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# **HERITAGE IMPACT STATEMENT**

Bowral & District Hospital,  
SSD 8980 Modification 2

Prepared for

**ADCO CONSTRUCTION PTY LTD**

7 July 2020

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# EXECUTIVE SUMMARY

Urbis has been engaged by ADCO Constructions Pty Ltd (The Proponent) to prepare the following Heritage Impact Statement for modifications to the State Significant Development at Bowral & District Hospital (the subject site).

ADCO have undertaken a State Significant Development (SSD) at Bowral & District Hospital involving the provision of new facilities. ADCO are seeking a Second Modification for the development, for the relocation of the Med Gas and Oxygen Enclosure and a generator.

While the subject site is not listed on the Wingecarribee Local Environmental Plan 2010, or the State Heritage Register, it is in proximity to locally listed items. These include the following:

- Bowral Conservation Area (Item No. C059, C089 & C235).
- Bradman Oval (Item No. I541).
- Bradman Museum Collection and Grandstand. (Item No. I469).

It should be noted that Bradman Oval is also listed on the State Heritage Register (SHR) as '*Bradman Oval and Collection of Cricket Memorabilia*' Database No. 5014211.

The subject site for Modification 2 to SSD 8980 comprises the north western corner of the Bowral and District Hospital grounds, which is currently occupied by a car park. This does not comprise any heritage items and is not listed within a Heritage Conservation Area (HCA). This is within the vicinity of heritage items as identified in Section 5 above. The subject site is not assessed as containing any heritage significance.

The proposed development involves the relocation of medical gas cylinders, oxygen tank and generator to the north western corner of the hospital grounds (presently a carpark), with these facilities housed in a small brick structure with blockwork façade. This development will not impact the surrounding heritage context. This development will be set back from the road and thus the adjacent Heritage Conservation Area, and the brick wall will allow the medical gas facilities to blend into the backdrop of the hospital redevelopment rather than visually dominating the hospital and streetscape. The proposed development is necessary to service the new hospital buildings constructed under SSD 8980 and does not involve negative impacts to heritage items identified in the vicinity.

The proposed works within the subject site are supported on heritage grounds and recommended for approval.

# 1. INTRODUCTION

## 1.1. BACKGROUND

Urbis has been engaged by ADCO Constructions Pty Ltd (The Proponent) to prepare the following Heritage Impact Statement for modifications to the State Significant Development at Bowral & District Hospital (the subject site).

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It should be noted that Bradman Oval is also listed on the State Heritage Register (SHR) as '*Bradman Oval and Collection of Cricket Memorabilia*' Database No. 5014211.

## 1.2. SITE LOCATION

The site is located at 97-103 Bowral Street, Bowral, New South Wales. This is legally described as Lot 4 DP858938. This is indicated in red on Figure 1 below. The works under this Modification are proposed only to occur in the north western portion of the lot, indicated in blue on Figure 1 below.



Figure 1 – Location of the subject site, lot indicated in red and site indicated in blue.

Source: SixMaps

## 1.3. METHODOLOGY

This Heritage Impact Statement has been prepared in accordance with the NSW Heritage Division guidelines 'Assessing Heritage Significance', and 'Statements of Heritage Impact'. The philosophy and process adopted is that guided by the Australia ICOMOS Burra Charter 1999 (revised 2013).

Site constraints and opportunities have been considered with reference to relevant controls and provisions contained within the Wingecarribee Local Environmental Plan 2010 and Bowral Township Development Control Plan 2010 for Wingecarribee Shire.

## 1.4. AUTHOR IDENTIFICATION

The following report has been prepared by name Meggan Walker (Heritage Consultant). Stephen Davies (Director, Heritage) has reviewed and endorsed its content.

Unless otherwise stated, all drawings, illustrations and photographs are the work of Urbis.

## 1.5. THE PROPOSAL

The proposed work will involve the relocation of existing medical gas storage chamber from the southern side of the hospital to the north western corner of the site, adjacent to the driveway entrance from Bowral Street beside the ambulatory access vehicle ramp. This will also involve the placement generator to the north of the gas storage chamber.

The medical gas facilities and generator enclosure will be housed in a rendered and face blockwork structure with metal cladding to the south and deco wood fence in natural spotted gum colour, to the north. Plans are included below.

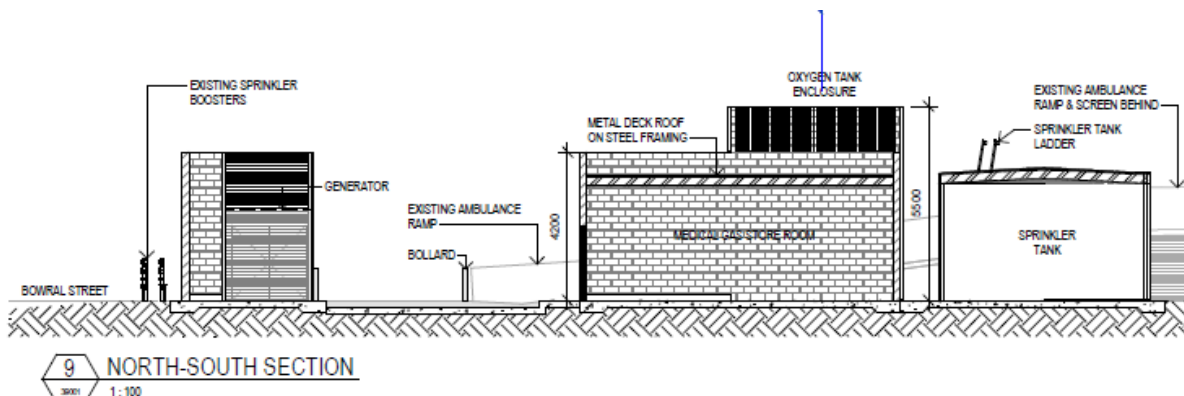


Figure 2 – Medical gas storage facility and generator store, north-south section.

Source: MSJ Architects 2020, for Health Infrastructure NSW.

