DRAFT Friday, 5 October 2007

1. INTRODUCTION

1.1 BACKGROUND

This Statement of Heritage Impact (SHI) has been prepared by David Scobie Architects Pty Ltd, to accompany a major project application to the Minister for Planning, for the proposed redevelopment of Bloomfield Hospital. Reforms resulting from the NSW Rural Health Report IPART Enquiry into NSW Health Services and the Area Health Service restructure require that the health services at Bathurst and Orange hospitals be modified and improved to meet contemporary standards. The NSW Government has determined that Orange hospital is to be redeveloped as part of a major health program in that region.

Currently Orange hospital operates largely as a standalone entity with little networking or integration of clinical services or organisational systems between the neighbouring Bathurst hospital and other health services. This has led to fragmented services for consumers.

The NSW Government, NSW Health and Greater Western Area Health Service (GWAHS) agreed that these deficiencies are of such a magnitude that a total redevelopment presented the best opportunity of introducing more effective service models and facilities.

In early 2004, the NSW Government Architect's Office was engaged by the GWAHS, to undertake a feasibility study regarding potential siting for a new Orange Hospital including a preliminary heritage assessment of the Bloomfield Hospital site, which was the preferred site. In 2005, the NSW Government Architect's Office was further commissioned to prepare a Conservation Management Plan (CMP) for the Bloomfield Hospital site. The report, which found the site is of exceptional heritage significance, has been adopted by the NSW Department of Health. The site is listed on the State Heritage Register: Listing number 01745, 10 March 2006.

Three consortia were short listed, after a tendering process in 2006, to build and operate the new hospital. In 2007, the *pinnacle* + *healthcare* team was selected as the preferred provider.

1.2 USE OF THIS DOCUMENT

This Statement of Heritage Impact document adopts the format provided in the previous heritage impact statement produced by the Government Architect (July 2006).

The aim is to analyse the heritage impacts of the proposed development as adopted and developed by the *pinnacle+healthcare* consortium, to ensure that the selected scheme is consistent with the Conservation Management Plan. The CMP contains information about the history, site analysis and significance of the place that is not repeated here and which is necessary to form a sound understanding of the site and as a basis for decision-making.

1.3 PREVIOUS REPORTS

As previously noted, three heritage related reports have already been prepared for this site by the Government Architect's Office:

• Government Architect's Office, NSW Department of Commerce, *Bloomfield Hospital Preliminary Heritage Assessment*, Prepared for Greater-Western Area Health Service, Report 04/15, June 2004.

- Government Architect's Office, NSW Department of Commerce, *Bloomfield Hospital Conservation Management Plan*, Prepared for Greater-Western Area Health Service, Report 05/18, July 2006.
- Government Architect's Office, NSW Department of Commerce, *Bloomfield Hospital Statement of Heritage Impact, Orange Health Campus Development,* Prepared for Greater-Western Area Health Service, Report 06/40, August 2006.

1.4 METHODOLOGY AND LIMITATIONS

This Statement of Heritage Impact is generally consistent with the guidelines to the Australia ICOMOS Charter for the Conservation of Places of Cultural Significance 1999 (The Burra Charter) and the guidelines for heritage management contained in the NSW Heritage Manual.

This current report aims to assess the proposed redevelopment in terms of its impact on the heritage significance of the Bloomfield Hospital site. The first half of the report contains a brief historical outline, physical description and the assessment of significance from the CMP. Understanding the SHI relies on an understanding of the CMP.

The second half of the SHI outlines the proposal and conservation philosophy, assesses the heritage impact arising from the proposal and makes recommendations to avoid or minimise potential impacts. It addresses relevant policies from the CMP in detail, and recommends actions for specific elements of the site.

This SHI responds only to the proposal for redevelopment as described in the documentation accompanying the Application.

This documentation includes:

- Architectural Drawings
- Schedule of finishes
- Landscape Drawings

The project application does not contain detailed specification for materials, finishes, colour and changes (internal or external) proposed to existing heritage buildings.

1.5 TERMINOLOGY

The following definitions taken from the Australian ICOMOS Charter for the Conservation of Places of Cultural Significance 1999 (Burra Charter) have been used in this report.

Fabric means all the physical material of the *place* including components, fixtures, contents and objects.

Conservation means all the processes of looking after a *place* so as to retain its *cultural significance*.

Maintenance means the continuous protective care of the *fabric* and *setting* of a *place*, and is to be distinguished from repair. Repair involves *restoration* or *reconstruction*.

Preservation means maintaining the *fabric* of a *place* in its existing state and retarding deterioration. **Restoration** means returning the existing *fabric* of a *place* to a known earlier state by removing

accretions or by reassembling existing components without the introduction of new material. **Reconstruction** means returning a *place* to a known earlier state and is distinguished from *restoration* by the introduction of new material into the *fabric*.

Adaptation means modifying a *place* to suit the existing *use* or a proposed use.

Use means the functions of a place, as well as the activities and practices that may occur at the place.

Compatible use means a *use* which respects the *cultural significance* of a *place*. Such a use involves no, or minimal, impact on cultural significance. The site is oriented north west/south east. For the easier reading and reference in this report, the orientation used will be north south.

1.6 AUTHORSHIP

This report has been written by David Scobie for David Scobie Architects Pty Ltd – Heritage Consultant

2. SITE DETAILS

2.1 SITE LOCATION

Bloomfield Hospital is located on the southern outskirts of the city of Orange in Central Western NSW.

2.2 STUDY AREA

The plan overleaf (Figure 4) shows the site curtilage and heritage curtilage established in the CMP as well as the names used in both the CMP and this SHI to refer to different areas within the site. Bloomfield North, Bloomfield South and the Institutional Parkland are referred to frequently throughout the document. It is noted that the proposed SHR listing curtilage is different to the curtilage listed in 2006. The listed SHR curtilage is shown in Figure 3. For the purposes of this report, reference to Bloomfield Hospital includes all the area originally dedicated for Hospital use as marked in black on Figure 4.



Figure 3: State Heritage Register curtilage



Figure 4: Key heritage curtilages and precincts defined by the CMP, showing the proposed development area dotted in white.



pinnacle+ healthcare

2.3 OWNERSHIP

The entire site is still in government ownership with the exception of the bowling club, but the leasing arrangements within the site vary greatly. The CMP and Application documentation have details about land ownership.

2.4 CURRENT STATUTORY AND NON-STATUTORY HERITAGE LISTINGS

The site is listed on the following heritage lists and registers:

- NSW State Heritage Register listing number 01745
- State Heritage Inventory Nymagee Lodge and Landscape Features: entry gateway, Elm Avenue and grounds specifically named.
- Department of Health Preliminary Heritage and Conservation Register February 1992 Bloomfield Psychiatric Hospital Precinct: Nymagee Lodge, Gwdir and Yuamgi Buildings, Grounds, and Entrance Gates (Heritage Register Nos. 06/5/7/1000,1001, 2000 and 3000). Recommends further study for many buildings within the site.
- Orange LEP 2000 12 May 2000 Nymagee Lodge, Landscape Features: entry gateway, Elm Avenue and grounds.
- Orange Heritage Study 1985 Bloomfield Hospital Nymagee Lodge.mfield

3. HISTORY & DESCRIPTION

3.1 THE SITE AS A WHOLE

Refer to Sections 3.0 and 4.0 of the *Bloomfield Hospital Conservation Management Plan (2006)* for a description and history of the site as a whole.

3.2 THE REDEVELOPMENT AREA

The redevelopment area is shown in Figure 5 below.



Figure 5: Plan of the southern section of Bloomfield showing the redevelopment area in red.

The Bloomfield site was developed as a masterplan in the form of an axis with lateral wings in sympathy with the topography. Construction commenced in 1922, with the majority of buildings created in the period up to 1935. The Government Architect during this period was McRae (1912-1923). Additional work was carried out up to 1958, with minor alterations being completed later.

The majority of the buildings on the site are good examples of public institutional structures in the revivalist manner – austere, simple and rectilinear, special finishes and details in public areas only, the use of local bricks with decorative heads and sills. There is evidence of the influence of Hardy Wilson and his predominant Georgian Revival architecture during the period.

The interiors of patient areas were designed to allow for heavy wear and tear.

The selected site is within the former male half of the main long-term care precinct of Bloomfield South. Specifically it occupies the buildings and surrounding areas formerly relating to the following:

- The treatment of TB, Epilepsy and unrecovered patients
- the support functions of the nursery and orchard,
- mattress and upholstery workshop,
- carpenters and painters workshop,
- shoemaker/saddle maker, bookmakers workshops,
- playing fields
- accommodation for the Chief Attendant and Gatekeeper.

Information about individual buildings and the landscape areas at Bloomfield South can be found in Volume 2 of the CMP. Impacts on specific elements are also covered in Section 6.3 of this SHI.

4. STATEMENT OF HERITAGE SIGNIFICANCE

4.1 SUMMARY STATEMENT OF SIGNIFICANCE

The full analysis of significance is reproduced here from Section 5.0 of the Bloomfield Hospital CMP (2006).

The site is listed on the State Heritage Register as a place of cultural heritage significance at the State level.

Bloomfield Hospital is a remarkably intact complex of buildings and landscape areas reflecting philosophies of mental patient care in the late nineteenth and early twentieth centuries. In particular the nineteenth century approach to classification, control and management of patients in a self-sufficient, isolated context is clear in the layout, buildings and landscaping. It still retains the structural layout and all the buildings from its early stages of construction, substantially unaffected by the small number of later additions. As such it is an outstanding example of a purpose built mental health care facility from this era, reflecting health care theories of the time. It was established to meet a need in rural mental health care and still fulfils this role today. It was the only interwar mental hospital to be established in NSW. It is also the last of the series of mental hospitals developed within parkland settings and is a rare example of the garden-suburb philosophy applied to an institutional use.

It contains facilities for both long and short-term care, separating treatment types and gender within a parkland setting. This setting was considered an integral part of the place for its contribution to treatment of the patients providing both a peaceful atmosphere and outlook but also a place for recreation and work.

Although Bloomfield Hospital shares some similarities with other mental health facilities developed on this scale it has some unique characteristics due to the overlay of local approach to landscape and facilities development on a formally planned site structure. It also appears to have fewer changes and additions than other comparable sites.

Conservation of the key characteristics of this site will enable this important record of mental health care approaches throughout the twentieth century to be passed to future generations and has the ability to increase current community understanding through interpretation, education and further research.

It is particularly special as it maintains a long history of close association with a support from the local community. It has a strong association with past and present staff, patients their families. While the general use of the site has remained mental health care, the way the site operates has changed. Despite these changes, the fact the site remains physically intact from the earlier phases means the original uses and ways of life in the site are still easily understandable and interpretable. The site therefore remains an important physical example of design approaches for mental health care in the early twentieth century.

The key characteristics that contribute to its significance are:

- 1. The axial layout of the site including:
 - its road structure;
 - the main axes of wards and administration buildings providing formality but still responding to the local topography;
 - symmetrical layout separating genders and treatment types;

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- the separation of the long and short term care patients between Bloomfield North and South by use of the institutional parkland;
- the strong patterning of buildings and open and closed spaces.

2. The buildings from the early phases of the use of the site, which show the system of control, classification, treatment and management of patients.

3. The distinctive interior configurations of the buildings from the early phases of development. These demonstrate patient treatment and management regimes.

4. Original and/or distinctive interior finishes, fabric and details.

5. The location and spacing (articulation) of the buildings within the landscape to provide a setting and outlook for each, as part of the treatment of the patients. This includes the sense of space and the intimate outlook from the wards and staff accommodation.

6. The distinctive external forms, character and fabric of the buildings from the early phases of development. These elements combine with the landscape setting to create the institutional village character of the site.

7. The institutional parkland as an open space, setting for the buildings and a place for sport and recreation.

8. The peaceful and tranquil atmosphere provided by the parkland setting.

9. The contrast between the formality of the underlying structure (layout, paths fences, roads) with the generally informal plantings (there are exceptions to this in some areas), the institutional parkland and the surrounding native bushland.

10. The range of 'specimen' plantings and exotic species and the general lack of hard landscaping including road edging, large areas of paving or bitumen.

4.2 SUMMARY OF THE SITE'S ABILITY TO DEMONSTRATE SIGNIFICANCE AND THEME

The layout, form and setting of Bloomfield Hospital clearly reflects the philosophies of the late 19th and early 20th centuries for the care of patients with mental disabilities and in particular, the views of the two Inspectors General of the insane, Frederick Norton Manning (1876-1898) and Eric Sinclair (1898-1825). Both advocated the view that mental illness was a form of physical illness and should be treated as such. Both considered that the physical setting of patient care should reflect the latest advances in therapy, with individual pavilions set aside for different categories of illness and plenty of fresh air, sunshine and outdoor space for the vigorous physical activity thought to be required for successful rehabilitation. In addition, the view of Sinclair, that a domestic environment was conducive to recovery, is clearly evident in the use of materials and the scale of development.

Bloomfield remains as an outstanding example of design for mental health care in the late nineteenth and early twentieth century demonstrating all the key characteristics of classification and control of patients, self-sufficiency and use of the surrounding landscape for activity and to provide a restful setting. Many buildings on the site were purpose designed and built for Bloomfield and also reflect a movement from institutional style architecture to more domestic scale and design in the interwar period. Unlike other hospitals of this type developed before it, changes at Bloomfield have been minimal and the changes that have occurred have not reduced the ability to appreciate the original planning intention and use of the site. Bloomfield Hospital appears to be the last "total institution" of its kind developed for mental health care in NSW and the best surviving example.

5. THE CURRENT PROPOSAL

5.1 INTRODUCTION

The proposed redevelopment of Bloomfield Hospital is the result of extensive consultation with NSW Department of Health and Greater Western Area Health Service regarding the operational needs of a new general hospital for Orange and its relationship to existing mental health services provided at Bloomfield Hospital. The design process has also been informed by consultation with the local community and various statutory bodies. In 2004 a Project Feasibility Plan considered siting options including the existing CBD site, a block of land on the northern outskirts of town and at Bloomfield Hospital. In 2005 a Value Management Study considered configuration options on the Bloomfield site. Once Bloomfield was confirmed as the preferred site, a preferred option within the site was developed in more detail.

The proposed development involves the establishment of the Orange Health Campus within the grounds of Bloomfield Hospital. A new hospital is to be located on the western edge of the Bloomfield site. The proposed redevelopment is based on the construction of new buildings and service infrastructure plus the reuse of a number of existing buildings, to provide a contemporary facility delivering a range of acute and rehabilitation health services.

The design prepared by the Government Architect in 2005/06 has undergone further modifications during the tendering process. These modifications include the addition of a radiotherapy unit, blood bank and teaching unit. The pinnacle healthcare proposal has been accepted by the Department of Health, and final design documentation, prior to preparation of working drawings, specifications and construction, has been prepared. This documentation is the subject of the Heritage Impact Statement. Architectural and Landscape Plans are in Appendix 1.

This Heritage Impact Statement is for the current Part 3A Application only.

The assessment of the heritage impact of this proposal is contained in Section 6.0 of this SHI.

