

HEALTHECARE PTY LTD

HURSTVILLE PRIVATE HOSPITAL

ACCESS REVIEW

Morris Goding Accessibility Consulting

FINAL

5th September 2012

TABLE OF CONTENTS

1.	EXE	EXECUTIVE SUMMARY		
2.	INTRODUCTION			
	2.1.	General	6	
	2.2.	Background	6	
	2.3.	Affected Part	6	
	2.4.	Objectives	6	
	2.5.	Statutory Requirements	7	
3.	AFF	8		
	3.1.	Principal Pedestrian Entry – Gloucester Road	8	
	3.2.	Staff Pedestrian Entry – Gloucester Road	9	
	3.3.	Existing Paths of Travel – Ground and Level 1	10	
	3.4.	Existing Passenger Lifts	10	
4.	EMERGENCY EGRESS			
	4.1.	Pearl Street Egress	12	
	4.2.	Emergency Egress Stairs	12	
5.	NEW PATHS OF TRAVEL			
	5.1.	General	13	
	5.2.	Doors	13	
	5.3.	New Passenger Lifts	14	
	5.4.	Bridge Ramp Linkage	14	
	5.5.	Waiting/Reception Areas	15	
	5.6.	Consultant and Treatment Areas		
	5.7.	Staff Room	15	
6.	SANITARY FACILITIES			
	6.1.	Provision of Accessible Toilets	16	
	6.2.	Accessible Toilet Design	16	
	6.3.	Ambulant Toilets	16	
	6.4.	Accessible Showers	17	
	6.5.	Staff Toilet Facilities	17	
7.	CAR	18		
	7.1.	General	18	
8.	MISCELLANEOUS			
	8.1.	Signage	19	
	8.2.	Hearing Augmentation	19	
	8.3.	Lighting	19	

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1. EXECUTIVE SUMMARY

The Access Review Report is a key element in design development of the Hurstville Private Hospital redevelopment, 37 Gloucester Road Hurstville NSW and an appropriate response to the AS1428 series, Building Code of Australia (BCA), and ultimately the Commonwealth Disability Discrimination Act (DDA).

Morris-Goding Accessibility Consulting has prepared the Access Report to provide advice and strategies to maximise reasonable provisions of access for people with disabilities. The development has been reviewed to ensure that ingress and egress, paths of travel, circulation areas, toilets and accessible car parking comply with relevant statutory guidelines.

In general, the development has accessible paths of travel that are continuous throughout. In line with the report recommendations, the proposed development has demonstrated an appropriate degree of accessibility. The Project Application drawings indicate that compliance with statutory requirements, pertaining to site access, common area access, accessible sanitary facilities accessible parking and, can be readily achieved.

The recommendations in this report are associated with detailed design and are achievable. These recommendations should be addressed prior to the construction approval stage.

The main recommendations that have arisen from the access review include:

- (i) Ensure existing Gloucester Rd main entrance and accessible path of travel to new/redeveloped works is compliant with AS1428.1 and DDA Premises Standards (Affected Part).
- (ii) Ensure accessible path of travel from staff accessible car bay (2) to accessible staff entry to building is compliant with AS1428.1.
- (iii) Ensure existing lifts and lift lobbies have suitable external/internal components (control panels, audio/visual indicators, handrails and light levels) to meet AS1735.12, BCA E3.6 and DDA Premises Standards (Affected Part).
- (iv) Provide increased turning areas (1540mm min. width x 2070mm min. length) within 2m of all new corridor ends to allow a person who is a wheelchair user to perform 180 degree turn, compliant with AS1428.1.
- (v) Ensure new passenger lift car has internal dimensions of at least 1400mm width x 1700mm length, compliant with Hurstville DCP and AS1428.2.
- (vi) Increase the size of the new accessible toilets on each level to ensure compliance with AS1428.1:2009.
- (vii) Provide at least 1 unisex ambulant cubicle for people with disabilities at each toilet bank, (adjacent to new accessible toilets) to satisfy the DDA Premises Standards and BCA Part F2.4.
- (viii) Provide unisex combined accessible toilet/shower adjacent to male and female change facilities in Day Surgery, compliant with AS1428.1.

