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Building 10
Royal North Shore Hospital

Supplementary Heritage Impact Statement



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Introduction

1.0

1.1 Context of the Report

This Heritage Impact Statement (HIS) has been prepared to supplement the *Royal North Shore Hospital Concept Plan Heritage Impact Statement* prepared by Godden Mackay Logan in May 2006. It has been prepared for the InfraShore Partnership (ABN AMRO, Thiess Contractors, Thiess Services and Wilson Parking) to partially satisfy Condition C2 of the Department of Planning's approval of Major Project No. 06_0051.

Demolition approval for Building 10, on this site, has been excluded from the overall Concept Plan approval pending the submission of additional information to demonstrate why it cannot be retained and integrated into the redevelopment proposal.

Condition C2.2 requires:

Every effort should be made to retain the subject items as long as possible and demonstrate why they cannot be retained and integrated into the subsequent redevelopment proposal. Further details shall be submitted to the Director, together with design documentation, in order to demonstrate the need to demolish these items. Should approval be granted to demolish these items, archival recording must take place in accordance with NSW Heritage Office Guidelines.

1.2 Report Objective

The main objective of this report is to review the findings of the 2006 Godden Mackay Logan *Royal North Shore Hospital Concept Plan Heritage Impact Statement*.

This supplementary HIS has been prepared, following analysis of the building's development and inspection of the existing fabric, to assess the heritage impact of the demolition of Building 10 in the context of the Hospital re-development.

1.3 Authorship

This Heritage Assessment has been prepared by Gail Lynch, Senior Heritage Consultant, and reviewed by Graham Brooks, Director, of Graham Brooks and Associates. Unless otherwise noted all of the photographs in this report are by Graham Brooks and Associates.

1.4 Report Limitations

This report is limited to the investigation of the European history of the site. Plans for the construction, additions and alterations to the building,

held by the Hospital archives, were not available for viewing during the preparation of this report. Therefore, recommendations have been made on the basis of the secondary sources available, previous reports prepared for the site and physical inspection of the existing fabric.

1.6 Site Identification

Building 10 is located in the north east section of Royal North Shore Hospital, St Leonards, as shown in Figures 1-1 and 1-2.

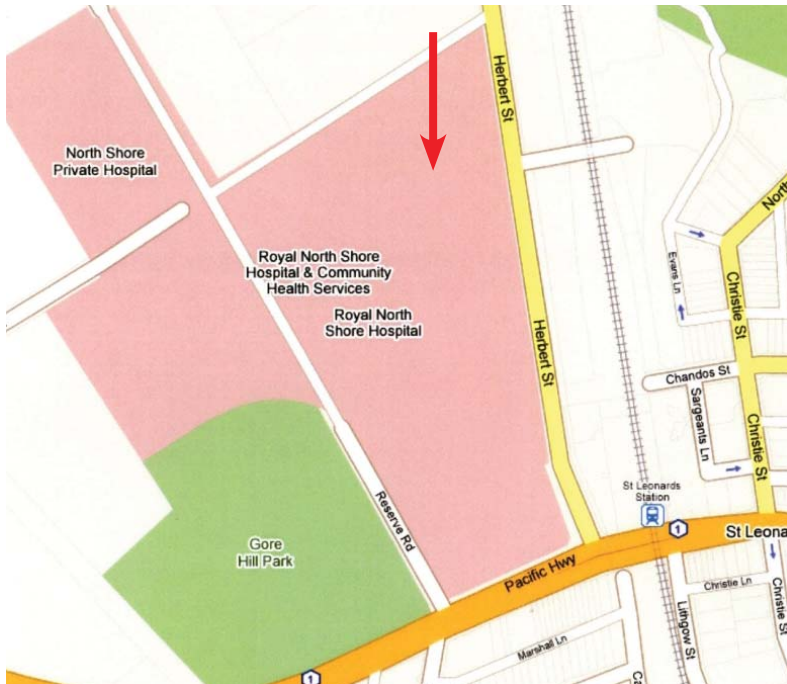


Figure 1-1

Map showing the approximate location of Building 10 on the Royal North Shore Hospital site

Source: www.maps.google.com.au/maps



Figure 1-2

Aerial photograph showing the location of Building 10 on the Royal North Shore Hospital site

Source: www.maps.google.com.au/maps

Historical Summary of Building 10

2.0

2.1 Initial Construction

Land for the northern expansion of the hospital site was resumed in 1919, with properties fronting Herbert Street purchased prior to the mid 1930s.