5.2 SITING OPTIONS

A range of siting options for a redeveloped Orange Hospital has been considered since 2003. In 2003 and 2004 a Procurement Feasibility Plan was prepared by Clearview, which recommended a development strategy for health services provided at Bathurst, Orange and Bloomfield Hospitals. The potential sites considered were the existing Orange Base Hospital, Bloomfield Hospital and a site offered by Sydney University on the outskirts of town.

This process resulted in the identification of Bloomfield Hospital as the preferred option and a Value Management Study was commissioned to develop options for Bloomfield in more detail.

The options for the redevelopment of the Bloomfield Hospital site have focused on the western part of Bloomfield South and the Institutional Parkland, the playing fields in particular. Other spaces were considered unsuitable as they failed to achieve integration of existing mental health buildings and new hospital facilities.

A master development control plan, prepared in 1989, first identified the heritage significance of the site, including relationships between significant buildings, the layout and the landscape.

5.3 SCHEME DESIGN OPTIONS

The 2005 Value Management Study was prepared to specifically consider options for redevelopment of the proposed site in the western half of Bloomfield South. Although they were driven by operational needs of the hospital, there was an understanding of the significant heritage values of the site, which had become apparent in 1989, and then during the preparation of the CMP for the property. Informal heritage advice on potential impacts was sought from GAO heritage specialists at various stages of the options' development process and the detailed development of the preferred option. Heritage Office staff were also briefed on a number of occasions about the progress of the project.

In developing concept options for the redevelopment of the Bloomfield site to accommodate the new hospital, a broad range of principles were adopted for the siting of the buildings:

- Primary vehicle arrival off Forest Road with direct access to Emergency and the main entrance.
- Use Forest Road frontage for parking and access and to allow a setback for the new buildings and retention of the avenue of trees along Forest Road as both a marker of the site and screen to future development.
- Preference to orient the inpatient units north for sunlight and views.
- Preference for the buildings to run east/west to minimise solar load on east and west elevations.
- Maintain a minimum 30-40m curtilage to the north of the retained heritage buildings, to reinterpret the heritage gardens and provide outdoor space for patients.
- Place major buildings on playing fields so as to minimise demolition of the established (exotic) planting.
- Use the fall across the site to provide on grade access to a lower level for non-clinical support functions, linen, kitchen, stores, etc.
- Generally aim to restrict new development to the western (Forest Road) side of the site to reduce the visual impact on the heritage buildings and the "park-like" setting.

Three options were considered in detail. They are summarised below: *Concept 1*

A 3-storey block, parallel to and north of the western Bloomfield group of buildings with most of Acute Mental Health on the lower ground beneath two storeys of inpatient units and SMSHOP Acute Mental Health in a single-storey building south of Wards 18 and 19. Amaroo (Building 44) (former epileptic ward) is to be used for adult rehabilitation. All heritage buildings retained except former Male TB Ward (Building 38) and the greenhouse.

Concept 2

A 2-storey block, parallel to and north of the western Bloomfield group of buildings with all of Acute Mental Health in a single-storey building parallel to Forest Road and West of Ward 18 (Building 41). All heritage buildings retained except Male TB Ward (Building 38), Ward 19 (Building 40) (Building 40) and the greenhouse.

Concept 3

As for Concept 1, except more of the Acute Mental Health is to be accommodated in the singlestorey building south of Wards 18 and 19. All heritage building retained except former Male TB Ward (Building 38) and the greenhouse.

The preferred 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 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 Healthbuilding. This option, prepared by the Government Architect, was the scheme tendered to private sector consortia and forms the basis of the current proposal from pinnacle + healthcare, with minor amendments and additional facilities – blood bank, teaching and radiotherapy. It is further described below.

5.4 CURRENT PROPOSAL

The proposed redevelopment will include the construction of a purpose built hospital on existing playing fields north of the principal axis of buildings in Bloomfield South, plus additional mental health facilities in new and adapted existing Bloomfield Hospital buildings to the south of the main hospital. This consolidates the mental health facilities at Bloomfield to the western section of the site near Forest Road and reuses some of the existing historic buildings on the site. The main entry to the new hospital will be from Forest Road. This will be an additional entry to the two existing entries to Bloomfield. Generally, the new hospital will form a new landscaped precinct incorporating the existing ward buildings and their historic garden curtilage.

The majority of the historic buildings within the redevelopment area will be retained with a few exceptions. Uses for Amaroo (Building 44) and former Male Wards 18 and 19 (buildings 40 and 41 on the Application plans) have been identified. Some details about modifications to these buildings are available and are discussed in Section 6.3.

The redevelopment will result in the demolition of the former Ward 20 (Male TB/building 38) and the greenhouse and associated orchard (Figure 6).

The greenhouse and orchard sit directly within the footprint of the proposed new Forensic Mental Health facility to the south of former Wards 18 and 19. The new facility cannot be built there without demolition of these items and no suitable alternative location exists. The former Ward 20 (Building 38) sits within an area set aside for the new entry, internal access road and carparking.

The rationale for its demolition is based on the following:

- immediate external character of surrounds and ground level to Ward 20 (Building 38) will be dramatically altered with new ground levels (extensive fill) to provide pedestrian and vehicular access to the hospital ground floor entry and required carpark levels.
- the location of Ward 20 (Building 38) compromises required carparking capacity, prevents safe and efficient ambulance entry, disrupts vehicular and bus movement within the campus, as well as prevents ease of pedestrian movement and way finding to the hospital main entry.
- over 1000 cars for public and staff are required to be accommodated on the site and have been sensitively split into groups with accompanying appropriate landscaping, soft paving, etc, to service the functional needs of the various hospital entries.
- entry to any major hospital is essential for people in stressed state to clearly identify entry, access, etc, particularly to emergency. Retaining Ward 20 (Building 38) would be disruptive to this essential process.
- if retained, there is no brief requirement for use of the building and under the current tight cost structure the building may be a liability if left vacant, with the possibility of the eastern wing being demolished to provide essential connecting service and patient access to the Bloomfield site.
- visually inappropriate to retain Ward 20 (Building 38) in front of major referral hospital.

The existing avenue of Pin Oaks and Cottonwoods along Forest Road will be retained and protected, providing a screen between the new hospital and the main road. The proposed design will replace the second row of drought-affected Cottonwood with new trees. Surrounds of the new

hospital and associated gardens will be regenerated and landscaped to reinforce the Bloomfield precinct and its existing character. Refer to the landscape proposal drawings in the Appendix.

The design intent of the development includes continuation and extension of the site's existing hospital use. The development will involve the insertion of a modern health facility within a site that has accommodated a mental hospital since the beginning of the last century. The proposed buildings are generally long forms, occupying the site of the existing playing field and using the gentle fall across the site to accommodate the bulk, form and height of the new building. The hospital will range in scale from 1 - 3 stories, with the main entry and the emergency entry being single storey attachments in the foreground of the main two storey building.

The associated new single storey Acute Mental Health building will be located between the General Hospital and existing heritage buildings. A single storey Forensic Mental Health building will sit in the area of the existing orchard to the south of former wards 18 and 19 (buildings 40 – Administration, and 41 – Clinical Services).

The architectural character of the redevelopment is contemporary with horizontal forms 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 hospital include concrete panels and lightweight cladding. The red earth coloured concrete is 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 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.



Figure 6: Overlay of proposed redevelopment with the buildings to be demolished shown in red. This does not show landscape features such as the orchards and playing fields or the section of road to be removed to the south of Wards 18 and 19.

Replace with Drawing provided by/from Designinc

6. ASSESSMENT OF HERITAGE IMPACT

6.1 GENERAL DISCUSSION

The impact on the heritage values embodied in the redevelopment area and thus the site as a whole is discussed throughout Section 6.0. It considers both positive and negative heritage impacts within the redevelopment area as well as on the heritage values of the site as a whole. It outlines mitigative measures already built into the proposal and then assesses the redevelopment in more detail against the policies of the Conservation Management Plan for the site. This assessment is based only on the scheme design as documented in the current Application, with relevant architectural and landscape drawings included in the Appendix.

Siting

The CMP establishes that the playing fields site is one of the more significant open spaces. It suggests that the introduction of extensive and/or large scale built forms in this area would have a negative impact on key heritage values of the place, particularly those related to the setting and atmosphere of the Bloomfield South precinct. The proposed Hospital redevelopment is a large-scale and intensive proposal. The range of positive and negative heritage impacts and the measures already put in place to mitigate the negative impacts are discussed below. Further recommendations are made in Section 7.0.

The Redevelopment Area

The proposed redevelopment conserves most existing physical elements of the original Bloomfield Hospital Complex. This is a positive aspect of the design of the proposed redevelopment. The proposal does however add substantial new buildings and some new landscape features in a significant landscaped space in the western area, former male side, of Bloomfield South. It also requires removal of the exceptionally significant Male TB Ward, Building 38, as well as the greenhouse, orchard, south of retained Buildings 40 and 41, and playing fields, north of Buildings 40 and 41.

It is recognised that the design has been driven by the needs of contemporary hospital functionality, however the scale and location of this new development are likely to have substantial negative impacts on aspects of the site's significance.

These impacts are discussed generally below and then in further detail in Section 6.2 of this SHI, against the policies in the Conservation Management Plan.

Positive Heritage Impacts

- The redevelopment retains most of the key elements of the existing historic complex and landscape, including its layout and most of its existing buildings. All of the buildings from the early phase of the site will be retained with the exception of the TB Ward, Building 38. The majority of the original road layout will be retained.
- The proposed new landscaping will reinforce and continue historic and characteristic planting styles. Although the redevelopment will impact the western part of the Institutional Parkland, it is a large area and much of it will remain including the golf course, oval and wooded region between the eastern half of Bloomfield South and Bloomfield North. Similarly, key open spaces within Bloomfield South are not affected.
- Former wards that are currently empty, Administration Building 40, Clinical Services Building 41 and Amaroo – Building 44, will be re-used encouraging an appreciation of these

buildings and opportunities for their conservation and maintenance. The proposed re-uses are compatible and retain distinctive external forms, character and fabric.

- Increased community access will enhance awareness of the exceptional significance of the place and provide opportunities for interpretation.
- The creation of interpretation structures within the design of the two gardens to the north of the Administration, Building 40 and Clinical Services, Building 41, will celebrate the historical significance of the place and the human stories embedded within the institution.

Negative Heritage Impacts

- The new General Hospital building is located on the playing fields. This is a key open space that has been identified as a significant element in the Conservation Management Plan. This placement and the bulk of the redevelopment will significantly affect the setting and outlook of the main axis of wards on the western (former male) side of Bloomfield South, changing the character of this area. It will also compete with the strength and dominance of the main axis of ward buildings as an element in the landscape. This affects the sense of the deliberate axial planning of the site and the spacing of the wards according to different treatment types, which has already been affected by the regrowth of vegetation on the eastern (former female) side of the site.
- The proposal requires the demolition of the former Male TB Ward, Building 38, one of the few buildings of its kind still existing in NSW. Not only is this a negative impact on the building, it also impacts on the site's significance as a largely intact mental hospital reflecting philosophies of patient care in the late nineteenth and early twentieth century, by removing evidence of a patient treatment type and unusual design approach to support treatment. It is being removed for the construction of a carpark and open space at the proposed entrance to the new general hospital (Figure 6).
- The playing fields are to be replaced with the new General Hospital building. They currently contribute to the parkland setting of the main ward axis and are important in their own right for the relationship with former patient treatment regimes and later community use. It is noted that there is no current functional association between the existing hospital and the playing fields.
- The nursery and orchard area, south of Buildings 40 and 41, are to be replaced by the new Forensic Mental Health Building. This will remove evidence of the site's self-sufficiency in its earlier years of operation.

Measures to reduce Heritage Impacts incorporated in the Current Proposal

Measures have been included in the design of the new development to reduce the level of negative heritage impact, without departing from the client's brief.

Measures include:

- Use of the sloping site to reduce the height of buildings immediately adjacent to former wards 18 and 19 (Buildings 40 and 41). The roof of the single-storey Acute Mental Health building will sit close to ground level and along with the retained airing yards of the historic ward buildings will provide a buffer between the former wards and the new hospital. The new hospital has been limited to 2 storeys when viewed from wards 18 and 19.
- Former wards 18 and 19 are proposed for the compatible adaptive re-uses of Administration and Clinical Services. Some detail about modifications required to accommodate these uses is available and is discussed further in Section 6.3.
- The proposed Acute Mental Health building is a well articulated single storey construction and makes use of courtyards similar to the airing courts of the historic buildings throughout the site. The external materials include earth coloured pre-finished compressed fibre cement panels with grey panels to the parapet level facades. Windows are treated as punched and framed openings within the earth coloured walls, while skillion rooves are concealed or expressed with minimal eaves. These materials and design treatments have been selected

in response to the surrounding historic building stock. In accordance with the general policies in the CMP regarding new work, it is preferable that the detailing be sympathetic in colour, form and scale rather than attempt to imitate existing heritage buildings.

- The approach to the landscaping surrounding the new development is in keeping with the existing character of the landscape in the Institutional Parkland and Bloomfield South precincts. The planting philosophy continues the existing site character of a mixed vegetation palette of native and introduced species. Tree species contain a high proportion of European deciduous, Conifers and Palms with a smaller number of Eucalypt, Banksia, Wattle, She Oak and Bottlebrush. Trees will be sited in a gardenesque manner, i.e. single specimens given enough space to develop their true form, and a mixture of species evident in any one space. The language of hedge and windbreak planting is continued, as is topiary and colourful border treatments. Recommended species include those that are already found on the site and others that are sympathetic to the described character. *Emailed to Matthew*
- The placement of carparking areas and pathways, have in some cases been reconfigured to allow retention of individual trees. Where significant trees require removal (on recommendation of an arborist) they will be replaced with the same species. Placement of the majority of the new buildings on the playing fields has minimised the number of plantings needing to be removed and utilises existing plantings for screening.
- The Forensic Mental Health building has been placed within a landscape buffer zone, providing separation from the historic buildings around it.
- The new Acute Mental Health building and Forensic Mental Health building are both single storey constructions, which defer in scale to the two storey massing of Buildings 40 and 41, and the single storey Building 44 Amaroo.
- The proposed palette of materials and colours are appropriately contextual, though contemporary.
- The character of the open space north of Moonya Cottage #8 (Building 36), will be altered with proposed carparking, plant compound and associated landscaping. However, the setting of this building will be generally retained and the impact minimised by the use of hedging and planting.

Issues Not Covered by the Application

Impacts to the Areas of Bloomfield Hospital outside the Redevelopment Area

Although the redevelopment is concentrated in the south-western corner of the site and the Application deals only with changes proposed to that area, there are potential impacts on the heritage values of the site as a whole. Although it is likely that many existing Bloomfield Hospital buildings will continue to be utilised for health related functions, it is noted that withdrawal of the mental health functions to the western area of Bloomfield South creates opportunities for an increase in the numbers of land managers and occupiers. The operation of a new Health campus is also likely to result in an increase in the volume of traffic and activity across the whole Bloomfield Hospital site.

