NEPEAN HOSPITAL

BVN

Return Brief and Signage and Wayfinding Strategy
Revision 2
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URBANITE®

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INTRODUCTION

1.1 PREFACE

Urbanite have been engaged by BVN to develop the signage and wayfinding strategy for the Nepean Hospital redevelopment. In this document we have examined site-wide strategies as well those that relate specifically to the new Acute Services Building and the new multi-deck car park. We have analysed the site and have identified key entry points, user flows and primary decision points. We have also mapped out typical customer journeys and have identified a hierarchy required to deliver a legible and intuitive signage system. We have included some best practice research and have audited the existing brand assets and signage system.

1.2
OBJECTIVES OF THE SIGNAGE & WAYFINDING SYSTEM

– Provide a **legible and engaging** environment for Patients, Visitors and Staff

– Create **memorable and describable journeys**, rather than an over-reliance on signage for wayfinding solutions.

– Good wayfinding means less use of staff time directing and **better experience for all users**

– A strong wayfinding strategy helps to **alleviate stress & anxiety** while improving the patient experience

– Create **a cohesive and holistic signage system** and visual language that unifies and brings coherency to the spaces

– **Integrate NSW Health branding** in a professional and sympathetic manner throughout the entire facility and integrated with the surrounding community and adjacent sites

– Create signage that is **integrated** with and **compliments** the architectural design intent

– Develop a graphic language that **contributes to comprehension** and that acknowledges connectivity through the site

1.3 INTRODUCTION

The signage system should contribute to the site's natural attributes and special qualities, enhancing the contextual relationships both inside the precinct and to the surrounding urban context.

Specifically the signage scheme should achieve the following:

- Enhance the unique character of the site
- Support a walkable circulation system
- Create a strong connection to green spaces
- Develop clear, legible and convenient pathways
- Support a series of high quality public open spaces that respond to the site and needs of the patients, visitors and &
- Create a sense of arrival into the precinct

Our aim is to create a distinctive, coherent and trusted signage solution that is integrated with a focus to reduce visual clutter and connect with the open community spaces, pedestrian, vehicular and transport modes. This supports people that are arriving, leaving or circulating throughout the Nepean Hospital campus, allowing them to quickly identify the route to their destination. The strategy will identify a clear, easily understood hierarchy of signage elements and communication touchpoints.

"Our aim is to create a distinctive, coherent and trusted signage solution that is integrated and connect with the open green spaces, pedestrian, vehicular modes."

1.4
SIGNAGE PRINCIPLES

With multiple user types to accommodate in this design we will apply a set of principles to assist in ease of access and help users navigate their respective journey within the built forms.

The intention is to develop an integrated system with a primary purpose of providing intuitive, informative and harmonious wayfinding.

The wayfinding should be designed and implemented based on the way we think and act when we're moving from one place to another, interacting with our innate sense of spatial awareness. It must provide clear and unambiguous journeys, connecting with the natural environment.

The strategy that will be applied to the project includes:

- Creation of a hierarchy wayfinding & signage system
- Define primary and secondary paths
- Clearly identify decision making points and define waypoints
- Highlight destinations
- Material, colours, fonts, language and sustainability

This strategy will analyse the different journeys and information required by users at key points for each group.

Principles will guide the design and solution set within the masterplan.

The design principles will ensure:

- Open main arrival points
- Legible networks that supports modes of transit
- Inclusive community and experiences
- Multiple paths connecting that supports walkability
- Establishing clear sight lines to ensure significant views through the precinct

"The intention is to develop a content rich, integrated system with a primary purpose of providing intuitive, informative and harmonious wayfinding."

1.4
SIGNAGE PRINCIPLES

Specific principles include:

Support the character of Nepean Hospital

- The design of signage is to support the distinct character of Nepean Hospital through form, colour, content, character and materiality.

Understand the audiences

- Signage is primarily provided for users unfamiliar with the site, however also serves as confirmation, waypoints and reinforcement for regular users.

Integrate signage

- Where possible signage functions should be integrated. Where identification, map, interpretation and directional information is required in one area these functions should all be incorporated into a single signage element.
- Where possible signage should be integrated into the built or landscaped environment.

Minimise signage

- Avoid placing two signs where one will do.
- Vehicular and pedestrian signage can be accommodated by one form where appropriate.

Maintain continuity

- Continuity of form, detail, height, colour, materiality, terminology and iconography all reinforce the authority and legibility of a signage system. Signage is to be designed as a consistent suite of elements.

Standardised nomenclature

- Naming of buildings, particularly Emergency and carparks, forms important navigational context. Buildings and destinations should be clearly identified and consistently named.
- Ensure terminology is consistent across all messages.
- Ensure terminology utilises plain english not medical jargon.

Minimise illumination

- To protect the visual amenity of the site lighting of signage should be minimised. where possible relying on good contrast and ambient lighting for legibility. Exceptions to this are major entry identification.

Acknowledge the Clinical Heart

- The Clinical Heart will be an architecturally distinct focal point of the hospital.

Technology

- Technology can assist in wayfinding and placemaking, and form meaningful connections to and within a precinct, but must retain relevance to the community.

1.5
SIGNAGE REQUIREMENTS
GATEWAY IDENTIFICATION

Purpose
Signage integrated into the landscape identifies entries to the community, creates a sense of arrival and establishes a distinct identity. The gateways to the site will signal a change in precinct and create awareness that the threshold has been crossed.

Location
Major site identification will be located at the two primary vehicular entry points into Nepean Hospital off Somerset Street on the eastern border of the precinct, one being for emergency vehicles and the other a carpark entrance. Secondary site identification will be located at the third vehicular entry point off Derby Street on the southern border and where vehicles and pedestrians will enter and travel along the future hosipital spine. Other secondary entries include the pedestrian entry to the north east from Great Western Highway and the car park and service entrance from Barber Street to the west.

Requirements
The major identification signs should clearly identify the name of the precinct to both pedestrian & vehicular traffic.

The design of this signage should be seamlessly integrated into the landscape design. Materials selected should reference landscaping finishes, but retain a connection to branding and other signage elements. Stone, steel and painted aluminium are appropriate materials.

The signage is to feature legible typography and must be scaled appropriately for vehicular traffic and in particular emergency vehicles.

Major site identification

Major site identification

Major site identification

Major site identification

1.5
SIGNAGE REQUIREMENTS
EXTERNAL WAYFINDING

Purpose
To provide directions at key decision points. Wayfinding signage is primarily aimed at first time visitors and those unfamiliar with a site, and should be planned accordingly.

Types
Vehicular
Where possible, directions should be provided above 2700mm so that directions are unobstructed by pedestrians, cyclists or other vehicles.

Pedestrian / Cyclist
Primary directions for pedestrians should be located between 2200-2500mm

Location
Wayfinding signs are to be located along major paths of travel at key decision points for all modes of transport. Additional directional signage may be required at specific entry thresholds, and where directions to facilities such as amenities, are required. Where possible wayfinding should be integrated into the surrounding landscape, whilst maintaining visibility and legibility.

