



## Design Option for Retention of Hotham House

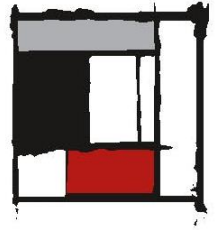
Client: Macquarie Health Corporation  
Project: Alterations and Additions to  
President Private Hospital  
369-381 President Ave 61-65  
Hotham Rd, 2-4 Bidurgal  
Kirrawee

Project Ref: MACHEALTH-06  
12/07/2021

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## Retention of Hotham House

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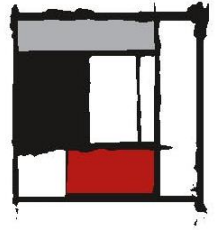
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#### Issue:

Issue No	Description	Issue Status
	Draft for internal review	Draft
	For submission	Final



## Retention of Hotham House

This design option has been prepared in response to request for resolved design options for the retention of Hotham House. As stated in the rejection of response to submissions:

*Currently, the options presented do not incorporate resolved design issues and rely on previous schemes and layouts. Please provide revised schemes that have resolved design issues such as traffic conflicts and flood restricted buildings access prior to presenting the options for retention / adaptive reuse of Hotham House. Please support revised schemes with relevant cross sections showing how site levels proposed vs existing can be integrated to retain Hotham House.*

### Site planning and access

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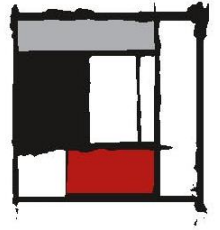
The redevelopment of the President Private Hospital is governed by the viable access points from the surrounding public roads. President Ave as the main vehicular access is not viable due to traffic and localised flooding. Bidurgal Ave is not viable due to its restricted width and single dwelling residential character.

Hotham Rd provides a good access being a secondary road of adequate carriage way width with a variety of multi and single dwelling houses together with some commercial premises. Hotham Rd has signalised access to President Ave and indirect access to The Kingsway. These are both of the local major arterial roads.

The site frontage to Hotham Rd is approximately 90m. Access to Hotham Rd is restricted at the southern end of the site due to proximity to the signalised intersection with President Ave. This leaves approximately 60m of available frontage with a 30m offset to the intersection. This frontage also provides near level access to the hospital ground floor which is defined by the existing hospital building.

Unfortunately, this is also the frontage occupied by Hotham House.

If Hotham House is to be retained in the redevelopment of the President Private Hospital the hospital vehicular entry must remain within this 60m frontage already occupied by Hotham House.



## Retention of Hotham House

### Retention of Hotham House with Current Design Layout

Most hospital patients arrive and depart by private car. To facilitate this a separate vehicle drop off is provide away from the major car park entry exit. The design submitted for approval provides a logical separation of drop off from main traffic, providing clear wayfinding and safe access.

To achieve an equally acceptable hospital entrance arrangement the access driveway is moved to the south side of Hotham House and the drop off area to the west (and to the rear of) Hotham House as indicated below where Hotham House is highlighted in purple and the new driveway location is in red hatch pattern.

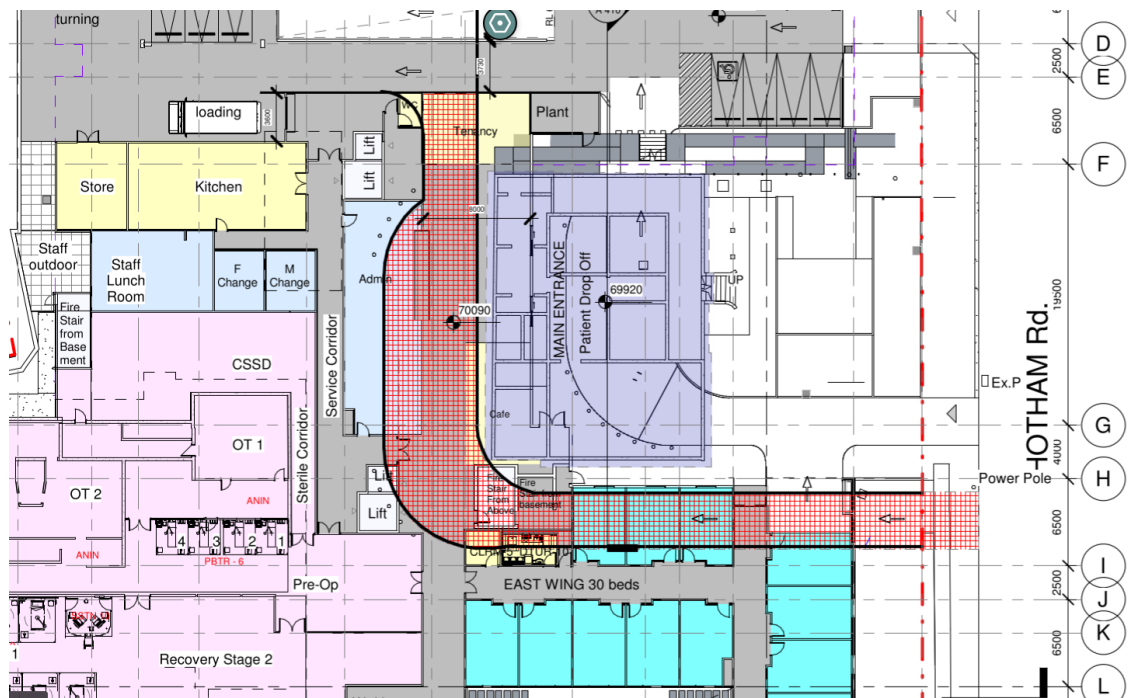


Fig 1: Ground floor plan with Hotham House and alternate driveway overlaid.

