



Health Projects International

**Camden Valley Medical Campus
Gledswood Hills**

Concept Development Access Review

Morris Goding Accessibility Consulting

Final v4

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REPORT REVISIONS		
Date	Version	Drawing No / Revision
25/4/2016	Draft	All drawings Un-numbered with status noted as “Draft for Concept DA”, drawings named as: <ul style="list-style-type: none"> - Staging Plans - Basement Level Floor Plan - Ground Floor Level Plan - Floor 1 Floor Plan - Floor 2 Floor Plan - Floor 3 Floor Plan - Floor 4 Floor Plan - Floor 5 Floor Plan
5/5/2016	V2	Resulting from clarification and comments provided by design team subsequent to first issue of report.
30/5/2016	V3	Amended to align bed and car park numbers with associated reports.
6/7/2016	V4	Amended to align car park numbers with Traffic Impact and Parking Assessment report Rev D issued 17/6/2016.

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1. EXECUTIVE SUMMARY

The Access Review Report is a key element in design development of Camden Valley Medical Campus, Gledswood Hills and an appropriate response to AS1428 series, Building Code of Australia (BCA), and ultimately the Commonwealth Disability Discrimination Act (DDA).

Morris Goding Accessibility Consulting has prepared the Access Report to provide advice and strategies to maximise reasonable provisions of access for people with disabilities.

The medical centre development has been reviewed to ensure that ingress and egress, paths of travel, circulation areas and car parking comply with relevant statutory guidelines.

In general, the development has accessible paths of travel that are continuous throughout. In line with the reports' recommendations, the proposed development has demonstrated an appropriate degree of accessibility. The Concept Development drawings indicate that compliance with statutory requirements, pertaining to site access, common area access and car parking can be readily achieved.

The recommendations in this report are associated with concept design and are achievable. These recommendations should be addressed during the development of the project.

The main recommendations that have arisen from the access review include:

- (i) Ensure an accessible path of travel is provided go the buildings from the external street footpaths,
- (ii) Ensure no non-accessible entrances occur further than 50 metres from any accessible entrance,
- (iii) Provide additional accessible car parking spaces sufficient to satisfy statutory requirements for stage 1 of the development
- (iv) Identify areas considered appropriate to seek exemption under D3.4(a) having regard to functional requirements and safety.

2. INTRODUCTION

2.1. General

Health Projects International have engaged Morris Goding Accessibility Consulting to provide a design review of the proposed Camden Valley Medical Campus development located on The Hermitage Way, Gledswood Hills NSW

The proposed development is presently indicated to be achieved through a staged development process. Ultimately the campus will consist of:

- A multi-level building containing offices, professional rooms, ward areas and various support and ancillary facilities, and
- A multi-level car park building

The requirements of the investigation are to:

- Review supplied DA drawings prepared by Health Projects International of the proposed development,
- Provide a report that will analyse the provisions of disability design of the development, and
- Recommend solutions to ensure the design complies with the Disability Discrimination Act (DDA), Building Code of Australia (BCA) and AS1428 series.

2.2. Objectives

The report considers user groups such as residents, visitors, staff and customers. The Report attempts to deliver equality, independence and functionality to people with disabilities inclusive of:

- People with sensory impairment (hearing and vision)
- People with mobility impairments (ambulant and wheelchair)
- People with dexterity impairments

The Report seeks to provide compliance with the DDA. In doing so, the Report attempts to eliminate, as far as possible, discrimination against persons on the ground of disability.

2.3. Statutory Requirements

The following standards are to be used to implement the Report:

- AS 1428.1:2009 - (Design for Access and Mobility)
- AS 1735.12:1999 - (Lifts, Escalators, & Moving Walks)
- BCA 2015- Building Code of Australia Part D3
- DDA Premises Standards 2010 (DDA Access Code)
- DDA - Disability Discrimination Act

3. SITE LINKAGES

3.1. Main Entry

The development site is located on the corner of Digitaria Drive and The Hermitage Way, Gledswood Hills. The development is arranged such that staff and service vehicle access is off Digitaria Drive, while the main public address points are from The Hermitage Way (to the East) and Digitaria Drive (from the North-West).