Requirements
Directional signage must include major site destinations; including the publically accessible medical buildings, green spaces as well as exits from the precinct.

1.5
SIGNAGE REQUIREMENTS
INTERNAL WAYFINDING

Purpose
To provide directions at key decision points. Wayfinding signage is primarily aimed at first time visitors and those unfamiliar with the building, and should be planned accordingly.

Types
Freestanding
Where possible, directions should be provided above 2700mm so that directions are unobstructed by pedestrians, cyclists or other vehicles.

Wall mounted
Primary directions for pedestrians should be located between 2200-2500mm

Location
Wayfinding signs are to be located along major paths of travel at key decision points. Additional directional signage may be required at specific entry thresholds, and where directions to facilities such as amenities, are required. Where possible wayfinding should be integrated into the architecture, whilst maintaining visibility and legibility.

Requirements
Directional signage must include major destinations; including the wards, amenities as well as exits from the building.

1.5
SIGNAGE REQUIREMENTS MAPPING

Purpose
Site maps encourage connectivity by providing a site-wide context to journeys, allowing pedestrians, cyclists and users with accessibility requirements to proceed to destinations with confidence. The addition of precinct maps allows the identification of facilities that may not be immediately apparent from a given location.

Location
Maps are to be located at the major entries to the precinct and along major paths of travel to verify progress. The location should be visible from key decision points along the paths.

Maps should be integrated into other (directional or identification) signage.

Requirements
Recommended routes, accessible paths, amenities, bike lanes and travel times to major destinations should be included.

Mapping is to be illustrated in a ‘heads-up’ orientation along the path of travel (that is, the top of the sign is to correspond with the orientation it is viewed from).

Typography and colour palette will be consistent with brand guidelines. Appropriate, distinct and clear iconography will identify destinations in the local precinct.

Maps must be produced and oriented to maximise longevity. Avoid west facing placements if possible or place in shade if not possible. Screen printed graphics with UV stable paints are preferred.

Clear & simplified design with ‘You Are Here’ indicator

Landmarks clearly market with the aid of picograms

Minimal colour palette

Heritage Trail with walking distances clearly indicated

1.5 SIGNAGE REQUIREMENTS BUILDING IDENTIFICATION

Purpose
To identify a formally named location, (such as a building), providing confirmation that a destination or waypoint has been arrived at.

Location
Located at major entrances or adjacent to the major circulation paths that traverse to the destination. Located and oriented towards major approaches.

Requirements
Signage should clearly identify the name of the location. Signage should use clear iconography to Emergency facilities for example.

Signage is to integrate with its surroundings to ensure that it both retains and enhances the character of the site. Signage is to feature legible typography and will be scaled appropriately to both pedestrian and vehicular traffic.

Integrated into the building fabric

Colour palette consistent with architecture

1.6
CONSTRUCTION PRINCIPLES FOR EXTERNAL SIGNAGE

The construction of the signage is to integrate with the landscaping and architecture to ensure that it both retains and enhances the unique character of the site. Materials selected should reference landscaping & architectural finishes, but retain a connection to branding and other signage elements.

Messages and graphics should be legible with good contrast. Signage is to be clearly visible from a distance, thus allowing users to identify the location of information.

Letter heights are to be in accordance with AS 1428.2 Clause 17.

Stone, steel, painted aluminium and locally sourced timbers are deemed to be appropriate materials. Timber should be sourced from locally produced sustainable sources.

Signage is to be constructed with durable materials and finishes that age gracefully, minimising maintenance requirements. Materials and finishes are to be graffiti resistant and / or easily cleaned and maintained.

Signage is to be robust enough to withstand vandalism. Where possible signage should be designed to accommodate the future replacement of components, allowing replacement of damaged or vandalised sections and accommodating changes over time.

Maps and graphics must be produced and oriented to maximise longevity. Avoid west facing placements if possible, or place in shade if not possible. Screen printed graphics with UV stable paints and UV protective overcoating is preferred.

In general signage should not be illuminated, relying on good contrast and ambient lighting for legibility. Vehicular directional signage may use retro-reflective treatments for messages.

1.7
MATERIALITY FOR EXTERNAL SIGNAGE

The construction of the external signage is to integrate with the landscaping and architectural character to ensure that it both retains and enhances the unique character of the site. Materials selected should reference landscaping finishes and the local environment. Stone, steel, painted aluminium and locally sourced timbers are deemed to be appropriate materials.

Sandstone

Galvanised Steel

Powdercoated aluminium

Coreten

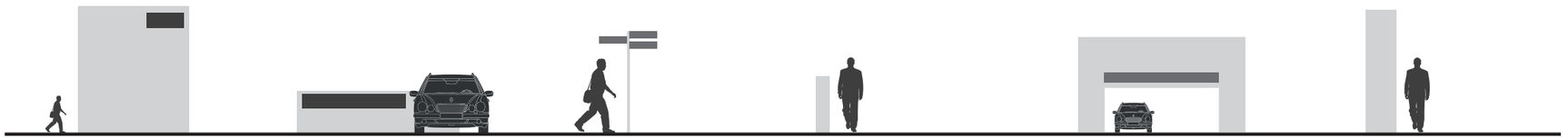
SEQUENCE & SIGNAGE HIERARCHY

2

2.1 SIGN TYPES

Shown below is a diagrammatic representation of the various signtypes that may be required for this project.

IDENTIFICATION



S1 **Building ID**
S1.A: Sky Sign
S1.B: Walkway ID

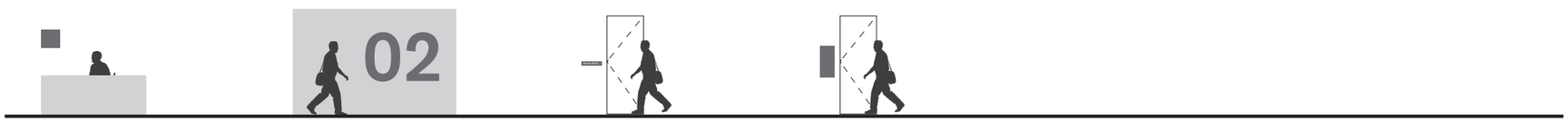
S2 **Precinct ID**
S2.A: Vehicular
S2.B: Pedestrian
S2.C: Emergency

S3 **Street ID**

S4 **External End of Journey ID**

S5 **Key External Destination ID**

S6 **Building Entry ID**
S6.A: Emergency



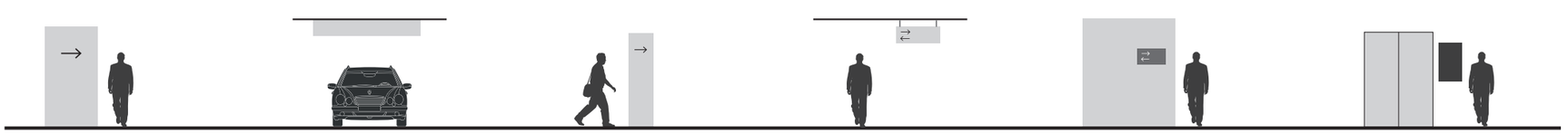
S7 **Key Internal Space ID**
S7.A: Lettering Application
S7.B: Ward/Department

