



# Heritage Impact Statement

St Vincent's Private Hospital, Sydney:  
Redevelopment

February 2015

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# Executive Summary

The following Heritage Impact Statement was prepared to assess the heritage impacts of the redevelopment of the Private Hospital at St Vincent Hospital.

This Heritage Impact Statement has been prepared in accordance with the NSW Heritage Manual 'Statements of Heritage Impact' (2002) and 'Assessing Heritage Significance' (2001) guidelines. The philosophy and process adopted is that guided by the *Australia ICOMOS Burra Charter* 1999.

The subject proposal has been assessed in relation to the relevant controls and provisions contained within the Sydney Local Environmental Plan 2012 and the Sydney Development Control Plan 2012. The proposal has also been assessed against the NSW Heritage Guidelines.

St Vincent's Hospital has State historical significance as the first non-government hospital in New South Wales, being established by the Sisters of Charity in 1857 to provide free medical attention to the sick, poor and disadvantaged. The Sisters of Charity Health Service partnership is the largest non-government, not-for-profit health care provider in Australia.

St Vincent's Hospital has State associative significance with the five original founding Sisters of Charity in Australia, after which several Hospital buildings have been named: Mother Mary John Cahill, Sister Mary de Sales O'Brien, Sister Mary Baptist De Lacy, Sister Mary Xavier Williams and Sister Mary Lawrence Cator. The Hospital has is associated at the local level with various prominent architects responsible for their design, such as Wardell and Denning for the 1920s presentation of the De Lacy Building.

The site's historical layering demonstrates the hospital's development and expansion from a small hospital to the existing large institutional scale. The De Lacy Building is a landmark building and the 1920s is representative of the Interwar Free Classical style. There are significant vistas around the site to landmark buildings and Green Park, which contributes to the site's aesthetic significance at the local level. The heritage streetscapes in the surrounding area are also of aesthetic value for their street plantings, contributory buildings and significant vistas.

Although the site's social significance has not been assessed, the St Vincent's Campus Darlinghurst is likely to have social significance at a State level for the major role in the lives of generations of people, including local residents, former and current management and staff, and those who have come to be treated from throughout NSW.

The subject proposal for the SVPHS within the precinct is considered to be a well resolved building that has no impact on the heritage item in the vicinity or the conservation areas of the city of Sydney or Woollahra.

# 1 Introduction

## 1.1 BACKGROUND

Urbis has been engaged to prepare the following Heritage Impact Statement for the St Vincent's Private Hospital, Sydney.

## 1.2 SITE LOCATION

St Vincent's Private Hospital Sydney (SVPHS) is located off Oxford Street, Darlinghurst in the local government area of Sydney. The site subject to this Heritage Impact Statement (Figure 1) includes only part of the overall Hospital site, which is bound by Boundary Street to the east and south, Burton Street to the north, Darlinghurst Road to the west, and Oxford Street to the south. This area is bisected by Victoria Street and Barcom Avenue.

FIGURE 1 – SITE LOCATION MAP



[Source: Google Earth 2013]

## 1.3 METHODOLOGY

This Heritage Impact Statement has been prepared in accordance with the NSW Heritage Manual 'Statements of Heritage Impact' (2002) and 'Assessing Heritage Significance' (2001) guidelines. The philosophy and process adopted is that guided by the *Australia ICOMOS Burra Charter* 1999.

The subject proposal has been assessed in relation to the relevant controls and provisions contained within the Sydney Local Environmental Plan 2012 and the Sydney Development Control Plan 2012.



## 1.4 AUTHOR IDENTIFICATION

The following report has been prepared by Stephen Davies (Director). Research was undertaken by Joseph Heng (Consultant) and Artefact, Archaeological Consultants.

Unless otherwise stated, all photographs are the work of Urbis.

## 1.5 DESCRIPTION OF PROPOSED DEVELOPMENT

The project brings together the following two projects:

1. Expansion: the design, construction and commissioning of the new multi-storey east wing; the vertical expansion of the existing SVPHS low-rise wing; and the horizontal expansion of the existing SVPHS high-rise wing
2. Renovation: the full refurbishment of the inpatient levels of the existing SVPHS high-rise wing; various refurbishments within the existing SVPHS low-rise wing, SVPHS high-rise wing and St Vincent's Clinic (SVC); and Building Code of Australia (BCA) and infrastructure upgrades within the existing SVPHS high- and low-rise wings.

The project objectives include:

1. Provide necessary expansion, principally through new beds, operating theatres and doctor's suites
2. Upgrade and update the existing facilities, in particular the bedrooms and ensuites
3. Safety and amenity for patients, visitors and staff are to be maintained throughout construction
4. All clinical and support services are to remain operational throughout construction.

