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Subject	Revised Scheme Design Statement	Project Name	Wagga Wagga Base Hospital Redevelopment Stage 3
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Design Statement

Wagga Wagga Base Hospital Redevelopment Stage 3 Updated Façade and Entry Design

Following the agency submissions and change of architect for the project, the design of the façade and entry components of the project has been modified to improve the proposed building and to respond to concerns raised by the agencies.

The principal aims of the design revision are to:

- 1) Better integrate the proposed building with both the recent Stage 2 Acute Services Building (ASB) and the Stage 1 Mental Health Building to provide a more unified architectural expression.
- 2) Better connect the Ground Floor public areas of the proposed building both internally and externally and provide better access to green spaces.
- 3) Simplify wayfinding by clarifying the address and main entry point to the hospital and to locate it at the junction point between the principle buildings.

Integration

The appearance of the completed campus should be that of a family of related buildings that are friendly, welcoming, non-institutional and inspiring. To achieve this, it is important that the massing of the new building is articulated in a way that avoids heaviness or monumentality, but rather projects openness, lightness and a lively connection to the surrounding community and fabric of the city. The design of the proposed building should be complementary to the existing Stage 1 and Stage 2 buildings and with a potential future multilevel carpark.

Considering the adjacency of the proposed building and the ASB, it was felt that the façade design of the two buildings should be better related and that the design intention of the earlier buildings should be carried through rather than ignored by the new building.

For this reason, an alternative cladding material to brick was sought. In addition, the structural work required to make a brickwork façade able to survive a seismic event, in accordance with the importance placed on the proposed building in a post-disaster scenario, proved to be overly complex and costly. The

proposed principal cladding material is now lightweight 3mm solid aluminium cassette panels with a powdercoat finish.

Each wing is articulated with a white 'frame structure', with the main east wing appearing to be elevated above that of the west wing, emphasising its importance as the building's public entry point. The 'frame' incorporates the external terraces at the front of the building and extends as canopies over the external public space at the foot of the building. It 'wraps' around the theatre and other built elements and ties in the roof to the new glazed entry foyer, providing the building with a lighter, more informal appearance.

Within the white 'frame', the multi-coloured green cladding 'dematerialises' the mass of the building in a similar way to the ASB cladding. While the colours of the Stage 2 ASB cladding, created with iridescent interference coatings, may appear as changeable as the waters of the Murrumbidgee, the colours of the Stage 3 building will be fresher and more direct, relating to natural vegetation and to the processes of growth, healing and renewal, which are at the core of the hospital's purpose.

The solid aluminium cladding cassettes are powdercoated in a variety of green shades and white. The white 'frame' elements project 50mm beyond the green panels, their exposed edges with the same colour and finish as the face. The random modulation of the windows and green panels suits the varying room layouts required and provides additional 'grain' to the long elevations. The mass of the upper and plant room floors is backgrounded with the secondary cladding material, dark grey sheet steel wall cladding with vertical profiles.

Cladding to the principal elevations of the east and north is set back at the base to express grey circular concrete columns, the resulting colonnade relating better to the pedestrian activity anticipated at the front of the building and the overhang shading the glazed façade below from the midday summer sun. A higher performance glass has been selected to protect against excessive heat gain when the sun is at a lower angle. The revised design adds new trees to the northern carpark for shading and general enhancement of that environment. A new row of deciduous trees immediately north of the basement carpark will provide summer shading to the public terrace above the basement.

Connection

The configuration of the proposed building's core has been changed to promote better access between each wing and to locate the passenger lifts directly facing the entry to the building, facilitating intuitive wayfinding. The service risers and fire stairs have been moved to the ends of the wings to enable more efficient clinical planning and future flexibility.

At ground level this provides better public access along the route from the ASB to the entrance to the new building, the retail café, the ambulatory clinics waiting area and eventually the theatre, which in turn has its own entrance from Docker Street.