With the repositioning of the drop off behind Hotham House wayfinding is adversely affected as the access and destination points are not immediately obvious.

This relocation of the entry and retention of Hotham, House impacts on the upper floors of the hospital through reduced floor plate available for essential patient facilities.

Retention of Hotham House

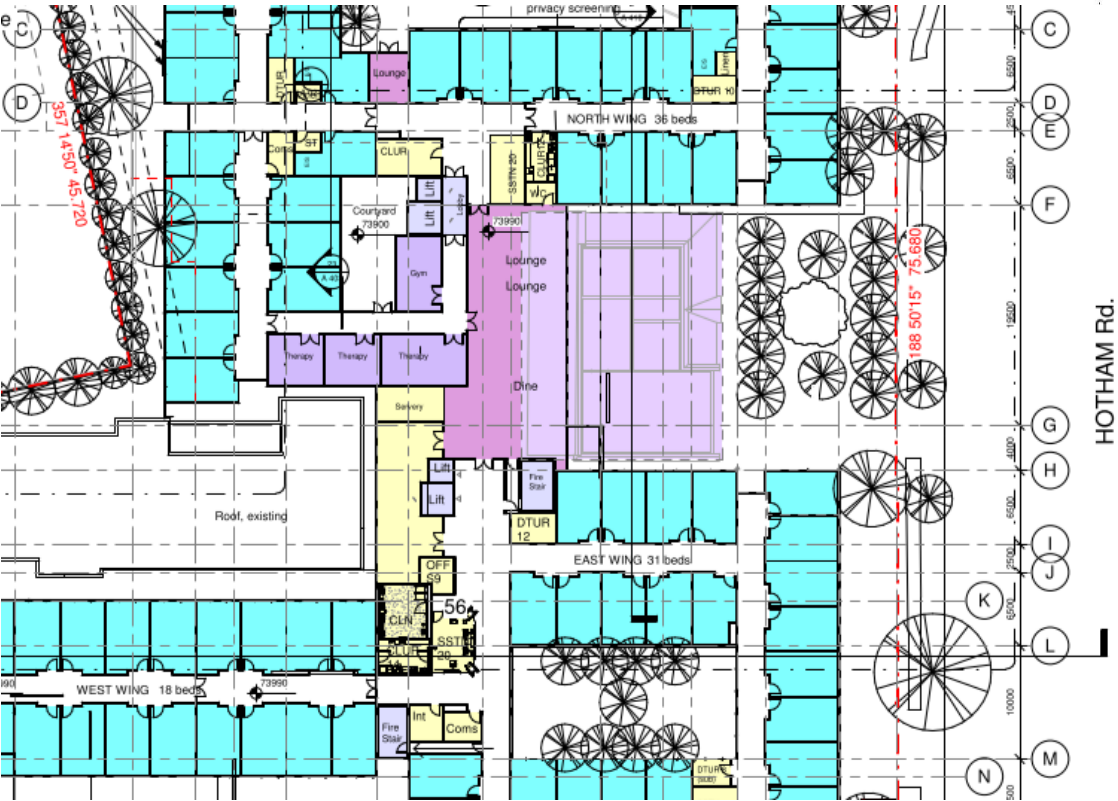
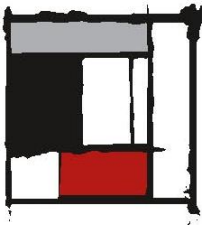


Fig 2: First and second floor plans with Hotham House overlaid showing proximity of in-patient rooms and clash to patient lounge and dining room.

The junction between Hotham House and both Hotham Rd and the redeveloped President Private Hospital is impeded by the difference in floor levels.