Detailed Design Development

The current proposal will be further developed with additional working drawings and specification documentation as part of the construction process. There is the potential to maximise positive heritage impacts and mitigate existing negative impacts (or increase them) in later stages of design, documentation and construction. Heritage advice will be provided by David Scobie during this process. Later stages will consider:

- Detailing of external finishes on both the new and historic buildings and internal finishes and fixtures in the historic buildings. These could impact on the heritage values of the place and will be carefully specified in consultation with David Scobie.
- Interpretation opportunities exist within the proposed redevelopment to communicate the exceptional significance of the place to the community. An interpretation plan will establish the most appropriate and effective way of doing this.

Further recommendations are presented in Section 8.0.

6.2 ASSESSMENT AGAINST CMP CONSERVATION POLICIES

The CMP has a number of policies to guide management and future development of Bloomfield Hospital. It is useful to assess any proposed changes to the place against these policies. They are listed below with notes regarding the extent of compliance of the proposed redevelopment. This assessment has been made, taking into account measures for reducing the acknowledged heritage impacts.

POLICY No	POLICY	COMPLYING?	COMMENTARY
KEY IMPLIC	CATIONS OF HERITAGE SIGNIFICA	NCE	
Policy 1	The following elements are integral to the heritage significance of the Bloomfield Hospital site and should be conserved:		These notes highlight the potential impact the proposed development will have on the existing heritage values and associated fabric of the site. The way the design of the proposed redevelopment responds to these values is discussed against Policies 23 – 41 (New Development).
	1) The layout of the site including the:		
	road structure;	YES	The proposed redevelopment maintains the majority of the significant original road layout with the exception of a small section of road behind Ward 19 (Building 40), which will be interpreted in the landscaping.
	axial layout of wards and administration buildings;	YES	All of the buildings on the main axes (wards and administration buildings) are being retained. The bulk and extent of the proposed new hospital will compete with the strength and dominance of the main axis of Ward buildings as an element in the landscape. This affects the sense of the deliberate axial planning of the site and the spacing of the wards according to different treatment types. Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.
	symmetrical layout separating patients by gender and treatment type;	YES/NO	The existing layout is being retained. The only exception is the loss of the former male TB ward (Building 38), leaving only the female half of the pair (Building 13) at Bloomfield North (Riverside). Reasons for the demolition of the TB ward are outlined in Section 5.4 of this SHI.
	evidence of the separation of long and short term care patients between Bloomfield North and South, by use of	YES	This evidence is still maintained, although the parkland will be substantially diminished in the area

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the institutional parkland and sporting precinct;		of the playing fields at Bloomfield South.
The spacing (articulation) of the buildings within the landscape to provide a setting and outlook for each, as part of the treatment of the patients. This includes the sense of space and the intimate and distant	YES	The existing spacing of buildings is retained within the landscape, with the exception of the proposed covered walkway to be inserted between former Wards 18 and 19 (Buildings 41 and 40). The gardens

POLICY No	POLICY	COMPLYING?	COMMENTARY
	the spacing (articulation) of the buildings within the landscape to provide a setting and outlook for each, as part of the treatment of the patients. This includes the sense of space and the intimate and distant views when looking out from the wards and staff accommodation.	No	The existing spacing of buildings is retained within the landscape, with the exception of the proposed covered walkway to be inserted between former Wards 18 and 19 (Buildings 41 and 40). The gardens and airing yards of the wards (Wards 18 and 19) (Buildings 41 and 40) immediately adjacent to the new redevelopment will be retained, as will the intimate views between the buildings.
			Middle and some distant views and the sense of space in the western half of Bloomfield South will be significantly affected by the new development of the General Hospital and Acute Mental Heath buildings north of Wards 18 and 19 (Buildings 41 and 40). The visual dominance of the main ward axis will also be affected when viewed from the north. Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.
	2) The buildings from the early phases of the use of the site, which show the system of control, classification, treatment and management of patients.	YES	All of the buildings from the early phase of the site will be retained, with the exception of the Male TB Ward (Building 38). It will still be possible however, to interpret the system of control, classification, treatment and management of patients.
	3) The distinctive external forms, character and fabric of the buildings from the early phases of development. These elements contribute to the institutional village character of the site.	YES	The schematic design for the buildings being reused as part of this development (Wards 18, 19 and Amaroo) (Buildings 41, 40 and 44) indicate that their distinctive external forms, character and fabric will be retained. The final specifications will be developed in consultation with David Scobie, Heritage Consultant. The proposed development does not have any planned and direct impact upon the majority of the buildings from the early phases of development.

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POLICY No	POLICY	COMPLYING?	COMMENTARY
	<i>4)</i> The distinctive interior configurations of the buildings from the early phases of development. These reflect patient treatment and management regimes.	YES	The documentation for the buildings being reused as part of this development (Wards 18, 19 and Amaroo) (Buildings 41, 40 and 44) indicate that their distinctive interior configurations will be retained. The proposed adaptive reuse of Amaroo (Building 44) will partly reconfigure the side wings,
	5) Original and/or distinctive interior finishes, fabric and details.	To be determined	The documentation for the buildings being reused as part of this development (Wards 18, 19 and Amaroo) (Buildings 41, 40 and 44) indicate they will undergo minimal change as part of this development, even though their uses might vary. The final specifications should be developed in consultation with David Scobie, Heritage Consultat.
	6) The peaceful and tranquil atmosphere provided by the parkland setting	NO	The proposed development is located within one part of the Institutional Parkland. This will diminish the peaceful and tranquil setting of Wards 18, 19, Turon House, Yandina, Manara Clinic and the CRRMH (Buildings 40, 41, 46-48, and 50), though their immediate landscaped setting will be retained and enhanced. Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.
		YES	Other than in the area of the proposed development, the peaceful and tranquil atmosphere provided by the parkland setting will be retained.
	7) The institutional parkland as an open space, peaceful setting for the buildings and a place for sport and recreation.	NO	The institutional parkland will be seriously impacted on its western side where it contributes to the setting of the main axis of former male wards. Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.

POLICY No	POLICY	COMPLYING?	COMMENTARY
		YES	Other than in the area of the
			proposed development, the large
			areas of remaining parkland will
			remain as open space and a place
			of sport and recreation.
	8) The general contrast between the	YES / To	The proposed layout and
	formality of the underlying structure	Be	landscaping of the new
	(layout, paths, fences, roads) with	determined	development will generally retain
	the informal plantings, the		the overall contrast between the
	institutional parkland and the		formality of the underlying structure
	surrounding native bushland. (NB: It		with the informal plantings, the
	is difficult to generalise about the		institutional parkland and the
	landscape as different areas have different characteristics. These are		surrounding native bushland, even with the introduction of new built
	explored in more detail in specific		elements.
	policies regarding landscape		elements.
	character.)		The concept of the proposed
			landscaping is generally informal
			and ad-hoc, similar to existing,
			continuing the exotic and
			indigenous planting legacies found
			in the existing landscape.
HERITAGE	LISTING AND CURTILAGE		
Policy 2	The site has been listed on the State	To be	Recommended. New managers
	Heritage Register in recognition of its	determined	and occupiers should be made
	exceptional level of heritage		aware of the exceptional heritage
	significance. All land managers and		values of the site, the CMP and this
	occupiers should be aware of this		SHI.
	listing and the defined curtilage as		
	well as the primary heritage curtilage		
	and the values attached to it, to		
	ensure a co-ordinated heritage		
	management approach is adopted.		
	ATION PRACTICE		
-	oproach and the Burra Charter		
Policy 4	The implications of the statement of	YES	The NSW Department of Health
	cultural significance outlined in		and the Greater Western Area
	Policy 1 of this Conservation		Health Service have adopted the CMP as a basis for managing the
	Management Plan should be accepted as one of the bases		site and its exceptional heritage
	for all future management decisions.		values.
Other Stan	dards and Guidelines		
Policy 5	Bloomfield Hospital site should be	To be	There should be funding available
, •	conserved and managed in	determined	for conservation management and
	accordance with the Minister's State		ongoing maintenance of historic
	Owned Heritage Management		buildings and landscape directly
	Principles and the Heritage		affected by the proposed
	Council's Heritage Asset		redevelopment.
	Management Guidelines issued		·
	under Section 170 of the NSW		
	Heritage Act 1977, which came into		
	y ,		

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	force on 1 January 2005.		
POLICY No	POLICY	COMPLYING?	COMMENTARY
	MAINTENANCE		COMMENTATI
Policy 6	Develop an asset maintenance plan	To be	Recommended
r oncy o	that accounts for the heritage values	determined	Recommended
	of the place. This should include a	dotorninod	
	checklist of actions to be undertaken		
	regularly in order to keep the		
	buildings and landscape in good		
	repair. Ensure adequate resources		
	are available for implementation.		
Policy 7	Maintenance and repair works should	To be	Recommended
	be undertaken in accordance with the	determined	
	policies in this plan and the minimum		
	standards of maintenance and repair		
	prescribed in Division 5 of the NSW		
<u> </u>	Heritage Act, 1977.		-
Policy 8	Staff responsible for implementation	To be	Recommended
	of the maintenance cycle should be	determined	
	familiar with the policies in the CMP		
	and the need to use traditional		
	construction and repair techniques.		
	Where necessary, specialists in the conservation of particular materials		
	should be consulted and/or used to		
	undertake the work.		
MANAGIN			
	PRINCIPLES AND REQUIREMENT	<u> </u>	
	ritage Impact Prior to Making Cha	•	
Policy 9	Changes should be pr e ceded by a	YES	Satisfied by this document for the
	heritage impact assessment, using		current proposal.
	the policies in this Plan for guidance. More substantial changes should be		
	formally assessed in a Heritage		
	Impact Statement by a heritage		
	specialist prior to implementation.		
	Recommend actions in the HIS		
	about how to minimise or mitigate		
	impacts should be followed.		
Use Annro	priate Expertise and Make Record	s	
Policy 10	Where alterations, additions,	YES / To be	Heritage advice has been sought
I oney to	demolition or new work to Bloomfield	determined	throughout the design process to
	Hospital is proposed, these	Getermined	attempt to mitigate the obvious
	modifications should be developed in		negative impacts of the proposal.
	consultation with an experienced		This process is to continue with the
	heritage specialist, appropriate to the		involvement o David Scobie,
	nature of the work, in order to		Heritage Consultant.
	minimise heritage impacts or take		
	opportunities to recover significance.		
Policy 11	Technical advice and building work	To be	Recommended
-	should only be undertaken by qualified	determined	
	consultants and contractors.		
	Recommendations of potential		
	consultants and contractors should be		
	provided by the supervising heritage		

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	specialist.					
POLICY No	POLICY	COMPLYING?	COMMENTARY			
Heritage Ap	Heritage Approvals					
Policy 12	Check heritage and planning approval requirements prior to undertaking any changes to the place. Obtain any necessary approvals prior to undertaking work and carry out work in accordance with any conditions placed on these approvals.	YES	This document is part of this process. Recommended for subsequent design development and working documentation.			
TYPES OF	CHANGE					
	Ownership and Subdivision					
Policy 13	If the site passes from public ownership, a heritage conservation agreement in accordance with the management principles in this Conservation Management Plan should be placed on the land title in perpetuity.	Not applicable to the subject Application				
Policy 14	Further subdivision within the primary heritage curtilage is not recommended as this may continue to compromise the ability to manage the heritage values of the place in a cohesive way. However, regardless of the number of owners or managers, it is important that all parties are aware of the significance of the site as a whole as well as its component parts. All owners, managers and occupiers should use this Conservation Management Plan to inform decision making and be aware of cumulative changes across the site that may have unintended heritage impacts.	Not applicable to the subject Application				
Change of	Use					
Policy 15	New and additional uses may be provided on the site as long as they are designed using the policies in this CMP for guidance in order to minimise negative heritage impacts. Continuation of the historic use of the site or parts of the site, while desirable, should not be used as heritage rationale to support changes that have a major negative impact on the significance of the place.	YES	The CMP has been used to identify potential heritage impacts throughout the design development process and to identify possible mitigation measures. The functional requirements of modern hospital facilities have influenced the design process. Reasons for the siting and design of the redevelopment are outlined in			

POLICY No	POLICY	COMPLYING?	COMMENTARY
	es, fittings and safety and fire upgra		
Policy 17	Any changes to services within the existing buildings must take into consideration the heritage significance of the building and should occur in areas of lesser significance. Any opportunities to remove intrusive fabric or redundant services should be pursued. No new services should be attached to the exterior of any building. Where possible services should run under floors, in ceiling spaces or in areas where changes have previously occurred (except where changes are likely to be reversed for example re- opening an infilled verandah).	To be determined	Information on changes to services is not currently available. It is important to reuse existing fittings where possible and to keep fittings that have been removed for use elsewhere. Changes to services should be detailed in consultation with David Scobie, Heritage onsutant and discussed where relevant with the NSW Heritage Council Fire, Access and Services Advisory Panel prior to finalisation of concepts and expectations to assist in minimising heritage impact.
Policy 18	Any changes to existing buildings for fire safety upgrades must take into consideration the heritage significance of the building and should utilise areas of lesser significance for services. Existing external fire stairs should be reconsidered, to reduce their impact upon the heritage significance of the buildings.	To be determined	Information on fire upgrading is not currently available. Fire upgrades should be detailed in consultation with David Scobie, Heritage Consultant and discussed with the NSW Heritage Council Fire, Access and Services Advisory Panel prior to finalisation of concepts and expectations to assist in minimising heritage impact.
Conservati	on Works		
Policy 19	 Ensure that a record of the underlying methodology for each conservation, adaptive reuse or redevelopment project is maintained including: documentation of the reasoning behind major decisions; records of any testing or additional research undertaken; ensure that this record is appropriately archived. 	To be determined	Recommended. The archive should be kept on site in a known, safe and accessible location.
Policy 20	Restoration or reconstruction should only be undertaken where there is sufficient evidence from documentary, archaeological or architectural sources to ensure accuracy and authenticity	Not applicable	Restoration and/or reconstruction are not currently proposed.

