

# PRESIDENT PRIVATE HOSPITAL - HOTHAM HOUSE **BCA COMPLIANCE AUDIT REPORT**

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David Blackett From: Date: 17.07.2019

190266 Project No: Pages: 8

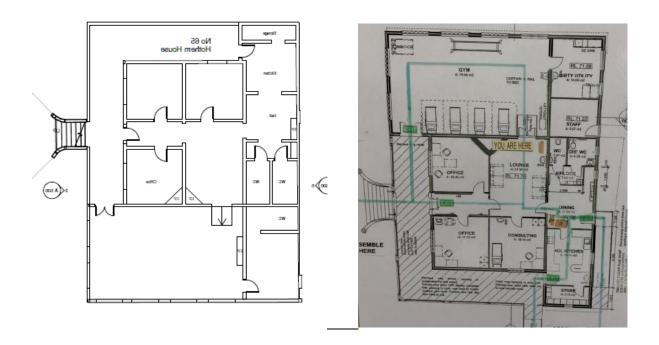
PRESIDENT PRIVATE HOSPITAL - HOTHAM HOUSE Subject:

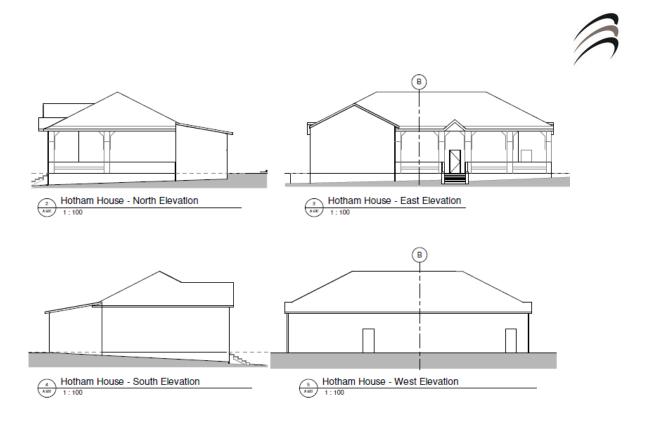
# David,

In accordance with your instructions BM+G has undertaken a walk-through compliance audit of the existing Hotham House against current BCA.

The audit was undertaken on 9 July 2019 and related to visual inspection of all accessible areas.

Drawings of the existing building are illustrated below: -





### **BUILDING CLASSIFICATION**

The single storey building was originally a residential dwelling, and has since been adapted for use by the President Private Hospital as a rehabilitation centre for patients accommodated in the adjacent IPU building.

We understand the existing building was identified for demolition as part of a proposed major redevelopment of the main hospital. Sutherland Shire Council has since identified the subject dwelling as an item of proposed heritage significance and hence will not, at this point in time, permit demolition of the building.

We understand the new hospital has been designed to accommodate more IPU beds to offset the health care demand for the Sutherland Shire. Retention of the existing Hotham House, if required by Council, will necessitate modification of the building to accommodate patient beds as part of the expanded IPU model.

This report has assessed the existing Hotham House as a proposed IPU building for ward accommodation of patients.

The building as been assessed as follows: -

- + Class 9a health care
- + Rise in storeys 1
- + Type C Construction

## **BCA COMPLIANCE CONSIDERATIONS**

The following comments arise form our audit of the existing Hotham House to be used as an IPU to accommodate a patient ward.

Our high-level findings from the audit are as follows: -



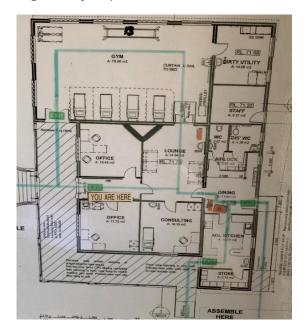
# FIRE & SMOKE COMPARTMENTATION & SEPARATION

- 1. The existing Hotham House would need to be connected to the main hospital by means of an enclosed linkway to facilitate patient transport. The interconnection by the linkway would result in the need for fire separation works to the existing building to mitigate the risk of fire spread between the hospital and the existing building.
  - These works would necessitate passive fire separation works to the external walls and fabric of the existing building.
- 2. Internal alterations will be required to achieve effective smoke separation between the ward rooms and the non-ward rooms. This will entail modification of the internal walls to extend to the underside of the existing roof structure.

## **EGRESS AND ACCESSIBILITY**

1. All exit doors are to be reconstructed to swing outward.

Required exit doors are generally as per below: -











- 2. All exit discharge doors will need to be physically widened to comply with BCA to facilitate excavation for patients in beds.
- 3. Most internal doors will need to be physically widened to comply with BCA to facilitate transportation of patients in beds.
- 4. Each exit door needs to have an external threshold flush with the outside floor/ground surface, or at worse case, maximum 25mm step. This is to facilitate the movement of beds and other emergency equipment in the event of an evacuation.

In this instance due to the heritage nature of the building, the external threshold steps are excessive and would need to be modified to comply.

