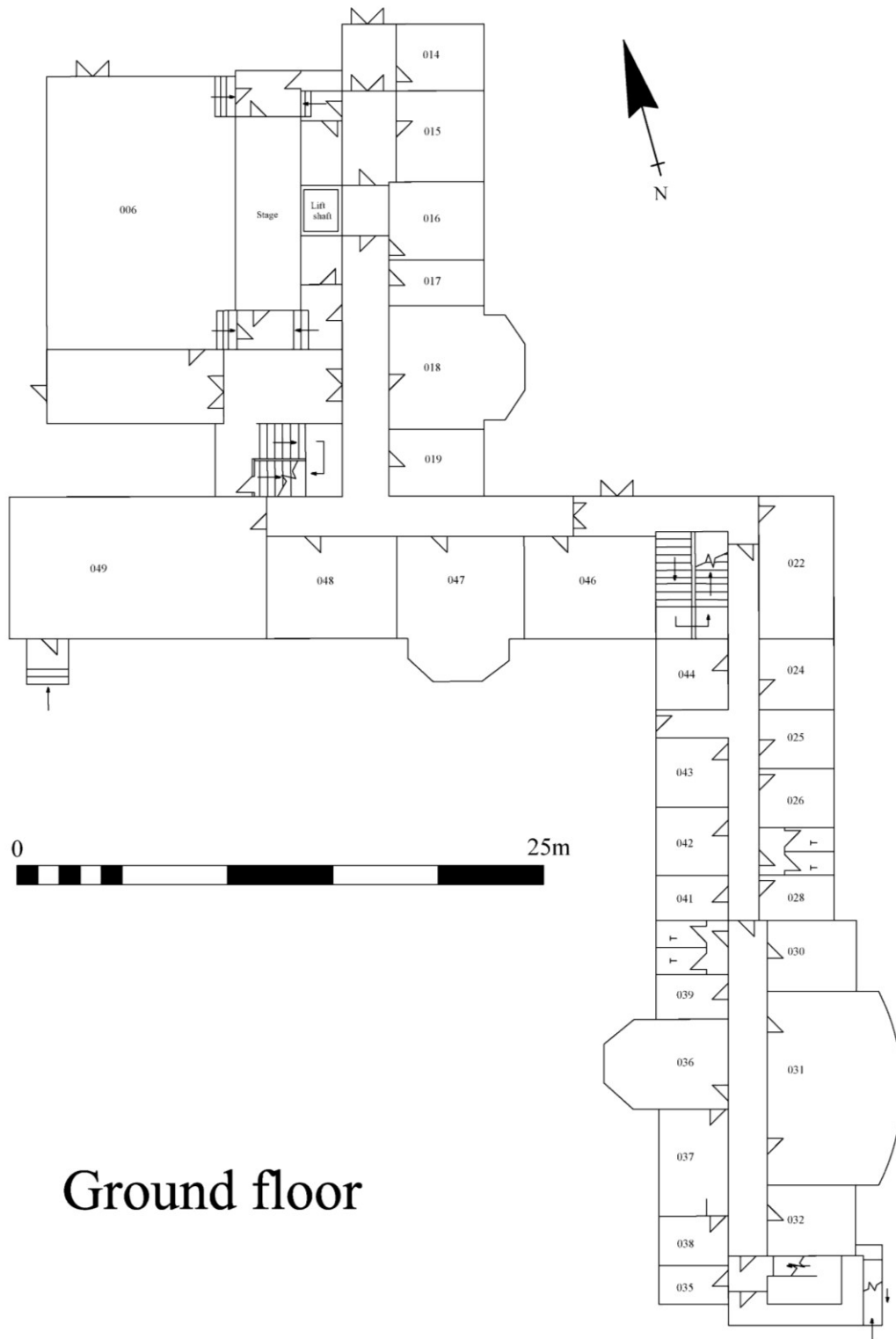


Figure 53 Ground floor plan
Modified from schematic plan supplied by client

Rather more than any other floor the ground floor has been affected by the removal of the western part of the building. This is also the floor which has been most affected by its modern use with the insertion of lowered false ceilings at the height of the former picture rails. The main entrance corridor leading in from the north was clearly built with a lower importance than it had when first built in 1910 (Fig. 54). Despite this it now contains the plaque described in Figure 4 which commemorates the opening of the building. It seems likely that this plaque was once located in the main entrance. A small lift shaft (described in Figure 28), which is likely to be modern, leads off from this corridor.

On the eastern side of the 1910 rear north to south corridor are a toilet block and small office. The office, with a moulded door surround, is larger than the bedrooms on the upper floors and may always have functioned as an office. In common with a number of ground floor windows on the east side of the building the lower panes of the sash windows have obscure glass, perhaps to block views either into or out of the building (Fig. 55). Further along the east side of the corridor is a larger room fitted into the projecting bay on the east elevation (Fig. 56). This room has a tiled fireplace with wooden surround and mirror along with matching cupboards either side of the fireplace. No other fireplaces have survived in the building. The room has plaster decorated supporting beams across the three-sided window (Fig. 57). The level of decoration and large fireplace suggests a communal use for this room. Early photographs of similar bayed rooms on the floors above describes such rooms as being sitting rooms.

On the west side of the 1910 rear north to south corridor are a series of doors which lead into what appear to have been adapted into small dressing rooms to serve the recreation room/theatre to the west. More of which later. A pair of glazed double doors also leads westwards to the east to west corridor which, when first built, ran along the northern side of the 1910 range (Fig. 58). The corridor has a pink terrazzo floor with a black and pink border which is probably part of the original design. The western end of this corridor now stops at a tall archway which was blocked when the rest of the range was demolished (Fig. 59). On the south side of the corridor are sash windows looking out into the light well seen in Figure 23. On the north side are a series of blind arcades which may originally have held more sash windows until the recreation room/theatre was built against this wall. An archway to the south of this corridor leads to the foot of the stairs up to the next floors (Fig. 60). The stairs are pink terrazzo with integral moulded noses and a solid but decorative hand rail.

A small doorway on the north side of the east to west corridor leads into the recreation room/theatre which was added as part of the 1930s extension phase (Fig. 61). At present the large room is full of racking but did until relatively recently housed a small museum dedicated to the history of the hospital. Along the east side of the room is a small stage with wooden doors and steps either side (Fig. 62). Early photographs show the room as being significantly larger with a removable partition along the west wall (Fig. 63). The demolition of the west part of the building means that this partition has been replaced by a solid wall. The early photographs also show the large circular dome with clear glass. At the time of the survey it had been painted black either as a wartime blackout precaution or perhaps in order to create a darker room for shows (Fig. 64). The Crittall windows on the north wall are original although the emergency fire doors are modern. Above the windows is a curtain pelmet and part of the rail although no curtains survive. The room has a lower floor level than the adjacent corridor which is reached via two wooden steps (Fig. 66). Along the east side of the room is the stage which is reached by a set of central wooden steps or from two rooms either side of the wings. The stage

is framed by a moulded wooden Art Deco frame with similar design and marquetry repeated on the doors either side (Fig. 67). The stage appears to have a very slight rake on it along with many features which would allow the nurses to put on amateur dramatics shows. Recessed into the front of the stage are three narrow hinged boards which can be lifted to reveal the coloured footlights (Fig. 68). Burn marks on the underside of the boards show where the lights have been accidentally turned on without lifting the boards. On the south side of the stage is the curtain winding apparatus and light switches (Figs 69 and 70). The stage doors to the wings have inlaid wood borders and oval porthole style windows to allow an inconspicuous view of the stage. Above the stage are sets of coloured lights, spotlights and the curtain rail (Fig. 71). For films and lectures there is also a drop down projector screen. A number of other hooks indicate where backcloths could have been hung. At the time of the survey the two side rooms were full of dismantled furniture and no access could be obtained to the two other small rooms which lead out to the north-south corridor.

At the southern end of the 1910 north to south entrance corridor is the junction with the east to west corridor serving the rooms on the main range (Fig. 72). At the west end of this corridor is the *Beech Room* (a modern name for Room 049) which fills the entire width of the 1910 range. The room has decorative capitals to its supporting pillar and similar decoration to beams and corbels (Fig. 73). It is presently used as a lecture and meeting room but early photographs indicate that this, or matching rooms, were used as the nurses' sitting room when first built (Fig. 74). This is one of the few rooms with moulded plaster detailing and as such was probably intended to be seen by numerous people (Fig. 75). Despite this decoration the skirting boards are relatively plain and functional giving away the essential practicality of the building.

Along the south side of the 1910 east to west corridor are two large rooms set either side of a room with a bay window. The panelled doorways into these rooms have moulded wooden surrounds as do those in the north south corridor (Fig. 76). The 1910 corridors do not have skirting boards but the floor edges curl up towards a moulded plaster bead decoration running approximately 10cm above the floor height. The two side rooms have two windows facing south and fireplaces with no fittings (Figs 77 and 78). Either side of the fireplace are low fitted sideboards and cupboards with bare wood doors of the same style seen in the room seen on the north to south corridor. This style is a common feature occurring throughout the building.

The central office with the bay window lacks any original fittings with the exception of a moulded beading at picture rail height (Fig. 79). The later 1930s or 1940s brochure suggests that these bay windowed rooms may have served as smaller, more private, sitting rooms (Fig. 80).

On the north side of the east to west corridor are sash windows and the small doorway with a porch shown in Figures 30 and 31 (Fig. 81). The junction between the 1910 phase and the 1930s phase cuts across the corridor at this point but the joint is seamless. Immediately to the east of the 1910 joint are a set of stairs up to the floors above. These are part of the 1930s extension and, although they have the same moulded handrail as the earlier stairs, the steps are of polished concrete rather than terrazzo (Fig. 82).

Beyond the stairs the corridor turns by ninety degrees to form a long north to south corridor running the entire length of the two 1930s phases (Fig. 83). Plain doors with small rectangular fanlights lead off from both sides of the corridor. It is not clear if the doors were once panelled and now have modern smooth coverings attached. Most of the fanlights have solid infilled panels but it is easy to imagine that these would have

been glass to allow the matron to know who was awake after lights out. This corridor does not have the moulded plaster beading detail at skirting level and the door frames lack much of the moulded detail seen in the 1910 range. The northern half of the corridor is fairly narrow as far as the junction between the two 1930s extension phases half way along. At this point the corridor widens slightly (as does the whole wing from this point southwards) (Fig. 84).