POLICY No	POLICY	COMPLYING?	COMMENTARY
NEW DEVE	LOPMENT		
General Ap	oproach		
Policy 21	All new development proposed for the site should be planned and implemented in accordance with the policies in this Conservation Management Plan. In particular it should aim to protect and enhance conservation of the key characteristics of the site listed in Policy 1.	Discussed Under policies 25 onwards.	
Policy 22	New development outside the primary heritage curtilage, but inside the site curtilage should not negatively impact on the character and setting of the significant primary heritage area. Height and scale of new development, while less of an issue than within the primary heritage curtilage still needs to be considered within the context of the site as a whole.	Not applicable	
-	Site Structure		1
Policy 23	Retain the existing road pattern within the primary heritage curtilage. Changes to this road pattern and the addition of new access points should be minimised and should only occur where they do not compromise understanding of the original structure and function of the site.	YES	The existing significant road structure is largely unaffected by proposed redevelopment. The new road structure being introduced within the redevelopment area is clearly associated with the new precinct and does not detract from an understanding of the original layout of the site.
Policy 24	Maintain existing open spaces within the primary heritage curtilage and the separation of the buildings and clusters of buildings within the parkland setting. New buildings and features should be designed in a way that does not compromise understanding or experience of the original layout and setting of the site, or have a major negative impact on the key heritage values of the place described in the Statement of Significance and Policy 1.	NO	The proposed development has a substantial impact upon the existing open spaces north and south of Ward 18 and 19 (Buildings 41 and 40). Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.
Policy 25	Do not attempt to replicate or augment the strong axes of buildings, particularly those at Bloomfield South.	YES	

POLICY No	POLICY	COMPLYING?	COMMENTARY
Landscape	Setting and Context		
Policy 26	The introduction of any new land scaping schemes and features should not detract from the heritage significance of the place and its institutional village and institutional landscape character. In particular: • the generally informal character of	YES	The proposed landscaping scheme
	the plantings in contrast to the more formal underlying layout should be continued. The only exception to this are the formal rows of trees from the first phase of planting marking boundaries within the site and the formal hedges associated with the airing courts. These should be replaced as the individual trees die off;		is informal, but does continue the pattern of using rows of trees to define and/or enclose areas of the grounds. Replacement of the inner row of cottonwood in the avenue along Forest Road is also proposed because they are in poor health. The proposed landscaping in the courtyards of the new development will complement the existing planting regime on the site, using a mix of exotic and indigenous species, in a combination of informal
	• the regime of planting exotic species and eucalypts as specimen trees in the parkland areas within the primary heritage curtilage should be continued in preference to formal gardens;	YES	The proposed landscape concept and suggested planting list focus on informal groupings and specimen trees drawn from selected native and European stock in keeping with the existing landscape character and tradition of planting on the site.
	 use native species for new plantings in the areas outside the primary heritage curtilage. 	Not applicable	
	• continue to define areas of the site by using plant material or terraced banks, rather than fences and walls.	YES	Hedges, border planting and the use of rows of trees to screen or define areas of the site are continued in the landscape concept for the redevelopment.
	• kerbing and guttering of roads within the primary heritage curtilage should be kept to a minimum and continue to use materials and finishes that are soft and informal in effect and appropriate to the village character of the site.	To be determined	Recommended. The current proposal employs harder landscape elements (kerbing and guttering etc.) surrounding the new development, but does not affect the character of the landscaping surrounding the existing buildings or the rest of the site.
Policy 27	Refurbishment or new development should take the opportunity to:		

POLICY No	POLICY	COMPLYING?	COMMENTARY
	 investigate and where appropriate, reinstate the plantings within the airing courts to the ward buildings across the site and around the main administrative and service buildings using archival and archaeological evidence as a basis; where possible, reinstate more hedging and specimen topiary trees, from the early stages of the 	NO Not applicable	There is no current proposal to reinstate the gardens established in the airing courts from the 1930s to the 1960s. The remnant landscaping will be retained. It will be possible to reinstate these areas in the future if desired.
	development of the hospital using archival evidence as a basis.		
Buildings a	and Structures		
Policy 28	Minor alterations to, or adaptive reuse of most buildings on the hospital site, particularly those actions that recover significance, are appropriate as long as the original configuration, external character, and significant fabric is retained, evident or appropriately interpreted. As these are integral to the heritage significance of the buildings and the site as a whole.	YES/To be determined	The documentation for the buildings being reused as part of this development (Wards 18, 19 and Amaroo) (Buildings 41,40 and 44) indicate that in general, their original configuration, external character and significant fabric is retained, evident and/or interpreted. The entry steps to the Administration building are to be demolished. An alternative is required which retains the entry. The final specifications should be developed in consultation with David Scobie, Heritage Consultant.
Policy 29	Generally, the existing landscaped settings of each building should be retained, particularly for the administrative and ward buildings. Garden views were integral to the original philosophy of treatment of psychiatric patients and are directly linked to the heritage significance of these buildings and should be retained.	YES	The intimate views to and from the significant buildings within the redevelopment area are retained by the current proposal. Middle and some distant views will be removed or seriously constrained particularly to the north. Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.
Policy31	The original and any other primary uses of each building on the hospital site and their role in the provision of mental health services should be interpreted.	To be decided.	Recommended
Policy 32	Alterations and additions to buildings should be constructed in materials that do not have a negative impact on the significance of the original fabric, with forms and details, which respect and complement the existing fabric. There should be some distinction between	Not applicable	The schematic designs for the buildings being reused as part of this development (Wards 18, 19 and Amaroo) (Buildings 41, 40 and 44) indicate that there are no external additions planned. Minor alterations are dealt with in the next table

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	new and old fabric, between new		covering conservation policies for
	additions and the original building.		individual buildings.
	DOLICY		COMMENTARY
POLICY No	POLICY	COMPLYING?	COMMENTARY
Policy 33	Where possible, large internal spaces should be used in a manner that retains the existing scale of the space without subdivision. Where subdivision into smaller spaces is necessary, these works should be reversible and/or allow interpretation of the bigger space. Similarly, creating larger spaces from smaller ones by removing walls should also be avoided or kept to a minimum with interpretation of the individual. spaces.	YES / To be determined	The documentation for the buildings being reused as part of this development (Wards 18, 19 and Amaroo) (Buildings 41, 40 and 44) indicate that some large spaces will be subdivided into smaller areas. It is recommended that these works be reversible and the existing configuration recorded prior to construction. Similarly, some larger spaces in Amaroo (Building 44) are proposed to be created from smaller ones by removing walls, but this is kept to a minimum, and remnant wall
Policy 24	Original and party interior fittings and	To be decided	elements will be retained to interpret the original configuration. Minor alterations are dealt with in the next table covering conservation policies for individual buildings.
Policy 34	Original and early interior fittings and finishes should be retained. New interiors should be in a style that suits the era of the building, but is clearly new and different. New interiors should be of a high quality in material and workmanship.	To be decided	Strongly recommended
Views and V	Vistas		
Policy 35	New development should avoid intrusion on the outlook or views from the early buildings. In particular it should not create enclosure where there is currently an open outlook from these buildings.	YES	The gardens and airing yards of the wards immediately adjacent to the new redevelopment (Wards 18 and 19) (Buildings 41 and 40) will be retained, as will the intimate views between the buildings. Middle and some distant views and the sense of space in the western half of Bloomfield South will be
			impacted. Reasons for the siting and design of the redevelopment are outlined in Section 5.3 of this SHI.
Signage			
Policy 36	Any new signage should be low key and designed in a scale and style that does not have a negative impact on individual buildings or their setting. The existing names of streets within the site should be retained.	To be determined	Recommended

P0LICY No	POLICY	COMPLYING?	COMMENTARY
Archaeolo	gy		
Policy 37	Archaeological evidence relating to the former airing yards and formal gardens will supplement the historical record and thus should be used to inform any reconstruction of these areas. Archaeological evidence in these areas should not be impacted without being recorded first, by a qualified historical archaeologist.	Not Applicable at this time	Recommended if re-landscaping is proposed.
Policy 38	 While the remaining archaeological resources within the site form part of the record of its physical development, their contribution to the significance of the site as a whole is low. There is no need to undertake archaeological recording except as specified in Policy 40 and as outlined below: work carried out in the area around the original wooden huts in the eastern part of the site should be mindful that it may contain subsurface deposits relating to the hospital. If such evidence is located it should be recorded by a qualified historical archaeologist. This evidence may include postholes, artefact deposits, landscape features and building footings. work undertaken in the area of the playing fields should be mindful that it may contain to contain artifacts relating to early life in the hospital. If such evidence is located to contain artifacts relating to early life in the hospital. If such evidence is not be the playing fields should be mindful that it may contain landfill with potential to contain artifacts relating to early life in the hospital. If such evidence is located 	Not applicable To be determined	Recommended
Mayaablal	it should be investigated and possibly recorded by a qualified historical archaeologist.		
Moveable Policy 39	Moveable heritage within the site should be identified, catalogued, conserved, managed, interpreted and retained on the site even if the use of	To be determined	Recommended
	the site or individual buildings changes.		

Γ

P0LICY No	POLICY	COMPLYING?	COMMENTARY
	INTERPRETATION		
Policy 40	Prepare and interpretation strategy and implement it in order to interpret the history and significance of the site as a whole and its layout, original planning intention, individual buildings and spaces, as well as the daily lives of its occupants and staff.	To be determined	Recommended to be included in new development. The two Heritage garden areas in front of the Administration and Clinical services buildings are to be interpreted and named appropriately.
Policy 41	Prepare an oral history as a matter of urgency to record the important stories about the site and use this to inform interpretation.	To be determined	Recommended
USE OF THIS	S PLAN		
Policy 41	The NSW Department of Health should accept and adopt this plan as a basis for ongoing management and for planning any future changes to the Bloomfield Hospital site.	YES	The NSW Department of Health and the Greater Western Area Health Service have adopted the CMP as a basis for managing the site and its exceptional heritage values.
Policy 43	The NSW Department of Health should submit this Plan to the NSW Heritage Office for information, so that it may be used to guide future decisions about the place.	YES	The current proposal and accompanying SHI is being submitted to the NSW Heritage Office.
Policy 44	The NSW Department of Health should review this Plan at five-year intervals or whenever critical new information comes to light as a result of further research or physical work.	Not applicable	
Policy 45	 This Plan should become a public document and should be distributed to the following repositories: relevant staff at Bloomfield Hospital, in particular those responsible for day to day management and for planning changes to the place; the area health office; Department of Health head office; Orange library and Orange Council Offices; NSW Heritage Office. In addition, in accordance with the obligations of Premier's Memorandum No 2000-15, copies of the Plan should also be lodged with State Library of NSW (2 copies) Parliamentary Library of NSW (1 copy) 	Not applicable for SHI	Not Applicable for SHI
	 University of Western Sydney Library (1 copy) National Library of Australia (1 		

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6.3 IMPACT OF PROPOSED DEVELOPMENT ON SPECIFIC ELEMENTS

The CMP provided detailed recommendations with regard to the future treatment, management and conservation of specific elements of the site, which have been used in this report to assess heritage impact, with commentary on the degree and type of impact if relevant.

A – BLOOMFIELD SOUTH

SIGNIFICANCE

EXCEPTIONAL

CONSERVATION POLICIES

- The road pattern should be maintained without augmentation as it is a key structural element and is integral to the significance of this part of the site. It provides the basis for the original design intention for the site.
- New formal structural elements including roads, hard edges for roads and garden beds, pathways, fences, new hedges should not be introduced unless otherwise specified below.
- All open spaces in this part of the site should be maintained as open space unless otherwise specified below. They are key contributors to the setting of the buildings, the spacing of the buildings and the peaceful village-like atmosphere on the site.
- The informal character of the plantings in contrast to the more formal structure of this part of the site should be maintained, as this is a characteristic Bloomfield feature. The use of introduced plant species should be continued where plants need to be replaced in the future, as this pattern of planting is also distinctive feature of this part of the site.
- The formal airing courts at the front of the main axis of wards could be reinstated using photographic evidence. If reinstatement is not possible in the short term, retaining the archaeological remnants of the former airing courts would allow for reconstruction in the future. Imposing a new landscaping design on this area would negatively impact its significance. New landscaping following the pattern, scale and style of the original gardens in this location would enhance the immediate setting for the main ward blocks.
- The introduction of new buildings in the two large open spaces to either side of the administration axis and at the rear of the main ward axis would be possible provided that:
 - the buildings are no larger in height and scale than the surrounding original wards;
 the buildings are placed at the edges of the open space addressing the existing roads;
 - an area of open space is maintained in the centre of the buildings;
 - original enclosed airing courts are not impacted by new built forms;
 - hard landscaping is not introduced between or behind the new buildings.
- The significant views from the main male ward buildings over the airing courts to the playing fields and the institutional parkland and distant rural landscape should be retained unobstructed by built forms or denser plant screening.
- It is important to maintain the closer views from the main female wards across the airing courts to specimen trees with bushland behind.

PROPOSED WORKS

 Construction of new infrastructure and buildings linked to the new 1-3 storey General Hospital and Acute Mental Health building on the playing fields north of Wards 19-15 (Buildings 40, 41,46-48, 50), plus the new Forensic Mental Health building north of Canobolas Clinic (Building 56).

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COMMENT ON IMPACT AND RECOMMENDATIONS

Most of the existing road pattern is maintained with some additional roads along the western edge of the site to provide access to the new hospital development and linking this with The Crescent. It is proposed that these roads will be kerbed and guttered and subsequently distinguishable from the less formal nature of the existing road system.

One section of Canobolas Drive will be lost between Ward 19 – Administration (Building 40) and Clinical services (Building 41) and the new Forensic Mental Health building though the existing alignment will be interpreted through the landscape treatment for this area through the use of surface materials and plantings. Details are yet to be indicated on the drawings.

The proposed development includes the addition of new formal structural elements including hard edged roads, primarily to the western edge of the site, covered pathways and ramps linking new and existing buildings, and fences enclosing yards linked to the new mental health facilities. Most of these new elements are occurring in an area of new development, will be obviously different and contrasting to the existing character of the site generally and as such will have limited impact on the overall heritage significance of the site.

Hedges are proposed to be used in the new landscaping related to the new buildings, primarily as dividing or edging elements, in a manner evocative of the traditional use of hedging over the site. Existing roads will remain informal as existing, with no kerbing and guttering.

One open space in Bloomfield South will be lost due to the construction of a new Forensic Mental Health building between Canobolas Clinic (Building 56) and Ward 19 (Building 40). This area currently contains the green house and associated structures – 65, 66, 67 and gardens and the orchard and is indicative of the self-sufficient nature of Bloomfield Hospital in the past. Other than the loss of this open space, the development of this new structure will have limited impact on the surrounding buildings and landscape.

The character of the open space north of Moonya Cottage # 8 (Building 36) will be altered with proposed car-parking, future Ambulance Station and associated landscaping. However, generally the setting of this building will be retained and any impact will be minimised by landscaping. The proposed Ambulance Station site will have a substantial negative impact upon the Moonya Cottage and this project will need to be the subject of future study, options and assessment.

All other open spaces in this part of the site will be maintained as open space, generally contributing to the setting of the buildings, the spacing of the buildings and the village-like atmosphere on the site.

The proposed additional plantings in this part of the site are generally informal, similar to existing, continuing the existing contrast to the more formal structure of this part of the site.

The design intent of the proposed landscaping generally reflects the exotic and indigenous planting legacies found in the existing landscape.

The proposed development does not include reinstatement of the formal airing courts at the front of the main axis of wards at this stage, or removal of any archaeological remnants of the former airing courts.

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The proposed development does not include any changes to the existing landscaping of these areas, even in the instances where the adjoining buildings are proposed to be reused.

The significant views from the main male ward buildings over the airing courts to the playing fields and the institutional parkland and distant rural landscape will be significantly altered by the construction of a new 1-3 storey General Hospital and the single storey Acute Mental Health building on the playing fields north of Wards 19-15 (Buildings 40, 41, 46-48, 50). Screening trees assist in retaining the formal shape of the airing courts in front of Clinical Services – building 41 and Administration – building 40. The loss however, of the open space provided by the playing fields is a major negative heritage impact which cannot be off-set.