- (ix) Ensure at least 1% accessible car parking for Class 5 development, 1% for inpatients and 2% Out-patients for Class 9a development within the building.
- Provide alternative solution report to address the BCA performance requirements for reduced height clearances and column in shared zone for the 2 x accessible car parking spaces (upper basement) and partial enclosure of the shared zone for accessible staff car bay 2 (Gloucester Rd car park) due to the existing site limitations.

2. INTRODUCTION

2.1. General

Healthecare Pty Ltd has engaged Morris Goding Accessibility Consulting, to provide an accessibility review of the Hurstville Private Hospital redevelopment, located at 37 Gloucester Road Hurstville NSW.

The requirements of the investigation are to:

- > Review supplied drawings of the proposed development,
- > Provide a report that will analyse the design of the development, and
- Recommend actions that will ensure the design complies with the Federal Disability Discrimination Act (DDA) and Australian Standards 1428 series.

2.2. Background

The proposal includes redevelopment within the existing Hurstville Private Hospital building and new building works.

The redevelopment is predominantly internal and located at ground level of building with partial redevelopment within basement car parks and on level 1. The existing south-east corner of the site (from upper basement carpark level) will be developed to become an extension to the existing building footprint. This extension will include: Upper basement level: additional car bays, storage and vehicle circulation; Ground level: new car park drive-way extension, new operating rooms and lift facilities; Level 1: new consultant rooms.

An additional three new levels (2-4) are proposed over the building extension and will include Level 2: Surgical Suite, ward with approx. 33 beds with associated staff and patient facilities Level 3; Birthing Suite, ward with approx. 17 beds with associated staff and patient facilities; Maternity Suite, ward with approx. 26 beds with associated staff and patient facilities.

2.3. Affected Part

This project involves alterations and additions to the existing hospital; therefore the affected part of the building is required to be upgraded to be compliant with AS1428.1:2009 in accordance with DDA 2010 Clause 2.1 (5).

The affected part is defined as:

- ➤ The principal pedestrian entrance/s of an existing building that contains a new part, and
- Any part of an existing building, that contains a new part, that is necessary to provide a continuous accessible path of travel from the entrance/s to the new part.

2.4. Objectives

The Report attempts to deliver equality, independence and functionality to people with disabilities inclusive of:

(i) People with sensory impairment

- (ii) People with mobility impairment
- (iii) People with dexterity impairment

The Report attempts to eliminate, as far as possible, discrimination against persons on the ground of disability.

2.5. Statutory Requirements

The statutory & regulatory guidelines to be encompassed in the Access Review include:

- ➤ AS 1428.1:2009 Design for Access and Mobility
- ➤ AS 1428.4.1:2009 Tactile Ground Surface Indicators
- ➤ AS 1428.2:1992 Enhanced Access (where appropriate)
- ➤ AS 1735 Part 12:1999 Lift facilities for people with disabilities
- ➤ DDA Access to Premises Building Standards 2010 (DDA Access Code)
- > BCA Building Code of Australia
- ➤ Federal Disability Discrimination Act (DDA)
- ➤ Australian Health Facilities Guidelines (AHFG)
- ➤ Hurstville City Council DCP No. 2 (2007)

3. AFFECTED PART

3.1. Principal Pedestrian Entry – Gloucester Road

The existing main entrance to the building is at ground level and will be retained. External access from the Gloucester Road pedestrian footpath is via an existing curved ramped pathway. The pathway follows line of the vehicular drive-way and is separated by kerbing.

This external access way will provide functional access for some people with disabilities however is not compliant with AS1428.1:2009. The access way is outside of the Affected Part definition under the DDA Premises Standards and therefore is not required to be upgraded in compliance with AS1428.1:2009. It does however remain a potential issue under the DDA legislation (complaints based).