Either side of the northern end of the corridor are seven small rooms of varying sizes. It is possible that their prime position and variable sizes meant that they were intended for use as bedrooms by senior staff. Most lack any surviving fittings although Room 044, which is adjacent to the stairs, has a small cupboard below the stairs with a bare wood panelled door of 1930s style (Fig. 85). The style of the door panelling may indicate what the corridor doors may have been like. Many rooms within the 1930s extension have retained their, now non-functioning, light switches of semi-industrial style (Fig. 86). Although lacking many fittings almost all rooms, on this floor and the floors above still have a tiled splashback surround set to the side of the window (Fig. 87). No fittings remain and all have been painted over but old photographs indicate that a small sink was fitted here (Fig. 88). The rooms also have high ceilings and a wooden picture rail. At the end of the first 1930s phase extension are the toilet blocks. Currently these have a range of uses but appear to have been built as toilets, wash rooms and stores. The floors still have pink and black terrazzo which is the same as in the 1910 range (Fig. 89).

As noted, the corridor widens south of the joint between the two 1930s phases. On the east side of the corridor is the large room with the bow window seen in Figs 39 to 41 above. This room is presently used as a lecture room but early photographs suggest it may have been used as a writing room (Figs 90 and 91). Presently the floor is carpeted but the earlier photograph shows wooden block flooring. Beneath the window is a low cast-iron radiator which, in early photographs, can be seen as one of a number fitted beneath a curved window seat that has since been removed (Fig. 92). The room is sparsely decorated but has retained its original picture rail. Along the western side of this room is a partially glazed wood and glass partition to the corridor (Fig. 93). It is not clear if this is original or has been modified.

On the west side of the corridor is the ground floor room with the three-sided bay windowed room with the French windows (Fig. 94). The presence of the access to the outside suggests that this was likely to be another communal sitting room. The room has retained its picture rail but has no other original fittings. South of this room are more toilets and access to the modern fire escape.

The first floor is discussed after the ground floor photographs.



Figure 54 Ground floor: main entrance

Looking north toward external door. Note the plaque on the right wall – see Figure 4 the doorway just behind the orange bin leads to the rear east to west corridor



Figure 55 Ground floor window detail

Looking north-east. Room 015



Figure 56 Ground floor: fireplace in Room 018
Looking north-west



Figure 57 Ground floor: window and ceiling detail
Looking east



Figure 58 Ground floor: rear east to west corridor
Looking west. The archway on the left leads to the stairs to the basement and upper floors. See also Figure 59



Figure 59 Ground floor: east to west corridor
Looking west towards the blocked arch which continued across the entire 1910 range. The blind arcades on the right may have held windows which were blocked following the construction of the theatre



Figure 60 Ground floor: stairs to first floor from the rear east to west corridor
Looking south-west. 1m scale



Figure 61 Recreation room/theatre general view from corridor
Looking north-west. The black shape in the ceiling is the glass dome – see Fig. 26



Figure 62 Recreation room/theatre – stage
Looking south-east. Note wooden steps up to the stage



Figure 63 Recreation room/theatre: soon after being built
Photo taken looking north-east. Note that the present room stops at the room division in the foreground
Source: Leicestershire Hospital virtual website

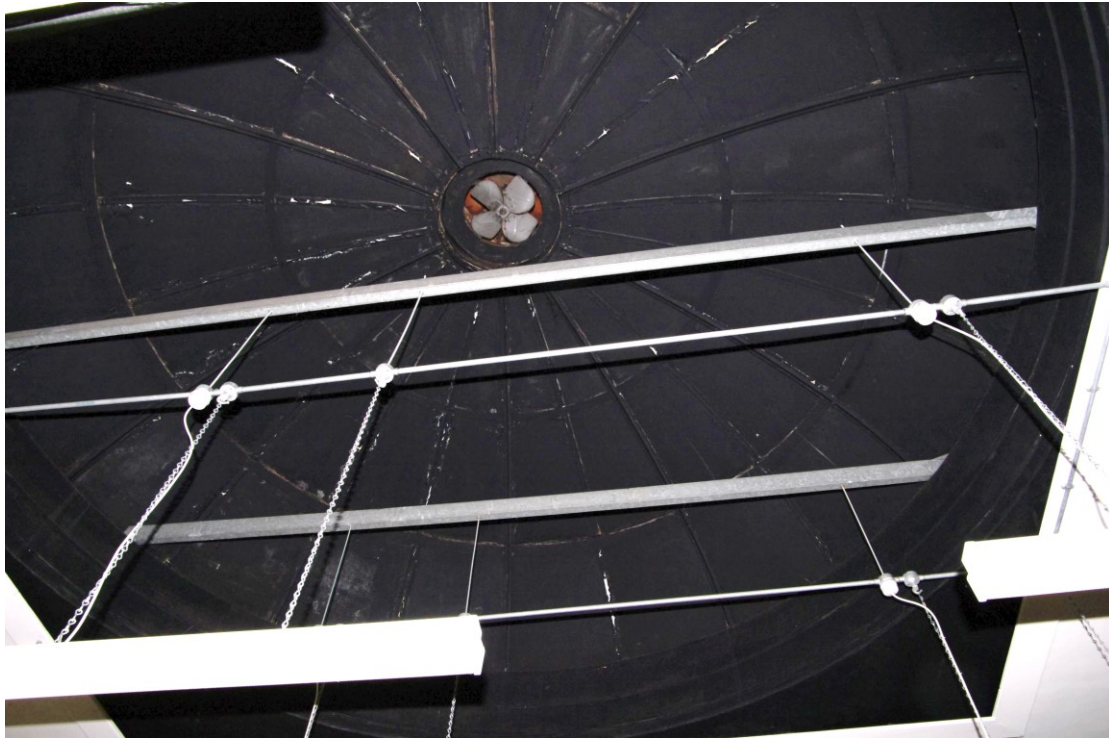


Figure 64 Recreation room/theatre: underside of the central dome



Figure 65 Recreation room/theatre: north wall window detail
Looking north-west. Note the pelmet for the missing curtains. The fire doors are modern.



Figure 66 Recreation room/theatre: stage steps
Looking south-east. Note the step up to the outside corridor to the right. 1m scale



Figure 67 Recreation room/theatre: door to the changing rooms in the wings
Looking east at the southern door. 1m scale



Figure 68 Recreation room/theatre: footlights set into the stage
The board is hinged and drops down to create a flat surface. 1m scale



Figure 69 Recreation room/theatre: stage curtain winding gear
Looking south. Note the door to the left which leads into the wings and changing rooms. 1m scale



Figure 70 Recreation room/theatre: Stage light switches



Figure 71 Recreation room/theatre: stage lights, curtain rails and drop down screen



Figure 72 Ground floor: 1910 east to west corridor
Looking west. The doorway to the right leads to the 1910 north to south corridor. The closed door at the far end of the corridor leads to Room 049 currently known as the Beech Room



Figure 73 Ground floor: Room 049 the Beech Room
Looking south-west. 1m scale. See also Figure 74



Figure 74 Ground floor: typical large sitting room which may be the Beech Room
See Figure 73. Source: Leicestershire Hospital virtual website



Figure 75 Ground floor: Room 049 decorative capital



Figure 76 Ground floor, 1910 east to west corridor: door detail
Note also the moulded plater skirting detail. 1m scale



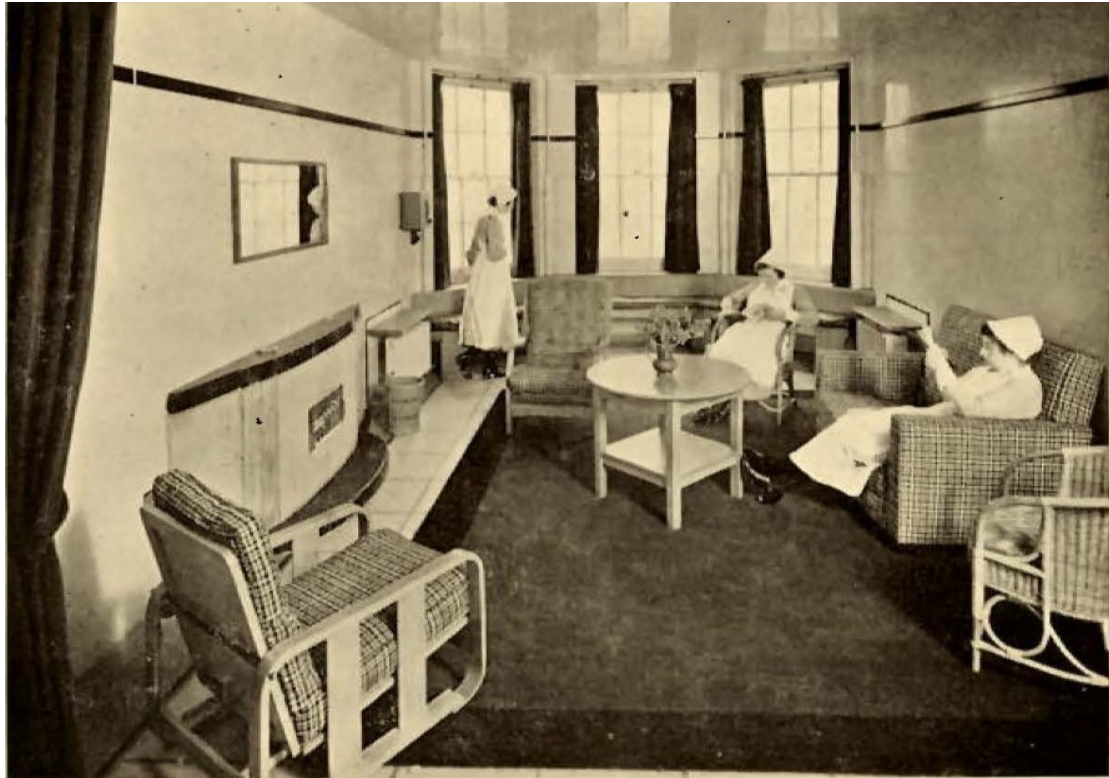
Figure 77 Ground floor, 1910 east to west corridor: Room 048
Looking south-east. Bay window of adjacent room visible through window



Figure 78 Ground floor, 1910 east to west corridor: Room 048 window detail
Looking south-west



Figure 79 Ground floor, 1910 east to west corridor: Room 047
Bay window detail. Compare with Figure 80



NURSES' HOME LOUNGE

Figure 80 Smaller style lounge with bay window

Source: J Currington



Figure 81 Ground floor east to west corridor

Looking west. The external doors are to the right. Stairs to upper floors on left. The joint between the 1910 and 1930s range is approximately where the fire extinguishers are



Figure 82 Ground floor: 1930s extension stairs
Looking south. 1m scale



Figure 83 Ground floor: 1930s extension north to south corridor
Looking south. The far double doors mark the joint between the two 1930s phases



Figure 84 Ground floor: junction between the two 1930s phases
Looking south. Toilets either side in foreground. Note how the corridor widens beyond the doorway



Figure 85 Ground floor: earliest 1930s phase room
Looking north-east in Room 044. Note panelled door to cupboard beneath the stairs



