

Illuminated, Reflective Vinyl And Standard Vinyl Graphics

There are a total of five internally illuminated signs:

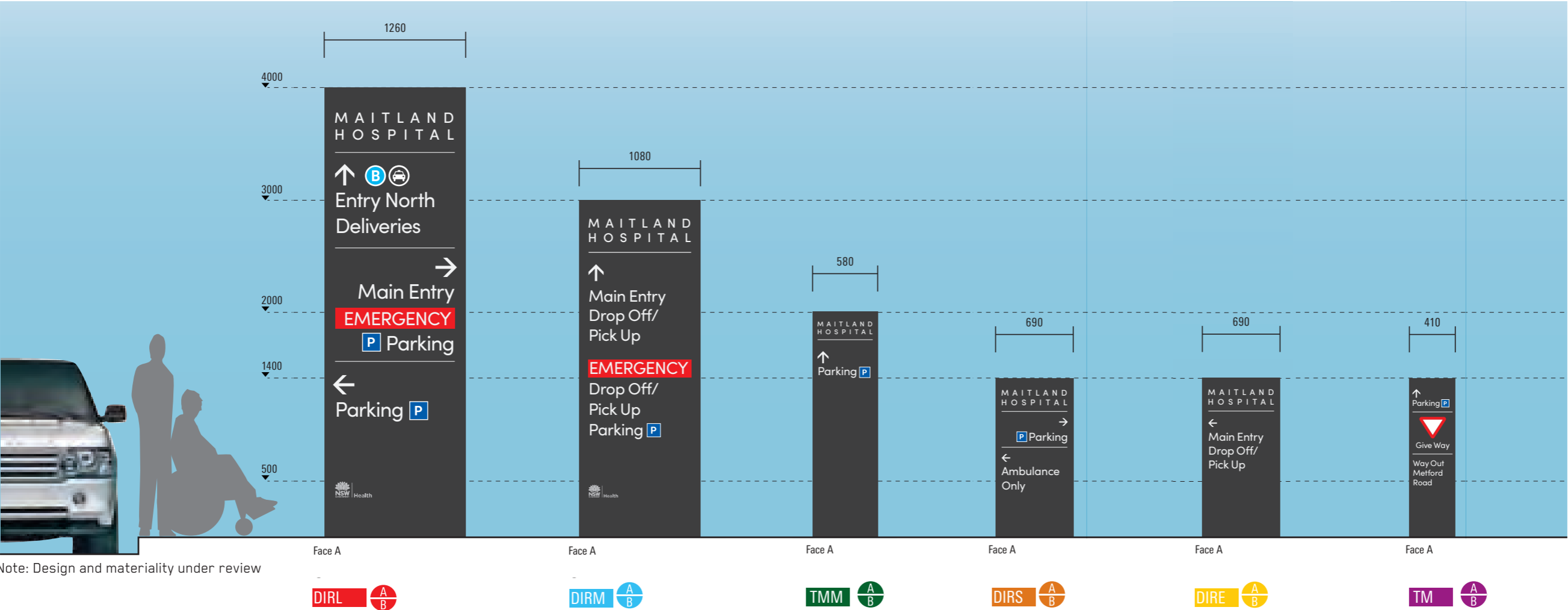
- Hospital identification on building.
- Hospital entry identification.
- Emergency identification on building.
- Markers 01 and 02.

Following that group are the markers that feature Grade 2 reflective vinyl, where the vinyl reflects light when hit by headlights. These are markers numbered 12, 18, 19, 20, 21 and 22.

All other markers feature standard cast vinyl or digitally printed graphics.

Construction Method And Materials

All signs feature engineered footings, galvanised frames and pre-coated composite or high-density fibreboard cladding panels. Internally illuminated signs feature five-year LED lighting and emit the light through opal white acrylic.





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MAIN BUILDING IDENTIFICATION
Approx. 16500W
Cap Height 700mm