Building 10 was constructed, on the eastern side of the expanded site. It was constructed in two stages, with the first stage (West wing) built in 1947-48. Two houses to the south of present day Building 9 (Lanceley Cottage) were demolished to construct the eastern wing in the early 1950s.¹



Figure 2-1

The western wing of Building 10 during construction in 1947

Source: RNSH Archives



Figure 2-2

The two cottages in Herbert Street demolished to construct the eastern wing of Building 10

Source: RNSH Archives

¹ Sherington G and Vanderfield R, *A Century of Caring*, Horwitz Grahame Pty Ltd, Cammeray, 1988, page 106



Figure 2-3
1956 photograph of the extended Building 10, looking west from Herbert Street

Source: Sherington & Vanderfield, *A Century of Caring*



Figure 2-4
Photograph of Building 10, looking south east

Source: Sherington & Vanderfield, *A Century of Caring*

2.2 Modifications

The *Royal North Shore Hospital, St Leonards Heritage Assessment*, February 2005, (City Plan Heritage) notes the following modifications have been made to the building since its initial construction in 1948-1949.

- Construction of the east wing, early 1950s
- Single storey southern extension, 1953-1955
- Upper floor addition to the southern extension, late 1950s
- Addition of a single storey tutorial room, 1971
- Addition of two levels of tutorial rooms, 1973
- Building renovation and modifications, 1970s
- Renovation to create two Children's wards, Geriatric Rehabilitation and Assessment Ward, research laboratories and an IVF unit, c1980
- Internal modification of the xray and clinic area, 1980
- Changes to the building's floor plans, 1992

Other documented changes include:²

- Renovations for Paediatrics and Gynaecology, carried out in 1978
- An extension to the western end of the building constructed as a parents evaluation unit and parents accommodation, 1984

2.3 Use of the Building

Building 10 was constructed as an infectious diseases block, in accordance with a pre-war decision by the Hospitals Commission. By the time it was opened, in 1949, the focus of the hospital's treatment of infectious disease was tuberculosis and it became the Hospital's Thoracic Unit.³

By the mid 1950s the Thoracic Unit had one hundred beds dedicated to the treatment of tuberculosis. This was supplemented by an additional hundred recuperation beds at the Turramurra Princess Julianna Hospital which was also under the control of Royal North Shore.

Building 10 continued to provide specialist thoracic services after the spread of tuberculosis was brought under control in the early 1960s. Australia's first heart/lung implant operation was performed in one of the building's operating theatres.⁴ The Thoracic Unit moved to the newly completed Building 2 in the 1970s and the expanded Building 10 was converted to accommodate children and the elderly.

Other users of the building have included the hospital's IVF Clinic, Sexual Health Unit, Podiatry and various research facilities.

2 Sherington & Vanderfield, *A Century of Caring*

3 Sherington & Vanderfield, *A Century of Caring*, p. 102

4 City Plan Heritage, *Royal North Shore Hospital, St Leonards Heritage Assessment*, February 2005, p 117

Building Description

3.0

The design of the late 1940s building appears to be influenced by the Interwar Functionalist style. It was initially constructed in stages as two asymmetrical wings, angled to capture the sun on its north facing verandahs. Owing to successive modifications the building currently has an almost symmetrical plan.

The building wings are stepped, in response to the sloping topography. The west wing being two storeys and the east being four. Both wings have long horizontal balconies on the northern facade which have been partially enclosed on the ground floor.

The southern (rear) facade has little ornamentation, other than the curved entrance way near its western end.