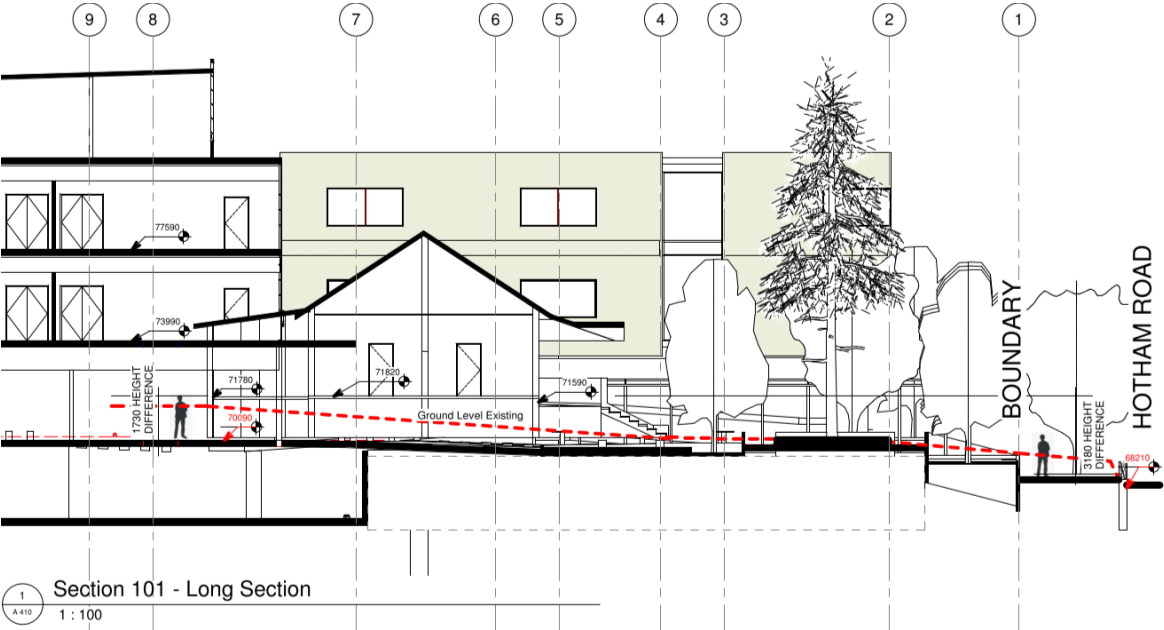


Fig 3: Long section showing height difference of hospital to Hotham House and intrusion of roof onto patient windows.



## Retention of Hotham House

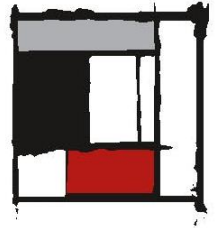
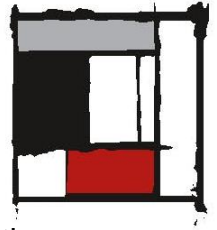


Fig 4: Cross Section showing height difference of hospital to Hotham House.

From the above it is obvious that the retention of Hotham House without significant changes to the designed layout for the redevelopment of the hospital is not possible. Consequences are summarised below.

### Consequences

1. Five in-patients' rooms to each of the ground, first and second floor are lost to the east wing being a total of 15 in-patient rooms lost together with necessary support utility rooms.
2. The hospital lobby is completely displaced.
3. The hospital administration is reduced by 50%
4. There is no accessible path of travel from Hotham Rd to the entry to Hotham House or from the hospital to Hotham House.
5. The car park ramp to the basement car park precludes access out of the drop off area to Hotham Rd or to the basement car park, instead traffic will turn left towards the service area then exit via the service drive. With no access to the basement car park vehicles will exit the site and turn around before entering the site to access the car park. Such an arrangement will never be approved.
6. The patient lounge and dining room to the first and second floors is reduced by 50%. The resultant area will not meet the requirements of the Australian Health Facility Guidelines. This will result in the hospital being denied accreditation by NSW Ministry of Health. The patient lounge and dining areas to the first floor will have no windows due to the proximity of the Hotham House roof. This will result in a reduced amenity for patients and will not be acceptable to the NSW Ministry of Health.
7. In-patient rooms on first and second floor north wing will have their windows obscured by the roof to Hotham House and in instances will be



## Retention of Hotham House

closed off to achieve fire separation as indicated below. The installation of fire sprinklers will be required to Hotham House to prevent the spread of fire between buildings. This will destroy the integrity of the ceilings.

8. From the above section (fig 3) it is evident the basement car park will be reduced due to the impracticability of excavating under Hotham House. The result is loss of parking spaces and reduction in the width of the connecting driveway to single direction of movement only. This means cars entering the south portion of the car park (majority of parking spaces) will only be able to exit via President Ave or the drop off zone. It is not considered good practice to introduce more cars into the shared pedestrian /drop off zone. Exiting via President Ave will not be allowed for such a large number of vehicles due to traffic volumes on President Ave and the proximity to traffic lights.

## Design Option for Retention

To retain Hotham House, we have produced an alternate design layout for the redevelopment of President Private Hospital. This design achieves the retention of Hotham House by the redistribution of the available building to achieve a building with similar healthcare facilities but away from the area occupied by Hotham House. This is illustrated by the two diagrams below where the pink is the areas adjacent to Hotham House and the orange is the available area for redistribution.

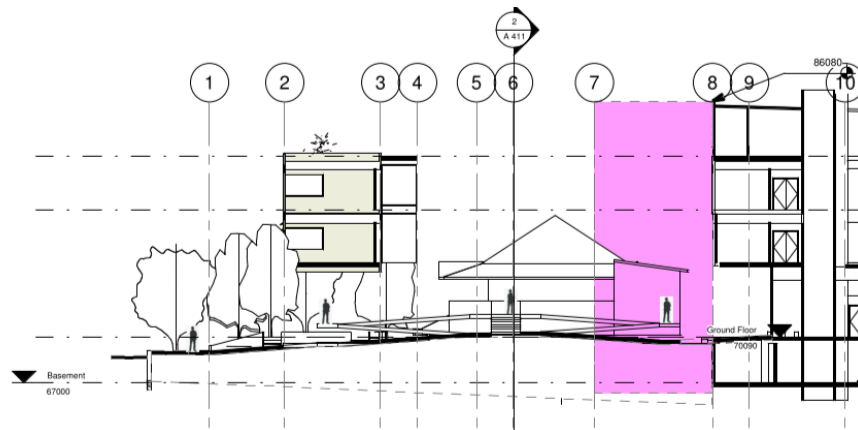


Fig 5: Section through entry showing area in pink displaced and no opportunity for substitution.