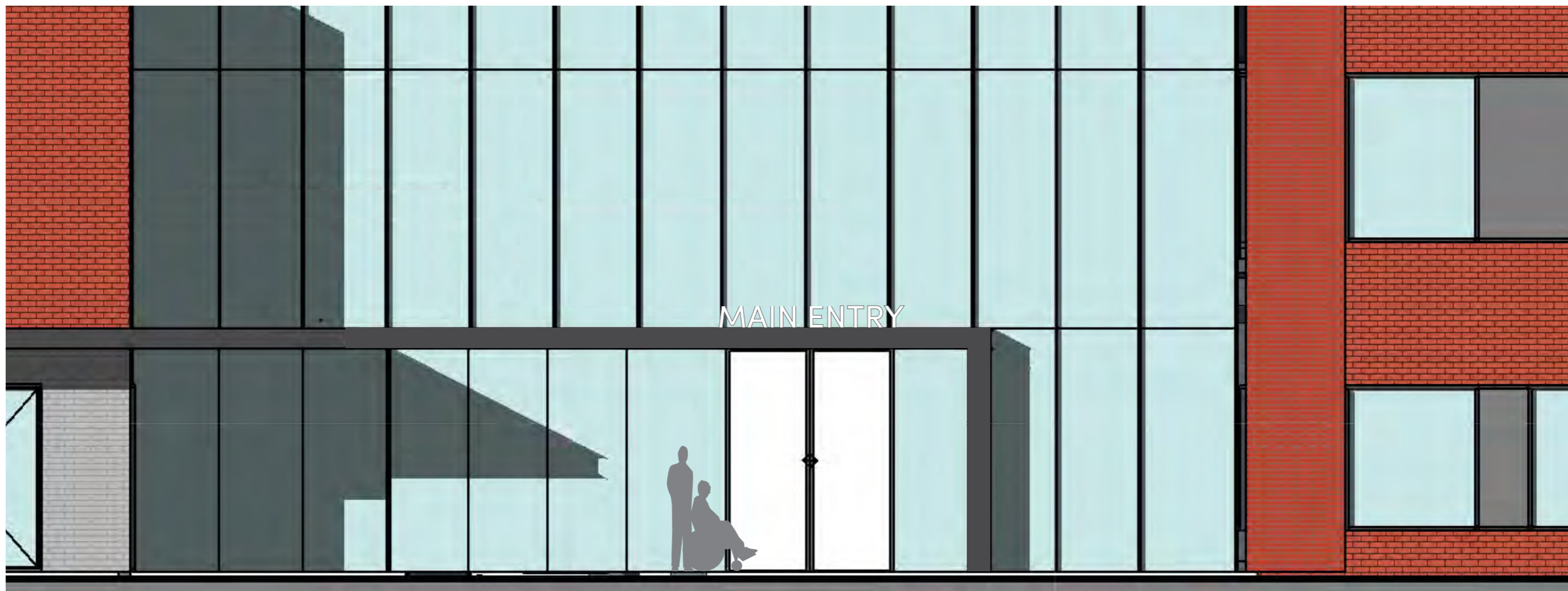


NOTE: Signage is integrated and flush with wall.

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EMERGENCY SIGN TO BUILDING
Width 16000MM
Sign Height 1100mm approx

EMERGENCY SIGN TO AWNING
Width 13000MM
Cap Height 700mm



33 - OPTION 01



MAIN ENTRY IDENTIFICATION
6400W
Cap Height 'Main Entry': 310mm
Internally Illuminated