Construction materials include brick, concrete and terracotta tiles, with internal finishes of painted plaster and terrazzo. The building has a variety of timber and metal framed doors and windows.

The circa 1980s addition to the western end of the building has a two storey terraced form. It's brick construction does not match that of the original building or earlier additions.



Figure 3-2
Northern facade of the building's original west wing, shows details of the enclosed verandah



Figure 3-3
Curved entrance at rear of the building.



Figure 3-1
View of Building 10 from Herbert Street, showing the east and north elevations

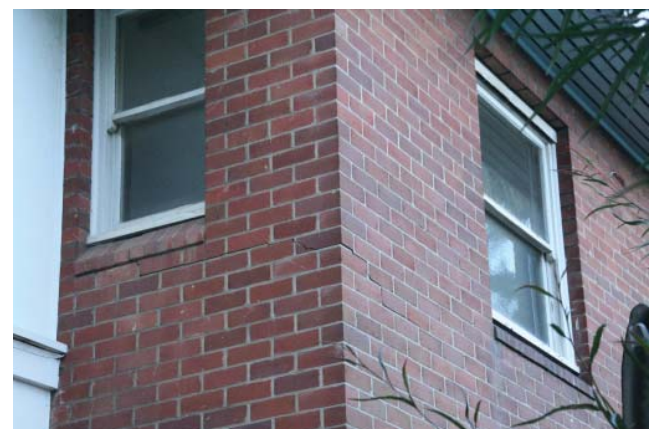


Figure 3-4
Shows cracked brickwork on the southern facade



Figure 3-5
Shows the rear (south) elevation of the building's east wing



Figure 3-6
Rear (south) elevation of the central building element



Figure 3-7
Shows detail of the vented eaves of the western wing of the southern facade



Figure 3-8
View of the north elevation of the east wing



Figure 3-9
Two storey 1980s western addition



Figure 3-10
View of the central stair well with its terrazzo stairs

Comparative Analysis

4.0

4.1 The Building Architects

The Government Architect's Office, under the direction of Cobden Parkes, prepared the initial design of Building 10.¹ Parkes had inspected overseas hospital facilities while on a tour with the Minister for Health in 1939², and was responsible for the construction of several of the State's modern functionalist style hospitals.

The architectural firm of Stephenson & Turner had a long association with the Royal North Shore Hospital. The practice prepared a major report on the expansion of the hospital site in 1937³, drew plans for additions to Building 10 and the construction of Buildings 6, 18, 19 and 21 in the 1950s, Stage 2 of the Main Block in 1964, the Chapel in 1968, Stage 2 of the Main Block in 1971-5 and numerous building modifications over the years⁴.



Figure 4-1

Sir Aurthur Stephenson, founding partner of architectural practice Stephenson and Turner

Source: <http://users.tce.rmit.edu.au/E03159/ModMelb/mm2/lect/30's%20&%2040's/as/stephenson.html>

4.2 Comparable Buildings

Building 10 is a somewhat mediocre and rather late example of the Interwar Functionalist style architecture. Its early asymmetrical form and clean lines have been compromised by additions and modifications.

The building was designed for the Government Architect's Office which was under the direction of Cobden Parkes at the time. Early modifications were designed by architects Stephenson and Turner who were responsible for the design of many hospital projects.

The NSW State Heritage Inventory and the Royal Australian Institute of Architects 20th Century Register of Significant Buildings list several hospital buildings attributed to Cobden Parkes and Stephenson and Turner. Those constructed in the same era as Building 10 have been considered in this analysis. The building descriptions and information relating to the construction period have been sourced from the NSW State Heritage Inventory.

1 City Plan Heritage, *Royal North Shore Hospital, St Leonards Heritage Assessment*, page 256

2 *Australian Dictionary of Biography - Online Edition*, Parkes, Cobden

3 Sherington & Vanderfield, *A Century of Caring*

4 City Plan Heritage, *Royal North Shore Hospital, St Leonards Heritage Assessment*

Wollongong Hospital (Hickman House)

Designed by: Government Architect Cobden Parkes

Construction: Completed in 1948

Description: A prominently sited, Inter War Functionalist design hospital building with the lengths of cantilevered balconies forming horizontal bands across the building. Face brickwork with reinforced concrete verandahs.