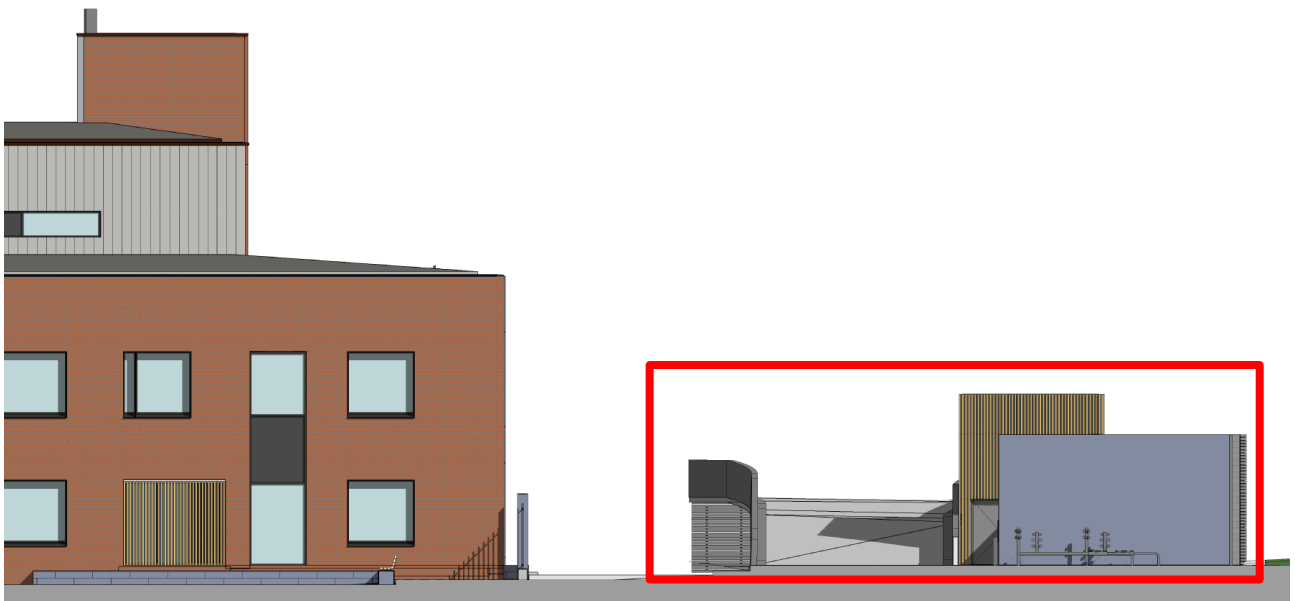


Figure 3 – Medical gas and generator storage facility with new hospital development, render. Medical gas and generator store indicated in red.

Source: MSJ Architects 2020, for Health Infrastructure NSW.



## 2. SITE DESCRIPTION

### 2.1. BOWRAL HOSPITAL

The following description of the Bowral Hospital site and surrounds is adapted from Weir Phillips, 2018.<sup>1</sup>

Bowral and District Hospital is located to the east of the township of Bowral. It is irregular in shape and has frontage to the north to Bowral Street; to the east to Mona Road; to the south to Ascot Road; and to the west to Sheffield Road.

The Bowral Hospital occupies the majority of the block bound by the above roads, with the exception of the Bowral Private Hospital and adjacent Imaging Centre in the north western corner of the block. The Hospital area is 32,485sqm, excluding the private hospital. The Hospital site slopes gently from the south western corner to the north eastern corner.

The Hospital site accessed via Mona Road, Sheffield Road, Ascot Road and Bowral Street. There are clipped hedges along the Sheffield Road boundary and a timber paling fence the Ascot Road boundary. There is no fencing along the Bowral Street or Mona Road boundaries.

There is a large area of lawn with scattered planting, many being memorial plantings, in the north eastern corner of the site. This part of the grounds was first laid out in 1936 by Mr. Kerr, Botanic Gardens, Sydney, in association with the planning of the New Hospital.

A second area of significant planting is found around the original Hospital buildings, adjacent to Sheffield Road. This area contains mature plantings including magnolia, camellias and rhododendrons. The species of trees on the site are identified in a separate Aborist Report.

There are hard surfaced car parks in the south western corner, accessed off Ascot Road and in the north western corner accessed off Bowral Road. A network of walkways – some covered – connects the various parts of the Hospital.

The buildings on the site include free standing and interconnected buildings; they range from single storey weatherboard buildings to three storey masonry buildings. Many of the buildings are linked by covered ways.

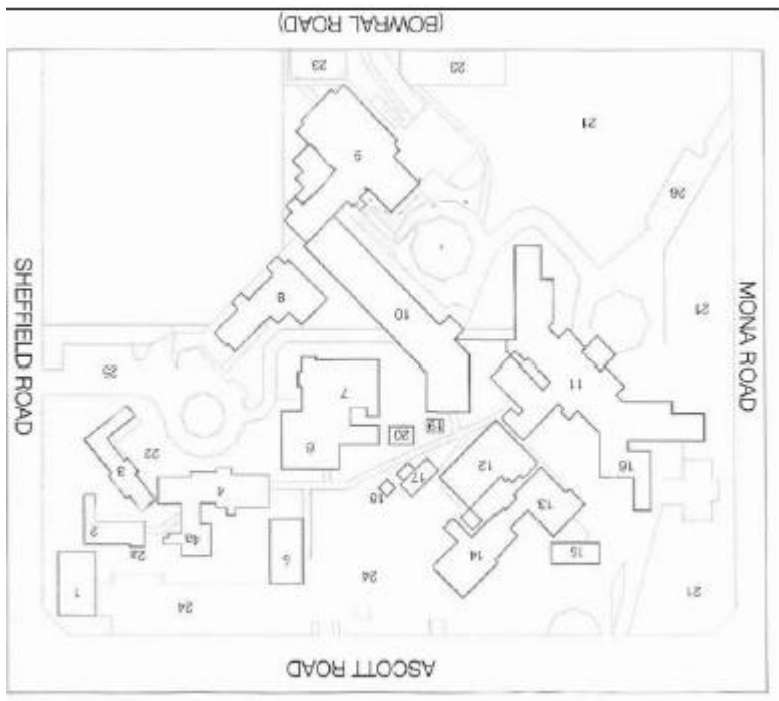


Figure 4 – Bowral Hospital layout plan.  
Source: Weir Phillips 2018.

<sup>1</sup> Weir Phillips, 2018. *Heritage Impact Statement, Bowral and District Hospital, SSD 8980, No. 97-103 Bowral Street, Bowral.*

### 2.1.1. Surrounding Area

The Hospital is located within a predominately residential area that is underlain by a strong grid subdivision pattern of wide streets. Dwellings are predominately detached and set within small garden surrounds. These dwellings date from the Late Victorian/Federation period to the current day and are one and two storeys in height. Zonings in the immediately surrounding area are low and medium density and recreational.