S8 **Lift Level/Bay ID**
S8.A: Lift Lobby Level ID
S8.B: Lift Lobby Bay ID
S8.C: Stair Level ID

S9 **Room ID**
S9.A: Patient
S9.B: Front of House
S9.C: Back of House

S10 **Confirmation ID**
S10.A: Department
S10.B: Lift Threshold

DIRECTIONAL



D1 **Precinct Directional**
D1.A: Vehicular
D1.B: Pedestrian

D2 **Carpark Directional**
D2.A: Suspended
D2.B: Wall Mounted

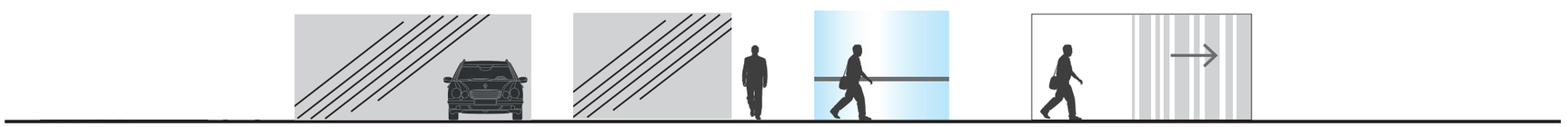
D3 **Internal Directional**
D3.A: Lift Core (Ground)
D3.B: Freestanding
D3.C: Wall Mounted

D4 **Suspended Directional**
D4.A: Suspened Directional

D5 **Key External Destination ID**

D6 **Directory**
D6.A: Major Ground Entry
D6.B: Lift Lobbies
D6.C: Emergency
D6.D: Ground Lobby