Figure 4-2

Hickman House, Wollongong Hospital

Source: NSW Heritage Office, State Heritage Inventory

Jeffrey House, Parramatta District Hospital

Designed by: Government Architect Cobden Parkes

Construction: 1937 - 1943

Description: The original 'Moderne' styling of this building has been somewhat compromised by the building of an additional storey in about 1973 with alterations to the verandah fenestration.



Figure 4-3

Jeffrey House, Parramatta District Hospital

Source: http://www.lawlink.nsw.gov.au/lawlink/special_projects/ll_splprojects.nsf/pages/pjp_jefferyhouse_nth

St Margaret's Public Hospital for Women (former)

Designed by: Government Architect Cobden Parkes

Construction: 1947 - 1951 (Designed in 1937)

Description: The public hospital is an eight storey brick faced concrete framed building with a flat parapeted roof. Its design combines vertical elements with curved horizontal lines and a rectilinear tower. Its primary elevation with faces north and features prominent concrete banded balconies on the 1st and 5th floors. The north-east corner of the building features a curved element made from steel framed windows and glazing. The windows behind the balconies are timber framed and triple hung. The 6th and 7th floors do not have balconies and consist of simple face brick with timber double hung windows.



Figure 4-4
St Margaret's Public Hospital

Source: NSW Heritage Office, State Heritage Inventory

Bathurst District Hospital Maternity and Children's Ward

Designed by: Cobden Parkes

Construction: 1944

Description: It is a good example of Moderne architecture with its fine detailing and interior public spaces with regards to a hospital building in Sydney. It is of architectural significance as it represents a pinnacle in the endeavour to introduce a clean European styling and modern hospital design principles into Australia by design architects, Stephenson Meldrum & Turner. The building is an example of a well-designed building easily adaptable to changes in hospital care⁵.



Figure 4-5
Maternity Wing Bathurst District Hospital

Source: DoP, *Major Project Planning Assessment Bathurst Hospital Redevelopment*, page 15

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⁵ Department of Planning, *Major Project Planning Assessment Bathurst Hospital Redevelopment*, April 2006

King George V Hospital for Mothers and Babies

Designed by: Stephenson and Turner

Construction: 1939-41

Description: It is a good example of Moderne architecture with its fine detailing and interior public spaces with regards to a hospital building in Sydney. It is of architectural significance as it represents a pinnacle in the endeavour to introduce a clean European styling and modern hospital design principles into Australia by design architects, Stephenson Meldrum & Turner. The building is an example of a well-designed building easily adaptable to changes in hospital care.



Figure 4-6

King George V Hospital

Source: <http://www.sydneyarchitecture.com/ARCH/ARCH-StephensonTurner.html>

Concord Repatriation Hospital - Original Main Building

Designed by: Stephenson and Turner

Construction: 1941-42

Description: Major eight storey hospital block built in the Functionalist style.



Figure 4-7

Yaralla Military Hospital, Concord

Source: NSW State Heritage Inventory

4.3 Summary

Building 10 lacks the sophistication and elegance of the significant hospital buildings of the Inter-war and Post-war eras. It is not recognised as a significant twentieth century building by the Royal Australian Institute of Architects and is considered to be a minor work of the Government Architects Office.

Assessment of Significance

5.0

5.1 Introduction

The following detailed assessment of heritage significance has been prepared utilising the current evaluation criteria established by the NSW Heritage Office.

5.2 Evaluation of the Criteria

Criterion (a) – An item is important in the course, or pattern, of NSW's cultural or natural history (or the cultural or natural history of the local area)

Building 10 was constructed as part of the Royal North Shore Hospital expansion. It was built in two stages, has later additions and undergone several internal modifications. The building style appears to be influenced by Inter-war Functionalist architecture and it was already dated by the time it was constructed in 1947-48.