To the north west of the Hospital lies the one and two storey buildings and car park of the Private Hospital. To the north, on the opposite side of Bowral Road, lies Glebe Park, with the Bradman Museum and oval beyond. As set out below, the Oval and the Bradman Museum are listed as local heritage items. It is further noted that the area to the north of Bowral Street forms part of the Bowral Conservation Area. To the east and west of the Hospital lie the predominately single storey private dwellings fronting Sheffield and Mona Streets. To the south of the Hospital lies Losbey Park.

The hospital site is directly to the south of the Bowral Heritage Conservation Area, central civic precinct. The Heritage Inventory Sheet for this item describes it thus:

*The Central Civic Precinct: situated along the north-south axis of Bendooley St, this precinct contains several fine civic buildings (Courthouse, Town Hall, Children's Library, Municipal Library), churches and a primary school. These civic and community uses are a focus for the civic life of Bowral separate from the commercial area. There is a fine mixture of styles from the high Victorian and Federation periods.<sup>2</sup>*

## 2.2. THE SUBJECT SITE

The subject site is located broadly to the north west of the Hospital site, accessed by Bowral Street. The subject site currently consists of a carpark, adjacent to the access ramp. There are no structures currently present on the site. The subject site is located in front of the Accident and Emergency and Short Stay building, to the east of the private hospital buildings. The subject site is surrounded by vegetation on the west and south sides, with the east side bordered by the access ramp and further parking facilities.



Figure 5 – construction site at Bowral and district Hospital

Source: Urbis, 2020.



Figure 6 – Subject site to the right of the image

Source: Urbis, 2020

<sup>2</sup> Heritage Inventory Sheet, Bowral Heritage Conservation Area.





Figure 7 – View south of subject site, with accident and emergency building in the background.

Source: Urbis, 2020.



Figure 8 – View north of the subject site.

Source: Urbis, 2020.



Figure 9 – southern side of present development area.

Source: Urbis, 2020.



Figure 10 – Existing medical gas store.

Source: Urbis, 2020.

## 3. HISTORICAL OVERVIEW

This history has been derived from the following:

- Weir Phillips, 2018. *“Heritage Impact Statement, Bowral and District Hospital SSD 8980, No. 97-103 Bowral Street, Bowral.”*
- Weir Phillips, 2019. *“Bowral and District Hospital SSD 8980 Modification. No 97-103 Bowral Street, Bowral.”*

### 3.1. AREA HISTORY

The first recorded Europeans to visit the Southern Highlands of New South Wales was a party lead by the emancipist, ‘wild white man’ and explorer, John Wilson in 1798. Wilson and his companions reached the Wingecarribee River, more than 161km south west of Parramatta. A second expedition, also lead by Wilson, reached Mount Towrang, near present-day Goulburn. The two expeditions revealed much of the rich tablelands of New South Wales. European settlement, however, was delayed by the authorities reluctance to interfere with the Cowpastures area (present day Campbelltown and Camden), where the government cattle grazed.

John Warby, George Caley, Charles Throsby, Hamilton Hume and others followed in the footsteps of the early explorers and completed much of the exploration of the Southern Highlands. In 1820, Governor Macquarie chose the site for the village of Bong Bong, close to the ford on the Wingecarribee River; the village was laid out the following year on the original road south. Bong Bong, however, was flood prone. In the early 1840s, Berrima was surveyed and laid out with the intention that it be developed as the main administrative centre for the area.

The name ‘Bowral’ pre-dates the creation of the town that now bears the name. The name was derived from ‘Bowrel’, which was the Aboriginal name given to the area. The word is thought to have meant ‘high’ or ‘large’, in reference to Mount Gibraltar. In 1828 Major Thomas Mitchell noted in his Field Book:

*‘...walked to the top of Gibraltar the hill to the north of Mr. Oxley’s Station at Wingecarribee, called by the natives Bowrel (sic).’*

The same meaning, albeit with a second variation of the spelling, ‘Bowrell’, is recorded by W.H. Well’s A Geographical Dictionary or Gazetteer of the Australian Colonies published in 1848.

The pioneering European settler in present-day Bowral was Lieutenant John Oxley, Surveyor General of NSW, who occupied land as a grazing run at Bargo in 1815, before relocating south to Wingecarribee in 1816. On 30 June, 1823, he received a grant of 2,400 acres, registered as ‘Weston.’ Oxley soon consolidated a holding encompassing 5,000 acres.<sup>6</sup> Oxley never occupied his grant, leaving it in the hands of his sons. The subject site stands on part of land grant re-issued to Oxley’s sons, John Norton Oxley and Henry Molesworth Oxley, on 15 August, 1855. Wingecarribee House, which still stands, was erected by the Oxleys in 1857.

East and southeast of the Oxley grants were large portions taken by Edward Riley, James Comer, William Walter, John Gollidge, Rev. J. Therry and Dr. W. Sherwin. To the south lay the substantial holdings of William Hutchinson. The land was mainly used for grazing.

The origins of the township of Bowral lie in a 200 acre subdivision carried out by John Norton Oxley in 1862 in anticipation of the coming of the railway. At first, the town was referred to in legal documents as Village of Wingecarribee, then as the Village of Bundaroo and finally, by 1867, as the Village of Bowral.

The township initially developed to service the needs of the men employed to construct the railway line to the south. Large camps were established in Mittagong and Bowral; hotels were among the first businesses established. When the railway line was opened from Mittagong to Moss Vale on 2 December, 1867, a station was built at Bowral. The railway station had the effect of diverting settlement from around the older settlement of Berrima to areas adjacent to the railway stations.

The Village of Bowral developed slowly but steadily. In 1861, the first school was established in a bark hut. Two years later, Bishop Barker visited the district and laid the foundation stone for a building to serve as a church and school on land set aside by J.N. Oxley for this purpose. The school opened in 1863. It was also in this year that the first ‘hospital’ was established by Jacob Ward, a non-licenced ‘doctor’ who ran a surgery and hospital out of his timber slab and bark home.

