

51 Panorama Court - Notice of Intention to Designate a Property under Part IV, Section 29 of the Ontario Heritage Act and Authority to Enter into a Heritage Easement Agreement

Date: December 6, 2022

To: City Council

From: Chief Planner and Executive Director, City Planning

Wards: Ward 1 - Etobicoke North

SUMMARY

This report recommends that the City of Toronto state its intention to designate the property at 51 Panorama Court under Part IV, Section 29 of the Ontario Heritage Act for its cultural heritage value and to grant authority to enter into a Heritage Easement Agreement.

Located in the City of Toronto, on the south side of Panorama Court, northeast of the intersection of Kipling Avenue and Finch Avenue West, and west of the Humber River and conservation area along Islington Avenue, the property at 51 Panorama Court is the former County Branch of the Hospital for Sick Children (1928-1957) and later the provincially-owned Thistletown Regional Centre for Children and Adolescents (1957-2014). The property is located in Mount Olive-Silverstone-Jamestown, a neighbourhood in north Etobicoke, which in the 19th century, was immediately north of the Town of Thistletown. Known colloquially as “Thistletown”, the now 48-acre (originally 98-acre) property is an interrelated complex containing a main hospital building (Main Building) constructed in 1927-1928 to the designs of the renowned architectural partnership of Sproatt & Rolph, as well as landscaped elements, a designed circuitous drive, and associated views.

The property was originally designed and completed in 1928 as a rural satellite branch of the Hospital for Sick Children, referred to as its County Branch, and closed in 1957. In 1957, the Government of Ontario purchased the site for use as a new mental healthcare facility for children and youth, and it was repurposed as the Thistletown Regional Centre for Children and Adolescents, effectively extending the property’s use as a complex dedicated to children’s healthcare with a child-focused approach to care and treatment until it closed in 2014. The surplus property has since remained vacant.

Currently, the surplus Thistletown provincial property is being offered for sale to support Government of Ontario initiatives for creating more Long-Term Care Homes (Fixing

Long-Term Care Act of 2021). The property will be sold on the open market with the requirement to develop and operate a minimum of 256 long-term care beds and recreational uses, with preference for affordable housing, veterans housing and/or seniors housing on-site.

The property at 51 Panorama Court was listed on the City of Toronto's Inventory of Heritage Properties (now the Heritage Register) on May 6, 2014. On August 25, 2014, Amendments to the Reasons for Listing on the City's Inventory of Heritage Properties to include heritage landscape attributes and landmark uses was adopted by City Council.

The property has cultural heritage value for its design value and association with the Hospital for Sick Children and Thistletown Regional Centre for its contribution to provincial mental healthcare for children and youth. The Government of Ontario has recognized Thistletown as a "provincial heritage property of provincial significance" and the property is included on the List of Provincial Heritage Properties maintained by the Ministry of Citizenship and Multiculturalism. Upon the transfer of the property out of provincial control and ownership, the Thistletown site will no longer be under provincial protection pursuant to Section B.3 of the Standards and Guidelines for Conservation of Provincial Heritage Properties dated April 28, 2010, prepared pursuant to Section 25.2 of the Ontario Heritage Act. The authority for heritage protection will then reside with City Council and the property may be designated by the City of Toronto under Part IV, Section 29 of the Ontario Heritage Act.

Staff have completed the Research and Evaluation Report for the property at 51 Panorama Court and determined that the property meets Ontario Regulation 9/06, the criteria prescribed for municipal designation under Part IV, Section 29 of the Ontario Heritage Act under design, associative and contextual values. As such, the property is a significant built heritage resource.

In June 2019, the More Homes, More Choice Act, 2019 (Bill 108) received Royal Assent. Schedule 11 of this Act included amendments to the Ontario Heritage Act. The Bill 108 Amendments to the Ontario Heritage Act came into force on July 1, 2021, which included a shift in Part IV designations related to certain Planning Act applications. Section 29(1.2) of the Ontario Heritage Act now restricts City Council's ability to give notice of its intention to designate a property under the Act to within 90 days after the City Clerk gives notice of a complete application.

There is currently no planning application for the development of 51 Panorama Court. The future redevelopment of the lands will require a number of planning applications including a Plan of Subdivision (to create public roads), Site Plan Control, and a Plan of Condominium (depending on proposed tenure for the proposed uses). The property contains TRCA regulated lands and is subject to the City of Toronto's Ravine and Natural Feature Protection By-law.

A Heritage Impact Assessment (HIA) is required for all development applications that affect listed and designated properties and will be considered when determining how a heritage property is to be conserved. Designation also enables City Council to review proposed alterations or demolitions to the property and enforce heritage property standards and maintenance.

RECOMMENDATIONS

The Chief Planner and Executive Director, City Planning recommends that:

1. City Council state its intention to designate the property at 51 Panorama Court (the "Property") under Part IV, Section 29 of the Ontario Heritage Act in accordance with the Statement of Significance: 51 Panorama Court (Reasons for Designation) attached as Attachment 3, to the report, December 6, 2022, from the Chief Planner and Executive Director, City Planning, to be effective upon the transfer of the Property by the provincial government and that notice of intention to designate be served on the new owner following the transfer of the Property.
2. If there are no objections to the designation, City Council authorize the City Solicitor to introduce the Bill in Council designating the property under Part IV, Section 29 of the Ontario Heritage Act.
3. City Council authorize the entering into of a Heritage Easement Agreement under Section 37 of the Ontario Heritage Act with the owner of 51 Panorama Court in a form and content satisfactory to the City Solicitor and the Chief Planner and Executive Director, City Planning Division.
4. City Council authorize the City Solicitor to introduce the necessary Bill in Council authorizing the entering into of a Heritage Easement Agreement for the property at 51 Panorama Court.

FINANCIAL IMPACT

There are no financial implications resulting from the adoption of this report.

DECISION HISTORY

At its meeting on January 31, 2018 City Council approved Phase Two of the Provincial Affordable Housing Lands Program (PAHLP) to provide up to 160 new affordable rental and up to 80 affordable ownership homes on the Thistle town site to be delivered by non-profit organizations.

[Agenda Item History - 2018.EX30.19 \(toronto.ca\)](#)

At its meeting on August 25, 2014, City Council approved the Amended Reasons for Listing on the City's Inventory of Heritage Properties for 51 Panorama Court in accordance with the Statement of Significance: 51 Panorama Court, Revised Reasons for Listing, June, 2014.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2014.EY35.16>

At its meeting of May 6 and 7, 2014, City Council approved the inclusion of the property at 51 Panorama Court on the City of Toronto's Heritage Register in accordance with the

Listing Statement (Reasons for Inclusion). City Council also requested the Director, Urban Design, City Planning Division to identify the potential heritage landscape attributes and landmark uses at 51 Panorama Court and submit an amended listing report to the Toronto Preservation Board.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2014.EY32.9>

At its meeting of June 18, 2013, the Etobicoke York Community Council directed Heritage Preservation Services to investigate the potential of including the buildings at 51 Panorama Court on the Inventory of Heritage Properties and report back to the September 10, 2013 meeting of the Etobicoke York Community Council.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.EY25.48>

BACKGROUND

On April 13, 2022, the Ontario government stated the surplus provincially owned property is to be sold with the condition of developing and operating a licensed Long-Term Care Home (LTC) home (for a minimum of 30 years), with specific requirements for a minimum of 256 LTC beds on the Site. LTC licensing allocations based on the number of beds required will be made available as part of the Property's disposition process. Thistletown property is being sold with an additional requirement for recreational uses on the site, in the form of a community hub promoting indoor and outdoor active living. The Province has also identified a preference for affordable housing, veterans housing and/or seniors housing on this property.

On August 10, 2020, the Minister of Municipal Affairs and Housing issued a Minister's Zoning Order (MZO) under the Planning Act, which effectively permitted the following uses on the subject lands:

- One or more long-term care homes, together with accessory uses, buildings and structures
- A detached house
- A semi-detached house
- A duplex
- A triplex
- A fourplex
- A townhouse
- An apartment building

In the past few years, City Planning staff, in consultation with provincial agencies including Infrastructure Ontario (IO), and the local community, have considered how to deliver on a range of public policy expectations, housing, community services and facilities for the redevelopment of the Thistletown lands.

In December 2017, it was determined that the future redevelopment on these lands, including 51 Panorama Court, will be guided by a set of guiding principles related to servicing, urban forestry, road widening, heritage planning, and urban design. It is expected that these guiding principles will be refined and applied when considering future applications for the development of 51 Panorama Court.

The zoning, Zoning By-law 569-2013, permits LTC and defined accessory uses as well as certain forms of residential uses. The Thistleton site lies in an area which can benefit from additional recreational uses, in the form of a community hub promoting indoor and outdoor active living to meet the needs of residents in the growing community, and includes a preference for the delivery of onsite affordable housing, veterans housing, and/or seniors housing.

Heritage Planning Framework

The conservation of cultural heritage resources is an integral component of good planning, contributing to a sense of place, economic prosperity, and healthy and equitable communities. Heritage conservation in Ontario is identified as a provincial interest under the Planning Act. Cultural heritage resources are considered irreplaceable and valuable assets that must be wisely protected and managed as part of planning for future growth under the Provincial Policy Statement (2020) and A Place to Grow: Growth Plan for the Greater Golden Horseshoe (2020). Heritage Conservation is enabled through the Ontario Heritage Act. The City of Toronto's Official Plan implements the provincial policy regime, the Planning Act, the Ontario Heritage Act and provides policies to guide decision making within the city.

Good planning within the provincial and municipal policy framework has at its foundation an understanding and appreciation for places of historic significance, and ensures the conservation of these resources are to be balanced with other provincial interests. Heritage resources may include buildings, structures, monuments, and geographic areas that have cultural heritage value or interest to a community, including an Indigenous community.

The Planning Act establishes the foundation for land use planning in Ontario, describing how land can be controlled and by whom. Section 2 of the Planning Act identifies heritage conservation as a matter of provincial interest and directs that municipalities shall have regard to the conservation of features of significant architectural, historical, archaeological or scientific interest. Heritage conservation contributes to other matters of provincial interest, including the promotion of built form that is well-designed, and that encourages a sense of place.

The Planning Act requires that all decisions affecting land use planning matters shall conform to the Growth Plan and shall be consistent with the Provincial Policy Statement, both of which position heritage as a key component in supporting key provincial principles and interests.

<https://www.ontario.ca/laws/statute/90p13>

The Provincial Policy Statement provides policy direction on land use planning in Ontario and is to be used by municipalities in the development of their official plans and to guide and inform decisions on planning matters, which shall be consistent with the Provincial Policy Statement. The Provincial Policy Statement articulates how and why heritage conservation is a component of good planning, explicitly requiring the conservation of cultural heritage and archaeological resources, alongside the pursuit of other provincial interests. The Provincial Policy Statement does so by linking heritage

conservation to key policy directives, including building strong healthy communities, the wise use and management of resources, and protecting health and safety.

