# ORANGE-BLOOMFIELD HOSPITAL REDEVELOPMENT



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#### Contents:

- 1. Introduction
- 2. Responses to Submission
- 3. Preferred Project Report
  - 3.1 Introduction
  - 3.2 Outline of Modifications
    - 3.2.1 Master Planning
    - 3.2.2 Building Footprints
    - 3.2.3 Future Expansion
    - 3.2.4 Architectural Expression
    - 3.2.5 On-site Parking
    - 3.2.6 Landscape Design
  - 3.3 Conclusion

4. Statement of Commitments

- 4.1 Introduction
- 4.2 Responses to Conditions of Consent

5. Conclusion

<ul> <li>Architectural Drawings</li> </ul>
- Landscape Drawings
- Heritage Letter of Support
- Heritage Impact Statement
- Sketches
- Material Finishes and Sample

#### List of Figures

No. Figure 01. Figure 02. Figure 03. Figure 04. Figure 05. Figure 06. Figure 07. Figure 08. Figure 09. Figure 10. Figure 11. Figure 12. Figure 13. Figure 14. Figure 15. Figure 16. Figure 17. Figure 18.	NAME Modified Scheme – Site Plan, Access Roads (SK-SP-01.02) Modified Scheme – Site Plan, Access Roads (SK-SP-01.03) Approved Scheme – Site Plan, Access Roads Modified Scheme – General Hospital, Ground Floor Approved Scheme – Site Plan, General Hospital, Ground Floor Modified Scheme – General Hospital, First Floor Approved Scheme – General Hospital, First Floor Modified Scheme – General Hospital, First Floor Modified Scheme – General Hospital, First Floor Modified Scheme – General Hospital, Lower Ground Floor (SL-GH-02.32) Future Expansion – General Hospital, Ground Floor (SL-GH-02.30) Future Expansion – General Hospital, First Floor (SK-GH-02.30) Future Expansion – General Hospital, First Floor (SK-GH-02.31) Future Expansion – General Hospital, First Floor (SK-GH-02.31) Future Expansion – Ambulance Station and Staff/Student Accommodation (SK-SP-01.02) Modified Scheme – Site Plan Forensic Mental Health Details (SK01) Heritage Curtilage (SK02) Relocated Pedestrian Crossing (SK03)
Figure 17.	Heritage Curtilage (SK02)
Figure 18. Figure 19.	Relocated Pedestrian Crossing (SK03) Reference Scheme Part Plan
Figure 20.	Blood Bank Carpark Entry (SK04)

SUPPORTING HEALTHY COMMUNITIES

Figure 21.Reference Scheme Part PlanFigure 22.Landscaping ProposalFigure 23.Sparkle Garden (SK05)Figure 24.Northern Boundary Screen Planting (SK07)Figure 25.NIB Walls (SK06)

#### **List of Tables**

No.NAMETable 01.List of Plant Species

# 1. Introduction

The Environmental Assessment and supporting documentation for a Project Application to allow the development of the Orange Health Campus at Bloomfield Hospital were exhibited from at the Orange City Council office. During this time submissions were received from NSW Heritage Council, Department of Environment and Climate Change NSW, the Roads and Traffic Authority (Regional Development Committee Western Region), Clinicians, Councilor and a number of local residences. Hansen Yuncken (the proponent) has been provided with a copy of these submissions and in accordance with Section 75H(6) of the EP&A Act responds the issues raised in the submissions

The proponent has sought advice from its consultant team in preparing the responses.

As a consequence of the submissions and general comments from the community and other stakeholders in the process the project has been amended as outlined in Section 3

In order to deal with the issues raised and the changes to the project application Hansen Yuncken has revised its statement of Commitments to take into account issues which were feasible and which minimized the environmental impact of the proposal. The revised Statement of Commitment is included in Section 4.

# 2. Response to Submissions

# Submission from the Heritage Council

#### Submission:

The Heritage Council previously made its comments about the proposed Development in its letter dated 6 November 2006 to Orange City Council. The Heritage Council further recommends that the impact of the proposed Forensic Mental Health Unit, with its 4-metre high fencing, should be carefully designed to Avoid, as far as possible, impacts on the views throughout the site. In this regard, it is recommended that the detailed landscape design should aim soften the impact of the fences on the surrounding heritage precinct.

It is also noted that the applicant addresses some of the comments made by the Heritage Branch in relation to the modified design and materials and finishes of the new hospital buildings.

#### **Response:**

The design has responded to the concerns raised by the Secure Forensic Mental fence by locating the western car park a further 5 meters to the west, this has increased the Landscape buffer zone to 8 meters between the access road and the Secure Forensic Mental Unit while maintaining the North South view through the site. The North South view corridor has been strengthen by the increased landscape zone and also the secure areas which require the 4 meter high fence have been relocated internally in the modified design to soften the impact of the fence on the heritage precinet.

# Submission from Department of Environment and Climate Change NSW

DECC is able to support the proposed modification in its current form and furthermore, advise Protection of the Environment Operations Act 1997 ("POEO Act") license may be required.

#### **Response:**

The proponent note that there is no requirements or comments from the Department of Environment and Climate Change NSW on the modified proposal.

# Submission from Department of Water and Energy Submission:

The Department of Water and Energy on the application to modify the project approval for the Orange Health Campus at Bloomfield, Orange. The Department appreciates the opportunity to comment and provides the following

The amendments proposed in the modification proposal have no bearing on the legislation administered by the Department of Water and Energy (OWE). As such, OWE has no requirements or comments in relation to the modification proposal.

#### **Response:**

The proponent note that there is no requirements or comments from the Department of Water and Energy on the modified proposal.

### Submission from RTA

#### Submission:

The subject application to modify an existing approval to the proposed Orange Health Campus. The material provided has peen examined and the Roads and Traffic Authority (RTA) does not oppose the modification. It is noted that the modifications relative to the RTA, the car parks and internal accesses, should have no adverse impact with regard to the original conditions of consent. Further, the proposed modifications address original conditions B5 (d), (e) and (f) referred to in Schedule 2, Conditions of Approval by the Department of Planning.

#### Response:

The proponent note that the RTA does not oppose the modification to the project.

### Submission from Enid Bouffler, J&K Kensit, L.R Lancastir, B Mawby, R Walkom, Heather Warby, Margaret Auld, J & N Binns, L & G Coulter, M Hennessy, J Ironmonger, J & H King, C.K Manchester, Margaret Norris, Margaret O'Neill, M Thompson, P Thompson

#### Submission:

The lack of space and beds about which our nurses and doctors keep warning us. Time and time again we see our friends, spouses and relatives, pushed out of hospital by desperate staff, when they are barely able to get around. This is because there aren't enough beds in the Orange Base Hospital for all of the emergency cases from the region. Frail elderly people who may not have long to live, are sent out to hospitals in towns such as Canowindra, Blayney and Cowra, whilst waiting for a bed in a Nursing Home in Orange, because there aren't enough beds in Orange Base to allow them to wait there, close to their family and loved ones. Many of us are getting older and require walking frames and/or gophers to get around. It is hard enough as visitors, let alone as patients, to get in and out of these places, for example, the bed rooms, public toilets, lifts and waiting rooms at the current hospital. The waiting area for outpatient services at the new Bathurst hospital is dangerously small for the number of people who need to wait there for their treatment. We hope that mistake won't be repeated in Orange. The council needs to ensure there is adequate space available at Bloomfield, for the health department to build another building if they can't fit everything they need into the building they have already started.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has address the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

Developing operating theatres, procedure rooms and preoperative services in a single suite to improve patient flow, time management and resource use

strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included.

#### Submission:

Orange township and in particular Bloomfield Hospital has long lived with the stigma of being "The Mental". "Bloomfield" has been synonymous with the "Lunatic Asylum". The placement of a high security forensic unit right at the front of the hospital, will do nothing to aid the breakdown of wide spread community "attitude" about mental illness and the integration of non criminals with mental illness into our community. This is extremely important, as the legacy of a 1700 bed psychiatric hospital in its day, is a whole lot of people now living in our community in group homes etc, who once resided in Bloomfield. Does the forensic unit need to be right at the front of the campus Over looking car parks etc. Could it not be placed a little more discreetly, allowing the public to forget the past reputation of a place where mad people were locked away.

#### **Response:**

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

The increased Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

In the Preferred Project the design of the Secure Forensic Mental Health Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The building design also provides discreet shielding of the secure external spaces from the road that will restrict these areas from public view.

#### Submission:

I am concerned about the safety, security and psychology of the nursing staff and visitors, particularly the females, should the forensic unit go ahead where it is proposed. If you have ever had to walk around hospitals at night, or on your own, you will be aware that they can be particularly daunting places. This is even more of an issue in Psychiatric hospitals. We really don't need to push the point home by placing a facility which will be housing the baddest and meanest criminally insane prisoners, right beside the carpark where the nurses and visitors will be walking and getting into their cars at all hours of the day and night. It is rumoured that all that will be between these prisoners and the general public is a wire fence. This will not stop the intimidating taunts from an insane rapist or murderer, which have the potential to scar for life.

#### **Response:**

The car park access adjacent to the Secure Forensic Mental Health Building is for staff only and will be regulated that the general public will not be able to access this area at any time. Way finding signage will also be provide in the Preferred Project that will limit access of the public to these areas of the site. In the Preferred Project the design of the Secure Forensic Mental Health

Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The redesign has responded to the concern of intimidating taunts be internalizing the court yards also by doing this the wing of the building provides discreet shielding of the court yards from the road. The Landscape buffer zone between the road and the Secure Forensic Mental Health Building has also been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west. The main consideration of the external lighting design is to allowed safe movement throughout the site of a night.

#### Submission:

I am concerned for the prisoners who will be held in the forensic unit if it is built in the current planned location. It will be constantly subjected to lights and noise from Forrest Rd, including ambulance sirens, trucks and other vehicles, as well as staff and visitors on foot. Obviously, the inmates will be people with a mental illness, who would be far better served, being in an area of the grounds which is peaceful and quiet, with ample space available for outdoor activity in privacy. They will effectively be living in a goldfish bowl, with hospital buildings and activity on all sides, except to the west which is flanked by Forrest Rd. How therapeutic could this be?

#### **Response:**

The design of the Orange Health Campus has responded to the concerns raised by providing an integrated Mental Health Unit into the hospital precinct and by having this approach the patients in these buildings are not seen as outcasts.

The Preferred Project has responded to the concerns by redesigning the Secure Forensic Mental Health Building. In the redesign the Forensic Inpatient Unit has been relocated further to the east, the Medium Secure Rehabilitation Unit of the building, has now been relocated to the west. The redesign has responded also by internalizing the court yards by doing this the wing of the building provides discreet shielding of the court yards from the road effectively restricting public view to these areas so that the gold fish bowl issue is resolved.

The Landscape buffer zone between the road and the Secure Forensic Mental Health Building has also been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

#### Submission:

I am concerned about the appearance of the fencing which will surround the forensic unit to be built at the Bloomfield hospital site. The usual cyclone style fencing with the barbed wire on top may be effective in keeping prisoners inside, which it does so well at Bathurst Goal. However, it is hardly the most welcoming of sights for people coming to the hospital for medical treatment. Ifwe are endeavouring to develop a treatment centre which nurtures healing and promotes wellness, as well as being pleasant to visit, and work in, we are indeed fighting an uphill battle, if the first view a person sees as they park their car, is a massive barbed wire fence and prison walls. There are many innovative solutions to the fencing issues surrounding these types of facilities. One example is the type of concealed fencing used for the animal enclosures at Dubbo zoo. This has the advantage of being much more discreet from the point of view of the public, as well as the prisoners. They can look out on the world and feel more a part of it, than if they have to look at it through steel mesh. The disadvantage of this type of fencing is that it takes up more space. Possibly, this would not be an issue if the forensic unit is shifted to another site on the Bloomfield campus. This would ensure the people of Orange and all of the visitors to the Hospital, are not reminded, every time they pull up in the car park that the facility is not only a place to seek help, treatment, reassurance and care, it is also a gaol in the real sense of the word. Few people going into hospital, want to be reminded of that! Thank you for considering my views. I hope Orange ultimately gets a hospital facility which will promote the delivery first class medical and nursing care for all of the people in the Central West.

#### **Response:**

The Preferred Project has responded to the community concerns about the fencing of the external secure areas through consultation with the Secure Forensic Mental User Group, the Heritage

consultant. The Architect has designed a fence and selected appropriate materials that is acceptable to the clinicians and sympathetic to the sites Heritage significance. Also by internalizing the court yards the wing of the building provides discreet shielding of the court yards from the road effectively restricting public view.

#### Submission from D & H Bouffler Submission:

The lack of space and beds which our nurses and doctors have raised concerns.

It is alarming when at present our friends and relatives are asked to go home beforethey have fully recovered from their medical treatment because there are insufficientbeds in our present hospital to cater for the demand of Orange and surrounding areas. What would be achieved if we had a lovely new hospital but this problem wasn't taken into consideration and corrected? The same applies to the size and space allowed in variouss parts of the hospital. Patients require sufficient space in the bed rooms, public toilets, lifts and waiting rooms to move with ease with attached apparatus or walking frames etc. The medical staff requires sufficient space to perform their duties efficiently and accurately, this is also an aspect that doctors have raised alarm bells with the present plans of the new hospital.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has address the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

Developing operating theatres, procedure rooms and preoperative services in a single suite to improve patient flow, time management and resource use

strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

#### Submission:

The council needs to ensure there is adequate space provided at Bloomfield for the health department to build another building if the first building is not big enough.