## 3.2. SITE HISTORY

The growth of Bowral in the 1880s and the promise of future growth in the near future lead to calls for the provision of better health services. On 27 July, 1885, Dr Bernard J. Newmarch of Bowral and Mr. Copeland Bennett, stationmaster of Bowral, called the first public meeting to discuss the establishment of a hospital in the district. 22 men representing Berrima, Bowral, Mittagong and Moss Vale attended the meeting held at the Bowral School of Arts. The meeting was informed that the Government would give a pound for pound raised towards the setting up of a hospital. The motion to establish a cottage hospital in the district was carried unanimously.

In May 1886 that the Inspector of Public Charities visited the district to determine the best location for a hospital. Berrima was dismissed as being too far from the railway line; Sutton Forrest was not central enough. Eventually he recommended that the site known as 'Carter's land' or 'Carter's Subdivision and adjoining the Glebe land close to St. Jude's Church in Bowral' be acquired for the hospital. He advised that he would only recommend Government aid be provided if an area of not less than eight acres were secured.

The area of land purchased by the Trustees of the Berrima District Cottage Hospital from Carter's Subdivision in March 1888 was only five and a half acres. The land was purchased for £362 10s, with £100 paid immediately and the remainder due in December 1891.<sup>9</sup> This site was considered sufficient, given that the scale of the hospital had been downsized from initial plans. There was some local opposition to the hospital arising out of concerns that it would treat infectious diseases. As noted above, Bowral by this time had developed as a tourist destination and retreat for Sydney's elite. It was feared that a hospital treating infectious diseases could drive visitors away. To overcome this opposition, an undertaking was obtained that the hospital would not treat infectious cases.

In March 1888, Architect Harry Chambers Kent was appointed to draw up plans for a building not to exceed £800.<sup>11</sup> As set out below, Kent may have been known to the Trustees because of his work on the Fairfax family's Southern Highland retreat Woodside. He also had an interest in hospitals, serving for many years as the Honorary Secretary for the Children's Hospital. Clearing of the Hospital Site was reported as being well underway by late May 1888. A sketch plan was submitted and approved by the Government in September 1888.

The Berrima District Cottage Hospital was opened on 4 September, 1889, on a day declared a public holiday for the district. The opening ceremony was performed by the Hon, John Lackey, M.L.C.<sup>17</sup> The first patient was admitted two days later. The Hospital was one of several improvements being planned or completed in Bowral at this time. The Australian Town and Country Journal of 10 August, 1889 described Bowral a progressive 'go-ahead' township:

*'At present time we seem to be in the public building stage. The new public school is nearing completion. The Berrima District Cottage Hospital...will be open in a month. The contractor has begun to put up the walls of the council chambers, close by the School of Arts; and the town is rejoicing that, after years of agitation, a new station is to replace the building on whose platform so many unhappy passengers have shivered on cold winter nights.'*

the Hospital was designed in accordance with the accepted medical practices of the day. It was orientated to the north east and set within landscape grounds that were not only a symbol of civic pride but considered conducive to healing.

From the first, the layout and beautification of the Hospital grounds was carefully considered. Following the opening of the Hospital one hundred and thirty two trees arrived from the Botanic Gardens in Sydney for planting around the Cottage Hospital. A six strand wire fence was erected around the grounds and gates placed at the main entry on Bowral Road. The carriage way that led from the gates to the Cottage Hospital was planted on either side with linden (tilia) trees. The yards were asphalted and ash paths laid. Pinus insignis trees were planted along the southern boundary and hedges along the remaining boundary fences. A rose bed was later established in front of the main entrance to the Hospital building and a tennis court constructed within the grounds. A later plan indicates that the tennis court was located in the corner of Sheffield Road and Ascott Street.

As for many cottage hospital of this period, funding was a significant concern. Payments from the government were often slow in coming. The promised government funds for the initial land purchase and building, for example, were not received until three months after the building was completed. These funds amounted to £375 towards the cost of the land and £500 towards the cost of the building.

Funds for the Hospital were raised by subscription and fund raising events, including an Annual Demonstration annually on the first weekend in October and Hospital Sundays, when church collections

were contributed to hospital funding. The Ladies Working Association (later the Auxiliaries Ladies Committees and more recently the Friends of the Bowral and District Hospital) were pivotal in raising funds during the planning of the Hospital and remained so. Funds came from other sources. Subscription fees and patients fees, when they could be collected at all, accounted for small amounts. Numerous social events were held and reported on by the local press. Donations were also received in kind, such as old linen, fresh fruit and vegetables and cream.

Even before the first building was opened, there were discussions about the expansion of the hospital. The most urgent need was for a mortuary. In September 1889 the decision was taken to build a mortuary on the south eastern corner of the grounds. An additional ward of four beds was added to the main hospital building in 1889-1890. Both projects were completed and certified by H.C. Kent. The Hospital progressively expanded over the following twenty years. Various alterations and additions were carried out to the main building; a fever ward (1896); first operating theatre (1898); and new nurses bedrooms and boardroom (1902).

The Hospital, now known as the Berrima District Hospital, began to expanded in the 1920s as more land was purchased, existing buildings were added to and new buildings erected. In October 1920, additional land was purchased from the Carter family, increasing the Hospital site to ten acres. In 1932, the Hospital also purchased 22ft of land along the western side of Mona Road.

The Hospital expanded alongside the township and district it served. 1920s were years of growth in Bowral and the surrounding area. The Sydney Morning Herald, for example, reported 'remarkable growth' within the municipality in 1924, when no fewer than 60 new buildings were erected and a high value of works to existing buildings carried out. The value of the cost of works had almost doubled from the preceding year. The availability of electricity was one of the reasons put forward for growth. The paper predicted that the boom was likely to continue, with 'many contracts let.

By the mid 1920s, the Hospital was experiencing chronic over-crowding as the population of the surrounding area continued to grow. Considerable advances were also being made in medicine, which, in turn, had an impact on hospital design theory. In March 1927, a hospital meeting carried the motion that a new hospital be erected on the Bowral Hospital site. By August 1927, it was decided that a competition for designs and plans be held, offering a prize of £100. The winner was Mr. Byera Hadley. Nothing was, however, done until the early 1930s when new plans were prepared by the Government Architects Branch, under Government Architect, Mr. Edwin Smith. The scheme was later reduced in size and cost. The foundation stone for the New Hospital was eventually laid on 24 April, 1934.<sup>29</sup> The contractor was A. Stephens & Son.