The access way leads to a wide circulation area near an on-grade vehicle drop-off area. No TGSI's are currently installed at the transition from this on-grade area to vehicular roadway to warn people with vision impairment of the potential hazard.

From this area there is a ramped approach (approx. 1:16 gradient) up to main entry doors. Currently there are no handrails to assist people with ambulant disabilities. There is cross-fall across the ramp and in front of the doors that appears to exceed 1:33, which may impede access for people using wheelchairs when turning at doors.

The existing main entry doors are fully glazed, frameless automatic dual sliding doors. They have a clear width opening greater than 850mm, compliant with AS1428.1. Currently there is no contrasting area (eg. frame) between the glazed doorway and surrounding glazed panels to assist in locating the door opening. The visual indicators (striped detail) applied across the glazed doors and surrounding glazed panels are non-compliant with AS1428.1:2009.

The doors lead to the existing entry lobby, which is being retained. It connects to the existing northern passenger lift and new central lifts within the building that will provide continuous access to the new and redevelopment works on various levels as required by the DDA Premises Standards.

- (i) Ensure Gloucester Rd main entrance is upgraded to comply with AS1428.1:2009 in accordance with the DDA Premises Standards (Affected Part). This requires:
 - Provide handrail and kerbrail on one side of ramped approach to main doors (in front of glazed building line) compliant with AS1428.1.
 - Ensure minimal cross fall across ramp and provide a level landing area (no steeper than 1:40) outside main entry doors (and existing hinged ambulance doors), compliant with AS1428.1 to create safe turning area.
 - o Provide band of warning TGSI's (600-800mm depth) between on-grade circulation area and the vehicle drop-off area (300mm set-back) from roadway, compliant with AS1428.4.1.
 - o Provide 50mm min. width solid contrasting line with 30% luminance contrast to background surface around main entry doors (top and both sides), compliant with AS1428.1.

- O Provide 75mm min. width, solid, non-transparent line with 30% luminance contrast to background surface across fully glazed main entry doors and adjacent side panels (including glazed ambulance doors). The lower edge of line to be installed between 900mm and 1000mm above the FFL, compliant with AS1428.1.
- (ii) Consideration to upgrade existing external curved access way leading to the building from the Gloucester Road site boundary. This would require 1500mm min. clear width for curved ramp, gradient no steeper than 1:14 for max. 9m length, suitable level landings and handrail with kerbrail on both sides, compliant with AS1428.1 (advisory).

3.2. Staff Pedestrian Entry – Gloucester Road

There is an existing alternate entrance to building at ground level from Gloucester Road. From the information provided this will be retained for staff use.

External access from the pedestrian footpath is via curved stairs (2 x steps), which are non-compliant with AS1428.1 (ie. no handrails or contrast step nosing) and a potential safety hazard due to the sloped base landing (approx. 1:10 gradient).

There is an alternative pathway from the end of vehicular drive-way, which provides continuous access to the entry. It has suitable clear width and gradients that do not exceed 1:20, suitable for people using wheelchairs.

This alternative entry is outside of the Affected Part definition under the DDA Premises Standards (as it is not the principal pedestrian entry). However as a new staff accessible car bay (2) is provided as part of the redevelopment, an accessible path of travel from the accessible car bay to the building, compliant with AS1428.1:2009 is required. The external existing stair remains a potential issue under the DDA legislation (complaints based).

The existing main entry doors are fully glazed, frameless automatic dual sliding doors. They have a clear width opening greater than 850mm, compliant with AS1428.1. Currently there is no contrasting area (eg. frame) between the glazed doorway and surrounding glazed panels to assist in locating the door opening. The visual indicators (striped detail) applied across the glazed doors and surrounding glazed panels are non-compliant with AS1428.1:2009. The location of the existing intercom is not accessible to people using wheelchairs.

The doors lead to the entry lobby of a redeveloped SCA Consultant area. This connects to the existing northern passenger lift and new central lifts within the building that will provide continuous access to new and redevelopment works on various levels as required by the DDA Premises Standards.