B – INSTITUTIONAL PARKLAND

SIGNIFICANCE

EXCEPTIONAL

CONSERVATION POLICIES

- Maintaining this area without introduction of extensive or numerous built forms is important in order to maintain its character as institutional parkland and visual and atmospheric setting for the main axis of wards at Bloomfield South.
- New buildings and newer landscaping styles introduced into this area could have a marked and negative impact on the heritage significance of the site as a whole and would irreversibly change its character. If they are introduced at all (which is not preferred) low scale, very well spaced and well-articulated forms would assist to reduce the level of impact.
- The use should ideally remain sport and leisure related. Upgraded sporting facilities could be developed but should remain at a similar scale to those already there.
- This area was designed to provide a functional separation between different types of treatment of patients at the hospital and itself play a restorative role in their treatment. Views between the parkland and the main ward groupings should be retained.

PROPOSED WORKS

• Plantings are proposed to screen the new built elements. New works consist of infrastructure and buildings linked to the new 1-3 storey General Hospital and single storey Mental Health building on the playing fields north of Wards 19-15, (Buildings 40, 41, 46-48, 50) with associated carparking, landscaping and infrastructure.

COMMENT ON IMPACT AND RECOMMENDATIONS

The proposed construction of a series of linked hospital buildings up to 3 stories high on the playing fields north of Wards 19-15 (Buildings 40, 41, 46-48, 50) will have a negative heritage impact upon the institutional parkland. The important role of this area in providing a visual and atmospheric setting for the main axis of wards at Bloomfield South will be lost for the western half of the axis as this is the location of the new hospital buildings. This development will irreversibly change the character of this area and the heritage significance of the site as a whole.

The Institutional parkland area is large and while the development will diminish the size of the parkland, large areas of parkland will remain, including the golf course, oval and the wooded region between the eastern half of Bloomfield South and Bloomfield North.

The proposed construction of a series of linked hospital buildings on the playing fields north of Wards 19-15 (Buildings 40, 41, 46-48, 50) will change the use of this area from sport and leisure related to hospital use. However, much of the institutional parkland will remain, including the golf course, oval and the wooded region between the eastern half of Bloomfield South and Bloomfield North.

The functional separation between different types of treatment of patients at the hospital will still be evident and views from many buildings to soft landscaped areas will still be possible.

Views between the sporting precinct and the main ward groupings will be lost on the western side of the main axis of Bloomfield South, though these buildings will retain intimate landscaped views.

WARD 20 - (Building 38)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, Ward 20 (Building 38) has EXCEPTIONAL heritage significance.

Individually, Ward 20 (Building 38) has EXCEPTIONAL heritage significance.

CONSERVATION POLICIES

- Considering the exceptional heritage significance of Ward 20 (Building 38), and its degree of
 intactness and integrity, this building should be conserved. All original fabric including
 internal and external finishes should be retained. Furthermore, the building is an extremely
 rare extant example of a Tuberculosis Ward in a mental hospital in NSW, as most other
 examples seem to have been demolished. Conservation works to this building should include
 replacement of all glazing in the building, restoration of the painted glass panels in the rear of
 the building and could consider reinstating the chain wire screens to the verandahs.
- Considering its integrity and distinctive external and internal character, the building should not have any additions. Minor adaptive reuse of the building is acceptable as long as the original plan form and character is retained, as this is integral to the heritage significance of the buildings. Subdivision of large spaces should be avoided. All modifications should be reversible.
- The existing landscaped setting of Ward 20 (Building 38) should be retained, in particular the soft landscaped views from the side wings and courtyard as this relates to the original design of the building to provide calming garden views for the patients, as well as providing a suitable context for the building. It is not essential to retain the existing fence enclosing the courtyard, as long as this sense of enclosure is interpreted in any revised landscape.
- Ward 20 (Building 38) could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. The building could also possibly be used for low-impact recreational uses, such as a café or restaurant, making the most of the long verandahs and northern courtyard. Other uses may be acceptable if any necessary works do not have a major impact on significant configuration or fabric.
- The original use of the building and its central role in the provision of mental health services on the Bloomfield Hospital site should be interpreted, particularly its role providing accommodation and treatment for tuberculosis psychiatric patients, part of the complex system of assessment and management of patients and related administration and services of the hospital. The building also provides a good opportunity to explain the treatment of TB during the early 20th Century, as this is clearly evident in the building form, fabric and configuration.

PROPOSED WORKS

- Demolition of Ward 20 (Building 38) and inclusion of this site into a new car park for the hospital redevelopment.
- Archival recording, oral history and Interpretation are proposed.

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COMMENT ON IMPACT AND RECOMMENDATIONS

The demolition of Ward 20 (Building 38) is a major negative heritage impact, considering its degree of rarity, integrity and intactness.

- Significant original fabric, including joinery should be salvaged for reuse in works to other heritage buildings on the site or retained for future reuse. Locations for the items to be re-used are yet to be determined.
- The original painted glass panels should be retained and reused within the new hospital development in conjunction with detailed interpretation about this building. Locations for the items to be re-used are yet to be determined.
- Detailed archival recording of this building is proposed, including measured drawings, photographic and video recording. All existing windows hoarding are be removed prior to any recording.
- These archival records should be compiled with historic records, including copies of original plans, subsequent plans, historic photographs etc. Sets of these documents should be stored on site in a location to be determined, as well as an appropriate off-site location such as Orange City Library.

As Ward 20 (Building 38) is proposed to be demolished, there are no proposed additions or adaptive reuse.

As Ward 20 (Building 38) is proposed to be demolished, the existing landscaped setting and landscaped views will be lost. These aspects will be included in the archival recording.

It is recommended that interpretation of the whole of the Bloomfield site, as well as each relevant component be included as part of the development. The final brief and form of the recording is to be determined.

WARD 19 - (Building 40)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, Ward 19 (Building 40) (Building 40) has EXCEPTIONAL significance.

Individually, Ward 19 (Building 40) has EXCEPTIONAL heritage significance.

CONSERVATION POLICIES

- Ward 19 (Building 40) should be conserved, as a highly intact example of an Interwar institutional building in a modest domestic style, typical of most buildings on the Bloomfield site, and displaying the principal characteristics of the typical ward buildings on the site. This building has a very high degree of integrity in terms of external form, internal configuration and fabric. All existing original internal and external fabric and finishes should be retained.
- The existing landscaped setting of Ward 19 (Building 40) should be retained, in particular the soft landscaped views towards the north. The hard surfaces of the southern courtyard should be retained or interpreted, as this relates to the service nature of this space. Consideration should be given to reinstating or interpreting the original airing yard for this ward.
- The preferred use for Ward 19 (Building 40) is for health-care as this was its original use. However, Ward 19 (Building 40) could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. The building could also possibly be used for residential and related uses, such as hotel accommodation. Any uses of the building should have limited impact on significant configuration or fabric.
- The original use of the building and its central role in the provision of mental health services on the Bloomfield Hospital site should be interpreted, particularly its role providing long-term accommodation and treatment for unrecovered male patients, part of the complex system of assessment and management of patients and related administration and services of the hospital.
- Opportunities to interpret the original airing yard will be investigated with the Landscape Architects. Plans currently indicate Heritage gardens.

PROPOSED WORKS

Proposed redevelopment of Ward 19 (Building 40) for use for Administration.

• An interpretation plan is to be prepared and it will include the building.

- Demolition
- The front steps are to be demolished.
- Existing eastern toilets are to be upgraded.
- The central toilets are to be demolished and replaced.
- Rear stairs to be demolished and door infilled from rear central toilet block
- A set of existing walls in the ground floor eastern wing are to be demolished.
- The existing kitchen in the rear eastern wing ground floor is to be stripped out.
- The passage linen store in the rear western wing ground floor is to be demolished.
- On the first floor, the existing door openings opposite each stair are to be moved and widened.
- In the west wing two ward dividing walls are to be demolished.
- The rear passage linen store is to be demolished.
- In the rear of the east wing, the kitchen area is to be demolished.
- New Works
- The new ground floor partitions are lightweight construction and reversible

- The first floor partitions are lightweight and reversible with offices utilising open layouts in the eastern wing.
- The Comms Room may compromise the fireplace and chimney breast

COMMENT ON IMPACT AND RECOMMENDATIONS

The proposed development involves the conservation of Ward 19 (Building 40) with some minor changes to provide suitable facilities for administrative purposes, including upgrading of services.

The proposed works are sympathetic to the existing building, and involve no external additions, no new external openings and no changes to the existing configuration. In further design development and construction, it is recommended that the following works require review to develop alternatives which do detract to the same extent form the significance:

- The front steps are significant and are not to be demolished. An alternate means of ramping the entry access is required, as has been achieved at the adjoining Clinical services Building
- Bulkheads and nib walls are to be retained for all walls of original significance, which are proposed for demolition.
- The demolition of the passage linen stores on the ground and first floors of the west wing serves no clear purpose and should be reconsidered with the closets retained.
- The ground floor external steps into the central toilet block are to be retained even though the door is to be infilled with a suitable detail. Demolition serves no useful purpose and requires extensive making good.
- Details of the EDB proposed in the Comms Room on the first floor of the east wing are to ensure that the chimney breast and fireplace are not compromised by enlarging the room if necessary

David Scobie will provide Heritage Consulting advice and will be involved in further detailed design development of this building, as well as during documentation and construction.

The immediate landscaped setting of Ward 19 (Building 40) is to be retained, including the existing area of the airing yard to the north. Immediately beyond the former airing yard is the new hospital development, involving complete loss of all soft landscaped views towards the north from the middle distance.

- The Landscape works include the adaptive re-use of the airing areas for paired heritage gardens;
- Screen planting is indicated to provide a sense of enclosure to both spaces
- Additional screen planting is recommended to the view facing the proposed Acute Mental health building;
- Interpretation elements as part of the comprehensive Interpretation Plan are recommended to mark and celebrate the Bloomfield history, staff and patients

The hard surfaces of the southern courtyard will not be entirely retained, though the area will have gravel surfaces to reflect the areas former service nature, with small trees to provide increased amenity.

- The Landscape Plan illustrates a fine decomposed granite gravel surface with Concrete pads to anchor the fixed bench seats and specimen shade trees
- A minor modification will be required to retain the stairs

The proposed development does not reinstate or interpret the original airing yard for this ward, though this could be incorporated at a later date.

The proposed use of Ward 19 (Building 40) for administration is acceptable as it is a low-key use that is likely to involve very limited changes to configuration or fabric.

WARD 18 – (Building 41)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, Ward 18 (Building 41) has EXCEPTIONAL significance.

Individually, Ward 18 (Building 41) has HIGH heritage significance.

CONSERVATION POLICIES

- Ward 18 (Building 41) should be conserved as a highly intact example of an Interwar
 institutional building in a modest domestic style, displaying the principal characteristics of
 typical ward buildings on the site. This building has a very high degree of integrity in terms of
 external form, configuration and fabric. All existing original internal and external fabric and
 finishes should be retained. Conservation works should include the removal of verandah
 infilling on the northern façade.
- Minor alterations to, or adaptive reuse of the buildings is appropriate as long as the original plan form and character is still evident, as this is integral to the heritage significance of the building. Minor additions could possibly occur to the end elevations, but should not be considered for the north elevation or southern courtyard. Any additions to the ends of the building must be minor to respect the pattern of distinct landscaped spaces between each building. Subdivision of large internal spaces should be avoided if possible and should be reversible if required.
- The existing landscaped setting of Ward 18 (Building 41) should be retained, in particular the soft landscaped views towards the north. The hard surfaces of the southern courtyard should be retained or interpreted, as this relates to the service nature of this space. Consideration should be given to reinstating or interpreting the original airing yard for this ward.
- The preferred use for Ward 18 (Building 41) is for health-care as this was its original use. However, Ward 18 (Building 41) could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. The building could also possibly be used for residential and related uses, such as hotel accommodation. Any uses of the building should have limited impact on significant configuration or fabric.
- The original use of Ward 18 (Building 41) and its central role in the provision of mental health services on the Bloomfield Hospital site should be interpreted, particularly its role providing long-term accommodation and treatment for patients, part of the complex system of assessment and management of patients and related administration and services of the hospital.

PROPOSED WORKS

- Proposed redevelopment of Ward 18 (Building 41) for use as a Clinical Services Mental Health facility.
- Proposed development of new hospital buildings immediately to the north of Ward 18 (Building 41).
- An interpretation plan is proposed.

Demolition

- Original stairs are to be demolished as part of provision of a ramp on the front elevation west wing.
- Existing toilets and walls are to be demolished in the front west wing.
- Provision of single door openings in walls in the west and south wings.
- Demolish central office fitout
- Demolish central toilets, walls and boiler room and services.

• Remove wall and fitout in rear corner of east wing on first floor.

Works

- Verandah at front on east wing is to be fitted out and occupied with work stations. The enclosed verandah was an unfortunate alteration previously constructed.
- The new ground floor partitions are lightweight construction and reversible
- The first floor area is not to be used at this time

COMMENT ON IMPACT AND RECOMMENDATIONS

The proposed development involves the conservation of Ward 18 (Building 41) with some minor changes to provide suitable facilities for use as a Clinical Services Mental Health facility. The proposed development includes reuse of the whole of the ground floor only with no work in the rest of the building with the exception of service upgrades.

The proposed works are sympathetic to the existing building and involve no external additions, no new external openings and minor changes to the existing configuration. In further design development and construction, it is recommended that as much of the original fabric and finishes must be retained as possible, including joinery such as fireplaces.

David Scobie, Heritage Consultant will be involved in further detailed design development of this building, as well as during documentation and construction.

A detailed recording of the existing configuration of the building, including measured drawings and photographic recording will be carried out before any works commence.

The proposed works involve retention of much of the original plan form of the building, as well as much of its original fabric and finishes. Minor reconfiguration is occurring within the existing ground to accommodate offices and consulting rooms.

No external additions to the building and no new openings are proposed. Minor covered walkways are proposed although no details are currently available. Some minor internal subdividing walls are proposed, and these are to be reversible, and any walls that are proposed to be demolished must be evident if possible, with the retention of nib walls and similar devices.

The proposed works are sympathetic to the existing building, and involve no external additions, no new external openings and no changes to the existing configuration. In further design development and construction, it is recommended that the following works require review to develop alternatives which do detract to the same extent form the significance:

- An alternative to the demolition of the front stairs through relocating the ramp is recommended.
- Bulkheads and nib walls are to be retained for all walls of original significance, which are proposed for demolition.
- It would be preferable not to occupy the front eastern verandah but to restore the verandah to match the western side

The immediate landscaped setting of Ward 18 (Building 41) is to be retained, including the existing area of the airing yard to the north. Immediately beyond the former airing yard is the new hospital development, involving complete loss of all soft landscaped views towards the north from the middle distance.

The hard surfaces of the southern courtyard will not be entirely retained, though the area will have gravel surfaces to reflect the areas former service nature, with small trees to provide increased amenity.

- The Landscape works include the adaptive re-use of the airing areas for paired heritage gardens;
- Screen planting is indicated to provide a sense of enclosure to both spaces
- Additional screen planting is recommended to the view facing the proposed Acute Mental health building;
- Interpretation elements as part of the comprehensive Interpretation Plan are recommended to mark and celebrate the Bloomfield history, staff and patients

The proposed development does not reinstate or interpret the original airing yard for this ward, though this could be incorporated at a later date if possible.