It was designed as an infectious diseases ward and was initially used for the treatment of tuberculosis patients. The building continued to provide specialist thoracic services after the spread of tuberculosis was brought under control in the early 1960s.

Australia's first heart/lung implant operation was performed in the building before the Thoracic Unit moved to Building 2 in the 1970s.

Subsequent users of the building have included the hospital's Children's Ward, Geriatric Services, IVF Clinic, Sexual Health Unit, Podiatry and various research facilities. Its has been extended several times and modified, externally and internally, to accommodate changing requirements for the provision of medical services.

Criterion (b) - An item has strong or special association with the life or works of a person, or group of persons, of importance in NSW's cultural or natural history (or the cultural or natural history of the local area)

The building is associated with the Government Architect's, under the direction of Cobden Parkes, and the architectural practice of Stephenson and Turner. It is not considered to be a major or important work of either architectural office.

Criterion (c) - An item is important in demonstrating aesthetic characteristics and/or a high degree of creative or technical achievement in NSW (or the local area)

The building lacks the sophistication, design integrity and elegance of the significant hospital buildings of the Inter-war and Post-war eras. It is a very late expression of Inter-war architecture with some Functionalist elements such as the curved entrance way in the south west elevation.

The clean lines of the original building design have been obscured by later additions and modifications. As a restrained and unremarkable example of twentieth century hospital architecture it has no significance under this criterion.

Criterion (d) - An item has strong or special association with a particular community or cultural group in NSW (or the local area) for social, cultural or spiritual reasons

The Royal North Shore Hospital is an important health facility for the local community and wider Sydney area. Building 10 is not known to have a strong or special association with a particular community or cultural group in the local area, or the state.

Criterion (e) - An item has potential to yield information that will contribute to an understanding of NSW's cultural or natural history (or the cultural or natural history of the local area)

The *Royal North Shore Hospital, St Leonards Archeological Assessment*, 2006, prepared by Godden Mackay Logan, identifies areas of archeological potential within the site. It notes there may be potential cottage remains south of Building 10 but does not identify the area occupied by the building itself as having archaeological potential.

Criterion (f) - An item possesses uncommon, rare or endangered aspects of NSW's cultural or natural history (or the cultural or natural history of the local area)

The subject site is an uncommon style in the local area. However its lack of architectural integrity prevents it satisfying this criteria.

Criterion (g) - An item is important in demonstrating the principal characteristics of a class of NSW's cultural or natural places; or cultural or natural environments (or a class of the local area's cultural or natural places; or cultural or natural environments)

The building is a mediocre example of early to mid twentieth century hospital building which has evolved to its present form in response to the changes in medical technology and practices. It has no significance under this criterion.

5.3 Statement of Significance

Building 10 is a two to four storey brick and concrete building constructed as part of the Post-war phase of the Royal North Shore Hospital expansion. It was built in two stages, has had later additions and undergone several internal modifications. The building style appears to be influenced by Inter-war Functionalist architecture and it was already dated by the time it was constructed in 1947-48.

It was designed and constructed as two asymmetrical wings, angled to capture the sun on its north facing verandahs. The building wings are stepped, in response to the sloping topography. The west wing being two storeys and the east being four. Both wings have long horizontal balconies on the northern facade which have been partially enclosed on the ground floor.

The southern (rear) facade has little ornamentation, other than the curved entrance way near its western end. Construction materials include brick, concrete and terracotta tiles, with internal finishes of painted plaster and terrazzo. The building has a variety of timber and metal framed doors and windows.

Building 10 was built as an infectious diseases ward and was initially used for the treatment of tuberculosis patients. It continued to provide specialist thoracic services after the spread of tuberculosis was brought under control in the early 1960s.

Australia's first heart/lung implant operation was performed in the building before the Thoracic Unit moved to Building 2 in the 1970s.

Subsequent users of the building have included the hospital's Children's Ward, Geriatric Services, IVF Clinic, Sexual Health Unit, Podiatry and various research facilities.