To enhance this connection, the Spiritual Room and pastoral facilities are now proposed to be located in the ASB, closer to the main entry and acute services. The ground floor Ambulatory Care functions have been shuffled accordingly to provide more space for the retail café and associated seating areas and, most importantly, provide a connection with access and views west from the café to the external terrace on the north side of the west wing. This enhanced connectivity will promote better activation of both internal and external public spaces.

The ground floor external canopy will now extend all the way from the ASB around the north side of the proposed building to the theatre entrance either as a canopy or a shading pergola. As part of the next design phase we will be assessing the feasibility of constructing a deck to the north of the retail café that will provide continuous level external pedestrian access around the north west corner of the building to the northern terrace. This will remove the need to pass through the northern carpark when walking between the east and west sides of the campus, avoiding possible conflicts between pedestrians and vehicles entering and exiting the basement car park.

A plan diagram showing proposed circulation routes, pedestrian and vehicular is attached.

The revised design includes doors in the glazed façade providing public access between the retail café and external seating areas and associated green space to the east, north and west. The ceiling and external canopy of the retail café is canted upwards to provide a welcoming gesture to the hospital approach and to allow in winter sun. During the next design phase detailed consideration will be given to CPTED issues and the minimisation of visual and physical barriers.

The project is providing approximately 2,775m² of new green space. Of this only around 500m² is located to the south of the proposed building, the remainder having excellent solar access. An access ramp has been added as part of the revised design to provide access to this green space to the south of the west wing, which will be an attractive outdoor space in summer. However, the main purpose of the green space in this location is to provide an attractive natural outlook from the inpatient bedrooms on the levels above in both wings of the proposed building. This outlook would not be available if carparking were located in this courtyard. It should also be noted that relocating parking further from Docker Street would increase the area of roadway required to access that parking, thereby reducing green space.

The location of utility infrastructure to the west of the proposed building is necessary for technical, cost and access reasons, and no suitable alternate area is available. It should be noted that until recently this site was occupied by a building far larger than the proposed utility infrastructure, and that the majority of the footprint of the former building will become new green space.

The revised landscape design has developed areas screened from vehicles with trees and vegetation including the Northern Lineal Landscape and Terrace, the North East Pocket Park, the North West Park, the Western Park outside the theatre entrance, the Southern Courtyard (which is now accessible) and the Cultural Courtyard, which provide a level of privacy while remaining in accordance with CPTED principles.

Arrival sequence and wayfinding

With both the existing and proposed buildings set well back from Edward Street, it is imperative that the architectural ensemble projects a legible, large scale arrival sequence. Being directly adjacent and connected to the ASB, it was considered that the design of the proposed building needs to be not just complementary, but also should articulate their union with a shared public space that forms a new main entry to the hospital. The revised forecourt design is focused on the entry foyer, and also reduces vehicular congestion and provides additional green space.

The revised design has a prominent double height glazed entry foyer that is conceived as a link or 'hinge' between the ASB and the proposed building. Its height makes it clearly visible from Edward Street and firmly indicates its status as the main entry to the hospital. The tilted up canopy and extensive glazing provides a gesture of welcome and openness. The drop-off area is now closer to the front door, and the configuration of the foyer works in conjunction with the existing angled geometry of the ASB public area,

focusing attention on the existing reception counter. Internal wayfinding is simplified with a simple choice of left to the ASB, right to the ACB. The glazed entry foyer is continuous both with the existing ASB atrium and the new double height 'Hospital Street' leading to the new retail area and Ambulatory Care clinics. That is, the double height foyer extends into both buildings, uniting them as a single facility.

The revised design retains a dedicated entry in the middle of the eastern façade, but the articulation of the façade and entry canopy indicates this as having a secondary status to the main hospital entry which is further south along the approach route. Signs will support wayfinding by directing Ambulatory Care patients to use the secondary entry as the shorter route, but the transparency of the façade and the ability to see the retail café, the entry door to the clinics and the bank of lifts from outside the building, will greatly assist intuitive wayfinding as well as helping to activate the public realm.

The interior design will be developed during the forthcoming design development phase.