• The Landscape Plan illustrates a fine decomposed granite gravel surface with Concrete pads to anchor the fixed bench seats and specimen shade trees.

The proposed use of Ward 18 (Building 41) for use as a Clinical Services Mental Health facility is appropriate as this is very similar to its original use and likely to involve very limited changes to configuration or fabric.

DENTAL CLINIC – (Building 45)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, the Dental Clinic (Building 45) has LITTLE significance.

The building has NEUTRAL heritage significance.

CONSERVATION POLICIES

- Considering its limited heritage significance, conservation of the Dental Clinic (Building 45) is not essential. If required, this building could be demolished. Alterations and additions could be carried out, as long as they do not impact on the heritage significance of Amaroo (Building 44), the adjoining landscape or the site overall.
- The existing setting of the Dental Clinic (Building 45) should be retained, as this landscaped setting contributes to the building's limited heritage significance.
- There is no preferred use for the Dental Clinic (Building 45) though a continuation of its existing use is appropriate as this relates to the overall use of the site. Nonetheless, other low-key uses could be considered.
- The current use of the Dental Clinic (Building 45) should be interpreted, as it relates to the diverse provisions of services on the site, necessary requirements for the effective provision of mental health treatment.

PROPOSED WORKS

- No works proposed.
- Amaroo (Building 44), the adjoining building, is proposed to be adapted for use as Rehabilitation
- Mental Health facility, involving no external additions.

COMMENT ON IMPACT AND RECOMMENDATIONS

The proposed development of Amaroo (Building 44) for use as a Rehabilitation Mental Health facility will have no impact on the landscaped setting of the Dental Clinic (Building 45).

An interpretation plan will be prepared for the whole of the Bloomfield site, as well as each relevant component be included as part of the development.

AMAROO – (Building 44)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, both Amaroo (Building 44) and Audley Clinic have EXCEPTIONAL significance.

CONSERVATION POLICIES

- Individually, both Amaroo (Building 44) and Audley Clinic have EXCEPTIONAL heritage significance. Both Amaroo (Building 44) and Audley Clinic should be conserved, as they have exceptional heritage significance as relatively intact examples of Interwar institutional buildings in a modest domestic style, with a substantial level of integrity and intactness, including the majority of the original configuration and much original fabric.
- All original fabric including internal and external finishes should be retained. Conservation works for Amaroo (Building 44) should include the removal of verandah infilling and the plant room extension to the central north wing.
- While additions should be avoided, minor alterations to, or adaptive reuse of these buildings may be appropriate as long as the original plan form and character of the building is retained. Minor additions could possibly occur to the ends and side of the southern wings, but should not be considered for the courtyards. In any possible development of this building, the principal form must be retained, as well as any original or early internal fabric. Subdivision of large internal spaces should be avoided if possible and should be reversible if required.
- The existing landscaped setting of both Audley Clinic and Amaroo (Building 44) should be retained, in particular the soft landscaped southern courtyards, as this was designed to provide a secure space and a pleasant outlook for the patients. Consideration should be given to reinstating or interpreting the original airing yard for this ward, rather than the existing configuration
- The preferred use for both Audley Clinic and Amaroo (Building 44) is for health-care as this was their original use, being designed to accommodate male and female epileptic patients. However, both these buildings could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. The building could also possibly be used for residential and related uses, such as hotel accommodation. Any uses of the building should have limited impact on significant configuration or fabric.
- The original use of Amaroo (Building 44) and its important role in the provision of mental health services on the Bloomfield Hospital site should be interpreted, particularly its role providing accommodation and treatment for epileptic male patients, part of the complex system of assessment and management of patients and related administration and services of the hospital. Furthermore, the building provides an opportunity to interpret the changing understanding and treatment of epilepsy over the 20th century.

PROPOSED WORKS

 Proposed redevelopment of Amaroo (Building 44) for use as a Rehabilitation Mental Health facility.

Demolition

- Replace existing window with new entry door.
- Demolish toilets in front wing.
- Demolish existing walls in centre of junction of front and west wings.
- Remove bath in rear of ground floor west wing.
- Demolish bathroom in front east wing
- Demolish existing ramp and entry to west side of east wing.
- Demolish walls from rooms in annex to east wing.

- Demolish door and steps to west elevation of east wing.
- Replace window in north elevation of central wing with ramp and sliding door.
- Demolish walls at junction of central and east wings
- Demolish door and steps in west elevation of south east wing
- Demolish external ramp and door and fit window
- Demolish rear bathroom in south east wing and fit door

COMMENT ON IMPACT AND RECOMMENDATIONS

The proposed development involves the conservation of Amaroo (Building 44) with some degree of adaptive reuse to provide suitable facilities for ongoing use for the provision of mental health care.

The proposed works are generally sympathetic to the existing building, and involve no external additions, no new external openings and no changes to the existing configuration.

Two recommendations from the Conservation Management Plan and the Heritage Impact Statement have not been adopted. These are the removal of the verandah enclosing infill and the demolition of the plant room extension on the central north wing.

In further design development and construction, it is recommended that the following works be indicated to ensure that the significance is retained and enhanced:

- The layout illustrates that the functions have been satisfactorily accommodated. The verandah is a significant element on the building and therefore the enclosure to the rear verandah is to be removed
- Bulkheads and nib walls are to be retained for all walls of original significance, which are proposed for demolition.
- The front elevation is significant and prominent. The plant room extension and the kitchenette e3xtension on the front wing are to be demolished and the building restored.

In further design development and construction, it is recommended that the original fabric and finishes be retained, including joinery such as fireplaces.

David Scobie, Heritage Consultant, will be involved in further detailed design development of this building, as well as during documentation and construction.

A detailed recording of the existing configuration of the building, including measured drawings and photographic recording will be carried out before any works commence.

The proposed works involve retention of much of the original plan form of the building, as well as much of its original fabric and finishes. Minor reconfiguration is occurring with some minor demolition and additional internal partitions to create private rooms with shared en-suites for patients

No external additions to the building and no new openings are proposed. Some internal subdividing walls are proposed, and these are reversible..

The existing landscaped setting of Amaroo (Building 44) is retained, including the soft landscaped southern courtyard.

The proposed development doe not reinstate or interpret the original airing yard for this ward, though this should be considered in design development.

The proposed use of Amaroo (Building 44) as a Rehabilitation Mental Health facility is very similar to its existing use as a psycho-geriatric ward and is appropriate.

MEDICAL RECORDS - (Building 43)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, the Medical Records (Building 43) building (originally known as Building A) has EXCEPTIONAL heritage significance.

The current Medical Records (Building 43) building was originally known as Building A. Individually, this building has a HIGH degree of heritage significance

CONSERVATION POLICIES

- There are three single storey face-brick buildings, originally used as artisan's workshops on Artisans Way, all of which have a related distinctive form and character. These buildings should all be conserved as they have a high degree of heritage significance for their distinctive character and their evidence of efforts of self-sufficiency for the site. All existing original fabric and finishes in these buildings should be restored, and intrusive additions and internal changes should be removed in the Medical Records (Building 43).
- Building, these conservation works should focus on the demolition of the southern extension, and investigate more sensitive infill for the former large door openings on both sides of the southern bay.
- Adaptive reuse of these buildings is appropriate as long as the original plan form and character is still evident. The character of the Medical Records (Building 43) building means that there are limited opportunities for sympathetic additions, though they could possibly occur in a similar location to the existing addition, or to the rear. Subdivision of large internal spaces should be avoided if possible and should be reversible if required.
- The existing setting of these three buildings should be retained, in particular their relationship to Artisan's Way, indicating that these were service buildings and not requiring immediate soft landscaping.
- There are no preferred uses for this group of buildings. Their existing uses are acceptable, however, these buildings could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. Any uses of the buildings should have limited impact on significant configuration or fabric.
- The original use of this building and its role as one of several buildings constructed for use for manual trades and light industry, and part of the complex system of treatment and management of patients at Bloomfield, should be interpreted. Any images of specific trades should be incorporated if available.

PROPOSED WORKS

- No works proposed
- Proposed development of a new building for use a Forensic Mental Health facility accommodating Forensic & Secure Rehabilitation units with large fenced yards to the west of the former workshops (Buildings 42, 43 & 55).
- No change of use proposed.
- No interpretation proposed at this time.

COMMENT ON IMPACT AND RECOMMENDATIONS

The immediate setting of the workshops (Buildings 42, 43 & 55) is retained, particularly their relationship to Artisans Way.

It is recommended that interpretation of the whole of the Bloomfield site, as well as each relevant component be included as part of the development.

LIVING SKILLS - (Building 42)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, the Living Skills (Building 42) building (originally known as Building B) has EXCEPTIONAL heritage significance.

The current Living Skills building was originally known as Building B. Individually, this building has a HIGH degree of heritage significance.

CONSERVATION POLICIES

- There are three single storey face-brick buildings, originally used as artisan's workshops on Artisans Way, all of which have a related distinctive form and character. These buildings should all be conserved as they have a high degree of heritage significance for their distinctive character and their evidence of efforts of self-sufficiency for the site. All existing original fabric in these buildings should be restored, and intrusive additions and internal changes should be removed. In the Living Skills (Building 42) Building, these conservation works should focus on the demolition of the entrance ramp, as this is an intrusive element, and investigate the possible demolition of additions to the rear and side of the building. Part of the rear addition appears to be very similar in detail to the original drawing of this building and may date from close to the original period of construction. This part should be investigated in further detail and may warrant retention.
- Adaptive reuse of these buildings is appropriate as long as the original plan form and character is still evident. The character of the Living Skills (Building 42) building means that there are limited opportunities for sympathetic additions, though they could possibly occur to the rear. Subdivision of large internal spaces should be avoided if possible and should be reversible if required.
- The existing setting of these three buildings should be retained, in particular their relationship to Artisan's Way, indicating that these were service buildings and not requiring immediate soft landscaping.
- There are no preferred uses for this group of buildings. Their existing uses are acceptable. However, these buildings could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. Any uses of the buildings should have limited impact on significant configuration or fabric.
- The original use of this building and its role as one of several buildings constructed for use for manual trades and light industry, and part of the complex system of treatment and management of patients at Bloomfield, should be interpreted. Any images of specific trades should be incorporated if available.

PROPOSED WORKS

- No work proposed
- Proposed development of a new building for use a Forensic Mental Healthfacility accommodating Forensic & Secure Rehabilitation units with large fenced yards to the west of the former workshops (Buildings 42, 43 & 55).
- No change of use proposed.
- No interpretation proposed at this time.

COMMENT ON IMPACT AND RECOMMENDATIONS

The immediate setting of the workshops (Buildings 42, 43 & 55) is retained, particularly their relationship to Artisans Way.

It is recommended that interpretation of the whole of the Bloomfield site, as well as each relevant component be included as part of the development.

GROUNDS STAFF TEA ROOM - (Building 55)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, the Grounds Staff Tea Room (Building 55) (originally known as Building C) has EXCEPTIONAL heritage significance.

The Grounds Staff Tea Room (Building 55) was originally known as Building C. Individually, this building has a EXCEPTIONAL degree of heritage significance.

CONSERVATION POLICIES

- There are three single storey face-brick buildings, originally used as artisan's workshops on Artisans Way, all of which have a related distinctive form and character. These buildings should all be conserved as they have a high degree of heritage significance for their distinctive character and their evidence of efforts of self-sufficiency for the site. All existing original fabric and finishes in these buildings should be restored, and intrusive additions and internal changes should be removed. In the Grounds Staff Tea Room (Building 55), these conservation works should focus on the preservation of all original fabric as this building is very intact. The addition of a small brick safe to one corner of the building could be retained as long as it is interpreted.
- Adaptive reuse of these buildings is appropriate as long as the original plan form and character is still evident. The integrity and character of the Grounds Staff Team Room means that there are limited opportunities for sympathetic additions.
- The existing setting of these three buildings should be retained, in particular their relationship to Artisan's Way, indicating that these were service buildings and not requiring immediate soft landscaping.
- There are no preferred uses for this group of buildings. Their existing uses are acceptable, however, these buildings could accommodate a range of low-key uses, such as office, commercial, administrative or educational uses. Any uses of the buildings should have limited impact on significant configuration or fabric.
- The original use of this building and its role as one of several buildings constructed for use for manual trades and light industry, and part of the complex system of treatment and management of patients at Bloomfield, should be interpreted. Any images of specific trades should be incorporated if available.

PROPOSED WORKS

- No works proposed
- Proposed development of a new building for use a Forensic Mental Healthfacility accommodating Forensic & Secure Rehabilitation units with large fenced yards to the west of the former workshops (Buildings 42, 43 & 55).
- No change of use proposed.
- No interpretation proposed at this time.

COMMENT ON IMPACT AND RECOMMENDATIONS

The immediate setting of the workshops (Buildings 42, 43 & 55) is retained, particularly their relationship to Artisans Way.

It is recommended that interpretation of the whole of the Bloomfield site, as well as each relevant component be included as part of the development.

NURSERY, GREENHOUSE, POTTING SHED & AVIARY

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, this series of buildings and structures (comprising a sunken greenhouse, potting shed and aviary) have HIGH heritage significance.

As a group, these structures have MODERATE heritage significance.

CONSERVATION POLICIES

- West of the former workshops on Artisans Way are a series of buildings and structures including a sunken greenhouse, potting shed and aviary. This group of structures assists in explaining the process of evolution of the landscape from bushland to landscaped estate. The structures relating to the nursery should be conserved, especially the sunken greenhouse. The existing configuration of these structures should be recorded before any alterations occur. The aviary does not contribute greatly to the heritage significance of this group and could be demolished after recording.
- The original (and in some instances, current) use of these structures contributes to their heritage significance, as it provides evidence of self sufficiency on the site. As such, adaptive reuse is not recommended. However, given the ad-hoc nature of the development of these buildings, they could accommodate alterations and additions without having a major impact upon their heritage significance.
- The existing landscaped setting of these structures should be retained, as it relates to their current and past use.

PROPOSED WORKS

• This complex of buildings and adjoining landscape elements, including garden beds and orchard will be demolished for the construction of a Forensic Mental Health building accommodating Forensic & Secure Rehabilitation units with large fenced yard.

COMMENT ON IMPACT AND RECOMMENDATIONS

These buildings and landscape elements have HIGH significance as part of the complex of buildings on the Bloomfield Hospital site. An alternative to their demolition would be preferable. However, as the proposed development involves their demolition to accommodate a new Forensic Mental Health facility in close proximity to existing facilities, then they should be recording including photographic and video recording of the structures and surrounding landscape.

The existing landscaped setting of these structures will be lost, as these structures are proposed to be demolished, and a new Forensic Mental Health facility constructed in this location.

CANOBOLAS CLINIC - (Building 56)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, Canobolas Clinic (Building 56) has NEUTRAL significance.

Individually, Canobolas Clinic (Building 56) has NEUTRAL significance.

