Godden Mackay Logan Heritage Consultants



Wollongong Hospital Nurses' Home

Heritage Significance Assessment Final Report

Report prepared for NSW Health Infrastructure September 2011

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Report Register

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Job No.	Issue No.	Notes/Description	Issue Date
10-0466	1	Draft Report	June 2011
10-0466	2	Final Report	September 2011

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Wollongong Hospital Nurses' Home—Heritage Significance Assessment—Final Report, September 2011

1.0 Introduction

1.1 Preamble

Godden Mackay Logan (GML) has been commissioned by NSW Health Infrastructure to prepare a Heritage Significance Assessment (HSA) for the Wollongong Hospital Nurses' Home (referred to in this report as the Nurses' Home). This HSA has been prepared to guide the ongoing care and management of the Nurses' Home. The findings and recommendations of this HSA will also inform the development of a master plan for redevelopment within the Wollongong Hospital site.

The current Nurses' Home complex at Wollongong Hospital includes two major structures, the oldest being Elouera House (a three-storey cream brick building) constructed in 1937–38 which had a two-storey addition at the west end in 1941–43. In 1954–56, a seven-storey red brick structure with cantilevered balconies, known as Lawson House, was constructed to the southeast of the 1930s structure. Though the 1950s building was designed to be an addition to the facilities of Elouera House, and its original construction documentation refers to it as 'Nurses' Quarters—addition', this structure always appears to have been called Lawson House, in keeping both with its original dedication (to Matron Lawson) and its strongly individual architectural character.

For the purposes of this HSA, the original 1937 Nurses' Home is referred to as 'Elouera House' (as used by the Hospital and current heritage listings), the later addition to the west end of Elouera House is the '1941 addition', and the 1954 Nurses' Quarters addition is referred to as 'Lawson House' (in accordance with current Hospital usage). The term 'Nurses' Home group' is used to refer to the group of all three structures and their immediate setting. This distinction between the names and origins of the constituent parts of the Nurses' Home is of more than historical interest in the context of this report because of the varied names used on current heritage listings for this site, as discussed in Section 1.3.

As with most other major medical facilities throughout New South Wales, Wollongong Hospital has undergone extensive change and redevelopment over a period of more than 100 years. Today, the site is dominated by buildings from the second half of the twentieth century, when the growth in Wollongong's population resulted in the hospital expanding quickly and substantially. In the last twenty years alone, the hospital has undergone significant growth and change with many new structures and facilities replacing obsolete early and later twentieth century structures, most notably in the centre and southwest corner of the site. As a result of this process, the relatively modest and modern structures that make up the current Nurses' Home group are now effectively the oldest structures/components on the site; a legacy of the rapidly changing fortunes of Wollongong's recent history.

1.2 Site Identification

1.2.1 Location

Wollongong Hospital is located in the city's Central Business District (CBD) on a 2.7ha site that extends across New Dapto Road. The original hospital site, with the bulk of the hospital buildings, is bounded by Loftus Street to the north, Darling Street to the east, Crown Street (Princes Highway) to the south and New Dapto Road to the west. A secondary site containing car parking is located on the western side of New Dapto Road (Figures 1.1 and 1.2).

The Nurses' Home group is located in the northeast corner of the Hospital site, with frontages to Loftus Street (to the north) and Darling Street (to the east). The major building components of the group—including Elouera House (1937–38) with its two-storey brick addition to the west (1941–43) and the seven-storey Lawson House (1954–56) to the southeast—are shown in the aerial photograph of the site included as Figure 1.3.

1.2.2 Extent of Study Area

Because of its particular location, separated from the major medical facilities of the rest of the site (both physically and functionally), as well as the fact that its 'public' facades turn to look out from the site, the Nurses' Home group and its immediate setting form a readily identifiable entity within the hospital as a whole. In addition, as noted in Section 1.1, the fact that this group of buildings is now the oldest architectural feature of the site also contributes to its distinctiveness.

In this context, the extent of the study area for this report was able to be readily defined, as shown in Figure 1.5, with:

- Loftus Street marking the north boundary;
- Darling Street marking the east boundary; and
- the south and southwest boundaries being effectively defined by the curving Hospital Road from its intersection with Darling Street at the east end to the west end of the 1941 addition to Elouera House.

Within this compact setting, landscaping, paths and extensive areas of retaining walls surround the buildings. As Figures 1.3 and 1.5 show, the landscape features within the immediate setting of the group include tree and shrub planting, with small areas of lawn and retaining walls along the north and east elevations of Elouera House and within the small 'courtyard' contained by the south and west elevations of the 1930s building. To the north of Lawson House, a large carpark, flanked by tree planting along the east and west sides, is located on the site of an earlier tennis court.

Adjacent to the southern boundary (ie south of Hospital Road), at the west and east ends, are two small groups of mature fig trees which contribute 'borrowed landscape' to the setting of the Nurses' Home group in some views as well as more generally contributing to the greening of the site, particularly the southeast group near the Crown and Darling Street intersection.

1.3 Heritage Listings

Wollongong Hospital Nurses' Home is currently listed as a heritage item in the State Heritage Register (SHR), the *Wollongong Local Environmental Plan 2009* (LEP 2009) and the NSW Health Section 170 Heritage and Conservation Register (s170 Register). In each of these agencies' registers, however, the area and components of the site to which the listing relates differ, in some instances quite markedly, as summarised below.

 The SHR listing describes the site as 'Wollongong Hospital Nurses Home' and includes only the 1937 'three storey nurses' home' by the Government Architect, Cobden Parkes (Listing No. 00836, gazetted 2 April 1999). The name 'Elouera House' is not, however, used to refer to the building. The Statement of Significance notes 'the hospital (sic) is of strong architectural significance as a fine example of Inter War hospital design'. Historically, the building/item is linked to the NSW state theme of 'Health—Activities associated with preparing and providing medical assistance and/or promoting or maintaining the well being of humans.' (Refer to Appendix A for SHR listing.)

- The extent of the SHR boundary (in the 'Property Description' section of the listing) is specified as including the whole of the original lot (from the 1882 Garden Hill Estate subdivision) on which the earliest buildings of Wollongong Hospital were erected, as shown in Figures 1.4 (SHR boundary) and 2.6 (1882 subdivision plan for Garden Hill Estate). (Lot 95, Section 3, DP 1258.) This boundary and the buildings to which it originally related were established well before the construction of the Nurses' Home, and superimposing it over the current layout of Wollongong Hospital shows that there is limited correlation between it and the feature(s) of significance identified in the listing text (ie Elouera House), although it does include the building and its immediate setting. More generally, the current SHR boundary no longer usefully relates to the current physical layout or pattern of growth of Wollongong Hospital as a whole.
- In the Wollongong Local Environmental Plan 2009 (LEP 2009) the Nurses' Home is listed as an item of State significance on Schedule 5 Environmental Heritage (Item No. 5939, 'Nurses' home', 348–352 Crown Street (Wollongong Hospital site)). The accompanying heritage inventory includes in its description only the building of 'seven storeys (with) Concrete roof and cantilevered balconies' (ie Lawson House). In the attached photographs, the images are of Lawson House and the former Hickman House (now demolished). The Statement of Significance describes the listed item as 'The most prominent example of the modern or international style of architecture in Wollongong. Although bland architecturally, the building is an important landmark due to its prominent site'—a description that would relate to both the former Hickman House and, to a lesser extent, Lawson House, but with less application to Elouera House. (Refer to Appendix B for LEP listing.)
- In the Wollongong LEP Plan 2009 Heritage Map (Sheet HER_025B), however, only the 1937 Elouera House and its 1941 addition is identified as the 'Heritage Item—General' on the site, in addition to the two groups of mature fig trees which are identified as 'Heritage Item— Landscape' (Figure 1.6).
- In the Department of Health's Section 170 Register, two separate listings are included for the site, one being for 'Nurses (sic) Home or Eloura (sic) House)' and the other for 'Lawson House' (An incorrect address 'Dudley Street' is also given). (Refer to Appendix C for s170 Register listing.)
- The Nurses' Home is also listed on *Illawarra Regional Environmental Plan No. 1* (REP No.1) as 'Wollongong Hospital Nurses' Home, corner Loftus and Darling Streets, Wollongong'.

Both individually and together, the current heritage listings discussed above provide little information about the actual components/features of significance on the hospital site, including what exactly is important and why. More specifically, none of the listings shed much light on the reasons why the 'Wollongong Nurses' Home' was assessed as being of sufficient significance to be included on the State Heritage Register (SHR).

In this context, one of the key roles of this HSA has been to identify and clarify both the extent of the potential heritage item—the Nurses' Home group—as well as the nature and degree of its heritage significance, including the relative significance of the contributory components of the group.

1.4 Methodology and Terminology

1.4.1 Methodology

This HSA uses the terminology, methodology and principles contained in *The Burra Charter: The Australia ICOMOS Charter for Places of Cultural Significance 1999* (the Burra Charter) and the NSW Heritage Office publication *Assessing Heritage Significance*, 2001. An assessment of Aboriginal heritage or natural values was not required for this report.

1.4.2 Terminology

As noted in Section 1.1 of this HSA, the original 1937 Nurses' Home is referred to as 'Elouera House' (as used by the hospital and current heritage listings), the later addition to the west end of Elouera House is the '1941 addition' and the 1954 Nurses' Quarters addition is referred to as 'Lawson House' (as per current hospital usage). The term 'Nurses' Home group' is used to refer to the group of all three structures and their immediate setting.

1.5 Author Identification

This HSA has been prepared by Julia Dowling, Heritage Consultant, of GML, with specialist advice and review by Jyoti Somerville, Associate. The archaeological assessment has been prepared by Fiona Leslie, Associate, and the historical overview by Michelle Richmond, Historian. David Logan, Managing Partner, provided overall direction and reviewed the report.

1.6 Acknowledgements

The project team gratefully acknowledges the assistance of the following people:

- Greg Showell, Area Engineer, Wollongong Hospital;
- Alexandra Belcastro, Project Manager, Johnstaff Projects;
- Troy Harvey, Project Director, Health Infrastructure, NSW Health;
- Kristen Saul, Senior Planner, HASSELL; and
- Wollongong Local Studies Library.



Figure 1.1 Location plan of Wollongong Hospital. (Source: Google Maps with GML overlay)

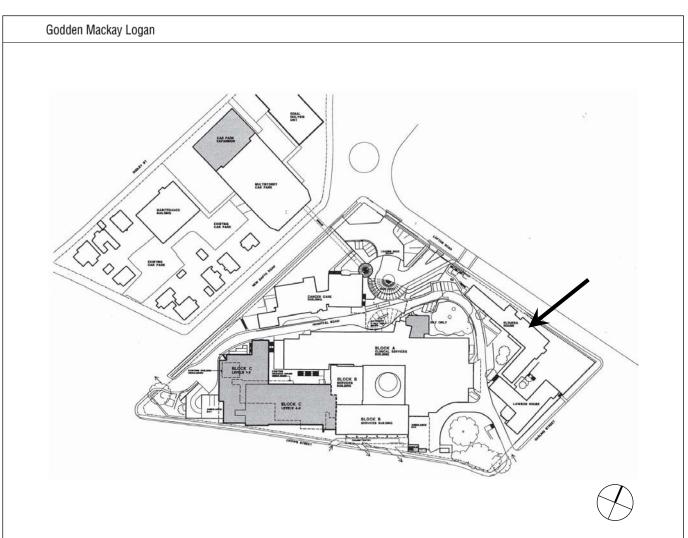


Figure 1.2 Site plan of Wollongong Hospital showing the major components of the study area including the Nurses' Home group – with 1937 Elouera House, 1941 (west wing) addition and 1954 Lawson House, as well as Hospital Road and two groups of mature fig trees. Elouera House is marked with an arrow. (Source: South Eastern Sydney and Illawarra Area Health Service)



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Figure 1.3 Aerial photograph of the northeast corner of Wollongong Hospital site showing components of Nurses' Home group and setting. Key components shown include 1937 Elouera House (east–west and north–south wings), 1941 (west wing) addition, 1954 Lawson House, Hospital Road (near south elevations), two groups of mature fig trees, and small areas of planting and lawns immediately adjacent to main building elevations. (Source: Google Maps with GML overlay)



Figure 1.4 Current State Heritage Register (SHR) boundary for Wollongong Hospital Nurses' Home superimposed over aerial photograph of site. (Source of SHR boundary: Land and Property Management Authority)





Figure 1.5 Boundary of Nurses' Home study area including buildings and immediate setting. Also shows fig trees south of Hospital Road (ie southern boundary). (Aerial plan marked up by GML)

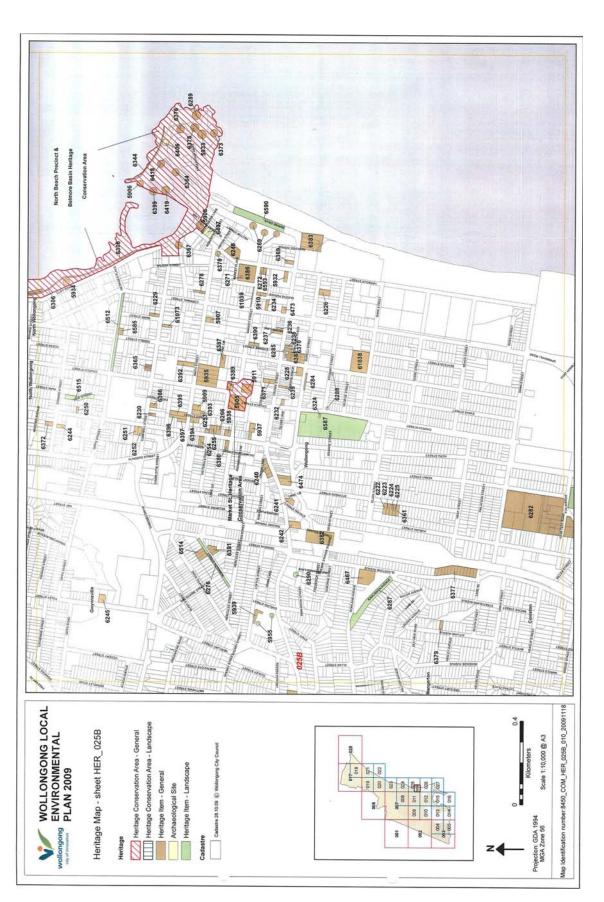


Figure 1.6 Wollongong LEP 2009—Heritage Map showing Elouera House and addition as 'Heritage Item- General' and two groups of fig trees as 'Heritage Item—Landscape". (Source: Wollongong City Council)

2.0 Historic Background

2.1 Indigenous Occupation

The Wodi Wodi are the Aboriginal custodians of the Illawarra who spoke a variant of the Dharawal language. Dharawal speakers lived and still live in the area from Botany Bay to Campbelltown in the north, through the Nepean, Wollondilly Georges and Cataract water catchments, west to Moss Vale and south to the Shoalhaven River and Jervis Bay.¹

2.2 Development of Settlement in the Wollongong District

The first Europeans to visit the Illawarra area were the navigators George Bass and Matthew Flinders, who landed at Lake Illawarra in 1796. The first settlers in the region were cedar cutters in the early nineteenth century, followed by graziers in 1812.

Rural occupation of the Wollongong area began in 1815 when Dr Charles Throsby built a hut and cattle yards behind South Beach, Wollongong, where there was a lagoon of fresh water. Wollongong Harbour was first used for the shipping of cedar in 1815 and the first surveys of the district were made in 1816.² By 1822 some 10,000 acres (4047ha) had been granted. In the early period cattle and sheep grazing were prevalent around Lake Illawarra.³

Dr Throsby's nephew, Charles Throsby Smith, received 300 acres of land in the Illawarra in 1818, and on part of this land the town of Wollongong was first surveyed in 1834.⁴ This township was bounded by Crown, Keira, Smith and Harbour Streets (Figure 2.1). Although Market Street was designed as the main street and ran from the harbour to the church site and market square, it never developed as the commercial area. Instead, this grew along Crown Street, the street used by the settlers en-route to the wharf (Figure 2.2).⁵

As the chief port for the region, Wollongong developed as the main settlement. In 1844 Wollongong's port was improved with the excavation of the basin and the building of a breakwater. By 1855 the town of Wollongong had more than doubled in size, extending south from Crown Street (Figure 2.2). By 1856 it had a population of 864. Cheap sea travel to Sydney meant that the Illawarra farmers could produce wheat, maize, vegetables, eggs, poultry and dairy products for profitable Sydney markets.⁶ Small villages developed to serve these farmers in the area surrounding Wollongong at Dapto, Shell Harbour, Fairy Meadow and Ballambi-by-the-Sea.

The main road down the escarpment through Bulli Pass was built by convict labour in 1835–36. Other passes were built during the 1800s, including O'Brien's Road and Rixon's Pass.

In 1849 the first coal mine opened in the Illawarra at Mount Keira and from this point coal mining developed as the major primary industry of the region. By 1862 there were four coal mines producing 42,000 tons per annum.⁷ The developing coal industry had a major impact on the trade at Wollongong Harbour and also saw the development of mining villages at Balgownie, Mount Keira and Mount Kembla.

The Illawarra Railway line, connecting Wollongong to Sydney, opened in 1887. This reduced coal transportation costs and coal industry expanded dramatically. New mines and mining villages opened at Thirroul, Coaldale, Clifton and Helensburgh. The coal industry continued as the major employer of the region into the 1920s and 1930s.

The railway also brought tourists to the area. At first they came to see the grand view from the top of Bulli Pass. After 1900, however, sea bathing replaced sightseeing as the major recreational activity, and resorts grew up at Austinmer, Thirroul and Stanwell Park.⁸

Harbour improvements led to an influx in the manufacturing industry and Lake Illawarra developed as a harbour. In 1897 silver and gold ore smelters were established and Dapto and Brownsville developed. Port Kembla also began to grow as a major industrial centre. The Electrolytic Refinery and Smelting Company and the Metal Manufacturers Plant were established in 1918, producing copper bars, sheet and tubes. In 1921, superphosphates were manufactured by Australian Fertilisers. Hoskins, later Australian Iron and Steel, shifted their iron smelting and steel works from Lithgow to Port Kembla in 1928. The mining conglomerate Broken Hill Proprietary (BHP) took over the steel works in 1935.⁹

The development of all these small villages contributed to Wollongong's growing reputation as a regional centre and attracted even more people to the area. This growth was not without its challenges, however, as planning was often haphazard.

The growth in industry bought a higher rate of industrial accidents, yet up until 1864 there was no hospital in the Illawarra area. The sick and injured were either treated at home by a medical attendant or transported to Sydney. An article in the Illawarra Express dated 24 May 1862 stated 'the necessity for some place where sick and injured settlers and miners could be received and minded has long been apparent'. The Albert Memorial Hospital opened in Wollongong in 1864 and was the only hospital in the region for over 30 years. It had room for about 20 patients but no facilities for pregnant women, the insane, or those suffering from contagious or infectious diseases.¹⁰ By 1901 Wollongong's population had reached 17,182, putting great pressure on this small country hospital. Some assistance came in 1894 when, following a major industrial accident at the Bulli mine, a hospital opened at Bulli. By 1900, however, the Wollongong District Hospital opened at Garden Hill.