GRAPHICS



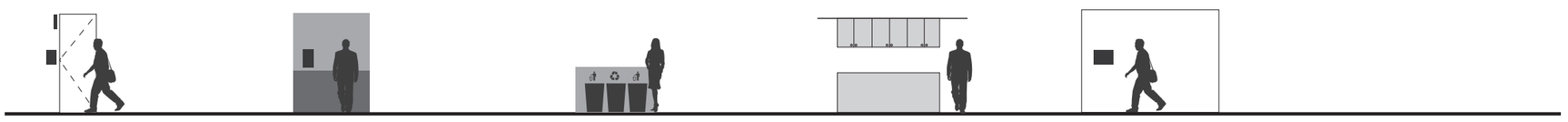
G2 **Carpark Graphic**

G3 **Environmental Graphic**

G4 **Safety Decal**
G4.A: Public
G4.B: Private

G5 **Wayfinding Department Graphic**

OPERATIONAL



O1 **Amenity ID**
O1.A: Blade Sign
O1.B: Wall Sign
O1.C: Change Cubicle

O2 **Statutory**

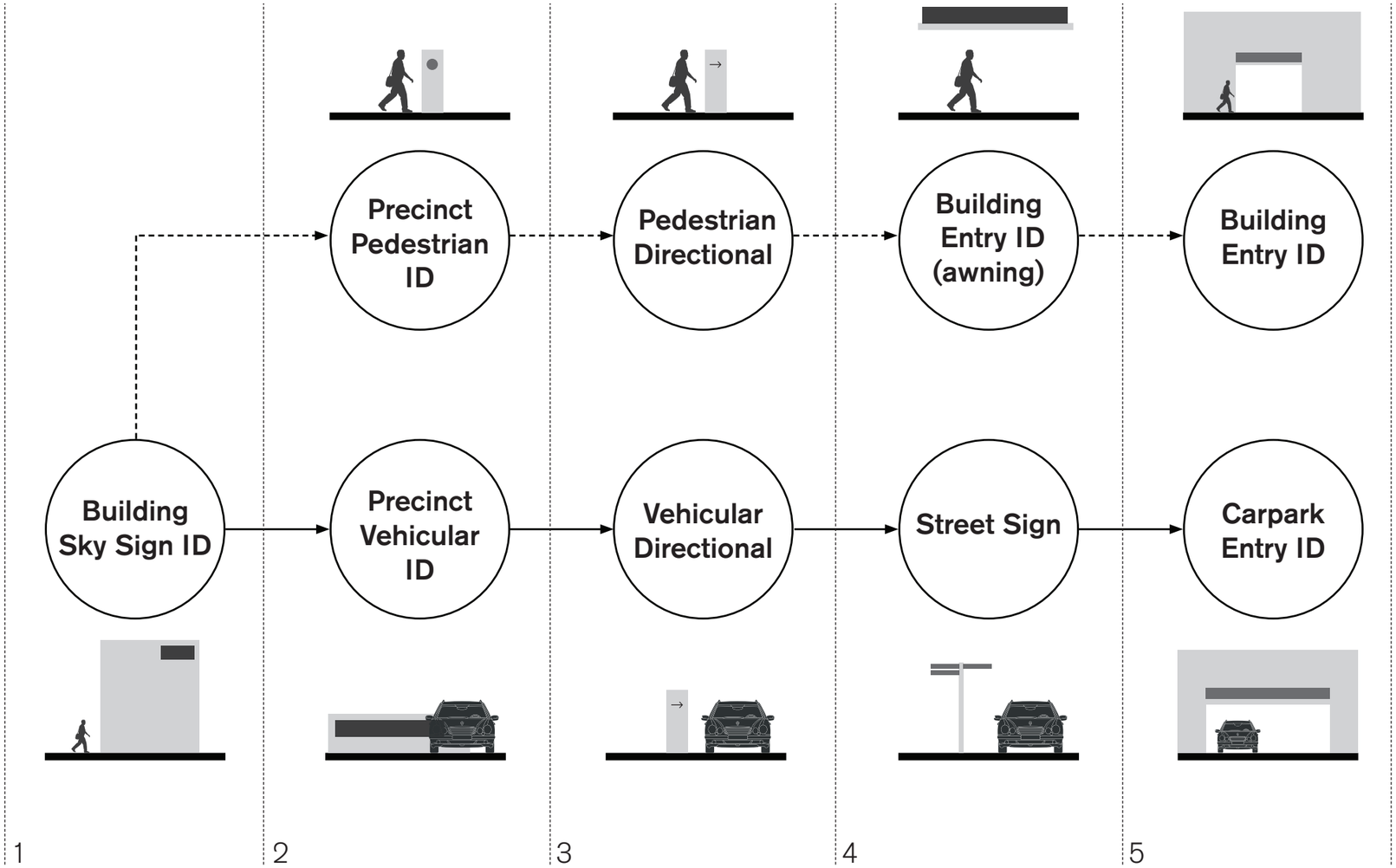
O3 **Waste**

O4 **Kitchenette**

O5 **Operational Messaging**
O5.A: Cupboard ID

2.2 PRECINCT WAYFINDING SEQUENCE

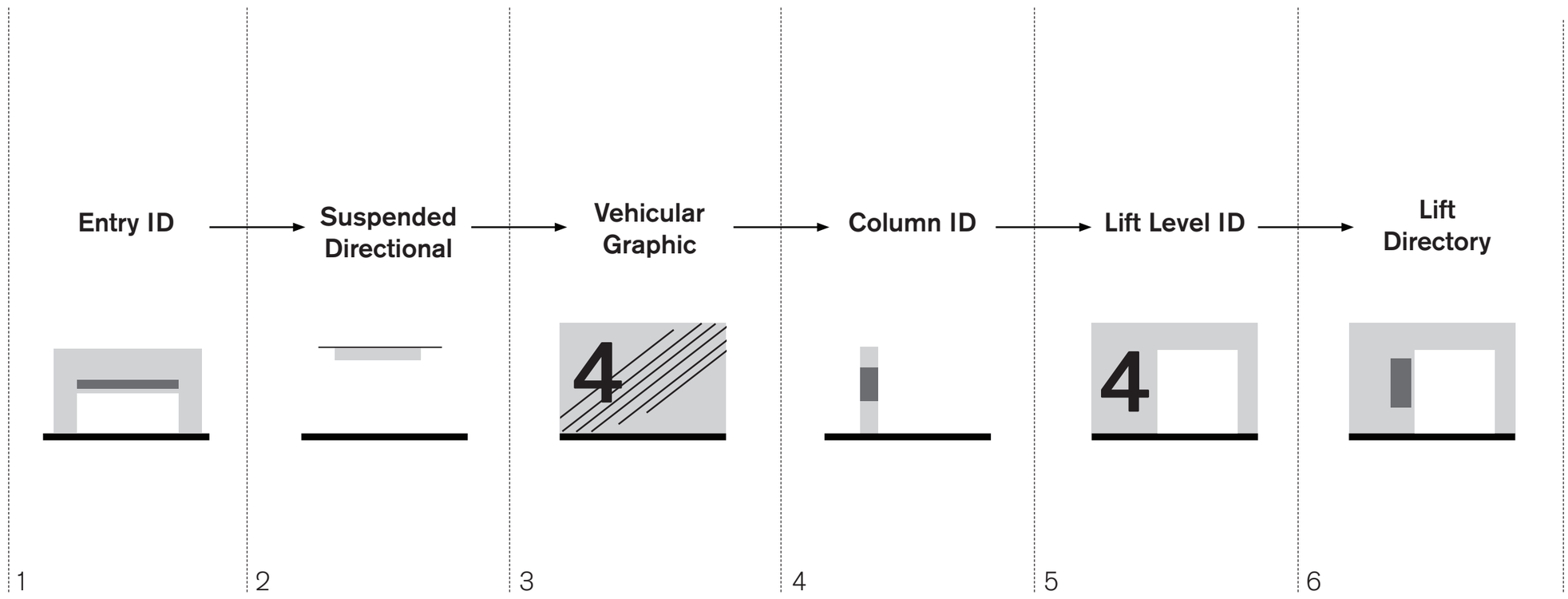
The diagram below describes the wayfinding sequence from the the site perimeter to the building or carpark entry point.



User journey	Distance viewing	Carpark arrival	Getting around	Identification	Orientation
	I can see the hospital up ahead	Have I arrived? What entry have I arrived at?	Which way to my destination? Is there visitor parking?	What street am I on? Is this my building? Is my destination inside?	Is this my building? Is this the car park for visitors?

2.3
CAR PARK WAYFINDING SEQUENCE

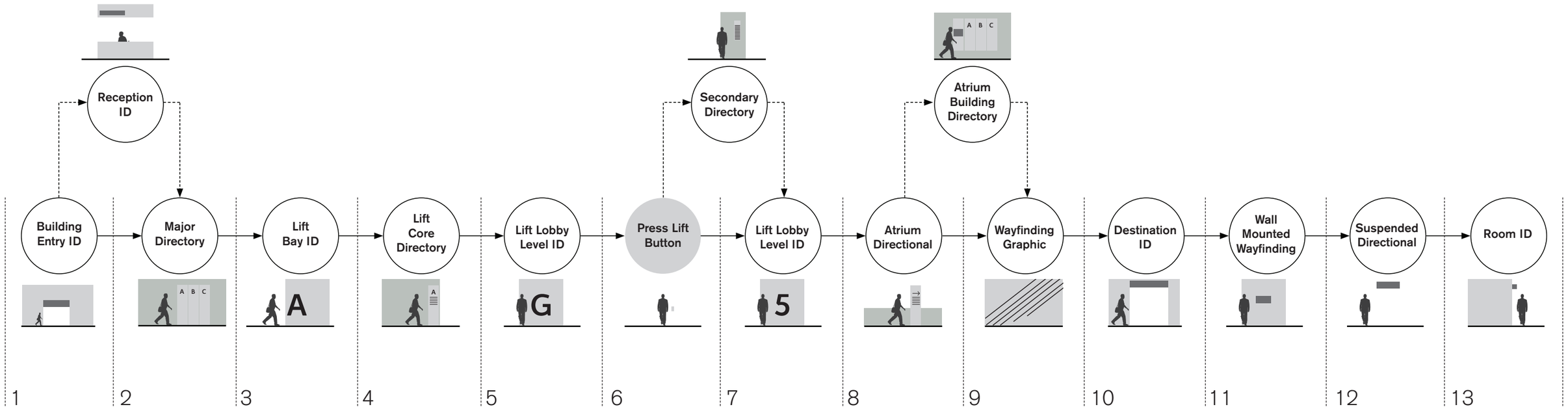
The diagram below describes the wayfinding sequence from the entry point of the new multi-deck carpark to the lift.



User journey	**Carpark arrival**	**Getting around**	**Orientation**	**Identification**	**Orientation**	**Orientation**
	Is this the car park for visitors? What are the rates?	Is there visitor parking available?	What level am I on?	Where did I park?	What level am I on?	What level is the exit on?

2.4 INTERNAL WAYFINDING SEQUENCE

The diagram below describes the wayfinding sequence from the entry point of the building to the final room destination required.



BACKGROUND TO THE PROJECT

3

3.1
PROJECT VISION

The vision for Nepean Hospital is to enable the development of an integrated campus which responds to the needs of the community by providing co-ordinated, efficient and shared services. It will focus on providing good healthcare services, patient and staff well-being, community engagement and health promotion.