Figure 86 Ground floor: 1930s phase light switch

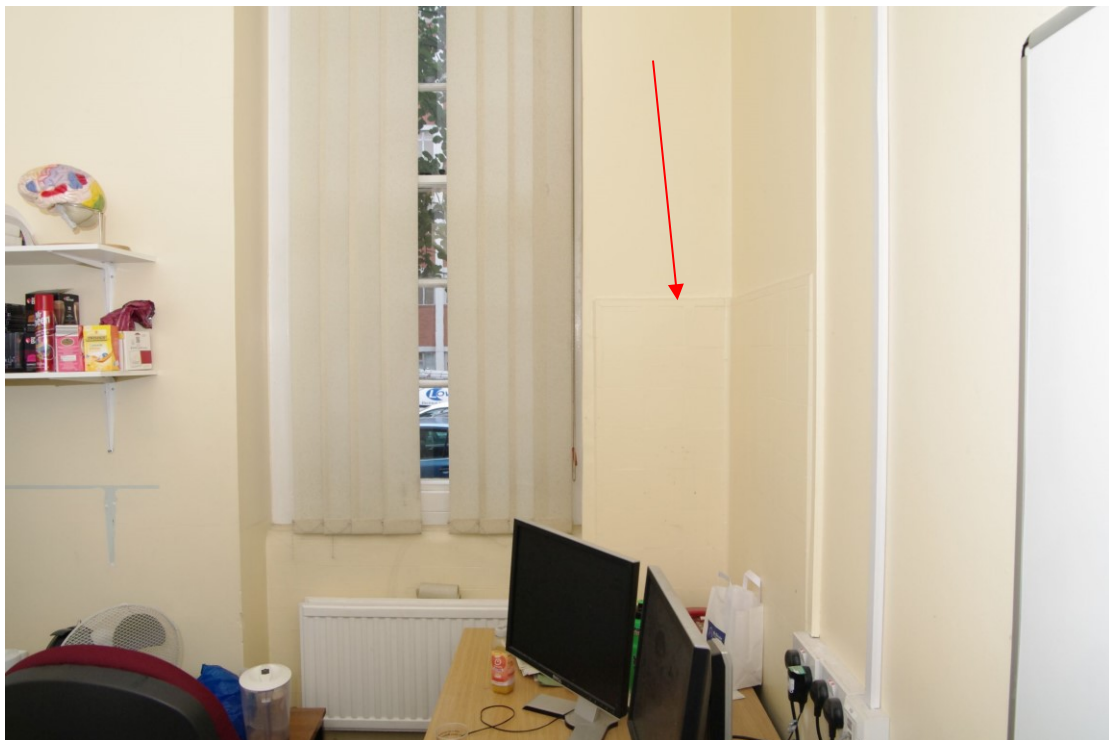


Figure 87 Ground floor: bedroom tile splashback

Looking west. Arrow points to painted over splashback. Note also the tiles behind the non-original radiator. Room 042. See Fig. 88



Figure 88 One of the nurses' larger bedrooms with tile splashback
This room has two windows and tiles behind the radiators. Most rooms had one window. Source: J Currington, LRI



Figure 89 Ground floor: south end of first 1930s phase
Looking east. Note terrazzo floor



Figure 90 Ground floor: bow-windowed room
Looking south-east. Compare with Fig. 91



Figure 91 Bow-windowed room in its original layout
Source: J Currington, LRI



Figure 92 Ground floor: bow window detail
Looking east. Note the low radiators. See also Figure 91



Figure 93 Ground floor: bow window room partition with corridor
Looking north-west

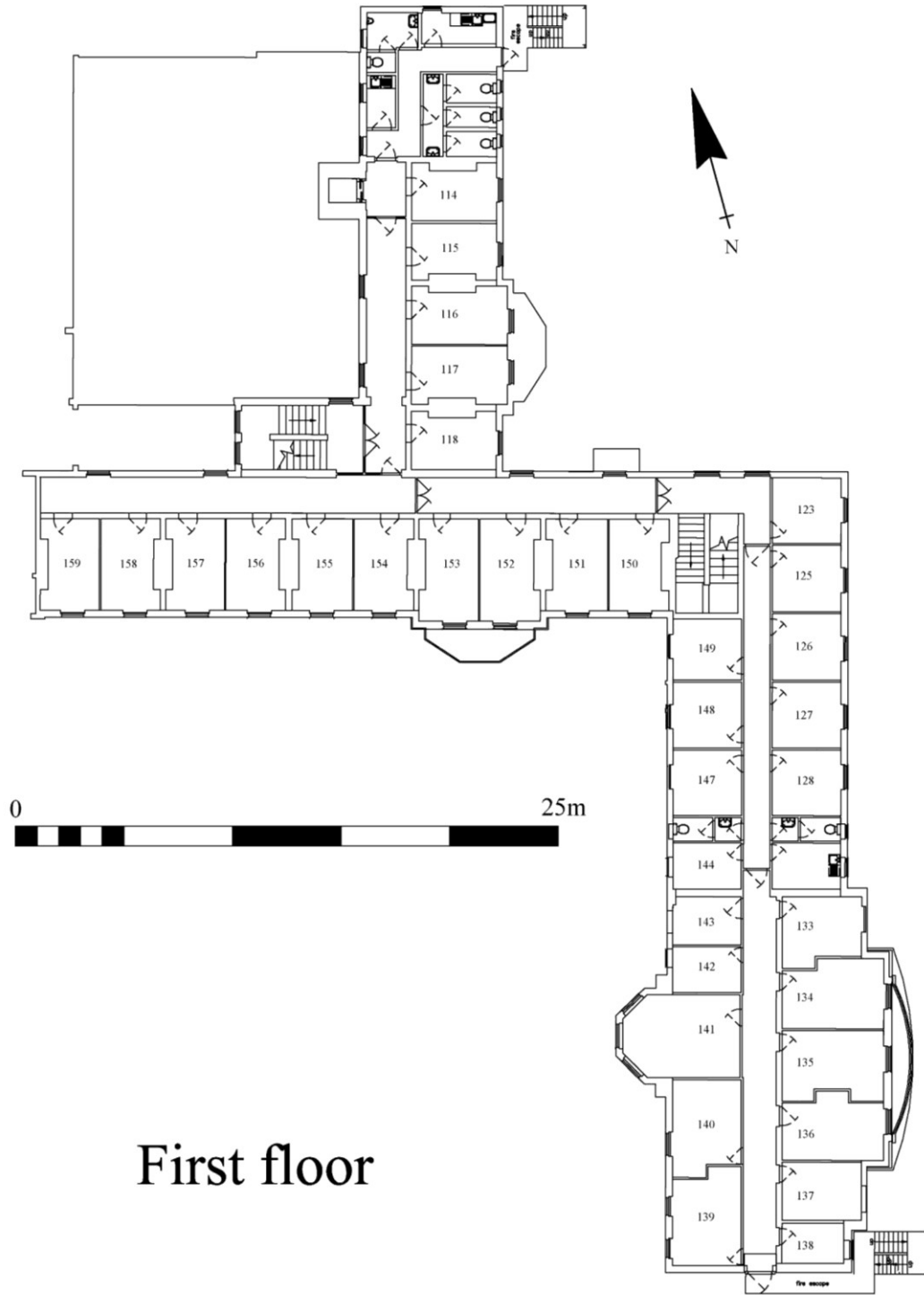


Figure 94 Ground floor: bay window in later 1930s extension
Looking north-west. Note the central French doors

The First Floor

The first floor plan follows the same basic outline as the ground floor with the exception that the recreation room/theatre and its adjacent east to west corridor are both single storey structures. Similarly the bay windows on the 1910 ranges are also only single storey structures.

The earlier 1910 bedrooms are reasonably-sized rectangular rooms set along one side of the corridor whilst the 1930s phase rooms are smaller, squarer and much more cell-like (in the monastic sense) in their layout (Fig. 95). As with the larger rooms downstairs it is possible that these rooms slightly more spacious rooms were reserved for more senior staff or student nurses in later stages of training. Access from the ground floor is via the two flights of stairs from the 1910 phase (Fig. 96) and the first 1930s phase. The 1910 stairs are separated from the corridor by glazed panels and doors, presumably to reduce noise and perhaps reduce the spread of fire, whereas the later stairs are open.



First floor

Figure 95 First floor plan
Modified from plan supplied by client

The 1910 rear, north, to south corridor is relatively plain with less-pronounced moulding around the doors and no moulded plaster detail at skirting level (Fig. 97). Beneath each sash window is a wooden panelled detail to break the otherwise plain corridor. A transverse arch supports the main wall of the 1910 range. Along the east side to the corridor are the larger bedrooms many of which still retain their fitted wardrobe and cupboards (Fig. 98). The wardrobes are bare wood of similar style to those seen on the ground floor. The rooms in this corridor do not have the tiled splashbacks seen elsewhere but do have chimney breasts although these are all blocked. Early photographs indicate that the 1910 range rooms did not have plumbed sinks in each room but had a dressing table and ewer (Fig. 99).

At the northern end of the 1910 north to south corridor is the toilet block with the modern lift shaft. Although the toilet fittings are modern, the layout and cubicles appear to be original (Fig. 100). A passageway leads through the toilet block to the external fire escape which also appears to be an original feature.

The 1910 range east to west corridor is very similar to the rear corridor with large rooms opening to the south of the corridor (Fig. 101). These rooms do have tiled splashbacks and most also retain their fitted cupboards beside the blocked fireplaces (Fig. 102). Although a fireplace is shown in early photographs only a perforated air-brick is now present (Fig. 103). Before being used as offices some of these offices may have been used as medical consulting rooms as there are rails for curtains behind the doors in some rooms (Fig. 104).

The east to west corridor junction with the 1930s range is marked by a set of modern fire doors although marks at floor level suggest that there have always been doors at this point. East of the doors are the 1930s stairs (Fig. 105).

As on the ground floor the 1930s extensions have smaller square rooms either side of the central corridor which widens where the later 1930s extension starts. Each room has a, now obscured, rectangular fan light above each door. The doors also have smooth coverings attached to each side which may suggest that the original panelled doors survive beneath. What seem to be the original door number plates are still attached in most places. These consist of a brass frame, to hold the nurses' name or title with the room number above it (Fig. 106). Despite this being the first floor the rooms are numbered in the 200 range, presumably the ground floor (i.e. Floor One) rooms were numbered from 100 upwards. A common feature in the eastern rooms of the earliest 1930s phase is a fitted corner cupboard in the south-west corner (Fig. 107). Because these rooms do not have fireplaces there would not have been space for a cupboard to the side of the chimney breast and perhaps a corner cupboard was thought to be more suitable. Each room also has the same type of light switch as seen in Figure 86 above. Corner tiled splashbacks are also present in each room as are wooden picture rails.