#### **Response:**

The Preferred Project has address the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines.

Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included.

#### Submission:

The placement of the high security Forensic Unit to be situated at the front of the hospital also requires some consideration and rethinking. Does the forensic unit need to be right at the front of the campus overlooking carparks etc. Could it be placed a little more discreetly from the public view.the females, should the forensic unit go ahead where it is proposed. To move around hospital at anytime of the day or night on your own is particularly daunting with thaving to confront the forensic unit situated in this position. It is also rumoured that all that will divide the forensic unit and the public will be a wire fence. This also needs to be revised as we consider it would be totally inadequate.

#### **Response:**

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

The increased Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

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The fence is a strong element in the Preferred Projects design of this facility and has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the Heritage consultant. The Architect has designed a fence and selected appropriate materials that is acceptable to the clinicians and sympathetic to the sites Heritage significance

### Submission from K & R Fitzgerald

#### Submission:

Firstly, I would like to say what a wonderful facility this proposed new hospital will should provide for the care of the sick and elderly in Orange and surrounding area.

#### **Response:**

The proponent note this comment

#### Submission:

Secondly, if we "get it right" this will surely attract the best doctors and medical staff to work in our hospital and this is vital to the prestige of the hospital.

#### **Response:**

The proponent note this comment

#### Submission:

Thirdly, it would seem that medical staff is generally not happy with the proposed plans for our new hospital and I would strongly suggest that the medical staff and building authorities get together to discuss and iron out these differences well before building commences. Why push ahead with the chance that the new Orange hospital will open up with problems like Bathurst hospital is experiencing?

#### **Response:**

The proponent has worked to address the concerns with the new hospital raised by the Medical Staff. The Preferred Project has responded to those concerns.

#### Submission:

Fourthly: In the hospital plans we need to ensure that there will be adequate space available for future expansion if and when it is needed.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

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SUPPORTING HEALTHY COMMUNITIES

Comprehensive Cancer Centre commencing with more

appropriate facilities for chemotherapy and palliative care, and provision for development of onsite radiotherapy services as part of the master plan for the hospital

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Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included

#### Submission:

Fifthly: The positioning of the forensic unit at the front of the hospital is surely quite unacceptable. A hospital is meant to be a place of peace and healing and who would wish to be greeted by the sight of a forensic unit, with high fences and security as you enter the hospital grounds - whether you are a visitor or a patient? There is also the issue of safetyand security and the psychological effect on everyone.

#### Response:

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

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The fence is a strong element in the Preferred Projects design of this facility and has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the Heritage consultant. The Architect has designed a fence and selected appropriate materials that is acceptable to the clinicians and sympathetic to the sites Heritage significance

### Submission from N.L. Lodge (1)

#### Submission:

The bed space situation is still too short term. Completely neglects the growth factor, from the local area and further Out West. This has been a problem with the plans from day 1.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

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SUPPORTING HEALTHY COMMUNITIES

services together including collocation of allied health

therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services. Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included

#### Submission:

WE, the Public need to make it understood, that it is our Hospital that is being built, and there needs to be a semblance of respect both for our Representatives and the Community in general.

#### **Response:**

The public are important in the design of Orange Health Campus and the publics concerns, and comments have been duly considered and the Preferred Project reflect these submissions made by the public.

#### Submission:

It is quite unthinkable that there has not been someone allotted to walk people through the plans, and to be able to discuss them.

#### Response:

The proponent notes this comment. However it is not the function of the Preferred Project report to respond to the exhibition procedure when the Project Application is on display.

#### Submission:

We should not countenance the destruction of any more trees.

#### **Response:**

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Landscape Strategy. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume.

#### Submission:

Acute Mental Health Unit being brought closer to the ordinary patient area. It was already too close for both parties and for their mutual welfare.

#### **Response:**

The Master Planning of the Orange Health Campus is providing an integrated Mental Health Unit into the hospital precinct.

The current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings.

#### Submission:

The writer is aware of forensic area; but people with Mental Health problems should not, in a fit' be lumped together with drug induced mental problems. Some of the mentally handicapped are so vunerable and trusting it is not in the least bit fair or reasonable. The writer has been yelling from the roof tops about this since the outset of planning and nobody seems to have bothered to address the situation.

#### Response:

The current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings.

#### Submission:

It is short sighted to be selling off any of the land.

#### **Response:**

The proponent notes this comment, but this modification does not seek to modify the approved project in this regard. NSW Health has stated that the funding for the new hospital includes proceeds from the disposal of land that is surplus to future needs. The hospital design incorporates scope for significant future expansion.

#### Submission:

The spaces for Out Patient Services - all of them are still too space restricted.

#### **Response:**

The Preferred Project has responded to the services concerns of the clinicians and the general public by the re planning and the addition of a number of treatment service available, this has been as a result of the consultation process. The current Preferred Project is in accordance with the current Australian Health Facility Guidelines. There are expansion areas allowed for the Preferred Project that allow these to expand of the Community Health to the south and the east.

#### Submission:

There is no evidence of Human Factor caring. It seems to be all about saving money in the short term and spoiling the concept forever.

#### **Response:**

In the Preferred Project the New General Hospital has been re planned on the concerns of the clinicians and through the submissions from the general public.

#### Submission:

The closing down of Riverside is a complete disgrace as presented currently.

#### **Response:**

Riverside is not to be closed down but relocated the current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Riverside Strategy. This Preferred Project modification does not seek to change the current approved strategy.

#### Submission:

The mental Health Recuperation Area cuts are also a disgrace, as presented. Currently the specifications do not seem to meet the criteria because of the 5ft pipeline placement.

#### Response:

The Preferred Project has responded to the concerns by carrying out User Group meetings with the Clinicians and medical staff to ensure all mental health areas are appropriate and that they meet the current standards.

#### Submission:

One wonders what plans have been put in place to meet Climate Change and Global Warming criteria for the present and future needs of the organisation.

#### **Response:**

The preferred Project has responded by including in the current design a number of ESD principles that have improved the design for example Solar water Heaters, Rainwater harvesting and Energy Modeling of the building fabric.

#### Submission from N.L. Lodge (2) Submission:

This submission is not presented with tremendous grace because we, the ordinary citizen and ratepayers seem to have been excluded from any participation in the planning of OUR PROPOSED HOSPITAL so to that end I am disgusted.

Have written to you often about stifling beaucratic controls which have become more consuming everyday more and more of this country is being sold off to privatization and the world at large and this brings us step by step closer to the old Roman Empire.

Soon we wont need Governments at any level – just a good manager! To get back to the hospital, I am deep surprised that Council had not organized a meeting open to the public for information and discussion and answer to questions.

I'm fully aware that there are a number of games being played and it is not too pleasing.

#### **Response:**

NSW Health has advised that the planning of the hospital has involved wide consultation with community representatives on several occasions. The proponent is only seeking minor change to the project, which followed the government's planning process and received approval.

### Submission from N.L. Lodge (3)

#### Submission:

It seems to me that everyone is being ignored and it is about time there was an honest endeavour for a change at State Government level. Citizens are disgusted by the controls and bureaucratic behaviour throughout everything we touch in NSW currently.

#### **Response:**

The public are important in the design of Orange Health Campus and the publics concerns, and comments have been duly considered and the Preferred Project reflects these submissions made by the public.

#### Submission:

There seem s to be a lack of competence on the one hand and a human factor and resource caring on the other. In other words people CONTINUE not to count.....

#### **Response:**

In the Preferred Project the New General Hospital has been re planned on the concerns of the clinicians and through the submissions from the general public.

#### Submission:

We need to make it clearly understood that it is our Hospital that is being built and there needs to be a semblance of respect both for our representatives at every level and the community at large.

#### Response:

In the Preferred Project the New General Hospital has been re planned on the concerns of the clinicians and through the submissions from the general public.

#### Submission:

We have every right to expect someone to be available to walk the public through the plans and to be able to ask questions and gain answers.

#### **Response:**

The proponent notes this comment. However it is not the function of the Preferred Project report to respond to the exhibition procedure when the Project Application is on display.

#### Submission:

One of the main problems seem to be penny pinching attitude at the risk of spoiling the development for foreseeable future.

#### **Response:**

In the Preferred Project the New General Hospital has been re planned and expanded on the concerns of the clinicians and through the submissions from the general public.

#### Submission:

Perhaps it has been HUGE HUGE mistake to engage Public and Private Funding?

#### **Response:**

The comment is noted, however it is not a function of the Preferred Project to respond on the issue of Public Private Partnership.

#### Submission:

It is short sighted to be selling off any of the land.

#### **Response:**

The proponent notes this comment, but this modification does not seek to modify the approved project in this regard. NSW Health has stated that the funding for the new hospital includes proceeds from the disposal of land that is surplus to future needs. The hospital design incorporates scope for significant future expansion

#### Submission:

We should not continue the killing off of any more trees

#### Response:

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Landscape Strategy. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume.

#### Submission:

One wonders if any thought has been applied to the needs of energy saving and global warming challenges in the construction of the new buildings.

#### **Response:**

The preferred Project has responded by including in the current design a number of ESD principles that have improved the design for example Solar water Heaters, Rainwater harvesting and Energy Modeling of the building and of the building fabric.

#### Submission:

The bed space situation is still too short term. Completely neglects the growth factor, from the local area and further Out West. This has been a problem with the plans from day 1.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

Developing operating theatres, procedure rooms and preoperative services in a single suite to improve patient flow, time management and resource use

strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included

#### Submission:

Acute Mental Health Unit being brought closer to the ordinary patient area. It was already too close for both parties and for their mutual welfare.

#### **Response:**

The Master Planning of the Orange Health Campus is providing an integrated Mental Health Unit into the hospital precinct.

The current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings.

#### Submission:

The writer is aware of forensic area which will be relocated but people with Mental Health problems should not, in a fit' be lumped together with drug induced mental problems. Some of the mentally handicapped are so venerable and trusting it is not in the least bit fair or reasonable. The writer has been yelling from the roof tops about this since the outset of planning and nobody seems to have bothered to address the situation.

#### Response:

The Master Planning of the Orange Health Campus is providing an integrated Mental Health Unit into the hospital precinct.

The current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings.

#### Submission:

The closing down of Riverside is a complete disgrace as presented currently. Again lack of human caring for those without an effective voice.

#### **Response:**

Riverside is not to be closed down but relocated the current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Riverside Strategy. This Preferred Project modification does not seek to change the current approved strategy.

#### Submission:

The mental Health Recuperation Area cuts are also a disgrace, as presented. Currently the specifications do not seem to meet the criteria because of the 5ft pipeline placement.

#### **Response:**

The Preferred Project has responded to the concerns by carrying out User Group meetings with the Clinicians and medical staff to ensure all mental health areas are appropriate and that they meet the current standards.

#### Submission:

Out patient Services all of them are still too space restricted without opportunity for growth.

#### **Response:**

The Preferred Project has responded to the services concerns of the clinicians and the general public by the re planning and the addition of a number of treatment service available, this has been as a result of the consultation process. The current Preferred Project is in accordance with the current Australian Health Facility Guidelines. There are expansion areas allowed for the Preferred Project that allow these to expand of the Community Health to the south and the east.

#### Submission from Maria Brouwers Submission:

I am 55 years old. On 23rd May 2007, I suffered a stroke, which has left me with a severe disability. On suffering my stroke, I was admitted to Orange Base Hospital, where I spent a week in the Glenroi Ward. I was then transferred to Apex House, to begin my rehabilitation.

When I first arrived in Apex House, I had to learn again, all of the simple things that we take for granted - such as being able to sit up without help. After probably 4 of the longest months of my life, I was able to walk again with the aid of a crutch. My rehabilitation was the result of not only my own strong will and desire, but was also the result of the dedication, talent and perseverance of the doctors and nursing staff, as well as the occupational, speech, and physiotherapists. This dedicated team of professionals gave me my life back.

Although the facilities in Apex House are by no means modern, the reason I am rehabilitated to the extent that I am is that all of the staff are so accessible to each other at Apex House. At a moments notice, an Occupational Therapist would assist one of the nurses showering me, so that my needs were more fully assessed; or a physio, whilst teaching me to stretch my wrist, would call in an OT, so that a splint could be made to give me the best results. I have viewed the plans for the new hospital. I am concerned that the rehabilitation service provided in a brand new facility will not be as effective as now exists in the antiquated Apex House. My concerns with the proposed new facility are that it is so small, and that all of the professional team are no longer all together in the one area. I think this is a major factor and flaw in the new design that needs to be addressed.

#### Response:

The existing Apex House is an existing buildings but it is very inefficient for example circulation in existing buildings is more than required, proximity of departments is further apart than required and function of the buildings is not purpose built which create dysfunctional space. The Preferred Project has responded by providing a specific design facility that has been developed with the clinicians' and Medical professionals that consolidates required functions and enhanced proximity of departments into a single building this will provide an improving service to the community.