Rapid population growth saw an acute housing shortage and many workers were forced to live in shanty towns in squalls, humpies or tents, often located on the low-lying, ill drained land near Port Kembla. With no running water or proper sewerage, rats and disease proliferated. In 1928 there was a typhoid epidemic, with the disease endemic well into the 1930s.¹¹ The mortality rate among children was high and in 1932 there were severe diphtheria epidemics. Low incomes and poor living conditions resulted in diseases that put increased demands on the hospitals. While Wollongong Hospital expanded during this time, it remained a relatively small country hospital.

A dramatic industrial expansion occurred following the end of World War II. Between 1947 and 1971 the Greater Wollongong population tripled from 66,092 to 192,039, largely as a result of the growth of the steel industry.¹² New large suburbs developed in the southern areas, particularly around Lake Illawarra, where the poorly chosen sites often produced a high incidence of infectious disease.¹³

The 1980s saw a decline in the traditional manufacturing and blue-collar industries of the area due to the abandonment of protectionist economic policies. In recent years, however, the economy has made a recovery thanks to diversification of economic activity, including higher education, the fine arts, tourism, residential construction and eco-friendly electricity generation. The city's economy still relies on heavy industry and will do into the near future.

By 2001 the population of Wollongong had reached 181,612 and by 2007 was around 280,159. Today Wollongong is the third largest city in New South Wales and the ninth largest in Australia.

2.3 Wollongong's First Hospital—The Albert Memorial Hospital 1864– 1908

The Albert Memorial Hospital was erected by public subscription as a memorial to Prince Albert, husband to Queen Victoria, who died of typhoid on 14 December 1861. At a meeting held on 15 April 1862, it was resolved that there was an urgent need for a hospital in the Wollongong area. There was a call for a public appeal to raise funds. In an article in the *Illawarra Express* 24 May, 1862 it stated the hospital would be:

A working man's hospital, where any person ... can receive the care and attention necessary for recovery ... as the hospital is intended for the working classes, it is hoped that they will cheerfully contribute according to their means and that the employers will see that it will be in their interest to largely subscribe ... so that if the movement be general, and every person gives a few shillings, a handsome and useful building will soon arise in Wollongong testifying that the inhabitants are loyal, humane and independent.¹⁴

The Albert Memorial Hospital was located on Fairy Meadow Road, North Wollongong on land donated by Charles Throsby Smith. The foundation stone was laid in 1863. Wollongong architect, J Backhouse, designed the hospital building which opened on 27 September 1864 (Figure 2.3). This hospital served the local community for 40 years, at which stage it was considered necessary to expand to cope with the increasingly complex health issues resulting from a growing population, and changing medical ideas.

2.4 Wollongong District Hospital—Hospital Hill 1907–1950

2.4.1 The Establishment of Wollongong District Hospital

In the later part of 1900 it was announced by the hospital committee that the property known as Garden Hill House, on just over 7 acres of land, had been secured as the new hospital site. The site was acquired by Mr Harold Cox, solicitor, and transferred to the trustees in 1901 for the agreed sum of £1,153.2.6.¹⁵ A small government grant assisted with the purchase. The trustees authorised the sale of the old Albert Memorial Hospital site, which was auctioned on 22 February 1907.

The site of the new hospital was part of an original grant of 640 acres to John (Joseph) Thompson in 1824 and was officially granted to Dr John Osborne in 1831 (Figure 2.4). Osborne's land lay just west of the site that would be laid out for the Town of Wollongong in 1834. A Royal Navy surgeon, Osborne had visited Australia four times as Surgeon Superintendent aboard convict transports before bringing his wife and six children to Australia to live permanently in 1836. He and his brothers Alick and Henry became a well-known grazing family in the Illawarra region.¹⁶ The northern part of his grant became known as Garden Hill and, when a house was built on this land, possibly by John Osborne, it was called Garden Hill House. In 1849 the 640 acre property was sold to Henry Gilbert Smith (known as the father of Manly)¹⁷ and a map of the area dated to the 1850s contains a sketch of a house with the caption 'Garden Hill House, home of HG Smith' (Figure 2.5).¹⁸ The 640 acres was sold to Joseph Wood Wilshire in 1854¹⁹ and a map of the area from 1855 provides the location of Garden Hill House with the name Mr Wiltshire attached to the site (Figure 2.2).

In 1878, around 87 acres of the Garden Hill Estate, including the house, was sold by CF Smith to Samuel William Gray, MP, and in 1882 this land was sold to William Wiley. Wiley subdivided the land into over 350 residential allotments, to be sold as the Garden Hill Estate (Figure 2.6). It was auctioned by Mr Gorman of Hardy and Gorman on Saturday 10 May 1884.²⁰ The Illawarra railway line ran through the eastern portion of the subdivision but was not opened until 1887. A description of the sale of the Garden Hill Estate allotments appeared in the *Illawarra Mercury* on Tuesday 13 May 1884:

The steamers 'City of Brisbane' and 'Commodore' arrived at Belmore basin shortly after noon crowded with passengers most of whom wended their way to Garden Hill. In fact, never before were so many strangers in Wollongong at any one time, the whole distance from the wharf to Upper Crown Street being lined with those excursionists... As bidders however, those excursionists proved about as effective against our local men as would an army of Egyptian soldiers against a regiment of British red-coats. On the beautiful southeastern slope in front of Garden Hill House, a luncheon was served including the far famed roasted bullock. From a rostrum erected on an elevated spot on the same slope, Mr Gorman, of Hardie and Garman, commenced to address the crowd, which must have numbered not far short of 1500 persons including a good percentage of the fair sex.

Lots 57 to 69 and Lot 95 of Section 3 of the Garden Hill Estate, containing Garden Hill House on just over 7 acres of land, was purchased by solicitor Harold Cox in December 1900 as the site for the new Wollongong Hospital (Figure 2.6). This land was transferred to the hospital trustees Archibald Campbell, journalist, Walter Graham Robertson, bank manager and William John Wiseman, gentleman in September 1902.²¹ While sold as individual lots, the hospital site was never developed as such and has always remained one parcel of land. Its original subdivision pattern, however, is reflected in the SHR site boundary, which uses the original Lot 95 Section 3, the allotment which contained Garden Hill House, as its historic boundary.

In 1903 the government requested plans be prepared for a modern hospital to be constructed on the new Garden Hill site. The area began to be referred to as 'Hospital Hill', a name which was first mentioned in the *South Coast Times* on 30 April 1904. The foundation stone for the new hospital was laid by the Chief Secretary, Hon JA Hogue, on 29 August 1906. A description of the building said it comprised 'a Male Ward with 12 beds, Female Ward with 6 beds, Separation Ward [the McCabe Memorial Ward] with two beds, Nurses Duty Room, Bathroom and Sanitary Conveniences'. The hospital buildings lay 5m to the south of Garden Hill House, which was converted for use as matron and nurses' quarters. The two buildings were connected by a covered walkway.²² There was also to be an isolation block and operating theatre, but a budget shortage saw a delay in their construction. Both were constructed on the site a few years later.

The official opening ceremony took place on 27 July 1907 and the hospital was opened by the Premier, Mr (Sir) Joseph H Caruthers, in front of 3,000 people. At the ceremony, the Hon Treasurer WG Robertson reported that the building and land cost had been £5,247, with a debt remaining of £657.3.0.²³ When the new hospital opened, the staff and patients from the Albert Memorial Hospital were transferred to the new site.

The Illawarra Mercury from 30 July 1907 described the new hospital as follows:

New building of brick with a galvanised iron roof. Male ward has 12 beds, female ward 7 beds, McCabe Memorial Ward 2 beds. Also an operating theatre and all necessary conveniences.

Garden Hill House, adjoining the hospital, converted to Matrons and Nurses quarters. One of the most modern hospitals outside Sydney it cost £5247.

A photograph taken of the opening ceremony and another of the site around the same time show the early hospital buildings and entry road (Figures 2.7–2.8). At a Board Meeting dated 7 May 1908 it was announced that the new hospital would be known as the Wollongong District Hospital.²⁴

The hospital began to expand and a Sydney Water plan of Hospital Hill, drawn in 1913 and updated in December 1924 and January 1929, shows that the Isolation Ward and operating theatre had been constructed and a new Nurses' Home added to the west of the female ward (Figures 2.9–2.10).

In the 1920s and 1930s Wollongong became an industrial town, adding to its nineteenth-century role as a commercial and service centre for dairying and coal mining. New industries meant more jobs and many new settlers came to the region. Between 1921 and 1931 the population of the region grew by 32 percent. Wollongong was one of the fastest growing areas in Australia.²⁵ There was an urgent need to expand the hospital facilities to accommodate the growing local health care needs.

By June 1930 the extension to the isolation ward had been completed, as had a large extension to the rear of the nurses' home, connecting this building to new storage and office space that had been constructed on the western side of the covered walkway, near the original male ward. Garden Hill House had been demolished and a new two-storey male ward (the Soldiers' and Sailors' Memorial Ward) constructed on this site, with the original male ward converted for use as an additional female ward (Figure 2.12).

At this time, 40 percent of the hospital's budget came from government subsidy with 25 percent coming from employees' industrial subscriptions and the rest from donations, ordinary subscribers and various local organisations.²⁶ The 1930s Depression saw subscription and subsidy fall; these were worrying times for the Hospital Board. In 1932, unemployment in the area was over 30 percent.

The Second World War did not improve matters and the hospital struggled at a time when it was transitioning from a smaller country hospital to the larger metropolitan facility. Despite this, plans of the hospital site in 1945 (Figure 2.13) show that considerable construction had taken place since 1930, including a new isolation unit built in 1933 to the west of the male ward. This plan also shows that the original nurses' home had been converted for use as a children's ward and kitchen, and that a morgue had been built near the corner of New Dapto Road and Loftus Street. South of the morgue on the western side of the old nurses' home (now children's ward), a laundry, boiler house, and carpenters' shop had been constructed. The covered walkway appears to have been enclosed within the male and female wards and the female ward had been extended towards Crown Street. The plan shows a couple of small brick building near the corner of New Dapto Road and Crown Street, with the entrance into the hospital from Darling Street near its intersection with Crown Street, along Hospital Road.

The 1945 plan shows the hospital as it was prior to 1950, when it was still classified as a small district hospital. No specialist surgeons or physicians were as yet on site.

2.4.2 The First Nurses' Home

Up until the arrival in Sydney of Lucy Osburn, a Nightingale protégé, in 1868, nursing practices in New South Wales were of a very low standard and were often carried out by convicts. Lucy Osburn's arrival marked the beginning of significant nursing reform. In 1860 Florence Nightingale had begun the first 3-year training course for nurses at St Thomas Hospital, London. In response to the ongoing problems and the appalling low standards of nursing that existed within the Sydney Infirmary, Florence Nightingale's assistance was sought to improve the inadequate system of nursing here. During this period, Florence Nightingale was universally recognised for her contributions to the reformation of nursing in Britain, and her views in all matters relating to nursing, health, hospitals and public welfare were widely sought from all corners of the globe.²⁷ Once reform had been established and implemented at the hospitals, little occurred to fundamentally change nursing in Australia during the next several decades.

By the early 1900s, the pattern of nursing in New South Wales was well established. Nursing was firmly based on the elements of obedience, service and hard work, and these principles were strongly enforced within a rigid hierarchical structure, headed by the often formidable hospital matron. The position of the nurse in the public eye, although respected, remained subservient to the medical profession and was still primarily associated with domestic duties.

The requirement for trainee nurses to live in hospital accommodation also contributed to nursing being publicly viewed as a 'calling' during the years between 1900–1960. 'Living in' was historically regarded as an essential component of nurse training, as it was thought that this would ensure the instillation of the morals, manners and behaviours that Florence Nightingale regarded as basic qualities of a good nurse. The nurses' home was treated as an integral part of the interdisciplinary structure of the hospital and its occupants were required to adhere to strict rules and regulations.²⁸

By 1921 Wollongong Hospital had reached a daily average of 31.5 resident patients, making it large enough to support its own nurses' training school. Trainee nurses had been part of the Wollongong Hospital program since 1911, operating under the Australasian Trained Nurses Association (ATNA), which had been established in Sydney in 1899. This association set registered exams for nurses from all over Australia. Prior to 1921 the number of trainees at Wollongong District Hospital had been quite small, with most beginning their training on an individual basis. They received their instruction from matron, with an occasional lecture of a more technical nature from a local general practitioner. Matron continued to supervise most of the nurses training at Wollongong District Hospital registered as a Training School with the ATNA, the numbers of trainees increased.²⁹

When the hospital opened at Garden Hill in 1907, accommodation for nurses and matron was in Garden Hill House. With the establishment of the training school at Wollongong Hospital further nurses' accommodation was needed and a nurses' home was constructed on the site between 1918 and 1922 (Figures 2.9–2.10).

Trainee nurses had to be 18 years of age with few rarely older than 20. All were required to be unmarried and most came educated to the Intermediate Certificate.³⁰ Two thirds of the trainees came from the local area.³¹

The *Nurses' Registration Act* was passed in New South Wales in 1924 and this established the Nurses' Registration Board. In 1926 the Wollongong District Hospital registered as a four-year

training school under the 1924 Act.³² This caused the existing Nurses' Home to be stretched to capacity. In the annual report for 1928 the hospital committee stated:

We regret to report the additions to the Nurses' Quarters and the new Isolation block have not been commenced, the Government stating that no money is available at present, but something will have to be done in the near future, as the district is growing so rapidly that the present accommodation cannot cope with the demands made on it; on many occasions patients have to be sent out and treated in their own homes.

Money must have been found from somewhere as a plan of the site dated June 1930, produced by the Government Architect, shows that the extension to the isolation ward had been completed, as had a large extension to the rear of the nurses' quarters, connecting this building to new storage and office space that had been constructed on the western side of the covered walkway near the original male ward (Figure 2.12).

2.4.3 The Second Nurses' Home—Elouera House

To accommodate the growing numbers enrolling in the four-year nurses training program it was soon necessary to build further nurses' accommodation. In 1937, plans were drawn by the Government Architect, Cobden Parkes, for a new nurses' home for the Wollongong District Hospital. This new building faced Loftus Street near its corner with Darling Street. It was three storeys in height and had curved balconies on its northeast corner. Foundation stones were laid on 19 February 1938 by Harold Cox, Esq, the man responsible for the original purchase of the Garden Hill Estate land for the founding of the hospital, and Dr John Kerr, who was present at the opening of the hospital in 1907. When the building opened later in 1938 it was called 'Elouera House' Nurses' Home (Figures 2.13–2.15). Hospital Road, in its current location, was in place by the time Elouera House was completed and curved around the back of the building. To the east of Elouera House a tennis court was constructed and adjoining this to the south were landscaped lawn areas (Figure 2.13). The building was officially opened by Hon A Richardson MLA, acting Minister for Health, on 22 April 1939.³³

Elouera House was almost immediately outgrown and extensions to the western end of the building along Loftus Street began only three years after its official opening.³⁴ Plans for this extension were completed by Parkes and the Government Architect's Branch in 1941. The extension was two storeys in height and included an additional 23 bedrooms, a sick bay, box room and bathrooms. Construction of the extension was completed in 1943 (Figures 2.13 and 2.16).

2.5 Wollongong Hospital—Post World War II–1988

2.5.1 Expansion and Transition

The problems of the inter-war and war years were modest by comparison with those caused by the explosive growth of Wollongong after the Second World War. Its population doubled in size between 1947 and 1961, largely due to the growth in the steel industry. In 1947 one in seven of Wollongong's male workers were employed in steel. By 1961, it was one in four. By 1961 Wollongong was the eighth most populous urban district in Australia and comprised many different nationalities. The population was very young, ethnically diverse, poorly educated and disproportionately working class.

During the war the Hospital Board had been pressing for increased funding to cater for local needs. In 1946 the hospital began its postwar building program, calling for tenders for a new general ward block for 201 patients. This was the six-storey Hickman House, designed by Parkes, which towered over the early-twentieth-century buildings. Hickman House was constructed on the site of the original isolation ward and opened in 1951 (Figures 2.16, 2.17 and 2.18). In 1962 the 'Isedale Unit', an eight-floor wing, was attached to Hickman House and opened by the Hon WF Sheahan.

Respiratory problems caused by the mining and heavy metal industries saw the establishment of a chest clinic at the hospital in 1949 and of a separate pulmonary unit in 1954.

In 1960 Wollongong Hospital achieved 300-bed status and its role as a regional hospital grew, allowing it to develop a wider range of services. The creation of new specialist departments such as intensive care, coronary care, renal dialysis, nuclear medicine, the psychiatric unit, the diabetic unit and the retardation unit are an indication of the diversity of contemporary medicine and the hospital's role as a base hospital for the South Coast.

At this time the hospital removed the word District from its title and became known as Wollongong Hospital.

In the early 1970s the original female ward was demolished to make way for the construction of the eight-storey services building (now called Block B), which was opened by Hon RA Jago in 1973. The entrance to this building was from Crown Street (Figure 2.19).

Annual Reports for the 1970s and 1980s note the change in emphasis in patient care towards early ambulation and short hospital stays compared with the emphasis, in earlier times, on complete bed rest and lengthy periods in hospital.

In the late 1970s the pace of economic growth slowed and employment in steel and coal began to fall. In the face of continuing technological change and fierce competition, the domestic and international markets for steel began to lessen. The hospital, whose resources were strained to the limit in the mid-1970s, was forced to close 48 beds in 1982 and to surrender part of its diagnostic and specialist referral role to the private sector.³⁵

That same year also saw the end of an era at Wollongong Hospital with the final graduation of hospital-based general trained nurses. A Tertiary Education Commission, established in 1978, had recommended the abolition of hospital-based training programs for nurses and the establishment of regional schools of nursing within Colleges of Advanced Education. This move was considered necessary to raise the status of nursing qualifications and bring the profession in line with other similar courses of study. In 1979 the Illawarra Regional School of Nursing was established as the main training centre for the region. Elouera House was converted for use as general hospital staff and student accommodation.

2.5.2 The Third Nurses' Home—Lawson House

In the 1950s two events caused a huge increase in the numbers of patients and staff at Wollongong Hospital, leading once again to a shortage in nurses' accommodation.

The first was the opening of Hickman House in 1951, which brought a huge increase in the number of patients the hospital could accommodate. The second, and the chief growth area for the hospital, was the growth and development of midwifery.

The hospital bore the brunt not only of the huge increase in the regional population but also of a change of social custom. Before 1950, most babies were born in private hospitals or at home. This changed following the end of the Second World War as women chose to have their babies in public hospitals. In the decade from 1930 to 1939 only about 50 babies were born at Wollongong

Hospital, while from 1940 to 1949, Wollongong Hospital was the venue for 756 births, with the vast majority occurring between 1948 and 1949. To cope with this increased demand, an emergency maternity unit was established in the Soldiers and Sailors Memorial Ward and the original Nurses' Home was converted to a maternity wing, which opened in 1949.

In November 1951 the midwifery unit was registered as a training school and its first trainee began in April 1952. During the years 1954 to 1958 the number of births at Wollongong Hospital was exceeded in New South Wales only by the four specialist Sydney midwifery hospitals, making Wollongong the fifth largest maternity hospital in the state.³⁶ The midwifery school grew rapidly and the number of graduates frequently exceeded those graduating from the hospital in general nursing.

This placed great pressure on existing nurses' accommodation, which was temporarily solved by locating some nurses on the fifth floor of Hickman House. In 1956 further extensions to Elouera House opened, in the form of a seven-storey building known as Lawson House, providing 173 extra bedrooms (Figures 2.17–2.18) and greatly alleviated accommodation pressures.