On the western side of the first 1930s phase corridor not all corner cupboards have survived. Despite this the tiled splashbacks and picture rails are still present as are many light switches. In some places a simple brass coat hook is still present on the inside of the door (Fig. 108).

At the junction with the two 1930s extension phases are the toilet blocks. Whilst the ceramic fittings have been renewed the doors are still the original panelled 1930s style doors with original locks (Fig. 109). Other rooms within this block have been re-purposed to provide kitchen facilities.

South of the toilet block the corridor widens into the later 1930s phase extension which has much plainer door surrounds lacking any moulded detail. Attached to the eastern wall of the corridor a small plaque dated 1932 states that £450 of surplus profits from the Leicester Pageant were donated to furnish the suite in this part of the building (Fig. 110). The corridor continues south to the external fire escape.

The first office on the west of the corridor appears to have acted as a store or washroom as it still retains its glazed brick walls (Fig.111). The rooms either side of the corridor in this phase are slightly larger and less consistent in shape which may again represent different grades of staff. The three-sided bay lounge room appears to be of the same style seen on the ground floor (Fig. 112). The rooms/offices above the bow-fronted bay on the east side of the corridor are slightly wider than the other rooms but are otherwise identical in detail. The size of the rooms means that the room in the south-western corner of the corridor has two windows (Fig. 113).

The description of the second floor flows the first floor illustrations.



Figure 96 1910 stairs to first floor
Looking south-east. 1m scale



Figure 97 1910 rear north to south corridor
Looking north. Stairs on left. Toilet block and lift beyond modern door. 1m scale



Figure 98 First floor: 1910 rear north to south corridor room detail
Looking west. Note fitted cupboard. Room 118



Figure 99 Bedroom in the 1910 range
Note the fitted cupboard front left and the ewer instead of a sink
Source: J Currington, LRI



Figure 100 First floor: 1910 rear corridor, toilet block
Looking north. 1m scale



Figure 101 First floor: 1910 east to west corridor
Looking west. Stairs on right. 1m scale



Figure 102 First floor: 1910 range fitted cupboard detail



Figure 103 First floor: east to west corridor 1910 range room
Looking south. Note vent in fireplace



Figure 104 First floor: office on 1910 east to west room
Looking north in Room 151. Note curtain rail on right. 1m scale



Figure 105 First floor: 1930s stairs
Looking south-west. 1m scale



Figure 106 First floor: first phase 1930s north to south corridor. Corner cupboard
Looking west. Note the presence of a smooth covering over the possible panelled door with its number and nameplate (see below)



Figure 107 Typical number and nameplate on each 1930s First floor room
Ground floor: first phase 1930s north to south corridor



Figure 108 First floor: first phase 1930s north to south corridor. West side
Looking east. Note light switch and original coat hook on door. 1m scale



Figure 109 First floor: first phase 1930s north to south corridor toilets
Note paneled door. Fittings shown on right



Figure 110 First floor: later 1930s phase north to south corridor plaque
Plaque attached to eastern side of corridor wall



Figure 111 First floor: later 1930s phase, glazed brick lined room
Looking west in Room 143. The bricks have been painted over



Figure 112 First floor: later 1930s phase former lounge
Looking west in Room 141

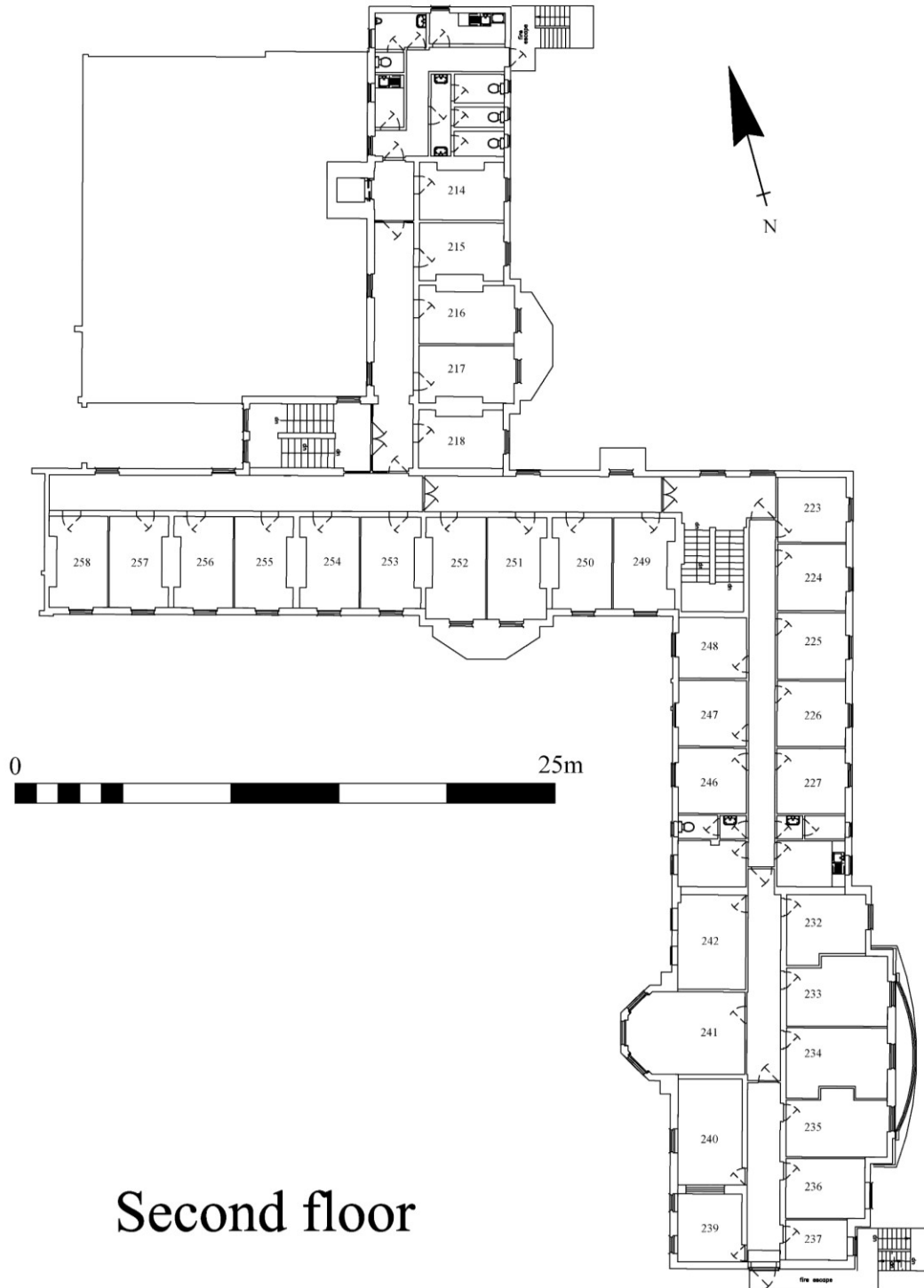


Figure 113 First floor: later 1930s phase south-eastern room
Looking south-west in Room 139

The Second Floor

The plan of the second floor of the Knighton Street Office building is an exact match of the first floor (Fig. 114). As with the floor below the west facing bay extends to the second floor but is only a single storey feature on the south and east facing bays.

Very little physical alterations appear to have taken place on this floor and, if anything, this floor has seen even fewer changes than the first floor. In common with the ground and first floors most fanlights above each doorway have been blocked or obscured where they were originally likely to have been glass. Also most doors have had their panelled faces covered by a single smooth cover. This may be cosmetic or, more likely, as a fire-precaution. Some of the original 1910 panelled doors do however survive and are discussed below. The 1910 offices are generally larger than the first phase 1930s extended rooms. Within the 1930s offices the original, but non-functioning, light switches survive in many rooms. In most cases the high picture rails are also present too. Some fitted cupboard also remain on this floor.



Second floor

Figure 114 Second floor plan
Modified from plan supplied by client

The 1910 stairs lead up to a small enclosed partially glazed landing (Fig. 115). This is a relatively plain and functional structure but, given that a similarly style structure is not seen on the 1930s stairs it seems likely to be an original feature.

The 1910 rear, north to south corridor, has the same room layout as the first floor but on this corridor some of the original panelled doors remain exposed within their moulded doorframes (Fig. 116). Many of the doors also have the brass name and number plates which call this floor Floor 3 (Fig. 117). The corridor is not carpeted and has pink terrazzo floors as seen on the ground floor and the 1910 stairs (Fig. 118).

Within the rooms the stripped wooden fitted cupboards are still present at the side of the chimney breasts (Fig. 119). The second floor rooms also continue the curved coving detail seen on the floor below (Fig. 120). This consists of a slightly curved junction between the wall and ceiling on both side walls but not on the corridor or window walls.

At the north end of the 1910 north to south corridor is another toilet block with a corridor leading out to the external fire escape on the north-east corner (Fig. 121). The modern lift shaft also opens out onto this corridor.

The 1910 east to west corridor also has a pink terrazzo floor with black border decoration. Beneath each corridor sash window is a recessed wooden decorative panel of the same pattern seen on the first floor. Within the offices the same picture rail, coving and (sometimes) fitted cupboards can be seen. In no cases do any open fireplaces survive. This is true for all former bedrooms and smaller sitting rooms across the building.

The 1910 east to west corridor continues eastwards as part of the 1930s extension with the stairs still being bare concrete (Fig. 122). The pink terrazzo floor continues into this phase from the 1910 phase. Beyond the stairs the corridor turns to the south with small rectangular offices/bedrooms either side as far as the central toilet block before widening at the later 1930s phase (Figs 123 and 124).

No corner cupboards survive in the smaller rooms to the north of the toilet block but they do retain their picture rails and brass name/number plates on the doors. Most also have the original light switches.

The toilets have been fitted with new sinks and toilets but still have their original panelled doors. They also have clear glass fanlights above the doors which may show how all room doors were once built (Fig. 125). Former washrooms now perform the function of small kitchens and stores etc.

The most recent occupants of the offices at the southern end of the later 1930s phase corridor were Radio Fox, the hospital radio service. The rooms have been fitted out as a studio and control room along with Green Room and service rooms. No radio equipment was left behind when the organisation left the building to a new base at the Leicester General but some fittings remain. The studio and control room have a fitted desk and glass soundproof window (Fig. 126). The room has a low false ceiling and sound deadening covering to the walls and windows. Beneath the carpet is the original herringbone block flooring (Fig. 127). Although all of the other offices now have carpet, old photographs indicate that this type of flooring should be present in most former bedrooms. A number of original switches and sockets are still present in the two south-eastern end rooms (Fig. 128). These closely match those seen in the ground floor recreation room/theatre which may suggest that these are from the same phase of building. A former service room, which may have been a toilet or store has bare terrazzo floors with a cream and green decoration rather than the pink seen in the east to west corridor (Fig. 129).