There is a system of internal roadways that provide vehicle access to internal car-parking and a drop-off zone at the principal public entrance

Access from the public footpaths external to the site is not defined at this stage. However, there is a considerable set-back from those footpaths and there should be sufficient space to achieve complying accessible paths of travel.

Recommendation:

- (i) Ensure a complying accessible path of travel is provided to the accessible entrances of the hospital entrance from the public footpaths external to the site, and
- (ii) It is recommended that external access-ways have appropriate clear width (greater than 1800mm) that will enable two persons using a wheelchair adequate space to pass each other and suitable turning areas that will allow a 180° wheelchair turn compliant with AS1428.1.

The above recommendations are achievable and will be incorporated at construction certificate stage.

4. BUILDING INGRESS & EGRESS

4.1. Main Building Entrances

The concept drawings identify 6 entrance points into the main hospital building:

- directly into the Emergency Department,
- directly into the Main Lobby,
- from the direction of the multi-storey car park,
- into the area identified as “Mixed Medical Use”,
- adjacent to the Mixed Medical Use entrance
- into the area generally identified as “back of house support”.

The main building is in excess of 500 m² hence 50% of entrances must be accessible; however, any non-accessible entrance must not be located further than 50 metres from an accessible entrance. From the concept plan provided only the entrance to the “Mixed Medical Use” area and the adjacent entrance are within 50m of each other. One of those entrances must be accessible. All other entrances identified must be accessible.

Recommendations:

- (i) Ensure there are no non-accessible entrances further than 50m from any accessible entrance, and
- (ii) Ensure all accessible entrance have doorways that provide: appropriate clear opening width, sufficient circulation space to approaches on both sides of the door for wheelchair manoeuvring, appropriate door furniture including automatic closers with complying door operating forces.

The above recommendations are achievable and will be incorporated at construction certificate stage.

5. PATHS OF TRAVEL

5.1. Paths of Travel

The concept plans provided are noted “*ALL INTERNAL LAYOUTS INDICATIVE ONLY*”.

The in-patient areas of the main building have indicatively 2000mm wide corridors

The car park building does not indicate a dedicated path of travel from the accessible car parking spaces to the lifts, or from the lifts to the pedestrian connection/entrance to the main building. Rather the accessible path of travel is in common with the vehicle circulation system.

The stand-alone building which is titled for use as (“In-Patient” for stage 2, then “Mixed Medical use” for stage 3) is not provided with an indicative layout.

5.2. Lifts

Lifts are indicated to provide vertical circulation through the Main building and the Multi-storey car park.

All lifts indicated appear to provide passenger cars of sufficient size to satisfy National Construction Code Series Building Code of Australia part E3.6 requirements.

Recommendations:

- (i) Lift car size to comply with National Construction Code Series Building Code of Australia Part E3.6 requirements.
- (ii) Lift car components (grabrail, control buttons, lighting) to comply with AS1735.12.
- (iii) Lift lobby call button and arrival indicators to comply with AS1735.12.

The above recommendations are achievable and will be incorporated at construction certificate stage.

5.3. Ramp in car park

There appears to be a ramp indicated between half-levels in the car park adjacent to the vehicle ramps furthest from the lifts. This ramp is two car parks long (hence approx. 11m). At 11 m without a landing, the maximum gradient permissible is 1:16. An 11m ramp at grade 1:16 will rise only some 685mm. If the half-levels of the car park are evenly spaced vertically, this will not be sufficient rise.

It is noted that the upper level served by this ramp is not provided with any accessible car parking spaces. Should this ramp be provided for uses other than providing an accessible path of travel (eg for pram users), it is noted that National Construction Code Series Building Code of Australia clause D2.10 limits the gradient of this ramp to a maximum of 1:8. It is also recommended that signage be provided to indicate the ramp is not intended for wheelchair users.