24

EID

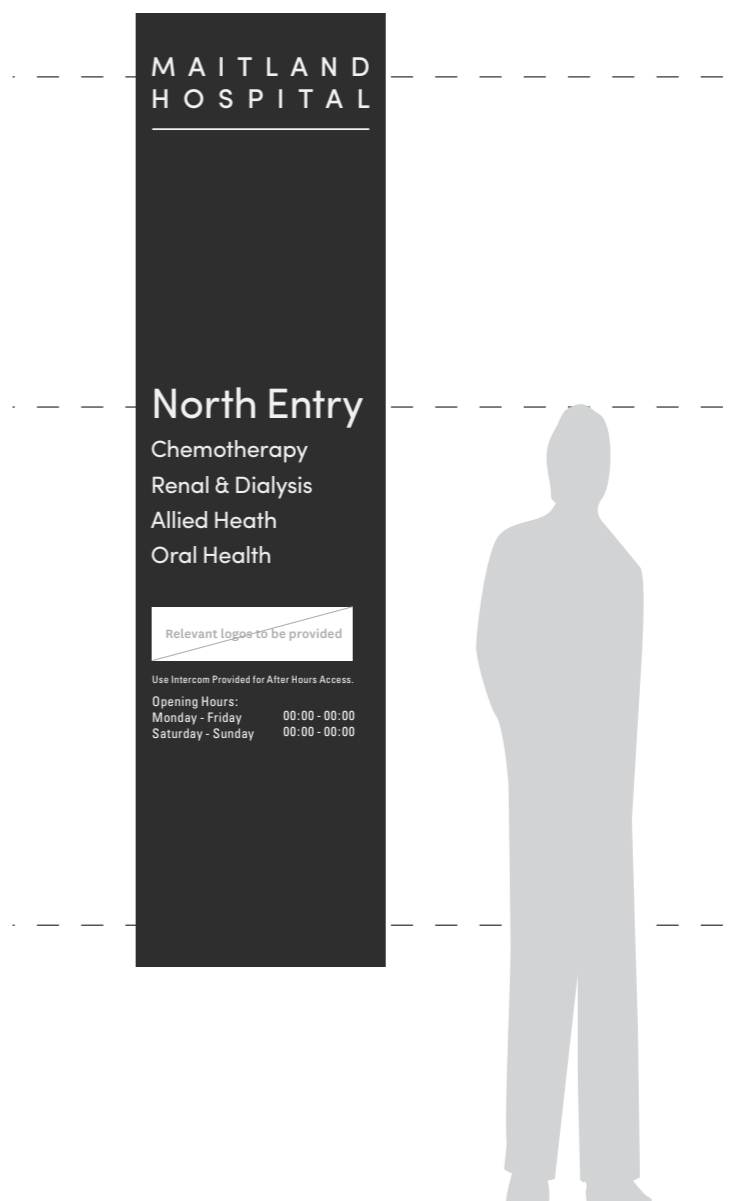
North Entry Identification

1700H x 440W

Cap Height 'North Entry' 50mm

Cap Height Departments 45mm

Not illuminated, standard vinyl for graphic

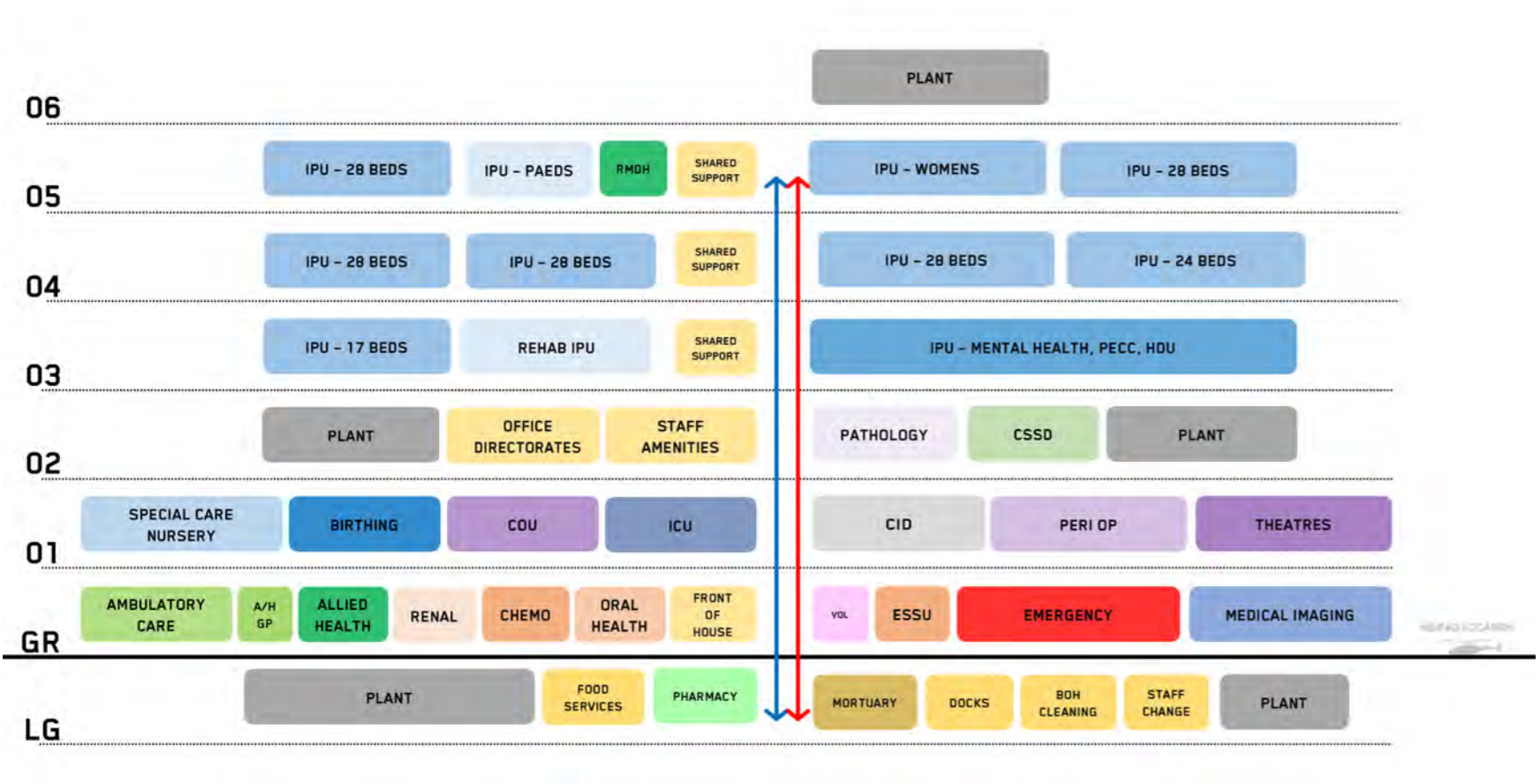


2.11 PROPOSED BLOCKING AND STACKING

PLANNING

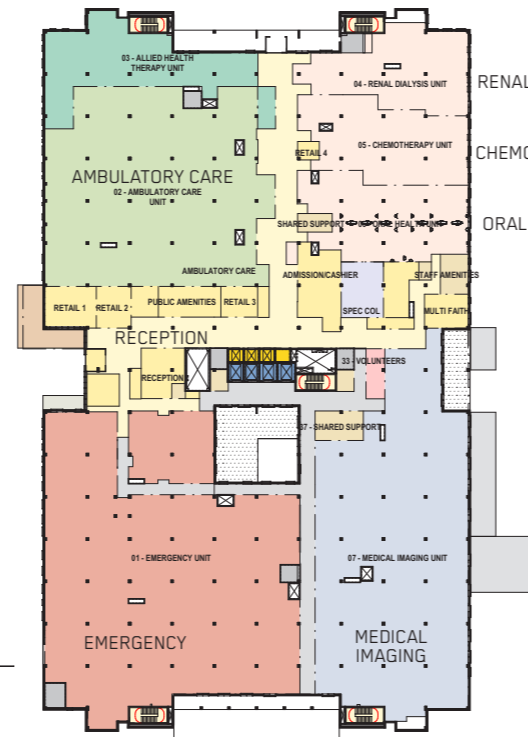
General arrangement plans for the following functional areas within the building are provided within the main body of this report:

- Back of House (BOH) services, Facilities Management and Workshops
- Mortuary
- Pharmacy
- Emergency Department
- Medical Imaging
- Front of House services (FOH), including volunteers, retail and multifait
- Ambulatory Care and Allied Health
- Renal, Chemotherapy and Oral Health
- Theatres, Day Surgery and CSSD
- Close Observation Unit (COU), Intensive Care Unit (ICU)
- Special Care Nursery (SCN) and Birthing (including Maternity Assessment Day Unit)
- Office Directorates , Health Information Unit (CID) and Staff Amenities (including Lecture Theatre and space for future Simulation Lab)
- Pathology
- Inpatient Units (including Paeds, Womens, Rehab and Mental Health)