The New Hospital was opened in 1935. The main ward block had a central section of two storeys, providing accommodation for thirty-nine beds- twenty nine public, four intermediate, eight private and three children's beds. The ground floor comprised the main entrance porch and hall, office, small outpatients department, dispensary, x-ray department, rooms for dressing, a nurses' dining room and provision for a lift to be installed a later date. The New Hospital also comprised kitchen, laundry, store and boiler house. The children's ward was named the Soldiers' Memorial Ward and the women's ward, the Yeoman's Memorial Ward. Figure 11 provides an undated photograph of the New Hospital.



Figure 11 – New hospital buildings, undated but prior to 1941.  
Source: Weir Phillips, 2019.



Once the New Hospital was operational, the former Cottage Hospital was adapted to provide accommodation for the nursing and domestic staff, comprising eight bedrooms, laundry and bathrooms. Design work was carried out by the NSW Government Architects Branch.

A plan for the layout of the grounds around the New Hospital was prepared by Mr. Kerr of the Botanic Gardens in Sydney. The plan provided for ornamental trees and shrubs, lawns, gravel drives and new fences on the eastern side of the property. Much of this landscaping remains in the north eastern corner of the site.



Figure 12 – aerial photograph of the hospital site, c. 1950

Source: Weir Phillips, 2019.

The Working Drawings for a new nurses home at Berrima Hospital were prepared by private architect T.E. Mahony from sketches prepared by the Government Architects Branch. The plans were signed off by Government Architect Cobden Parks in 1950. The foundation stone for a new Nurses' Home near Sheffield Road was laid on 27 September, 1952. Construction placed the estimated cost of construction at £95,000. The Nurses Home officially opened on 20 August, 1954. The Home accommodated 78 people and was named Tyler House in memory of one of the Hospital's greatest benefactors.

The use of private- public partnerships by the Public Works Department continued. Working drawings for the Milton Park Wing, entitled New Maternity Block, were prepared by Spencer, Hanson and Partners from sketches prepared by the Government Architects Branch under Edward Farmer. The foundation stone for the Milton Park Wing was laid in 1959. The contractor was Max Cooper & Sons. The Milton Wing was officially opened on 12 March, 1961, providing 70 new beds, 30 maternity beds, 25 infant cots, 26 surgical beds, 14 children's beds, two operating theatres, a sterilising department, labour wards and supporting services. Local artist Nigel Rossborough decorated the walls of the children's ward with a mural of nursery rhymes. Support areas including the kitchen, laundry, boiler house and staff dining room were upgraded. The construction of the Milton Park Wing resulted in the removal of part of the original entrance carriageway and a row of linden trees. The latter were replanted, but few survived. The tradition of carrying out new landscaping works in conjunction with new building projects continued.

In 1968, the name of the Hospital changed to Bowral and District Hospital.

The Hospital continued to develop to serve the needs of the district. In 1970, the Isolation Unit was converted into the Watson Rehabilitation Centre (architects: Stranman, Fisher & Associates). Other works were later carried out to this building, including the addition of a cardiac centre (Lionel Todd & Associates; J.W. Thompson, Government Architect, 1984). Numerous changes have occurred since this time, including: the construction of a Special Nursing Unit, Operating Theatre upgrades; the construction of new Accident and Emergency Facilities (design and documentation Public Works, C. Johnson, Acting Government Architect, 1994); Medical Imaging Department; Staff Amenities Block; and Temporary Accommodation Units. In 1996, a private hospital was constructed in the north western corner of the original Hospital grounds.

The Bowral and District Hospital now forms part of the South Western Sydney Local Health District.



## 4. HERITAGE SIGNIFICANCE

### 4.1. WHAT IS HERITAGE SIGNIFICANCE?

Before making decisions to change a heritage item, an item within a heritage conservation area, or an item located in proximity to a heritage listed item, it is important to understand its values and the values of its context. This leads to decisions that will retain these values in the future. Statements of heritage significance summarise the heritage values of a place – why it is important and why a statutory listing was made to protect these values.

### 4.2. SIGNIFICANCE ASSESSMENT

The Heritage Council of NSW has developed a set of seven criteria for assessing heritage significance, which can be used to make decisions about the heritage value of a place or item. There are two levels of heritage significance used in NSW: state and local. The following assessment of heritage significance has been prepared in accordance with the 'Assessing Heritage Significance' guides.

The below significance assessment applies only to the subject area and not to the wider Bowral & District Hospital. Please refer to Weir Phillips 2018 for an assessment of the hospital itself.

Table 1 Assessment of Heritage Significance

Criteria	Significance Assessment
<b>A – Historical Significance</b>  <i>An item is important in the course or pattern of the local area's cultural or natural history.</i>	<p>The subject site does not contain any historical significance. The subject site forms part of the wider Bowral and District Hospital site which does have historical significance on a local level as a result of its use as a hospital from the late 1800s, however the actual subject site itself has no significant role in the wider hospital.</p>
<u>Guidelines for Inclusion</u> <ul style="list-style-type: none"> <li>shows evidence of a significant human activity <input type="checkbox"/></li> <li>is associated with a significant activity or historical phase <input type="checkbox"/></li> <li>maintains or shows the continuity of a historical process or activity <input type="checkbox"/></li> </ul>	<u>Guidelines for Exclusion</u> <ul style="list-style-type: none"> <li>has incidental or unsubstantiated connections with historically important activities or processes <input checked="" type="checkbox"/></li> <li>provides evidence of activities or processes that are of dubious historical importance <input type="checkbox"/></li> <li>has been so altered that it can no longer provide evidence of a particular association <input type="checkbox"/></li> </ul>
<b>B – Associative Significance</b>  <i>An item has strong or special associations with the life or works of a person, or group of persons, of importance in the local area's cultural or natural history.</i>	<p>The subject site does not have any associative significance. The site is associated with the Bowral &amp; District Hospital, which holds local associative significance due to its connection with individuals who have worked at the hospital as well as those who have designed the site, including Harry C. Kent and the Governments Architect Branch. The subject itself is not associated with any significant groups or individuals and is purely functional.</p>
<u>Guidelines for Inclusion</u>	<u>Guidelines for Exclusion</u>