## Retention of Hotham House

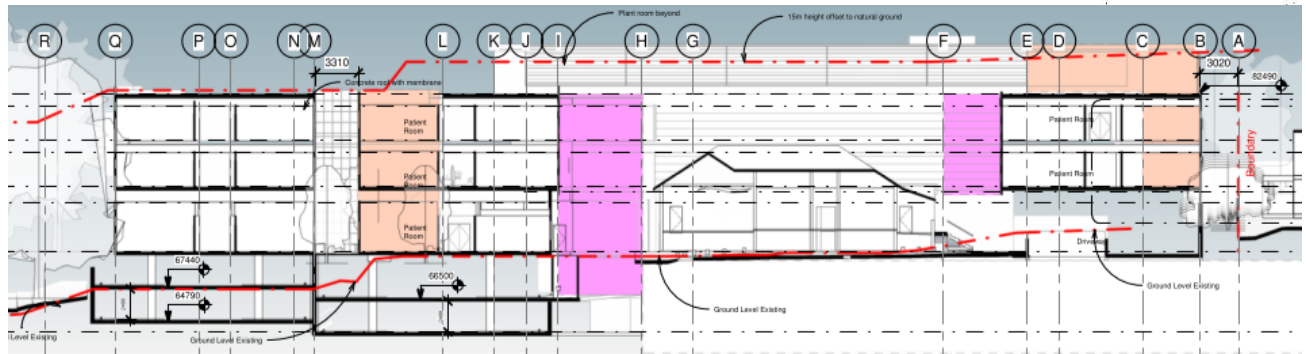
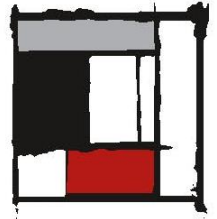


Fig 6: Cross section showing areas displaced in pink and areas added in orange.

The design responds to the opportunities provided in the retention of Hotham House as follows:

1. Raise height of first floor and hence the building by 1.10m, this will achieve:
  - a. Enhanced amenity for patients by lifting windows partly above the roof of Hotham House.
  - b. Height clearance for persons using the stairs and ramp from the hospital to Hotham House.
  - c. Visual alignment of the roof of Hotham House to the podium of the new hospital building
  - d. Visual perception of Hotham House when viewed from the hospital entry.
2. Move the in-patient rooms to the east wing south as required to clear the access driveway. This will reduce the width of the three-storey courtyard provide light and amenity to 29 in-patient rooms to 3.3m. It should be noted that the originally proposed width of 6m for this courtyard. This width was not acceptable to the design excellence panel of the Government Architects Office and the courtyard width was increased to minimum of 9m. It is highly unlikely 3m wide courtyard will be acceptable. In addition, a minimum of 6m is required for fire separation under the NCC. Refer Fig 9.
3. Move the north wing northward to 3m off the boundary to No59 Hotham Rd to allow separation of the north wing in-patient rooms from the roof of Hotham House. Refer Fig 9.
4. Move the front wall of the building at the main entry westward from basement level to roof plantroom by 5.0m to provide minimal clearance to the rear of Hotham House. Refer Fig 10.
5. Reception and Administration are relocated and displace service vehicle parking. Hospital administration now has no connectivity to the hospital entry. No passive surveillance over the hospital entry or mental health



6. Provide ramp in accordance with AS1428 from Hotham Rd to Hotham House and separate ramp from hospital entry to Hotham House. This ramp consists of three runs of ramp in a cattle grid formation.
7. Move the access ramp to the basement car park eastward so the drop-off area can exit direct to Hotham Rd, cars will still not be able to enter the car park from the drop-off area though – instead, they will proceed onto Hotham Rd back into the entry drive to proceed to the car park. Increasing traffic movements and congestion to Hotham Rd. Traffic flows cross at the Hotham Rd entry.

The site plan illustrates the proposed new building's layout and its connection to the existing building. Key features include:

- Rooms and Areas:** Admin, Kitchen, F Change, M Change, CSSD, OT 1, ANIN, Pre-Op, Recovery Stage 2, and East Wing.
- Infrastructure:** Emergency Generator, Fire Stair, Hydrant booster and meters, and a ramp up.
- Access and Egress:** Pedestrian Entry 1:20 grade, Ramp from HH to RL 71.60, Ramp from Street to Hotham House 1:14, and various fire stairs.
- Grid System:** A-K (vertical) and 1-6 (horizontal).
- Scale:** 0 to 6500 units.