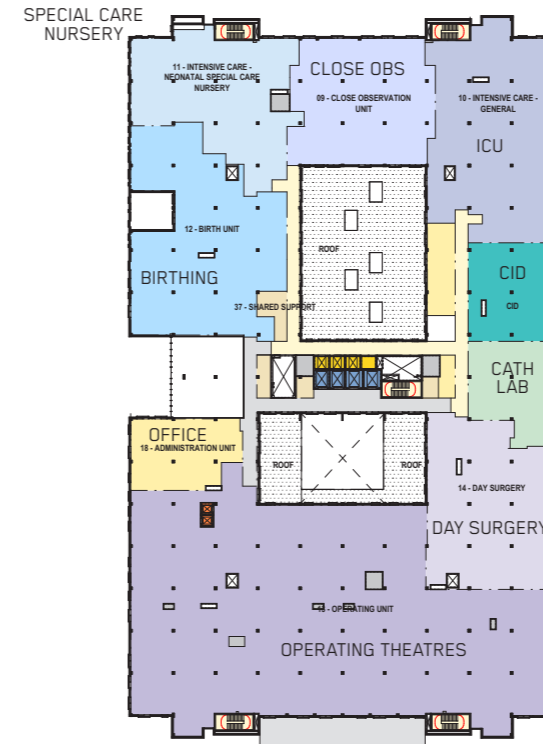




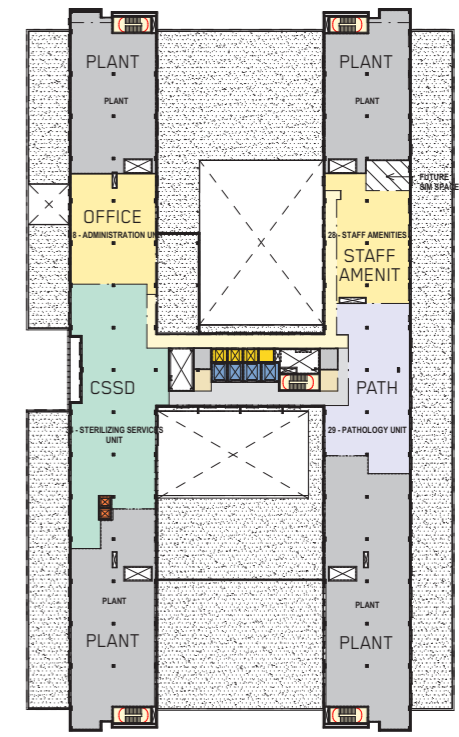
DEPARTMENT PLAN - LEVEL B1



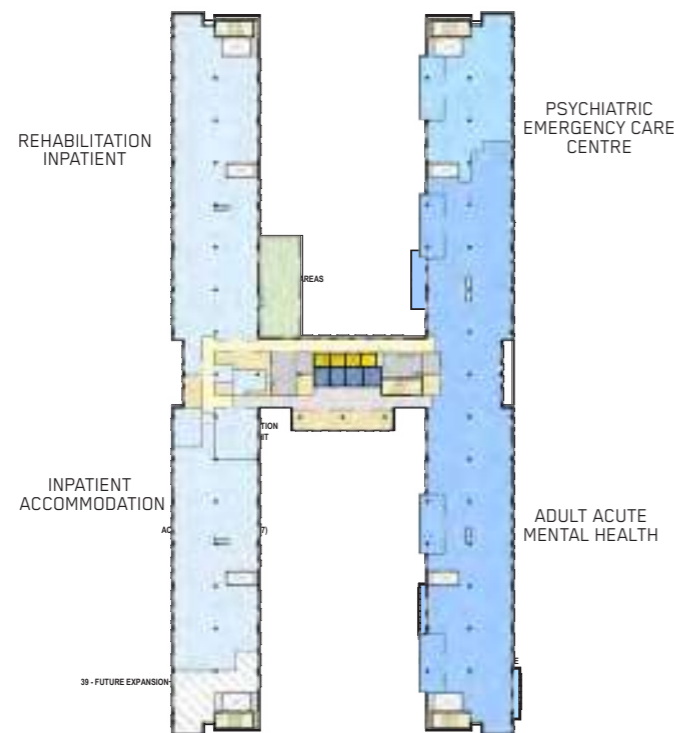
DEPARTMENT PLAN - LEVEL 00



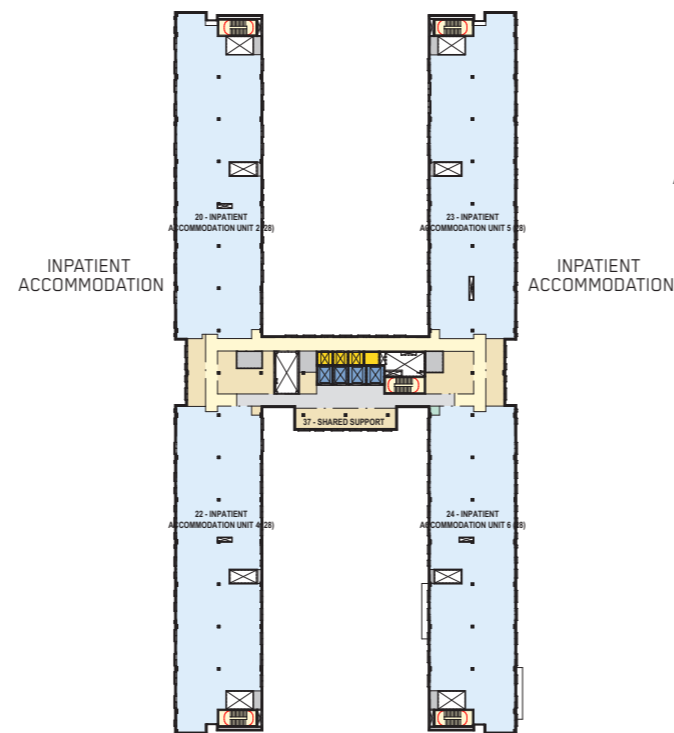
DEPARTMENT PLAN - LEVEL 01



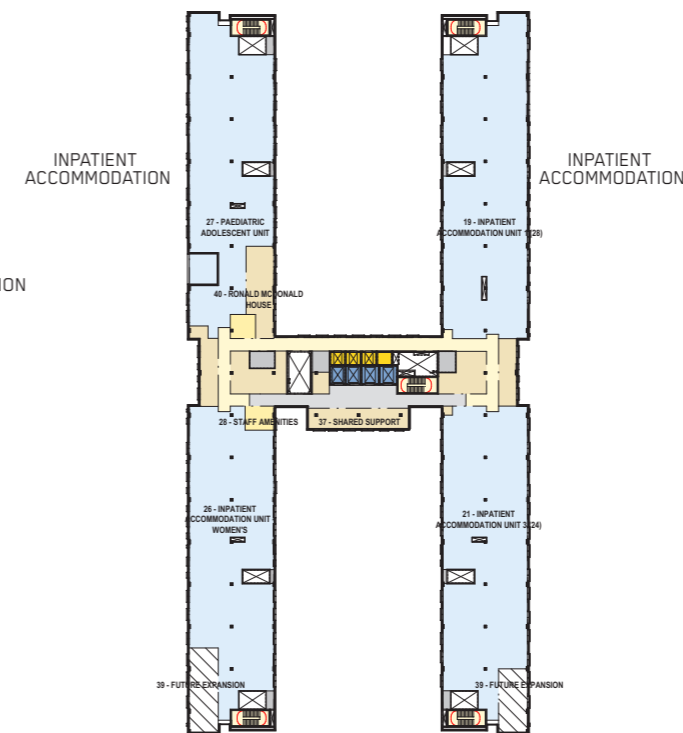
DEPARTMENT PLAN - LEVEL 02



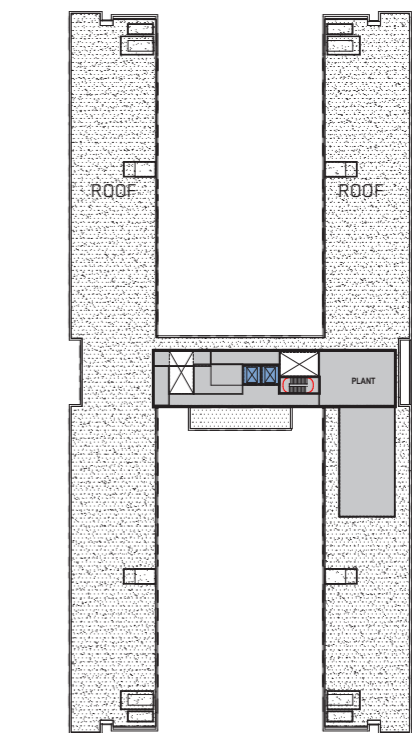
DEPARTMENT PLAN - LEVEL 03



DEPARTMENT PLAN - LEVEL 04



DEPARTMENT PLAN - LEVEL 05



DEPARTMENT PLAN - LEVEL 06

2.12 SERVICES APPROACH AND COORDINATION

A services strategy has been developed to provide the most appropriate solution, considering performance, cost effectiveness and efficiency, clinical functionality and serviceability.

The preferred solution considered most appropriate for the building's form and plan locates:

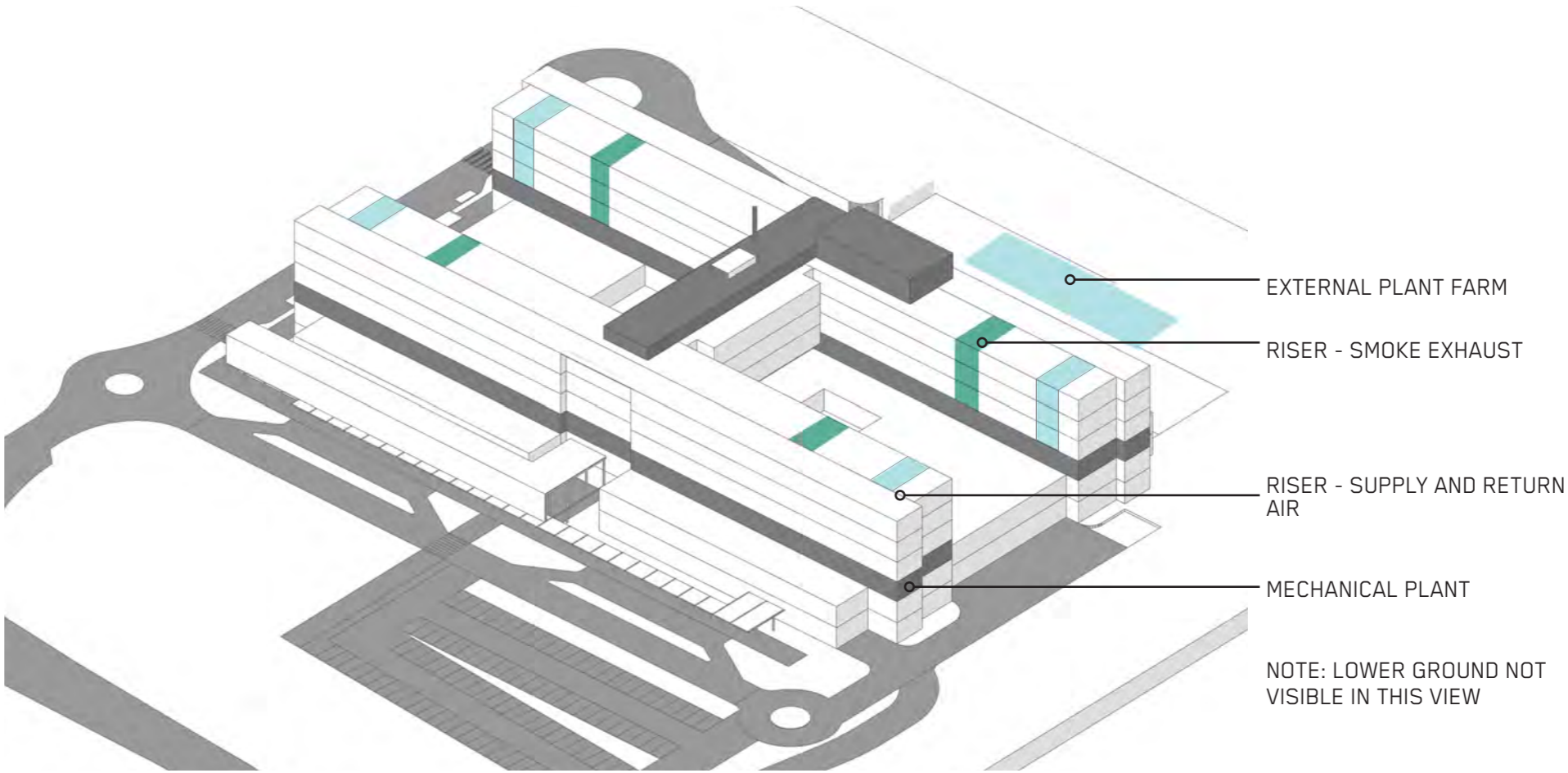
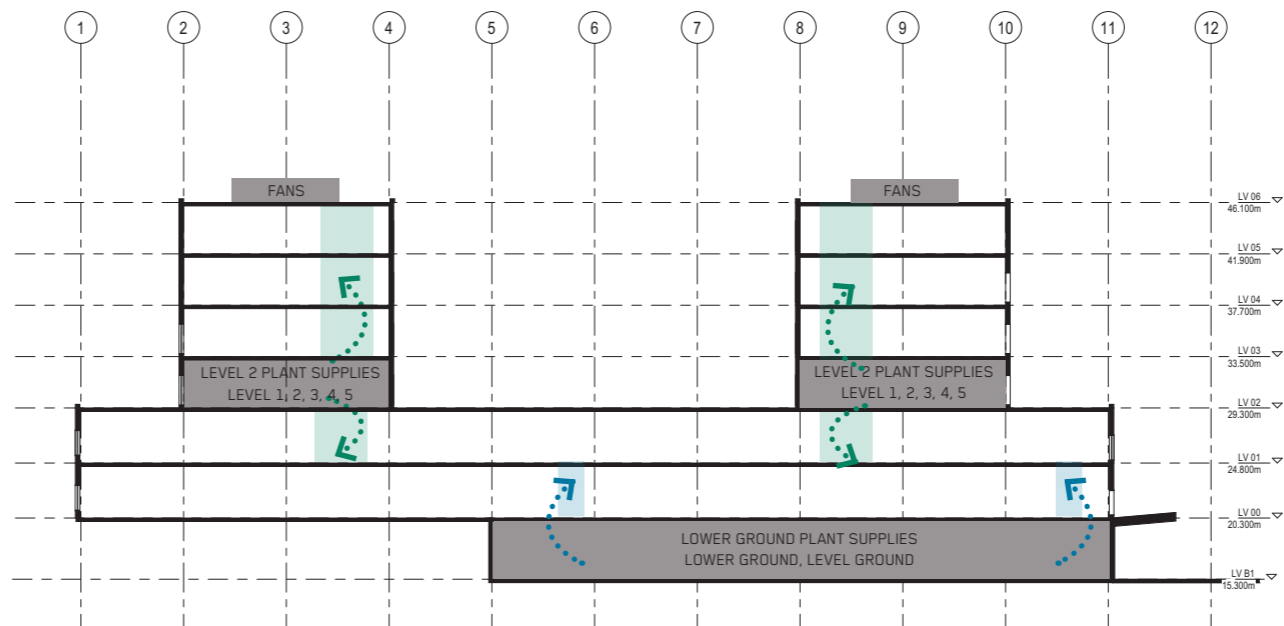
- Plant at Level 2 to supply and return air for levels 1, 2, 3, 4 and 5. It also services smoke exhaust for all levels;
- On floor plant on level 3, 4, 5 houses risers that supply and return air.
- Lower ground plant services supply and return air for level ground.

2.12.1 Reticulation and service strategy for the building.

The key levels that house plant are level lower ground, level 2 and 6.

The **benefits** of this approach are:

- Dedicated plant floor, with no impact on clinical spaces and clear access-ways to maintain and replace plant equipment;
- Balanced reticulation to theatres and building, which results in a more efficient use of space;
- Reduced plant on the roof.



LEVEL 2 PLANT PRINCIPLES

2.13 ENVIRONMENTAL AMENITY

2.13.1 SOLAR ACCESS AND OVERSHADOWING

The hospital's orientation is NE/ SW.

East and West solar exposure has been ameliorated with glazing specification and internal blinds.

There are no overshadowing impacts.

2.13.2 VISUAL PRIVACY AND VIEW LOSS

The Hospital mass has been positioned to the north of the site and orientated to minimise the extent of windows facing residential areas to the south.

As a result there is negligible impact on visual privacy for these areas.

Extensive existing trees and setbacks minimise view loss.