The Preferred Project has addressed the area concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines.

#### Submission:

Another major concern I have is that the proposed gymnasium in the new facility is so small. I spent an average of 5 hours a day in the gym during my rehab. At times there were up to ten people receiving treatment. This could not happen in the new facility. Again, I believe it is far too small, and will not cater for the needs of the community.

Whilst I realise that it is not your role to advise Mid Western Area Health in the detailed design of their new facility, I felt it was important that you are aware of the concerns of people like me who will rely on and will use the new facility.

I have no doubt that with these recommended changes to the design of the new facility, the Greater Western Area Health will continue to provide the wonderful rehabilitation service they currently provide, and will only enhance the reputation Orange holds as the leading provider of health services in country New South Wales.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the gym has been relocated on the advise of the clinicians so that the area is more accessible to people and the floor area complies to the current Australian Health Facility Guidelines.

### **Submission from Cheryl Hansen**

#### Submission:

I would like to add my concerns to the new plans for the Orange Base Hospital. I did place my concerns about the location of the hospital at the Bloomfield site which as many people were disappointed.

#### Response:

The current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings.

#### Submission:

However now the plans of the hospital are being reviewed I am hoping that concerns of those that have to work in this environment are not ignored.

#### **Response:**

During the Preferred Project development extensive meetings have been held with the User Groups and the clinicians to ensure that the work environment is acceptable to the medical professions. The Preferred Project has also addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines.

#### Submission:

I would like to see all non-urgent medical procedures remain in the centre of Orange specifically the Breast Screen Clinic. I feel this would not only free up vital floor space but would also be a common sense solution to my initial concern of the travel costs and transport issues that many older and disadvantaged residents and out of town visitors to Orange will have. Many people travel by train and bus from rural towns such as Forbes, Parkes and Dubbo to access our hospital, the added costs of taxi fees on this will add a huge burden and may also restrict further, those populations from using these services .I would like to also have issue such as transport

SUPPORTING HEALTHY COMMUNITIES

looked at, as a very real problem as we have limited bus services that all go to the centre of town from all areas around town but not specifically to outer areas ie, East Orange the bus goes to Wolsley St and Dalton but no further, and I am sure this is also the case in other areas. I am concerned that many older people and people in the lower socio-economic groups are going to be further disadvantaged. If they do not have a car they may have to catch two buses to get to appointments or visit family members. At the moment there are limited bus services to the Bloomfield site and these would have to be extended in time from 6.00am to 10.00pm. There would be greater use of taxis and ambulances after bus services cease.

I know living in Suma Heights off Dalton St I was very glad the hospital was only minutes away. A couple of times when I had to take my son during the night with upper respiratory tract distress (croup) which is very common with children.

#### Response:

The Master Plan of the Orange Health Campus has responded to the concerns raised by the community by providing an integrated hospital precinct this could not be achieved by not including a vital services such as a Breast Screen Clinic.

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded to the submissions from clinicians and the public with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

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strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included

The Preferred Project has addressed Community transport by locating the Community Health area to the eastern entry of the General Hospital with covered area and drop off areas allocated for Community Health bus service. The Community Health area has also been expanded to respond to the concerns raised by the general public, during the Preferred Project process

#### Submission:

I am concerned with the pressure on ambulance services and therefore the response times with the new hospital location.

#### **Response:**

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Traffic Strategy. The Preferred Project has responded to the concern by meeting with the Ambulance representatives' and as a result there has been a dedicated Ambulance road added to the project to assist rapid and safe movement of the ambulance to the Emergency Department of the proposed General Hospital.

#### Submission:

I would like to see further consultation and less rush to build the new hospital just to appeasetimeline plans or political pigheadedness. As seen by the mistakes of the Bathurst hospital it would be much better to get it right the first time.

#### **Response:**

The Preferred Project has responded to the submissions from clinicians and the public with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

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### Submission from Keith Curry

#### Submission:

With the memories of the major mistakes made at the new Bathurst Hospital still fresh in my mind, I would like to make a couple of personal comments regarding the planning process for the new Orange Base

1. I know nothing about the needs and design of a new hospital. However, it seems dear to me, that comments and suggestions from those who are responsible for the delivery of heath services, are being ignored. As a person who worked in public schools for 40 years {30 years as a principal), I've experienced the lack of communication that can occur in a large bureaucracy. This mustn't be allowed to happen with the new Orange Base Hospital.

2. There seem to be growing concerns about parts of the new hospital not being large enough to meet the future needs of our growing city. These concerns have been expressed by those in the heath services profession, and therefore should be taken seriously, and where possible, acted on. To do otherwise, would be both irresponsible and false economy.

#### Response:

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded to the submissions from clinicians and the public with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

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Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included

# Submission from Yvette J Black Submission:

I have concerns regarding the plans for the new Orange Base Hospital and I am subsequently making a submission to be considered. The following list of recommendations are to be considered In view of the plans for the new hospital. These recommendations have been made as a result of discussions with various parties whose quality of work could be affected by the siz.e and location of therapy areas and units In the new plans, Other factors to take into consideration when considering the alterations to the current plans are the fact that stroke-affected, obese, and frail-aged patients (e.g. most commonly as a result of falls) are increasing In numbers each year. The Increase in admissions for diabetes-related illness over 2000 - 2005 (ASS) shows the need to address the related illnesses such as obesity and limb amputation, and to provide a suitable acute and rehabilitation facility and equipment to manage these patients. One should also note that, according to the National Stroke Research Institute, that "due to the expected increasing population numbers and the expected change in age structure of the popUlation, the number of strokes would increase from about 42,000 In 1997 to 108,000 in 2030." Please consider the following as areas of concern to Improve the health service we have and retain many beneficial areas which will provide for our area for the next few decades. 1. Rehabilitation therapy areas should be retained where possible in both the acute I acute rehabilitation and mental health units, preferably including an accessible kitchen for allied health functional assessments and retaining the

current Living Skills Unit at Bloomfield..

#### **Response:**

The Master Planning of the Orange Health Campus is providing an integrated Acute / Mental Health Unit into the hospital precinct

It is not the function of Preferred Project to change the approved strategy for the living Skills Unit that exists on the campus. In the Preferred Project there is area designated for the Trans Living Unit that will assist rehabilitation process therefore the Preferred Project reinforces the Strategy.

#### Submission:

2. Ensuring good quality of accessibility for movement of barlatric equipment throughout the hospital (including bedrooms, bathrooms, &therapy areas) for beds, wheelchairs, commodes, and lifters.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. What this means s that the Preferred Project has incorporated wider corridors to allow for the movement and access for this type of specific equipment, the storage areas have been specifically designed to also cater for the equipment. The proposed lifts have been briefed to allow for the extra loads and size required to allow for vertical movement with in the hospital for the equipment. Working with the clinicians rooms have been identified that require special lifting equipment to cater for the comfortable and safe patient movement.

#### Submission:

3. A treatment area for paediatrics which provides a safe and best practice environment to allow for the use of assessments which require significant space e.g, proprioceptive and sensory integration assessments requiring a swinging hammock; and motorised wheelchair assessments. Advice from the Sydney Children's Hospital indicates that an area of 9 metres squared is required for the safe swlng of a hammock required for paediatric assessments. Currently, on drawing AR. GH.18.012. 02, the paediatric gym Is displayed without the recommended clearance. Expansion of the room Into the courtyard area would be beneficial.

#### Response:

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. These areas due to concerns raised by the clinicians and the general public have been reviewed extensively with the User during the User Group process has gone under a number of configurations to allow for the space required for assessments. The paediatric gym has been relocated on the advise of the clinicians and the area complies to the current Australian Health Facility Guidelines.

#### Submission:

4. Assurance that each allied health professional is able to access a desk and computer to complete paperwork required in a timely manner e.g. allocating specific desks to workforce members I departments.

#### Response:

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines also the Preferred Project reflects impute from the User Group to ensure the areas allocated are adequate and accessible for the end use.

#### Submission:

5. The storage areas for equipment must be accessible to allied health professionals and staff to ensure that the equipment can be delivered to the ward I patient in a safe and timely fashion, and of a reasonable size to accommodate large and multiple numbers of mobility and assistive equipment.

#### Response:

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines also the Preferred Project reflects impute from the User Group to ensure the space provided and location of equipment bays are to accessible to the health professionals in a timely fashion.

#### Submission:

The site considered for the Forensic Mental Health Unit will be saved and renovated as a green space for patients and staff. The area has historical significance not only adjoining the green house and vegetable garden, but also as a display of many trees which were planted in the early years of Bloomfield Hospital. In addition, the Forensic Mental Health Unit should be constructed In an area away from the road and other buildings where the Intimidating structure of the building has less Impact on visitors, patients and staff at the hospital.

#### **Response:**

The current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings. The Preferred Project has identified the green house to be relocated to a location to be selected by the Heritage Consultant

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Landscape Strategy. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume. The Bloomfield Memorial Garden and the Staff Memorial Garden are maintained and the new tree planting will act as a backdrop and compliment the heritage value.

SUPPORTING HEALTHY COMMUNITIES

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

The increased Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

In the Preferred Project the design of the Secure Forensic Mental Health Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The building design also provides discreet shielding of the secure external spaces from the road that will restrict these areas from public view.

# Submission from Maureen Lawrence

#### Submission:

I am a resident of Orange as well as being a Registered Nurse at the Base Hospital.

The lack of space and decrease in bed numbers will cause the same problems, patient stress and staff stress that happens now but much worse because this area is growing and the Hospital plans are shrinking. How can the State/local leaders allow this to happen. There will be a shortage of nurses worse than at present because the political unit can fix the problems now, but are not listening to the residents of Orange and surrounding areas. The present nursing staff are 'getting older' and we won't be prepared to work in substandard conditions. The new hospital is an exciting project for Orange and the 'west'. Problems such as those facing Bathurst (Base) Hospital need not be repeated if the Orange Hospital staff, doctors, nurses and ancillary are taken notice of. Listen and learn please councilors, Orange is growing and at present has a great team of highly experienced doctors. If we do not provide a top facility then why should these specialists stay. To downsize is not caring for the future.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded to the submissions from clinicians and the public with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

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#### Submission:

My other concern is for the safety, security and psychology of the nursing staff and visitors, especially children and females should the forensic unit go ahead where it is proposed. Walking around the present hospital at night or on your own is daunting and even more of an issue in the psychiatric hospital. The criminally insane prisoners will be housed next to the carpark where people of all ages will be going at all hours of the night and day. It is wrong to have the innocent public to be subject to the fear of an escape – and that does happen all too often. Also the

intimidating taunts or indiscriminate behaviour of the insane rapist or murderer, which have the potential to scar for life The forensic unit should be in a pleasant, peaceful and quiet area with ample space for outdoor activity in privacy. As you know, the present site is noisy, not at all therapeutic.

#### **Response:**

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

The increased Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

In the Preferred Project the design of the Secure Forensic Mental Health Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The building design also provides discreet shielding of the secure external spaces from the road that will restrict these areas from public view.

# Submission from K Moor

#### Submission:

As a very experienced nurse and midwife who has worked in remote areas, small towns and big cities in Australia as well as other countries I have been closely following the planning of our new Base Hospital as I am now retired and associated with many people who need multiple health services. When the plans first appeared earlier this year I went to Council buildings to view them I was totally confused. I had seen earlier plans but now I could not decipher these at all. We had a radiotherapy unit – much needed and an essential service, but the patient services and bed space seems to have been obliterated. Then the much needed Bathurst Hospital was opened – more disasters. Obviously Council had not been involved with it, but neither were Health personnel. Now I find the same thing has happened in Orange. Our hospital of Excellence to cover the whole western area will barely be 'B' class. Please help the medical personnel to prevent the massive problems that will arise.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services (Radiotherapy unit is included) which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

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### Submission from Russell W Moor

#### Submission:

Considering the fact that our new hospital will be the major base hospital providing specialist services to the Greater Western Area Health Service (GWAHS), an area of 60% of NSW, approx 1000km long and 600km wide, something must be done to take a second look at the facilities provided in the present plan.

This hospital will not only service Orange and district but will be the hub of medical services in western NSW.

We only have one chance to get this plan correct. And even now as a non medical person I can see enormous problems in the present plan. It is obvious that the people who put these plans together knew nothing of the enormous role the new hospital will be called upon to fill in the coming years.

It is imperative Council takes steps to listen to the advice of people involved in dispensing medical care at our present hospital before these plans are finalised.

#### **Response:**

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

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Also the Preferred Project currently allows for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included

### Submission from J and I Moss.

#### Submission:

In our opinion, our mentally ill people are far better off in a peaceful and quiet area and in a beautiful outdoor setting for them to recover and not attached to the main hospital and away from the main road.

#### Response:

The Preferred Project has not attached the Secure Forensic Mental Health Building to the General Hospital. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume. The Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

SUPPORTING HEALTHY COMMUNITIES

In the Preferred Project the design of the Secure Forensic Mental Health Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The building design also provides discreet shielding of the secure external spaces from the road that will restrict these areas from public view.