In the 30 years between 1950 and 1980 the size of the hospital and the number of trainees grew. Substantial changes in nurse education saw a more sophisticated formal training program established. The first major change at Wollongong was the appointment of a Tutor Sister, Sister Hamilton, who took up her duty in 1951. Gradually, the number of tutor sisters grew and a lecture program developed that called on the services of a range of honoraries to lecture in their specialities.

In the 1960s the training period was reduced from four years to three years in recognition of improved educational standards and to make nursing more attractive. Other changes included the admittance of the first male trainees to the program, the allowance of married trainees, and raising of the age limit for trainee nurses to 35 plus.³⁷

2.5.3 A New Nursing Paradigm

From the 1970s, nursing leaders worldwide began to realise that as long as student nurses were employed by hospitals, they would continue to be seen as little more than workers obligated to fulfil the service needs of the hospitals to the detriment of their own learning needs. The move to introduce college-based nurse education was therefore initiated. After a long and arduous battle, educational reform was finally achieved in New South Wales with the announcement by the State Government that all pre-registration nursing programs would be transferred to the tertiary sector. Other states soon followed. In 1978 the *Tertiary Education Commission Report on Nurse Education and Training* recommended the abolition of hospital-based training programs and the establishment of regional schools of nursing within the Colleges of Advanced Education.³⁸

The Illawarra Regional School of Nursing was established in 1979, and in 1982 the final graduation from hospital-based general trained nurses at Wollongong took place.³⁹

2.6 Wollongong Hospital 1988 to Present

2.6.1 Specialisation

By 1988 the district had strengthened its economy and Wollongong Hospital was described as the major referral and diagnostic hospital for the Illawarra, with an annual running cost of \$45 million and a staff of more than 1100.⁴⁰ In 1985 the Illawarra Area Health Service had taken over the organisational and funding responsibility of Wollongong Hospital and a complex system of finance,

administered through the Health Commission of NSW, replaced the old industrial subscription system. Individual hospitals in the region began to specialise in certain areas but integrate with other hospitals to provide a network of care. Some of Wollongong Hospital's support services, including the sexual assault, mental health and disabled centres, were transferred to premises in New Dapto Road.

Medical technology was developing in leaps and bounds but the physical restraints inherent with the hospital hill site and its early-twentieth-century buildings hindered the implementation of these new developments.

In 1988 planning was underway for a clinical services building estimated at costing \$55 million, which would give the hospital a huge technological leap forward. This building would house operating theatres, intensive care, radiology and nuclear medicine services and a new accident and emergency department.⁴¹

In the meantime a free-standing cancer care building, originally called the radiotherapy unit, was constructed on the site of the old laundry boiler house and carpenters' workshop. A 150 space carparking station was also built at this time.⁴²

In 1993 construction began on the new clinical services building (referred to as Block A) and it was completed in 1996. The construction of this six-storey building caused the demolition of all the remaining pre-1930s hospital buildings, including the original male ward, female ward and nurses' home.

The need for further modern clinical facilities saw the demolition in 2001 of Hickman House. This building had for some time been considered under-utilised and outmoded. Hickman House was demolished to make way for a nine-storey 'L'-shaped building referred to as Block C which, when completed, connected through to the other newer hospital buildings, making the main part of the hospital an interconnected structure.

Since 2000 Wollongong Hospital has been administered by Health Administration Corporation and the ownership of the property has been transferred into their name.⁴³ Its current land title is Auto Consol 4090-189 and this includes all the land originally purchased for the hospital site in 1901.

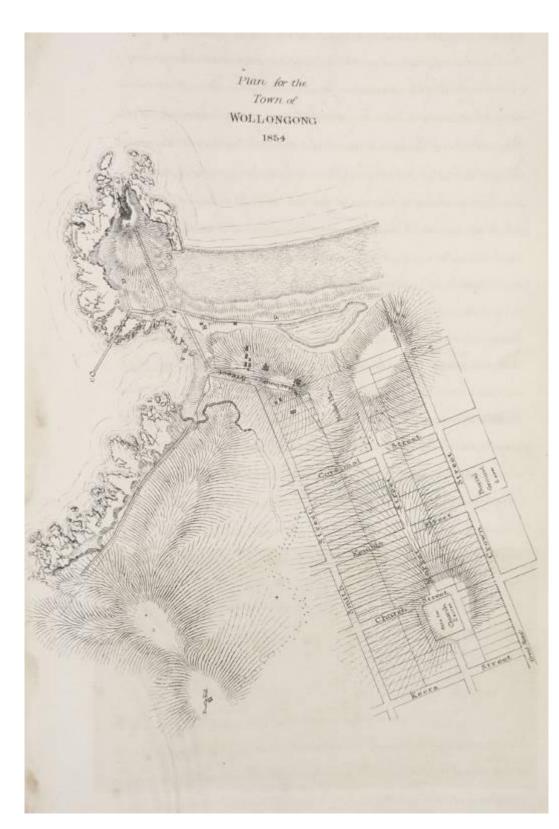


Figure 2.1 Plan for the Town of Wollongong dated 1834. The future site of Wollongong Hospital at Garden Hill is west of Keera Street. (Source: From Progress in Public Works & Roads in NSW 1827–1855/Sir Thomas Mitchell [Album view] SLNSW)

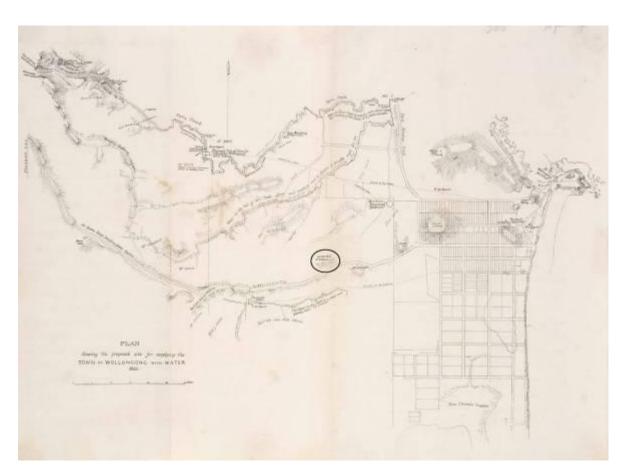


Figure 2.2 An 1855 plan entitled 'proposed site for supplying the Town of Wollongong with water'. Note the spread of the town of Wollongong to the south. The area circled says 'Garden Hill Mr Wiltshire' and lies on the main road to Dapto and Appin, now part of an extension of Crown Street. (Source: From Progress in Public Works & Roads in NSW 1827–1855/Sir Thomas Mitchell [Album view] SLNSW)



Figure 2.3 The Albert Memorial Hospital, built in 1867. (Source: Wollongong Library)

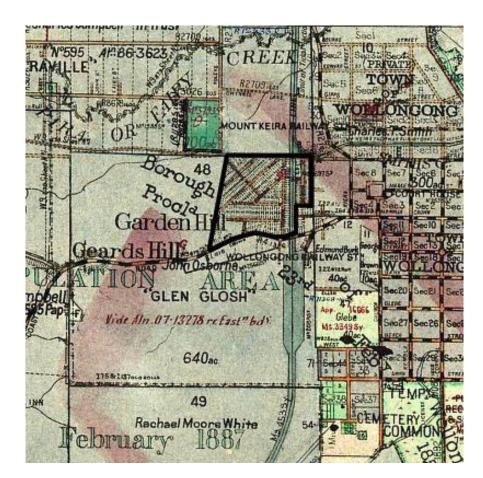
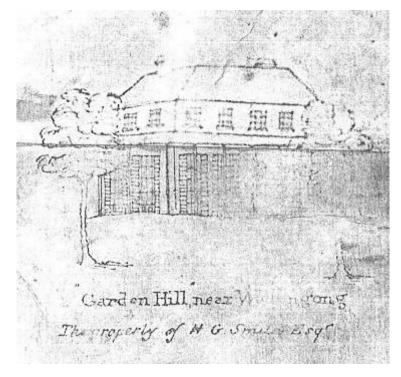
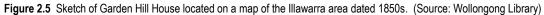


Figure 2.4 Parish Map No. 13867601 showing John Osborne's 640 acre 'Glen Glosh' estate. The name Garden Hill is shown attached to the northern part of the estate and William Wiley's 1882 subdivision is shown in the top right corner of the estate. (Source: Department of Lands)





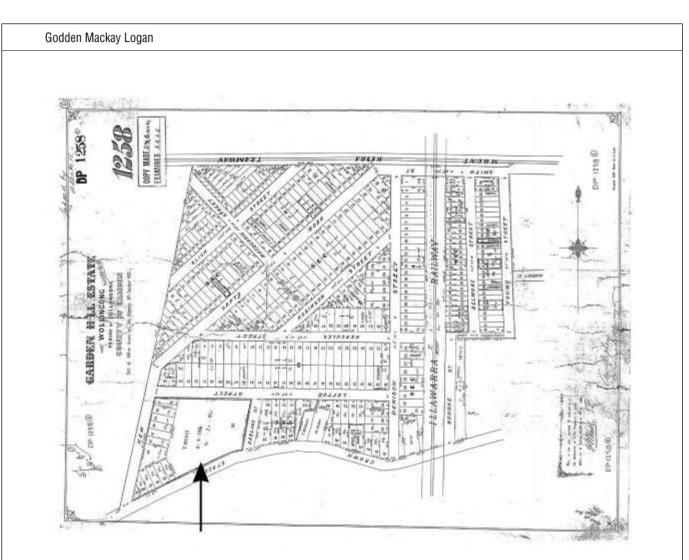


Figure 2.6 William Wiley's 1882 subdivision of the Garden Hill Estate as DP 1258. The Wollongong Hospital site is located on Lots 57 to 69 and Lot 96 Section 3, shown with an arrow. (Source: NSW Land and Property Management Authority)



Figure 2.7 The opening ceremony of the Wollongong Hospital at Garden Hill in 1907. To the far left is the female ward, in the centre is the male ward and to the right is Garden Hill House. (Source: Wollongong Local Studies Library)



Figure 2.8 Wollongong Hospital c1907 looking west from what appears to be an early entry road. The first building on the right is Garden Hill House with the original male ward behind. (Source: Wollongong Library)

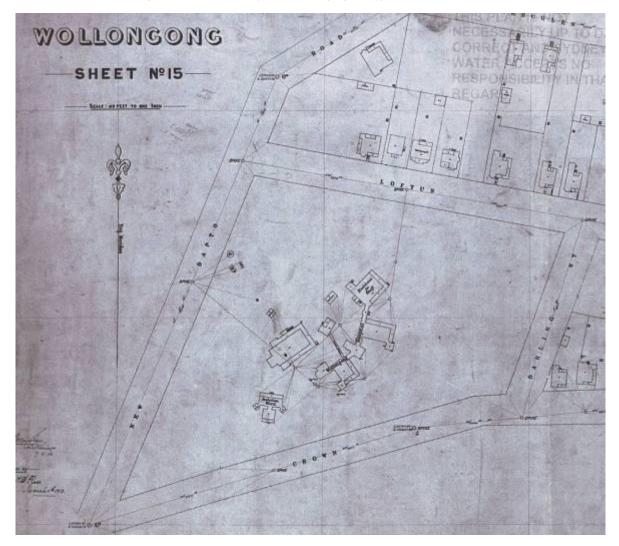


Figure 2.9 Part of the Sydney Water Detail Plan, originally drawn in 1913 and updated December 1924 and January 1929, showing development on the Wollongong Hospital site at this time. Garden Hill House is labelled 'Residence for Staff' and this is connected by the covered walkway first to the male ward, then to the McCabe Memorial two-bed ward and on to the female ward. South of female ward, in a separate building, the isolation ward. The large building north of the isolation ward is the original Nurses' Home. (Source: Sydney Water Plan Room)



Figure 2.10 Original Nurses' Home on the Garden Hill site in 1922. (Source: Wollongong Library)



Figure 2.11 Wollongong Hospital c1930s showing the original Nurses' Home on the right and male ward on the left with a two-storey connecting building containing further nurses' accommodation in the centre. (Source: Wollongong Library)

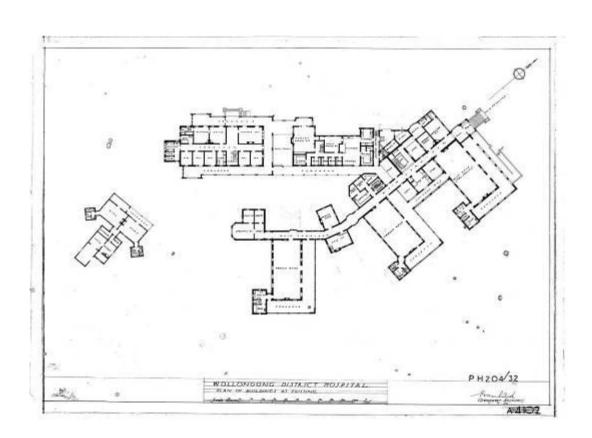


Figure 2.12 A 1930 plan of the Wollongong District Hospital PH204-32. Note the additions to the original Nurses' Home and the construction of a new two-storey male ward on the site of Garden Hill House. This new ward was called the 'Soldiers' and Sailors' Memorial Ward'. (Source: Department of Services Technology and Administration)

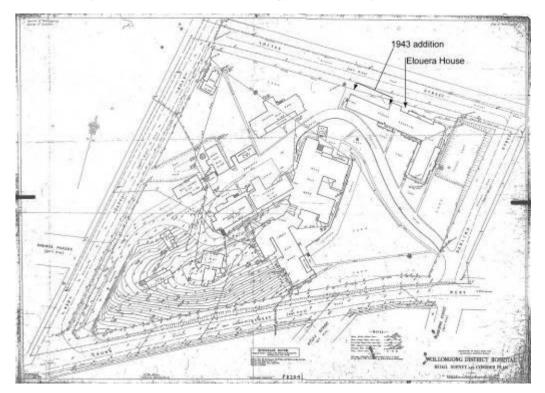


Figure 2.13 A 1945 Wollongong District Hospital site plan. Note the new development in the northwest corner of the site and the construction of Nurses' Home (with its 1943 editions) in the northeast corner of the site fronting Loftus Street. Additions to the female ward towards Crown Street can also be seen. (Source: Department of Services Technology and Administration)



Figure 2.14 Elouera House from Loftus Street soon after construction in 1938. (Source: Wollongong Library)

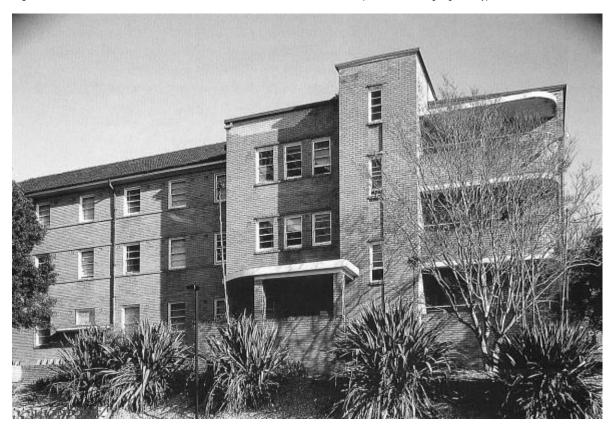


Figure 2.15 Elouera House, eastern elevation in 2001. (Source: Irving, R 2001, Twentieth Century Architecture in Wollongong, p 89)

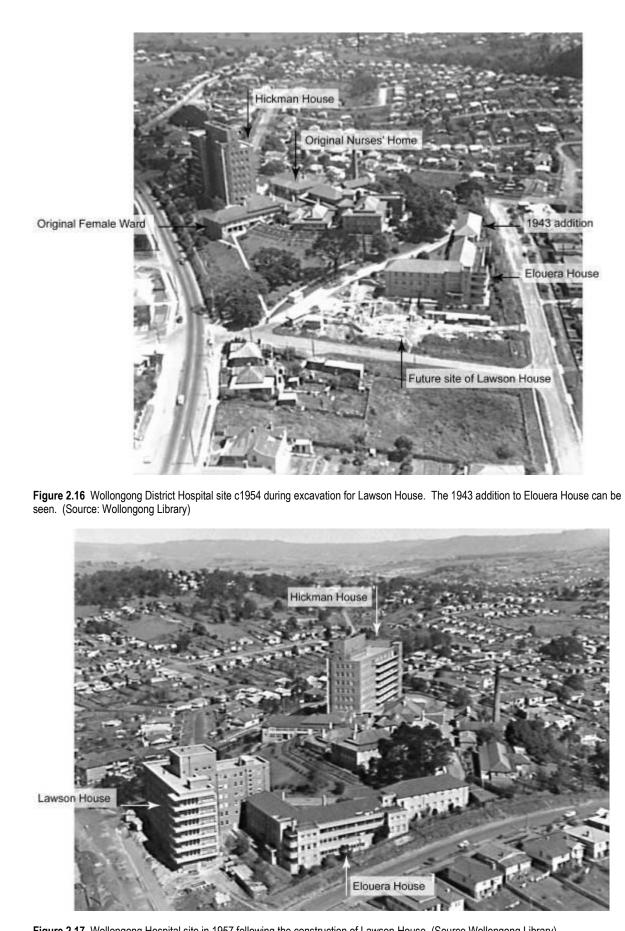


Figure 2.17 Wollongong Hospital site in 1957 following the construction of Lawson House. (Source Wollongong Library)



Figure 2.18 A 1953 photograph of the hospital site from Crown Street showing the original female ward after it had been extended and Hickman House towering behind. The existing fig tree is shown to the right of the picture.