The building was designed by the Government Architect's, under the direction of Cobden Parkes, and plans for later additions were drawn the architectural practice of Stephenson and Turner. It is not considered to be a major or important work of either office.

As it is an undistinguished example of twentieth century hospital architecture Building 10 is of low heritage significance, at a local level, for its association with the expansion of the Royal North Shore Hospital.

Assessment of Heritage Impact

6.0

6.1 Introduction

The Minister for Planning approved the *Royal North Shore Hospital Amended Concept Plan and Preferred Project Report*, November 2006 as major project No. 06_0051 in April 2007.

Demolition of Building 10, on this site, has been excluded from the overall concept Plan approval, under Condition C2, pending the submission of additional information to demonstrate why it cannot be retained and integrated into the redevelopment proposal.

The Executive Summary of the Amended Concept Plan notes

The underlying concept of the project is to consolidate the hospital facilities into a co-ordinated new 'state of the art' facility on the western side of the site, while retaining existing hospital buildings of heritage significance. This will release about a third of the site for a range of complementary development options, including the provision of additional private health facilities provided within a mixed use context incorporating a balance of retail, commercial and residential facilities. It will also create opportunities for a range of new landscaped open spaces, a publicly accessible heritage precinct, public roads and pedestrian routes through the site.

The State Government's recently released 'Metro Strategy' identifies St Leonards as a 'specialist centre' of medical related employment growth within the 'Global Technology Arc'. It targets the creation of an additional 7,834 jobs in St Leonards between 2001 and 2031, with 'magnet' medical facilities associated with the RNSH identified as the principal driver of this growth. The supporting Draft St Leonards Strategy recognises that approximately 3,250 jobs would be appropriate on the site.

With regard to housing, the Metro Strategy includes a target of 2,000 - 5,000 new dwellings to be provided in the St Leonards Town Centre over the next 30 years. To achieve this target, the Draft St Leonards Strategy suggests that approximately 1,500 residents should be provided on the hospital site.

The project has been designed to facilitate this identified growth, as well as providing the shops and other ancillary uses that the Draft St Leonards Strategy encourages to serve the local resident and worker population, including convenience shops, potentially a larger supermarket, small-scale speciality shops, banks, bars, cafes, restaurants and community facilities.

The stated objectives of this project include:

- *Provide new 'state of the art' hospital facilities with high quality care standards.*
- *Provide improved access to and between different health and community services on site.*
- *Provide flexible building design to allow for future modification and expansion to meet anticipated growth in demand for services and changes in clinical practice.*
- *Encourage supplementary and support private hospital health facilities on lands core to the RNS public hospital.*
- *Ensure development provides harmony and balance with the surrounding areas.*
- *Facilitate the broader redevelopment of St Leonards and surrounding environs.*
- *Introduce a wide range of uses onto the site consistent with the site's proximity to the St Leonards Station, including commercial, retail and residential uses, whilst maintaining as a dominant feature, the RNS hospital and complementary health activities.*
- *Improve and enhance the public domain, including a variety of public areas and pedestrian and vehicular connections through the site. Retain significant heritage items, within a campus-wide strategy for adaptive reuse.*
- *Enhance access to public transport, including walking, cycling, rail and bus networks.*
- *Encourage public transport use by enhancing convenient access to rail and bus networks, and ensuring that roads within the site are navigable by buses.*

The Concept Plan divides the site into 8 precincts. Building 10 is located at the southern edge of Precinct 7 which will be redeveloped primarily for residential use. A new road, known as Blue Road, will be constructed as an east west link within the site. It will border Precincts 6 and 7.

The approved alignment of Blue Road and the new residential development in Precinct 7 can only be constructed after the demolition of Building 10.