<ul style="list-style-type: none"> <li>shows evidence of a significant human occupation <input type="checkbox"/></li> <li>is associated with a significant event, person, or group of persons <input type="checkbox"/></li> </ul>	<ul style="list-style-type: none"> <li>has incidental or unsubstantiated connections with historically important people or events <input checked="" type="checkbox"/></li> <li>provides evidence of people or events that are of dubious historical importance <input type="checkbox"/></li> <li>has been so altered that it can no longer provide evidence of a particular association <input type="checkbox"/></li> </ul>
<p><b>C – Aesthetic Significance</b></p> <p><i>An item is important in demonstrating aesthetic characteristics and/or a high degree of creative or technical achievement in the local area.</i></p>	<p>The subject site is of no aesthetic significance. The subject site is currently a carpark designed for functionality.</p>
<p><u>Guidelines for Inclusion</u></p> <ul style="list-style-type: none"> <li>shows or is associated with, creative or technical innovation or achievement <input type="checkbox"/></li> <li>is the inspiration for a creative or technical innovation or achievement <input type="checkbox"/></li> <li>is aesthetically distinctive <input type="checkbox"/></li> <li>has landmark qualities <input type="checkbox"/></li> <li>exemplifies a particular taste, style or technology <input type="checkbox"/></li> </ul>	<p><u>Guidelines for Exclusion</u></p> <ul style="list-style-type: none"> <li>is not a major work by an important designer or artist <input checked="" type="checkbox"/></li> <li>has lost its design or technical integrity <input type="checkbox"/></li> <li>its positive visual or sensory appeal or landmark and scenic qualities have been more than temporarily degraded <input type="checkbox"/></li> <li>has only a loose association with a creative or technical achievement <input type="checkbox"/></li> </ul>
<p><b>D – Social Significance</b></p> <p><i>An item has strong or special association with a particular community or cultural group in the local area for social, cultural or spiritual reasons.</i></p>	<p>The subject site is of no social significance. While the wider hospital has been previously assessed as likely to have local significance under this criteria due to its role in the functioning of the community, the actual subject site does not contribute to this social significance.</p>
<p><u>Guidelines for Inclusion</u></p> <ul style="list-style-type: none"> <li>is important for its associations with an identifiable group <input type="checkbox"/></li> <li>is important to a community's sense of place <input type="checkbox"/></li> </ul>	<p><u>Guidelines for Exclusion</u></p> <ul style="list-style-type: none"> <li>is only important to the community for amenity reasons <input checked="" type="checkbox"/></li> <li>is retained only in preference to a proposed alternative <input checked="" type="checkbox"/></li> </ul>
<p><b>E – Research Potential</b></p> <p><i>An item has potential to yield information that will contribute to an understanding of the local area's cultural or natural history.</i></p>	<p>An assessment of the archaeological or research potential of the site is outside of the current scope of this report.</p>
<p><u>Guidelines for Inclusion</u></p> <ul style="list-style-type: none"> <li>has the potential to yield new or further substantial scientific and/or archaeological information <input type="checkbox"/></li> </ul>	<p><u>Guidelines for Exclusion</u></p> <ul style="list-style-type: none"> <li>the knowledge gained would be irrelevant to research on science, human history or culture <input type="checkbox"/></li> </ul>

<ul style="list-style-type: none"> <li>is an important benchmark or reference site or type <input type="checkbox"/></li> <li>provides evidence of past human cultures that is unavailable elsewhere <input type="checkbox"/></li> </ul>	<ul style="list-style-type: none"> <li>has little archaeological or research potential <input type="checkbox"/></li> <li>only contains information that is readily available from other resources or archaeological sites <input type="checkbox"/></li> </ul>
<p><b>F – Rarity</b></p> <p><i>An item possesses uncommon, rare or endangered aspects of the local area's cultural or natural history.</i></p>	<p>The subject site is currently a carpark, which is not rare in the Hospital with several other carparks located nearby, nor in the wider community.</p>
<p><u>Guidelines for Inclusion</u></p> <ul style="list-style-type: none"> <li>provides evidence of a defunct custom, way of life or process <input type="checkbox"/></li> <li>demonstrates a process, custom or other human activity that is in danger of being lost <input type="checkbox"/></li> <li>shows unusually accurate evidence of a significant human activity <input type="checkbox"/></li> <li>is the only example of its type <input type="checkbox"/></li> <li>demonstrates designs or techniques of exceptional interest <input type="checkbox"/></li> <li>shows rare evidence of a significant human activity important to a community <input type="checkbox"/></li> </ul>	<p><u>Guidelines for Exclusion</u></p> <ul style="list-style-type: none"> <li>is not rare <input checked="" type="checkbox"/></li> <li>is numerous but under threat <input type="checkbox"/></li> </ul>
<p><b>G – Representative</b></p> <p><i>An item is important in demonstrating the principal characteristics of a class of NSWs (or the local area's):</i></p> <ul style="list-style-type: none"> <li>cultural or natural places; or</li> <li>cultural or natural environments.</li> </ul>	<p>The subject site is currently a carpark and is not representative of any significance cultural or natural places or environments. The wider hospital has previously been assessed as being typical of a rural hospital modified overtime, with three distinct building styles noted across the Hospital Grounds – the original buildings (Late Victorian), the New Hospital (Interwar) and the Milton Park Wing (pre and Post World War II).</p>
<p><b>Guidelines for Inclusion</b></p> <ul style="list-style-type: none"> <li>is a fine example of its type <input type="checkbox"/></li> <li>has the principal characteristics of an important class or group of items <input type="checkbox"/></li> <li>has attributes typical of a particular way of life, philosophy, custom, significant process, design, technique or activity <input type="checkbox"/></li> <li>is a significant variation to a class of items <input type="checkbox"/></li> <li>is part of a group which collectively illustrates a representative type <input type="checkbox"/></li> </ul>	<p><u>Guidelines for Exclusion</u></p> <ul style="list-style-type: none"> <li>is a poor example of its type <input type="checkbox"/></li> <li>does not include or has lost the range of characteristics of a type <input checked="" type="checkbox"/></li> <li>does not represent well the characteristics that make up a significant variation of a type <input type="checkbox"/></li> </ul>

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>▪ is outstanding because of its setting, condition or size <input type="checkbox"/></li> <li>▪ is outstanding because of its integrity or the esteem in which it is held <input type="checkbox"/></li> </ul> |  |
|---|--|

### 4.3. STATEMENT OF SIGNIFICANCE

The subject site itself is not considered to meet any of the above criteria for local or state significance. The wider Bowral and District Hospital site is considered to meet several of the above criteria on a local level, including historic, associative, aesthetic and social significance.