Section 1.1 Managing and Directing Land Use to Achieve Efficient and Resilient Development states that long-term economic prosperity is supported by, among other considerations, the promotion of well-designed built form and cultural planning, and the conservation of features that help define character. Section 2.6 Cultural Heritage and Archaeology subsequently directs that "significant built heritage resources and significant cultural heritage landscapes shall be conserved". Through the definition of conserved, built heritage resources, cultural heritage landscape and protected heritage property, the Provincial Policy Statement identifies the Ontario Heritage Act as the primary legislation through which heritage conservation will be implemented.

<https://www.ontario.ca/page/provincial-policy-statement-2020>

A Place to Grow: Growth Plan for the Greater Golden Horseshoe (2020) builds on the Provincial Policy Statement to establish a land use planning framework that supports complete communities, a thriving economy, a clean and healthy environment and social equity. Section 1.2.1 Guiding Principles states that policies in the plan seek to, among other principles, "conserve and promote cultural heritage resources to support the social, economic, and cultural well-being of all communities, including First Nations and Metis communities". Cultural heritage resources are understood as being irreplaceable, and are significant features that provide people with a sense of place. Section 4.2.7 Cultural Heritage Resources directs that cultural heritage resources will be conserved in order to foster a sense of place and benefit communities, particularly in strategic growth areas.

<https://files.ontario.ca/mmah-place-to-grow-office-consolidation-en-2020-08-28.pdf>

The Ontario Heritage Act is the key provincial legislation for the conservation of cultural heritage resources in Ontario. It regulates, among other things, how municipal councils can identify and protect heritage resources, including archaeology, within municipal boundaries. This is largely achieved through listing on the City's Heritage Register, designation of individual properties under Part IV of the Ontario Heritage Act, or designation of districts under Part V of the Ontario Heritage Act.

Section 27 of the Ontario Heritage Act gives municipalities the authority to maintain and add to a publicly accessible heritage register. The City of Toronto's Heritage Register includes individual heritage properties that have been designated under Part IV, Section 29, properties in a heritage conservation district designated under Part V, Section 41 of the Act as well as properties that have not been designated but City Council believes to be of "cultural heritage value or interest."

<https://www.ontario.ca/laws/statute/90o18>

Ontario Regulation 9/06 sets out the criteria for evaluating properties to be designated under Part IV, Section 29 of the Ontario Heritage Act. The criteria are based on an evaluation of design/physical value, historical and associative value and contextual value. A property may be designated under Section 29 of the Act if it meets one or more of the provincial criteria for determining whether it is of cultural heritage value or interest.

<https://www.ontario.ca/laws/regulation/060009>

The Ontario Heritage Toolkit provides guidance on designating properties of municipal significance, including direction on the purpose of designating heritage properties and information about how the Provincial Policy Statement and the Ontario Heritage Act provide a framework for the conservation of heritage properties within the land use planning system. In June 2019, the More Homes, More Choice Act, 2019 (Bill 108) received Royal Assent. Schedule 11 of this Act included amendments to the Ontario Heritage Act (OHA). The Bill 108 Amendments to the OHA came into force on July 1, 2021, which included, amongst other matters, amendments to the listing and designation processes. Guidance from the Province related to the implementation of Bill 108 Amendments is forthcoming.

[Ontario Heritage Tool Kit \(gov.on.ca\)](https://www.gov.on.ca)

The City of Toronto's Official Plan contains a number of policies related to properties on the City's Heritage Register and properties adjacent to them, as well as the protection of areas of archaeological potential. Indicating the integral role that heritage conservation plays in successful city-building, Section 3.1.6 of the Official Plan states that, "Cultural heritage is an important component of sustainable development and place making. The preservation of our cultural heritage is essential to the character of this urban and liveable City that can contribute to other social, cultural, economic and environmental goals of the City."

Policy 3.1.6.4 states that heritage resources on the City's Heritage Register "will be conserved and maintained consistent with the Standards and Guidelines for the Conservation of Historic Places in Canada, as revised from time to time and adopted by Council."

Policy 3.1.6.6 encourages the adaptive re-use of heritage properties while Policy 3.1.6.26 states that, when new construction on, or adjacent to, a property on the Heritage Register does occur, it will be designed to conserve the cultural heritage values, attributes and character of that property and will mitigate visual and physical impacts on it.

<https://www.toronto.ca/city-government/planning-development/official-plan-guidelines/official-plan/>

<https://www.historicplaces.ca/media/18072/81468-parks-s+g-eng-web2.pdf>

COMMENTS

While the research and evaluation of the property referenced above is, in staff's determination, sufficient to support the designation of the property at 51 Panorama Court, it should be noted that new and additional relevant information on the subject property further expanding on its cultural heritage value following community input and additional access to archival records may be incorporated in the final version of a Part IV designation by-law.

On August 25, 2014, Amendments to the Reasons for Listing of the subject property on the City's Heritage Register was adopted by City Council.

In 2021, IO on behalf of Ministry of Public and Business Service Delivery evaluated the cultural heritage value and significance of the subject property in accordance with the Standards and Guidelines for Conservation of Provincial Heritage Properties issued under the authority of Section 25.2 of the Ontario Heritage Act and came into effect on July 1, 2010. Throughout this evaluation process, IO staff, with their heritage consultants, engaged City staff in anticipation of municipal designation following the disposition of the provincial site. In February 2022, IO shared the Cultural Heritage Evaluation Report prepared by SBA, Stevens Burgess Architects Ltd. IO staff have continued to support and foster open dialogue with City staff with their additional research, site visits and preparation of the Reasons for Designation. IO also requested City staff seek Council's authority for a heritage easement agreement on the property.

51 Panorama Court

Research and Evaluation according to Ontario Regulation 9/06



Current Image showing the north elevation of the Main (hospital) Building at 51 Panorama Court (Heritage Planning, 2022)

1. DESCRIPTION

51 PANORAMA COURT - The Hospital for Sick Children, County Branch	
ADDRESS	51 Panorama Court
WARD	01 - Etobicoke North

LEGAL DESCRIPTION	PIN 07316-0244 (LT), being Part of Lot 36, Concession A, Fronting the Humber, Geographic Township of Etobicoke, City of Toronto, designated as Parts 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 12, 15, 16, 17, 18 and 19 on Plan 66R-28663; Subject to an easement over Parts 5, 8 and 19 on Plan 66R-28663 as in Instrument No. TB535673; Subject to an easement over Parts 7, 8 and 9 on Plan 66R-28663 as in Instrument No. EB449708; Etobicoke, City of Toronto
NEIGHBOURHOOD/COMMUNITY	Mount Olive-Silverstone-Jamestown
HISTORICAL NAME	Hospital for Sick Children, County Branch
CONSTRUCTION DATE	1927-28
ORIGINAL OWNER	Hospital for Sick Children
ORIGINAL USE	Institutional
CURRENT USE*	Vacant
ARCHITECT/BUILDER/DESIGNER	Sproatt & Rolph
DESIGN/CONSTRUCTION/MATERIALS	Brick and stone cladding
ARCHITECTURAL STYLE	Georgian Classicism
ADDITIONS/ALTERATIONS	See Section 2
CRITERIA	Design/Physical, Historical/Associative, Contextual
HERITAGE STATUS	Listed in 2014
RECORDER	Heritage Planning: Ana Martins
REPORT DATE	November 2022

2. BACKGROUND

This research and evaluation section of the report describes the history, architecture and context of the properties at 51 Panorama Court, and applies evaluation criteria as set out in Ontario Regulation 9/06, under the headings of historical/associative, design/physical and contextual value to determine whether they merit designation under Part IV, Section 29 of the Ontario Heritage Act. A property may be designated under Section 29 of the Act if it meets one or more of the provincial criteria for determining whether it is of cultural heritage value or interest. The application of the criteria is found in Section 3 (Evaluation Checklist). The conclusions of the research and evaluation are found in the Conclusion of the report. Maps and Photographs are located in Attachment 1. The archival and contemporary sources for the research are found in Attachment 2. The Statements of Significance are contained in Attachment 3.

i. HISTORICAL TIMELINE

Key Date	Historical Event
	The area now known as the City of Toronto is the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples, and is now home to many diverse First Nations, Inuit and Métis peoples. Toronto is covered by Treaty 13 signed

	with the Mississaugas of the Credit (1805), and the Williams Treaties (1923) signed with multiple Mississaugas and Chippewa bands.
1800	By 1800, the Conat family had settled on the land that would become known as the settlement of Conat's Corners, a drovers' stop at the intersection of the Concession line now known as Islington Avenue and the Albion Road, which had been surveyed as early as 1799.
1833	John Grubb, Janet Bain and their children emigrate from Scotland and purchase 100 acres on the north side of the West Humber River and subsequently purchase 50 acres on the south side of the Humber.
1847	The village of St Andrews is laid out by John Grubb and named for his Scottish birthplace. To avoid confusion with St Andrews in New Brunswick, the village is renamed Thistletown in honour of a local doctor, William Thistle.
1878	The York County Atlas of 1878 shows that Concession A, Lot 36 has been settled by Alex Card and a grist mill is recorded to be in operation at the eastern edge of the property near the Humber River.
1926	The property, now identified as the Kaiting, Bouton, and Rowntree lands, is purchased by Sick Children's Hospital.
1927 May	Construction of the new hospital (County Branch) in Thistletown begins. Buildings constructed include the power plant. The garage is later added.
1927 July	The cornerstone is laid by the Premier of Ontario, G Howard Ferguson.
1928 October	The new hospital is opened with accommodation for 112 patients. It replaces the 1883 John Ross Robertson Lakeside Home for Children located on Hanlan's Point on Toronto Island.
Mid-1950s	Patient population had declined to an average of 40 patients per year.
1957	The County Branch of the Hospital for Sick Children closes.
1957	The Ontario Department of Health purchases the hospital for use as a mental healthcare hospital for juvenile patients and as a shorter-term residential treatment centre.
1959	The hospital is renovated for new accommodations, fire exits, patient and staff dining rooms, washrooms and a temporary kitchen. The porch on the south façade is likely enclosed with bars at this time.
1959	The hospital is the first in Canada to provide treatment for emotionally disturbed children.
1960	A centre for autism research and a ward for treating autistic children is opened.
1960	New electrical building is constructed adjacent to the original power plant.
1961	New pool and gymnasium are constructed.

1966	The Ontario Government buys the Warrendale Treatment Centre (Warrendale Court at Kipling) from the Board of Warrendale for \$1.00. The two centres – Thistletown and Warrendale – become linked in their shared mandate to administer mental healthcare programming to children but remain distinct.
1967	The facility is renamed the Thistletown Regional Centre for Children and Adolescents.
1967	New daycare centre is completed and opened.
1972	New house-form residential buildings are constructed south of the main building to respond to changing approaches to treatment and the push for more communal settings for the care of some patients.
1977	New school building is constructed for short and long-term care residents.
2014	Thistletown closes and its programs are relocated or distributed to other healthcare facilities in the area or in community-based programs.
2014	The property is listed on the City of Toronto's Inventory of Heritage Properties on May 6, 2014. On August 25, 2014, Amendments to the Reasons for Listing on the City's Inventory of Heritage Properties was adopted by City Council.
2020	MZO is put in place for the facilitation of a long-term care housing and recreational uses, with the possibility of complementary residential development, including a preference for onsite affordable housing on most of the provincially-owned lands.
2022 - April	Ontario Building New Long-Term Care Home in Etobicoke - Ontario Government news release of the sale of surplus government land.

ii. HISTORICAL BACKGROUND

The following section outlines the history and facts related to the properties which are the basis for determining 'Historical and Associative Value' according to O. Reg. 9/06 Criteria.