CONSERVATION POLICIES

- Canobolas Clinic (Building 56) is an unremarkable early 1990s building and with regard to its limited heritage significance, conservation is not necessary. If required, this building could be demolished. Alterations and additions could be carried out, as long as they do not impact on the heritage significance of the adjoining landscape or site overall. Detailed consideration of the external colour schemes on these 1990s buildings should be carried out as part of any future works, to reduce any impact on the overall heritage significance of the site.
- The existing setting of Canobolas Clinic (Building 56) should be retained, as this landscaped setting contributes to the building's neutral heritage significance.
- There is no preferred use for Canobolas Clinic (Building 56) though a continuation of its existing use is appropriate as this relates to the overall use of the site. Nonetheless, other low-key uses could be considered such as office, commercial, educational or residential and related uses, such as hotel accommodation.
- The original use of this group of structures should be interpreted, particularly their role in explaining the processes and management of the hospital and its grounds.

PROPOSED WORKS

- (Building 56) is to be reconfigured for use as a Rehabilitation Mental Health facility. A Forensic Mental Health facility accommodating Forensic & Secure Rehabilitation units with large fenced yards will be constructed to the north of (Building 56).
- The proposed reconfiguration does not involve a major change of use.
- No interpretation proposed at this time.

COMMENT ON IMPACT AND RECOMMENDATIONS

Alterations and additions to this building are not inappropriate as long as they do not impact on the heritage significance of the adjoining landscape or site overall. The proposed redevelopment of this building is acceptable in heritage terms.

Detailed consideration of the external colour scheme of Canobolas Clinic (Building 56) should be carried out as part of these works, to reduce any impact on the overall heritage significance of the site.

The proposed works include the construction of a Forensic Mental Health facility to the north of Canobolas Clinic (Building 56). These works will reduce the existing soft landscaping surrounding Canobolas Clinic (Building 56). However the proposed massed planting surrounding the adjoining development will diminish any impact of this loss of landscaped setting.

MOONYA COTTAGE # 8 - (Building 37)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, Moonya Cottage # 8 (Building 37) has LITTLE heritage significance.

Individually, Moonya Cottage # 8 (Building 37) has LITTLE heritage significance.

CONSERVATION POLICIES

- While conservation is preferred, Moonya Cottage #8 could be demolished or altered if required, though recording of any changes is essential. If the building is being retained but upgraded, it would be preferable for any addition to this building to occur on any façade other than the building's front façade.
- The setting of the building does not directly relate to its significance, though retention of soft landscaping to the sides and rear of the dwelling is encouraged.
- The preferred use for this building is its existing residential use.

PROPOSED WORKS

- No works proposed.
- Proposed development of a new building for use a Forensic Mental Healthfacility accommodating Forensic & Secure Rehabilitation units with large fenced yards to the north of Moonya Cottage # 8 (Building 37). Immediately to the west is a new access road from The Crescent towards the new hospital development.
- No change of use proposed.

COMMENT ON IMPACT AND RECOMMENDATIONS

The immediate landscaped setting of Moonya Cottage # 8 (Building 37) is retained, though diminished by the scale and proximity the new building adjacent.

The proposed landscape treatment of the access road immediately west of the cottage will reduce any impact of the road on the dwelling.

MOONYA COTTAGE # 9 - (Building 36)

SIGNIFICANCE

As part of the complex of buildings on the Bloomfield Hospital site, Moonya Cottage # 9 (Building 36) has EXCEPTIONAL heritage significance.

Individually, Moonya Cottage # 9 (Building 36) has MODERATE heritage significance.

CONSERVATION POLICIES

- As a relatively intact Interwar dwelling, identified as being of moderate / exceptional heritage significance, and constructed as a house for the Chief Medical Officer in 1931, Moonya Cottage #9 should be conserved. Future conservation works should focus on opening the infilled rear verandah. All original fabric including internal finishes should be retained.
- Minor alterations to the building are appropriate as long as the original plan form and character of the building is respected, to provide an understanding of the original building. A preferred location for an addition would be towards the rear or eastern elevation. A possible form of extension may be a separate pavilion structure linked to the original house.
- The existing landscaped setting contributes to the significance of the dwelling and should be retained, especially the front fence, palms, tulip tree and ivy arbour.
- The preferred use for this building is its existing residential use.

PROPOSED WORKS

- No works proposed.
- No alterations to the dwelling are proposed, however, a number of the outbuildings to the rear of the dwelling may be demolished though this remains unclear at this stage.
- Proposed development of a large on-grade car park immediately north of Moonya Cottage # 9 (Building 36). Immediately to the east is a new access road from The Crescent towards the new hospital development.
- No change of use proposed.

COMMENT ON IMPACT AND RECOMMENDATIONS

Should the development involve demolition of any of the outbuildings to the rear of Moonya Cottage # 9 (Building 36), these should be photographically recorded.

The immediate landscaped setting of Moonya Cottage # 9 (Building 36) is retained, including the front fence, palms and ivy arbour. The proposed car park to the north will have limited impact upon the landscaped setting as it will be screened by vegetation. The tulip tree at the rear of the dwelling should be protected during any construction of the carpark and new access road.

The treatment of the access road immediately east of the cottage needs to be seriously considered to reduce impact on the dwelling. This road should be screened by vegetation from the cottage.

7. STATUTORY IMPLICATIONS

7.1 NSW ENVIRONMENTAL PLANNING AND ASSESSMENT ACT 1979

The development application for the hospital redevelopment will be assessed and processed under Part 3A of the *NSW Environmental Planning and Assessment Act 1979* (EPA Act). It is a Major Project under State Environmental Planning Policy (Major Projects) 2005 as it falls under *Schedule 1 Group 7 Health and public facilities Subclause 18 Hospitals* as development that has a capital investment value of more than \$15 million. The proposal has a total present value of \$126 million. The Minister for Planning is responsible for determining development under Part 3A.

7.2 CONSIDERATION OF HERITAGE ISSUES

Bloomfield Hospital is listed on the State Heritage Register. Clause 75U (1) of Part 3A of the EPA Act, sets aside the need for certain authorisations for development that has been declared a Major Project that would otherwise be required. These include:

- approvals under Part 4, Section 60 and excavation permits under section 139 of the *NSW Heritage Act 1977*, and
- permits under section 87 or consent under section 90 of the *NSW National Parks and Wildlife Act 1974.* Heritage issues should be included in the environmental assessment process under Part 3A of the EPA Act.

A Conservation Management Plan (CMP) and Statement of Heritage Impact for the Government Architect's Proposal/Development Application have been prepared for the Bloomfield Hospital site.

This Heritage Impact Statement (HIS) for the current Proposal, should be read in conjunction with the CMP. The CMP and HIS will form part of the documentation submitted to the Department of Planning and NSW Heritage Council and should prove adequate to identify the heritage requirements (excluding Aboriginal heritage issues) for the environmental assessment under the Part 3A process.

8. SUMMARY AND RECOMMENDATIONS

8.1 SUMMARY

The proposed redevelopment of the south-western quarter of Bloomfield Hospital will have both positive and negative heritage impacts. A particularly positive aspect is the retention of most of the buildings from the early phases of development and the layout of the site. Many areas of open space are also unaffected by the proposal and thus will be retained. Some of the early and significant ward buildings are proposed for sympathetic adaptive re-use and the new landscape design reinforces the existing significant landscape character.

With the transition between the approved scheme by the Government Architect and the current pinnacle + healthcare proposal, there have been minor changes in the brief. These have included three additional elements: Radiotherapy, Teaching and the Blood Bank. They have been generally accommodated by expanding the General Hospital Building into areas previously identified for expansion. As a result the heritage impact by comparison with the approved scheme is negligible.

There has also been consideration of the negative heritage impacts and the need to mitigate them in many aspects of the schematic design as noted in the previous Heritage Impact Statement. These go some way towards improving the heritage outcomes for the site.

The current proposal does not depart from the bulk and scale identified in the previous scheme and the Heritage Impact Statement. The additions are to the the east and west to accommodate the Radiotherapy and Blood Bank and are an acceptable extension of the length of the building, largely forecast in the anticipated expansion.

The footprint and location of the Acute Mental health building have been improved with respect to the impact on the eastern landscape and the forecourts to the retained Administration and Clinical services buildings.

The elevations to the buildings have substantially improved with respect to their impact on the significance of the site, buildings and landscape. The number of formal elements has been reduced, the cladding types have an increased common horizontal theme and the colour scheme exhibits greater variety and subtlety.

The landscaping meets the requirements and recommendations within the previous Heritage Impact Statement. The additional detail provided for planting, furniture and pavements complements the heritage setting and provides suitable screening.

Proposals for the buildings to be adapted cover the demolition and new works to Administration, Clinical Services and Amaroo. Minor changes are recommended to the proposals to ensure that significance is protected. Works proposed to the Amaroo building are not yet satisfactory as the removal of previous additions recommended in previous studies are again recommended.

8.2 RECOMMENDATIONS

It is recommended that:

Generally

- awareness of the potential heritage impacts of incremental future changes in use and the increased volume of activity on whole Bloomfield Hospital site is important. Careful monitoring by both GWAHS and the NSW Heritage Office will assist to maximise potential positive heritage impacts and avoid or minimise negative heritage impacts. Examples to be noted are a possible bus stop and ambulance station;
- an asset maintenance plan is to be developed for the whole site;
- photographic and video recording of the site as a whole, with particular attention paid to the
 redevelopment precinct and the buildings to be altered prior to redevelopment is to be
 carried out in accordance with the NSW Heritage Council archival recording guidelines. The
 recording should attempt to capture the character, spirit and atmosphere of the place, the
 lives of the patients and staff. Archival records should be compiled with other historic records
 and lodged on site, with the NSW Heritage Office and in Orange Library;
- maintenance and repair works to significant elements are undertaken in accordance with the policies in the Conservation Management Plan;
- on site interpretation strategy, guided by an interpretation plan be prepared to convey the exceptional significance of the place to staff and visitors. This would include the site as a whole, as well as individual elements within it;
- similarly, an oral history program would provide an important record of life in the hospital and support on site interpretation;
- a Masterplan resolving re-use and development issues across the Bloomfield complex, that takes the exceptional heritage values of the place into account, be prepared to inform the further adaptive re-use of the site as a whole.

TB Ward, Building 38

- the male TB Ward has been identified as a significant and rare heritage item in the CMP. Its demolition will have negative heritage impacts on both the item and the site as a whole. Detailed archival recording is to be completed, including photographs, video and measured drawings prior to demolition. This will require careful removal of the temporary boarding and removal of debris from within the building and should include surrounding landscape areas;
- significant original fabric including joinery is salvaged for reuse in other heritage buildings being adapted as part of this redevelopment or stored for future use;
- original painted glass panels are retained and reused within the new hospital development in conjunction with interpretation about the TB Ward building;

Wards 19 (Building 40) and 20 (Building 41) and Amaroo (Building 44)

- detailing of external finishes on both the new and historic buildings and internal finishes and fixtures in the historic buildings will have an impact on the heritage values of the site and individual elements, as could minor alterations to significant buildings. David Scobie, as Heritage Consultant, will advise on the further detailed design, documentation and construction teams is essential;
- the original fabric and finishes are retained including joinery, fireplaces and fittings;
- detailed recording of the existing configuration of the buildings, including measured drawings and photographic recording is carried out before any work is undertaken;
- if internal reconfiguration is proposed in future design development, any new internal subdividing walls are reversible and that evidence of walls proposed to be demolished is retained using nib walls and similar devices;

- building work associated with significant historic buildings is undertaken by qualified and experienced contractors with an understanding of the principles of heritage conservation;
- the NSW Heritage Council's Fire, Access and Services Advisory Panel are asked for advice regarding proposed changes to services or fire safety upgrades within significant buildings, as appropriate;

Nursery, Greenhouse, Potting Shed and Aviary

• detailed recording of the existing buildings and surrounding landscape including measured drawings and photographic recording is carried out before any work is undertaken;

Canobolas Clinic

 reconsideration of the external colour scheme is part these works, to reduce potential impacts;

Moonya Cottage #9 (Building 36)

- if any outbuildings are proposed for demolition they should be included in the archival recording program;
- the tulip tree at the rear of the dwelling is protected during road and carpark construction;
- the new access road is screened by vegetation.

ANNEXURE 1 - E P & A ACT 1979: Consent

SCHEDULE 2 CONDITIONS OF APPROVAL MAJOR PROJECT NO. 06_0111

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 for David Scobie Architects Pty Ltd will provide Heritage advice during the project

(b) Detailed archival 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 will provide the archival records

(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 moveable 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
- Robert Willis will produce an oral history programme in conjunction with David Scobie Architects

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

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

• David Scobie will identify the items for salvage and consult with Designinc on locations for their re-use and interpretation

(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 will identify the items and consult with Designinc on location for their reuse and interpretation

(g) Maintenance and repair work to buildings and structures of heritage significance will be undertaken in accordance with the policies in the Conservation

Management Plan prepared by the Government Architects Office Heritage Section (July 2006).

• David Scobie will identify the building elements and consult with Designinc on appropriate restoration works

(h) A Heritage Architect will be engaged to provide advice in relation to further detailed design and construction involved in the project.

• David Scobie will provide Heritage advice

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

• David Scobie will identify the items and consult with Designinc on location of elements for retention and restoration

(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 will provide archival recording

(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.

• David Scobie will identify the elements and consult with Designinc on location for the appropriate details – refer to current Heritage Impact Statement

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

• David Scobie will liaise with Hansen Yuncken on the selection of appropriate contractors.

(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 will liaise with the Project Consultants and the Panel as appropriate.

ANNEXURE 1 - PROPOSAL DRAWINGS

Architecture

Landscape

pinnacle+healthcare

Appendix D

ENVIRONMENTAL PLANNING & ASSESSMENT ACT 1979

DETERMINATION OF MAJOR PROJECT NO. 06_0111

(FILE NO. 9042283)

ORANGE-BLOOMFIELD HOSPITAL REDEVELOPMENT

CONSTRUCTION OF A 351 (PROPOSED AND RELOCATED) BED FACILITY CONTAINING CLINICAL SERVICES, INPATIENT FACILITIES, AMBULATORY CARE, SERVICE ZONES, CAR PARKING (672 PROPOSED SPACES) AND LANDSCAPING WORKS

I, the Minister for Planning, pursuant to Section 75J of the *Environmental Planning* & *Assessment Act, 1979*, determine Major Project No. 06_0111 referred to in the attached Schedule 1, by **granting approval** subject to the conditions of approval in the attached Schedule 2.

The reasons for the imposition of conditions are:

- (1) To encourage good urban design and a high standard of architecture.
- (2) To adequately mitigate the environmental impact of the development.
- (3) To maintain the amenity of the local area.

Frank Sartor MP Minister for Planning

Sydney,

2006

SCHEDULE 1

PART A — TABLE

Application made by:	NSW Health
	REBOB c/- Bathurst Base Hospital
	Howick Street
	BATHURST NSW 2795
Application made to:	Minister for Planning
Major Project Number:	06_0111
On land comprising:	Lot 206 DP 42900 and Lot 230 DP 720596
	Forest Road, Orange
Local Government Area	Orange City Council
For the carrying out of:	A detailed description of the development approved to is described in Condition A1, Part A, Schedule 2
Capital Investment Value:	Approximately \$141.1 million
Type of development:	Project approval under Part 3A of the EP&A Act
Determination made on:	9 December 2006
Determination:	Project approval is granted subject to the conditions in the attached Schedule 2.
Date of commencement of approval:	This approval commences on the date identified in the formal notification letter accompanying the Determination.
Date approval is liable to lapse:	9 December 2011

PART B — DEFINITIONS

In this approval the following definitions apply:

Act means the Environmental Planning and Assessment Act, 1979 (as amended).