#### Submission from Margaret O'Neill. Submission:

As a non-expert, I would like you to give full consideration to the criticisms that have been made by the Orange Medical Staff Council. Their careful and informed study of the plans must be given priority over the bureaucratic posturing of GWAHS and the political buckpassing of the Minister.

#### **Response:**

The Preferred Project has addressed the concerns by meeting extensively with clinicians and by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

Developing operating theatres, procedure rooms and preoperative services in a single suite to improve patient flow, time management and resource use

strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included.

#### Submission:

The exact siting of the Forensic Mental Health Unit, with it's security fencing gives great cause for concern from and aesthetic viewpoint. The area has already been visually compromised by the excessive removal of trees. Further, one would consider that the privacy of the inmates in a quieter, more remote part of the property would be more beneficial to their wellbeing. An examination of the property, both before and after looking at the plans shows that this is possible (and without further tree removal on a grand scale).

#### **Response:**

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

The increased Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

In the Preferred Project the design of the Secure Forensic Mental Health Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The building design also provides discreet shielding of the secure external spaces from the road that will restrict these areas from public view.

The fence is a strong element in the Preferred Projects design of this facility and has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the

Heritage consultant. The Architect have designed a fence that is acceptable to the clinicians and sympathetic to the sites Heritage significance

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Landscape Strategy. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume.

# Submission from Nancy and Bob Trounce Submission:

As a member of the Orange community for the past 16 years, I would like to take the opportunity to raise some concerns about the new Orange Base Hospital plans on display in the foyer of Orange City Council.

This is a really exciting project for our beautiful city of Orange and we would hate to see the same problems happen here as it did in Bathurst Hospital since it's opening in January.

We have concerns for the lack of space and beds which our doctors and nurses keep warning us of. There just isn't enough beds in the Orange Hospital for emergency cases from the region. The frail and elderly are sent out to hospitals in Blayney and Cowra etc. whilst waiting for a bed in a nursing home in Orange; this is so unfortunate as it takes them away from loved ones and family. The waiting area for outpatient services at the new hospital in Bathurst is dangerously small for the number of people waiting for their treatment and we hope the same mistake will not happen in our beautiful new hospital.

The Council needs to ensure there is adequate space available at Bloomfield for the Health Department to build another building if they can't fit everything they need into the building they have already started.

Thankyou for considering my views and I hope Orange ultimately gets a hospital facility which will promote the delivery of fast medical and nursing care of all the people living in the Central West.

#### Response:

The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

Developing operating theatres, procedure rooms and perioperative services in a single suite to improve patient flow, time management and resource use

strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included.

### Submission from A.R Wood

#### Submission:

As a member of the Orange community for the past 20 years, I wish to take the time to raise some concerns about our new Base Hospital plans on display.

This is an important project and we don't want trouble like there has been at Bathurst. I am concerned about safety, and security for the staff and visitors should the Forensic Unit be built where proposed. I was recently in the Base when a fight broke out in the car park at night and a victim ended up in my ward, not a nice situation.

I hope the forensic unit can be placed so not to place risk on nursing staff and visitors.

#### **Response:**

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

The increased Landscape buffer zone between the road and the Secure Forensic Mental Health Building has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

In the Preferred Project the design of the Secure Forensic Mental Health Building has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The building design also provides discreet shielding of the secure external spaces from the road that will restrict these areas from public view.

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Lighting Strategy the external lighting design for the total site is to allowed safe movement throughout the site of a night for staff and visitor.

### Submission from N. Cornish

#### Submission:

I wish to join the other disgruntled ratepayers in Orange who are disgusted at the plans for the new hospital.

It is horrifying to think that our new hospital will have less beds, and less room that the old Base, after spending all that money. Why build a new hospital at all, if we do not have more room for patients, instead of waiting in corridors for a bed to be become vacant (see CWD April 12<sup>th</sup>)

#### **Response:**

The existing buildings is very inefficient, for example circulation in existing buildings is more than required, proximity of departments is further apart than required and function of the buildings is not purpose built which create dysfunctional space. The Preferred Project has responded by providing a specific design facility that has been developed with the clinicians' and Medical professionals that consolidates required functions and enhanced proximity of departments into a single building this will provide an improving service to the community. The Preferred Project has addressed the concerns by insuring that the current design is in accordance with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

Developing operating theatres, procedure rooms and preoperative services in a single suite to improve patient flow, time management and resource use strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of

SUPPORTING HEALTHY COMMUNITIES

allied health therapies with rehabilitation, domiciliary

midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included.

# Submission from Joan Carty

## Submission:

The lack of space and beds about which our nurses and doctors keep warning us. Time and time again we see our friends, spouses and relatives, pushed out of hospital by desperate staff, when they are barely able to get around. This is because there aren't enough beds in the Orange Base Hospital for all ofthe emergency cases from the region. Frail elderly people who may not have long to live, are sent out to hospitals in towns such as Canowindra, Blayney and Cowra, whilst waiting for a bed in a Nursing Home in Orange, because there aren't enough beds in Orange Base to allow them to wait there, close to their family and loved ones. Many of us are getting older and require walking frames and/or gophers to get around. It is hard enough as visitors, let alone as patients, to get in and out of these places, for example, the bed rooms, public toilets, lifts and waiting rooms at the current hospital. The waiting area for outpatient services at the new Bathurst hospital is dangerously small for the number of people who need to wait there for their treatment. We hope that mistake won't be repeated in Orange. The council needs to ensure there is adequate space available at Bloomfield, for the health department to build another building if they can't fit everything they need into the building they have

#### **Response:**

The Preferred Project has addressed the concerns by extensive meetingd with clinicians and by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

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Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included.

## Submission from Cr Fiona Rossiter

#### Submission:

As a Councillor of Orange City Council I have received numerous approaches from the public and particularly, the clinicians and medical professionals of the City in relation to the hospital plans on exhibition.

Council will be considering the application and I will vote on it in my role as Councillor however, as a precaution and to ensure the issues are properly considered by the State Government and in the planning report, I wish to relay the following matters in relation to the Forensic Unit, which have been raised with me:

• Impact on heritage and environment (refer also to submission by ECCO)

SUPPORTING HEALTHY COMMUNITIES

#### **Response:**

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Heritage and Landscape Strategy. The Preferred Project does not seek to modify either of these strategies but to enhance the strategy, this has been demonstrated by working with a Heritage consultant to ensure the design is in accordance with the strategy requirements. The Preferred Project heritage consultant is satisfied that the Secure Forensic Mental Buildings impact upon the heritage significance of the Bloomfield site is acceptable. The assessment is consistent with the consent conditions, previous assessments and the format established by the Dept. Public Works Conservation Management Plan.

Issues assessed include the following:

- Building height;
- Elevation design;
- Materials and colours;
- Views to and from.

#### Submission:

• Proximity to general health section of hospital.

#### Response:

In the original approved design the location of the buildings was position in such a way that the access by the Medical Staff is by a clinical link, this planning has been maintained in the Preferred Project.

#### Submission:

• Proper design and management of Forensic Unit for the security and safety of the community and the user of the general health section of the hospital.

#### **Response:**

The Preferred Project has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The redesign has responded to the concern by internalizing the court yards also by doing this the wing of the building provides discreet shielding of the court yards from the road.

#### Submission:

• Visual amenity of Forensic Unit and security fences for both the site and from the public road.

#### **Response:**

The fence is a strong element in the design of this facility the proponent has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the Heritage consultant and the Architect have designed a fence that is acceptable to the user and the materials are sympathetic to the sites Heritage significance The Landscape buffer zone between the road and the Secure Forensic Mental Health Building has also been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west. The adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

#### Submission:

Impact of location of Forensic Unit on future expansion opportunities for the hospital.

#### Response:

The Preferred Project has responded to allow for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included. This expansion can occur without impacting on the Secure Forensic Mental building.

#### Submission:

• Proper consideration of alternate sites in the Parklands vicinity and as a result easy linkage to complimentary mental health units.

The concerns of the community and health professionals in relation to the above matter, is very real.

The large number of people who have contacted me are in support of the relocation of the Forensic Unit nd it is hoped that through this and other submissions that proper consideration i given to the matters raised.

#### **Response:**

The Preferred Project current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings.

## Submission from Reg Kidd

#### Submission:

I wish to object to the new (second DA) for the Orange Hospital. My main grounds are: (1) The original DA was misleading and/or deceptive. It did not show the Forensic Unit as a Forensic Unit. This mislead the public and councillors.

#### **Response:**

The Preferred Project has responded to the concerns by clearly locating and indicating all departments on all drawings.

#### Submission:

(2) The public were not informed adequately of what a Forensic Unit was, nor what security fencing was required for such.

#### **Response:**

The Preferred Project has responded to the concerns raised by relocating the Forensic Inpatient Unit, of the building, further to the east. The Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The redesign has responded to the concern by internalizing the court yards also by doing this the wing of the building and landscaping provides discreet shielding of the court yards from the road.

The fence is a strong element in the design of this facility the proponent has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the Heritage consultant and the Architect have designed a fence that is acceptable to the user and sympathetic to the sites Heritage significance

#### Submission:

(3) Another site recommended, has not been given adequate consideration. Even though professional staff from the hospital recommended(sic).

#### **Response:**

The Preferred Project current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings

#### Submission:

(4) No consideration has been given to the risk of locating the forensic unit onto the main road and opposite (and in full view of) the general hospital.

#### **Response:**

The design of the Orange Health Campus is providing an integrated Mental Health Unit into the hospital precinct and by having this approach the Secure Forensic Mental Health Building location

SUPPORTING HEALTHY COMMUNITIES

has been included in the original Master Planning Strategy. The Secure Forensic Mental Health Building is not located on the main road and the Preferred Project has improved the strategy by increased the Landscape buffer zone between the road and the Secure Forensic Mental Health Building this zone has been expanded to 8.4 meters while maintaining the North / South view corridor through the site. The increased Landscape zone has been created by relocating the western staff car park a further 5 meters to the west.

The Secure Forensic Mental Health Building is not located at the front of the main entrance of the General Hospital or adjacent to the General Hospital and the adjacent carpark is a staff only carpark that will regulated to allow staff entrance only. The public carpark is located further to the north of the Secure Forensic Mental Health Building and increased landscape has been introduced to provide screening.

#### Submission:

(5) Public, hospital staff and myself being mislead by the previous chief planner (Mr Robert Martin).

#### Response:

The proponent note this comment

#### Submission:

(6) Numerous mature and healthy vegetation being removed for the Forensic unit before the DA has approved (sic)

#### **Response:**

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Landscape Strategy. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume.

#### Submission:

(7) Finally, a perfectly good site (owned by the Government) exists, and has been recommended for the location of the Forensic Unit. It would be win/win for Government and the public – why has it not been given proper and transparent consideration. The consultation process has been inadequate and not transparent.

Therefore on these grounds I strongly object to the proposed location (only) of the Forensic Unit, and the lack of adequate consultation and transparency with the DA process to date.

#### **Response:**

The Preferred Project current application to modify the Part 3A approval for the Orange Hospital and Associated Health Facilities does not include any modification to or seeking to change the location of the buildings

# Submission from Dr Ruth Arnold Submission:

I object to the proposal in its current form. Negotiations are still underway between the Medical Staff Council of Orange Health Service and the NSW Department of Health regarding the plans and further extensive amendments to the plans are expected, resulting from the current review process.

The Plans [or the Hospital were rejected by the staff of Orange and Bloomfield Hospitals on the following grounds;

1. The facility as currently planned does not meet Australasian Health Facility Guidelines.

These are guidelines stating the minimum room sizes and requirements for hospitals. They are readily accessed at www.healthfacilityguidelines.com.au "The Australasian Health Facility Guidelines (HFG) are an initiative of the Health Capital and Asset Management Consortium (HCAMC). The Australasian HFG enables health facilities throughout Australasia to use a common set ofbase elements as a guide and offers significant benefits including:

Australasian best practice approach to health facility planning
standard spatial components

The Health Minister Reba Meagher has personally made a commitment that the new Orange Hospital "will meet Health Facility Guidelines". The Premier stated when meeting with clinicians that "If a shortfall is identified by the review process, it will be met and funded."

The facility was professionally reviewed by Capital Insight and it was found that a further 4000 square metres would be required for the current plans to meet the Health Facility Guidelines.

Clearly the Hospital staff and community are expecting that a further major amendment, including this additional space "vill be coming soon. The plans currently on display do have expansion zones, but it appears that more space than this will be needed.

#### **Response:**

The Preferred Project has addressed the concerns by extensive meetings with the clinicians and by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded with the increase in available bed numbers also a range of specialist services which will be enhanced on the site as part of a planned upgrading of clinical services.

Extension of cardiovascular diagnostic and treatment service capability with the provision of a cardiac catheter laboratory able to provide diagnostic angiography and interventional procedures including stenting of coronary arteries and pacemaker insertion progressive development of a Comprehensive Cancer Centre commencing with more appropriate facilities for chemotherapy and palliative care, and provision for development of on-site radiotherapy services as part of the master plan for the hospital

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strengthening the interface between inpatient, ambulatory and community health services to support better patient flow and skills sharing by clustering relevant inpatient and ambulatory services together including collocation of allied health therapies with rehabilitation, domiciliary midwifery and early discharge programs with women's and children's services and the CAPAC team with Emergency and Surgical Services.

Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included.

#### Submission:

3. The current plans have less floor area available to the general Hospital and outpatient services than the current facilities. Some of this lack of space will be addressed when the Health Facility Guidelines have been met. Space for outpatient services such as the Paediatric Clinic are not covered by these Guidelines. So far there is insufficient space tor clinics in Renal Medicine, Paediatrics, Community and Family Health for

SUPPORTING HEALTHY COMMUNITIES

example. I am concerned that if more space is

not provided essential services will be lost to the community when the new hospital opens. The current Orange Base

Hospital has a floor area of 35591 square metres including the services which are to be located within the new Hospital building (Breast Screen, Anson Cottage, Apex, Diabetic Clinic). The new plans on display provide only 27000 square metres (approximate), a

difference of approximately 8000 square metres. It is hard to imagine that a deficit like this will still allow all existing services room to function.

#### **Response:**

The existing Orange Base Hospital does have more floor area because the use of existing buildings give more space but it is very inefficient for example circulation in existing buildings is more than required, proximity of departments is further apart than required and function of the buildings. Also multiple sites create dysfunctional space design. The Preferred Project has address the concerns by insuring that the current design is in accordance with the current Australian Health Facility Guidelines. Also the Preferred Project has responded by providing a specific design that has been developed with the clinicians' and Medical professionals that consolidates required functions and enhanced proximity of departments into a single building therefore lesser space but improving service.

#### Submission:

3. There are fewer general adult overnight beds than the current hospital, which already runs at occupancy levels greater than the 85(% considered safe for patient care. The general adult overnight medical and surgical wards at Orange Base hospital currently run at very high occupancy rates (approximately 95%), which places staff at considerable stress and can mean significant delays for patients while tlley wait in the Emergency department for a bed. All the projection data for Orange Base show that there will be increased demand for services into the future due to the Area-wide role of Orange Base Hospital as a Rural Referral Hospital. The hospital will open in 2011 and yet the overnight beds proposed are not sufficient for current workload at the Health Department's recommended occupancy of 85% or less. The number of beds is currently being reviewed by NSW Health. A further amendment to accommodate additional ward bed space is anticipated.

#### Response:

The Preferred Project application has responded with the increase in available bed numbers Also the current design allow for expansion in a number of departments for example general wards to the east, an extra theater to be added and Nuclear Medicine to be included.

#### Submission:

4. The forensic Mental Health Unit as currently planned does not meet patient requirements for access to outdoor space. This unit is still being reviewed by clinical staff, OWAHS and the Health Department. To meet the needs of patients and statlit may need to be relocated.

#### **Response:**

The Preferred Project has address the concerns by insuring that the current design responded to the concerns raised by clinicians for example the Forensic Inpatient Unit, of the building, has been relocated further to the east and the Medium Secure Rehabilitation Unit, of the building, has now been relocated to the west. The Preferred Project has also responded to the concern by internalizing the court yards this allows easier patient access and staff observation of the external spaces also by doing this the wing of the building and increased landscaping provides discreet shielding of the outdoor spaces from the road and public.

#### Submission:

5. Full details regarding the fencing of the Forensic Mental health Unit have

not been supplied. Currently the unit is placed next to the stall carpark. The plans state there is a 2.7 metre high wire fence. No elevations or further detail is given. Is this sufficient to meet the legal requirements of this unit? Some patients in this unit will be high security and 2.7 metres is not a full prison standard fence. Has this proposal been to the NSW Forensic Mental Health

Fencing committee? The conditions of Approval from the

Department of Planning stated in B2(d) "Details of proposed fencing of the secure mental health Unit shall be submitted to Orange

City Council [or approval, prior to construction works commencing". Perhaps this was submitted as a separate document. The fencing of this unit must meet the needs of the staff, patients and community. In the current location there is little space to provide environmentally sympathetic screening plants around the fence, to give patients any privacy. A 2.7 metre high fence may not prevent escape of potentially violent patients.

#### **Response:**

The Preferred Project note the fence is a strong element in the design of this facility the proponent has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the Heritage consultant and the Architect have designed a fence that is acceptable to the user and sympathetic to the sites Heritage significance.

Also the Proponent has added to the Statement of Commitment the proposed details of the fence as required under the Department of Planning condition B2(d). These details have been developed with impute from the clinical staff.

# Submission from Environmentally Concerned Citizens of Orange (ECCO)

#### Submission:

Environmentally Concerned Citizens of Orange (ECCO) has examined the Major Project Modification for the Orange Health Campus Redevelopment at Bloomfield, and assessed it in conjunction with the stated Hospital Project Objectives, and wishes to lodge an objection to the proposed location of the Forensic (Secure)

Mental Health Unit.

ECCO has reached the consolidated viewpoint that:

• the proposed location of the Forensic Mental Health Unit on a site between Wards 18 and 19 to the north, the Living Skills Unit to the east, the Canobolas Clinic to the south, and the proposed staff carpark to the west, is inappropriate for heritage, aesthetic and environmental reasons, as outlined below.

• an alternative site, to the South of the currently proposed site would satisfy the Project Objectives and avoid the heritage, aesthetic and environmental issues identified below, and

• the currently proposed site would then provide an opportunity for it to be used exclusively as open space and garden for the benefit of patients, staff and visitors. The currently proposed location seriously compromises the Hospital Project Objectives as applicable to the Forensic Mental Health Unit, is in direct conflict with the recommendations of the Arborist's Report, and is based on an inadequate Flora and Fauna Assessment.

1. Project Objectives have been compromised. General Objective; "Balance the operational needs of the hospital with the heritage, cultural and environmental issues that affect the site".

The operational needs of the Forensic Mental Health Unit (referred to hereafter as "the Unit") have been given an unnecessarily higher priority over heritage, cultural and environmental issues affecting the site. The proposed site is directly in front of heritage listed buildings, Wards 18 and

19, and also contains heritage listed horticultural buildings, in particular, the sunken glasshouse. Locating the Unit on this site will require the demolition of the horticultural buildings and will compromise the appearance of Wards 18 and 19 when viewed from the south. The proposed site has played, and can continue to play, a major role in the provision of the therapeutic and passive recreational opportunities for both patients and staff. The proposed site contains a wide range of exotic shrubs and tree species; many selected on advice from Kew Gardens (England), and some of significant age and appearance, which collectively provide a valuable open space area, as well as flora and fauna habitat, and a buffer to the adjoining buildings.

#### **Response:**

The preferred site option was developed following the listing of the site as state significant in July 2006 to reduce the amount of proposed demolition and based on revised needs for the Tertiary Mental Health facilities. This option consolidated the Acute Mental Health facilities within a single

SUPPORTING HEALTHY COMMUNITIES

storey building on the north side of the existing Ward

Building 18 and 19 which were retained, reused the existing buildings, Amaroo (Building 44) and Canobolas Clinic for inpatient units and constructed a new custom built single storey Forensic Mental Health building. The architectural character of the redevelopment is contemporary with horizontal form characterised by walls rather

than roof and does not attempt to replicate the form of the heritage buildings. The forms are modelled in related detail within the walls through the use of a grid of joints which express the cladding technology. This visual pattern reflects and compliments the dominant rectilinear brick forms within the heritage precincts.

Materials for the new facility include brick panels and lightweight cladding. The red earth colours used specifically in prominent elements on the ground floor elevations, such as the entrances to reflect the colour and character of the historic buildings. The colour scheme for the buildings is intended to reflect and enhance the relationship of the buildings with the landscape. The objective in using darker earth colours and metallic finishes is to allow the landscape and heritage buildings to dominate the visual setting with the new work being recessive in tone. The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Heritage Strategy. The proponent is working closely with our Heritage consultant to ensure the Preferred Project is a modern interpretation of the existing strategy. The wards 18 and 19 are to be refurbished to the Heritage Consultants requirements. The sunken glasshouse is one aspect of the Heritage Strategy and this building is to be relocated and rebuilt to the Heritage consultant requirements.

The landscape forms a dominant element of the Bloomfield site and the new development attempts to fit within the broad landscape parameters established by the original design, primarily in the creation of intimately scaled spaces within and between the new buildings. The use of courtyards is a pragmatic response to the need for daylight and visual relief in buildings with large floor areas. It also assists in way-finding and provides a reflection of the spaces evident in the masterplan between the heritage buildings. Landscaping species have been chosen to reflect both the exotic and indigenous planting legacies found in the existing landscape. The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Landscape Strategy. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings. The revised design maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume. The Bloomfield Memorial Garden and the Staff Memorial Garden are maintained and the new tree planting will act as a backdrop and compliment the heritage value. Large avenues of evergreen trees to the boundary and car parks and feature deciduous trees that provide seasonal variation (autumn leaves) are selected. All species selected are suitable for the environment and also consider the Hospital requirements.

#### Submission:

General Objective; "Integrate external spaces with internal areas to provide a therapeutic environment for patients and staff". The proposed Unit has limited external spaces as part of its design, and as such, new landscaping would be limited in scale and size, compromising the therapeutic value of the external spaces. The proposed site formerly played an important role in the therapy of mental health patients in its landscaped gardens and nursery area. The opportunity to assume this role again will be lost if the Unit is located on this site.

#### **Response:**

The design including the provision of courtyards has been developed with the users to respond to the clinical and therapeutic needs of patients to be accommodated in this facility having regard to the acuity of the patient and the contemporary design of such a facility. The operational requirements of maintenance of surveillance and privacy of patients in the building, has led to changes in the building footprint. The need for single, large courtyards for each individual unit which to be setback from the view road ways and public interface has extended the building

SUPPORTING HEALTHY COMMUNITIES

footprint. The courtyards are sheltered in the resultant U-

shaped building form. Major amendments to the building's footprint and massing. Multiple small courtyard spaces at the perimeter of the building envelope have been replaced by three consolidated courtyards. This change has strengthened the external amenity for patients, and improved staff surveillance in courtyard spaces, in accordance with the outcomes of consultation. The relocation of courtyard

spaces has also improved the buffer between the public interface and the perimeter fencing. As well as increasing this zone, landscaping and the building fabric has been further developed to improve patient privacy. This has been achieved through softening the fence's scale, without compromising the clinical and security requirements, in response to public submission regarding the visual impact. The arrangement of splayed bedroom pods has been altered to improve operational and security arrangements within the units. This has led to a revised massing for the building, with the splayed wings to the eastern end of the building moving south.

#### Submission:

General Objective; "Provide a sustainable approach to concept planning that identifies expansion zones to accommodate the future growth of the health service. The proposed site will not allow for any future expansion in the size of the Unit as it is surrounded and constrained by existing buildings, and by the proposed staff carpark.

#### Response:

The Preferred Project allows for expansion in a number of departments in the General Hospital for example general wards to the east, an extra theatre to be added and Nuclear Medicine to be included this expansion will not be affected by the location of the Secure Menatl Health Building. Expansion if required for the Secure Mental Health Building will be accommodated by expanding into the buffer zone to the south between Canobolis and the Secure Forensic Mental Health Building also the buffer zone to the west and to the east of the Secure Forensic Mental Health Building can allow for expansion.

#### Submission:

Character Objective; "To locate new buildings in harmony with the heritage buildings and create an environment that is human in scale and welcoming to the visitor". The immediate proximity of the proposed Unit and its high security fencing, to heritage listed Wards 18 and 19 seriously impacts on the visual integrity and amenity of these buildings. Contrasting design features and the Unit's planned location would present visitors with an unwelcoming appearance.

#### **Response:**

The Preferred Project has developed the buildings in harmony and based on revised needs for the Tertiary Mental Health facilities. This option consolidated the Acute Mental Health facilities within a single storey building on the north side of the existing Ward Building 18 and 19 which were retained, reused the existing buildings, Amaroo (Building 44) and Canobolas Clinic for inpatient units and constructed a new custom built single storey Forensic Mental Health building. Both the single storey Acute and Forensic Mental Health building have been located to respect the existing heritage buildings the Preferred Project has developed the building in consultation with the heritage consultant and to there satisfaction that the Secure Forensic Mental Buildings impact upon the heritage significance of the Bloomfield site is acceptable. The assessment is consistent with the consent conditions, previous assessments and the format established by the Dept. Public Works Conservation Management Plan.

Issues assessed include the following:

- Building height;
- · Elevation design;
- Materials and colours;
- Views to and from.

The fence is a strong element in the design of this facility the proponent has responded to the community concerns through consultation with the Secure Forensic Mental User Group, the Heritage consultant and the Architect have designed a fence that is acceptable to the user and sympathetic to the sites Heritage significance.
Also the Proponent has added to the Statement of

Commitments the proposed details of the fence as required under the condition. These details have been developed with impute from the clinical staff.

#### Submission:

Environment Objective; "To promote ecologically sustainable site planning and design". The location of the Unit on the proposed site does not promote ecologically sustainable development. The placement of the buildings will destroy existing mature vegetation, important fauna habitats, and biological communities. The restricted area of the site, and proximity to other buildings precludes the implementation of any significant water sensitive design features and passive solar landscaping.