Within the hospital inpatient unit wings are separated by 4 x 8.4m structural grids to reduce overlooking and increase privacy between inpatient rooms.

2.13.3 REFLECTIVITY

The Design Team have reviewed the reflectivity for the facade and as noted in the attached Facade Engineering Advice (TTW) the orientation of the building indicates that glare conditions may be of concern on the west facade and should the facade reflectivity limit be 20% then the facade materials chosen will ensure the requirements are achieved.

2.13.4 WIND

A wind assessment has been completed, identifying existing predominant wind activity are west,north-westerly, north-easterly and southerly winds. It should be noted that this is an existing wind condition for the site and the inclusion of the subject development is expected to have a minimal impact on these wind conditions. It is expected that the wind effects identified in the report can be ameliorated and local wind conditions further enhanced with the consideration of the following treatment strategies into the design of the development:

Ground Level

The inclusion of the proposed awnings/canopies along the northern and western frontages of the site as indicated in the architectural drawings.

The inclusion of the proposed densely foliating trees along the various pedestrian footpaths and entrances; particularly around the corners of the building, surrounding the site as indicated in the architectural drawings.

Level 3 Communal Outdoor Area

The inclusion of the proposed impermeable screen along the exposed perimeter edges of the communal outdoor area.

With the inclusion of the abovementioned treatment strategies, it is expected the wind conditions for the various outdoor trafficable within and around the subject development to be suitable for its intended uses.

2.13.5 EXTERNAL LIGHTING STRATEGY

The Design Team will design the External lighting such that all external building and pole mounted light fittings will be in accordance with the requirements of the Building Code of Australia and relevant Australian Standards. In particular the design will be in accordance with the following:

- AS/NZS 1158.3.1-2005 Lighting for Roads and Public Places (Part 3.1: Pedestrian Area (category P)
- AS4282-1997 Control of Obtrusive Effects of Outdoor Lighting
- Building Code of Australia (Amendment 1) - Clause J6.5



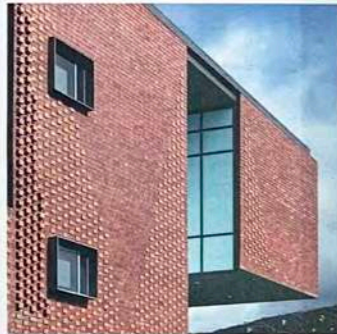
VIEW FROM METFORD RD

MAITLAND
HOSPITAL
MATERIALS
BOARD

① PODIUM



REFERENCE IMAGE: Embassy red, Australian Embassy Thailand, BVN



REFERENCE IMAGE: Texture and variation to brick facade



Brickworks 'Embassy Red' to brick veneer podium facade



VISUALISATION

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③

②

①

③ IPU (External Bar)



Left: Colorbond 'Aries' (metallic) to standing seam metal cladding
Right: Colorbond 'Monument' to window frames

② ARBOUR



REFERENCE IMAGE: Flexbrick screening system to arbour

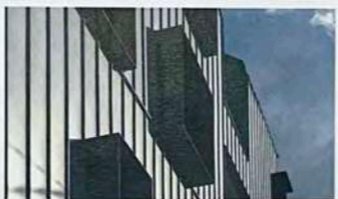


Terrapio terracotta standard colour range to express variation on arbour screening

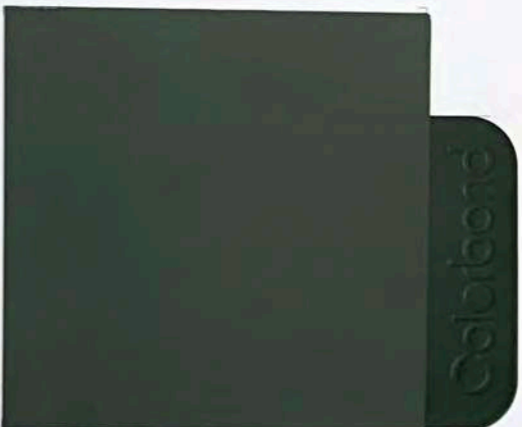
④ IPU (Internal Bar)



REFERENCE IMAGE: Metal profile sample



REFERENCE IMAGE: Standing seam metal cladding with projected window frame



Left: Colorbond 'Basalt' to standing seam metal cladding
Right: Colorbond 'Monument' to window frames

2.15 RESPONSE TO SSI 1 APPROVAL CONDITIONS

The developed design is generally consistent with the concept proposal and the Architectural Design Statement prepared in the SSI Stage 1 EIS.

2.14.1 PRIMARY OBJECTIVES

The primary objectives set out in the Architectural Design Statement are consistent in the developed proposal, in particular the objective to deliver the best quality integrated health services and clinical outcomes to the community of the Maitland region. The siting and orientation of the hospital is generally consistent with the concept proposal and the location of clinical departments maintain the intent to deliver current and future delivery standards.

Masterplanning has been developed with regard to the principles of safe and efficient patient and staff movement through the site, providing readily accessible carparking.

Changes to site planning have occurred the mindful of the intent to 'develop a configuration of the hospital campus entry and internal road network to allow clear identification and navigation to key departmental access points (e. g. Emergency Department / Main Entry / Ambulatory Services). The relocation of the main entry to the hospital's west elevation and main carparking to the north improves the clarity from that proposed in the Stage 1 submission

Internal planning has been developed with users to further establish suitable co-location of clinical departments to facilitate efficient work/materials flows. Widening the distance between ward fingers improves access to natural light and views consistent with the objectives of the concept proposal,

Servicing strategies have been developed to allow access to plant areas.