BCA means the Building Code of Australia.

Council means Orange City Council.

Department means the Department of Planning or its successors.

Director General means the Director General of the Department of Planning

Major Project No. 06_0111 means the project described in Condition A1, Part A, Schedule 2 and the accompanying plans and documentation described in Condition A2, Part A, Schedule 2.

Minister means the Minister for Planning.

Project means development that is declared under Section 75B of the Act to be a project to which Part 3A of the Act applies.

Proponent means the person proposing the carry out of development comprising all or any part of the project, and includes persons certified by the Minister to be the proponent.

Regulations means the Environmental Planning and Assessment Regulations, 2000 (as amended).

RTA means the Roads and Traffic Authority.

Subject Site has the same meaning as the land identified in Part A of this schedule.

Department of Planning

SCHEDULE 2

CONDITIONS OF APPROVAL

MAJOR PROJECT NO. 06_0111

PART A – ADMINISTRATIVE CONDITIONS

A1. Development Description

Project approval is granted only to carrying out the development described in detail below:

- (1) The construction of a new two storey/part three storey purpose built general hospital building with a helipad at roof level.
- (2) The construction of an acute mental health facility building.
- (3) The construction of a secure mental health unit building.
- (4) The demolition of existing buildings.
- (5) The provision of landscaped areas and soft landscaping and removal of specific trees.
- (6) The refurbishment of existing buildings.
- (7) The construction of vehicular and pedestrian access, car parking and associated structures.
- (8) The provision of associated utility services.
- (9) Construction of a radiotherapy unit attached to the eastern façade of the general hospital building.
- (10) Subdivision of Lot 206 DP 42900 to excise the development site and allow transfer to the Health Administration Corporation.

A2. Development in Accordance with Plans and Documentation

The development shall be in accordance with the following plans and documentation:

(1) The Environmental Assessment Report dated September 2006 prepared by BBC Consulting Planners Pty Ltd (including accompanying Appendices) and drawings prepared by the Government Architects Office (ref. ORA_DA00-ORADA13) and the Preferred Project Report prepared by NSW Health dated November 2006 including Plan of Subdivision of Lot 206 DP 42900 (Surveyors Reference 2636).

Except for otherwise provided by the Department's conditions of approval as set out in Schedule 2, Part B and the proponent's statement of commitments as set out in Schedule 2, Part C.

A3. Inconsistency Between Documentation

In the event of any inconsistency between conditions of this project approval and the plans and documentation described in condition A2, Part A, Schedule 2 referred to above, the conditions of this project approval prevail.

A4. Lapsing of Approval

Approval of Major Project No. 06_0111 shall lapse 5 years after the determination date in Part A of Schedule 1 unless an application for approval is submitted to carry out a project or development for which project approval has been given.

A5. Prescribed Conditions

The Applicant shall comply with the prescribed conditions of project approval under Clause 75J(4) of the Act.

A6. Determination of Future Applications

The determination of future applications for development is to be generally consistent with the terms of approval of Major Project No. 06_0111 as described in Part A of Schedule 1 and subject to the conditions of approval set out in Parts A, B and C of Schedule 2.

PART B – DEPARTMENT OF PLANNING'S CONDITIONS OF APPROVAL

B1 Operational

- (a) Further project application/s and/or development application/s shall be made for the nominated expansions to the general hospital.
- (b) Elevation plans of the proposed radiotherapy unit shall be submitted to Orange City Council prior to construction works commencing on that element. The plans shall demonstrate that the extension will complement the design and detailing of the general hospital building.

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.
- (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.
- (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 shall be prepared within 12 months of full development of the project prior to further project/development application/s for alternative or additional uses on 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.
- (e) The heritage garden curtilages to the north of building Nos. 40 and 41 shall be retained. The acute mental health building shall not encroach within the formal ward gardens.
- (f) The proponent shall investigate options for the relocation and appropriate reuse of the sunken greenhouse. An investigation report shall be provided to Orange City Council prior to works commencing which affect the building.
- (g) Interpretative signage shall be erected in the vicinity of the Ward 20 and the horticultural buildings.
- (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).
- (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.

B3 Public Recreation

(a) A contribution of \$350,000 shall be made towards improvement of recreation facilities on the Bloomfield site, managed by the Orange Ex-Services Club, in accordance with the prior agreement reached between the proponent, Orange City Council and Orange Ex-Services Club.

- (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.
- (c) The proponent shall undertake liaison with the Orange Ex-Services Club in relation to the golf course dam upgrading and enlargement. Stormwater management for the project shall not adversely impact on the operation of the golf course.

B4 Trade Waste

- (a) A trade waste application shall be made to Orange City Council. The proponent shall comply with Orange City Council's Liquid Trade Waste Policy and the Department of Energy, Utilities and Sustainability's Liquid Trade Waste Management Guidelines.
- (b) The proponent shall obtain a waste activity licence pursuant to the Protection of the Environment Operations Act 1997 for the disposal of hazardous waste.

B5 Traffic Matters

- (a) The proponent shall undertake monitoring of the intersection of Forest Road and Huntley Road within 1 year of full development of the project. Appropriate intersection upgrading shall be undertaken as required. The cost of these works to the proponent shall be proportionate to the level of use generated by the proposal and shall be determined by Orange City Council in consultation with the proponent.
- (b) The Huntley Road access shall be closed to all traffic prior to the occupation of the project. All work shall be at full cost to the proponent.
- (c) The north-south pedestrian crossing through the ambulance entry shall be deleted.
- (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.
- (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 to the proponent.
- (f) Landscaping at internal roads intersections, curves and pedestrian facilities shall not obstruct sight lines.
- (g) The proponent shall liaise with the Roads and Traffic Authority on the preferred route for emergency vehicles through the City and signposting on classified roads. The provision of signage on classified roads shall be at full cost to the proponent.

Note:

Sewer augmentation charges are not applicable to the project. Sixteen (16) ET's / beds have been transferred from the existing Orange Base Hospital site in Dalton Street to the development site. The transfer of ET's / beds will accommodate future extension and/or adaptive reuse of existing buildings on the development site. One (1) ET will be retained at the existing Orange Base Hospital site.

PART C – PROPONENT'S STATEMENT OF COMMITMENTS

C1 General

- (a) The development will be undertaken generally in accordance with the Environmental Assessment Report dated September 2006 prepared by BBC Consulting Planners Pty Ltd (including accompanying Appendices) and drawings prepared by the Government Architects Office (ref. ORA_DA00-ORADA13) and the Preferred Project Report prepared by NSW Health dated November 2006.
- (b) The proponent will obtain all necessary approvals required by State and Commonwealth legislation in undertaking the project.
- (c) The proponent will liaise with the local community during the development process.
- (d) The proponent will continue to liaise with Orange City Council during the development process.
- (e) The proponent will continue to liaise with the Ex-Servicemen's Club.

C2 Demolition

- (a) Demolition will be undertaken in accordance with the requirements of Australian Standards AS2601 – 2001: The Demolition of Structures which is incorporated into the Occupational Health and Safety Act 2000 administered by WorkCover NSW.
- (b) A Hazardous Building Materials Management Plan will be prepared prior to demolition commencing.
- (c) Measures to control soil erosion during demolition will be introduced in accordance with currently accepted principles, as described in *Managing Urban Stormwater* (EPA NSW) and *Soil Erosion and Sediment Control* (The Institute of Engineers, Australia).

C3 Services

- (a) The proponent will comply with the requirements of the relevant public authorities in regard to the connection to, relocation and/or adjustment of services affected by the construction of the proposed development.
- (b) All redundant plumbing and drainage is to be capped off in accordance with AS/NZ 3500 and NSW Codes of Practice Plumbing and Drainage.
- (c) The design of the stormwater disposal system will be based on the latest edition of AR&R and Bureau of Meteorology ARI statistics, Authority guidelines and AS3500.
- (d) The proponent will continue to liaise with the Ex-Servicemen's Club with reference to works to be carried out to the dam situated within the golf course.

C4 Vegetation

- (a) The proponent will provide landscaping in accordance with drawings prepared by the Government Architects Office (Ref. ORA_DL01-ORA_DL02).
- (b) The proponent will seek to retain as many trees as possible within the site.
- (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.
- (d) Where mature trees are removed, consideration will be given to replacement with mature specimens.
- (e) The Fairy Sparkle Garden currently accommodated at the Orange Base Hospital site will be relocated to the Bloomfield Campus.
- (f) The new access road will be screened by vegetation to minimise its visual impact on the site.

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.
- (b) Detailed archival 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.
- (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 moveable heritage items and be supported by an oral history programme, to convey the heritage significance of the site to users of the site.
- (d) All works which affect the existing built fabric of heritage buildings and structures within the site will be carried out in accordance with the Burra Charter.
- (e) Significant original fabric from buildings and structures to be demolished, including joinery, will be salvaged for reuse in works to other heritage buildings on the site or retained for future reuse.
- (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.
- (g) Maintenance and repair work to buildings and structures of heritage significance will be undertaken in accordance with the policies in the Conservation Management Plan prepared by the Government Architects Office Heritage Section (July 2006).
- (h) A Heritage Architect will be engaged to provide advice in relation to further detailed design and construction involved in the project.

- (i) The original fabric of existing buildings to be refurbished (including joinery, fireplaces and fittings) will be retained where possible.
- (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*.
- (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.
- (I) Building work to heritage buildings will be undertaken by qualified and experienced contractors with an understanding of the principles of heritage conservation.
- (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.

C6 Aboriginal Heritage

- (a) Liaison with the Orange Local Aboriginal Land Council will be maintained to resolve potential issues in relation to the management of Aboriginal cultural heritage that may arise during the during the development process.
- (b) The Orange Local Aboriginal Land Council will be invited to participate in any additional archaeological investigations conducted *prior to development being carried out at the site.*
- (c) An archaeological monitoring and recording program will be undertaken during the works. If any unexpected archaeological relics are discovered during the construction, the work should be stopped and the Heritage Office, Department of Planning should be notified immediately.
- (d) An archaeological test excavation will be undertaken within the moderate and high archaeological potential zones indicated in the Aboriginal Heritage Impact Assessment (attached at Appendix 4) prior to development commencing at the site. A suitably qualified archaeologist will be commissioned to prepare a research design and excavation methodology to guide these excavations.
- (e) If human burials are found during archaeological excavation, or at any time during the development process, excavation work will cease immediately. The NSW Police Service and DEC will be notified and advice sought before recommencement of work on the site.

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.

C8 Construction Management

- (a) *Prior to the commencement of construction*, a Construction Environmental Management Plan will be prepared. This plan will include:
 - Development of a site specific soil erosion and sediment control plan;
 - Details of construction hours;
 - Air quality/dust control procedures;
 - Noise management procedures;
 - Waste Management Plan;
 - Flora and Fauna Protection Plan;
 - Community Safety Plan;
 - Arrangements for pedestrian and vehicular access during construction;
 - Storage and handling of materials procedures;
 - Environmental Training and Awareness;
 - Contact and complaints handling procedures; and
 - Emergency preparedness and response.
- (b) Prior to the commencement of works at the site all asbestos based and other hazardous materials that will be disturbed during refurbishment works will be removed. Removal of asbestos based materials will be undertaken in accordance with the regulations and requirements of the NSW Government and the WorkSafe Australia Asbestos Code of Practice and Guidance Notes.
- (c) Prior to the commencement of works to the Canobolas Clinic further investigation to determine the extent of contamination in the vicinity of this building will be carried out. Appropriate measures to remediate the site will be undertaken as required.
- (d) Measures to control soil erosion during construction will be introduced in accordance with currently accepted principles, as described in *Managing Urban Stormwater* (EPA NSW) and *Soil Erosion and Sediment Control* (The Institute of Engineers, Australia).
- (e) Access to existing facilities within the site, including the Riverside Centre and recreational facilities leased by the Ex-Servicemen's Club will be maintained during construction.

C9 Ecological Sustainable Development

- (a) The proponent is committed to the principles of sustainability as defined in the Environmental Planning and Assessment Act 1979. The construction and operation of the hospital will be undertaken in accordance with the Premier's Memorandum No. 2003-2 High Environmental Performance for Buildings and the requirements of the Environmental Performance Guide for Buildings (EPGB).
- (b) The engineering services and building passive design will complement each other in design and operation to jointly achieve the functional outcomes for the building, including providing an energy-efficient, healthy, thermally comfortable and acoustically acceptable indoor environment.

- (c) Water conservation and water cycle management will be considered in the design (e.g. rainwater reuse, stormwater management, water recycling).
- (d) Only environmentally sound materials (with minimal impact on the environment, minimised use of non-renewable resources, non-hazardous substances, minimised impact on indoor air quality and high recycled/recyclable content) will be used wherever possible.

C10 Operation

- (a) An operational environmental management plan will be prepared *prior to the opening of the hospital to the public.* The plan will address, but will not be limited to, the following matters:
 - Measures to ensure protection of heritage buildings and assets;
 - Protection of flora and fauna and minimisation of anti-social behaviour;
 - Visitor safety;
 - Site security;
 - Noise management including noise from emergency helicopter movements;
 - Traffic and pedestrian management;
 - Storage of materials;
 - Emergency and evacuation procedures;
 - Fire safety;
 - Waste management and ESD initiatives;
 - Lighting; and
 - Signage.
- (b) Appropriate measures will be introduced to prevent golf balls from entering the Health Campus grounds from the adjoining golf course to the north.
- (c) A Waste Management Plan describing the procedures for the disposal of all waste generated by the Health Campus will be prepared, *prior to occupation*.

C11 Access and Movement

- (a) *Prior to construction*, an Access and Safety Plan will be prepared to maintain access and use of the site (including access to existing facilities not associated with the Health Campus development including recreational facilities) during the redevelopment programme to ensure the safety of existing users of the site.
- (b) The provision of a minimum of 931 parking spaces on the subject land in a manner that is in accordance with *Australian Standard AS2890.1 1993* Car Parking requirements.
- (c) The erection of signs that clearly indicate to the drivers of vehicles, both on and off the subject land, the driveway by which they are to enter or leave the subject land.
- (d) Lighting of the accesses, internal roads, pedestrian area and the median will conform to the appropriate level of Australian Standard AS1158.
- (e) Signposting of the access should conform to Australian Standards AS1742.

- (f) Parking on all internal roads within the site except the short term parking proposed within the Porte Cochere will be banned.
- (g) Prior to occupation, a wayfinding signage plan will be developed for the site.
- (h) A marked pedestrian crossing will be installed south of the bus bay and across the Porte Cochere.
- (i) The construction of a new access to the site off Forest Road:
 - The entry will be controlled by a priority controlled intersection.
 - A left turn deceleration lane for traffic travelling southbound on Forest Road will be provided into the site.
 - A protected right turn bay on Forest Road will be provided for northbound traffic.
 - A protected right turn acceleration lane for traffic turning right out of the access will be provided.