#### **Response:**

The placement of the unit will have little impact on the important fauna habitat and the biological communities if this is the case. The mature vegetation has not been identified on the Heritage register. Advice from the Project Arborist and the Bloomfield Site Staff is that the same species exist on the balance of the site and seeds from mature trees located on the site are to be propagated for future use. The Landscape Architect has identified a number of existing trees to be replanted into other areas on site. The Preferred Project desired concept of large trees in grass is maintained to the external open space zones. The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume.

#### Submission:

Environment Objective; To protect significant tree plantings and individual trees on the site". The location of the Unit on the proposed site will result in the destruction of between 40 and 60 trees, many of which are significant mature specimens and others which form part of pathway avenue plantings. Many of these trees are of significant heritage value and their removal would result in loss of local heritage.

#### **Response:**

In the Preferred Project the new tree planting will act as a backdrop and compliment the heritage value. In terms of Heritage status none of the trees on the site are Heritage listed in the Heritage Impact Statement. Large avenues of evergreen trees to the boundary and car parks and feature deciduous trees that provide seasonal variation (autumn leaves) are selected. All species selected are suitable for the environment and also consider the Hospital requirements The Preferred Project landscape design has allowed for 1048 trees of species that are consistent with the existing Orange Hospital campus to be planted on the site and this is consistent with the currently approved Landscape Strategy.

#### Submission:

2. Arborist's Report and Recommendations have been ignored. The Arborist's Report identified trees on the proposed site, and recommended that they should all be retained as the majority had a Safe Useful Life Expectancy of 20+ years, and exhibited other features warranting their retention. An inspection of the site by ECCO members revealed that the Arborist's Report failed to correctly identify some species. The Report recommended that "the least impact siting of the (Forensic Mental Health) Unit according to the supplied proposals, would be the area adjacent to buildings 29 and 30 (ie immediately to the south of the proposed site), as this holds the least significant trees in terms of species and tree condition".

#### **Response:**

SUPPORTING HEALTHY COMMUNITIES

The proponent have not ignored the Arborist's Report and

Recommendations but have, with the Landscape Architect, continually worked with the Arborist that prepared the original report, to assess and review all tree removal and tree selection on the site. A further Arborist report and tree remove plan was carried out on 28 Feb 2008. The Preferred Project landscape design for Orange Hospital and Associated Health Facilities addresses the amenity of the site and the district and whilst every attempt will be made to preserve large mature trees within a site such as this, the limitations the short and long term OH&S issues means that some trees noted for retention must be removed.

#### Submission:

3. Flora and Fauna Assessment is inadequate. A Flora and Fauna Assessment of the proposed Bloomfield Hospital site was restricted to a desktop study and a field inspection of two study areas, neither of which was in near proximity to the proposed site of the Forensic Mental Health Unit. The field study areas only covered the site of the General Hospital and the wetland area in the existing golf course. A recent Fauna Assessment of the Site of a proposed Private Hospital, immediately across Forest Road and to the east of the Forensic Mental Health Unit, identified the presence of nesting pairs of the threatened bird species, the Superb Parrot. This species has been frequently observed in the grounds of Bloomfield Hospital and it is highly likely that vegetation throughout the proposed Hospital site, including that of the Unit, would support this species.

#### **Response:**

The current Part 3A approval for the Orange Hospital and Associated Health Facilities has an approved Flora and Fauna Strategy. It is not the function of the Preferred Project to amend or change the approved strategy. However working with the Bloomfield Site staff there has been extensive work done in terms of fauna relocation and there has been no reports of threaten fauna found on the site for the Secure Mental Health Building.

## 3. Preferred Project Report

#### 3.1. Introduction

In response to submissions received by stakeholders and public from the project's display in (section 2), and further consultation with clinical users, the Preferred Project has been modified in regards to the issues of masterplanning, landscaping, carparking and architectural expression.

The following report documents the modification to the approved, Orange-Bloomfield Hospital Re-Development and Major Project 06-0111 highlighting changes made to the approved scheme.

#### 3.2. Outline of Modifications

Modifications to the Preferred Project have been developed as a result of further consultation clinical users, and in response to public submissions registered during the projects display. Further, the scheme responds to the Part 3A conditions of consent. Please refer to (section 4), for detailed responses to individual conditions detailed in "Determination of Major Project No.06\_0111, prepared by the NSW Department of Planning, dated 09.12.2006".

#### 3.2.1 Master planning

The Preferred Project retains the master planning strategies of the approved Project, with the General Hospital (GH) located at the north of the site on the existing oval, the Acute Mental Health facility (AMH) directly to the south, and the Forensic Mental Health facility (FMH) situated to the south of the existing Ward 19 and Ward 18 buildings.

The northern façade of the GH has moved approximately 15m to the north and AMH approximately 8m north of the original position. This relocation has increased the buffer between the building and the curtilage of the existing heritage gardens. A closer relationship between the GH and AMH facilities is also achieved. During the consultation process with clinicians, this relocation has identified clinical and operational services improvements between the two facilities.

Adjustments have also been made in several of the road arrangements on site. These changes are outlined below (see figures 01 and 03):

1) Ambulance Access Road:

In response to further consultation with NSW Ambulance Services, a dedicated ambulance entry/exit road has been introduced, situated to the west of the Forest Road public car park. This road will directly link the ambulance parking area to the south of the GH. This solution will ensure unimpeded access to and from the dedicated ambulance parking area on site.

2) Eastern Access Road (running north/south to the east of the GH):

As a result of the amended clinical requirements for the GH, this road has moved east to accommodate the expansion of the GH. This relocation has also improved access and minimised the travel distance between the GH and the secure entry in AMH. The dedicated "drop off" zone for the outpatient's entry has also been amended to align with the new entry location and building envelope of the GH. These changes resulted from further consultation with clinical users and the NSW Ambulance Service.

3) Canobolas Drive (running north/south along the site):

In response to public submission regarding concerns of the visual impact of associated fencing for the FMH building, a curve has been introduced in the area adjacent to the FMH facility this will increase the landscaping zone between the car park, and the road to the building.

As a result, the staff car park has also been adjusted, and is now approximately 5m further west than the line of the public car park to the north. This inclusion has improved the buildings engagement with the public realm, using an increased setback. Consultation with the landscape architect has incorporated for an improved landscape buffer between the building and public space.

In addition, the clinical link, running north/south which provides a pedestrian link between the buildings on site, has also been altered. The location has remained generally unchanged. However, the levels have been altered through a series of linear ramps. This change will improve the ease and speed of movement between the buildings. Localised access paths and ramps to individual buildings have also altered to suit the new building envelopes. The pedestrian access surrounding Wards 18 and 19 has been adjusted to reflect the relationships between the buildings.

#### **Modifications to Masterplanning**



Figure 01. Modified Scheme - Site Plan, Access Roads (SK-SP-01.02)



Figure 02. Modified Scheme - Site Plan, Access Roads (SK-SP-01.03)



Figure 03. Approved Scheme- Site Plan, Access Roads

#### 3.2.2 Building Footprints

#### a) General Hospital:

The previously nominated expansion zones for Radiotherapy and Community Health, to the east and south/east in the approved scheme, have been included in the revised scheme. As well, several departmental changes resulting from consultation with clinicians and submissions received have altered the footprint of the building. These major changes are outlined below and highlighted in Figures 04 to 07.

#### Ground Floor:

1) Blood Bank and Breast Screen:

This block at the north/western area of the building, has extended north to align with the northern face of the ward area. This was a necessary response to consultation with NSWHealth, and developments within the planning for the GH.

- Radiotherapy: The approved master planning extension for Radiotherapy has now been included into the building envelope.
- Community Health: The approved master planning extension of Community Health has now been included into the building envelope.
- Intensive Care Unit: This area of the building envelope has increased to the south, subsequent to consultation with NSWHealth and developments in planning.

#### First Floor:

- Operating and Peri-Operative Department: An increase in bulk at first floor level to the south and south/east was generated in response to consultation with clinicians and submissions received and developments in planning within the General Hospital's functional relationships.
- Dental Therapy: Expansion to Dental Therapy on the first floor has led to an increase in area to the south/east of the General Hospital.

#### b) Acute Mental Health:

Through consultation with clinicians and submissions received, the AMH building has been amended. The footprint has altered to accommodate the operational requirements of the AMH clinical units and to improve the functional relationship with the adjacent GH. The building retains it linear and rigid planning principles, using internal courtyards to allow sun and daylight to penetrate the living spaces. The bedrooms remain aligned to the north and south to allow for sunlight and views to surrounding courtyards and gardens. The use of these courtyards strengthens the garden setting from which the site has gained much value.

Further to this, clinical requirements have impacted on the footprint. These important considerations include: maintaining site lines to bedroom and living areas from staff stations; and improving the security, safety and privacy requirements of staff and patients. Major amendments to the building's footprint and massing have been summarised below and highlighted in Figure 08.

- 1) Through the clinical consultation process and in response to public submissions (See Appendix D), patient courtyards have been relocated to internal spaces. This has improved patient privacy and security, whilst strengthening surveillance opportunities.
- 2) As a result of changes to the GH footprint to the south, the AMH building has been reconfigured to improve the relationship and linkages at the eastern and western ends of

SUPPORTING HEALTHY COMMUNITIES

the building. Further to this, the alterations to footprint

have retained and improved the external garden space between the buildings. This further strengthens the 'hospital in a garden setting' ambience.

3) As part of the requirements in the Part 3A conditions of consent, the heritage curtilage line has been retained by a linear arrangement of bedrooms to the south of the building.

#### c) Forensic Mental Health:

The FMH facility has been amended following consultation with clinicians and submissions received. The operational requirements of maintenance of surveillance and privacy of patients in the building, has led to changes in the building footprint. The need for single, large courtyards for each individual unit which to be setback from the view road ways and public interface has extended the building footprint. The courtyards are sheltered in the resultant U- shaped building form. Major amendments to the building's footprint and massing have been summarised below and highlighted in Figures 09.

 Multiple small courtyard spaces at the perimeter of the building envelope have been replaced by three consolidated courtyards. This change has strengthened the external amenity for patients, and improved staff surveillance in courtyard spaces, in accordance with the outcomes of consultation.

The relocation of courtyard spaces has also improved the buffer between the public interface and the perimeter fencing. As well as increasing this zone, landscaping and the building fabric has been further developed to improve patient privacy. This has been achieved through softening the fence's scale, without compromising the clinical and security requirements, in response to public submission regarding the visual impact.

2) The arrangement of splayed bedroom pods has been altered to improve operational and security arrangements within the units. This has led to a revised massing for the building, with the splayed wings to the eastern end of the building moving south.



**Modifications to Building Footprints** 

Figure 04. Modified Scheme – General Hospital, Ground floor

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Figure 05. Approved Scheme- Site plan, General Hospital, Ground Floor



Figure 06. Modified Scheme- General Hospital, First Floor



Figure 07. Approved Scheme- General Hospital, First Floor





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#### Figure 09. Modified Scheme - Forensic Mental Health

#### 3.2.3 Future Expansion

In consultation with clinicians and submissions received, additional future expansion areas have been identified and included in the master planning arrangement for the GH. These expansion zones are required to assist in future proofing this facility by minimising the infrastructure changes required for expanding clinical services in the future, if required. These include:

#### Lower Ground Floor:

• Future Medical Records expansion (300m<sup>2</sup>)

#### Ground Floor:

- Future Emergency Department expansion (200m<sup>2</sup>)
- Future Intensive Care Unit expansion (60m<sup>2</sup>)
- Future Allied Health expansion (650m<sup>2</sup>)

#### First Floor:

- Future 40 Bed ward expansion (1570m<sup>2</sup>)
- Future Operating and Peri-Operative expansion (495m<sup>2</sup>)

These expansion areas are highlighted in green on submitted plans SK-GH-02.30, SK-GH-02.31 and SK-GH-02.32 below, and included in Appendix A.

#### **Future Expansion Areas**

SUPPORTING HEALTHY COMMUNITIES



Figure 10. Future Expansion- General Hospital, Lower Ground Floor (SK-GH-02.32)



Figure 11. Future Expansion – General Hospital, Ground Floor (SK-GH-02.30)

#### Part 3A - Preferred Project Report

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Figure 12. Future Expansion – General Hospital, 1st Floor (SK-GH-02.31)

Further expansion areas are highlighted in Figure 12. The GH has additional allowance for the following expansion areas, as nominated on site plan drawings, Figure 13 (SK-SP-01.01) and SK-SP-01.02 in Appendix A.

- 1) Future Ambulance Station (To the east of the GH)
- 2) Future Student Accommodation (To the east of the GH)

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#### Additional Future Site Expansion Areas



## **Figure 13. Future Expansion- Ambulance Station and Staff/Student Accommodation** (SK-SP-01.02)

#### 3.2.4 Architectural Expression

The visual impact of all new buildings on site has been enhanced to reflect an appropriate architectural response to the changes in planning, heritage issues, siting and ESD principles.

Through continued consultation with our Heritage consultant, heritage principle previously adopted have been developed to strengthen the new buildings relationship and connection with the surrounding existing buildings. A series of 'heritage panels' of a modern construction typology, reflecting the scale and colour of existing bricks on site, has been incorporated. This design corresponds with the strength of the buildings' façade at ground floor, and provides a clear datum which relates to the floor level of the existing Ward 18 and 19 buildings.