The location of the property at 51 Panorama Court is shown on the property data map (Image 1), northeast of the intersection of Kipling Avenue and Finch Avenue West, and west of the Humber River and conservation area. The subject property is located in Mount Olive-Silverstone-Jamestown, a neighbourhood within Etobicoke, which was historically north of the Town of Thistletown. The site was originally part of Lot 36 and 10 acres of Lot 35, Concession A, which, by 1860, were owned by Alex Card and Jason Carruthers respectively. The Tremaine Map of 1860 (Image 2) notes a structure on the property near the river, the lands were cleared, and a gristmill was located at the southeast corner at the Humber River's edge. The 1878 Illustrated Historical Atlas of the County of York (Image 3) indicates that the Card property now had a lane from present-day Kipling Avenue that led to the structure (likely a homestead), orchard, and a gristmill

on the eastern edge of the subject property, which is bound by the Humber River.¹ This lane or drive ran east from Kipling Avenue and then turned southeast to follow the river, terminating at Islington Avenue. By 1926, when the Hospital for Sick Children was looking for a rural satellite location, the property was known as the Kaiting, Boulton and Rowntree lands.

History of Children's Hospitals

Prior to the late 19th century, development of stand-alone institutions dedicated to pediatric medicine, sick children were treated in wards of the local general hospital, in convalescent and chronic care homes, or if infants, with mothers in women's hospitals.² As young patients in these facilities, children were not often accorded particular diagnostic or therapeutic treatment spaces.³ While varied medical and welfare institutions provided children, mostly of the urban poor, with medical aid for emergency care, the admission of children for medical treatment was uncommon in the 1870s.⁴

The first children's hospitals in Canada dedicated to pediatric medicine reflected the social and moral impetus of late-Victorian child rescue movements combined with the needs and offerings of medical science.⁵ This was true of the first hospital in Canada solely dedicated to pediatric medicine, which opened in 1875 in Toronto. The Victoria Hospital for Sick Children, subsequently known as the Hospital for Sick Children, was the outcome of the philanthropic, charitable, and missionary work of a Ladies Committee led by Elizabeth McMaster; they envisioned the environment of a hospital itself, far from the domestic environments of the urban poor, as therapeutic, and in turn, provide moral reform.⁶ As medical historian David Wright indicates, this early hospital opened in an 11-room rental house on 31 Avenue Street, a road adjacent to present-day College Street, but within a year, a burgeoning urban population and increased need for hospital services called for larger premises. This new purpose-built children's hospital was located at 67 College Street in Toronto and was designed by Frank Darling and S.G. Curry in a Romanesque-revival style. It accommodated over 300 beds.

By the early 1880s, the hospital's management started to shift away from the Ladies Committee to a Board of Trustees, chaired by John Ross Robertson, the publisher of the Evening Telegram.⁷ In 1883, he financed the Lakeside Home for Little Children, a summer convalescent facility on Hanlan's Point, on the Toronto Island, designed by

1 The site has not been identified as an archaeological site although it is identified as an area of archaeological potential as per the City of Toronto's Archaeological Management Plan. A Stage I Archaeological Assessment was conducted in 2004 by D R Poulton and Associates and recommended a field-based assessment be conducted prior to any severance or to any landscape alterations that could represent an impact to any archeological remains that might be present

2 Annemarie Adams and David Theodore, "Architecture of Children's Hospitals," in *Children's Health Issues in Historical Perspective* edited by Cheryl Krasnick Warsh and Veronica Strong-Boag (Waterloo: Wilfred Laurier Press, 2005), p. 440

3 Ibid, p. 441

4 David Wright, *Sick Kids: The History of the Hospital for Sick Children*, (Toronto: University of Toronto Press, 2016), p. 37

5 Adams and Theodore, p. 444

6 Wright, p. 45

7 Wright, p. 60

architect Mark Hall. In 1891, the Board of Trustees received full control of the hospital's management, the same year that the hospital on College Street opened. Soon afterward, the Hospital for Sick Children quickly established itself as the leader in the field of pediatric medicine.

The Hospital for Sick Children, County Branch (1928-1957)

The new rural hospital in Thistleton, Ontario replaced the earlier satellite convalescent facility, the Lakeside Home for Little Children on Hanlan's Point, on the Toronto Island. The Hospital Trustees wanted to provide a treatment facility that could be open year-round as the Lakeside Home was limited to accommodating patients only during the summer months. The Trustees wanted a "bucolic, rural site on which to build a new convalescent facility that would offer rehabilitation services throughout the year, similar to hospital branches in New York and Boston."⁸ They envisioned a place that would welcome any child from across the province while providing a model of care and medical treatment to be emulated.⁹ A rural hospital providing convalescent care would also ease the overcrowding conditions of the principal hospital on College Street, in downtown Toronto, and free-up beds for more active cases.¹⁰ Its location was also aligned with social Victorian concerns with moving sick children away from the degrading effects of a dense, industrial, urbanized environment.¹¹

The new rural site for the Hospital for Sick Children's satellite location for providing long-term care for children recovering from surgery or treatment for tuberculosis was chosen for the "country air and sunshine",¹² "its altitude and also because it enjoys the maximum number of hours of sunshine per day"¹³ (Image 4). The Trustees noted that "the ground is high, rolling, and fairly well wooded and from the point where the buildings are to be erected, it commands a wide view in every direction."¹⁴ Light therapy which included heliotherapy (sunlight) and photo therapy (artificial light or ultra light) was seen to be a new medical modality in the late 1890s and had proved to be effective in treating several forms of tuberculosis.¹⁵ The scientific discovery of vitamins in 1913, especially vitamin D found in sunlight and milk further encouraged the use of heliotherapy for tubercular patients in the absence of pharmaceutical treatments.¹⁶

The hospital was described as a "Palace of Sunshine", owing to the design of its south façade with its balconies and boardwalk for the use of heliotherapy in the treatment of tuberculosis, rheumatic fever, amongst other childhood illnesses or for long-term

8 Grant Evers, "Thistleton: 51 Panorama Court: a Unique Medical Story from Toronto's Past," in *Myseum Intersections* (2021). Retrieved from: <http://www.myseumoftoronto.com/programming/from-weeds-we-grow-2021/thistleton>

9 Douglas S. Robertson, "Hospital for Sick Children" in *Durham Review*, December 22, 1932

10 Wright, p. 183

11 Wright, p. 178

12 *Construction Journal*, June 1929, p.193

13 *The Toronto Daily Star*, February 8, 1928, p. 20.

14 Wright, p. 307-310

15 Brodie, Barbara, "Children of the Sun", in *Windows in Time* (University of Virginia School of Nursing Eleanor Crowder Bjoring Center for Nursing Historical Inquiry, Vol 23-2, 2015

16 DeLuca, Hector F. "History of the discovery of vitamin D and its active metabolites". *Bonekey Reports: Journal of the International Bone and Mineral Society*, 2014 Jan 8:3

rehabilitation while recovering from rheumatic fever, polio, or major surgery.¹⁷ As previously noted, heliotherapy had been used since the late 19th century as a medical treatment until the advent of pharmaceutical approaches to disease such as vaccinations and antibiotics. As such, the subject property reflects important trends of early twentieth century medicine and points to how far medical advancements have come since the country branch was first built in 1928.

Although initially constructed by the Hospital for Sick Children as a satellite hospital for the convalescent care of children recovering from surgery or tuberculosis, uses of the building evolved to include the treatment of polio during the polio epidemic of 1937. Patients remained at the County Branch from several months to up to four years. However, by the late 1940s, the hospital's occupancy had declined owing to province-wide milk pasteurization, new medical treatments such as the use of penicillin and other pharmaceutical treatments. Ultimately, the vaccine for polio rendered the facility obsolete. The facility slowly declined in its use in the wake of the "drug revolution" in the 1950s, with an average of forty patients per year in the last few years of operation. In 1957, when the Hospital Trustees opted to close the facility, the patient population had dropped to eighteen.¹⁸

Thistletown Regional Centre for Children and Adolescents 1957-2014

Land Registry records indicated that the property was sold in 1957 to the Minister of Public Works for Ontario. The County Branch was purchased by the Government to become the first research and treatment facility for children with mental health needs, becoming the first residential mental health centre for children in Ontario.¹⁹ The location was chosen for its quiet, rural setting within which to provide therapeutic treatments. As reported, the County Branch was "repurposed as a research and treatment facility for a newly identified group in need of specialist services: emotionally disturbed children."²⁰ This shift to providing specialized mental healthcare specifically for children was consistent with the provincial government's "expanding menu of segregated residential institutions for the developmentally disabled".²¹ While there were other similar large institutions set in rural locations designed to help children by providing a rural component to their therapy, such as those in Smith Falls, Woodstock, and Blenheim as well as a repurposed sanatorium, now known as the Child and Parent Resource Institute, located in London, Ontario, Thistletown remains a singular example in Ontario of a facility initially dedicated as a children's healthcare facility and subsequently converted into a facility with a similar child-focused mandate.²²

In its first two years as Thistletown Hospital, Dr. John Rich, a psychiatrist, and Lon Lawson, a social worker who became the first Chief of Child Care Work at the Hospital,

17 Wright, p. 309-310

18 Wright, p. 188

19 Denise Harris, "Rural hospital was a 'palace of sunshine', Etobicoke Guardian, December 26, 2013

20 Wright, p. 189.

21 Ibid.

22 Kelly Gilbride and Julia Rady, Steven Burgess Architects, "51 Panorama Court - Cultural heritage evaluation report", dated February 16, 2022, p. 46.

lay the groundwork for the beginnings of the discipline of child care work in Ontario.²³ As the site of pioneering work in a new field, Thistletown provided the earliest definitions of a child care worker to the Ministry of Health and the Ontario Civil Service Commission.²⁴ In 1960, the first centre for research on autism in Canada was established on this site and a ward for treating autistic children is opened. A gymnasium, pool, and daycare were built in the 1960s. In the 1970s a school and a series of residential "cottages" were constructed on the site highlighting a less institutional and more domestic form for the care of young patients suffering from mental illness. These additions also reflected the broader trends in the mental healthcare treatment model's emphasis towards greater community supports. The addition of these new facilities on the property were also constructed in deference to the surrounding landscape (Image 6).

Concurrent with the site's new use, the Children's Mental Hospital Act, passed in 1960, reflected new thinking about the treatment of children: the need for specialized services required by children and the recognition of the need for greater separation between children and adult patients. In 1969, the Children's Services Branch within the Mental Health Division of the Department of Public Health was formed and the Children's Mental Healthcare Centres Act was passed in 1971. By 1977, the responsibility for children mental healthcare shifted to the Ministry of Community and Social Services.