Figure 115 Second floor: top of 1910 stairs
Looking south-east. 1m scale



Figure 116 Second floor, 1910 north to south corridor: door detail
Note brass door fittings and fitted cupboard. Room 217



Figure 117 Second floor, 1910 north to south corridor: name and number plate holder
Note that this is Room 217 on the estates plan in Fig. 114)



Figure 118 Second floor: terrazzo floor



Figure 119 Second floor, 1910 north to south corridor: fitted cupboard
Looking west in Room 217



Figure 120 Second floor, 1910 north to south corridor: general view
Note curved coving detail. Looking east



Figure 121 Second floor, 1910 north to south corridor: toilet block
Looking north. Modern lift on left. 1m scale



Figure 122 Second floor: 1930s stairs
Looking south-east



Figure 123 Second floor, first 1930s extension north to south corridor
Looking south



Figure 124 Second floor, later 1930s extension north to south corridor
Looking north. Note how this part of the corridor is wider than the earlier corridor beyond the doorway



Figure 125 Second floor, first 1930s extension: toilet block
Looking east. Note fanlight above panelled door



Figure 126 Second floor, later 1930s extension: Radio Fox studio
Looking north-west. Note false ceiling and sound insulation on walls



Figure 127 Second floor, later 1930s extension: wooden flooring beneath carpet



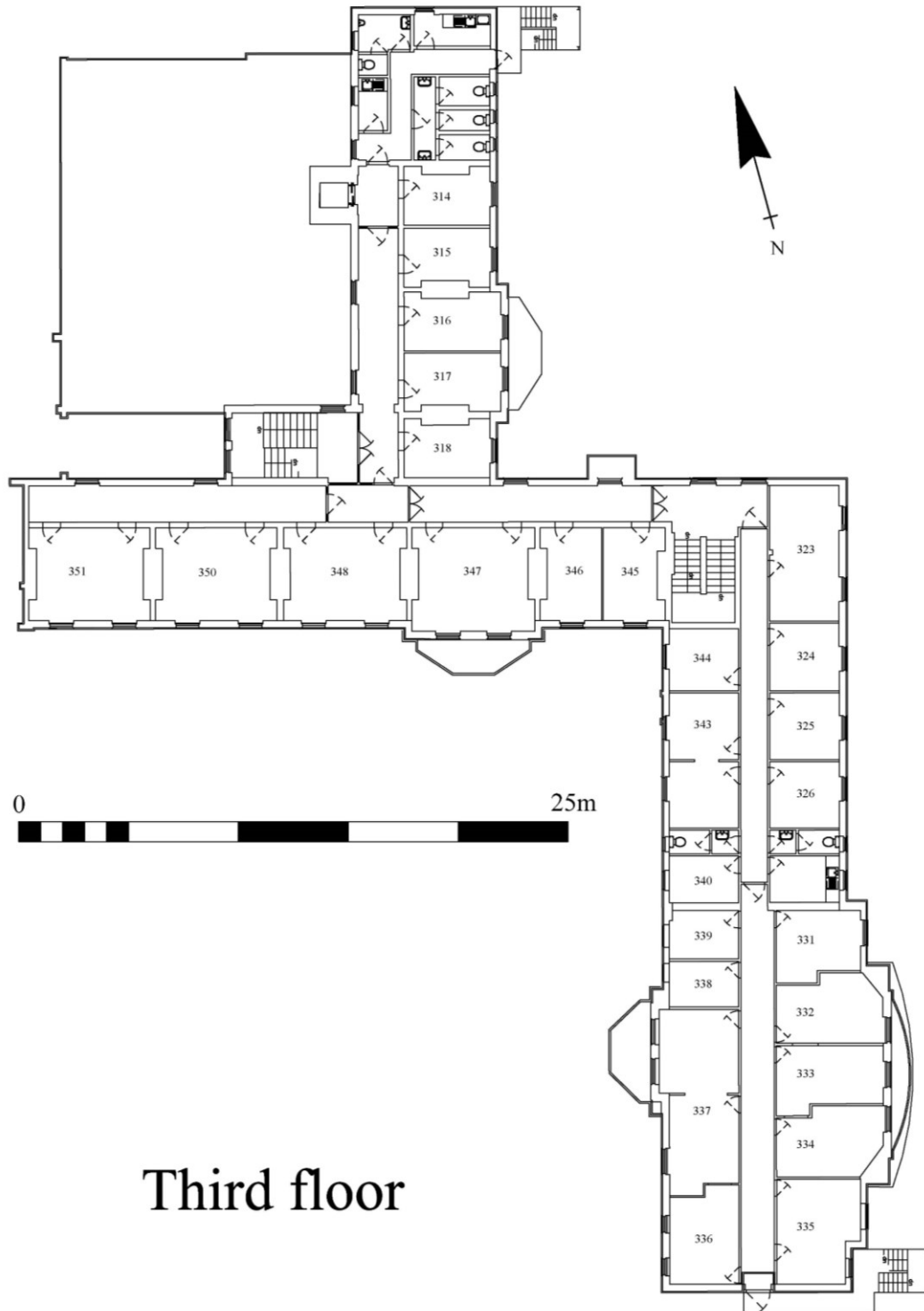
Figure 128 Second floor, later 1930s extension: swith and socket detail



Figure 129 Second floor, later 1930s extension: floor in service room
Looking north-west in Room 237

The Third Floor

Once more this floor matches the plan of the preceding floors the only exception being that the rooms on the 1910 east to west corridor have been enlarged by the removal of some partition walls as discussed below. The uncarpeted corridor floors have the same pink and black terrazzo floor used throughout the rest of the building. A number of doors on this floor still have their original panelled doors visible which have not been covered by modern smooth boards. Despite this being the top, and most remote, floor there is no evidence that there was any differentiation in terms of door mouldings, fittings and other decorative features.



Third floor

Figure 130 Third floor plan
Modified from plan supplied by client

Starting once more at the top of the 1910 stairs the head of the stairs at this point, because it no longer has to support the floor above, is open with square-section plain metal balusters supporting the handrail (Fig. 131). The stairs are still enclosed by the wood and glass partition but there is evidence of an earlier doorway on the floor of the 1910 north to south corridor (Fig. 132). A small archway in the ceiling lies above two infilled holes which appear to have held the bottom supports of a pair of doors. It is not clear if these doors matched those still present at the junction with the east to west corridor but it seems likely.

The 1910 north to south corridor has some panelled doors which also have their original fanlights above them (Fig. 133). The fanlights in this part of the building consist of two rectangular fixed panes and are smaller than elsewhere. Inside the rooms can be seen the bare wood cupboards fitted in the space at the side of the chimney breast (Fig. 134). No curved coving at ceiling height can be seen in the rooms on this floor. The toilet block, modern lift and corridor to the external fire escape at the north end of the corridor are all identical to the floor below.

The 1910 east to west corridor appears to be the same within the corridor area. However, instead of ten rooms to the south side of the corridor eight have had their partitions removed to create four double-sized rooms along with two smaller rooms. The resulting enlarged rooms have (blocked) fireplaces at either end, two windows and two doors (Fig. 135). Care has been taken during this conversion work as the picture rails and skirting boards show little evidence of modification. Similarly the plasterwork on the walls and ceiling show only the slightest imperfections which may suggest that the work was undertaken some time ago. In some cases one of the doorways into the room has had its fanlight blocked whilst the other doorway into the same room retains its glass fanlight.

At the top of the 1930s concrete stairs, at the eastern end of the 1910 east to west corridor, is a set of fire doors. Marks on the wall and floor along with lines in the terrazzo floor show where an earlier door was located in a slightly different position (Fig. 136). The stairs on this floor are open and have the same wooden handrail and iron balusters as the 1910 stairs.

The 1930s north to south corridor widens at the junction between the two 1930s phases as already noted on the floors below. In the later 1930s corridor a small glazed panel on the east side of the corridor wall may indicate where a radiator was located (Fig. 137). It is possible that this floor was significantly colder than the floors below and required additional heating. The comfort of the corridor would not have been helped by the presence of glazed skylights in the corridor ceiling to allow in extra light given by glass panels set in the outer roof (Fig. 138).

With the exception of the toilet block doors, the door panels on this corridor have been covered with smooth sheeting. They do however retain their brass name and number plates which, for this floor, are in the 400 series representing level four of the building. The doors also have glazed fanlights reaching up to the ceiling in the later 1930s corridor but only half way in the earlier 1930s phase. The corridor continues southwards to the fire escape door at the end.

Inside the rooms the original light switches remain in most cases although no fitted cupboards were noted (Fig. 139). The toilet block half way along the corridor, at the junction of the two 1930s phases has received the same modernisation treatment as on

the floors below. One of the rooms, which may have been a bathroom has, as before, painted over glazed bricks to shoulder height (Fig. 140).

The offices above the bow-fronted window in the later 1930s have had doors knocked through to create separate but connected offices which appears to be a later modification. Two of these offices have angled north-east and south-east corners in order to accommodate the large urns sitting outside (Fig. 141). A substantial masonry beam runs across the eastern side of all three rooms which supports the wall plate and roof structure.

On the west side of the corridor the west facing bay window stops at second floor level meaning that this floor has straight walls (Fig. 142). This room has been enlarged by removing part of the southern wall to combine it with the adjacent room.



Figure 131 Third floor: top of 1910 stairs
Looking south-west



Figure 132 Third floor, 1910 north to south corridor: floor detail by stairs
Looking south. The two arrows point to door sockets. Stair doors on right. 1m scale



Figure 133 Third floor, 1910 north to south corridor: door detail
Looking east at Room 318 (450 on the door plate). 1m scale



Figure 134 Third floor, 1910 north to south corridor: office detail
Looking west. Note cupboard and lack of curved coving. The door also has a modern covering



Figure 135 Third floor, 1910 east to west corridor: enlarged room
Looking north-east in Room 350. Note one of the fanlights has been blocked



Figure 136 Third floor, top of 1930s stairs
Looking south-west. 1m scale. Arrow points to location of earlier door



Figure 137 Third floor, later 1930s north to south corridor
Looking north. Noted painted over glazed brick panel in foreground on right



Figure 138 Third floor, later 1930s north to south corridor: skylight
Looking north. Also note the narrowing of the corridor to the earlier 1930s phase



Figure 139 Third floor, earlier 1930s north to south corridor: office detail
Looking west in Room 324. Note fanlight still in place and original light switch



Figure 140 Third floor, earlier 1930s north to south corridor: washroom detail
Looking west. Note painted-over bricks



Figure 141 Third floor, later 1930s north to south corridor: room above bow-window
Looking east in Room 332



Figure 142 Third floor, later 1930s north to south corridor: room above bay window
Looking north-west in Room 337

Conclusion

The remaining part of the building belonging to the former nurses' home is still a large and impressive structure which gives a good indication of how impressive the entire building must have been. It is interesting that the main elevation of the 1910 and subsequent phases were built facing southwards away from the other hospital buildings and towards the rows of terraced houses. It is possible that the long-term plan was always to extend the hospital site southwards across the former houses with this building forming a key component of the larger site. Certainly it would appear that the 1930s phases were built with the intention of being extended. The unfinished southern gable end indicates that they were intending to continue even further south. The care taken to join the different phases so seamlessly also suggests that it was always the intention to extend the building. In most cases the styles matched one another although there are some subtle internal differences such as the bare concrete stairs in the 1930s phase rather than the earlier terrazzo. Other differences may reflect improvements in heating and plumbing such as the lack of fireplaces in the later phases and sinks rather than the pitchers and ewers in the 1910 building.