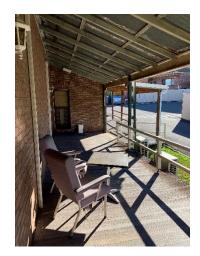






- 5. All internal doorway widths are narrow and not compliant with the Access to Premise Standards to facilitate circulation by people with disabilities.
- 6. Continuous accessway for people with disabilities is not provided form the public roadways / footpath. The overall site would need to be regraded and suitable pathways provided to facilitate independent access for people with disabilities form the adjacent public place.
- 7. The wrap-around timber deck to the front and northern side of the existing building has a surface and cross-fall gradient that does not comply with the Access to Premise Standard.

The deck will not facilitate the safe and independent circulation for people with disabilities.





8. The link pathway between Hotham House and the existing hospital (proposed redevelopment) is at an excessive gradient. The site will need to be regraded to achieve a compliant circulation accessway between the buildings.





9. All glazing within the building would need to be removed and replaced with glazing to comply with AS1288.

BCA and AS1288 requires all glazing located in a health or aged care facility must be Grade A safety glass.

Noting the original glazing installed at Hotham House is an integral part of the building heritage fabric, we suggest removal of the glazing from all internal and external locations will have adverse impact on retention of the existing heritage attributes.

Feasible retention of the existing non-safety glass in any IPU area is not an option and cannot be accepted under any scenario.















- 10. Existing door hardware throughout the building will need to be replaced with hardware that is compliant with BCA and the Access to Premise Standards to facilitate egress and access for people with disabilities.
- 11. The front entry stairways to not facilitate access for people with disabilities. It will be necessary for an access ramp to be provided at the main entry of the building.



### PROVISION OF ESSENTIAL FIRE SAFETY MEASURES

The existing building will require, amongst other measures, a sprinkler system to be installed throughout.

The two issues to arise in this regard are: -

- (a) The sprinkler system installation will be intrusive to the existing celling system, and
- (b) In certain areas the sprinklers will need to be flush mounted due to anti-ligature and infection control. The flush mounted sprinkler heads will require concealment caps that must sit flush with the plasterboard ceiling system.

In this instance much of the existing ceiling has inherent raise pattern which will prevent the flush installation of the concealing caps. The ceiling system will need to be replaced, in part with a smooth surface plasterboard finish.





### **HEALTH AND AMENITY**

- 1. Bathroom amenities, including accessible facilities, will need to be provided in accordance with BCA for the IPU patients and visitors.
  - Spatially, the required amenities will demand significant area which will also result in removal of internal walls to accommodate the required zone.
- 2. It is understood that a likely IPU use of the existing building may include accommodation of mental health patients. In this regard the internal design of the building would need to address anti-ligature facets which, in essence would entail the removal of various original fixtures, fittings and fabric including: -
  - Door & window hardware
  - + Protruding door architraves
  - + Fire places
- 3. The open-air vents located in the internal and external walls of the building (located in each room) will need to be close doff or removed to mitigate risk under infection-control provisions.





## **AUSTRALISIAN HEALTH FACILITY GUIDELINES (AUSHFG)**

The AusHFG is an initiative of the Australasian Health Infrastructure Alliance (AHIA).

The AusHFG seeks to support the delivery of optimal patient care through provision of an appropriate physical design and built environment.

The AusHFG enable planners and designers of health facilities to use a common set of recognised guidelines and specifications for the base elements of health care facilities.

The AusHFG has the following key objectives:

- + Australasian best-practice approach to health facility planning;
- + access to standard spatial components; and
- + a flexible tool responsive to changes in the delivery of health care

The aim of the AusHFG is predominately to: -

- + assist with the design of safe health facilities that provide privacy and dignity for patients, support contemporary models of care and the needs of carers, visitors and staff:
- + maintain public confidence in the standard of health facilities;
- + achieve affordable solutions for the planning and design of health facilities; and
- + promote built solutions that minimise recurrent costs and encourage operational efficiencies.



The AusHFG provides design guidance and recommendation in relation to the following broad categories: -

- (a) Room layouts and spatial considerations
- (b) Design for access, mobility, OHS and security
- (c) Infection control and prevention
- (d) Building services & environmental design

Compliance with the AusHFG is a consideration factor for health facility accreditation bodies. As a result, it is important that a health care facility be designed to satisfy the aims and objectives of the Guideline.

It is the opinion of this office that the constraints arising from the existing Hotham House will have adverse implications on the ability for the design of the proposed IPU to satisfy the AusHFG requirements.

### Conclusion

This report contains advice and findings from our site compliance audit and assessment of the existing Hotham House located on the site of the President Private Hospital.

The purpose of the site compliance audit report was to ascertain the extent of works that would be required for the existing building, in the event that the building is retained due to heritage preservation restrictions, in order for Hotham House to be converted for use as an IPU health care facility.

The advice and commentary in the preceding report suggests that extensive and invasive internal and external alterations and additions will need to be carried out in order to cause the building to be compliant and suitable for use as an IPU facility in accordance with the BCA and the AusHFG.

In the event that the required works cannot be undertaken due to heritage implications, we suggest the existing Hotham House would be unsuitable for use as an IPU health care facility and hence could not be certified under the Environmental Planning & Assessment Act for use as a Class 9a building.

Regards.

David Blackett

Accredited Building Certifier (Unrestricted)

Director

Blackett Maguire + Goldsmith