*Fig 7: Ground floor arrangement with Hotham House retained and alternate driveway location. No hospital lobby and administration/reception moved to north and disconnected from entry.*

Retention of Hotham House

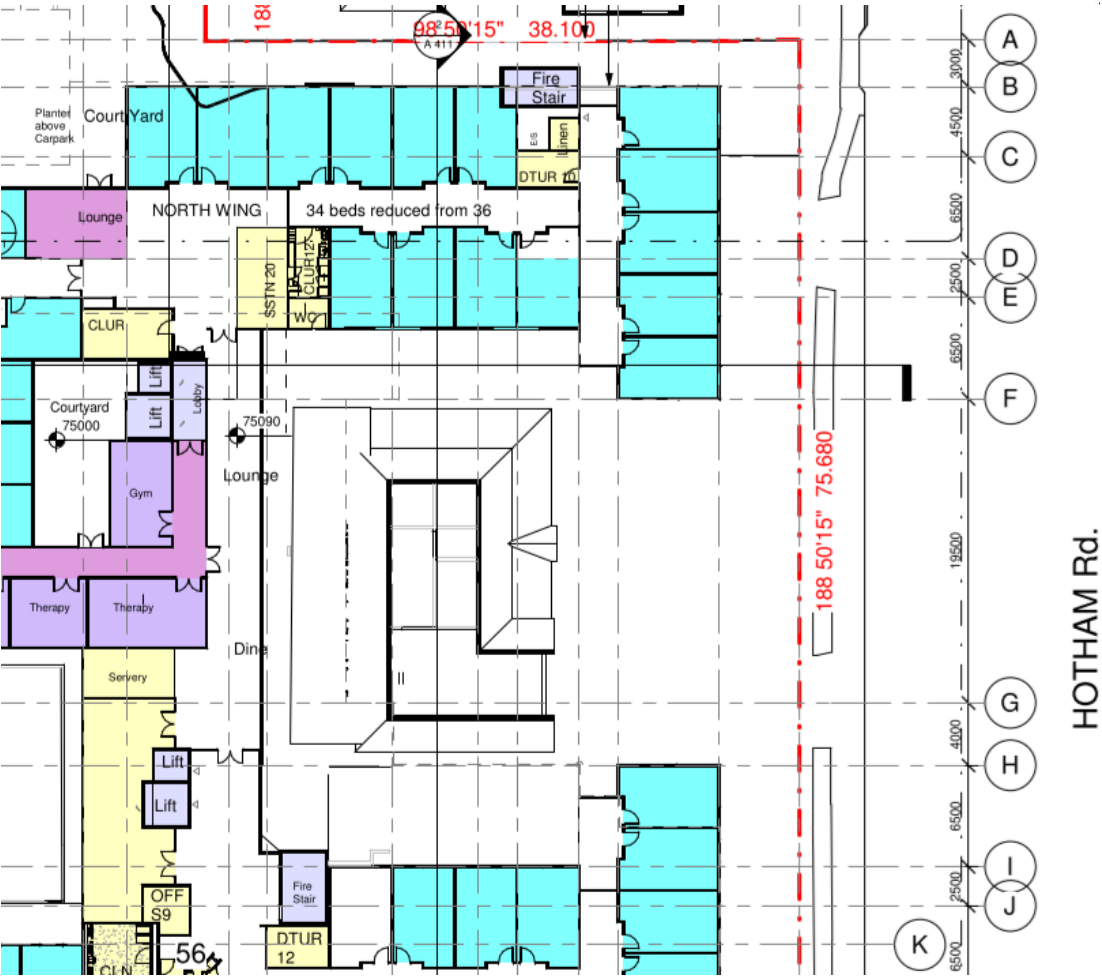
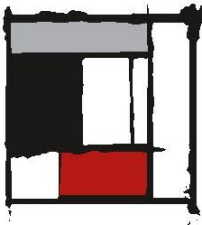


Fig 8: Typical first and second floor showing loss of patient lounge and dining room. North wing moved adjacent to No 59 Hotham Rd, northwest wing moved to within 3m of No 6 Bidurgal to provide patients outdoor recreation area.

Retention of Hotham House

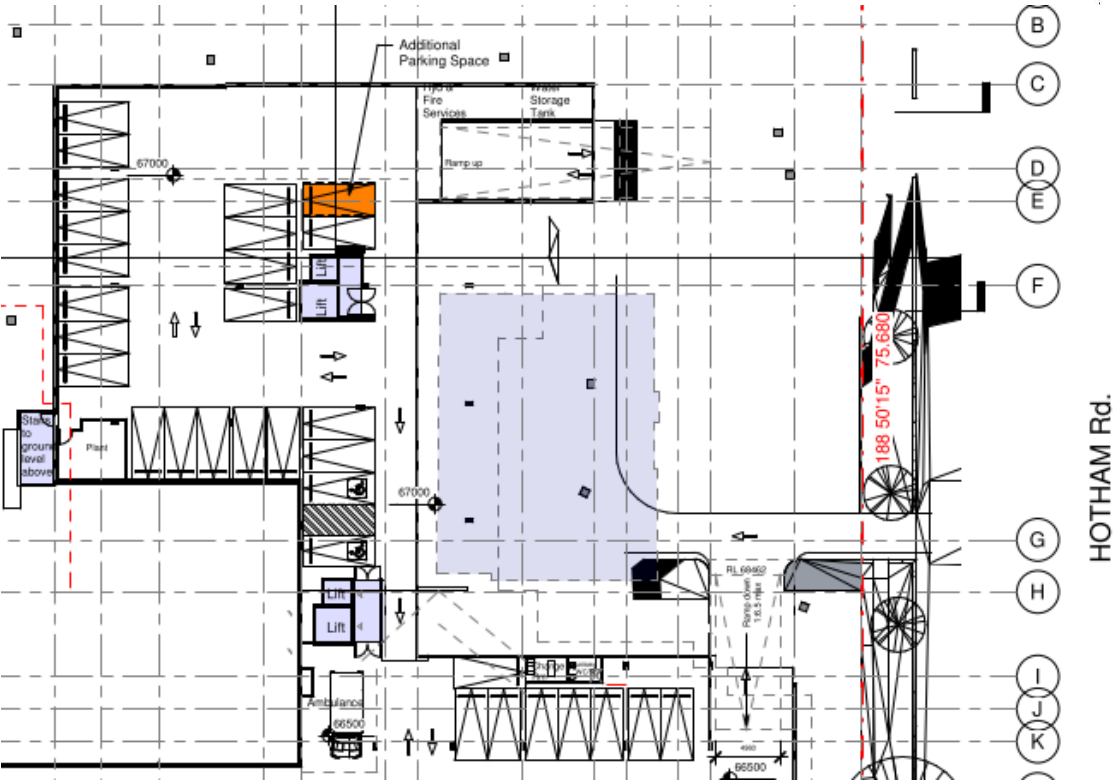
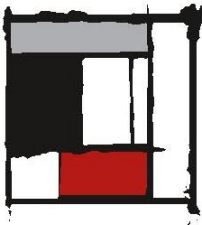