The lower ground floor is shaped as a dark, unassuming and monolithic platform. This is appropriate to the floor's role of accommodating the building's 'back of house' departments and services. The heritage panels on the floors above protrude from this platform, pronouncing the colours and modern materials off a dark secondary base element. The first floor compliments the heritage panels by stepping back from the line of the heritage panels, and through change of colour and material scale, assists in pronouncing and strengthening the colours of these panels.

The three entries to the GH; Main entry, Emergency and Outpatients (See SK01.01 Master Plan in Appendix A) are pronounced through a change in material. High quality finishes utilised in these areas of the building announce the entries and direct visitors and patients to the relevant area of the hospital. Heritage panels acting as screen walls, also highlight entry points, improving way-finding for patients and visitors along covered walkways or canopies.

AMH and FMH have a similar response to architectural

language and heritage principles as the GH. The masonry base provides a continuation of the heritage 'datum', and colour is a continuous theme. The use of pre-finished, hard wearing materials such as Vitrapanel replaces metal cladding. The alternate materials increase patient safety and security.

The roof forms of all buildings are enhanced from the approved scheme to continue the ideas expressed in the facades and architecture. Skillion style roofs float above the building, leading the eye line past the mass of the GH onto vistas beyond to the north and east. The low level roofs retain views from the existing building to the south. The strengthening of the roof forms allows sunlight to enter through various courtyards into the buildings.

Colours throughout all new buildings remain sympathetic to the existing buildings on site, whilst expressing a modern language. The use of red/brown masonry links to the brick construction of existing buildings, whilst dark greys and charcoals provide a sharp and modern language reflecting the architectural forms of the new buildings.

#### 3.2.5 On-Site Parking

Car parking numbers have been increased by a total of 15 spaces. This expansion is necessary to accommodate the increase in overall bed numbers in the facility and expansion of other clinical areas. There will be an associated increase in traffic and pedestrian flow on site.

These additional car spaces have been allocated as five staff and ten public spaces. The additional staff car spaces have been incorporated adjacent to the outpatient's entry to the east, allowing for improved staff access to these departments of the hospital. The additional public spaces have also been allocated to this area. This allocation was necessary due to the increase in floor space in the eastern area of the GH, to accommodate the increase in Day Therapy and Outpatient services. The following changes are required.

1) Western Car Park (Forest Rd) –

Introduction of the dedicated ambulance route has led to replanning of the car park.

- Eastern Car Park The introduction of the radiotherapy expansion area as highlighted in this report has led to the replanning and amendment of this car park.
  Staff Car Park –
- Through consultation with the NSW Ambulance service, this car parking has been separated from the ambulance entry and parking area for ease of ingress/egress of ambulances, and the safety of staff.

Macro planning of on-site parking has remained as per the approved scheme, with two new large car parks for the use of staff and public.

The western public car park has been amended to incorporate the new dedicated ambulance access road. The eastern staff and public car parks have altered in their arrangement to accommodate the inclusion of the Radiotherapy expansion and increased footprint of the GH. Staff parking to the west of AMH facility has also been relocated south to allow for a dedicated ambulance access area south of the General Hospital.

The overall location of parking arrangements on site has been retained in principle. The majority of public parking is limited to the main western and eastern car parks. The majority of staff parking is located within these main car parking areas. The localised parking servicing specific buildings has been retained.

#### **On-site Parking Modifications**





Figure 14. Modified Scheme - Master Plan, On Site Parking (SK-SP-01.01)



Figure 15. Approved Scheme - Site Plan

#### 3.2.6 Landscape Design

The landscape design for Preferred Project addresses the amenity of the site and the district. The landscape proposal will retain the landscape character of the hospital site with large feature trees in lawns with feature garden plantings.

The Preferred Project maintains the strong avenue to the road (internal) and screening and softening to the car parks and general infrastructure. The entry is maintained and the tree protection zone is not affected. The desired concept of large trees in grass is maintained to the external open space zones.

The arrangement of tree and shrub planting considers views to and from buildings to enhance the wellbeing of the users. Tree species will provide solar access (evergreen/ deciduous), seasonal variation in colour and texture and the lower planting layer of shrubs will enhance the well-being of the users by providing colour, texture and perfume.

The courtyards will combine landscape and built elements and cater for the needs of the users (staff, patients and visitors). Planting and associated elements will enhance amenity and compliment the architecture. The courtyard designs are determined by the requirements of the users and the final design will reflect their needs.

The Preferred Projects GH footprint and associated design maintains the access drive to the main hospital entry. This road is enhanced with the screen planting of mixed species along the golf course boundary. The tree planting forming an avenue to the south enhances the main entry to this precinct. The car parks are screened at the lower level, and continue the strong tree canopy of mixed species. The trees provide shade and a visual link throughout the site. The avenue planting and large feature trees in grass are the dominant theme retained in the landscape design that acknowledges the landscape of the locality.

#### Plant Species

The tree species are selected from species already on the site and others that are characteristic to the Orange environs. These plants will be sourced from local nurseries selection will be on the recommendation of local knowledge of the site gardener, local nurserymen and other members of the local community with a longstanding association with Bloomfield Hospital. The tree and/or shrub species with a historical significance are respected and are incorporated in the design. Plants that have been propagated (cuttings or seed) from the original site trees are to be incorporated in the central open areas. A plant stock pre order is recommended to ensure availability of the plant selection.

The Bloomfield Memorial Garden and the Staff Memorial Garden are maintained and the new tree planting will act as a backdrop and compliment the heritage value. Large avenues of evergreen trees to the boundary and car parks and feature deciduous trees that provide seasonal variation (autumn leaves) are selected. All species selected are suitable for the environment and also consider the Hospital requirements.

The following is a list of tree species, 1048 trees will be selected, in consultation with local nurseries, from the following Table 01:

#### Landscape Design

The landscape design, as with the architectural design, continues strong ecologically sustainable design principles including recycled water use for irrigation, solar consideration in relation to buildings and appropriate species selection for the given environmental conditions.

#### Table 01. List of Plant Species

BOTANICAL NAME		
Abies grandis	Grand Fir	
Acer campestre	Field Maple	
Acer negundo	Box Elder	
Acer palmatum	Japanese Maple	
, Acer pseudoplatanus	Sycamore Maple	
Aesculus hippocastanum	Horse Chestnut	
Araucaria araucana	Monkey Puzzle Tree	
Arbutus andrachne	Strawberry Tree	
Betula pendula	Silver Birch	
Brachychiton populneus	Kurrajong	
Calocedrus decurrens 'Lawson'	Incense cedar	
Cedrus atlantica	Atlas Cedar	
Cedrus atlantica 'Glauca'	Blue Atlas Cedar	
Cedrus deodara	Himilayan Cedar	
Cedrus deodara 'Aurea'	Golden Himilayan Cedar	
Celtis australis	European Hackberry	
Chamaecyparis lawsoniana 'Allumii'	Lawson Cypress	
Chamaecyparis lawsoniana 'Stewartii'	Lawson Cypress	
Cornus capitate	Dogwood	
Cryptomeria japonica	Japanese cedar	
Cupresses funebris	Chinese Weeping Cypress	
Cupresses macrocarpa 'Aurea'	Golden Cypress	
Cupresses torulosa	Bhutan Cypress	
Cupressocyparis leylandii	Leyland Cypress	
Cupressus glabra	Arizona Cypress	
Cupressus Iusitanica	Mexican cypress	
Cupressus macrocarpa	Monterey Cypress	
Cupressus sempervirens	Mediterranean Cypress	
Diospyros fuyu	Persimmon	
Dracaena draco	Dragon Tree	
Eriobotrya deflexa	Bronze Loquat	
Eucalyptus blakelyi	Blakely's Red gum	
Eucalyptus bridgestiana	Apple Box	
Eucalyptus camaldulensis	River Red Gum	
Eucalyptus elata	River Peppermint	
Eucalyptus globulus	Tasmanian Blue Gum	
Eucalyptus leucoxylon	Yellow Gum	
Eucalyptus mannifera	Brittle Gum	
Eucalyptus melliodora	Yellow box	
Eucalyptus nicholii	Narrow-leaved Black Peppermint	
Eucalyptus saligna	Sydney Blue Gum	
Eucalyptus scoparia	Wallangarra white gum	
Eucalyptus sideroxylon	Mugga Ironbark	
Eucalyptus viminalis	Manna Gum	
Fagus sylvatica	English Beech	

BOTANICAL NAME	COMMON NAME
Feijoa sellowiana	Pineapple Guava
Fraxinus excelsior 'Aurea'	Golden Ash
Fraxinus ornus	Manner Ash
Fraxinus oxycarpa 'Raywood'	Claret Ash
Ginko biloba	Ginko
Gordonia axillaris	Fried Egg Tree
Juniperus chinensis 'Variegata'	Chinese Juniper
Koelreuteria paniculata	Golden Rain Tree
Lagerstroemia indica	Crepe Myrtle
Lagerstroemia 'Natchez'	Crepe Myrtle
Laurus nobilis	Bay tree
Liquidambar styraciflua	Sweet Gum
Liriodendron tulipfera	Tulip Tree
Magnolia grandiflora	Bull Bay Magnolia
Magnolia x soulangeana	Magnolia
Malus floribunda	Crab Apple
Melia azedarach var.australasica	White Cedar
Metasquoia spp.	
Michelia figo	Port Wine Magnolia
Morus nigra	Black Mulberry
Phoenix canariensis	Canary Island Date Palm
Phoenix roebelenii	Pygmy Date Palm
Picea abies	
Picea pungens 'Glauca'	
Pinus radiata	Radiata Pine
Pinus strobes	
Pistacia chinensis	Chinese Pistacia
Plantanus orientalis	Plane Tree
Plantanus x hybrida	Cut Leaf Plane
Populus deltoides	Cottonwood
Populus nigra	Poplar
Populus nigra 'Italica'	Lombardy Poplar
Populus yunnanensis	Yunnan Poplar
Prunus avium	Sweet Cherry
Prunus cerasifera 'nigra'	Purple-leaved Cherry-plum
Prunus dulcis	Almond
Prunus Iusitanica	Pottugese Laurel
Prunus persica 'Albo plena'	Ornamental Peach
Prunus pissardii 'Nigra'	Flowering Plum
Pseudotsugo menziesii	Douglas Fir
Punica granatum	Pomegranate
Pyrus ussuriensis	Manchurian Pear
Quercus palustris	Pin Oak
Quercus robur	Common Oak Tree
Quercus suber	Cork Oak
Sequoia sempervirens	Redwood
Syringa vulgaris	Lilac
Thuja occidentalis	
Thujopsis dolabrata ' Variegata'	Variegated Hiba
Trachycarpus fortunei	Windmill Palm
Ulmus parvifolia	Chinese elm

#### 3.3. Conclusion

The Preferred Project changes from the original approved submission (Orange-Bloomfield Hospital Re-development Major Project 06-0111) documented in this report are required to meet NSWHealth clinical requirements and to ensure this facility meets the needs of the local community. Recent consultation with NSWHealth and local clinical and associated service staff has resulted in agreement on the need to modify the approved design.

NSWHealth has agreed to the increased levels of clinical service. This will require a larger hospital footprint. Expansion to floor area is required to accommodate an increase in Radiotherapy, Community Health, Blood Bank, Breast screen, Intensive Care, Operating and Peri-Operative and Dental Therapy areas.

AMH and FMH buildings have been revised in form and footprint to allow for changes to operational requirements, and to improve relationships with adjacent buildings.

NSWHealth has also indicated that the master planning of this project should allow for future expansion of services. To accommodate this request, the modified design also allows for a future expansion to incorporate an additional 40 beds. Further expansion space is also required for Medical Records, Emergency Department, Intensive Care Unit, Allied Health, Operating and Peri-Operative, an Ambulance Station and staff accommodation areas.

To accommodate these changes the location of the GH and AMH has been altered. Both buildings have moved north, and the distance between the two buildings has decreased. This alteration to location also allows for an increased buffer between the buildings and the curtilage of heritage gardens.

Traffic flow and car parking have also been affected. The increased hospital service has led to an additional five staff and ten public car spaces. The arrangement of car parking has altered to allow for the increased footprint on the eastern side of the GH and to incorporate the additional parking spaces. To improve the safety of staff and patients, a dedicated ambulance access road has been incorporated on the western side of the GH.

The increased footprint of both GH and AMH requires modification to the external building envelope and roof designs. Through extensive consultation with heritage architect, the architectural expression of the new buildings have been designed to reflect the nature of the building, its site and landscaping context, and the heritage significant of the surroundings.

The revised Preferred Project repost responds to the submissions made by the general public and is an outcome of continuing consultation with clinicians. This submission documents the changes to the design necessary to incorporate the clinical and operational requirements of the service, and address the concerns expressed in submissions from the local community.