The extension of Finch Avenue along the southern boundary, the sale of the Humber River frontage along the eastern edge to the Toronto Region Conservation Authority, alongside other developments have reduced the size of the property from its original 98 acres to 48 acres, and the connection to the original entrance from Islington Avenue has been lost. However important sections of the original 19th century farm road that ran parallel to the Humber River and the 1920s circuitous drive remain as does the park-like setting and the groves of pine trees.

Sproatt & Rolph

The Hospital for Sick Children, County Branch was designed by the architectural firm Sproatt and Rolph, partners in one of Toronto's leading firms from 1899 to 1934.²⁵ Henry Sproatt (1866-1934) was an architect by training having apprenticed with Toronto architect A. R. Denison beginning in 1882. From 1886-1888, he spent time working at various architectural offices in New York City and subsequently toured France and northern Italy, studying and drawing architectural styles of significant European buildings.²⁶ Upon returning to Toronto, he assisted architect David Roberts, Jr. on the design of the George Gooderham House at Bloor and St. George Streets. In 1893, Sproatt entered the partnership of Frank Darling, Samuel Curry, and John Pearson. With the departure of Curry in 1894, Ernest Rolph (1871-1958) joined the firm as a draughtsman.

²³ Karen Gilmour-Barrett and Susan Pratt, "Excerpts from a New Profession", in J. Shamsie (ed.). *Experience & Experiment: A collection of essays outlining the development of services for emotionally disturbed children in the Province of Ontario* (Toronto: Leonard Crainford, 1977).

²⁴ Ibid.

²⁵ Biographical Dictionary of Architects in Canada, "Henry Sproatt" and "Rolph, Ernest Ross

²⁶ OAA, Sproatt, Henry (1866-1934)

Rolph's engineering experience was acquired during the building of the Canadian Pacific Railway's transcontinental route when in 1897, he took a position with CPR in Alberta supervising architectural and engineering work on the Crow's Nest Pass.²⁷ Similar to Sproatt, Rolph also studied architecture with David Roberts, Jr. and his abilities as a builder complemented Sproatt's talent as a designer. In 1899, Sproatt and Rolph formed a partnership that lasted over three decades and acquired a reputation for its wide range of commissions including those for residential, institutional, ecclesiastical, commercial, and industrial buildings. The practice extended its influence across Ontario and as far as Manitoba and Nova Scotia. In their thirty-four year partnership, they collaborated on some of the most renowned landmarks in Canadian architecture. Among their most important commissions were projects for the University of Toronto, including Hart House (1911-1919), Soldiers' Tower, Birge-Carnegie Library (1908-1910) and Burwash Hall Residence and Dining Hall (1919-1913) for Victoria College; as well as Eaton's College Park (1929-1930). Sproatt was an acknowledged master of the Collegiate Gothic style but also designed fine buildings in Classicism such as the Canada Life Building (1930-1931) on University Avenue and the National Research Council Canada Laboratories in Ottawa, designed in 1928, in a Beaux-Arts classicism style.

iii. ARCHITECTURAL DESCRIPTION

The following section provides an architectural description and analysis related to the property which will establish the basis for determining 'Design and Physical Value' according to O. Reg. 9/06 Criteria.

Constructed in 1927-28, the Hospital for Sick Children, County Branch is a fine representative and well-crafted example of a rural satellite hospital designed in the Georgian Classical style in Toronto. Defining elements of the style are evident in the main building's symmetry, hierarchy, and massing, as well as in its materiality including red brick cladding combined with cast stone elements such as the door and window surrounds, the string courses and cornices of the north elevation and long colonnade of stone pilasters and loggia of Tuscan Doric columns on the south elevation.

The design of the main building utilizes a T-shaped plan, which provided a functional separation of uses. The north wing accommodated reception and administration, as well as the doctor's offices and medical staff residences, while the south wing had the patient dormitories, with the linking part of the "T" including the school rooms and day rooms as well as the kitchen and dining rooms for staff on the upper levels (Images 7-9).

The T-shaped plan was also used to augment natural light into the interior spaces and to maximize exposure to sunlight and fresh air needed for long-term recoveries and the treatment of tuberculosis prior to pharmaceutical cures. This was evident in the plan's design to maximize the number of operable windows and in the inclusion of skylights, but in particular, in the approximately 200' long south-facing patient dormitory wing, whose rooms opened directly onto balconies on both the upper and lower levels, to allow beds to be moved outdoors for the therapeutic benefits associated with

27 Biographical Dictionary of Architects in Canada, "Rolph, Ernest Ross"

heliotherapy and in the inclusion of pine groves in the planting of the site. The building's two wings - north and south - were connected by a well-lit and ventilated cross-axis containing school rooms and kitchen facilities for staff on the upper levels.

The building was designed with two primary elevations: north and south. The north elevation was the principal public face of the building. It features a symmetrical design with a central entrance flanked by pairs of windows at the first and second levels and triplets at the third. The windows, belt courses and cornices are elaborated with classical cast stone details. The entrance has a cast stone door surround including engaged columns, entablature, and broken pediment whose volutes part to flank an urn (Images 10-12). The south elevation of the south wing featured cast stone pilasters and a central loggia of 4 pairs of Tuscan columns (Image 13 and 14). Both the main, public face of the north administration wing and the south elevation of the patients' wing were treated with the dignity and care rendered by the cast stone details of Georgian Classicism. The side and rear elevations of the north and south wings were comprised of brick without the cast stone elements.

An interior feature of special interest is the entry rotunda in the north wing, faced in Caen stone. Classical elements in this prominent circular space include fluted pilasters, door cases with pediments with volutes and a naturally lit skylight with Caen stone tracery, which further conveyed the sense of civic dignity and pride in a facility dedicated to the long-term care and well-being of children and youth. The rotunda is also the intersection point for corridors leading to the offices (Images 15 and 16).

Due to its distance from the city, the property also featured numerous technical elements including its own power and heating plants, an independent water filtration system, a high-pressure fire-fighting system, a sewage plant, and an electricity generator in the case of an emergency.

Landscape

An aerial photograph dating to 1947 shows access to the site from both Kipling and Islington Avenues (Image 5). Before plans were approved for the new hospital, funds were allocated for the construction of a new road and entrances. Gates were to be designed with a gatekeeper's cottage, and an additional ten acres of land purchased in order "to make a proper entrance" to the hospital grounds from Islington Avenue.²⁸ The road itself was the subject of discussion and debate among the hospital trustees and one of the staff, Dr. Edmund Boyd, took a particular interest to prepare plans for the road that was ultimately constructed by the engineer John Hole.²⁹

The old farm road, which originally provided access to the farm from Kipling Avenue as illustrated on the 1878 map was intended to be re-used. The section that run east-west along the north edge of the property from Kipling was to be kept as a service road and for ambulances (Image 17). The section of the road that ran parallel with the Humber River to the old grist mill was to provide a new entrance route from Islington Avenue

28 Minute Book, 1926-30, Trustees, Hospital for Sick Children, 26 September 1926. The 10-acres were part of Lot 35.

29 Ibid, 14 September, 1926.

(Images 18 -19). As this section of the road was very steep, it was decided to use only the lower section, which headed northwest from Islington Avenue, then to deviate by swinging back to the southwest following a natural ravine, and then continue in a great curve that eventually arrived at the northwest corner of the building and the administrative wing entry (Images 20 and 21). Dr. Boyd's designs for the long circuitous route from the Islington Avenue entrance, on the southeast corner of the site, to the main entrance of the hospital's north wing provided a variety of views of the hospital building.³⁰ As the land was lower at the southwest entry point, it allowed for a gradual ascent as the old farm road headed northwest parallel to the course of the Humber River. To avoid the steep ascent of the farm road, the new driveway turned heading southwest and then into a steady curving path that provided glimpses of the south façade of the hospital (Images 22 and 23), eventually coming close enough to the hospital building to provide a series of views of the balconies and boardwalk, which in the finer months would have been occupied by children (Images 24 and 25).

The intent of the hospital to provide long term care in a rural "retreat" with fresh air and sunshine would have been emphasized by this circuitous route lined with trees and the intermittent views of the hospital. As Flynn was to write: "This resulted in a longer and more costly road but I think everyone who knows Thistleton Hospital is agreed that the arrangement added much to the beauty of the grounds particularly when the tree and shrub plantings reached maturity."³¹ An aerial view of the site today shows the current extent of the entrance road that provided access from Islington Avenue but now terminates just north of Finch Avenue (Image 28). The view also shows the current entry via Panorama Court from Kipling Avenue that originally provided access to the farmhouse and was kept for ambulance arrival to the west side of the north administrative building.

Much consideration was given by the Hospital Trustees to the planting of the original 98-acre site. In April of 1928, as the building was nearing completion, the hospital Superintendent Watson Swaine met on site with Dr. Henry J Moore, the lead horticulturalist of the Provincial Department of Agriculture to arrange for the planting of trees and shrubs.³² Before the building was opened in October, 50,000 seedlings had been planted. Further landscaping plans were proposed to the Hospital Trustees in the spring of 1930, which included the plantings adjacent to the roadway leading into the hospital. "The area surrounding the hospital and the land for a hundred feet on either side of the main road was cultivated and seeded resulting in the beautiful lawns surrounding the building and driveway. Shrubs and trees were planted in accordance with a carefully developed plan and in the course of the years the whole site took on a park-like appearance".³³ (Images 26 - 27).

The layout of the site with this circuitous route owes much to the picturesque landscape tradition, which evolved in England in the eighteenth century at the same time that Georgian Classicism was being adapted to country house use. Just as the architectural prototype was adapted to the functions of a children's hospital, the landscape too was

30 Flynn, p.23

31 Ibid

32 Dr. Henry Moore is best known for his design of the International Peace Garden in Manitoba, 1928

33 Flynn, p. 34

designed to respond to the needs of health. This route is visibly marked on the Fire Insurance Plan from 1936.

It was reported that a majority of the children at the hospital suffered from tuberculosis.³⁴ "The eighteenth century English landscape movement brought the idea of healing landscapes to a prominent position in social and medical opinion... Nature and beautifully constructed landscapes were believed to have a power to heal...The cure was found then by locating oneself in an extreme opposite of city life, engulfed by the benefits of nature, fresh air and sunlight."³⁵ "Tuberculosis patients were initially prescribed to remain out of doors for the majority of the day...".³⁶ Among its planting of 50,000 seedlings were groves of pine trees. Along with sunlight and fresh air, the scent of pine trees was believed to be beneficial in the cure of breathing ailments including tuberculosis.³⁷ It is reported that the boardwalk connected to pathways that led to groves of pine trees where patients would be taken to enhance their cure and recovery.³⁸ Groves of pine trees continue to cluster around the south wing of the hospital on the lawns to the south and west (Images 28 & 29).