The proposed development involving the relocation of medical gas storage chambers is not considered to impact the identified significance of the Bowral and District Hospital, with the subject site not considered to contribute to the significant elements of the hospital.

## 5. IMPACT ASSESSMENT

The subject property is not listed on either the Wingecarribee Local Environmental Plan 2010 (LEP) or the State Heritage Register.

The subject area is in proximity to items listed under the Wingecarribee Local Environmental Plan 2010, as shown on Figure 13. These include the following:

- Bowral Conservation Area (Item No. C059, C089 & C235).
- Bradman Oval (Item No. I541).
- Bradman Museum Collection and Grandstand. (Item No. I469).

It should be noted that Bradman Oval is also listed on the State Heritage Register (SHR) as '*Bradman Oval and Collection of Cricket Memorabilia*' Database No. 5014211.

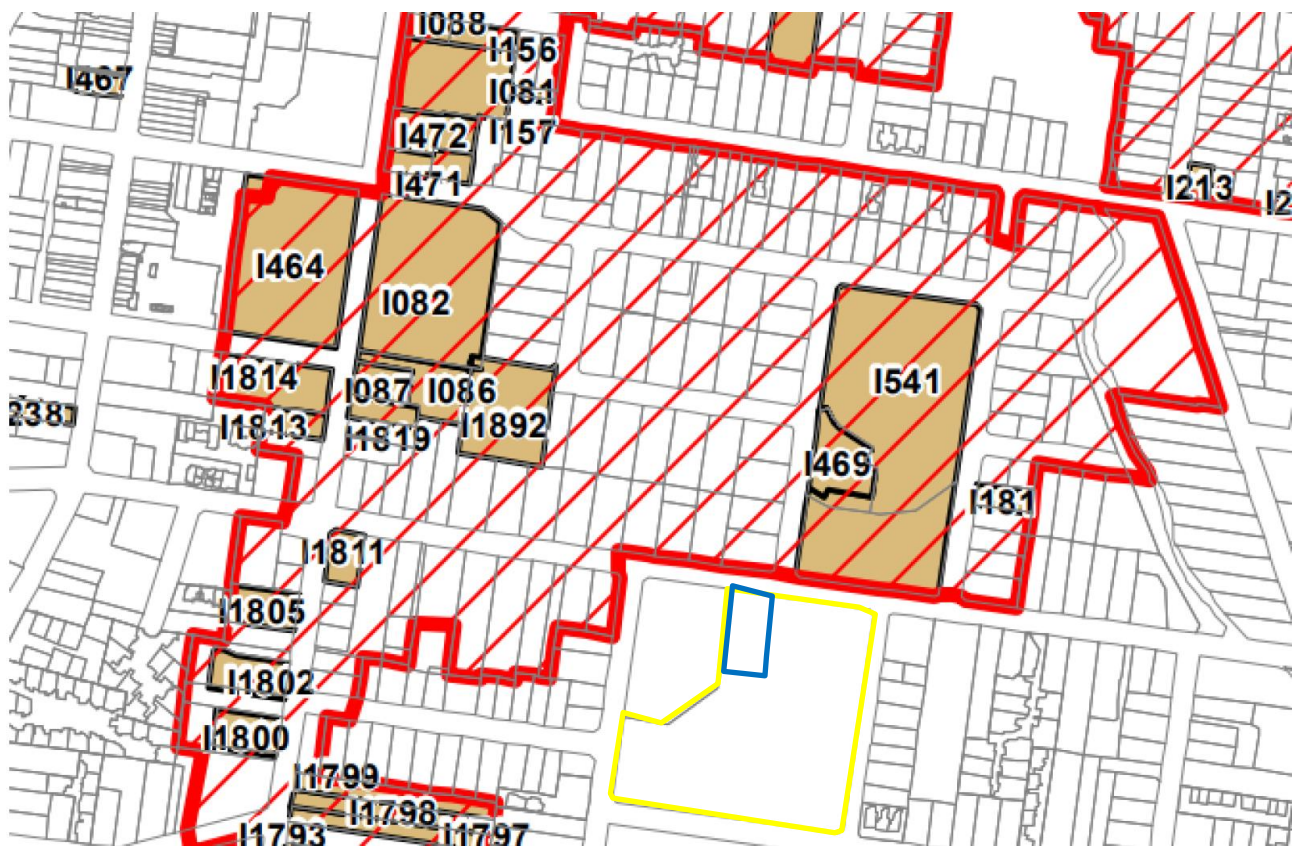


Figure 13 Wingecarribee Local Environmental Plan 2010 Heritage map, subject lot indicated in yellow, approximate location of the subject site indicated in blue.

Source: Wingecarribee LEP 2010, Her\_007C

## 5.1. STATUTORY CONTROLS

### 5.1.1. Local Environmental Plan

Table 2 Local Environmental Plan

Clause	Discussion
<p><b>(1) Objectives</b></p> <p><i>The objectives of this clause are as follows:</i></p> <p>(a) <i>to conserve the environmental heritage of the Wingecarribee Shire</i></p> <p>(b) <i>to conserve the heritage significance of heritage items and heritage conservation areas, including associated fabric, settings and views,</i></p> <p>(c) <i>to conserve archaeological sites,</i></p> <p>(d) <i>to conserve Aboriginal objects and Aboriginal places of heritage significance</i></p>	<p>The proposal will not impact any environmental heritage of the Wingecarribee Shire, or any listed heritage items on the Wingecarribee Shire LEP.</p> <p>While the subject site is in close proximity to a number of heritage items, including Bowral Heritage Conservation Area (Item No. C059,C089 &amp; C235), Bradman Oval (Item No. I541) and Bradman Museum Collection and Grandstand. (Item No. I469), the proposed works will not adversely impact these heritage items. The proposed works are sympathetic to the surrounding heritage items, being set back from the road and containing the medical gas chambers in a brick structure with blockwork façade which will blend with the hospital buildings surrounding it. The materials used, being rendered and face blockwork, deco wood and metal cladding, will ensure that the proposed development is consistent with the wider hospital redevelopment having the effect that the store facility will not stand out.</p>
<p><b>(4) Effect of proposed development on heritage significance</b></p> <p><i>The consent authority must, before granting consent under this clause in respect of a heritage item or heritage conservation area, consider the effect of the proposed development on the heritage significance of the item or area concerned. This subclause applies regardless of whether a heritage management document is prepared under subclause (5) or a heritage conservation management plan is submitted under subclause (6).</i></p>	<p>The effects of the proposed development on the surrounding heritage items have been considered and it has been determined that the proposed works will not negatively impact the heritage context. The proposed construction of the brick wall to house the medical gas tanks and generator is setback from Bowral Street and sympathetic to the adjacent Bowral HCA. This development will not impact the streetscape and will not detract from the views and settings of the surrounding heritage items. This option is preferable to leaving the medical gas tanks and generator uncovered in the same location, and the effect of the structure and the proposed materials is such that the storage facility will blend into the wider development.</p>
<p><b>(5) Heritage assessment</b></p> <p><i>The consent authority may, before granting consent to any development:</i></p>	<p>The subject site is adjacent to the Bowral HCA, with two other heritage items in proximity. These are:</p>