Fig 9: Basement parking level within restricted one-way access from the north car park to south

Retention of Hotham House

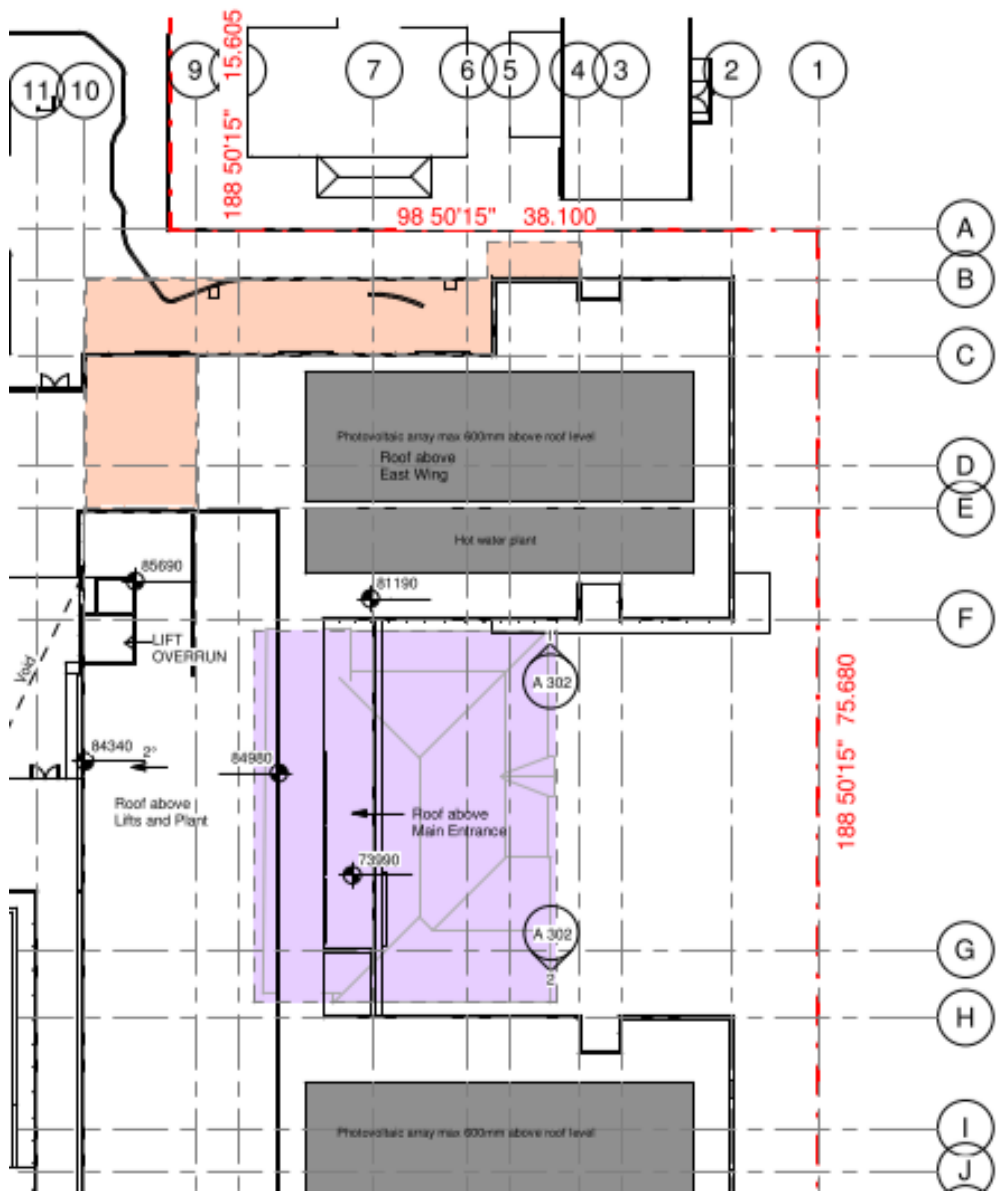
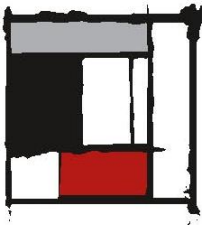