- (i) Ensure an accessible path of travel from new staff accessible car bay to alternate accessible staff entry, compliant with AS1428.1 and DDA Premises Standards. This requires:
 - Level access from accessible car bay to the existing walkway leading to building entry, compliant with AS1428.1.
 - o Provide 50mm min. width solid contrasting line with 30% luminance contrast to background surface around main entry doors (top and both sides for clear opening width), compliant with AS1428.1.

- O Provide 75mm min. width, solid, non-transparent line with 30% luminance contrast to background surface across fully glazed main entry doors and adjacent side panels (including glazed ambulance doors). The lower edge of line to be installed between 900mm and 1000mm above the FFL, compliant with AS1428.1.
- o Ensure the operative component of any intercom/controls is installed between 900-1250mm above FFL and 500mm min. from internal corner, compliant with AS1428.1.
- (ii) Consideration to upgrade the existing stair to the alternate staff entry to comply with AS1428.1 for improved safety and access in accordance with the DDA (advisory). This would require:
 - Provide handrails on both sides of entry stairs from the pedestrian footpath, compliant with AS1428.1.
 - o Provide a level landing area (no steeper than 1:40) at base of stairs, compliant with AS1428.1 to create safe area when alighting last step.

3.3. Existing Paths of Travel – Ground and Level 1

The drawings provided indicate that the main corridors from Gloucester Road entry lobby to existing northern lift, new central lifts and new works at the ground level of the building have suitable clear widths of approx. 2000mm compliant with AS1428.1. These widths will allow people who are using wheelchairs the space to perform a 180 degree turn, and enable 2 people who are wheelchair users to pass each other, compliant with DDA Premises Standards and AS1428.1.

Some existing dual hinged doors on main corridors appear to have an active leaf of less than 850mm clear width opening. These will require review for compliance with AS1428.1 unless they are smoke doors and permanently fixed open (magnetic locks).

Recommendations:

- (i) Ensure paths of travel from the principal pedestrian entry to the redeveloped and new build areas (new works) are accessible for people with a disability, in accordance with DDA Premises Standards Affected Part. These paths of travel are required to be compliant with AS1428.1-2009.
- (ii) Ensure existing double doors on main corridors leading to new works each have 850mm min. clear width opening or are permanently fixed open (mag locks) to enable a suitable width path of travel, compliant with AS1428.1.

3.4. Existing Passenger Lifts

The drawings indicate that the two existing passenger lifts (northern and southern) within the building will be retained.

The northern lift will continue to serve the ground and level 1. It provides the accessible path of travel (Affected Part) from ground level to new works on level 1 of building, as required by the DDA Premises Standards. It is suitably located with direct access from the main corridor to be accessible by people with a disability.

The northern lift lobbies will allow for sufficient manoeuvrability for wheelchair users outside the lift car doors, compliant with AS1428.1. This passenger lift has

approx. internal dimensions of 1750mm width x 2400mm length that are in accordance with DDA Premises Standards, BCA E3.6 and AS1735.12.

From the information provided, the southern lift will be retained for staff use only and will serve the lower and upper basement car parks and level 1. It is noted that an alternative accessible path of travel from Gloucester Road main entry (ground level) to the new works on basement car park levels (lower and upper) will be provided by one of the new centrally located passenger lifts and new corridor linkage to satisfy the DDA Premises Standards (Affected Part) requirement.

The southern lift is suitably located on the levels it serves from the main corridor to be accessible by staff members with a disability. The lift lobbies allow for sufficient area for manoeuvrability for wheelchair users outside the lift car doors, compliant with AS1428.1.

This passenger lift has internal dimensions of 1330mm width x 2100mm length in AS1735.12. Whilst less than the required 1400mm width x 1600mm min. length required by the DDA Premises Standards, BCA E3.6, as the lift is existing and travels more than 12m it is permitted under the Part 4.4 Lift Concession.