The primary circulation route on the property remains intact and no other thoroughfares have been added that would have altered the landscape. However, alterations to the south façade of the main hospital structure correspond to the property's change of ownership: in 1959, alterations to the interior were made for new accommodations, fire exits, patient and staff dining rooms, washrooms, and a kitchen while the balconies on the south façade were enclosed with bars. City of Toronto Building Records indicate that in May 1990, all windows on the south façade were replaced and balconies were refurbished.

iv. CONTEXT

The following section provides contextual information and analysis related to the property which is the basis for determining 'Contextual Value' according to O. Reg. 9/06 Criteria.

The 48 acre property at 51 Panorama Court is located northeast of the intersection of Kipling Avenue and Finch Avenue with the Humber River valley and conservation area running along its eastern boundary. Contextually, the property at 51 Panorama Court maintains and supports the historical character of this portion of Thistletown as it evolved from a natural tableland of the Humber River, to a farm with a grist mill, to a rural branch of the Hospital for Sick Children and later the Thistletown Regional Centre for Children and Adolescents. Roughly half of the original 98 acres of countryside bound by a branch of the Humber River and substantial tree planting still exists. Important sections of both the 1860 and 1878 farm roads as well as the 1920s circuitous drive remain.

34 The Toronto Daily Star, October 20, 1928, p. 16.

35 Nolt, Jill, p. 2.

36 Op. cit., p.3.

37 Short, p. 1

38 Ken Copeman, Maintenance Foreman at the Thistletown Regional Centre for Children and Adolescents for 29 years.

The surrounding area has evolved to its current character as a mixed-use area, partly institutional on the south side of the street with the adjacent Rexdale Community Legal Clinic, and on the north side, it is surrounded by apartment high-rise buildings of the later 20th century. Through its dignified Georgian Classical character, the hospital buildings in its picturesque park-like setting is visually linked to the 1920s history and character of the area and is a key component in the evolution of the neighbourhood's growth and development.

3. EVALUATION AND APPLICATION OF O.REG 9/06 CRITERIA

The following evaluation applies Ontario Regulation 9/06 made under the Ontario Heritage Act: Criteria for Determining Cultural Heritage Value or Interest. The criteria are prescribed for municipal designation under Part IV, Section 29 of the Ontario Heritage Act, and the City of Toronto also uses these criteria when assessing properties for inclusion on the City of Toronto's Heritage Register. There are three categories for a total of nine criteria under O. Reg 9/06. A property may be designated under Section 29 of the Act if it meets one or more of the provincial criteria for determining whether it is of cultural heritage value or interest.

The evaluation table is marked "N/A" if the criterion is "not applicable" to the property or "√" if it is applicable to the property, with explanatory text below.

DESIGN OR PHYSICAL VALUE

Design or Physical Value	
i. rare, unique, representative or early example of a style, type, expression, material or construction method	√
ii. displays high degree of craftsmanship or artistic merit	√
iii. demonstrates high degree of scientific or technical achievement	√

Representative example of a style and type with a high degree of craftsmanship

Constructed in 1928, the main hospital building for The Hospital for Sick Children, County Branch (1928-1957) and later the Thistletown Regional Centre for Children and Adolescents (1957-2014) is a fine representative and well-crafted example of a rural satellite hospital designed in the Georgian Classical style in Toronto. Defining elements of the style are evident in the main building's symmetry and hierarchy, red brick cladding combined with the well-executed cast stone elements such as the door and window surrounds, the string courses and cornices of the north façade and long colonnade of stone pilasters and loggia of Tuscan Doric columns on the south façade, as well as in the composition of the building's massing and façades. An interior feature of special interest is the entry rotunda in the north wing, faced in Caen stone. Classical elements in this prominent circular space include fluted pilasters, door surrounds with pediments incorporating volutes and a naturally lit skylight with Caen stone tracery. The design of the building emphasized the dignity and civic pride in the treatment that the hospital provided for their young patients through diverse means.

The property's design value also relates to its landscape setting: the original 1928 layout of the site with the circuitous drive owes much to the picturesque landscape tradition that evolved in England in the eighteenth century at the same time that Georgian Classicism was being adapted to country house use. Similar to the architectural prototype being adapted to the functions of the main building, the landscape was also designed to provide a therapeutic setting, and among the planting of 50,000 seedlings on the site were groves of pine trees. Along with sunlight and fresh air, the scent of pine trees was thought to be beneficial in the cure for tuberculosis. The original circuitous drive that stretched from the former main entrance on Islington Avenue at the southeast corner of the site to the principal entrance on the north elevation of the main building was lined with an alternating pattern of deciduous and pine trees. Groves of pine trees continue to cluster around the south wing of the hospital on the lawns to the south and west. The circuitous drive designed in the late 1920s, which incorporates part of the original Alexander Card farm road that led from the homestead to the grist mill and runs parallel to the Humber River, remains intact. The property as a whole, consisting of both the main building and its relationship to the landscape, and in particular, the south elevation's inter-relationship with the picturesque landscaped elements, represents innovative and evolving advances in the physical and mental health care for children and youth in Ontario.

Demonstrates high degree of scientific achievement

The selection of the site and the design of the satellite branch for the Hospital for Sick Children has historic and scientific value because it contributes to an understanding of the principles and evolution of healthcare, both physical and mental, for children and adolescents in Ontario and Canada when it opened in 1928 and later selected by the Government of Ontario in 1957 for use as a mental healthcare facility for children and youth. Addressing issues of long-term recovery, tuberculosis, polio, and later as the Thistletown Regional Centre for Children and Adolescents, autism, amongst other mental health diagnoses, the practical care and research embraced a variety of concepts and methods which were increasingly focused on a holistic de-institutionalized approach that consistently encompassed the benefits of a natural landscape setting.

The design of the main building utilizes the T-shaped plan in order to maximize exposure to sunlight and fresh air needed for the long-term recoveries and the treatment of tuberculosis prior to pharmaceutical cures. This was evident in the plan's design with two primary elevations - north and south - connected by the well-lit and ventilated cross-axis, but in particular, in the approximately 200' long south-facing patient dormitory wing, whose rooms opened directly onto balconies and a boardwalk to allow beds to be moved outdoors for the therapeutic benefits associated with heliotherapy and in the inclusion of pine groves in the planting of the site. The T-shaped plan was also designed to maximize the number of operable windows and daylight from the overhead skylights, which was in keeping with the therapeutic treatment associated with access to fresh air and sunshine.

HISTORICAL OR ASSOCIATIVE VALUE

Historical or Associative Value	
i. direct associations with a theme, event, belief, person, activity, organization or institution that is significant to a community	✓
ii. yields, or has the potential to yield, information that contributes to an understanding of a community or culture	✓
iii. demonstrates or reflects the work or ideas of an architect, artist, builder, designer or theorist who is significant to a community	✓

Direct association with an institution that is significant to a community

The property at 51 Panorama Court is directly associated with the Hospital for Sick Children, the first hospital in Canada solely dedicated to pediatric medicine. The property was custom-built in 1927-1928 as the Hospital's rural County Branch for the specialized treatment of childhood diseases, particularly tuberculosis, and for long-term convalescent care of children. Between 1957 and 2014, the property is associated with the Thistleton Regional Centre for Children and Adolescents and the specialization and modernization of mental healthcare for children and youth as well as for its association with the emerging practice of community-based care models of treatment. Its shift in purpose reflects a greater awareness of the need for particularized care of children and the recognition of children's mental healthcare needs as varied from adults, requiring different treatment techniques.

Yields information that contributes to an understanding of a community or culture

The property at 51 Panorama Court contributes to an understanding of the modernization of hospitals in the early 20th century and the expansion and specialization of healthcare services for children and youth. The property contributes to an understanding of the evolution of treatment philosophies and the advancement of medical methodologies as applied to the care of children and youth across the property's history including its time as the County Branch for the Hospital for Sick Children (1928-1957) and as the Thistleton Regional Centre for Children and Adolescents (1957-2014). Addressing issues of long-term recovery, tuberculosis, polio, and autism specifically, the practical care and research embraced a variety of concepts and methods which were increasingly child-focused and incorporated a variety of concepts and methods which were increasingly focused on a holistic, deinstitutionalized approach that consistently encompassed the benefits of a natural landscape setting.

Demonstrates or reflects the work or ideas of an architect, artist, builder, designer or theorist who is significant to a community

The design of the Hospital for Sick Children, County Branch is associated with the architects Sproatt and Rolph, partners in one of Toronto's leading firms from 1900-1934 with a reputation for its range of commissions for residential, institutional, commercial and industrial buildings. The practice extended its influence across Ontario and as far away as Manitoba and Nova Scotia. In their thirty-four year partnership, they collaborated on some of the most renowned landmarks in Canadian architecture.

Important projects included the Birge Carnegie Library, Victoria College (1908-10), Hart House (1911-19), Upper Canada College (1923-4), Canada Life Building (1930-31), Royal York Hotel (1927-29 with Ross and Macdonald), and Eaton's College Park (1929-30 with Ross and Macdonald) and the Ontario Hydro Electric Power Commission Building (1934-5), now the Princess Margaret Hospital. Sproatt was an acknowledged master of the Collegiate Gothic style but also designed fine buildings in a Classical style such as the Canada Life Building (1930-1931) on University Avenue.

CONTEXTUAL VALUE

Contextual Value	
i. important in defining, maintaining or supporting the character of an area	✓
ii. physically, functionally, visually or historically linked to its surroundings	✓
iii. landmark	N/A

Important in defining, maintaining or supporting the character of an area

Contextually, the property at 51 Panorama Court maintains and supports the historical character of this portion of historic Thistletown as it evolved from a forested tableland of the Humber River Valley to a farm with a grist mill near the Humber River to a rural branch of the Hospital for Sick Children and later as the Thistletown Regional Centre for Children and Adolescents, both institutions comprising 98 acres of countryside with substantial tree plantings and bounded by the forested slopes of the Humber River Valley, to its current character as an area of mixed use. Its present-day land-uses are partly institutional on the south side of the street with the adjacent Rexdale Community Legal Clinic and on the north side by high rise apartments of the late 20th century. The forested slopes of the Humber River Valley is a unique natural feature and establishes a distinct character in the area west of Kipling Avenue.

Physically, functionally, visually or historically linked to its surroundings

Through its dignified Georgian Classical character, the hospital building in its picturesque park-like setting is visually linked to the 1920s history and character of the area and is a key component in the evolution of the neighbourhood's growth and development.

CONCLUSION

Staff have completed the Research and Evaluation Report for the property at 51 Panorama Court and determined that the property meets Ontario Regulation 9/06, the criteria prescribed for municipal designation under Part IV, Section 29 of the Ontario Heritage Act under design, historical, and contextual value. As such, the property is a significant built heritage resource.

The property has cultural heritage value and provincial significance for its association with the Hospital for Sick Children and the provincially-owned Thistletown Regional Centre for Children and Adolescents. Known colloquially as "Thistletown", the property has cultural heritage value as a complex containing interrelated built heritage and

landscape elements with a three-storey hospital structure completed in 1928 to the designs of the notable architectural firm of Sproatt & Rolph, a circuitous drive designed in 1928, and landscape elements.