2.14.2 INCORPORATING MEASURES TO REDUCE WATER AND ENERGY USAGE

See separate ESD Report

2.14.3 SUITABILITY OF THE OFFSET DISTANCES BETWEEN THE EAST AND WEST WINGS OF THE HOSPITAL BUILDING

Studies (see right) assessed the impacts of the offset between ward wings on daylight, privacy and access to views following the Stage 1 submission.

As a result the offset between the east and west ward wings has been increased following the Stage 1 submission by a structural grid (8.4m).

2.14.4 SAFE PEDESTRIAN CONNECTION

The developed proposal improves pedestrian safety by enabling drop off directly to the main entry (the concept proposal required a road crossing from drop off to the front door)

Key pedestrian routes have been considered with safe crossing points identified.

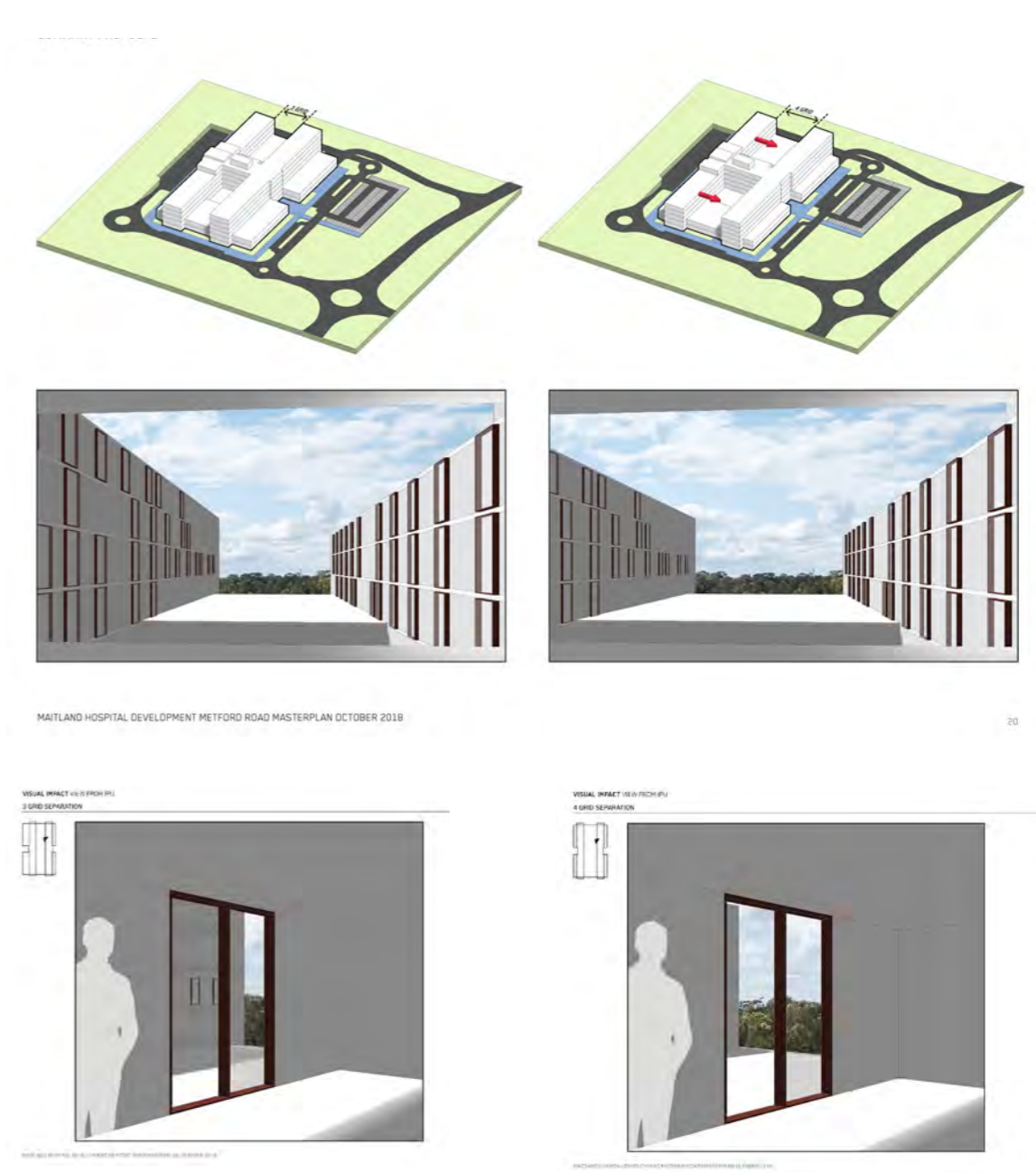
2.14.5 CONNECTIVITY BETWEEN THE HOSPITAL BUILDING AND LANDSCAPED AREAS FOR PATIENTS, STAFF AND VISITORS

By relocating the main entry to the western elevation, external landscaped areas can be consolidated to provide good connectivity.

A key development in the proposed design is the addition of a sheltered landscape space connected to the hospital's main entry - termed an 'arbour'. This will provide rain protection at drop off and adjacent retail and entry areas, while protecting seating areas from harsh sunlight.

2.14.8 HERITAGE INTERPRETATION

Colour and material reference the history of architecture in the Maitland town centre and the history of masonry in its public buildings and the previous uses of the site and will become an important element in developing an indigenous connection to country. No materials salvaged from the demolition of the former Brick Press Building are proposed to be re-used on the site.



STUDIES EXAMINING THE IMPACT OF DIFFERENT OFFSETS BETWEEN WARD FINGERS