Review is required of the existing external and internal lift controls/features for the northern and southern lifts to ensure compliance with AS1735.12 and DDA Premises Standards. Currently the external controls for both lifts are located less than 500mm from internal corners, which is not accessible for wheelchair users. The internal lift features also need to be upgraded as the lift control panels do not include any raised tactile and Braille information as required by AS1735.12.

- (i) Ensure the existing northern and southern lift lobbies have suitable call buttons and arrival signals in accordance with DDA Premises Standards (Affected Part), BCA Part E3.6 and AS1735.12.
- (ii) Ensure all existing lift cars have suitable internal components (control panels, audio/visual indicators, handrails and light levels) that meet the requirements of AS1735.12, BCA E3.6 and the DDA Premises Standards (Affected Part).

4. EMERGENCY EGRESS

4.1. Pearl Street Egress

From the information provided the existing Pearl Street entrance to the building at ground level will be retained however will be used solely for emergency egress.

It is unclear if any modifications outside the egress door (within site boundary) are proposed. Currently, there is a ramp and tapered single step at the edge of the pedestrian footpath that is non-compliant with AS1428.1:2009 and a potential safety hazard.

This egress route is outside of the Affected Part definition under the DDA Premises Standards and is not required to be upgraded in compliance with AS1428.1:2009. However if current step/ramp arrangements are retained the step will remain a potential trip hazard given its location at the edge of the public pedestrian footpath.

Recommendation:

(i) Consideration to improve external access way from the building to the Pearl Street site boundary by removing the single step to achieve a level transition to the pedestrian footpath. Alternatively, if the step is retained, contrasting step nosing (50-75mm wide with 30% min. luminance contrast) should be applied along the full width of the step, compliant with AS1428.1 (advisory).

4.2. Emergency Egress Stairs

There are numerous existing internal egress stairs within the building that will be retained from the upper levels and basement car parks. There are two new egress stairs from the new levels 2 - 4 that will connect to the existing egress stairs within the building. The doors to these new stairs appear to have greater than 850mm clear width, compliant with AS1428.1.

The main public entry and alternate entry/exit doors on ground level are the most appropriate means of wheelchair egress from the building in the event of an emergency situation.

- (i) Consideration for the emergency alarm systems installed within the building to have provisions for visual and audio warnings and signals to assist people with sensory disabilities (advisory).
- (ii) Consideration to provide an emergency management plan, which would include the use of a fire warden, to identify strategies to facilitate emergency egress for people with disabilities (advisory).

5. NEW PATHS OF TRAVEL

5.1. General

In general, there are continuous accessible paths of travel to new and redeveloped areas at ground, upper and lower building levels via the new passenger lift facilities in accordance with the DDA Premises Standards.

The main paths of travel leading to/from the new passenger lifts, Operating Theatres, Day Surgery and Consultant areas (ground floor) and the public/interdepartmental corridors (levels 2, 3 and 4) have widths of greater than 2000mm compliant with AS1428.1. This is suitable for two wheelchair users to pass each other when travelling in the opposite direction and for the transportation of patients in beds compliant with DDA Premises Standards, AS1428.1 and AHFG.

There are some corridors within the new Day Surgery Area (ground floor) that appear to have widths of less than 1500mm. This requires review to ensure suitable turning and passing areas for wheelchairs as required by the DDA Premises Standards and AS1428.1.

Recommendations:

- (i) Provide increased turning areas (1540mm min. width x 2070mm min. length) within 2m of all new corridor ends (eg. Day Surgery: outside OT lounge, Open courtyard, ground floor) to allow a person who is a wheelchair user to perform a 180 degree turn, compliant with AS1428.1.
- (ii) Ensure all paths of travel (eg. between fixtures and large furniture items) are 1200mm min. width, compliant with Hurstville DCP, AS1428.2 and AHFG.
- (iii) Ensure handrails are provided along at least one side of every passageway or corridor that is used by patients. Where practical the handrails shall be continuous for their full length, compliant with BCA section D2.17.

5.2. Doors

In general, the single and double swing doors in new work and redeveloped areas have at least one door leaf with 850mm clear width opening and appropriate door circulation clearance, compliant with AS1428.1.