The property contributes to an understanding of the principles and evolution of healthcare, including both physical and mental health for children and youth in Ontario. Across both historical time periods – as the County Branch for the Hospital for Sick Children (1928-1957) and later as the Thistletown Regional Centre for Children and Adolescents (1957-2014), the site, as an interrelated complex, reflects the importance of the relationship between the built form and the landscape in the care of children and in the shift towards providing specialized approaches to the treatment of children and youth whether for medical conditions or for mental health. The property's continuity of use through two historical eras as well as the relatively unaltered relationship between the main hospital building and the landscape, including the designed elements of the landscape, contributes to its design and historical values, make the property unique.

Contextually, the property maintains and supports the character of this area as it evolved from a 19th century settlement to a rural hospital for children and later as a children's mental healthcare facility, and it is a key component in the evolution of the neighbourhood's growth and development.

The Statement of Significance (Attachment No. 3) 51 Panorama Court comprises the Reasons for Designation to be included in the Notice of Intention to Designate. The Notice will be served following the transfer of the property and advertised on the City of Toronto's web site and on the Ontario Heritage Trust according to the provisions of the Ontario Heritage Act.

Once the subject property is transferred out of provincial control, the new owner will be subject to the requirements of the Ontario Heritage Act.

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SIGNATURE

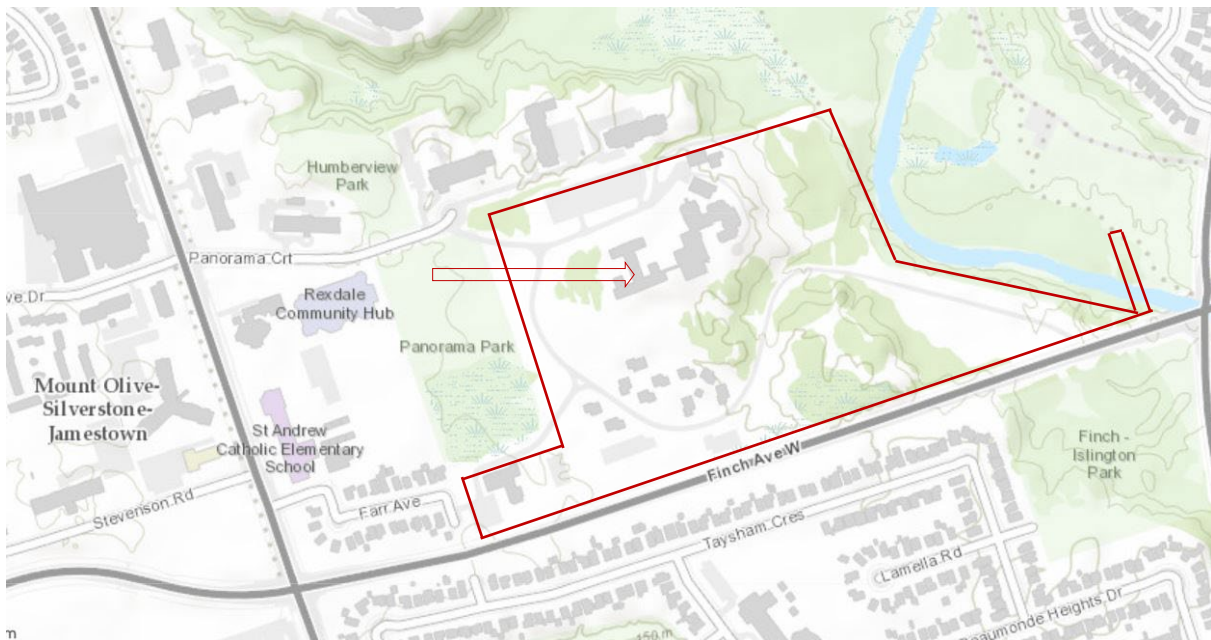
Gregg Lintern, MCIP, RPP
Chief Planner and Executive Director
City Planning

ATTACHMENTS

Attachment 1 – Maps and Photographs

Attachment 2 – List of Research Sources

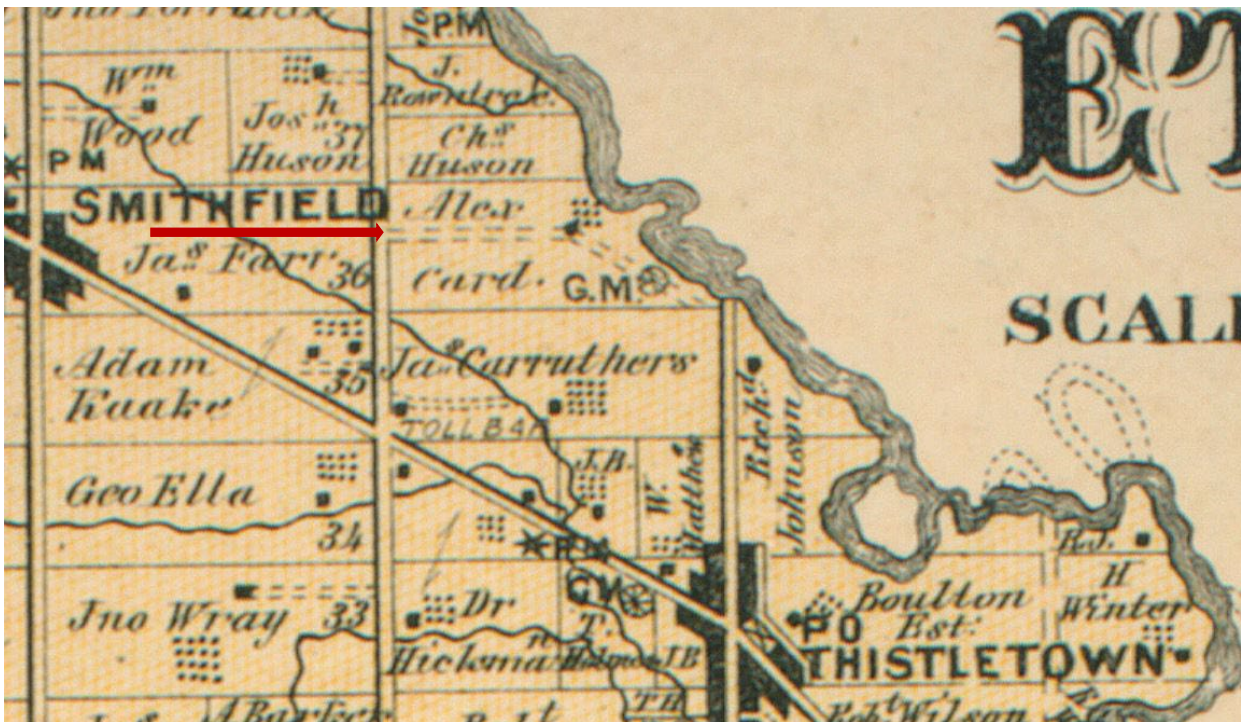
Attachment 3 – Statement of Significance (Reasons for Designation)



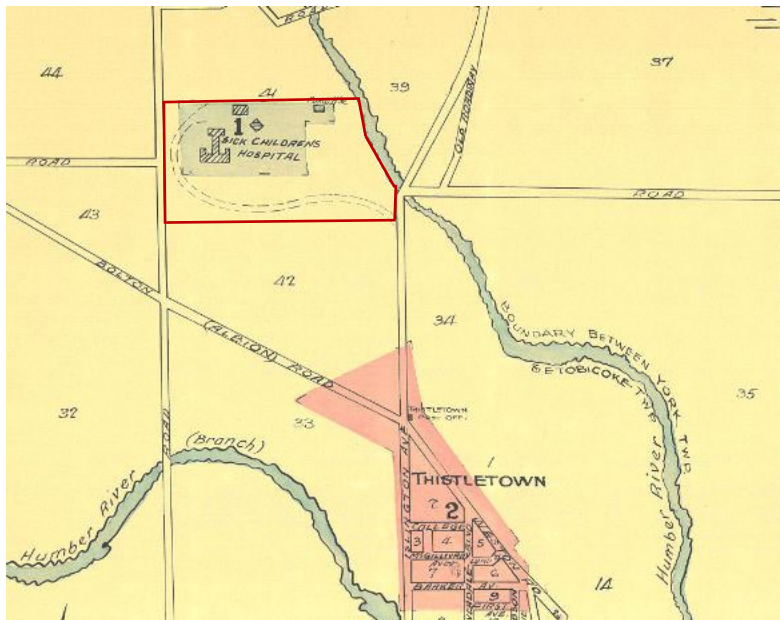
1a. (above) aerial view of 51 Panorama Court, CBRE Limited (2022). The dark blue shaded area is the approximate location of the Conservation Land on the property.
 1b. (below) City of Toronto Property Data Map showing the approximate location of the property at 51 Panorama Court, outlined in red, while the arrow marks the site of the hospital structure designed by Sproatt & Rolph for the Hospital for Sick Children, County Branch completed in 1928.



2. The 1860 Tremaine's Map of the County of York, Canada West showing the approximate location of the Alex Card (Lot 36) and Jason Carruthers (Lot 35) estates. 'GM' on Alex Card's Lot marks the location of the grist mill.



3. 1878 Illustrated Historical Atlas of the County of York showing the approximate location of the Alex Card (Lot 36) and Jason Carruthers (Lot 35) estates. Alex Card's Lot shows a drive running eastward to a homestead and orchard and then southeast towards a grist mill ('GM' marking its location).