3.2
7 STRATEGIC PRINCIPLES

The Integrated Nepean Hospital Master Plan identifies 7 Key Strategic Directions developed in consultation with the stakeholders in exploration of strengths and weaknesses, and analysis of constraints and opportunities of the existing Hospital Campus. These 7 key principles are:

1. Improving Population Health

2. Enhancing the patient experience

3. Living within our means

4. Strengthening our Workforce

5. Enhancing our Services and Facilities

6. Developing and Strengthening research capacity

7. Establishing robust governance and local decision making

3.3 ZONAL MASTERPLAN

The zonal masterplan identifies uses for development zone including:

1. Acute/IPU's/Clinical Support
2. Ambulatory Care
3. Commercial
4. Education/Research/Administration
5. Mental Health
6. Non Clinical Support
7. Private Hospital
8. Carparking
9. Green Zone

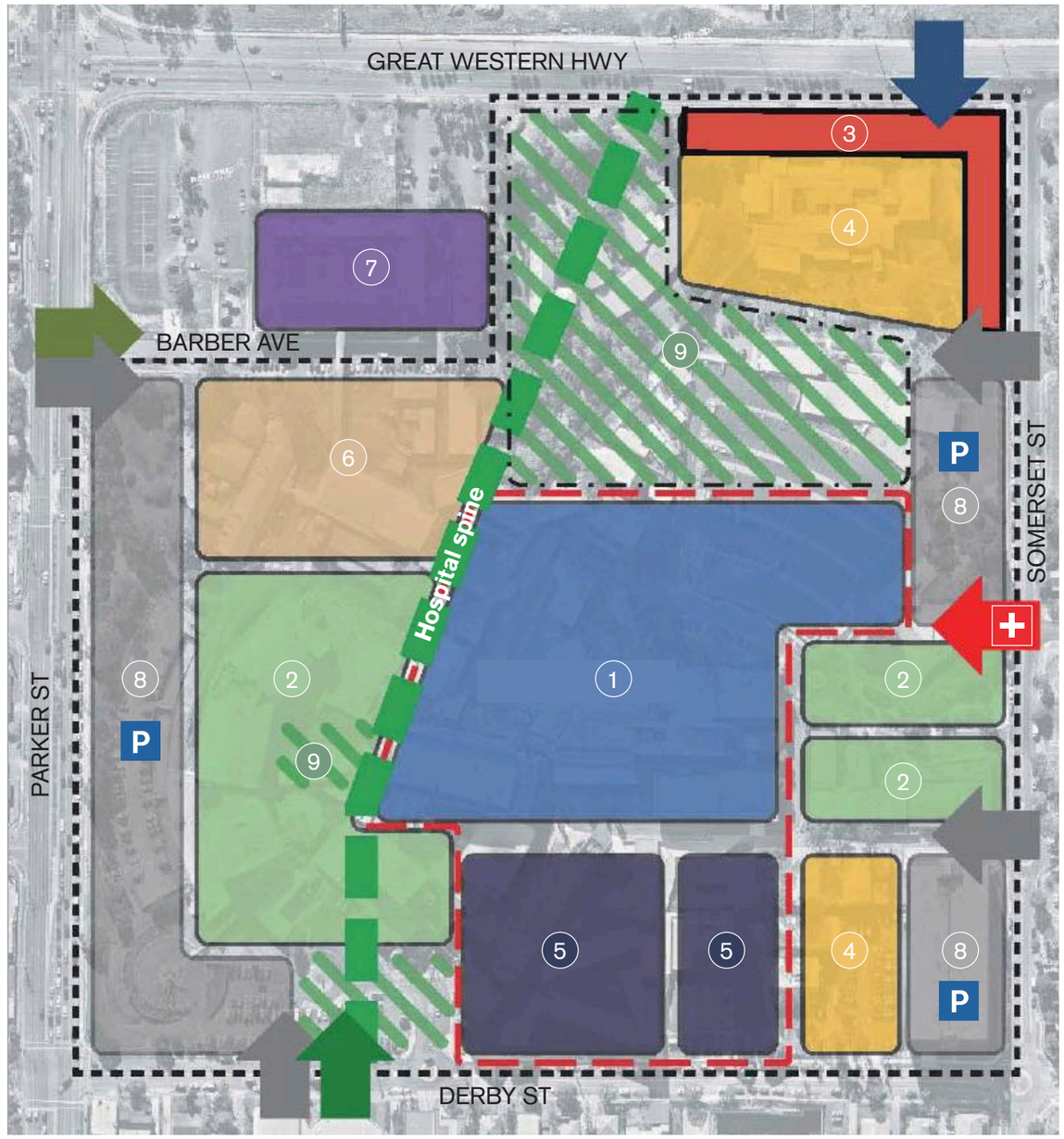
- - 24 hour zone

- - Campus Boundary

·-· Expansion

Recommendations of the Zonal Masterplan

- Consolidate Acute Services and locate adjacent to East Block
- Consolidate IPU's and locate adjacent to East Block
- Potential to consolidate Ambulatory Services in West Block and Oral Care
- Mental Health Expansion zone towards the east
- Consolidate Clinical Services in a centralised location
- Consolidate Non Clinical Services in a centralised location
- Potential to consolidate into zone within the proposed entry precinct

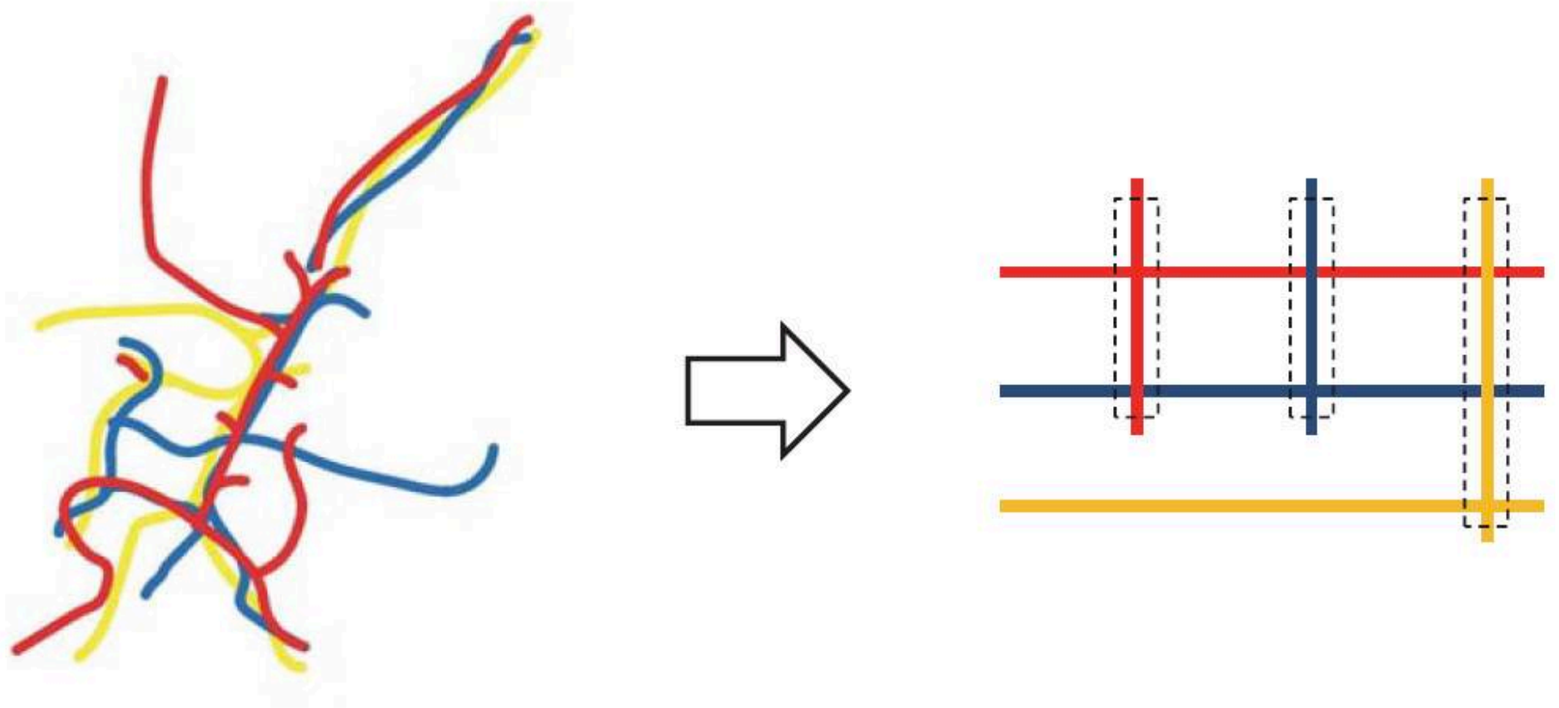


3.4 CONNECTIONS

The zonal masterplan seeks to address the hospitals compromised patient, staff and public circulation flows by establishing a framework which deconflicts patient, staff and public cross overs through the development of the following:

– Creating clear paths of travel both vertically and horizontally; and

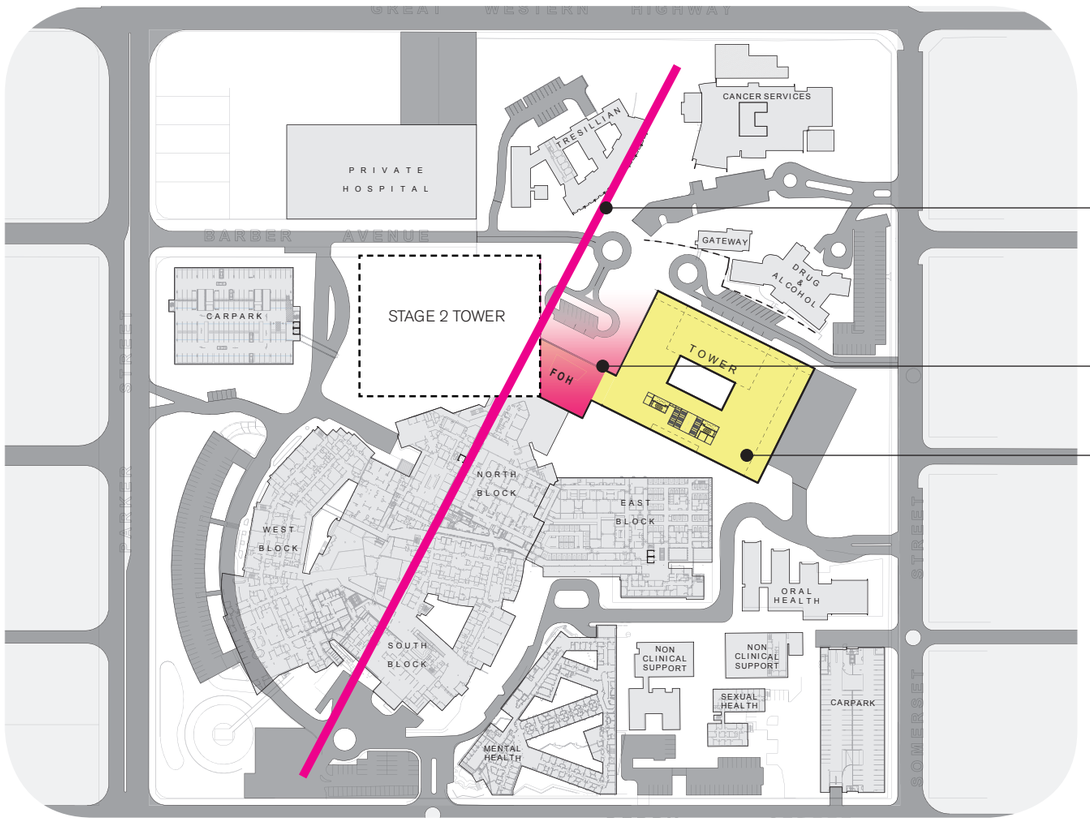
– Separate and streamlined flows for patients, staff and public.



3.5
SITE ORIENTATION

The zonal masterplan establishes major orientation axis across the site from north to south and east to west with the new main entry forming the new heart of the hospital precinct.

Towards
train station



Major Orientation Axis

New Main Entry

New Acute Services Building

Ambulatory
focus

3.6
SITE ACCESS

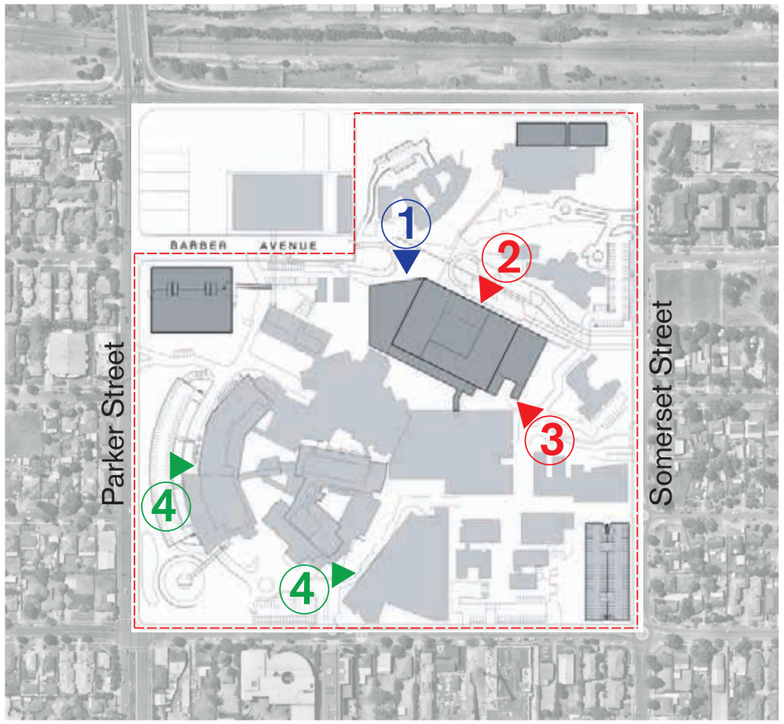
The zonal masterplan seeks to develop a streamlined approach in respect to site access for both pedestrians and vehicles. This strategy will result in the following:

– Development of clear, campus wide wayfinding strategies

– Segregation of public, staff, emergency and service vehicles flows

Emergency drop off and visitor drop off zone at the front door will be accessed via Somerset Street with a separate ambulatory care access point and drop off zone accessed via Derby Street. Back of house vehicles will access the campus and existing back of house areas either via Barber Ave or Parker Street.