## 4. Statement of Commitments

#### 4.1 Introduction

NSWHealth has revised the Statement of Commitments, the proponent responses to submissions and related condition of approval with a revised statement of commitments. This section details the proponents statement of responses to the NSWHealth's revised commitments as a response to Part B of the document titled, Determination of Major Project No.06\_0111, prepared by the NSW Department of Planning on 09 December 2006.

The report highlights and responds where applicable to conditions of approval, with reference and comparison to the original approved scheme under Part 3A.

## a. <u>4.2</u> Part B - Response to 'Department of Planning's Conditions of Approval':

#### B1 Operational

**b)** Elevation plans of the proposed radiotherapy unit shall be submitted to Orange City Council prior to construction work commencing on that element. The plans shall demonstrate that the extension will complement the design and detailing of the general hospital building.

• Refer to Appendix A 'Architectural Drawings' for elevations of the proposed radiotherapy unit.

#### B2 European Heritage

a) A detailed schedule of external colour and finishes for the proposed buildings shall be submitted to Orange City Council, prior to construction works commencing.

• Refer to Schedule A for Finishes and colours of the proposed GH, AMH + FMH.

**b)** A detailed landscaping plan for the development site shall be submitted to Orange City Council, prior to construction works commencing. Landscaping shall be implemented prior to occupation of the project and permanently maintained.

• Refer to Appendix B for Landscape drawings for LA01, LA02, LA03, LA04 and LA05, prepared by Taylor Brammer Landscape Architects for detailed landscaping plans.

c) A heritage management strategy shall be prepared for the balance of the Bloomfield Hospital site and improvements, addressing at least (i) adaptive reuse options; (ii) sympathetic integration of the remaining buildings into the new hospital; and (iii) protection of the cultural landscape values of the site.

• The strategy will be subject to completion of the current project and coordination with GWAHS over the balance of the site.

- **d)** Details of proposed fencing of the secure mental health unit shall be submitted to Orange City Council, prior to construction works commencing
  - Refer to Figure 16 (SK01) below for proposed FMH fencing details.



ma:	FORENSIC MENTAL HEALTH FENCE DETAILS	
NUTCH OF	- SK01	



#### Figure 16. Forensic Mental Health Details (SK01)

e) The heritage garden curtilages to the north of building 40 and 41 shall be retained. The acute mental health building shall not encroach within the formal ward gardens.

• Refer to SK02 below showing the retention of existing landscape curtilages to wards 18 and 19 retained, and strengthened through new planting designed to be in keeping with the existing layout of trees in this area.



<b>10</b> 4:	HERITAGE GARDEN CURTILAGE	
OUTONIP:	SK02	



Figure 17. Heritage Culture (SK02)

f) The proponent shall investigate options for the relocation and appropriate use of the sunken greenhouse. An investigation report shall be provided to Orange City Council prior to works commencing which affect the building.

• The Greenhouse is to be relocated in consultation with Bloomfield staff, Heritage architect (David Scobie) and Landscape architect (Taylor Brammer). A report will be provided to Orange City Council prior to works commencing.

**g)** Interpretative signage shall be erected in the vicinity of the ward 20 and the horticultural buildings.

• Interpretive signage is proposed to be erected in the paved court at the south west corner of the Hospital building proximate to the public entrance forecourt.

**h)** Infill buildings and alterations to existing buildings shall comply with Design in Context: Guidelines for Infill Development in the Historic Environment (Heritage Office 2005)

• The Heritage consultant has advised within the reference document on heritage significance and utilised the principles and relevant case studies. This advice will guide the new works and alterations to the existing buildings as well as the landscape.

i) Further project application/s and/or development application/s shall be made prior to the erection of business identification or building identification signage for the project.

• An integrated signage and street furniture strategy is to be developed for these elements within the site. The proposal will be submitted to Orange City Council.

#### B3 Public Recreation

- b) Fencing/netting shall be erected along the northern boundary of The Avenue adjacent to the staff carpark, sufficient to contain stray golf balls within the golf course, and prevent damage to buildings, vehicles and pedestrians.
- b) Please refer to report PHC-SK-RP-00.04-A for revised response to condition B3(b) outlining extent and design of proposed protective fencing on the northern boundary adjacent to staff car parking areas.

#### B5 Traffic Matters

- c) The north-south pedestrian crossing through the ambulance entrance shall be deleted.
- c) Refer to SK03 and reference scheme part plan below showing the deletion of pedestrian crossing through the ambulance entry



Figure 18. Relocated Pedestrian Crossing (SK03)



Figure 19. Reference Scheme Part Plan

SUPPORTING HEALTHY COMMUNITIES

d) The east-west pedestrian crossing to the south of the ambulance entry shall be deleted and relocated to the north of the ambulance entry. All work shall be at full cost to the proponent.

• Refer to reference scheme (Figure 19) + (Figure 18) SK03 detailing the relocation of the pedestrian crossing from the western car park to the north of the ambulance entry.

e) Vehicle access to the most northern public car park containing 11 spaces shall be restricted from adjacent to the main entry to the hospital. Provision shall be made for alternative access from the northern internal road. All work shall be at full cost with the proponent.

• Refer to (Figure 20) SK04 (Bloodbank) and reference scheme part plan (Figure 21) showing the amended entry to the 11 northern most car parking spaces.



SK04 – Figure 20. Blood Bank Entry (SK04)

SUPPORTING HEALTHY COMMUNITIES



Figure 21. Reference Scheme Part Plan

f) Landscaping at internal roads intersections, curves and pedestrian facilities shall not obstruct slight lines.

• Refer to Figure 22 prepared by Taylor Brammer Landscape architects showing landscaping proposal at internal roads, curves and pedestrian facilities maintaining sightlines.



Figure 22. Landscaping Proposal

#### C4 Vegetation:

a) The proponent will provide landscaping in accordance with drawings prepared by the Government Architects Office (Ref. ORA\_DL01-ORA\_DL02).

• Refer to Appendix B Landscape Drawings (LA01 – LA06) prepared by Taylor Brammer Landscape Architects for landscaping details.

**b)** The proponent will seek to retain as many trees as possible within the site.

• Refer to Appendix B Landscape Drawings (LA01 – LA06) prepared by Taylor Brammer Landscape Architects for landscaping details, showing extent of trees to be retained.

c) All trees on the site within the vicinity of areas of works that are to be retained will be suitably protected by way of tree guards, barriers or other measures as necessary to protect root system, trunk and branches during construction and demolition.

• Please refer to Appendix 32 Tree Protection Specification prepared by Taylor Brammer Landscape architects.

**d)** Where mature trees are removed, consideration will be given to replacement with mature specimens.

• Refer to Appendix B Landscape Drawings (LA01 – LA06) prepared by Taylor Brammer Landscape Architects for landscaping details, including general size and species of tree specified.

e) The Fairy Sparkle Garden currently accommodated at the Orange Base Hospital site will be relocated to the Bloomfield Campus.



• Refer to Figure 23 (SK05) showing the proposed location of the relocated sparkle garden.

Figure 23. Sparkle Garden (SK05)

SUPPORTING HEALTHY COMMUNITIES

f) The new access road will be screened by vegetation to minimise its visual impact on the site.

• Refer to Figure 24 (SK07) showing screen planting to the northern boundary adjacent to the access road.



Figure 24. Northern Boundary Screen Planting (SK07)

#### C5 European Heritage:

a) All heritage aspects of the works will be supervised by an appropriately qualified heritage consultant to ensure that the impact on the significant fabric is minimised and appropriate mitigation measures are taken.

• David Scobie Architects Pty Ltd will provide on-going heritage advice throughout the project.

- b) Detailed architectural recording (including measured drawings, photographic and video recording) of buildings and structures to be demolished, and surrounding landscape will be carried out prior to demolition. These archival records will be compiled with historic records, including copies of original plans, subsequent plans, historic photographs etc. A set of these documents will be stored on site, as well as off-site locations as required.
  - David Scobie Architects Pty Ltd will provide the archival records as required.
- c) Prior to occupation, an interpretation strategy and plan will be prepared in accordance with the Heritage Office's guidelines. This will include a strategy for movable heritage items and be supported by an oral history programme, to convey the heritage significance of the site to users of the site.

• David Scobie architects will prepare an Interpretation Plan, consistent with NSWHO Guidelines and issue to Orange City Council prior to occupation.

• Robert Willis to produce an oral history programme in conjunction with David Scobie Architects Pty Ltd and issue to Orange City Council prior to occupation.

d) All works which affect the existing building fabric or heritage buildings and structures within the site will be carried out in accordance with the Burra Charter.

• David Scobie Architects to continue to advise and consult with the Project team in relation to all works in existing buildings.

e) Significant original Fabric from buildings and structures to be demolished, including joinery will be savaged for reuse in works to other heritage buildings on the site or retained for future reuse.

• David Scobie Architects to identify the items for salvage and consult with Project team on suitable locations for the re-use and interpretation of these materials.

f) The original painted glass panels from Ward 20 will be retained and reused within the new hospital development in conjunction with detailed interpretation about this building.

• David Scobie Architects to identify the items for salvage and consult with Project team on suitable locations for the re-use and interpretation of these materials.

**g)** Maintenance and repair work to buildings and structures of heritage significance will be undertaken in accordance with policies in the Conservation Management Plan prepared by the Government Architects Office Heritage Section (July 2006)

• David Scobie Architects to consult and advise with Project team in relation to all restoration and repair works to existing buildings.

• David Scobie Architects to identify appropriate building elements for restoration and consult with Project team to ensure works are in accordance with the Conservation Management Plan.

**h)** A heritage Architect will be engaged to provide advice in relation to further detailed design and constructon involved in the project.

• David Scobie Architects to continue to advise and consult with Project team in relation to all heritage issues throughout the project.

i) The original fabric of existing buildings to be refurbished (including joinery, fireplaces and fittings) will be retained where possible.

- David Scobie Architects to identify items in existing buildings for restoration and retention, and where applicable, advise the Project team on suitable location for retention.

**j)** Detailed recording (including measured drawings and photographic recording) of the existing configuration of buildings to be refurbished as part of the project will be carried out prior to the commencement of works.

• David Scobie Architects to provide archival recording prior to commencement of works as required.

k) Where possible, new internal subdividing walls to be introduced to heritage buildings will be reversible and evidence of walls removed as part of the project will be retained through the use of nib walls and similar devices.

• Refer to Figure 25 (SK06) detailing typical retention of 100mm nibs of demolished walls in existing buildings.



<b>11</b> .8:	NIBWALLS	
DUTCH IP:	SK06	



#### SK06 - Figure 25. NIB Walls (SK06)

I) Building work to heritage buildings will be undertaken by qualified and experienced contractors with an understanding of principles of heritage conservation

• David Scobie Architects to liase with Project team on the selection of appropriate contractors for the scope of works in existing buildings.

**m)** Advice will be sought from the NSW Heritage Council's Fire, Access and Services Advisory Panel regarding changes to services or fire safety upgrades within heritage buildings as appropriate.

• David Scobie Architects to liase with Project team and NSW Heritage Council Fire, Access and Services panel as appropriate.

#### C7 Access for People with Disabilities

- a) The design of the facilities will permit effective, appropriate, safe and dignified use by all people, including those with disabilities and will be in accordance with:
  - NSW Health Facility Guidelines, in particular Part B Design for Access, Mobility, OH&S and Security.
  - DDS32 Improved Access for Health Care Facilities.
  - The Building Code of Australia.

• All relevant areas of external and internal planning are to be in accordance of the nominated documents.

#### C11 Access and Movement:

**b)** The provision of a minimum 931 parking spaces on the subject land in a manner that is in accordance with Australian Standard AS2890.1 – 993 Car Parking Requirements.

• Refer to Appendix A Architectural Drawings (PHC-SK-SP-01.03 and PHC-SK-SP-01.04) showing total of 931 carparking spaces.

h) A marked pedestrian crossing will be south of the bus bay and across the Porte Cochere.

• Refer to Appendix B Architectural Drawings (PHC-SK-SP-01.03 and PHC-SK-SP-01.04) showing the pedestrian crossings to the south of the bus stop, and at the Porte Cochere at the main entry of the general hospital.

## 5. Conclusion

This report accompanied the Major Project Application representing the modification to the approved, Orange Bloomfield Hospital Re Development Major Project 06-0111.

The report highlights proposed modifications of the GH and mental health facilities on the existing Bloomfield Hospital. The modifications to the building continue the strong historical association of the site and its buildings with the provision of health care. The development remains in the public interest and will provide substantial benefits to the local community.

The proposed modified development will impact on the character of the Bloomfield Hospital site its heritage significance and the local community access to health services. The proposal will improve the delivery of health service delivery in the Region State further it will enable the NSW Department of Health to provide new state of the art health facilities that respond to the emerging needs of the community in a cost efficient and equitable manner. For this reason the modification to the approved, Orange Bloomfield Hospital Re Development Major Project 06-0111 is consistent with the public interest.

The minister is requested to consider the application favourably.



## Appendix A

**Architectural Drawings** 



## Appendix B

Landscaping Drawings



## Appendix C1

Heritage Letter of Support



## Appendix C2

Heritage Impact Statement



Appendix D

Sketches



## Appendix E

#### **Materials and Finishes**



Materials and Finishes Board – General Hospital



Materials and Finishes Board – AMH/FMH