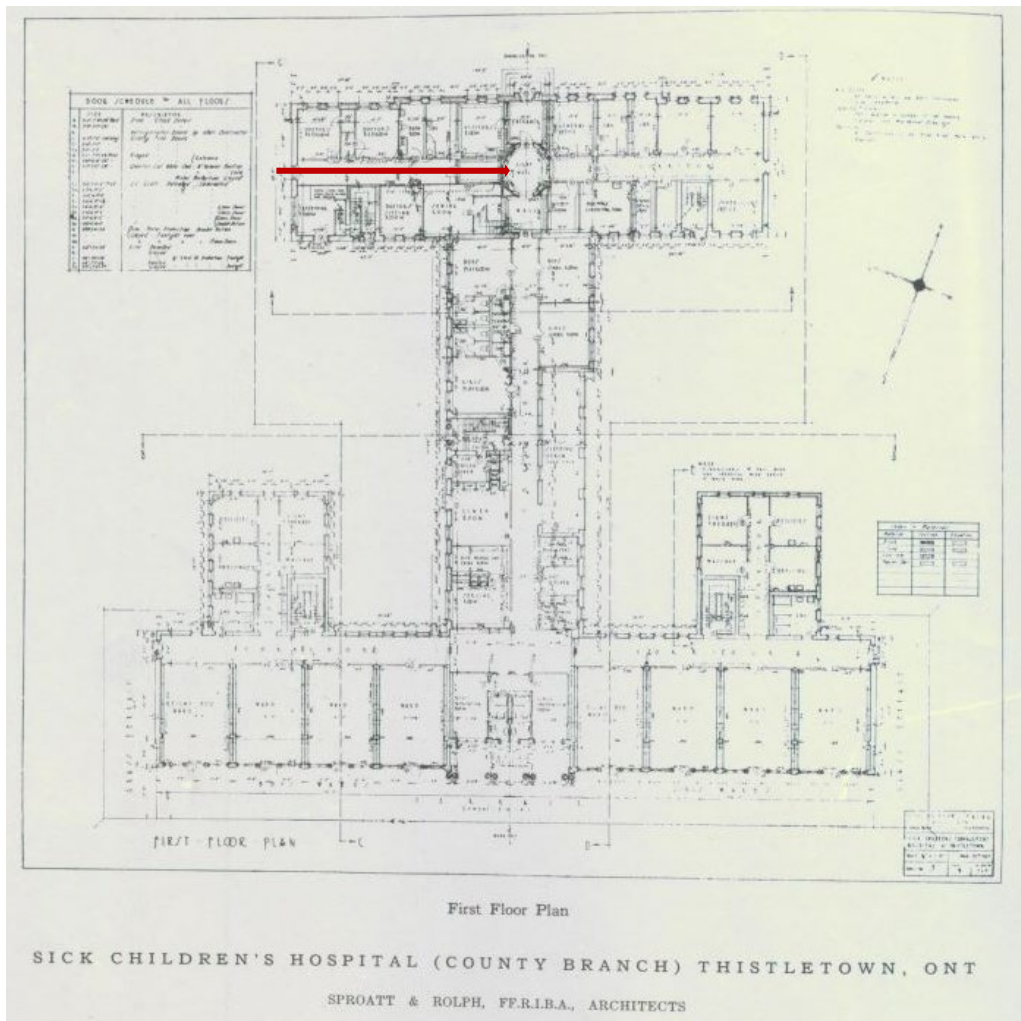
4. Fire Insurance Plan, 1936. The approximate location of the property is shown in red. The property's setting on the tablelands of the Humber River, with the grounds high, rolling and fairly well-wooded, were factors in the Hospital Trustees selection for the new hospital site. The location of the hospital building on the site would offer a wide view in every direction. (McMaster University Library)



5. Aerial photograph (1947) showing the hospital site with access from both Kipling Avenue (as currently) and from Islington Avenue (southeast corner of the site). (City of Toronto Archives)



6. Aerial photograph (1978) showing the ancillary buildings to the south of the main hospital structure and located in deference to the landscape. (City of Toronto GIS)



7. T-shape plan of the hospital structure designed by Sproatt & Rolph with two principal façades - north and south. The T-shape plan allowed for the separation of uses: the north wing functioned as the administrative section with the rotunda (marked by the arrow) at the intersection of the entry and corridors, while the south wing with south facing views was the patients' wing. (Construction Journal, June 1929)



8. Photograph of the building's north façade which was the public face of the building. Note the architectural elements of the Georgian Classical style. (Construction Journal, June 1929)



9. Image showing the south façade of the patient wing (south wing) which was specifically designed and constructed for the use of heliotherapy. Doorways permitted beds to be wheeled outside onto wide balconies which extended the entire south elevation. This enabled children to receive direct sunlight and the therapeutic benefits of the nearby pine trees. (Construction Journal, June 1929)



10. North façade was the building's principal public face. It housed the administrative, admissions, and medical facilities. (Heritage Planning, 2022)



11. North façade, main entrance door with Classical detailing (Heritage Planning, 2022)



12. North façade details of the 2nd and 3rd storey windows (Heritage Planning, 2022)



13. South façade with stone details of the central loggia with 4 pairs of Tuscan Doric columns and adjacent pilasters flanking windows. Balconies on the 2nd storey were enclosed in 1959, and in 1990, windows were replaced. (Heritage Planning, 2022)



14. Balconies on the second storey of the south wing, extending the entire south elevation. Doorways permitted beds to be wheeled outside for heliotherapy (Heritage Planning, 2022)



15. (Image on the left) and 16. (Image on the right) Classical detailing in Caen stone in the entry rotunda, north wing. The rotunda is also the intersection point for corridors leading to the administrative and medical offices. (Heritage Planning, 2022)



17. Archival image of the farm road on the north side of the hospital building. The road provided access from Kipling Avenue (to the right of the image) and led down towards the river and grist mill (to the left), n.d. (Hospital Archives, The Hospital for Sick Children)



18. View from the second level of the south elevation of the patient wing showing a view to the southeast of the entry road from Islington Avenue with the Humber River beyond. Note the landscape's rolling topography, n.d. (Hospital Archives, The Hospital for Sick Children)



19. Current views from the second level of the south elevation of the patient wing looking southward. (Heritage Planning, 2022)



20. Current view from the southeast section of the original entrance drive of the south elevation of the hospital's patient wing. (Heritage Planning, 2022)



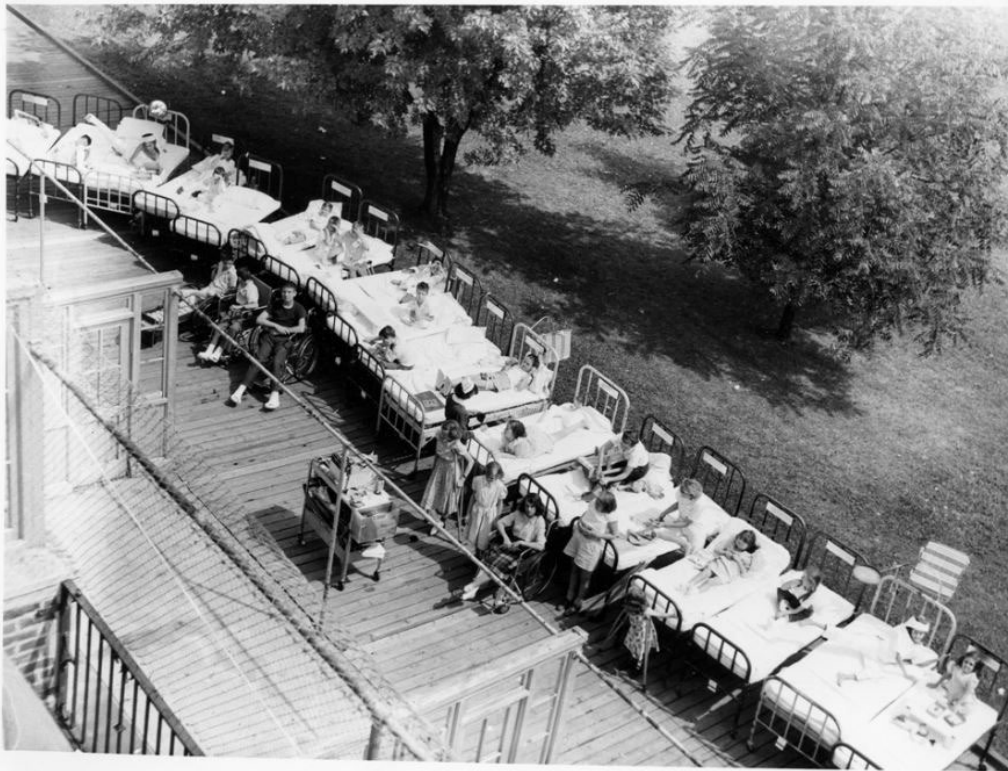
21. Current view of the southwest corner of the hospital's patient wing from the northwest section of the original entrance. (Heritage Planning, 2022)



22. Archival image from the southeast looking north to the south elevation of the hospital patient wing, showing groves of pine trees in the foreground, n.d. (Hospital Archives, The Hospital for Sick Children)



23. Archival image from the southwest looking northeast to the south elevation of the hospital's patient wing, showing the development of the lawns and planting, n.d. (Hospital Archives, The Hospital for Sick Children)



24. Image of the south elevation of the patient wing with children's beds rolled out onto the boardwalk showing the children exposed to direct sunlight and fresh air as therapy. (Hospital Archives, The Hospital for Sick Children)



25. Image of south elevation of the patient wing with children and staff, with beds rolled out onto the boardwalk. The south elevation was purposefully designed and constructed for heliotherapy, n.d. (Hospital Archives, The Hospital for Sick Children)



26. Patients in the landscape of the County Branch showing the pursuit of exposure to sun and fresh air as therapy in colder seasons and adjacent to the newly planted pine trees, n.d. (Hospital Archives, The Hospital for Sick Children)



27. Archival image showing patients in the landscape during the warmer months, n.d. (Hospital Archives, The Hospital for Sick Children)



28. Archival Image of the planting along the edge of the entry road to the hospital showing alternating deciduous and pine trees, n.d. (Hospital Archives, The Hospital for Sick Children)



29. Image of the planting along the edge of the entry road to hospital, n.d. (Hospital Archives, The Hospital for Sick Children)



30. Aerial view of the property since the extension of Finch Avenue. The original entrance on Islington Avenue has been cut off by Finch Avenue (southeast corner of the site). The arrows show the views from the entry route to the south and north façades. (Google Maps, annotations by Heritage Planning)



31. Aerial view of the property since the extension of Finch Avenue with arrows indicating the groves of pine trees (Google Maps, annotations by Heritage Planning)



32. Aerial view of the property showing the panoramic view (indicated by no. 4 on the image) from the south elevation of the patient's wing of the landscaped site and ravine. (PHPPS)



33. Aerial view of the property showing the approximate location of Conservation Land portion of the site and its proximity to the Humber River to the east. (CBRE 2022)

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Pedro Ramiro, Facilities Operations Manager & Ken Copeman, Maintenance Foreman,
Thistleton Regional Centre for Children and Adolescents (December 20, 2013)

**Hospital for Sick Children, County Branch /
Thistletown Regional Centre for Children and Adolescents****STATEMENT OF SIGNIFICANCE
(REASONS FOR DESIGNATION)**

The property at 51 Panorama Court is worthy of designation under Part IV, Section 29 of the Ontario Heritage Act for its cultural heritage value, and meets Ontario Regulation 9/06, the provincial criteria prescribed for municipal designation under the categories of design/physical, historical/associative and contextual value.

Description

The property at 51 Panorama Court is located on the south side of Panorama Court, northeast of the intersection of Kipling Avenue and Finch Avenue West, and west of the Humber River and conservation area along Islington Avenue, and is the former County Branch of the Hospital for Sick Children (1928-1957) and later the provincially-owned Thistletown Regional Centre for Children and Adolescents (1957-2014). The property is located in Mount Olive-Silverstone-Jamestown, a neighbourhood in north Etobicoke, which in the 19th century, was immediately north of the Town of Thistletown. Known colloquially as “Thistletown”, the now 48-acre (originally 98-acre) property is an interrelated complex containing a main hospital building (Main Building) constructed in 1927-1928 to the designs of the renowned architectural partnership of Sproatt & Rolph, as well as landscaped elements, and a designed circuitous drive.

The property was originally designed and completed in 1928 as a rural satellite branch of the Hospital for Sick Children, referred to as its County Branch, and closed in 1957. In 1957, the Government of Ontario purchased the site for use as a new mental healthcare facility for children and youth, and it was repurposed as the Thistletown Regional Centre for Children and Adolescents, effectively extending the property’s use as a complex dedicated to children’s healthcare with a child-focused approach to care and treatment until it closed in 2014. The property has since remained vacant.