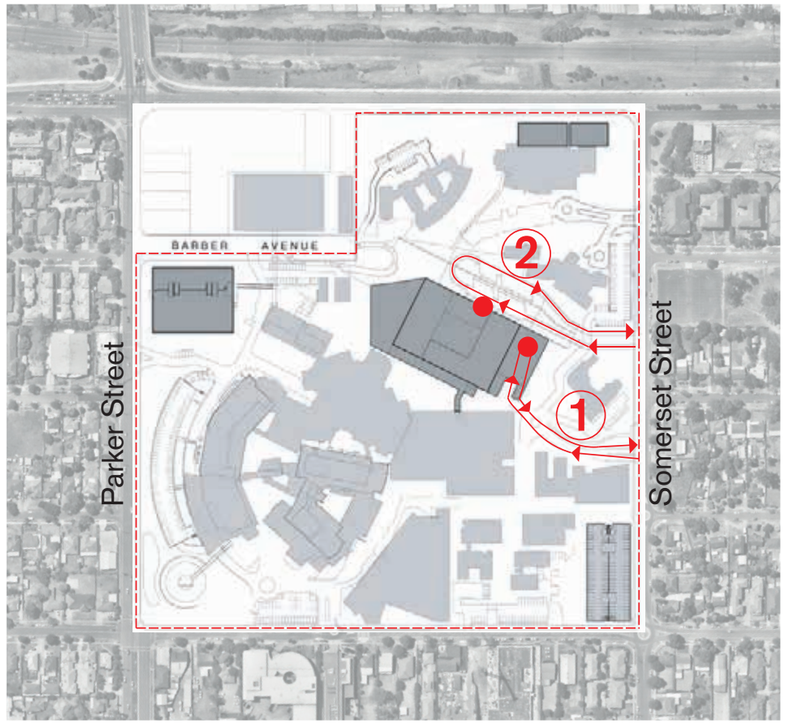
3.7
PEDESTRIAN & VEHICULAR ACCESS



LEGIBLE ENTRIES

The Concept design seeks to provide separate and easily identifiable on-grade entries for:

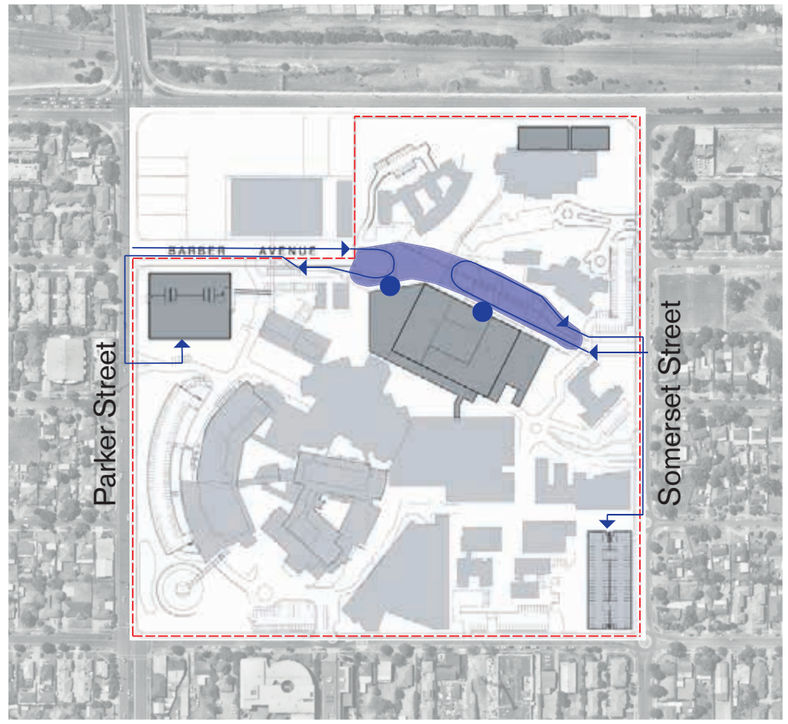
1. Public arriving to the main entry by car or on foot
2. Public arriving at the emergency department
3. Ambulances
4. Public arriving for Ambulatory Care by car or foot



ED DROP-OFF AND AMBULANCES

The Concept design seeks to provide separate and easily identifiable on-grade entries for:

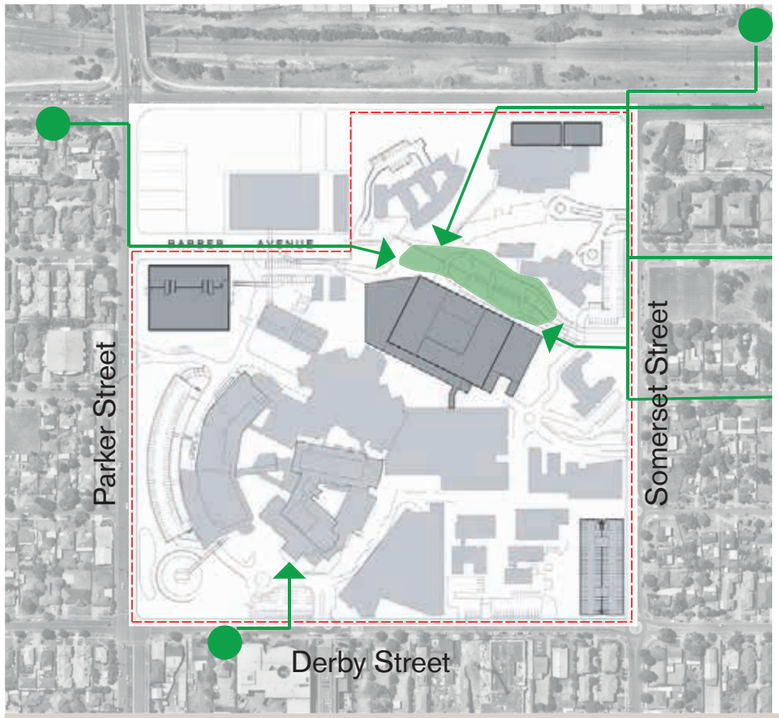
1. A separate emergency vehicle entrance point is provided for ambulances arriving at the ED Ambulances exiting the bay will loop into the new public access road to ED and exit out at Somerset Street
2. Visitors to ED access the ED drop off zone via Somerset Street travelling in a west direction towards the drop off point and complete a loop and exit back onto Somerset Street

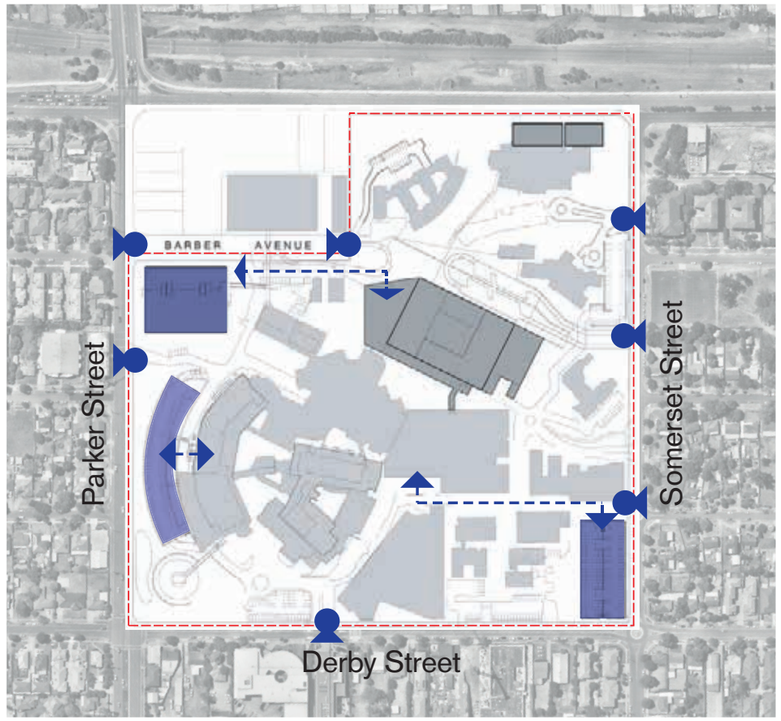


MAIN PUBLIC ENTRY

Drop-off spaces and are provided along the north face of the New Stage 1 Building. Vehicles can enter from either Barber Ave or Somerset Street and complete a loop and exit back onto the respective entry points. Visitors wishing to access longer term parking can then re-enter the site at the existing multistorey carpark accessed off Somerset Street or the new multistorey carpark accessed off Parker Street.