There are some double doors (eg. near Lift lobby, Stage 2 Recovery at ground level) that have less than 850mm clear width opening which requires review for compliance with AS1428.1.

The entry doors to in-patient wards are dual hinged doors (cat and kitten), which provide 850mm clear width (active leaf) of approx. 1350mm combined clear width opening to satisfy AS1428.1, BCA Part D1.6 and AFGH.

In general, most doors have circulation areas suitable for people using wheelchairs and where required for the transporting of patients in beds.

Recommendations:

(i) Ensure all double doors have 850mm clear width opening each in accordance with AS1428.1 (unless smoke doors, permanently fixed open on magnetic locks).

(ii) Ensure all new doors have an active leaf of 850mm clear width opening and suitable door circulation space, compliant with AS1428.1.

5.3. New Passenger Lifts

The drawings indicate three new passenger lifts (passenger, bed and orthopaedic) which are centrally located within the building.

The passenger lift has a two sided lift car to connect the basement car park levels up to ground and level 1. It provides the accessible path of travel from the lower basement car parks to the hospital as required by the DDA Premises Standards. It is suitably located adjacent to main corridors to be accessible by people with a disability.

This passenger lift shaft has internal dimensions of 2250mm width x 2450mm length, which can accommodate a lift car with suitable dimensions in accordance with DDA Premises Standards, BCA E3.6 and AS1735.12.

The bed and orthopaedic lifts connect the ground level up to level 4 and provides the accessible path of travel from the main entry to facilities on these levels as required by the DDA Premises Standards. It is suitably located adjacent to the main corridor to be accessible by people with a disability.

These lift shafts have internal dimensions of 2250mm width x 3200mm length and 2950mm width x 3200mm length which can accommodate lift cars with suitable dimensions in accordance with DDA Premises Standards, BCA E3.6, AS1735.12 and Hurstville DCP.

The lift lobbies for the new lifts on all levels will allow for sufficient manoeuvrability for wheelchair users outside the lift car doors, compliant with AS1428.1.

Recommendations:

- (i) Ensure new passenger lift car has internal dimensions of at least 1400mm width x 1700mm length, compliant with Hurstville DCP and AS1428.2.
- (ii) Ensure all lifts have suitable external and internal components (control panels, audio/visual indicators, handrails and light levels) to comply with AS1735.12, DDA Premises Standards and BCA E3.6.
- (iii) Consideration for increased circulation area beside the passenger lift at ground level lift lobby to allow for safe waiting area outside manoeuvring area for bed and orthopaedic lifts (advisory).

5.4. Bridge Ramp Linkage

A covered bridge linkage is proposed to connect the northern and southern building areas at level 1. This significantly improves existing conditions as there is currently no direct access between these areas, with access only provided via ground floor.

There is a continuous path of travel from the main entry doors to the bridge linkage via the passenger lifts compliant with AS1428.1. The ramp has a clear width of approx. 1640mm which is appropriate circulation area for a person using a wheelchair to pass a person walking, compliant with AS1428.1. The corridor/landing areas on either side are at least 1500mm length to enable a person using a wheelchair enough space to make a 90 degree turn, compliant with AS1428.1. At this stage there are no RL's to indicate the gradient of the ramp.

Recommendation:

(i) Ensure bridge linkage has a gradient no steeper than 1:20 to be classified as a walkway under AS1428.1.

5.5. Waiting/Reception Areas

The new and redeveloped reception/staff base areas on ground level and levels 2 -4 have overall circulation areas that will allow easy manoeuvrability for people who are using wheelchairs or mobility aids.

These areas each include a reception desk with suitable circulation area on public side to allow a person who is a wheelchair user to perform 180 degree turn, compliant with AS1428.1 and DDA Premises Standards.

Recommendation:

(i) Consideration for all reception desks to include an accessible counter section that has a lower counter height of 870mm, with appropriate under bench clearances, compliant with AS1428.2 fig 25 (advisory).