The following Heritage Reports have been prepared for the site in the course of developing the Amended Concept Plan:

- *Royal North Shore Hospital St Leonards - Report Addressing Potential Heritage Issues and Constraints in Connection with Proposed Redevelopment of the Site*, February 2004, prepared by Rod Howard Heritage Conservation Pty Ltd
- *Royal North Shore Hospital, St Leonards Heritage Assessment*, February 2005, prepared by City Plan Heritage
- *Royal North Shore Hospital - Concept Plan Heritage Impact Statement*, May 2006, Godden Mackay Logan



Figure 5-1
Plan of the Royal North Shore Hospital site showing the existing buildings to be retained marked in green. The location of Building 10 is indicated with a red circle.

The Royal North Shore Hospital - Concept Plan Heritage Impact Statement, May 2006 by Godden Mackay Logan notes the following in relation to the demolition of Building 10:

The demolition of Building 10 would have some adverse impact although the form of the building has been altered through later additions. The building is visually prominent and it is a moderate to good example of the Interwar Functionalist style, although it is showing signs of age with many fittings requiring replacement, and not withstanding that substantial elements of the building have been modified or refitted since the building's construction. The adverse heritage impacts of the demolition of this building would be mitigated to some degree by the archival recording of the structure prior to its demolition. Alternative locations for the road that would replace this building were considered and determined to be impractical for the following reasons:

- *Blue Road should align with the existing road bridge over the railway (which it is understood the RTA intends to make a through-road to St Leonards CBD); and*
- *Alternative locations for the road to the south would produce spaces incompatible with efficient building envelopes, either for residential or other purposes.*

6.2 Assessment

As there is no proposal to amend the approved Concept Plan to relocate the Blue Road it is inevitable that Building 10 will be demolished to allow redevelopment of the Hospital site. Therefore, we concur with the following responses to the 'questions to be answered' from the NSW Heritage Office guidelines *Statements of Heritage Impact* in relation to the demolition of Buildings 10, 11, 21 and 27 contained in the Godden Mackay Logan *Heritage Impact Statement*.

Heritage Office Question to be Answered	Response from <i>The Royal North Shore Hospital Concept Plan Heritage Impact Statement</i>
<i>Have all options for retention and adaptive re-use been explored?</i>	Yes
<i>Can all of the significant elements of the heritage item be kept and any new development be located elsewhere on the site?</i>	<i>No the viability of the facility depends on the demolition of these buildings.</i>

Heritage Office Question to be Answered	Response from <i>The Royal North Shore Hospital Concept Plan Heritage Impact Statement</i>
<i>Is demolition essential at this time or can it be postponed in case future circumstances make its retention and conservation more feasible?</i>	<i>Yes. Demolition is necessary so that new structures can be built.</i>
<i>Has the advice of a heritage consultant specialist been sought? Have their recommendations been implemented? If not, why not?</i>	<i>Yes. The proposal developed are based on consultation and detailed heritage analysis by specialist heritage consultants (regarding built heritage, historic archaeology). Retention was identified as desirable but impossible for operational reasons.</i>

Conclusions and Recommendations

7.0

7.1 Conclusions

- Building 10 is of low heritage significance, at a local level, for its association with the expansion of the Royal North Shore Hospital.
- The heavily modified building was only ever an undistinguished example of twentieth century hospital architecture which was already dated by the time it was constructed. Its integrity has been lost with the many internal changes and external additions made.
- The approved layout of the Blue Road cannot be constructed without the demolition of Building 10.
- The Concept Plan has been developed to serve the public interest with the provision of 'state of the art' health facilities.
- As noted in the Godden Mackay Logan Heritage Impact Statement the viable redevelopment of the Royal North Shore Hospital requires consideration of matters other than heritage.
- The adverse heritage impact of the demolition of Building 10 will be mitigated by undertaking an archival recording of the building and its context.
- Considering the above context the demolition of Building 10 is considered to be an acceptable outcome.

7.2 Recommendations

- Approval should be sought, from the Department of Planning, to modify the approval of the Concept Plan, Major Project 06_0051, to include the demolition of Building 10.
- An archival photographic recording of the building and its context should be made prior to demolition.
- Medical milestones associated with Building 10, such as the development of procedures for heart lung implants and IVF, should be recognised in the site wide Heritage Interpretation Plan.