<p>(a) on land on which a heritage item is located, or</p> <p>(b) on land that is within a heritage conservation area, or</p> <p>(c) on land that is within the vicinity of land referred to in paragraph (a) or (b),</p> <p>require a heritage management document to be prepared that assesses the extent to which the carrying out of the proposed development would affect the heritage significance of the heritage item or heritage conservation area concerned.</p>	<ul style="list-style-type: none"> <li>▪ Bradman Oval (Item No. I541).</li> <li>▪ Bradman Museum Collection and Grandstand. (Item No. I469).</li> </ul> <p>The proposed development is determined to have no impact on the heritage significance of the Bowral HCA or proximity heritage items. The proposed development is set back from the road so as to not interfere with the streetscape, and through housing the medical gas tanks within the structure any potential visual impact is mitigated.</p>
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## 5.1.2. Development Control Plan

Table 3 Development Control Plan

Clause	Discussion
<p><b>A2.2.3 Heritage Conservation</b></p> <p><i>In assessing a land use application, Council will consider the extent to which the proposal contributes to the achievement of both zone objectives and the following Heritage Conservation objectives:</i></p> <p>(a) <i>Preserve and protect buildings of heritage and cultural value.</i></p> <p>(b) <i>Ensure that redevelopment immediately adjacent to buildings of heritage or cultural value in no way detracts from the visual quality or amenity of heritage buildings.</i></p> <p>(c) <i>Ensure that redevelopment within or immediately adjacent to Conservation Areas reflects the high heritage value of the Area and contributes to that value.</i></p>	<p>The proposed development is not within a heritage conservation area (HCA) nor is it within a listed heritage item. The proposed development is immediately adjacent to the Bowral Conservation Area and in the proximity of Bradman Oval (Item No. I541) and Bradman Museum Collection and Grandstand. (Item No. I469).</p> <p>The development proposes the installation of medical gas storage tanks in the north western carpark of the Bowral and District Hospital. While this is adjacent to the Bowral HCA, the proposal will not impact on the heritage value of the area.</p> <p>The proposal involves the construction of a small brick structure to contain the gas storage facilities. This will blend with hospital buildings behind the subject site through the use of the same materials and create a consistent visual setting for the streetscape of the hospital. This structure will be set back from the road, ensuring it does not visually dominate the streetscape or adjacent heritage conservation area.</p>
<p><b>A7.10 New Development within the vicinity of Heritage Items</b></p> <p><i>In considering a development application within the vicinity of Items of Heritage, Council shall not grant consent to the carrying out of development on any land to which this Clause applies unless it is satisfied that the development shall:</i></p>	<p>The proposed development involves the relocation of existing medical gas storage facilities from the south of the Hospital site to the north, adjacent to the Bowral HCA.</p> <p>The containment of the medical gas storage tanks within a small, one storey rendered and face blockwork satisfies this control. This will not dominate the streetscape and is instead designed to reduce any potential for visual impact to the</p>

*a) remain compatible with the average height, bulk and scale of buildings located on adjoining or nearby land and be adequately set back to ensure that heritage items and other significant buildings in the streetscape are not dominated by new or infill development.*

*b) seek unification with existing built forms on adjoining or nearby land, by ensuring respect for and compatibility with architectural elements including:*

*(i) the existing building line,*

*(ii) brickwork styles,*

*(iii) parapet style and rhythm,*

*(iv) window and door opening dimensions, proportions and spacing,*

*(v) fenestration treatment,*

*(vi) roof form and treatment,*

*(vii) materials and finishes.*

*c) ensure that the angle of awnings on the commercial street frontage is no greater than 20%, (i.e. within a range of 90 to 100 degrees from the wall of the building), and that the soffit (or underside of the awning) follows the line of the top of the awning and is not flat*

Bowral HCA through proposed relocation of the medical gas storage tanks. It will be constructed out of sympathetic material (blockwork, render, metal and deco wood, which are the same materials to be used in the wider hospital redevelopment) and set back from the road. The brick wall fronting Bowral street will be small in scale and generally more visually appealing than having the gas storage tanks uncovered.



## 6. CONCLUSION AND RECOMMENDATIONS

The subject site for Modification 2 to SSD 8980 comprises the north western corner of the Bowral and District Hospital grounds, which is currently occupied by a car park. This does not comprise any heritage items and is not listed within a Heritage Conservation Area (HCA). This is within the vicinity of heritage items as identified in Section 5 above. The subject site is not assessed as containing any heritage significance.

The proposed development involves the relocation of medical gas tanks and generator to the north western corner of the hospital grounds (presently a carpark), with these facilities housed in a small brick structure with blockwork façade. This development will not impact the surrounding heritage context. This development will be set back from the road and thus the adjacent Heritage Conservation Area, and the brick wall fronting Bowral Street will allow the medical gas facilities to blend into the backdrop of the hospital redevelopment rather than visually dominating the hospital and streetscape. The proposed development is necessary to service the new hospital buildings constructed under SSD 8980 and does not involve negative impacts to heritage items identified in the vicinity.

The proposed works within the subject site are supported on heritage grounds and recommended for approval.

## 7. BIBLIOGRAPHY AND REFERENCES

### 7.1. BIBLIOGRAPHY

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[Note: Some government departments have changed their names over time and the above publications state the name at the time of publication.]

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# APPENDIX A PLANS