Map evidence suggests that the surviving east wing was built in two clear phases. What the maps do not show however is whether the west wing was built in a similar two-stage fashion and, if so, did the first phase of the west wing come before the second phase of the east wing? A search of available documents and invoices may help clarify this matter should such documents survive. It is clear that there must have been a gap between the 1930s phases of at least a year or so because they built toilet blocks at the end of the first 1930s phase. The distinct style of the recreation room/theatre would seem to indicate that it is of a similar date to the later 1930s extension rather than the

early one. The available map evidence also seems to indicate that at least the first, eastern, wing was in place before the theatre.

It is not entirely clear why the later 1930s phase was constructed to be slightly wider than the earlier phase or why it had such a decorative window and bay. Map evidence suggests that it was built to face across a long garden or courtyard area extending eastwards to the old Knighton Street junction. It would be interesting to discover if a similar feature was built on the west facing elevation of the demolished west wing.

At the time of this survey the building had no clear main entrance but it seems likely that, in addition to the now-lost south facing entrance, there would have been a larger entrance leading north from the demolished centre rear wing. This would have allowed easier access to the other hospital buildings.

Overall the Knighton Street Offices are the remnant of what was an impressive and attractive building which is closely linked to the growth and development of the Leicester Royal Infirmary. Historical and documentary evidence shows that the hospital site and the growth of the building itself have been strongly influenced by available (and lack of available) space throughout the history of the LRI. The surrounding hospital continues to evolve around the building to such an extent that it now forms something of an island within the core of a significantly more modern hospital.

Acknowledgements

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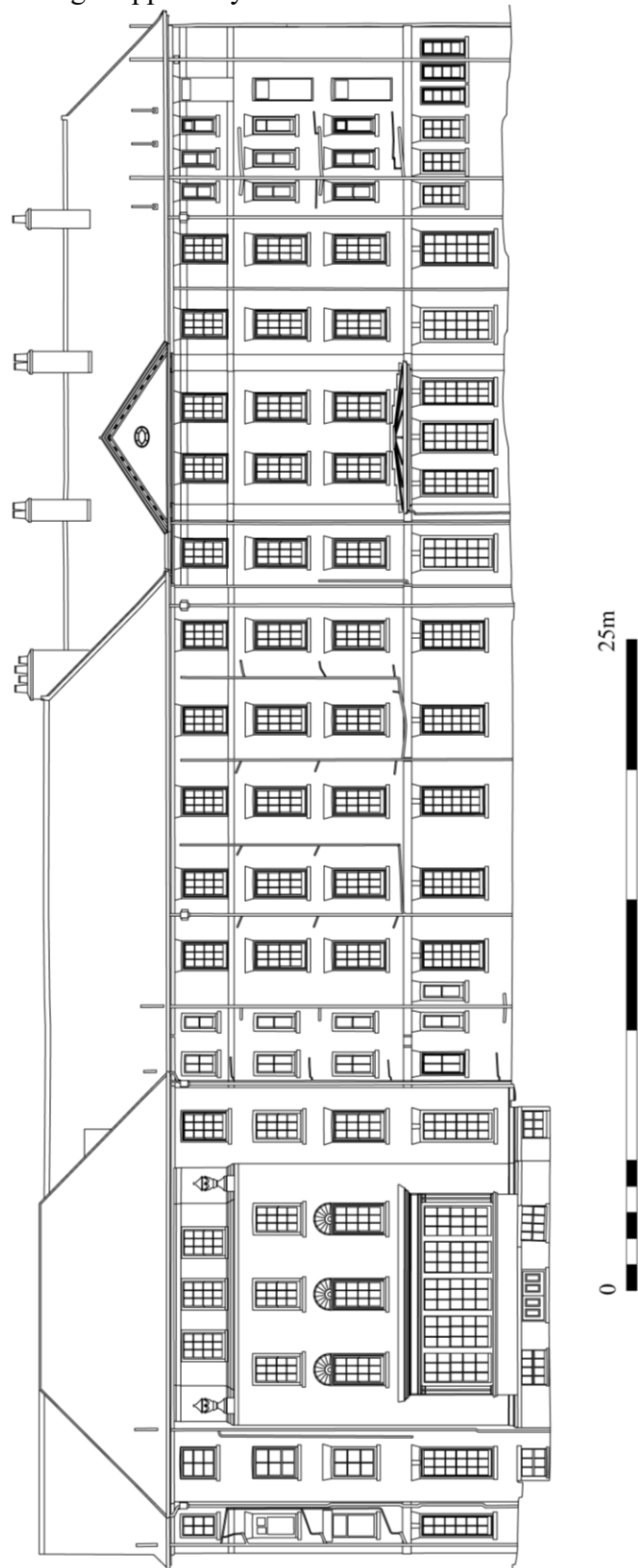
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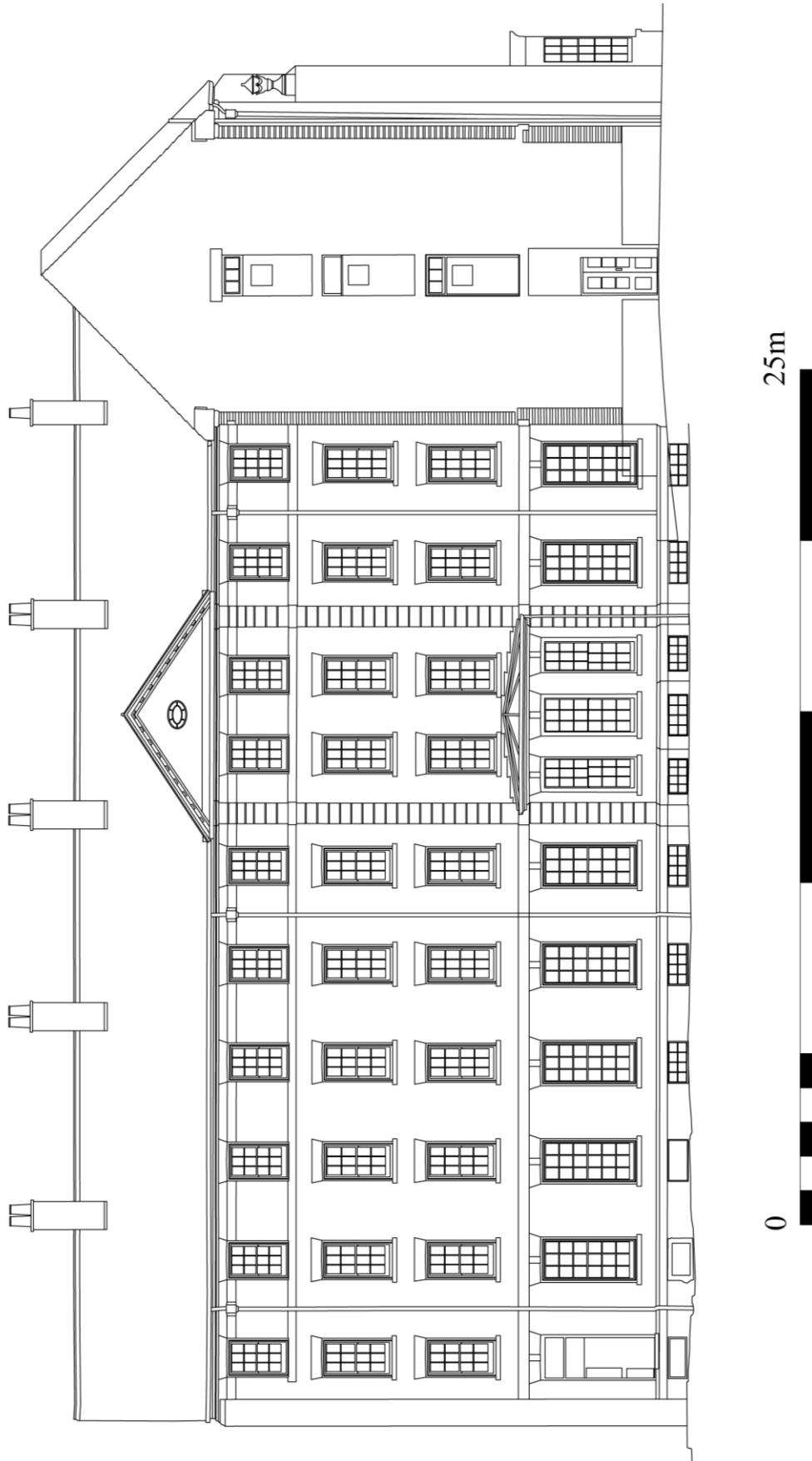
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October 2021. Updated to include elevation drawings May 2022