The site is currently accessed from Panorama Court at the north end of the property boundary with direct access to the Main Building. As originally designed, though, the site and Main Building were approached from the southeast near Islington Avenue along a circuitous drive that offered intermittent views of the Main Building’s Patient Wing to the south, through the pine groves and undulating topography across the rural site. Incorporating a section of the original 19th-century farm road, this original point of egress is now inaccessible, but the drive itself and revealing view moments along its path remain intact, reinforcing the significant and intentional relationship between built form and landscape.

The property was listed on the City of Toronto’s Heritage Register in 2014.

The Government of Ontario recognizes Thistletown Regional Centre for Children and Adolescents as a "provincial heritage property of provincial significance" and is currently included on the List of Provincial Heritage Properties maintained by the Ministry of Citizenship and Multiculturalism. There are 19 buildings located within the current property boundaries, though only the Main Building (Infrastructure Ontario Building No B12353) designed by Sproatt & Rolph is considered to be historically significant.

Statement of Cultural Heritage Value

The Thistletown complex, a cultural heritage landscape of provincial significance, is a significant cultural heritage resource containing interrelated built heritage and landscape elements that has design, associative, and contextual values.

The property has historical value for its associations with important institutions of local and provincial significance. The property reflects two distinct historical eras: its time as the County Branch of the Hospital for Sick Hospital (1928-1957) and later as the Thistletown Regional Centre for Children and Adolescents (1957-2014). The use of the property through these two historical eras contributes to an understanding of the principles and evolution of healthcare, including both physical and mental health, for children and youth, in Ontario. In particular, both historical eras reflect a consistency in providing specialized medical treatments for children and a recognition of the need for particularized care or therapies required to treat children. The therapeutic landscape setting is another point of similarity and continuity between the two eras. The selection of the site and the design of the landscape with its open-spaces, circuitous drive, groves of pine trees, and views, along with the relationship of the Main Building to its surrounding lands provide a means of understanding the property across nearly a century of use. The property is a unique example of the expression of the predominant philosophy towards the treatment of children that emphasized a natural landscape setting, fresh air, and sunlight as important elements of therapy. While the property is associated with the Hospital for Sick Children, the first hospital in Canada solely dedicated to pediatric medicine, the property's continuity of use through the two historical eras as well as the relatively unaltered relationship between the Main Building and the landscape, including the designed elements of the landscape, make the property unique.

The design of the County Branch for the Hospital for Sick Children is associated with the renowned architects Sproatt and Rolph, partners in one of Toronto's leading firms from 1900-1934 with a reputation for its range of commissions for residential, institutional, commercial and industrial buildings. The practice extended its influence across Ontario and as far away as Manitoba and Nova Scotia. In their 34-year partnership, they collaborated on some of the most renowned landmarks in Canadian architecture. Important commissions included the Birge Carnegie Library, Victoria College (1908-10), Hart House (1911-19), Upper Canada College (1923-4), Canada Life Building (1930-31), Royal York Hotel (1927-29) with Ross and Macdonald), Eaton's College Park (1929-30) with Ross and Macdonald) and the Ontario Hydro Electric Power Commission Building (1934-5), now the Princess Margaret Hospital.

Completed in 1928, the Main Building is a fine representative and well-crafted example of a rural satellite hospital designed in the Georgian Classicist style in Toronto. Defining elements of the style are evident in the symmetry of the form and detailing, the brick cladding combined with cast stone elements of the door and window surrounds, the string courses and cornices of the north façade, and the long colonnade of pilasters and loggia of Tuscan Doric columns on the south façade. An interior feature of special interest is the entry rotunda in the north wing, which is faced in Caen stone and incorporates a Classical vocabulary with fluted pilasters as well as door cases with pediments and volutes, and a naturally lit domed skylight with tracery. The design of the building emphasized the dignity and civic pride in the treatment that the hospital provided for their young patients through diverse means.

The selection and design of the satellite location for the County Branch of the Hospital for Sick Children has historic and scientific value because it contributes to an understanding of the principles and evolution of healthcare, both physical and mental, for children and adolescents in Ontario. The site was chosen by the Trustees of the Hospital for Sick Children for its views of the Humber River and bucolic setting to aid in the convalescence of children. Subsequently, the Government of Ontario selected the site using the same criteria to establish the new child-centric mental healthcare facility in the 1950s. Addressing issues of long-term recovery, tuberculosis, polio, and later as the Thistletown Regional Centre for Children and Adolescents (1957-2014), autism and other mental health diagnoses, the practical medical care and research were child-focused and incorporated a variety of concepts and methods which were increasingly focused on a holistic, deinstitutionalized approach that consistently encompassed the benefits of a natural landscape setting.

The design of the Main Building utilizes a T-shaped plan in order to maximize exposure to sunlight and fresh air needed for long-term recoveries and the treatment of tuberculosis prior to pharmaceutical cures. This was evident in the plan's design to maximize the number of operable windows and inclusion of skylights, but in particular, in the approximately 200' long south-facing patient dormitory wing, whose rooms opened directly onto balconies and boardwalk to allow beds to be moved outdoors for the therapeutic benefits associated with heliotherapy and in the inclusion of pine groves in the planting of the site. The design of the building, with two primary elevations - north and south - connected by the well-lit and ventilated cross-axis containing school rooms and kitchen facilities for staff on the upper levels, which is significant in its own right in the context of prevailing medical theory, the landscaped treatment and layout of the site with its circuitous drive, emphasized the dignity and civic pride in the treatment that the hospital provided for their young patients.

The property's design value also relates to its landscape setting: the original 1928 layout of the site with the circuitous drive owes much to the picturesque landscape tradition that evolved in England in the 18th century at the same time that Georgian Classicism was being adapted to country house use. The landscape was designed to provide a therapeutic setting, and among the planting of 50,000 seedlings on the site were groves of pine trees. Along with sunlight and fresh air, the scent of pine trees was thought to be beneficial in the cure for tuberculosis. The original circuitous drive that stretched from the former main entrance on Islington Avenue at the southeast corner of the site to the principal entrance on the north elevation of the main building was lined

with an alternating pattern of deciduous and pine trees. Groves of pine trees continue to cluster around the south wing of the hospital on the lawns to the south and west. The circuitous drive designed in the late 1920s, which incorporates part of a 19th century farm road, remains intact. The property as a whole, consisting of both the Main Building and its relationship to the landscape, and in particular, the south elevation's inter-relationship with the picturesque landscaped elements, represents innovative and evolving advances in the physical and mental health care for children and youth in Ontario.

Contextually, the property at 51 Panorama Court maintains and supports the historical character of this portion of Thistleton as it evolved from a forested tableland of the Humber River Valley to a farm with a grist mill to a rural branch of the Hospital for Sick Children which comprised 98 acres of countryside with substantial tree plantings, bounded by the forested slopes of the Humber River Valley, to its current character as an area of mixed use, partly institutional on the south side of the street with the adjacent Rexdale Community Legal Clinic and surrounded by apartment high rises of the later 20th century on the north side. Through its dignified Georgian Classical character the hospital building in its picturesque park-like setting is visually linked to the 1920s history and character of the area and is a key component in the evolution of the neighbourhood's growth and development.

Heritage Attributes

The heritage attributes of the property at 51 Panorama Court are:

Design and Physical Value

Main Building

- The placement, setting, orientation and two primary elevations of the Main Building in its landscape setting
- The scale, form and massing of the two- to three -storey structure on a T-shaped plan with a flat roof
- The number, arrangement, and style of masonry window openings and skylights, providing natural daylight excluding the altered window openings on the east elevation
- The materials, including red brick cladding and stone details
- On the primary (north) elevation of the administrative wing, the symmetrical composition indicative of the Georgian Classical style including the centred projecting bay containing the main entrance and the window openings which are paired at the first and second storeys and tripled at the third storey
- The stone trim and details of the north façade including that of the door surround and entablature, the windows and the belt courses and cornice
- The date stone on the north façade laid on July 4th 1927, by the Honourable G. Howard Ferguson, KCL, Premier of Ontario
- On the primary (south) elevation of the patient wing, the treatment of the south façade, with its colonnade of stone pilasters and central loggia with 4 pairs of Tuscan Doric columns at the first floor and the stone window surrounds

- The upper level of the south façade with its stone pilasters supporting a continuous stone lintel and key-stoned window surrounds
- On the parapet of the south façade, the stone panels with their triple arch motifs and the cornice
- The rotunda in the entrance hall in the north administrative wing, the Caen stone-traceries and glazed skylight, as well as the Caen stone details including pilasters, door surrounds and other decorative stone elements

Landscape

- The circuitous drive, which incorporates a remnant section of the 19th century farm road, at the southeast corner of the property to the main entrance on the north façade of the Main Building with a landscaped setback on either side
- The formal front lawn between the entrance driveway and the north elevation of the Main Building
- The south, east, and west informal open-space treed areas inclusive of sloped terrain at the south
- The groves of pine trees on the south and west open-space areas of the Main Building
- The mature trees in a parklike setting that acts as an extension of the natural vegetation associated with the Humber River Conservation Area on the east side of the property, adjacent to the TRCA lands, extending from Panorama Court to the circuitous drive

Views

- The intermittent view north into the property from the southeast section of the circuitous (former) entrance drive to the southeast of the south façade of the Main Building
- The view to the southwest of the south façade of the Main Building from the northwest section of the circuitous (former) entrance drive
- The view of the north façade of the Main Building with its formally landscaped open space of lawn, stretching from the façade to the drive, as viewed from the intersection of Panorama Court and the west entrance of the north parking lot to the east entrance of the north parking lot
- The panoramic view from the south façade of the patient wing of the Main Building (both Ground and Second Floor) looking southward towards the landscaped site and Humber River ravine

Historical and Associative Value

- The placement, setting, orientation, and the two primary elevations of the Main Building in its landscape setting
- The architectural design of the Main Building as an expression of the prevailing medical approaches to the treatment of childhood illnesses and mental healthcare, with the abundance of light and air circulation provided by the skylights, the operable windows, the balconies, and the T-shaped plan
- The interrelationship of the Main Building and its landscape setting as an expression of the prevailing medical approaches to the treatment of childhood illnesses and mental healthcare, with the approximately 200' long south-facing patient dormitory wing, whose rooms opened directly onto balconies and

boardwalk to allow beds to be moved outdoors for the therapeutic benefits associated with heliotherapy and in the inclusion of pine groves in the planting of the site

Contextual Value

- The placement, setting, and orientation of the Main Building in its informal landscape, where access to sunlight, fresh air, and a bucolic setting provided an ideal site for the medical treatment and convalescing of children
- The mature trees in an open-space setting that acts as an extension of the natural vegetation associated with the Humber River and conservation area
- Through its dignified Georgian Classical character, the hospital building is visually linked to the 1920s history and character of the area, and is a key component in the evolution of the neighbourhood's growth and development
- The circuitous former entrance drive that incorporates a remnant section of the 19th century farm road and referencing an earlier period of settlement at this site