Recommendations:

- (i) Provide signage to indicate function of ramp (ie not for use by wheelchairs).

The above recommendation is achievable and will be incorporated at construction certificate stage.

5.4. Plant/Back of House Facilities

The draft documents nominate “Back of House and Support Areas”. Typically in a hospital setting there are a number of spaces for which an exemption under National Construction Code Series Building Code of Australia clause D3.4(a) may be sought: for example – kitchen, laundry, engineering workshops etc.

The building certifier is responsible for making the decision upon an application for an exemption, and typically will require evidence to support such an application for exemption.

Recommendation:

- (i) Should it be intended to seek an exemption under the provision of D3.4(a) for this development, please be aware of the requirement to support the application with appropriate evidence.

The above recommendation is achievable and, if necessary, will be incorporated at construction certificate stage.

6. ACCOMMODATION

6.1. Ward Areas

The National Construction Code Series Building Code of Australia does not define a proportion of beds to must be provided for accessible uses in a class 9a building. Rather, the requirement is for the whole of the building to be accessible – to and within all areas normally used by the occupants. It is important to note that “occupants” is not limited to patients or their visitors, but also includes staff and persons present in the hospital for other reasons.

It is also to be noted that *within ward areas* there is no requirement for accessible sanitary compartments – refer National Construction Code Series Building Code of Australia Table F2.4(a).

However, note that any toilets provided outside of the specific ward areas (ie for general use by staff, visitors etc) must comply with the requirements for 1 accessible toilet at each bank (or 50% of banks where there is more than one bank on a floor), plus cubicles for persons with ambulatory disabilities where the bank of toilets comprises more than a single unisex wheelchair accessible toilet.

Recommendations:

- (i) Ensure that all areas are accessible to all building users
- (ii) Ensure wheelchair and ambulant accessible toilets are provided to areas of the main building outside of ward areas.

The above recommendations are achievable and will be incorporated at construction certificate stage.

6.2. Staff Areas

Staff are included within the category of “users” of the building, and all areas of the building to which staff normally have access must be accessible. As such it may be appropriate to consider providing work spaces, staff meals rooms etc with work and bench spaces which have min 800mm wide accessible knee spaces under, are either replaceable or adjustable in height at a later stage, or have joinery units which area easily removable above and below bench-tops.

It may be appropriate for some staff areas to be considered under D3.4(a) (eg such places as dirty utility rooms) – refer to section 5.3 previously.

Recommendations:

- (i) Ensure that all areas are accessible to all building users
- (ii) Identify areas where functional requirement or safety concerns would make the area unsuitable for access by person with mobility impairments. In collaboration with the client body, prepare a submission seeking exemption for those areas under clause D3.4(a) of the National Construction Code Series Building Code of Australia and Disability (Access to Premises - Buildings) Standards 2010.

- (iii) As best practice, consider providing work bench space that are either complying or easily adaptable.

The above recommendations are achievable and will be incorporated at construction certificate stage.

7. CAR PARKING

7.1. General

Based on the staged schedule of development provided, the development is proposed to have 1080 car park spaces in total on completion of the facility.

The concept drawings provided indicate a provision of 69 accessible parking bays in total upon completion of the facility.

Car parking at a hospital facility is determined by both in-patient and out-patient services:

- In-patient at the rate of 1 per 100 spaces
- Out-patient rate of 1 per 50 up to 1000 spaces, then 1 per 50 thereafter.

The proposed number of accessible car parking spaces to be provided in the completed development will comply with DDA Disability (Access to Premises - Buildings) Standards 2010 and the National Construction Code Building Code of Australia .

The above ratios should also be noted within each stage of the progressive development of this site, in order to ensure sufficient accessible car parking spaces are provided at and for each stage of development.

Recommendations:

- (i) Ensure sufficient accessible car parking spaces are provided at each interim stage of the development.
- (ii) Ensure accessible car parking spaces comply with the requirements of AS2890.6.

The above recommendations are achievable and will be incorporated at construction certificate stage.