Figure 2.19 The services building (now called Block B) from Crown Street opened 1973. (Source: NLA)

2.7 Endnotes

- ¹ A History of Aboriginal People of the Illawarra 1770 to 1970, 2005 produced by Department of Environment and Conservation, NSW
- ² Jervis, J 1942, 'Illawarra: A Century of History- 1788-1888', RAHSJ Vol XXVIII, Pt 2, p 77.
- ³ Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 184.
- ⁴ Jervis, J 1942, 'Illawarra: A Century of History 1788-1888', RAHSJ Vol XXVIII, Pt 2, p 100–103.
- ⁵ Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 184.
- ⁶ Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 184.
- ⁷ Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 184.
- ⁸ Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 185.
- ⁹ Hagan, J & Lee, H 2001, A History of Work and Community in Wollongong, Halstead Press, p 19.
- ¹⁰ Fleming, AP 1964, The Albert Memorial Hospital Wollongong, NSW, 1864–1908, p 8.
- ¹¹ Castle, J 1984, *Nursing and the Wollongong Hospital,* 1926–1982, University of Wollongong, Wollongong, p 2.
- ¹² Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 185.
- ¹³ Regional Histories of New South Wales, 1996, Heritage Office and Department of Urban Affairs and Planning, p 186.
- ¹⁴ The Illawarra Express, November 19, 1862, cited in A.P. Fleming 1967, 'The Albert Memorial Hospital, Wollongong NSW 1864– 1908', The Wollongong Hospital and Illawarra Historical Society, Wollongong, pp 3–5.
- ¹⁵ Certificate of Title Volume 775 Folio 179, Department of Lands.
- ¹⁶ Illawarra Mercury April 9, 1959 Obituary of Mrs Jane Osborne.
- ¹⁷ Primary Application No. 5837, Department of Lands.
- ¹⁸ Map held by Wollongong Local Studies Library dated 185? This map has a sketch of Garden Hill House, the property of HG Smith.
- ¹⁹ Primary Application No. 5837, Department of Lands.
- ²⁰ Illawarra Mercury, May 13, 1884.
- ²¹ Certificate of Title Volume 775 Folio 179, Department of Lands.
- ²² Fleming, AP 1964, The Albert Memorial Hospital Wollongong, NSW, 1864–1908, p 15.
- ²³ A Century of Service 1864–1964, published for the Centenary of the Wollongong Hospital in 1964.
- ²⁴ Fleming, AP 1964, The Albert Memorial Hospital Wollongong, NSW, 1864–1908, p 16.
- ²⁵ Castle, J 1984, *Nursing and the Wollongong Hospital* 1926-1982, University of Wollongong, Wollongong, pp 2–3.
- ²⁶ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, University of Wollongong, Wollongong, p 4.
- ²⁷ Bloomfield J, The Changing Image of Australian Nursing, http://www.ciap.health.nsw.gov.au/hospolic/stvincents/stvin99/Jacqui.htm.
- ²⁸ Russell, RL 1990, From Nightingale to Now: Nurse Education in Australia, Sydney: WB Saunders, Baillere Tindal, Harcourt Brace Jovanovich Publishers.
- ²⁹ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p xiii.
- ³⁰ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, pp 14–15.
- ³¹ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, pp 14–15.
- ³² Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p 13.
- ³³ Invitation to the Opening Ceremony, Wollongong Local Studies Library.
- ³⁴ Wollongong Hospital Annual Report, 1936 and 1940–1945.
- ³⁵ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p 9.
- ³⁶ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p 7.
- ³⁷ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p 27.
- ³⁸ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p xv.
- ³⁹ Castle, J 1984, Nursing at the Wollongong Hospital 1926–1982, p xv.
- ⁴⁰ Illawarra Mercury October 17, 1988, p 32.
- ⁴¹ Illawarra Mercury October 17, 1988, p 32.
- ⁴² Illawarra Mercury October 17, 1988, p 32.
- ⁴³ Transfer No. 9024711 dated 23 March 2000, Department of Lands.

3.0 Physical Analysis

3.1 Introduction

The Wollongong Hospital site, Elouera House and the exterior of Lawson House were inspected by the project team on 18 January 2011. While only the exterior of Lawson House was viewed, the exterior and interior spaces of Elouera House were inspected. Rooms that were occupied at the time of the site inspection were not viewed. Where the rooms were of a particular type (eg bedroom), a number of examples were viewed rather than all. The original 1937 portion of Elouera House is currently used as accommodation for visiting medical students and doctors, with the 1941 extension used for consultation rooms. Lawson House is used for a range of hospital clinics, including blood donation on the ground floor.

3.2 Setting

3.2.1 The Wollongong Hospital Site

Wollongong Hospital is located on a prominent site in Wollongong CBD, perched at the top of Garden Hill. The site commands views across the city to the ocean in the east and mountain range to the west. The site is densely developed, with substantial modern hospital buildings filling most of the site area. A few open spaces remain, with one located at the rear of the Nurses' Home and another at the southeast corner of the hospital site. These areas are dominated by substantial fig trees, which are listed as heritage items of Local significance on Wollongong LEP 2009.

The one road (Hospital Road) through the site leads up the hill from Darling Street to the south of Lawson House, around the back of Elouera House to the second-storey entrance of Block A (clinical services building) and down the other side of the hill to New Dapto Road.

The hospital site comprises 14 lots, as noted in Section 2.4.1. The SHR boundary for the Wollongong Hospital Nurses' Home corresponds with the Garden Hill House lot, as acquired by Harold Cox in 1901.

3.2.2 Setting of the Nurses' Home Group

The Nurses' Home group is located in the northeastern corner of the hospital site, with Elouera House near Loftus Street and Lawson House near Darling Street (Figure 3.1). The main entrance of Elouera House faces east towards Darling Street, though the most prominent facade is located along Loftus Street. The two buildings are grouped closely together, with Lawson House partially blocking views of Elouera House from Darling Street. The main entrance of Lawson House opens onto a carpark in front of the two buildings.

Lawson House is a T-shaped building constructed of red brick, with angled reinforced-concrete balconies on each floor (Figure 3.8) and was designed and constructed as an extension of the nurses' accommodation. The building is prominent along Darling Street and the approach to the hospital site east along Loftus Street.

The juxtaposition of the two buildings neatly demonstrates the increased need for nurses' accommodation as the hospital expanded during the mid-twentieth-century period. Lawson House is a much larger and more imposing building than Elouera House and has a strongly institutional look—the residential scale that characterises Elouera House was dispensed with for this new accommodation.

The Loftus Street frontage of Elouera House perches beyond a high retaining wall that divides the hospital site from the street (Figure 3.10). The retaining wall is constructed of pre-cast concrete planters. A row of mature trees are planted between Elouera House and the retaining wall.

The rear of the building is constrained by the steep rise of the hospital site and the curve of Hospital Road. A small, open grassed area with a few trees and a rotunda is located between the building and the road and would have provided a small outdoor area for the nurses to use. A substantial, mature fig tree is located on the opposite side of Hospital Road. This tree is listed as a heritage item on LEP 2009.

3.3 Elouera House—1937 Building

3.3.1 Terminology

The terminology used in this section is consistent with the original plans for the building, drawn in 1937 and reproduced in Figures 3.2–3.7 in this section. Thus, the storey with the main entrance and lecture room is referred to as the 'basement', the level above the 'ground floor', and the second storey the 'first floor'.

3.3.2 Exterior

Elouera House is a blond brick building with Inter-War Art Deco and Functionalist style features. The main entrance to the building is located at the basement level at the southeastern corner of the building (Figure 3.9) and forms one of the few decorative features of the building. The entrance is set back behind a raised entry porch located at the bottom of a composition of curved and rectilinear forms that contain balconies and a staircase, respectively. The awning over the entrance is a curved, reinforced-concrete slab, painted white (Figure 3.13). The entry doors are white painted timber with frosted glass panes (Figure 3.14).

Elouera House is L-shaped, with a long east–west wing and a shorter north–south wing (as shown in the site plan included in Figure 3.5). The building is constructed of load-bearing cavity brick, with reinforced concrete floors on the ground and first floors. Timber beams and joists are used at the basement level, where only underfloor space exists below.

The roof employs a number of forms and has been altered substantially since construction. The original roof over the balconies and communal rooms along the northern facade of the east–west wing was flat concrete deck with a parapet. The roof was (and still is) hipped behind the flat roof along the east–west wing and all of the north–south wing. The original flat roof has been replaced at some stage by a corrugated-iron roof that slopes toward the northern facade of the east–west wing, with capping over the facade walls. This slope is the inverse of that originally designed and has created a range of serious water ingress issues, particularly in the communal spaces below. The hipped roofs were originally clad in Marseilles tiles.

The building retains most original windows. These are large, double-hung sash and most feature clasps for sash curtains on the lower panes. No windows viewed retained curtains. The windows on the first floor along the southern, eastern and western facades were originally installed with shutters, but these have since been removed. Evidence of the shutters was seen on one of the window frames along the southern facade. Where toilets and bathrooms have been refurbished, the original sash windows have been replaced with standard aluminium-framed windows. These new windows are all located at the back of the building.

The rear (southern and western) facades of the building are dominated visually by services which have been installed without any apparent order across these rear walls (Figure 3.12).

3.3.3 Interior Spaces

The internal arrangement of the building demonstrates its purpose very clearly. The building is laid out in a consistent, logical manner typical of institutional design. The hierarchy of matrons, sisters and nurses is an integral part of the building layout, with the matrons provided with a self-contained flat and the deputy matron and sister given large bedrooms with attached private sitting rooms. Communal spaces separate from the nurses' spaces were also provided for the matron and sisters. Nurses were provided with single bedrooms and communal spaces for recreation, bathing and domestic tasks like sewing and ironing. Apart from a small pantry on each floor, meals were most likely taken at the hospital dining room, as no communal dining room was included in the design for Elouera House.

The bedrooms are arranged on either side of central corridors on each floor, with communal spaces located on either side of the northern balconies. Staircases that connect all floors are located at the end of each corridor (Figure 3.16).

The small, self-contained flats or suites for the matron, deputy matron and house sister are located on each floor at the intersection of the north–south and east–west wings. These were occupied at the time of the site inspection and could not be viewed. Toilets and bathrooms are grouped against the rear of the building at the intersection of the two wings. A laundry, boiler room and storage rooms were arranged in the southern portion of the east–west wing at the basement level. These rooms retain some original finishes, including original doors.

The interior spaces generally retain a cohesive, ordered appearance, with original dark-stained timber joinery such as skirtings, doors and door frames, remaining intact. False ceilings have been installed in most corridors and carpet laid throughout. Original cornices and lights appear to have been replaced in most rooms.

Communal kitchens have since been installed for use by the students and visiting doctors who now occupy the Nurses' Home, with two bedrooms on each floor converted for this purpose.

Recreation Spaces

All floors feature a common balcony along the northern facade. The balcony on the basement level is enclosed by mesh screens, intended to keep intruders/unapproved guests out of the building. This was designed as a measure to ensure that all guests to the building had to first be admitted by the sister, whose rooms were located next to the main entrance at the basement level.

The ground floor balcony is partially enclosed for private use by the matron and has a doorway to the matron's suite. The first-floor balcony is entirely open and has doorways to the nurses' study and library (now TV room) and the sister's sitting room. The original drawings indicate that the balconies were to be laid in green silicate paving. The current finish is painted concrete (Figure 3.17).

The ground and first floors have common rooms for the nurses at the western end of the balcony. A common room for the house sisters and matrons ('sister's sitting room') is located at the eastern end of the first-floor balcony (Figure 3.2).

The sister's sitting room is the most intact of the common rooms. It features timber panelling laid horizontally along all walls to the height of the door, with skirting boards in matching timber. A fireplace with a stepped, timber-panelled surround is located against the eastern wall (Figure 3.20). The fireplace features the original metal grate and hood, and a hearth laid in glazed ceramic tiles. Original light fittings with rippled, cylindrical glass shades are located at the top of the timber panelling on either side of the fireplace (Figure 3.20–3.21). The room also features a deep, moulded cornice (Figure 3.21). The floor has been laid in blue carpet. The sister's sitting room has its own balcony—one of the curved balconies above the main entrance on the building's eastern facade.

The former nurses' sitting room on the ground floor is furnished in the same style as the sister's sitting room, but is slightly less intact and in a poor condition. The timber panelling is peeling away in the northeastern corner of the room, revealing the brick cavity wall beyond. This damage appears to be caused by water leaking from the roof one floor above. The fireplace is intact and features a billiards scoreboard set on the top of the mantelpiece (Figure 3.23). The room is dominated by a heavy, full-size, timber billiards table with a metal light fitting suspended above it. Original light fittings have been removed. The floor is constructed of exposed, narrow floorboards in a dark timber (Figure 3.22).

The former study and library (now TV room) is located on the first floor, directly above the former nurses' sitting room. This room has a more austere interior than the other common rooms and does not feature any timber panelling. The 1937 plans indicate that the room was designed with less decoration than the other rooms. The room has a single fireplace with the same stepped surround as the other common rooms, but without the timber panelling. The original grate, hood and tiled hearth remain, though some tiles are missing. The floor is covered in greenish-blue linoleum. The room is in a poor condition, with extensive leaking causing paint to peel and bubble, particularly damaging the northeastern walls (Figure 3.24).

Bedrooms

Each single bedroom has a single window to the outside, with those along the balconies on the northern side opening onto the balconies. Most bedrooms feature original timber skirting boards, doors and door frames. Some feature original door hardware (Figure 3.25). Many have plaques on the door acknowledging persons and groups that donated funds to furnish the room.

The Nurses' Home was originally supplied with furniture of a uniform design and appearance. Each bedroom appears to have been furnished with a single bed, a bedside table, a dresser with mirror, a small desk and a wardrobe, all constructed of timber.

Services

New services have been added on each floor to suit modern demands. On the ground and first floors, two bedrooms have been combined to create communal kitchens with central stovetops. Some of the bathrooms and toilets have been updated, with timber sash windows replaced with aluminium-framed examples. The former pantry and the linen cupboard that were located next to each other on the first floor have been combined to create a small kitchen and dining area.

Original toilets are located on the first floor, with original tiles, stalls (including timber doors) and WCs (Figure 3.28). The original fittings and finishes have been retained in what was the maid's bathroom in the basement level, including the bath, soap dish and tiles. These features are all typical of the period.

Other Features

Many interior features of the building were specially designed and a reasonably large sample remain intact. The fire extinguisher alcove (Figure 3.18) and the fire hydrant cabinet (Figure 3.19) demonstrate the extent to which the design of interior finishes was thought-out and co-ordinated.

The staircases that connect each floor feature original wrought-iron balustrades of an Art Deco influenced design (Figure 3.16). These balustrades are now painted lilac. The stairs are laid in yellow terrazzo. A double-hung, timber sash window is located at each landing and a timber-framed mirror, built into the skirting board, is located at each floor for the nurses to check and adjust their uniforms before leaving the building for work each day.

A lecture room is located in the basement level. It is currently used to store medical records (compactus) and could not be viewed at the time of the site inspection. Timber floorboards and a stepped cornice could be viewed from outside the doors. The 1937 plans show a fireplace located on the western wall of the lecture room, but this feature could not be seen from outside the doors to the room.

3.4 Elouera House—1941 Extension

Extensions were designed for Elouera House in 1941, only three years after the foundation stone was laid for the first building. The 1941 extension is located at the western end of the east–west wing and is virtually indistinguishable in materials and finishes from the original building when viewed from the outside. No join is visible in the brickwork along the southern facade. The extension is, however, much bulkier and less detailed and appears out of scale with the more finely detailed 1937 building.

The 1941 extension retained six original bedrooms on the first floor at the western end of the wing and added a further 10 bedrooms on this floor and 13 bedrooms, a sick bay, box room and bathrooms on a new second floor (Figures 3.6–3.7), all arranged along a central corridor on each floor. Some alterations were made to the original 1937 building, including reconfiguration of the westernmost staircase and its windows (Figure 3.6).

Interior and exterior finishes and fittings appear to have been chosen to match those of the original 1937 building. Some differences can be discerned, but most finishes appear to match exactly the earlier materials used.

3.4.1 Exterior

The northwest elevation of the 1941 extension has been altered since construction. Whereas the main entrance to the extension was originally on the first (ground) floor, this has since been altered with a door inserted into the second floor and a steel staircase added. The first (ground) floor entrance has been obscured by this new entrance and the original curved reinforced-concrete awning removed. The original layout is shown in Figure 3.7 and the current layout in Figure 3.11.

The roof is hipped and laid in Marseilles tiles. The extension carries on the protruding brick lintel detailing of the original building and the same bricks have been used. The plans from 1941 indicate that the chimney along the western wall of the nurses' recreation spaces was to be extended above the roofline (Figure 3.7). Historical photographs (and visual inspection) indicate that this was never constructed.

3.4.2 Interior Spaces

The interiors of the 1941 extension are not as intact as the original 1937 portion of the building, most likely due to the change in use from accommodation to consultation rooms. Not all rooms could be viewed due to consultations taking place on the day of the inspection.

Bedrooms

The bedrooms in the 1941 extension are currently used as consultation rooms. A bedroom at the eastern end of the first floor has been converted for reception, with a reception desk cut through the wall.

The doors are original and were designed to match in style those in the original building, although the 1941 doors appear to be wider than those in the 1937 building. Each bedroom has a doublehung, timber sash window and timber joinery, also designed to match the original building. The floors have been carpeted.

Other Features

The staircase at the western end of the original building was extended to provide access to the new second floor of the 1941 extension. As noted previously, original windows were moved to accommodate the reconfigured floor levels. The balustrade of the staircase to the second floor is similar to those of the original 1937 building, but with a timber handrail (Figure 3.29).

A storage room/kitchenette is located at the top of the staircase. From this room, the change in roof pitch of the formerly flat roof is visible, with the new roof now rising above the window sill. The toilets and bathrooms on the second floor retain many original finishes, including cubicles, tiles and joinery.

3.5 Lawson House

Lawson House is a seven-storey, concrete-framed building clad in red bricks (Figure 3.8). The floors are reinforced concrete slabs. Each floor features an angled, cantilevered balcony that wraps around from the northern facade to part of the eastern facade. The balconies are painted white and feature steel balustrades. The primary facades of the building face north and east, with the balconies providing some visual interest along these facades. The original windows are double-hung, timber sash, painted white.

The ground-floor entrance has been renovated to accommodate the Blood Donor Centre. The top floor balcony is partially enclosed with glazing. The building plans drawn in 1949 and a photograph of the hospital site in c1956 indicate that all of the balconies were partially enclosed to begin with and this was subsequently removed for all but one.

The primary entrance to Lawson House was located at the rear of the building, facing Hospital Road. The original pre-cast concrete entrance awning remains intact. Like Elouera House, this entrance primarily served the nurses going between Lawson House and the hospital. A secondary entrance was provided on the northern facade, below the balconies.

Each floor was designed with the same layout, with bedrooms arranged along central corridors and a communal sitting room provided behind the balcony on each floor. A lecture hall and demonstration rooms were originally located on the ground floor.

3.6 Historical Archaeological Potential

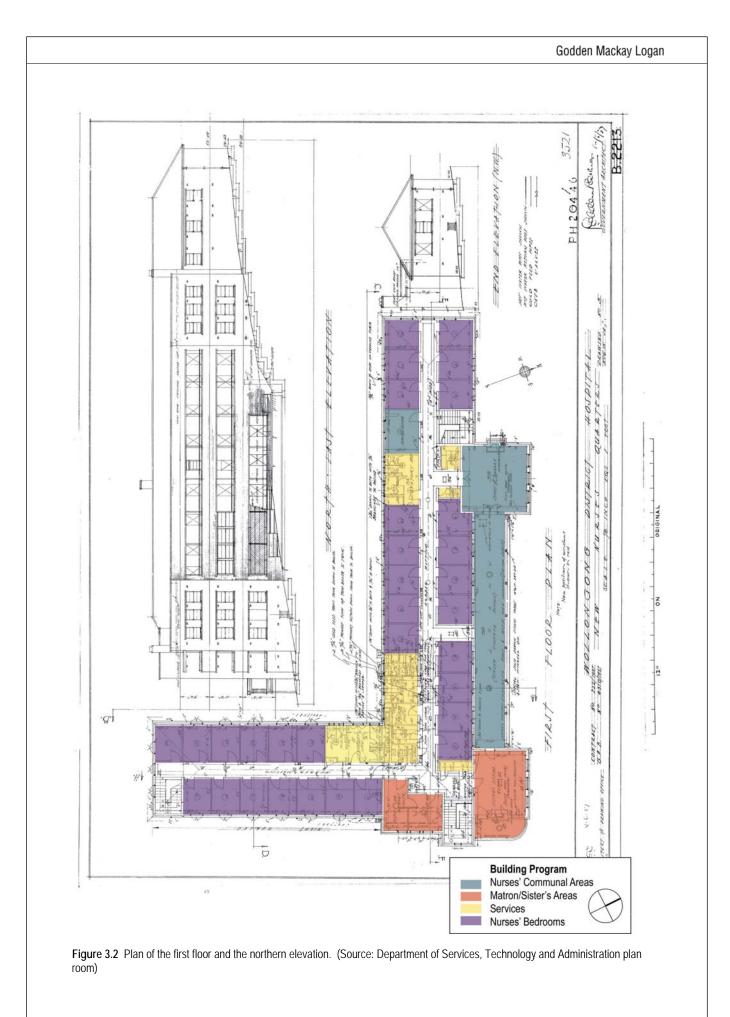
Given its history of development during the twentieth century, the potential for historical archaeological remains of Garden Hill Estate and/or early-nineteenth-century hospital buildings to have survived at the Wollongong Hospital site is low. A review of historical plans overlaid on the current site survey indicates that the original site of Garden Hill House and early hospital buildings, including the isolation ward and first nurses' home, were positioned where Blocks A, B & C now stand. The construction of these buildings took place from the 1970s through to 2000 and would have involved widespread excavation at depth. This would have effectively removed any structural remains and/or archaeological deposits associated with the earlier buildings.