3.7
PEDESTRIAN & VEHICULAR ACCESS





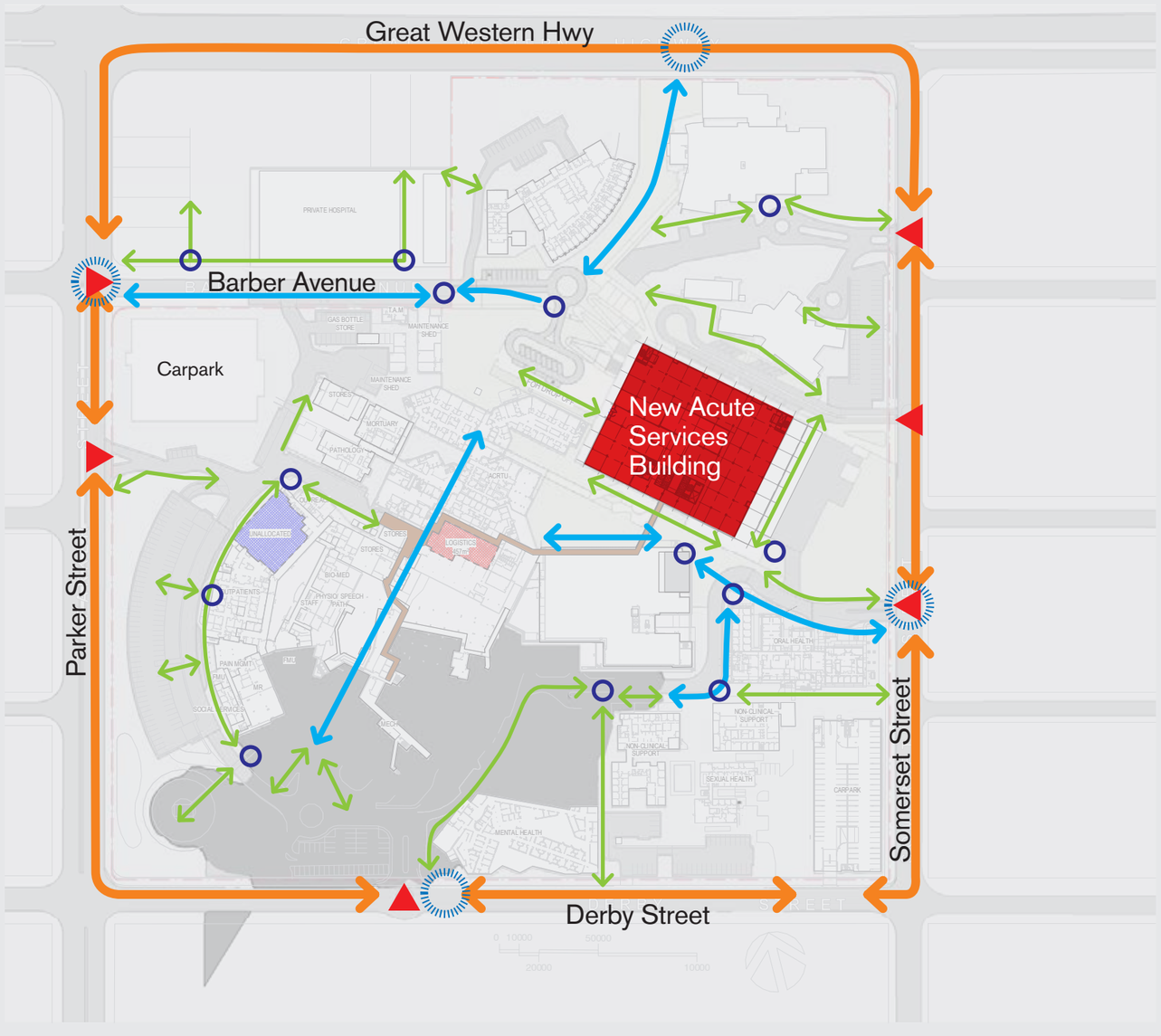
PEDESTRAIN APPROACH

The New Stage 1 Building seeks to provide a legible and permeable pedestrian experience. Direct pedestrian movement is anticipated mainly from the Parker/Barber Ave, Somerset and Derby Streets. As such, the Stage 1 developed allows for the retention of two existing entry points as well as the new FoH.

ACCESS TO PARKING

Direct access to the existing multi-storey carpark (located on the corner of Somerset and Derby Street) can be accessed directly off Somerset Street.
The existing western carpark is accessed from both Parker Street and Derby Street.
Other existing on grade carparks are generally accessed via Somerset or Derby Street.
The new multi-storey carpark building located on the north/west corner of the campus can be accessed via Parker Street.

3.8 PEDESTRIAN CIRCULATION



KEY

- Primary travel paths
- Secondary travel paths
- Site perimeter travel paths
- Pedestrian entry points
- Decision points
- Site entries

BRAND ASSETS

5.1
NEPEAN HOSPITAL BRANDING

Logo

NSW GOVERNMENT Health
Nepean Blue Mountains
Local Health District

Brand font
Newhouse DT

NewhouseDT Light

abcdefghijklmnopqrstuvwxyz

ABCDEFGHIJKLMNOPQRSTUVWXYZ

1234567890/-#+&<>,*

NewhouseDT Medium

abcdefghijklmnopqrstuvwxyz

ABCDEFGHIJKLMNOPQRSTUVWXYZ

1234567890/-#+&<>,*

Brand colours
Primary colour palette

Graphic language
Watermark Feature

5.2
CURRENT NEPEAN HOSPITAL SIGNAGE SYSTEM

The current wayfinding system is overly colourful and visually complex. Consideration should be given to simplifying the design so that legibility can be enhanced resulting in more sympathetic integration with the interior design.

Secondary Directional Vehicular Totem
4200 x 1100

Carpark Identification
3600 x 900

Building Identification
3000 x 800

External Directional
3000 x 800

Internal Wall Mounted Directional
1600 x 900

Internal Suspended Directional
2100 x various

Internal Canterlever moiunted
500 x 250
300 x 250