5.6. Consultant and Treatment Areas

There are new and redeveloped consulting areas at ground and level 1. There is a continuous path of travel from main entry doors to these areas (currently shown as open plan space) via the main corridors and passenger lifts compliant with AS1428.1.

There are numerous treatment areas eg. Day Surgery, Pathology, Radiology on ground level and various enclosed offices on levels 2, 3 and 4 to support the In-Patient Ward Units. There is a continuous path of travel from the main entry doors to these areas via the main corridors and passenger lifts suitable for wheelchair users.

Generally, the available circulation area within Consulting and Treatment areas is suitable for people using wheelchairs, compliant with AS1428.1.

Recommendations:

- (i) Ensure all paths of travel in consulting and office areas provide 1200mm min. clear width, compliant with Hurstville DCP and AHFG with at least 1540mm x 2070mm turning area within 2m of corridor ends, compliant with AS1428.1.
- (ii) Ensure all enclosed offices doors provide 850mm min. clear width (920mm door leaf) and appropriate door circulation areas, compliant with AS1428.1.

5.7. Staff Room

There is a redeveloped Hospital Staff Room and Staff Base located at level 1 in northern side of the existing building. Both areas are connected by continuous accessible paths of travel from the main entry doors and alternate staff entry by the lift facilities and bridge link within the building. Review is required of some doorways to ensure circulation space compliant with AS1428.1. See Doorways 5.2.

Generally, the circulation area within the Staff Rooms include suitable clear space to allow a person who is a wheelchair user to perform 180 degree turns, compliant with AS1428.1.

6. SANITARY FACILITIES

6.1. Provision of Accessible Toilets

There are 7 new accessible toilets proposed within the building as follows:

- Ground level: 1 near existing toilet bank in main corridor; 1 in Day Surgery area
- Level 1: near Bridge Link (redeveloped)
- Level 2: 1 in main corridor to Surgical ward
- Level 3: 1 in main corridor to Maternity ward; 1 in Birthing Suite
- Level 4: 1 in main corridor to Maternity ward;

This satisfies the DDA Premises Standards and BCA Table F2.4 requirement for at least 1 accessible toilet facility to be provided on each storey with new/redeveloped sanitary facilities.

6.2. Accessible Toilet Design

At this stage no internal layouts are provided of the above new/redeveloped accessible toilets. The overall dimensions require some review to ensure suitable internal circulation areas compliant with AS1428.1.

Recommendations:

- (i) Increase the size of accessible toilets to ensure 1900mm min. width x 2300mm min. length clear circulation area around WC pan. The wash basin can intrude into this circulation space by 100mm maximum, compliant with AS1428.1 fig 43. Generally overall dimensions of 2400mm W x 2400mm L or 2000mm W x 2800mm L will satisfy these requirements.
- (ii) Ensure an even number of right and left hand accessible toilet facilities are provided within the building in line with DDA Premises Standards and BCA Part F2.4.

6.3. Ambulant Toilets

There are 4 new standard toilets located adjacent to new accessible toilets as follows:

- Ground level: 1 near existing toilet bank in main corridor; 2 in Day Surgery area
- Level 1: near bridge Link

It is assumed that these are unisex facilities.

- (i) Provide at least 1 unisex ambulant cubicle for people with disabilities at each toilet bank, (adjacent to new accessible toilets) to satisfy the DDA Premises Standards and BCA Part F2.4.
- (ii) Ensure ambulant cubicles are designed in compliance with AS1428.1:2009 fig 53 ie. cubicle to have 900mm 920mm clear width with WC pan centred and 900mm x 900mm clear area in front of (standard) WC pan and clear of door swing.

6.4. Accessible Showers

There are new and redeveloped male/female change facilities (including toilet, shower and locker facilities) provided within Day Surgery area at ground level.

It is assumed that these facilities are provided for patient use. Currently there is no combined accessible toilet/shower facility to satisfy the DDA Premises Standards and BCA Part F2.3 and 4(b) requirement for at least 1 accessible shower.