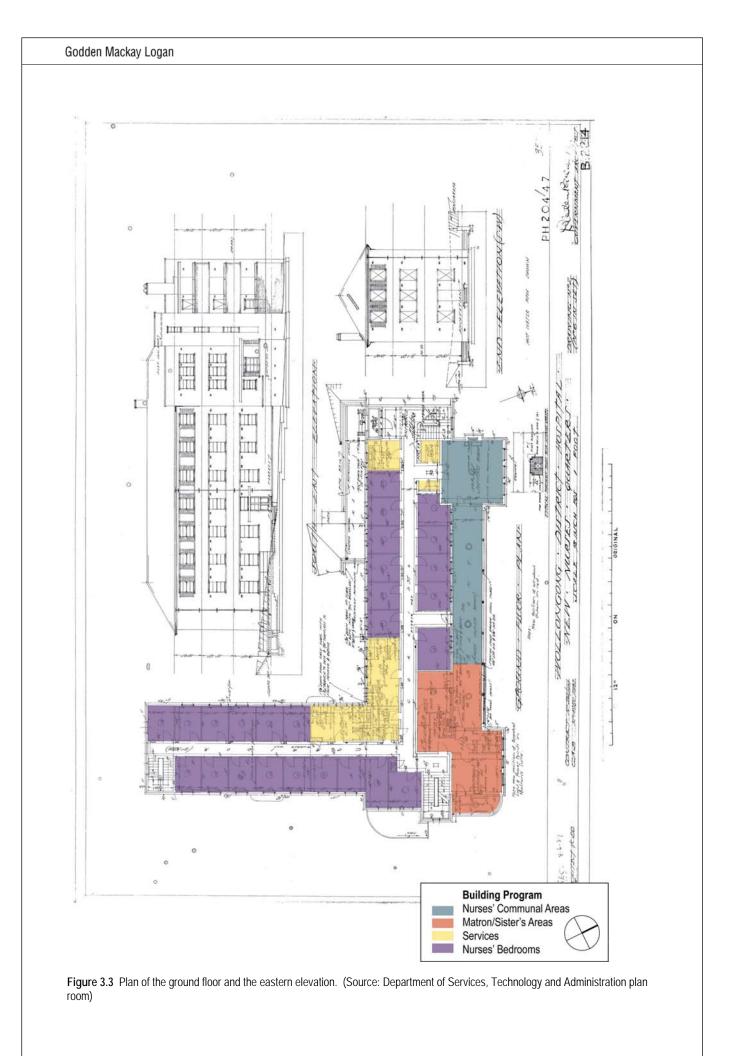
Elouera House itself was built c1938. No former buildings are shown in this area on historical plans. Following construction of Elouera House this portion of the hospital site appears to have remained relatively unchanged throughout the twentieth century, with the exception of the removal of the original tennis courts and a pathway during construction of the adjacent Lawson House c1954.

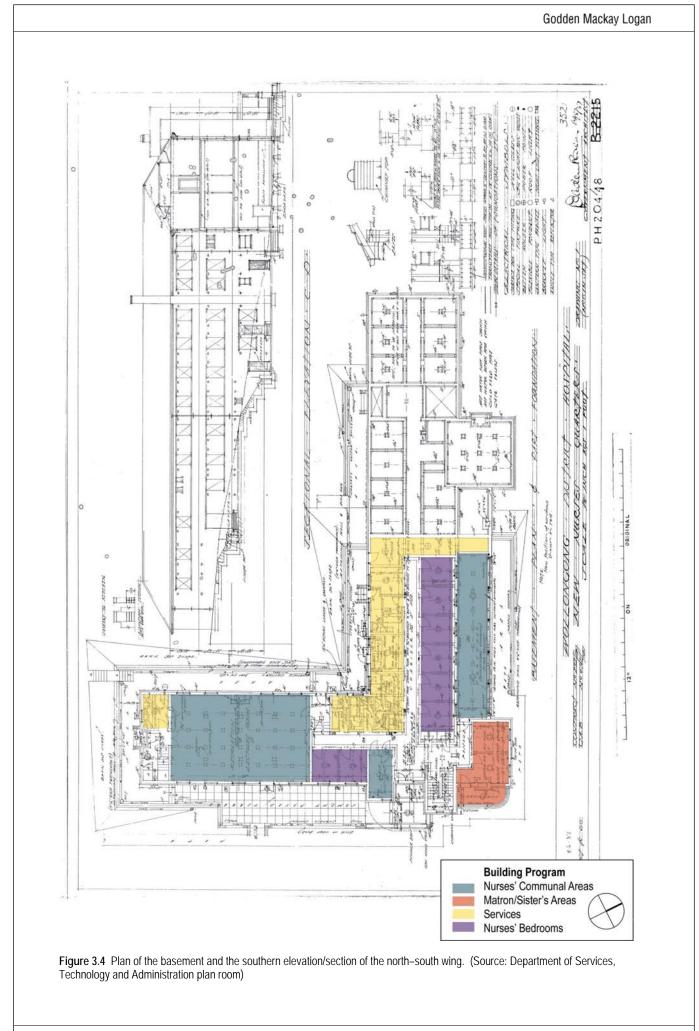
The only areas of the site that have remained undeveloped include the area to the rear of Elouera House and the southeast corner of the site. Both of these areas do not appear to have been occupied during the nineteenth century. The only features that are shown on mid-twentieth century historical plans include a terraced garden, retaining walls and pedestrian paths. Such features are ephemeral and shallow and, as such, are unlikely to have survived later landscaping in both areas.

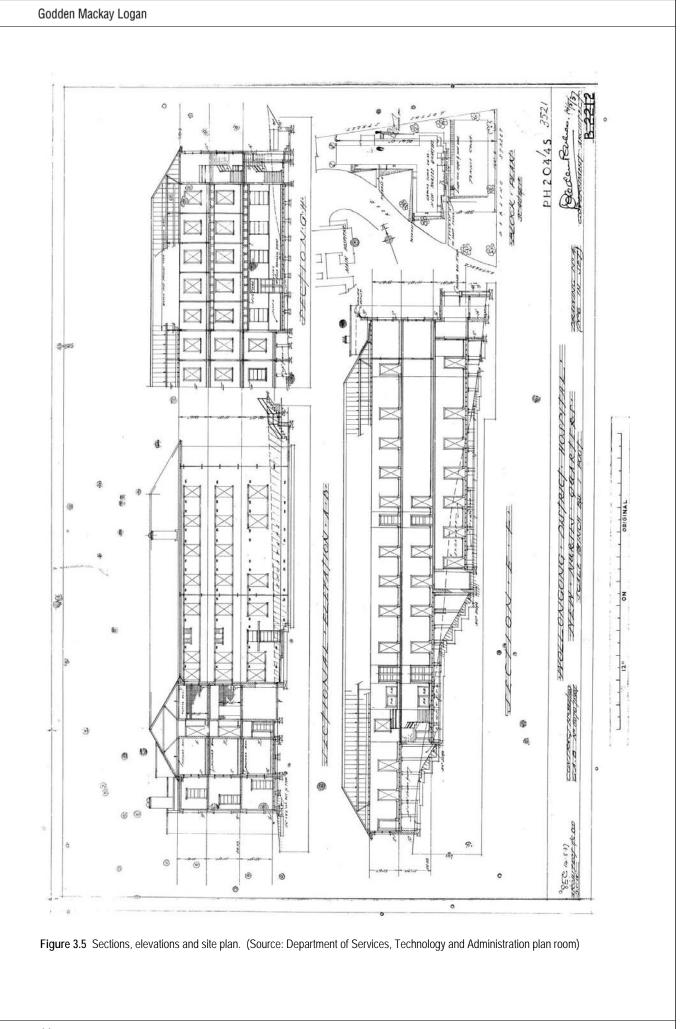


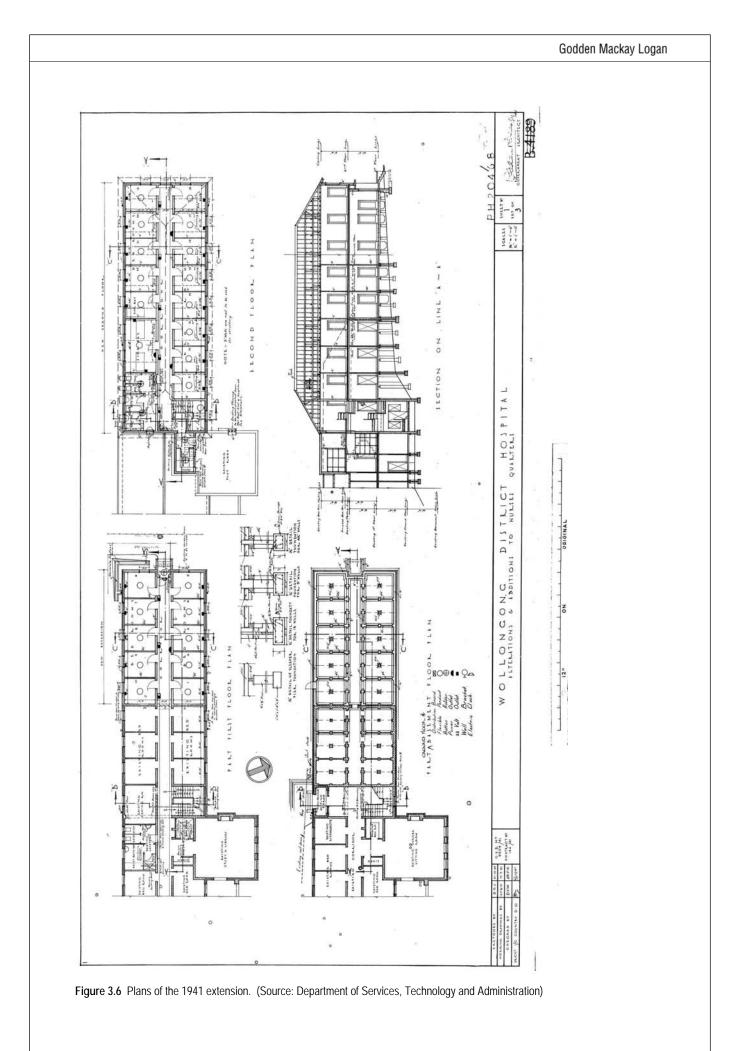
Figure 3.1 Site aerial, showing the different parts of the Nurses' Homes. (Source: Google Maps 2011 with GML overlay)













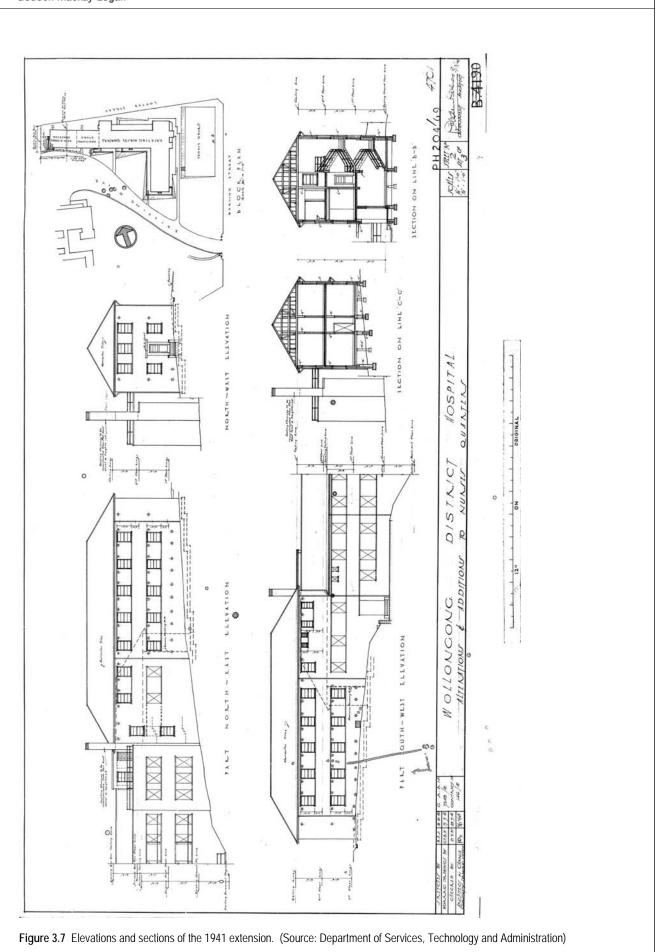




Figure 3.8 The two former Nurses' Homes. Lawson House is the seven-storey building on the left and Elouera House is the threestorey building on the right. (Source: GML 2011)



Figure 3.9 The front (eastern) facade of Elouera House. The main entrance is beyond the curved concrete awning at the centre of the image. (Source: GML 2010)



Figure 3.10 The Loftus Street (northern) facade of the original portion of Elouera House. (Source: GML 2011)



Figure 3.11 The 1941 extension to Elouera House, viewed from the southwest at the entrance to Block A Clinical Services Building. One of the old fig trees can be seen on the right of the image. (Source: GML 2010)



Figure 3.12 The rear facades of Elouera House. The chimney from the former boiler room can be seen on the left. (Source: GML 2011)



Figure 3.13 The main entrance with curved concrete awning to Elouera House. (Source: GML 2011)



Figure 3.14 The front doors, constructed of painted timber. (Source: GML 2011)



Figure 3.15 The entrance along the southern facade of the east–west wing. Note also the correct spelling of 'Elouera' on the sign above the door. (Source: GML 2011)



Figure 3.16 An example of the staircases with original Art Deco style balustrades. (Source: GML 2011)



Figure 3.17 The first-floor balcony. The original drawings indicate that the balconies were to be laid in green silicate paving. The current finish is painted concrete. (Source: GML 2011)



Figure 3.18 Purpose-built stand for a fire hydrant, constructed to match the skirtings and door frames. (Source: GML 2011)



Figure 3.19 Original cabinets for the fire hydrant and fire hose. (Source: GML 2011)

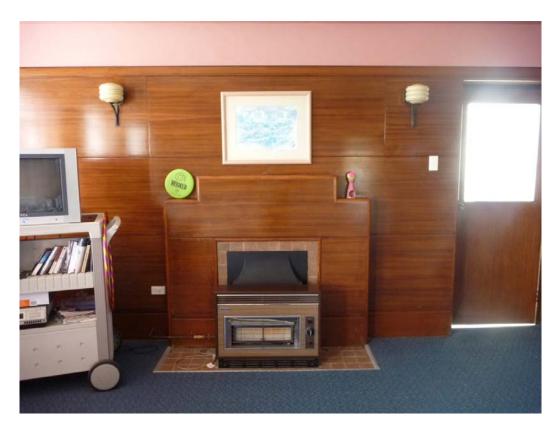


Figure 3.20 The sister's sitting room, showing intact original features including the fireplace and surround, tiled hearth, light fittings and timber panelling. (Source: GML 2011)



Figure 3.21 An original light fitting in the former sister's sitting room on the first floor. (Source: GML 2011)



Figure 3.22 The narrow timber floorboards in the former nurses' sitting room on the ground floor. (Source: GML 2011)



Figure 3.23 The nurses' sitting room featuring original timber panelling and fireplace surround. The billiards table and score board are later additions. (Source: GML 2011)



Figure 3.24 Water damage and signs of a leaking roof in the former study and library (now TV room). (Source: GML 2011)



Figure 3.25 Double timber doors to the former study and library (now TV room). (Source: GML 2011)



Figure 3.26 Original door hardware, including brass doorknob, keyhole and name plate. Many doors also feature plaques. This one says 'Furnished by the Italian community of the district'. (Source: GML 2011)

Figure 3.27 Evidence of the shutters that were once fitted to the windows along the east and west facades of the building. (Source: GML 2011)



Figure 3.28 Original toilet fit-out, with glazed ceramic tiles and terrazzo flooring. (Source: GML 2011)



Figure 3.29 The later balustrade in the staircase to the 1941 extension. It is less elaborate than the earlier balustrade and has a timber top rail. (Source: GML 2011)

4.0 Comparative Assessment

4.1 Introduction

Providing live-in accommodation for nurses was an essential part of hospitals in New South Wales for much of the twentieth century. As such, most hospital complexes in the state, including mental hospitals, have (or had) some form of nurses' accommodation, be it a large, institutional building like Lawson House, Wollongong, or a more residential-scaled building like Nurses' Quarters Nos 1, 2 and 3 at Lidcombe Hospital. At large training hospitals in New South Wales a series of nurses' homes were built as hospitals increased in size, nurse/patient ratios were reduced and working conditions improved.¹

Elouera House and Lawson House are also examples of the work of Cobden Parkes, NSW Government Architect from 1935 until 1958, and his office. Hospitals grew rapidly during the period of his tenure, so Parkes was responsible for the design of many hospital buildings in New South Wales.

Section 4.2, below, provides a discussion of some examples of nurses' homes in New South Wales, while Section 4.3 compares the Elouera House with other examples of Parkes' hospital designs in New South Wales.

4.2 Nurses' Homes in New South Wales

4.2.1 Newcastle Mater Misericordiae Hospital Nurses' Quarters

The nurses' quarters at Newcastle Mater Misericordiae Hospital were constructed c1938.² The building bears some similarities in planning and architectural style to Elouera House. It is an L-shaped building constructed of brick with a protruding, curved stairwell and entrance and a hipped roof (Figure 4.1). The windows are linked with a continuous lintel and sill in a darker brick. The building, which is still extant, displays Inter-War Functionalist and Art Deco influences, without being an exemplar of either style. Historical photographs indicate that, like Elouera House, the interiors of the building were designed with a uniform aesthetic (Figure 4.3). The Newcastle Mater Misericordiae Hospital Nurses' Quarters is still extant, though no longer used for this purpose.



Figure 4.1 Newcastle Mater Misericordiae Hospital, Waratah, nurses' quarters in 1938. (Source: State Library of NSW, hood_09648)



Figure 4.2 Newcastle Mater Misericordiae Hospital, Waratah, nurses' quarters in 1938. (Source: State Library of NSW, hood_09651)



Figure 4.3 The foyer of Newcastle Mater Misericordiae Hospital, Waratah, nurses' quarters in 1938. (Source: State Library of NSW, hood_09654)



Figure 4.4 Matron Dickson Nurses' Home, Prince Henry Hospital site, Little Bay. (Source: GML 2001)



Figure 4.5 The courtyard of Matron Dickson Nurses' Home, Prince Henry Hospital site, Little Bay. (Source: GML 2001)



Figure 4.6 Matron McNevin Nurses' Home, Prince Henry Hospital, Little Bay, constructed 1955, now demolished. (Source: Randwick City Library Service)

4.2.2 Matron Dickson Nurses' Home, Prince Henry Hospital

Designed in 1927 and constructed from 1934–35³, Matron Dickson Nurses' Home is a similar size, scale and building typology to Elouera House.