Fig 10 Roof level showing plant room extended to the north over R2 zone and patient rooms moved to 3m of boundary with No 59 Hotham Rd

## Retention of Hotham House

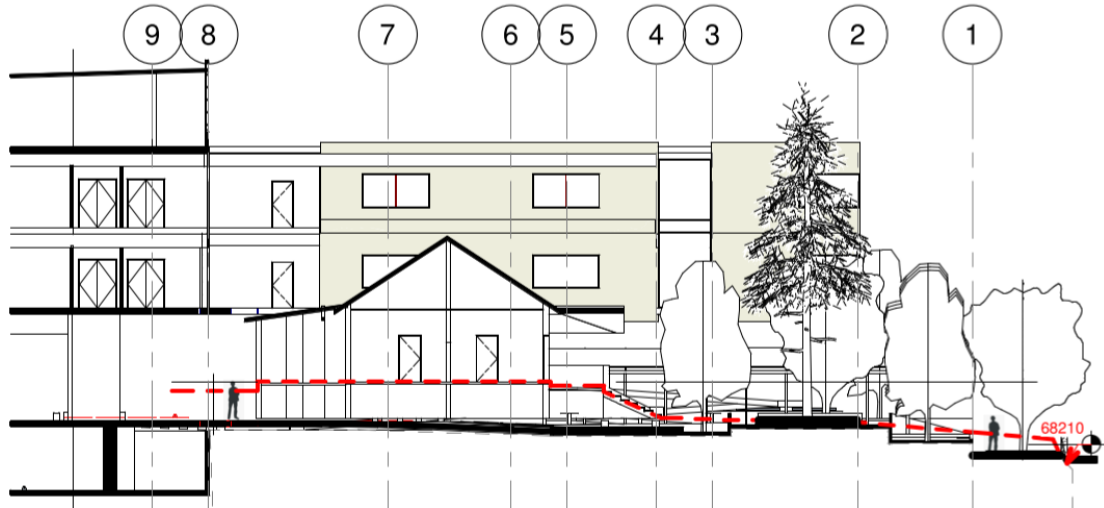
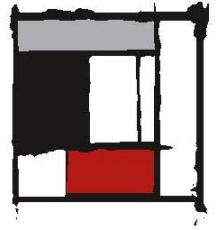


Fig 11 Long Section Through Hotham House with raised hospital floor level

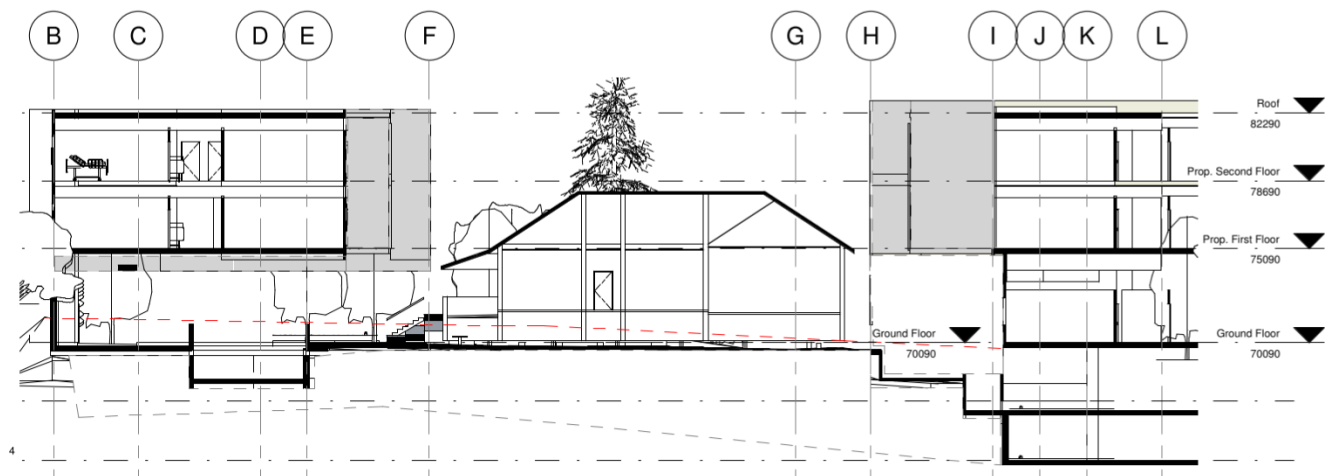
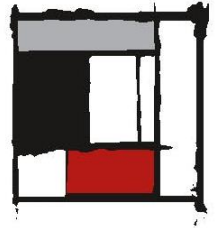


Fig 12 Cross Section through Hotham House

Hotham House has not been utilised for any hospital functions due to its lack of connectivity to the hospital, noncompliance to the National Construction Code for a Class 9 buildings and the general poor condition of the building structure.

While the design option may achieve the desired objective of retaining Hotham House it does not achieve an efficient and patient centred hospital design.