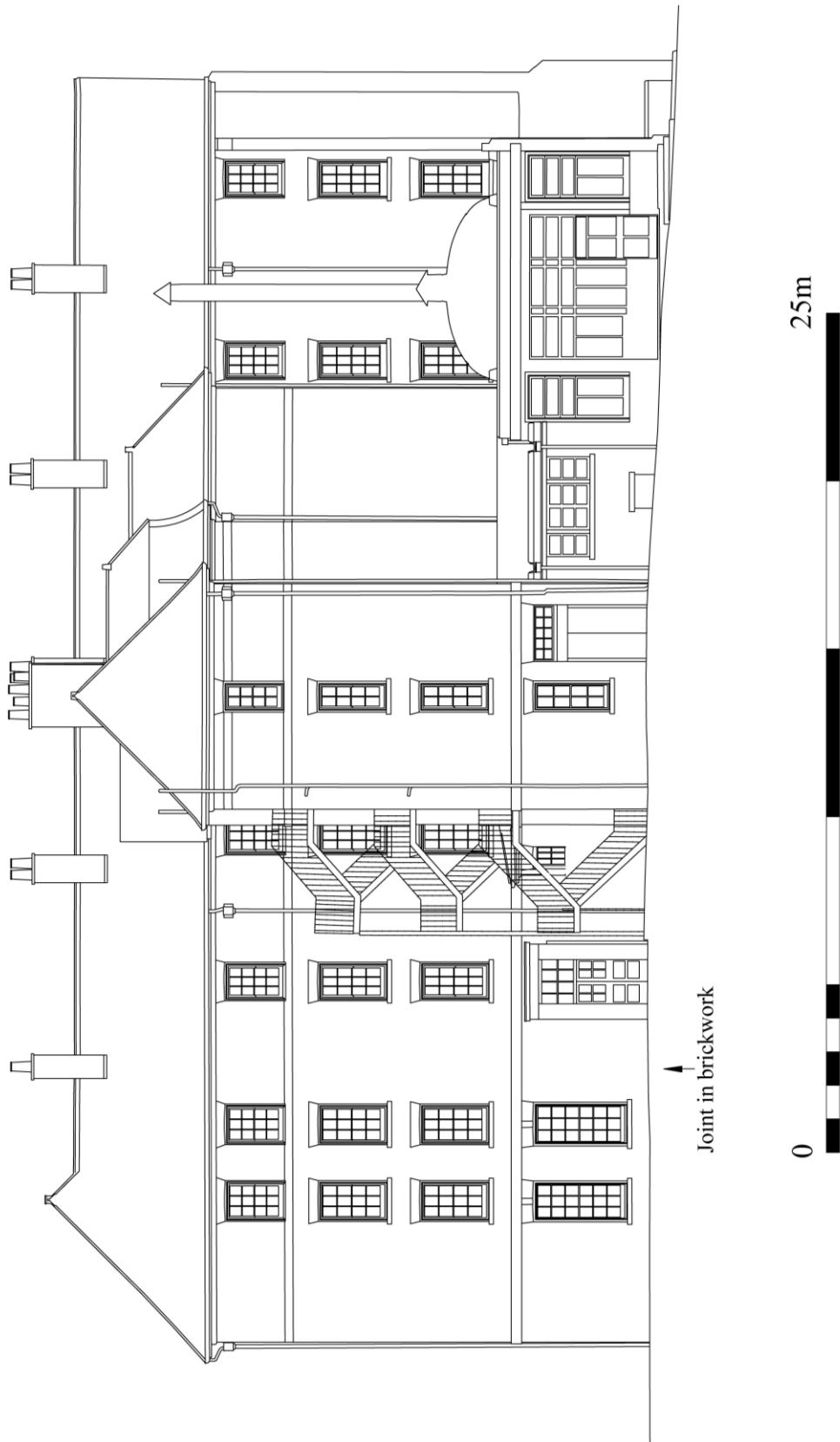
Appendix 1 Elevation Drawings of the Knighton Street Offices Modified from drawings supplied by the Client



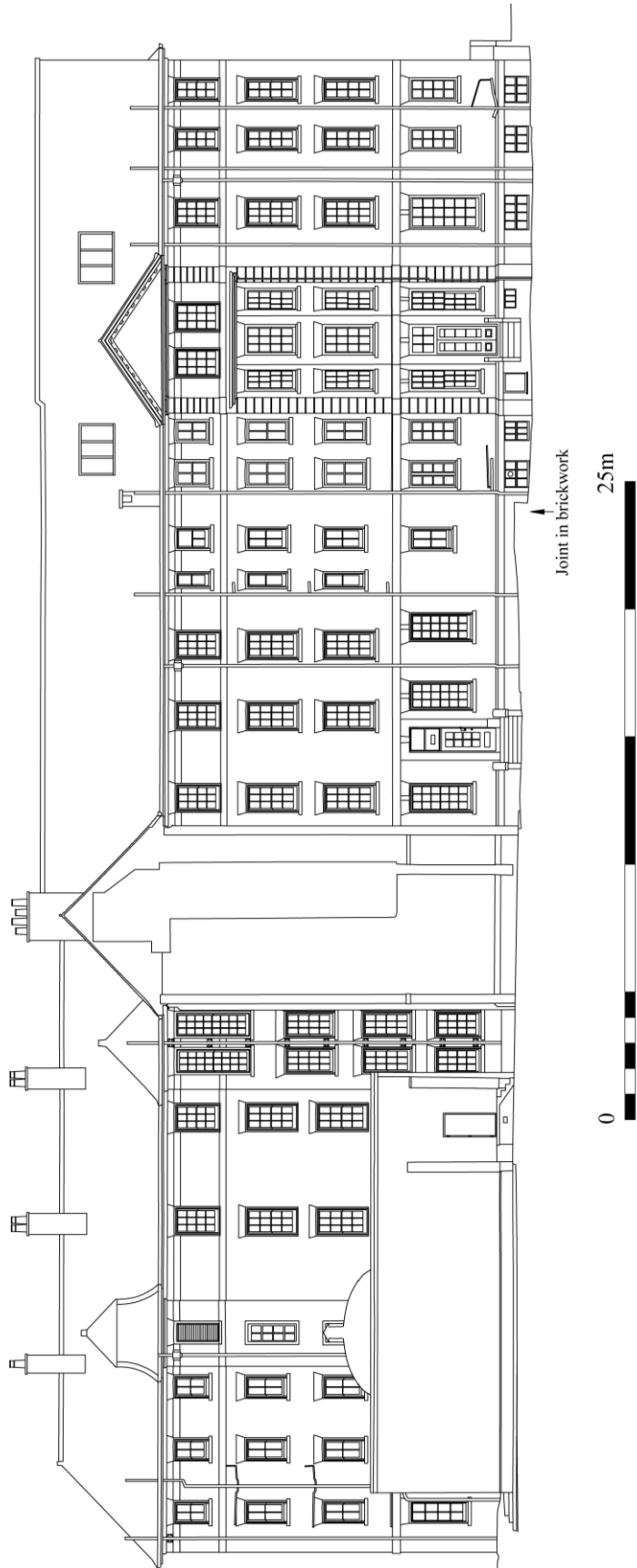
East facing elevation



South facing elevation



North facing elevation



West facing elevation

Appendix 2 Digital Photographs taken during the survey



LRI (1)



LRI (2)



LRI (3)



LRI (4)



LRI (5)



LRI (6)



LRI (7)



LRI (8)



LRI (9)