Prince Henry Hospital was one of the major training hospitals in New South Wales and the size of Matron Dickson Nurses' Home is indicative of this role. A second, larger nurses' home was added in 1955—the Matron McNevin Nurses' Home (Figure 4.6), now demolished—a progression similar to Wollongong Hospital with the addition of Lawson House.

The Matron Dickson Nurses' Home was designed by the NSW Government Architect's Branch under Richard McDonald Seymour Wells. The building is quite different in style from the Wollongong Hospital Nurses' Home, with some Georgian Revival detailing such as decorative brickwork along the front facade (Figure 4.4). It is a strongly horizontal building, with wide, hipped roofs and deep eaves (Figure 4.5). As such, it demonstrates an earlier phase of design in the Government Architect's Branch, when the simplification of design and reduction in detailing seen in the modern movement in architecture was beginning to filter in, but older, more decorative styles still dominated public architecture in New South Wales.

Like Elouera House, Matron Dickson Nurses' Home demonstrated the organisational hierarchy in nursing. Nurses had single bedrooms arranged along central corridors, while matrons and sisters had larger rooms and self-contained flats. The hierarchy was also demarcated in communal areas, with sitting rooms and recreation rooms for the nurses separated from those designed for the sisters and matrons.⁴

The Matron Dickson Nurses' Home is listed on the SHR as part of the Prince Henry Site listing. The interiors of the building have been heavily altered to adapt the building to residential apartments.⁵

4.2.3 Nurses' Quarters Nos 1, 2 and 3, Lidcombe Hospital Site

A group of nurses' homes is located at the former Lidcombe Hospital site in western Sydney. The group comprises three buildings constructed between 1910 and 1937. The first, a Federation Free Style building designed by Edward Drew, under Government Architect Walter Liberty Vernon, was constructed in 1910 (Figure 4.7). The building bears similar stylistic features to the first nurses' home constructed at Wollongong (now demolished) (see Figure 2.10 in Section 2.0 of this report).

In a similar pattern to Wollongong Hospital, Lidcombe Hospital expanded greatly during the first half of the twentieth century. Additional nurses' accommodation was required by the 1930s and two new buildings were constructed-Nurses' Quarters No. 2 in 1935 (Figure 4.8), to a design by Government Architect Edwin Smith, and Nurses' Quarters No. 3 to a design by Government Architect Cobden Parkes, Smith's successor (Figure 4.9).6 These two 1930s nurses' quarters are modest buildings of unremarkable design and materials. They are less substantial examples than Elouera House and display limited adoption of new architectural styles. The two examples are not obviously institutional accommodation buildings.

The three nurses' quarters were connected by covered walkways. The buildings have a residential scale common for nurses' homes constructed before the 1930s. From the 1930s, nurses' homes tended to be larger, distinctly institutional buildings that reflected the importance of nurse training at hospitals at this time. The buildings differ in scale, design and layout from the Wollongong Hospital Nurses' Home.

A fourth nurses' home was added to Lidcombe Hospital in 1967, following the establishment of a nurse training school at Lidcombe.

The first three nurses' homes at the Lidcombe Hospital site demonstrate some aspects of the development of nurse training also in evidence at Wollongong. All three are listed on the SHR as part of the Lidcombe Hospital Precinct.

4.2.4 Royal Prince Alfred Hospital Nurses' Home and the Queen Mary Building

The 1936 Nurses' Home at Royal Prince Alfred Hospital (RPAH) was a six-storey brick building with curved balconies, designed in the Inter-War Functionalist style (Figure 4.10). The RPAH was the largest nurse training hospital in Sydney and continued to expand throughout the twentieth century.

The 1936 Nurses' Home was superseded in 1957 by the



Figure 4.7 Nurses' Quarters No. 1, Lidcombe Hospital site, constructed 1910. (Source: GML 2006)



Figure 4.8 Nurses' Quarters No. 2, Lidcombe Hospital site, constructed 1935. (Source: GML 2006)



Figure 4.9 Nurses' Quarters No. 3, Lidcombe Hospital site, constructed 1937. (Source: GML 2006)



Figure 4.10 Nurses' Home, Royal Prince Alfred Hospital in 1941. (Source: State Library of NSW, hood_23448)



Figure 4.11 St Vincent's Hospital Nurses' Home, constructed 1938, since demolished. (Source: State Library of NSW, hood_09400)



Figure 4.12 St Vincent's Hospital Nurses' Home, constructed 1938, since demolished. (Source: State Library of NSW, hood_09399)

Queen Mary Building, a massive 12-storey building that accommodated more than 700 nurses.⁷ The building was designed by Stephenson and Turner and employs many of their distinctive design motifs, including wide, horizontal balconies that create a regular rhythm up and across the building's facade. The Queen Mary Building is a significant example of nurses' homes in New South Wales and represents the peak of nurses' accommodation in the second half of the twentieth century. It is a much more substantial building than either Elouera House or Lawson House and more refined in design and materials. The Queen Mary Building is a fully resolved building of a distinct architectural style. The building is listed on the Department of Health s170 Heritage and Conservation Register.

4.2.5 St Vincent's Hospital Nurses' Home

The Nurses' Home at St Vincent's Hospital, Darlinghurst, was a similar in size and design to the 1936 Nurses' Home at RPAH. The building was constructed in 1938 and was Inter-War Functionalist in style. The building featured a number of elements in common with other nurses' homes built at the time and demonstrated the influence of Stephenson and Turner on hospital design in New South Wales. The building was clad in brick and was composed of long, horizontal balconies, constructed of reinforced concrete, contrasted with strong vertical elements (Figures 4.11 and 4.12). This nurses' home has since been demolished.

4.2.6 Summary

As can be seen from the discussion above, three distinct types of nurses' accommodation were built at hospitals in New South Wales during the twentieth century:

- Small, residential-scale buildings dating from the first quarter of the twentieth century. These buildings are generally designed in the Federation Free or Arts and Crafts styles used by the Government Architect's Branch during this period (Nurses' Quarters No. 1, Lidcombe Hospital site).
- Transitional buildings that demonstrate experimentation with new architectural styles and technology and the adoption of the rational planning that became a feature of nurses' homes and other public buildings in New South Wales. These buildings are generally three or so storeys and were constructed during the 1930s (Matron Dickson Nurses' Home,

Prince Henry hospital site, Elouera House, Newcastle Mater Misericordiae Hospital Nurses Quarters, Nurses Quarters Nos 2 and 3, Lidcombe Hospital site).

 Large institutional buildings constructed from the 1930s onwards that demonstrate a resolved design aesthetic and adoption of modern architectural styles. These buildings are typically of more than five storeys. (Queen Mary Building RPAH, Lawson House, Matron McNevin Nurses' Home, Little Bay (demolished), St Vincent's Hospital Nurses' Home (demolished)).

Elouera House fits within the middle, transitional type. This transition is embodied in its modest appearance, scale and institutional layout. Comparable examples existed at the Prince Henry Hospital site, Little Bay and Newcastle Mater Misericordiae Hospital. The Matron Dickson Nurses' Home, Prince Henry Hospital site, has since been converted into apartments.

4.3 Hospital Designs by Cobden Parkes, Government Architect

4.3.1 Background

The youngest son of Sir Henry Parkes, Cobden Parkes had been employed in the Government Architect's Branch on the reintroduction of the cadet system in 1909. He enlisted in 1914 and, following convalescence after the war, re-entered the office in 1920. He succeeded Edwin Smith on 4 October 1935 as Government Architect, the first to be fully trained within the office.⁸

In 1939 Parkes accompanied the Minister for Health on a visit to inspect hospitals in England and North America. Two albums of photographs from that trip are held at State Records and indicate some of the buildings visited. Some of the hospitals he visited included Redhill Hospital, Edgeware and Central Middlesex Hospital.⁹ Those buildings would have been influential in Parkes' hospital designs.

Parkes was also an admirer of Arthur Stephenson, of whom, he wrote in 1965 'brought the conception of the modern hospital to this country'.¹⁰ Stephenson, a Melbourne-based architect, specialised from 1924 in institutional and hospital work. Many of the major hospitals built in Australia from the 1920s to the 1960s reflected Stephenson's influence.¹¹ As Government Architect, Parkes designed numerous hospital buildings and the influence of Stephenson's hospital design was clearly evident. A rational plan, attention to function, and clarity of expression were key to Stephenson's success as a hospital designer. Notable hospital buildings by Stephenson and Turner include King George V Memorial Hospital, Camperdown, designed in 1938 and built 1940–41 (winner of the Royal Australian Institute of Architecture's Sulman Award in 1942) (Figure 4.13); the Royal Melbourne Hospital, Parkville, 1935–1941; and Concord Repatriation General Hospital, 1940–1942 (winner of the Sulman Award in 1946).

In addition to his role as Government Architect, Parkes was Director of the Crown Street Women's Hospital, trustee of the Vaucluse Neilson Park Trust and, for over 20 years, the honorary architect to the New South Wales Red Cross Society.¹² Parkes retired on 1 August 1958 and was appointed (full-time) officer-in-charge of building, planning and development at the University of New South Wales, and a member of the planning and co-ordination committees of the Prince of Wales and Prince Henry hospitals.¹³

Elouera House was designed by Parkes only two years after he become Government Architect and prior to his visit to inspect hospitals in England and America. His admiration of the work of Stephenson appears to have influenced the design.



Figure 4.13 King George Memorial Hospital Camperdown, designed by Stephenson and Turner in 1938. (Source: http://www.sydneyarchitecture.com/INW/IN W07.htm)



Figure 4.14 St Margaret's Public Hospital for Women (former), Bourke Street Surry Hills. (Source: NSW Heritage Branch 2001)



Figure 4.15 St Margaret's Public Hospital for Women in 1951, viewed from Bourke Street. (Source: National Archives of Australia)

4.3.2 St Margaret's Public Hospital for Women (former)

Originally designed in 1937, but not constructed until 1947– 51, St Margaret's Public Hospital for Women in Surry Hills is an eight-storey building designed in the Inter-War Functionalist style.¹⁴ The building is steel-framed with brick infill walls, curved features and deeply recessed balconies constructed of reinforced concrete and painted white (Figure 4.14). The building is composed of a mix of rectilinear and curved forms, with a strong, square tower rising up the building on its Bourke Street side, contrasting with long, curved balconies that form a strongly horizontal pattern along the building's northern facade (Figure 4.15). A number of shorter square forms are located at the base of the tower to provide a transition from the building to the street.

The hospital building provides evidence of the influence of Stephenson and Turner on the work of Cobden Parkes long balconies contrasted with strong vertical elements were key motifs of Stephenson and Turner's work. The St Margaret's building and Parkes' hospital designs in general are less robust in design (and less uncompromising) than the King George V Memorial Hospital in Camperdown (Figure 4.13) and the Queen Mary Building. Parkes's designs adopted a less monumental aesthetic overall than Stephenson and Turner's work.

The St Margaret's building is a larger and more monumental building than Elouera House and demonstrates the resolution of a clear design aesthetic in the Government Architect's Branch under Parkes. Lawson House at Wollongong Hospital would be a comparable, though less refined, example of Parkes' work.

The St Margaret's building is a landmark building along Bourke Street in Surry Hills and a fine example of hospital buildings designed by Parkes. The building was retained and adapted as part of the redevelopment of the St Margaret's site.

4.3.3 Jeffery House, Parramatta District Hospital (former)

Jeffery House in Parramatta is similar in materials and features to the St Margaret's building, but built at a smaller scale. Jeffery House is a five-storey building constructed of brick with curved, reinforced concrete balconies along the full length of its northern facade (Figure 4.17). The

balconies are in-filled with glazing along their length—an original feature of the building. The rear of the building is composed of a series of rectilinear forms of different heights, with slot windows emphasising the strong vertical elements (Figure 4.16). The building was designed in 1937 and completed in 1943¹⁵ and, like the St Margaret's building, displays a resolved design aesthetic and adoption of modern architectural styles.

An additional storey was added to the building in the 1970s, which substantially reduced the visual effect of the different heights and forms of the building. Jeffery House is a good, though compromised, example of hospital buildings designed by Parkes and forms one of a collection of public buildings that demonstrates the adoption of modern architectural styles by Parkes and the Government Architect's Branch. The building was refurbished in 2006 for use by Parramatta Community Health Services.

4.3.4 Summary

Government Architect Cobden Parkes adopted a range of styles in his designs for hospital buildings. Many of the remaining examples were designed in the Inter-War Functionalist style, while others such as Nurses' Quarters No. 3 at the Lidcombe Hospital site, demonstrate a transitional style with Federation Free, Art Deco and Functionalist elements. Where the former St Margaret's Public Hospital for Women building and Jeffery House demonstrate a unified, resolved aesthetic, Elouera House is an example of a designer in transition, with Parkes experimenting with a number of architectural styles and materials.

4.4 Conclusions

Nurses' Homes were an integral element of hospitals in New South Wales for much of the twentieth century and a high number of examples remain on hospital sites across the state. These buildings range in style, size and period and vary in design quality and condition. Within the three types of nurses' homes identified in Section 4.2.5, Elouera House fits in as a good example of the middle, transitional type, but is not distinguished aesthetically.

Within the range of nurses' homes as a whole, Elouera House is a good, but not exemplary example of this type of public building. Examples like the Queen Mary Building at RPAH would be the aesthetic exemplar of this type of



Figure 4.16 Jeffery House, formerly of Parramatta District Hospital, in 1947. (Source: State Library of NSW, hood_10548)



Figure 4.17 Jeffery House, formerly of Parramatta District Hospital, in 1947. (Source: State Library of NSW, hood_10547)

building, demonstrating a high level of design resolution. Modest examples like Nurses' Quarters Nos 2 and 3, Lidcombe Hospital site, would be at the lower end of the scale in terms of design resolution.

In terms of the work of Cobden Parkes and the Government Architect's Branch during his tenure, Elouera House again represents a transitional phase. The building is very much tentative in its design and execution—some experimentation with new, modern forms and technology is evident, but this is combined with more traditional features and scale.

What is interesting about Elouera House is its juxtaposition with the later Lawson House. The two buildings side by side demonstrate the increasing importance of nurse training at hospitals and as a function of hospitals during the twentieth century. This historical layering is not present at many hospital sites in New South Wales, as the large nurses' homes constructed in the 1950s and 60s tended to replace the earlier buildings. This occurred particularly at constrained urban sites like RPAH and St Vincent's Hospital, Darlinghurst.

4.5 Endnotes

- ¹ Tanner Architects, Specific Element Conservation Policy, Lot 27 Prince Henry at Little Bay, prepared for Stockland, May 2006.
- ² Tanner Architects, Specific Element Conservation Policy, Lot 27 Prince Henry at Little Bay, prepared for Stockland, May 2006.
- ³ Godden Mackay Logan, Prince Henry Hospital Site Conservation Management Plan, prepared for Landcom, 2003.
- ⁴ Godden Mackay Logan, Prince Henry Hospital Site Conservation Management Plan, prepared for Landcom, 2003.
- ⁵ Tanner Architects, 'The Dickson at Prince Henry', Tanner Architects Pty Ltd, viewed 17 February 2011 <http://www.tannerarchitects.com.au/project.php?id=17&page=project>
- ⁶ Godden Mackay Logan, Lidcombe Hospital Site—Nurses' Quarters No. 1 Specific Element Conservation Policy, prepared for Australand, October 2006.
- ⁷ State Heritage Inventory, 'Queen Mary Building', NSW Heritage Branch, viewed 19 January 2011 <http://www.heritage.nsw.gov.au/07_subnav_01_2.cfm?itemid=3540545>
- ⁸ Peter Reynolds, 'Parkes, Cobden (1892–1978)', *Australian Dictionary of Biography*, Volume 15, Melbourne University Press, 2000, pp 569–570.
- ⁹ Government Architect, Overseas Tour, two volumes of photographs Ref 7/4133 State Records.
- ¹⁰ 'Gold Medal Award', *Architecture in Australia*, Vol 54, June 1965, p85.
- ¹¹ Fisher JD 1990, 'Stephenson, Sir Arthur George (1890–1967)', *Australian Dictionary of Biography*, Volume 12, Melbourne University Press, pp 71–72.
- ¹² Architecture in Australia, October-December 1953, p 99.
- ¹³ Reynolds, Peter 2000, 'Parkes, Cobden (1892–1978)', *Australian Dictionary of Biography*, Volume 15, Melbourne University Press, pp 569–570.
- ¹⁴ State Heritage Inventory, 'St Margaret's Public Hospital for Women (former)', NSW Heritage Branch, viewed 24 February 2011 http://www.heritage.nsw.gov.au/07_subnav_01_2.cfm?itemid=2420378>
- ¹⁵ State Heritage Inventory, 'Jeffrey House', NSW Heritage Branch, viewed 24 February 2011 http://www.heritage.nsw.gov.au/07_subnav_01_2.cfm?itemid=3540616>

5.0 Assessment of Significance

5.1 Introduction

5.1.1 NSW Heritage Assessment Guidelines

This section outlines the approach to assessment of heritage significance set out in the *NSW Heritage Manual* guidelines, prepared by the NSW Heritage Office and Department of Urban Affairs and Planning (as amended July 2002). These guidelines provide the framework for this report's assessment of the significant heritage values of the Nurses' Home group and its contributory components, which is summarised in the Statement of Significance (in Section 5.3). In essence, the Heritage Guidelines incorporate the five types of 'cultural heritage values' identified in the Burra Charter into a specifically structured framework that is accepted as the required format by heritage authorities in New South Wales.

Under these guidelines, places/sites/items are assessed against the following criteria:

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);

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

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);

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;

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);

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);

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

In applying the assessment criteria, both the nature and degree of significance of the place need to be identified, with items varying in the extent to which they embody or reflect key values and the relative importance of their evidence or associations.

The assessment also needs to relate the item's values to its relevant geographical and social context, usually identified as either Local or State contexts. Items may have both Local and State significance for similar or different values/criteria.

Statutory protection of heritage places (ie by local and/or state governments) is usually related to the identified level of significance. Items of State significance may be considered by the Heritage Council of NSW for inclusion on the SHR.

5.1.2 Historical Thematic Assessment

The *NSW Heritage Manual* identifies a specific set of historical themes relevant to New South Wales within which the heritage values of the place need to be assessed. Assessing the heritage values of the Wollongong Hospital Nurses' Home group within the context of the relevant historic themes provides a useful insight into its contemporary meanings and values to different groups.