## Retention of Hotham House

### Negative Outcome

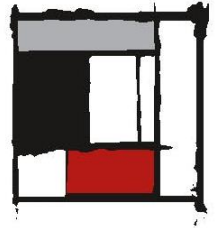
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Achieving the retention of Hotham House has been achieved at some cost to the operational efficiency of the hospital and its provision healthcare services to the Sutherland Shire community.

Redevelopment of the President Private Hospital required a phased construction program to allow the hospital to continue to operate and serve the needs of the community. Demolition of the hospital wards is not possible until their replacement has been commissioned. As the retention of Hotham House has sterilised a significant proportion of the SP1 zoned site the potential development area or the initial phase of the redevelopment program is moved to the more sensitive residential zoned portion of the site. This is not a desirable urban design outcome.

The retention of the Hotham House leads to several undesirable outcomes in regard to site planning of the hospital redevelopment including:

1. Single direction access between the north and south car parks cannot be avoided due to the set clearance between the existing operating theatres and Hotham House. Minimum clearance distances have been provided to allow excavation. Lift must remain in this location for proximity to the operating theatres for emergency transfer of patients.
2. Access from the drop off to car park requires vehicles to entry public road network and then enter the site again. There is no opportunity within the available space to arrange the car park access to overcome this whilst not excavating too close to Hotham House or operating theatres.
3. Patient lounge and dining room on the first and second floor do not comply to requirements under the Australian Health Facility Guidelines. There is no opportunity on the floors to relocate these in proximity to lifts and staff station.
4. Connectivity between hospital entrance and reception/ administration cannot be achieved due the space allocated to the patient drop off.
5. Confusion in wayfinding resulting from sub-optimal plan configuration with no clear path from road to entry to lift or day surgery. No staff are stationed at entry to provide directions and assistance.
6. Loss of onsite parking spaces and particularly loss of accessible and short-term parking at ground level with direct access to the hospital
7. Increase in building height over the allowable height limit in the R2 zone and against existing residential properties along Bidurgal St. The roof level plant room must be extended across the R2 zoning to make up for area lost due to avoiding Hotham House. This plant room will now extend



## Retention of Hotham House

to the north boundary adjacent to No 59 Hotham Rd with a height above ground level existing of 13.3m well in excess of the permitted 8.5m.

8. Egress of ambulances to Hotham Rd will not be possible due to the one-way direction of flow. Ambulances and patient transport vehicles will exit to President Ave instead.

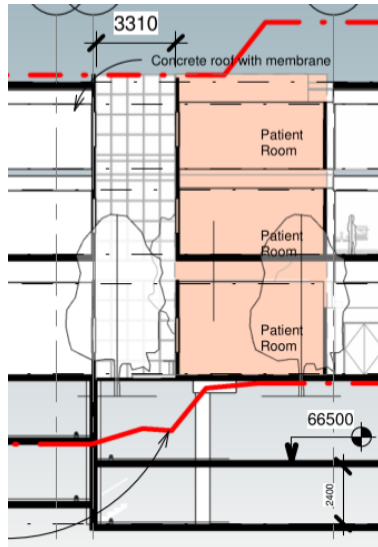


Fig 13: Section showing inadequate width to courtyard which provides natural light and visual amenity to 29 patient rooms.

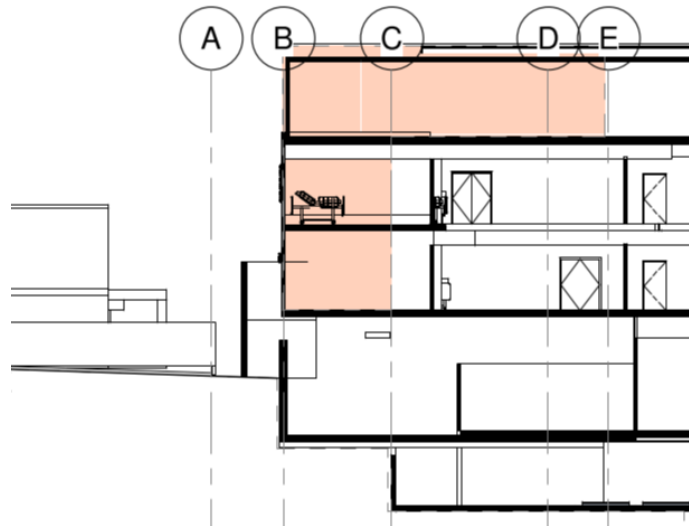


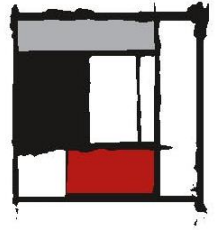
Fig 14: Section showing in orange reduced setback and increased height to No 59 Hotham Rd

## Conclusion

If the alternate plan incorporating the retention of Hotham House were to proceed the hospital would be unable to operate as an efficient modern hospital with maximum levels of patient care. This is not viable.

  
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## Retention of Hotham House

### Supporting Drawings

Drawing Number	Drawing Title	Version Number
A 160	Basement Plan – Impact of Hotham House	58
A 161	Ground Floor Plan – Impact of Hotham House	58
A 162	First Floor Plan – Impact of Hotham House	58
A 164	Roof Plan – Impact of Hotham House	58
A 410	Sections	58
A 411	Sections Hotham House Retained	58
A 412	Sections Hotham House Retained	58