Recommendation:

(i) Provide a unisex combined accessible toilet/shower adjacent to male and female change facilities in Day Surgery, compliant with AS1428.1. The new accessible toilet in this area could be increased in size to accommodate an accessible shower. Generally an overall dimension of 2400mm width x 2700mm length (AS1428.1 fig 50) will satisfy this requirement.

6.5. Staff Toilet Facilities

There is a new single staff toilet proposed within level 2 and 3 In-Patient wards. There is currently no designated accessible staff toilet in these areas however considering that new accessible toilets are provided on each level of the building and the proximity of these facilities to the staff toilets, it is assumed that a staff member with a disability would use these accessible facilities.

7. CAR PARKING

7.1. General

There are existing lower and upper basement car parks within the building. Due to existing building levels all floor to ceiling heights within the basements are less than 2.5m min. height which is non-compliant for accessible car parking under AS2890.6. There is an existing outdoor car parking area to north-west of the site and various car spaces near the Gloucester Road vehicular exit point and staff entrance.

The development proposes to increase the total 70 existing car spaces (including 1 accessible car space) to 94 car spaces (including 3 accessible car spaces) which will improve accessible car parking provisions within the hospital site. This will be achieved by extending the building footprint at Upper basement level, a new northern driveway extension above outdoor car park and some re-configuration of existing car spaces.

Two new accessible car spaces (bays 18, 19) with a central shared zone are proposed on the upper basement level which will satisfy the 2% accessible car parking provision (for more than 50 spaces) requirement of Hurstville DCP and the DDA Premises Standards.

The size of the accessible car spaces and shared zone are compliant with AS2890.6. There is a single blade column centrally located within the shared zone. While larger than the required bollard, the size and location of column at front of the area will maintain functional access. An alternative solution report will address the required circulation areas within shared zone and the height clearances over accessible car parking due to the existing site limitations.

Given the existing conditions, the accessible car spaces are located in reasonable proximity to the enclosed corridor link leading to the new passenger lift (two sided lift car) that connects to the ground and level 1, in accordance with the DDA Premises Standards.

There are 6 dedicated staff car spaces located on the lower basement level. A designated accessible staff car space is provided as car bay 2 (Gloucester Rd car park) which will ensure equitable access for staff members. The size of accessible car space and shared zone are compliant with AS2890.6. While the shared zone is partially enclosed by the nearby building walls it is located near an existing pathway leading to the staff entry into the building. An alternative solution report will address the required circulation areas within the shared zone due to existing site limitations.

At this stage the car parking allocation to the various BCA classifications of the building is unclear.

- (i) Ensure at least 1% accessible car parking for Class 5 development, 1% for inpatients and 2% Out-patients for Class 9a development within the building.
- (ii) Provide an alternative solution report to address the BCA performance requirements for reduced height clearances and column in shared zone for the 2 x accessible car parking spaces (upper basement) and partial enclosure of shared zone for accessible staff car bay 2 (Gloucester Rd car park) due to the existing site limitations.

8. MISCELLANEOUS

8.1. Signage

Recommendations:

- (i) Provide identification signage at sanitary facilities, accessible toilets, accessible car parking and spaces with hearing augmentation systems.
- (ii) Provide directional signage to indicate the path of travel to any accessible entrance/s from non-accessible entrance/s and to unisex accessible toilet/s when not located adjacent to a bank of sanitary facilities.
- (iii) All signage to comply with the DDA Premises Standard, BCA part D3.6 and AS1428.1:2009.

8.2. Hearing Augmentation

Recommendation:

- (i) Where an inbuilt amplification system is installed (other than one used only for emergency warning) a hearing augmentation system to assist people who are deaf or hearing impaired must be installed in accordance with DDA Premises Standards and BCA Part D3.7 to:
 - Meeting rooms;
 - Reception areas where the public is screened from the service provider.

8.3. Lighting

Recommendation:

(i) In general the maintenance illumination levels should be 150 min. lux for paths of travel, corridors and stairs with 250 min. lux min. for reception and counter areas. All lighting levels to comply with AS1680.