- **Health:** Nurse training and accommodation was an integral part of the hospital system in New South Wales for much of the twentieth century. For over 40 years, from 1938 to 1982, the Nurses' Home group provided accommodation and training facilities for nurses studying and working at Wollongong Hospital.
- Education: Until 1979, learning to become a nurse took place at nurses' training schools within hospitals rather than at technical colleges or universities, with on-the-job training forming the bulk of nurses' education. While training, nurses were required to 'live-in', with specially-constructed accommodation (nurses' homes) being constructed at each of the state's major teaching hospitals. By 1921, Wollongong Hospital had reached a daily average of 31.5 resident patients, making it large enough to support its own nurses' training school. Some of the nurses' training also took place within the Nurses' Home, most notably in the large lecture room. Special accommodation for supervising matrons and sisters who were responsible for the care and education of the trainee nurses was also provided.
- Labour: Nurses' homes were traditionally an essential component of not only nurses' training but also the management of their labour. Within a profession dominated by women from its earliest years—and for much of this period seen exclusively as 'women's work'— nurse training and practice emphasised order/organisation, efficient service and repetitive manual skills. Shift work requirements and low wages contributed to the challenges of their training, but to many their work was regarded as a 'calling'. The requirement for trainee nurses to live in hospital accommodation was therefore intrinsically linked to the nature of their work, the fact that they were almost always young, single women (often far from home), and the particular structure of nursing training during the early to mid-twentieth century period.
- Accommodation: The Nurses' Home group is an example of the type of accommodation particular to nurse training in the large teaching hospitals of New South Wales in the early to mid-twentieth century. 'Living in' was historically regarded as an essential component of a nurse's training, as it was thought that this would ensure the instillation of the morals, manners and behaviours that Florence Nightingale regarded as basic qualities of a good nurse. In its layout, character and facilities, the Nurses' Home reflected both 'institution' and 'homeliness', discipline and independence, an ascetic, ordered life well-laced with boarding-school 'mateship'.
- **Domestic life:** The Nurses' Home demonstrates the type of domestic life expected of nurses for much of the twentieth century. It was treated as an integral part of the interdisciplinary structure of the hospital and its occupants were required to adhere to specific rules and regulations. A nurses' life was expected to conform to specific rules with a set hierarchy

between nurses, sisters and matrons, a structure which is reflected in the layout of the building, with spaces for nurses separated from those for the matrons and sisters. Recreation and dining were communal activities, with specific spaces provided for each. The inclusion of full length mirrors on each of the main stair landings is a particularly evocative reminder of the emphasis placed on 'correct attire', particularly for young trainees.

Creative endeavour: Both the major building components of the Nurses' Home group—the original 1937 Elouera House and the 1954 Lawson House—are interesting representative examples of the mid-twentieth-century work of the NSW Government Architect's office under the direction of Cobden Parkes. Both buildings are typical of the pragmatic, direct approach to architectural design and construction of public buildings adopted by the Government Architect's office during these years, but both are enlivened by the use of unmistakably 'modern' design elements which went beyond the simply functional. On Elouera House, the essentially domestic forms (face-brickwork walls and hipped tiled roof) are lined (along their public, northern face) with streamlined concrete verandahs with flat, parapet roofs, which give the whole building a modernity that was not usual for nursing homes of the period. On Lawson House, the use of cantilevered balconies on the exposed north elevation is again a significant enlivening and modernising feature on what is otherwise a very simple, functional building. Together, the buildings reflect the evolving adoption of 'modern' architectural styles for public buildings in New South Wales during the mid- to late twentieth century period.

5.2 Assessment against Standard Criteria

This section formally assesses the heritage significance of the Nurses' Home group in accordance with the standard criteria identified in the NSW Heritage Office guidelines. The evaluation includes consideration of the original and subsequent layering of fabric, uses, associations and meanings of the place/site/item, as well as its relationship to its immediate and wider settings.

5.2.1 Criterion A (Historical Significance)

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).

- The Nurses' Home group provides evidence of an important—even fundamental—element of the structure and operation of the major teaching hospitals for much of the twentieth century, where nurses were both trained and accommodated within the hospital grounds. Nurse training during these years was essentially a 'life style', with eduction, work, and personal/domestic life intimately linked with the hospital, which provided all required facilities for accommodation, meals and recreation, as well as engendering discipline and esprit de corps.
- The Nurses' Home group demonstrates a significant aspect of the history of nursing in New South Wales, where nurses were expected to 'live in' as part of their duty to care for the sick. This practice lasted for much of the twentieth century until 1979 when nurses' training was taken over by universities. 'Living in' was historically regarded as an essential component of a nurses' training, as it was thought that this would ensure the instillation of the morals, manners and behaviours that Florence Nightingale regarded as basic qualities of a good nurse.

- The design and internal layout of the Nurses' Home buildings—particularly the earlier and more intact Elouera House, with its physically legible hierarchy of rooms and functions— demonstrates social attitudes towards nursing and its social and educational roles as a major employer of women for much of the early-to-late twentieth century. Features such as small, cell-like single-bed cum study rooms, shared sitting/recreation rooms—including the large open verandahs—and full length mirrors on each stair landing (to check cap and stockings on the way out) are all part of the environment of many thousands of young, single women who lived and learned in this strict, structured but also (for many) excitingly independent environment.
- Wollongong Hospital was a significant nurses' training hospital in the interwar years, expanding to also become a major midwifery training hospital from 1951. The Nurses' Home group provides direct evidence of this growth, particularly in the notable juxtaposition of the much larger Lawson House (from 1954) against the earlier Elouera House, which despite its (relatively modest) addition in 1941 could no longer adequately service the post-war growth needs of Wollongong Hospital. The resultant size of the Nurses' Home complex also directly reflected the growing importance given to nursing skills and training as part of hospital care during the mid-to-late twentieth century.
- The Nurses' Home group—and its two main buildings in particular—demonstrates an important transitional phase in the design of public buildings in New South Wales by the Government Architect's Branch, when modern architectural styles like Functionalism and Modernism were beginning to be adopted over older, more traditional styles. The two main buildings are essentially pragmatic and even prosaic exercises in traditional materials and forms, but both have modern features incorporated, primarily on their visually exposed northern facades. While to some extent these elements were 'grafted on' to simple buildings, the resulting structures do reflect contemporary attempts to experiment with new modern forms and technology.

5.2.2 Criterion B (Historical Associations)

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 two main buildings within the Nurses' Home group are typical examples of the work of Cobden Parkes and the Government Architect's Office during the interwar and immediate postwar periods when the Office was particularly busy with government infrastructure throughout the state.
- Though a link between the site and a specific nurses' organisation has not been identified for the Wollongong Nurses' Home, nurses' homes in general have traditionally had some association with the work of the Australasian Trained Nurses Association (now the Australian Nursing Federation), which set registered exams for nurses and regulated nurses' training schools across Australia during the twentieth century.

5.2.3 Criterion C (Aesthetic Significance)

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

Elouera House

- The original 1937 Elouera House is a relatively modest but interesting representative example of the Inter-War Functionalist architectural style touched with Art Deco and 'Moderne' influences. The Art Deco influences are particularly evident in the interior finishes such as the timber panelling and fireplaces in the former sitting rooms, and the elaborate wrought-iron balustrades on each staircase, while the curved, flat-roofed verandahs show the influence of streamlined Moderne detailing. Overall, however, the building is more interesting as a 'grafted blend' of traditional domestic forms and architectural vocabulary with some modern decorative detailing rather than being a notable example of a particular style or period.
- While Elouera House was originally a quite notable local landmark on the corner of Darling and Loftus Streets—due to its elevation, isolation (from adjoining development) and the strongly detailed vertical and horizontal 'modernity' of the facades immediately adjoining this corner—its visual strength has been eroded over the years by changes to adjacent ground levels and the growth of screening planting which currently obscures the building's most important view-scape. (Compare Figures 2.14, 2.15 and 2.17 with Figures 3.8 and 3.9.) The compact strength of the original (1937) building's form, as seen from Loftus Street in particular, was also notably affected by the 1941 addition of the functionally necessary west wing, which, though set back from the alignment of the older structure, has somewhat watered down its architectural integrity.

Lawson House

- As with its older neighbour, the original 1954 Lawson House is an interesting representative example of its particular architectural style, in this case early postwar 'Functionalism', with generous touches of International (or European) Modernism, which is particularly expressed in the strong, white projecting balconies and parapet framing concentrated on the northeast corner fronting Darling and Loftus Streets. Although altered/refurbished in recent years (particularly ground-floor level), the building's major external facades (north and east) retain much of their original character and fabric. Internally, however, the building features little that is noteworthy.
- Since its construction in 1954, Lawson House has clearly been a notable local landmark, set back but visually prominent from the corner of Darling and Loftus Streets (Figures 2.17 and 3.8). As with Elouera House, this visual prominence derives from the building's elevated location, isolation (from adjoining development on the street-fronting elevations) and the strongly detailed horizontal 'modernity' of the facades adjoining this corner, particularly from the wrap-around balconies, as well as an overall height that towers over immediately adjacent development.

5.2.4 Criterion D (Social Significance)

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

 The Nurses' Home group of buildings may well have some level of significance for nurses, doctors and/or other students that lived or trained in the premises over the last 70 years. No particular expression of this social significance (via written records, ex-students' association or on site records) was found during the course of this study to inform a formal assessment of this aspect of the site's heritage values.

5.2.5 Criterion E (Research Potential)

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 Wollongong Hospital site, including the Nurses' Home group, is unlikely to be significant in terms of this criterion. While the site's basic layout can be dated to nineteenth-century Garden Hill estate subdivision, evidence of both the subdivision layout and subsequent development (up to the 1937 Nurses' Home) has been effectively removed and/or obscured by subsequent development. Any potential archaeological remains associated with the Hospital's early development, including hospital buildings and associated site features from the early-to-mid twentieth century, are unlikely to have survived subsequent development because of the extent of excavation required for the new developments of the past 30 years. The site therefore has very little potential to yield information to contribute to understanding the development of the site or the cultural history of the local area.

5.2.6 Criterion F (Rarity)

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 Nurses' Home group provides evidence of a now largely obsolete way of life and medical education. 'Living in' was, for most of the twentieth century, a requirement of a nurse's training in New South Wales and large accommodation buildings were constructed specifically for this purpose at hospitals across the State. When universities and tertiary institutions took over the training of nurses in 1979, this way of life became outmoded and hospitals were left with large accommodation buildings that had to be put to a new use.
- Although just about every hospital in New South Wales had a nurses' home (or a number of nurses' homes in the case of Wollongong, Prince Henry Hospital, Lidcombe Hospital and RPAH), since the original function of these buildings has been lost many have been demolished or adapted for new uses. At Wollongong Hospital the Nurses' Home group—and particularly Elouera House—is one of the diminishing number of these facilities that remains reasonably intact and, in fact, is still largely used for functions similar to the original (housing medical and nursing staff). Though Elouera House, and to a lesser extent Lawson House, could not be said to be rare, there is a possibility that they will become more so as hospitals continue to adapt to changing community needs and old hospital sites are redeveloped.
- The survival of the two still relatively intact/interpretable Nurses' Home buildings (Elouera House and Lawson House), from two distinct periods of growth in the size and importance of

Wollongong Hospital, is another relatively rare attribute of the site, with many major teaching hospitals forced to remove and/or radically adapt older buildings for new uses (particularly on metropolitan sites where alternative accommodation could be secured close by).

5.2.7 Criterion G (Representativeness)

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

- Elouera House is a typical representative example of the 'transitional' style of nurses' home buildings constructed by the Government Architect's Branch during the interwar years, as traditional forms and building methods were impacted on by new technologies and aesthetic concerns. Among other surviving examples of this type (such as the Matron Dickson Nurses' Home at the former Prince Henry Hospital, the former Nurses' Quarters at Newcastle's Mater Misericordiae Hospital and the Nurses' Quarters Nos 2 and 3 at the Lidcombe Hospital site) which are generally of a more 'domestic character', Elouera House would be distinguished, to a modest extent, by its Moderne and Art Deco touches. Compared, however, to a facility such as the Queen Mary Building at Royal Prince Alfred Hospital (RPAH) in Sydney, which demonstrates a much higher level of design resolution (and could be regarded as the aesthetic and architectural exemplar of its type), Elouera House is clearly relegated to a modest, representative example.
- Historically, Elouera House is of importance as a useful representative example of interwar nurses' accommodation which retains much of its original layout, character and functions and is able to tell, through its spaces, fitout and furnishings, much about its early use.
- Lawson House is also an interesting representative example of the work of the Government Architect's Branch under Cobden Parkes, this time in the 'boom' years immediately after World War II. While again not an outstanding architectural representative of its period, style or function in a State context, the building is a notable legacy of postwar Modernism in its Wollongong setting. In addition, the building's Modern Movement/International Style elements (such as flat roofs, wrap-around balconies and white rendered detailing) on a simple high-rise building reflect its contemporary symbolic representative role, directly expressing the 'better future' promised to all, which included the best, and latest, in medical care and nursing training.

5.2.8 Integrity/Intactness

The original Nurses' Home building, Elouera House, has a relatively high degree of integrity, with its original layout, functions and architectural character remaining readily discernable. The building's surviving features and fabric are able to provide evidence of their original and subsequent patterns of use, through to the demise of the model of nursing training for which they were erected. Important features such as the classroom/auditorium, the layout of individual bedroom/studies, the large and attractive communal areas and the strategic locations of senior staff facilities give a vivid picture of a way of life now largely gone (even down to the full-length mirrors on each stair landing to allow uniforms and appearance to be checked). Many areas and components have, however, been altered and/or added to accommodate changes in the use of the building—now used for occasional overnight accommodation for interns or visiting nursing staff—particularly to service areas (such as bathrooms, laundry and kitchen facilities), while redundant spaces (particularly communal

facilities) have been left without viable use other than storage. Inadequate maintenance/repair of building fabric has also affected the building's integrity/intactness, particularly on the significant street-fronting facades.

- The 1941 (west) addition has been more significantly altered than Elouera House, both in function and opening up and refurbishing of individual rooms as part of its adaptation for use as doctors' consulting rooms, though evidence of the original layout and fabric, such as doors and window joinery, remains.
- Lawson House has undergone recent alterations/refurbishment to accommodate new functions (for the Red Cross Blood Bank) but externally at least the major external elevations retain a relatively high degree of integrity.

5.3 Statement of Significance

The Wollongong Hospital Nurses' Home group is of historical significance to the City of Wollongong and the state for its ability to demonstrate an important aspect of the history of hospitals and nursing in New South Wales. Providing on-site accommodation for nurses was an integral part of the structure and operation of hospitals for most of the twentieth century, when nurse training took place within the hospital, and Wollongong is one of a number of nurses' homes constructed at the major teaching hospitals throughout the state.

Elouera House, the original component of the Nurses' Home group, is a good representative example of this type of facility erected during the 1930s when hospitals increased in size, nurse/patient ratios were reduced and working conditions improved. The architectural character, layout and facilities of this building directly reflect both the growing numbers in, and growing importance of, high quality nursing education. The building's architectural character is an interesting representative example of the 'transitional phase' in the design of public buildings in New South Wales by the Government Architect's Branch under Cobden Parkes in the interwar period, when modern architectural styles like Functionalism and Modernism were beginning to be adopted (and grafted onto) earlier traditional styles.

The 1941 (west) addition to Elouera House provides additional evidence of the rapid growth of nurse training facilities at Wollongong Hospital in the interwar years, being added less than four years after the main building. In its utilitarian character and detailing, however, this wing expresses something of the 'tightening purse strings' of the 1940s generally, adding little other than basic boarding accommodation to its more flamboyant predecessor.

The Lawson House wing of the Nurses' Home group is again a good representative example of the early Modern public buildings coming out of the Government Architect's office in the postwar years. Simple and pragmatic in form and functional layout, the architecture of the building's exterior was lifted out of the ordinary by its dramatic cantilevered balconies wrapping around its major street-fronting facades—reflecting (but not actually mimicking) the 1930s 'Moderne' of Elouera House. Internally, however, the building lacks the quality, interesting detail and integrity of the original Nurses' Home wing.

In its relationship to the hospital site as a whole, the Nurses' Home group today—and particularly the two major wings Elouera House and Lawson House—presents something of a conundrum. Owing its origins back to the early twentieth century development of the hospital site, the original 1930s wing was established as, and still remains, a physically and architecturally independent

structure, located as far away from the medical facilities as the site allowed and designed to face away from this towards the public thoroughfares. This pattern of development was repeated and given emphasis by the 1950s Lawson House development, as well as subsequent major development of medical facilities in the central and western areas of the site.

In summary, then, the two major wings of the Nurses' Home group—Elouera House and Lawson House—provide a historically interesting example of the growth and development of nursing training in the State through two major periods in the early and mid-twentieth century. They are not, however, either outstanding or unique in terms of their roles in architectural historical development or aesthetic qualities (as cited on current listings). Nor, as the research demonstrates, is the group or its items associated with any particularly significant events, movements or people, as would merit State-level renown and significance. Rather, these buildings provide evidence of times, attitudes and practices that underpinned 'everyday' history. It is, however, in part, this very ordinariness that makes them both 'unremarkable' but increasingly rare for being so.

5.4 Significance of Components

5.4.1 Grades of Significance

Different components of a place may make a different relative contribution to its heritage value, and loss of integrity or poor condition of components of the place may also diminish significance. Specifying the relative contribution of an item or its components to the overall significance of the place provides a useful framework for making decisions about the conservation of and/or changes to the place. The following table sets out terms used to describe the grades of significance for different components of the place, as per the NSW Heritage Office publication Assessing Heritage Significance (2001).

Grade	Justification	Status
Exceptional (E)	Rare or outstanding element directly contributing to an item's local and State significance.	Fulfils criteria for local or State listing
High (H)	High degree of original fabric. Demonstrates a key element of the item's significance. Alterations do not detract from significance.	Fulfils criteria for local or State listing
Moderate (M)	Altered or modified elements. Elements with little heritage value, but which contribute to the overall significance of the item.	Fulfils criteria for local or State listing
Little (L)	Alterations detract from significance. Difficult to interpret.	Does not fulfil criteria for local or State listing
Intrusive (I)	Damaging to the item's heritage significance.	Does not fulfil criteria for local or State listing

 Table 5.1
 Standard Grades of Significance.

5.4.2 Significance of Components of Wollongong Hospital Nurses' Home Group

In Table 5.2, the standard grades of significance of Table 5.1 are applied to the particular layout, elements and fabric of the Nurses' Home group. As part of this process, the table seeks to reflect the extent to which particular components of the place retain and/or provide meaningful evidence of the significance of the place and overall physical condition.

 Table 5.2 Significance of Components of Wollongong Hospital Nurses' Home group.

Grade	Application to Wollongong Hospital Nurses' Home	Components of Wollongong Hospital Nurses' Home
Exceptional	Rare or outstanding element directly contributing to an item's local and State significance. This category does not apply to the Nurses' Home group.	Not Applicable.
High	High degree of original fabric. Demonstrates a key element of the item's significance. Components in this category include the major architectural components of the two main buildings Elouera House and Lawson House, including overall form/massing, siting, original fabric, character and detailing of main street-fronting elevations. Evidence of major layout and extant significant period detailing to interior of Elouera House.	 <i>Elouera House:</i> Original 1937 structure of Elouera House, including key features such as flat-roofed balconies to Darling and Loftus Street elevations. Original external fabric to these key elevations, including flat-roofed and parapeted detailing of balconies, rendered projecting hoods, and original external joinery. Major components of original layout, character, fixtures and finishes, including: Basic 'loaded corridor' layout with mix of accommodation rooms (for nurses and self-contained senior nurses' suites) and larger shared recreation rooms. Lecture/classroom. Surviving significant fitout and finishes to recreation rooms (fibrous plaster cornices, timber wall panelling, Art Deco light fittings, chimney surrounds and heaters, etc). Terrazzo stairs and decorative iron balustrades, plus mirrors on landings. Surviving original joinery (timber-framed, windows, doors, skirtings, cupboards, etc) particularly in good/unpainted condition with original hardware. Other original fittings such as lights in bedrooms. Surviving evidence of original bathroom fittings and fixtures in unmodified bathrooms. Lawson House: Original 1954 structure of Lawson House, including key features such as form/massing and flat-roofed balconies to Darling and Loftus Street elevations. Original external fabric to these key elevations, including flat-roofed balconies to Darling and Loftus Street elevations. Setting: Open setting at northeast corner of site and setbacks from streets allowing views towards main elevations of Elouera House (across former tennis court now carpark).