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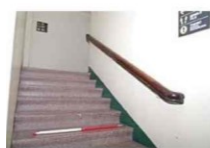
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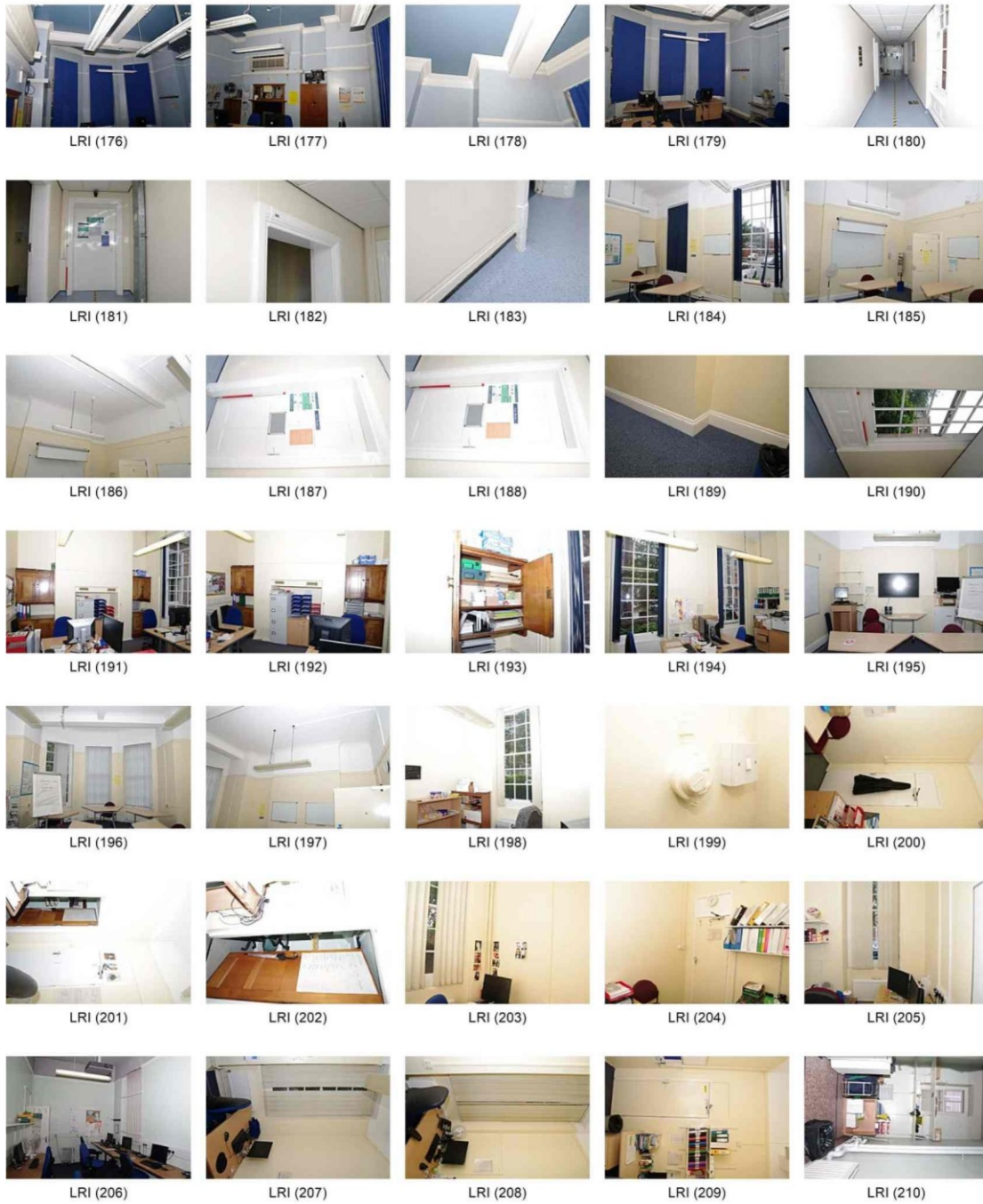
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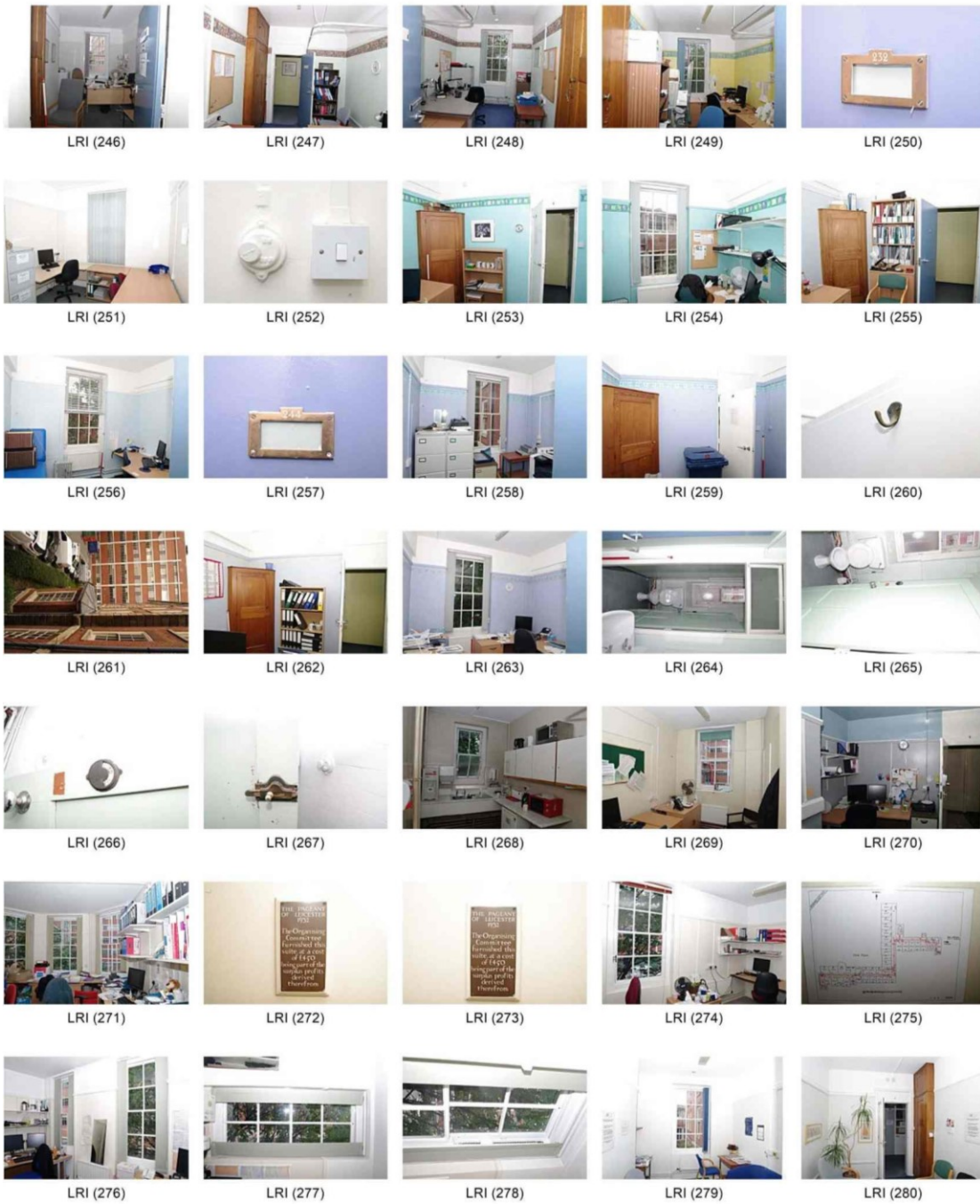
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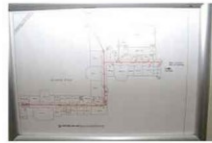
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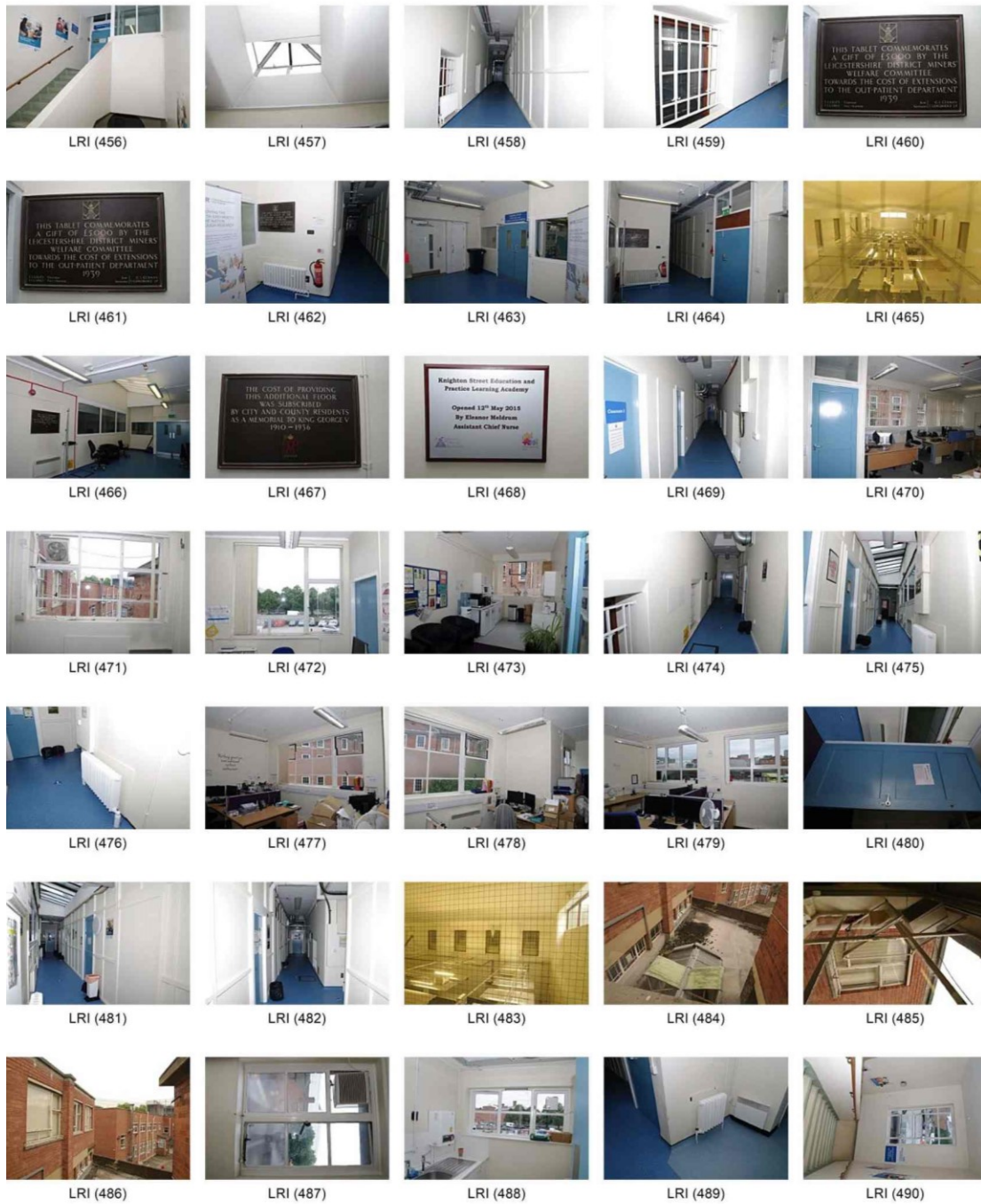
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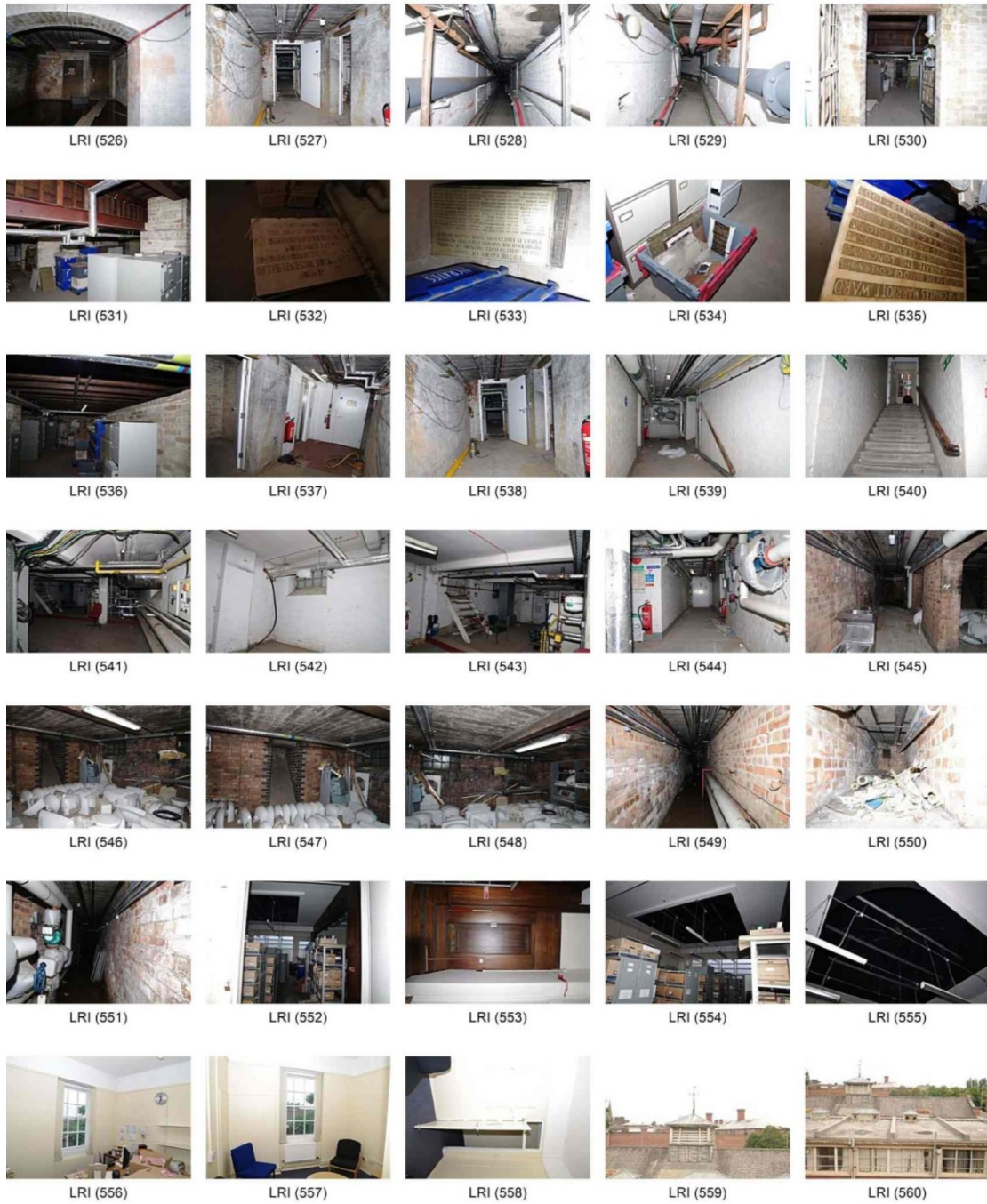
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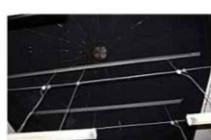
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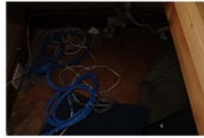
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