Grade	Application to Wollongong Hospital Nurses' Home	Components of Wollongong Hospital Nurses' Home
Moderate	Altered or modified elements. Elements with little heritage value, but which contribute to the overall significance of the item. This ranking is given to features and fabric that are part of the site's historical evidence and overall physical character but are of less significance overall and/or they have had alterations of a substantial nature.	 Components include: Original features and fabric of the 1941 addition. Original features and fabric of the secondary elevations of Elouera and Lawson House (to south and west). The open/landscaped area and access pathways (defined by retaining walls) bounded by Hospital Road. Some of the interior spaces and fabric of Elouera House and Lawson House.
Little	Alterations detract from significance. Difficult to interpret. Added or altered spaces, elements and fabric that detracts from and/or obscures more significant attributes.	 Components include: Most of the remaining areas and components of the three structures within the group that are not actuall Intrusive (as identified below). This generally includes original rooms/spaces/elements that have been changed but the original is still legible and/or recoverable (such as refurnished bedrooms and bathrooms).
Intrusive	<i>Damaging to the item's heritage significance.</i> Added or altered spaces, elements and fabric which damage the item's significance.	 Intrusive components include: New doors and windows externally, including modern aluminium windows. Altered western facade of the 1941 extension. Modified interiors involving major demolition and replacement of fabric and/or low quality fabric (eg Lawson House). Modern, unsympathetic finishes such as suspended ceilings and surface mounting of services. Modern steel deck roofing over balconies on Elouer House.

6.0 Curtilage Assessment

6.1 Curtilage Assessment Principles

A 'heritage curtilage' is defined in the NSW Heritage Office publication *Heritage Curtilages* as 'the area of land (including land covered by water) surrounding an item or area of heritage significance which is essential for retaining and interpreting its heritage significance'.¹

The establishment of a heritage curtilage must satisfy certain principles that ensure an adequate setting exists to conserve the significance of the original relationship between the heritage item and its site and between its component parts. The curtilage should consider visual catchments and corridors as well as buffer zones to protect the heritage item from unsympathetic development. Attributes of the place such as scale, use, relationships, visual linkages, vegetation, archaeology, style and form should all inform the delineation of a heritage curtilage.

There are four types of heritage curtilage:

- Lot Boundary Curtilage—historic allotment boundary being the same as curtilage.
- *Reduced Heritage Curtilage*—an area less than the lot boundary; for example, homesteads set on large rural lots.
- *Expanded Heritage Curtilage*—allotment plus additional land to protect significant views and historic associations.
- Composite Heritage Curtilage—a number of the above boundaries considered together.

The Burra Charter places increased emphasis on the importance of the settings of heritage places, stating that:

Conservation requires the retention of an appropriate visual setting and other relationships that contribute to the cultural significance of the place. New construction, demolition, intrusions, or other changes that would adversely affect the setting or relationship are not appropriate. (Article 8)

This means that care must be taken in the development and management of the surroundings of a significant heritage place. As is the case with Wollongong Hospital Nurses' Home, it is appropriate to define both a minimum legal curtilage and a separate broad setting.

6.2 Existing Nurses' Home Curtilage

6.2.1 Existing Listings

As detailed in Section 1.3, Wollongong Hospital Nurses' Home is currently listed as a heritage item in the SHR, the Wollongong LEP 2009 and the NSW Health Section 170 Heritage and Conservation Register (s170 Register).

In each agency's register the area and components of the site to which the listing relates differ, in some instances quite markedly—an issue which is of particular relevance to the scope, analysis and recommendations of this report. In addition, the assessments of significance of the listings are of limited, and in some instances questionable, relevance to the actual values of the place as determined by this study.

In the SHR listing, the assessment of the significance of the Nurses' Home (Listing No. 00836, gazetted 2 April 1999) is limited to its architectural values.

The hospital is of strong architectural significance as a fine example of Inter War hospital design.

The SHR boundary is defined as Lot 95, Section 3, DP 1258 (shown in Figure 1.4) which, as noted in Section 3.0, was the largest lot within the 1882 subdivision of the Garden Hill Estate on which the original hospital buildings were erected. None of the other 13 lots along New Dapto Road and the western portion of Crown Street that make up the remainder of the main hospital site are, however, included in the SHR listing, though they also date to the 1882 subdivision and were included in the original hospital purchase and development.

On the other listings (in the LEP and s170 Register), no specific curtilage outside the building footprint is identified either in the property description, physical analysis or assessment of significance.

6.2.2 Review of Existing SHR Curtilage

As the investigation and analysis in this report have identified, the boundaries of the current SHR listing for the Wollongong Nurses' Home (as shown in Figure 1.4) bear little meaningful historical or physical relationship to the existing building group and its immediate setting. As this is a significant issue for both understanding and effective future management of the site, it needs to be addressed as a matter of some urgency and importance.

Historically, the hospital has, since its founding, treated its 14 lot holding (from the 1882 Garden Hill Estate) as a single site with the historical and current layout of buildings responding to the topography, starting with the earliest structures on the crest of Garden Hill (where Garden Hill House was located), and gradually expanding down to the street boundaries below. In this context, the separation of Lot 95, Section 2, DP 1258 from its neighbours has neither a historical nor physical basis.

Elouera House, the original Nurses' Home, was set at a distance from the hospital, though essentially very much tied to it. It appears to have been deliberately located as far away from the main hospital as possible within the site, with its primary facades (east and north), including its main 'official' entrance, facing away from the medical facilities. Though it is apparent from its architectural character and siting that the view of the main facades and entry to Elouera House from Darling and Loftus streets was of major importance as the public, ceremonial face of the building, over time, the relationship between the building and the adjacent roads became has become more ambiguous, visually and functionally.

In large measure this has been due to the essential link between the Nurses' Home and the hospital, which could be reached much more readily from the 'back' (ie south) elevation of Elouera House. Access to the building from the north east corner of the site was also steeper and less convenient, the lower lawn area being occupied by a tennis court and then the current parking area, with numerous steps to be climbed to reach the 'front door'. Over time, the deterioration/removal of retaining walls and paths, together with the growth of trees close to the northeast corner, made this area less visually prominent as well as awkward to access. The northeast entry was also further from the town centre on Crown Street, which was more easily accessed via the southeast corner of the hospital site.

In this context, the areas of the building group facing the hospital—including the west and south elevations and the small, grassed open space between the buildings and Hospital Road—that were designed as the secondary facades of the building and covered with unsightly services, became the de-facto main entry. Certainly it was these rear entrances, pathways and areas of open space through which they moved that defined for most users the link between accommodation, teaching facilities and hospital duties.

6.3 Proposed Nurses' Home Group Curtilage

As this report demonstrates, the nature and degree of the heritage significance of the Wollongong Hospital Nurses' Home differs in no small measure from the brief and limited citation on the existing SHR listing, as well as other local and state government listings.

The current 'Lot Boundary Curtilage' used to define the extent of the SHR is also of limited relevance as a curtilage to the Nurses' Home, both as regards the historical origins and subsequent development of this part of the site. More significantly, however, the current SHR boundary lacks a meaningful relationship to existing site components and attributes that contribute to its identified heritage values, and does not usefully contribute to either understanding or future management of the site.

In this context, it is recommended that a new *Reduced Heritage Curtilage* be prescribed for the Nurses' Home, taking as its essential starting point the boundaries/extent of the 'study area' identified in Section 1 and Figure 1.5.

In essence, the proposed *Reduced Heritage Curtilage* is defined:

- on the north by Loftus Street,
- on the east by Darling Street,
- on the south and southwest by Hospital Road; and
- at the west end by the small area of lawn west of the end of the 1941 west wing addition.

The curtilage should include the various areas of open space and landscaping in front of each of the exposed elevations, including particularly at the northeast corner of the site (ie including the carpark area) and the landscaped area between Elouera House and Darling Street, to maintain the major views towards the significant facades of Elouera House and Lawson House. (Clearing of screening trees away from the front of Elouera House on the northeast corner would also help.)

This recommended heritage curtilage is shown in Figure 6.1.



Figure 6.1 Proposed Reduced Heritage Curtilage for Wollongong Hospital Nurses' Home.

6.4 Endnotes

¹ NSW Heritage Office and Department of Urban Affairs & Planning 1996, *Heritage Curtilages.*

7.0 Appendices

Appendix A

State Heritage Register (SHR) listing for Wollongong Hospital Nurses' Home (from State Heritage Inventory)

Appendix B

Wollongong Local Environmental Plan 2009 (LEP 2009) listing for Wollongong Hospital Nurses Home (from State Heritage Inventory)

Appendix C(1)

NSW Department of Health Section 170 (s170) Register listing for Lawson House (from State Heritage Inventory)

Appendix C(2)

NSW Department of Health Section 170 (s170) Register listing for Nurses Home or Eloura (sic) House (from State Heritage Inventory)

Appendix A

State Heritage Register (SHR) listing for Wollongong Hospital Nurses' Home (from State Heritage Inventory)

	Working with the community to know, value and care for our heritage		
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Wollongong Hospital Nurses Home

Item

Name of Item:	Wollongong Hospital Nurses Home
Other Name/s:	Nurses home - Wollongong Hospital
Type of Item:	Built
Group/Collection:	Health Services
Category:	Nurses' Home
Location:	Lat: 150.88391797 Long: -34.4247962
Primary Address:	Darling Street, Wollongong, NSW 2500
Local Govt. Area:	Wollongong City
Property Description:	

Lot/Volume Code Lot/Volume Number Section Number Plan/Folio Code Plan/Folio Number				Plan/Folio Number
LOT	95	3	DP	1258

All Addresses

Street Address	Suburb/Town	LGA	Parish	County	Туре
Darling Street	Wollongong	Wollongong City	Wollongong	Camden	Primary
Loftus Street	Wollongong	Wollongong City			Alternate

Owner/s

Organisation Name	Owner Category	Date Ownership Updated
NSW Department of Health	State Government	

Statement of Significance

The hospital is of strong architectural significance as a fine example of Inter War hospital design. **Date Significance Updated:** 27 Nov 00 Note: There are incomplete details for a number of items listed in NSW. The Heritage Branch intends to develop or upgrade statements of significance and other information for these items as resources become available.

Description

Designer/Maker:	GA Cobden Parkes
Construction Years:	1937 - 1937
Physical Description:	A three storey nurses' home with round ended cantilevered balconies. Built in the Inter War Functionalist style. Cream facing bricks, Marseilles pattern semi-glazed terracotta tiles, reinforced concrete slab.
Physical Condition and/or	Fair. Date Condition Updated: 18 Dec 00

Nurses' home
Nurses' home

History

г

Historical Notes:

Designed by the Government Architect, Cobden Parkes.

Historic Themes

Australian Theme (abbrev)	New South Wales Theme	Local Theme
3. Economy - Developing local, regional and national economies	Health - Activities associated with preparing and providing medical assistance and/or promoting or maintaining the well being of humans	(none) -
Assessment Criteria	Exercises Series Items are assessed against the State Heritage Register (SHR) Criteria to determine the level of significance. Refer to the Listings be for the level of statutory protection.	
Recommended Management	Exercise great care to protect and recover very high cultur significance. Requires detailed conservation planning to as manage ongoing use and upgrading proposals.	

Procedures / Exemptions

Section of Act	Description	Title	Comments	Action Date
57(2)	Exemption to allow work	Standard Exemptions	 SCHEDULE OF STANDARD EXEMPTIONS HERITAGE ACT 1977 Notice of Order Under Section 57 (2) of the Heritage Act 1977 I, the Minister for Planning, pursuant to subsection 57 (2) of the Heritage Act 1977, on the recommendation of the Heritage Council of New South Wales, do by this Order: 1. revoke the Schedule of Exemptions to subsection 57 (1) of the Heritage Act made under subsection 57(2) and published in the Government Gazette on 22 February 2008; and 2. grant standard exemptions from subsection 57(1) of the Heritage Act 1977, described in the Schedule attached. FRANK SARTOR Minister for Planning Sydney, 11 July 2008 To view the schedule click on the Standard Exemptions for Works Requiring Heritage Council Approval link below. 	

Standard Exemptions for Works Requiring Heritage Council Approval

Listings

Listing Gazette Gazette Gazette

Heritage Listing	Listing Title	Number	Date	Number	Page
Heritage Act - State Heritage Register		00836	02 Apr 99	27	1546
Heritage Act - s.170 NSW State agency heritage register		05/2/1/1000	01 Feb 92		
Regional Environmental Plan	Illawarra REP No.1		11 Apr 86		
Local Environmental Plan		1990	28 Dec 90	183	11553

Study Details

Title	Year	Number	Author	Inspected by	Guidelines Used
Department of Health - s170 Register	1992		Schwager, Brooks & Partners Pty Ltd		Yes

References, Internet links & Images

None

Note: Internet links may be to web pages, documents or images.

Data Source

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Appendix B

Wollongong Local Environmental Plan 2009 (LEP 2009) listing for Wollongong Hospital Nurses Home (from State Heritage Inventory)

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Wollongong Hospital Nurses Home

Item

Name of Item:	Wollongong Hospital Nurses Home				
Type of Item:	Built				
Group/Collection:	Health Services				
Category:	Nurses' Home				
Primary Address:	Darling Street, Wollongong, NSW 2500				
Local Govt. Area:	Wollongong City				
Property Description:					
Lot/Volume Code Lot/Volume Number Section Number Plan/Folio Code Plan/Folio Number					

All Addresses

Street Address	Suburb/Town	LGA	Parish	County	Туре
Darling Street	Wollongong	Wollongong City			Primary

Statement of Significance	The most prominent example of the modern or international style of architecture in Wollongong. Although bland architecturally, the building is an important landmark due to its prominent site. Date Significance Updated: 09 Oct 00 Note: There are incomplete details for a number of items listed in NSW. The Heritage Branch intends to develop or upgrade statements of significance and other information for these items as resources become available.			
Description				
Designer/Maker:	NSW Government architect Cobden Parkes			
Physical Description:	Seven storeys. Concrete roof and cantilevered balconies. Face brick walling.			
Current Use:	Nurses home			

Historic Themes

Australian Theme (abbrev)	New South Wales Theme	Local Theme
regional and national economies	Health - Activities associated with preparing and providing medical assistance and/or promoting or maintaining the well being of humans	(none) -

Assessment of Significance

SHR Criteria c)

The item has architectural, townscape and landmark value.

[Aesthetic Significance] SHR Criteria g) [Representativeness]

The item has representative value.

Assessment Criteria

Items are assessed against the **State Heritage Register (SHR) Criteria** to determine the level of significance. Refer to the Listings below for the level of statutory protection.

Listings

Heritage Listing	Listing Title	Listing Number	Gazette Date	Gazette Number	Gazette Page
Local Environmental Plan		1990	28 Dec 90	183	11553
Local Environmental Plan			07 Jan 00	1/2000	69

Study Details

Title	Year	Number	Author	Inspected by	Guidelines Used
Dept of Health in Wollongong LGA		05/2/1/100	(not stated)		No
City of Wollongong Heritage Study	1991		McDonald McPhee Rogers Conacher Fullarton	G. Neaves	No

References, Internet links & Images

None

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Appendix C(1)

NSW Department of Health Section 170 (s170) Register listing for Lawson House (from State Heritage Inventory)

		Working with the community to know, value and care for our heritag		
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Lawson House

Note: There are incomplete details for a number of items listed in NSW. The Heritage Branch intends to develop or upgrade statements of significance and other information for these items as resources become available.

Item

Name of Item: Lawson House

Type of Item:BuiltPrimaryDudley Street, Wollongong, NSW 2500Address:Wollongong CityLocal Govt.Wollongong CityArea:Kenter Street

Property Description:

Lot/Volume Code Lot/Volume Number Section Number Plan/Folio Code Plan/Folio Numb				
-	-	-	-	-

All Addresses

Street Address	Suburb/Town	LGA	Parish	County	Туре
Dudley Street	Wollongong	Wollongong City	WOLLONGONG	CAMDEN	Primary
New Dapto Road	Wollongong	Wollongong City			Alternate

Owner/s

Organisation Name	Owner Category	Date Ownership Updated
NSW Department of Health	State Government	20 Jul 05

Historic Themes

Australian Tl	heme (abbrev)	New South Wales Theme	Local Theme	
3. Economy - D regional and na		Health - Activities associated with preparing and providing medical assistance and/or promoting or maintaining the well being of humans	(none) -	
Assessment Criteria Items are assessed against the State Heritage Register (SHR) Criteria to deithe level of significance. Refer to the Listings below for the level of statutory protecti				

Listings

Heritage Listing	Listing Title	Listing Number	Gazette Date	Gazette Number	Gazette Page
][][

Heritage Act - s.170 NSW State Dep. Of Health agency heritage register s.170 Register		
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References, Internet links & Images

None

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Appendix C(2)

NSW Department of Health Section 170 (s170) Register listing for Nurses Home or Eloura (sic) House (from State Heritage Inventory)

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Nurses Home

Item

Name of Item:	Nurses Home
Other Name/s:	Eloura House
Type of Item:	Built
Primary Address:	Dudley Street, Wollongong, NSW 2500
Local Govt. Area:	Wollongong City
Property Description	on:
Lot/Volume Code I	Lot/Volume Number Section Number Plan/Folio Code Plan/Folio Number
-	

All Addresses

Street Address	Suburb/Town	LGA	Parish	County	Туре
Dudley Street	Wollongong	Wollongong City	WOLLONGONG	CAMDEN	Primary
New Dapto Road	Wollongong	Wollongong City			Alternate

Owner/s

Organisation Name	Owner Category	Date Ownership Updated	
NSW Department of Health	State Government	20 Jul 05	
Statement of Significance	Of architectural significance design.	e as a fine example of Inter War hospital	
	Note: There are incomplete details for a number of items listed in Na Heritage Branch intends to develop or upgrade statements of signific and other information for these items as resources become available		
Description			
Designer/Maker:	Government Architect, Cob	den Parkes	
Physical Description:	Built in the Inter War Funct	e with round ended cantilevered balconies. ionalist style. Cream facing bricks, zed terractorra tiles; reinforced concrete	
Further Information:	Conservation Register, Feb Exercise great care to prote	ect and recover very high cultural led conservation planning to assess and	

Current Use:	Medical plus other quarters.
Former Use:	Nurses home.

History

Historical Notes:

Designed by G.A. Cobden Parkes.

Historic Themes

Australian Theme (abbrev)	New South Wales Theme	Local Theme
3. Economy - Developing local, regional and national economies	Health - Activities associated with preparing and providing medical assistance and/or promoting or maintaining the well being of humans	(none) -
Assessment Criteria	Items are assessed against the State Heritage Register Criteria to determine the level of significance. Refer to the List for the level of statutory protection.	
Recommended	Refer to Preliminary Heritage & Conservation Register, Fel	b 1992

Recommended Management

Listings

Heritage Listing	Listing Title	Listing Number	Gazette Date	Gazette Number	Gazette Page
Heritage Act - s.170 NSW State agency heritage register	Dep. Of Health s.170 Register				

References, Internet links & Images

Туре	Author	Year	Title	Internet Links
Written	Schwager Brooks and Partners		Study	

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