The east wing development site is the area bounded by the SVPHS high-rise wing to the west, the St Vincent's Hospital Sydney (SVPHS) forecourt to the north-west, SVPH's Aikenhead building to the north-east, the Xavier building to the east and the SVPHS low-rise building to the south. The east wing site is approximately 36 metres long and 26 metres wide.

The project scope includes the design and construction of the following four major components:

1. A new 12-level (i.e. levels 2-14; however, there is no level 7 in this new building) east wing on the site of the existing hospital cafeteria and courtyard between the SVHS and SVPHS buildings.
2. A single-level vertical extension to the existing SVPHS low-rise wing at level 8 to accommodate the new Central Sterilising Services Department (CSSD)
3. Horizontal extensions to the existing SVPHS high-rise wing at levels 6-10 to enable compliant bedrooms and ensuites refurbishment within the existing SVPHS and SVC buildings, including the insertion of new hoists to service the new CSSD.

This report was written with reference to the architectural drawings by Hassell.

## 2 Site Description

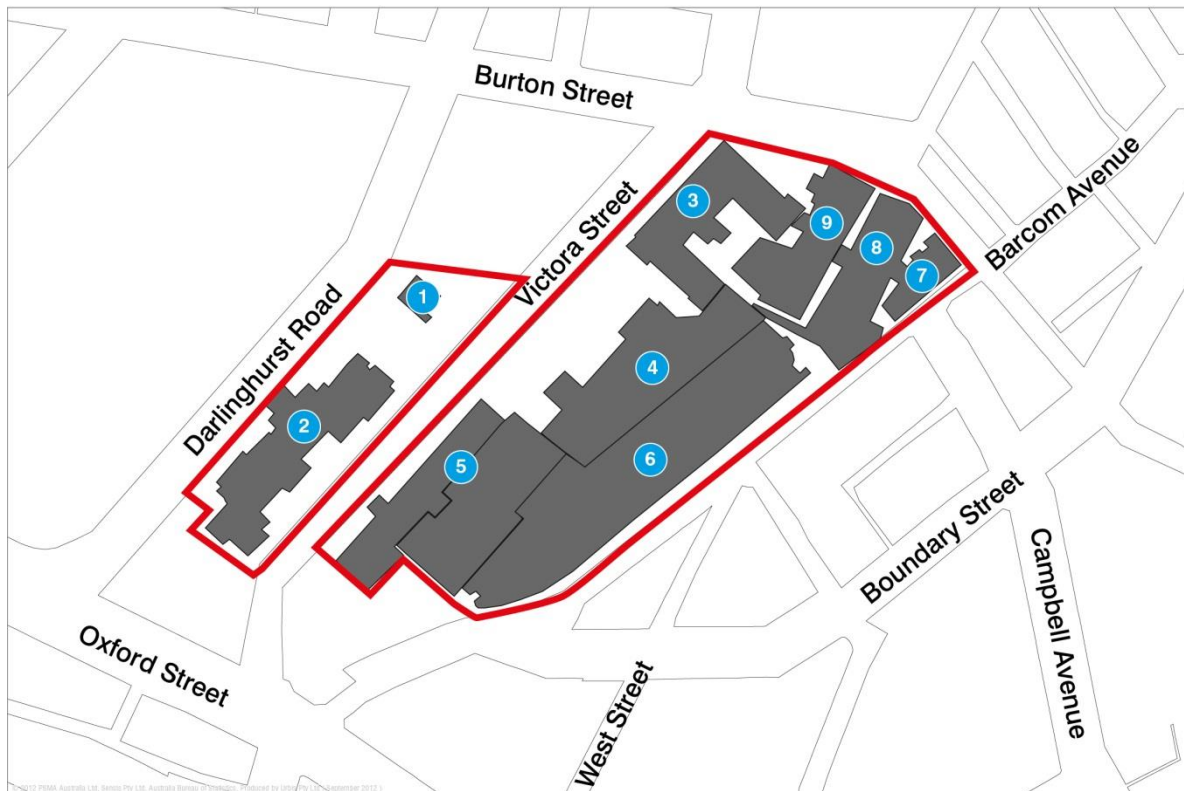
This Section provides a description of the Private Hospital site location and context.

### 2.1 SITE LOCATION AND CONTEXT

The St. Vincent's Private Hospital is located in Victoria Street, Darlinghurst in the local government area of Sydney. The site adjoins the Woollahra local government area to the east of Boundary Street.

The subject site is in the vicinity of one statutory heritage item (De Lacy building). The site is in the vicinity of various heritage items and conservation areas to the north, south, east and west.

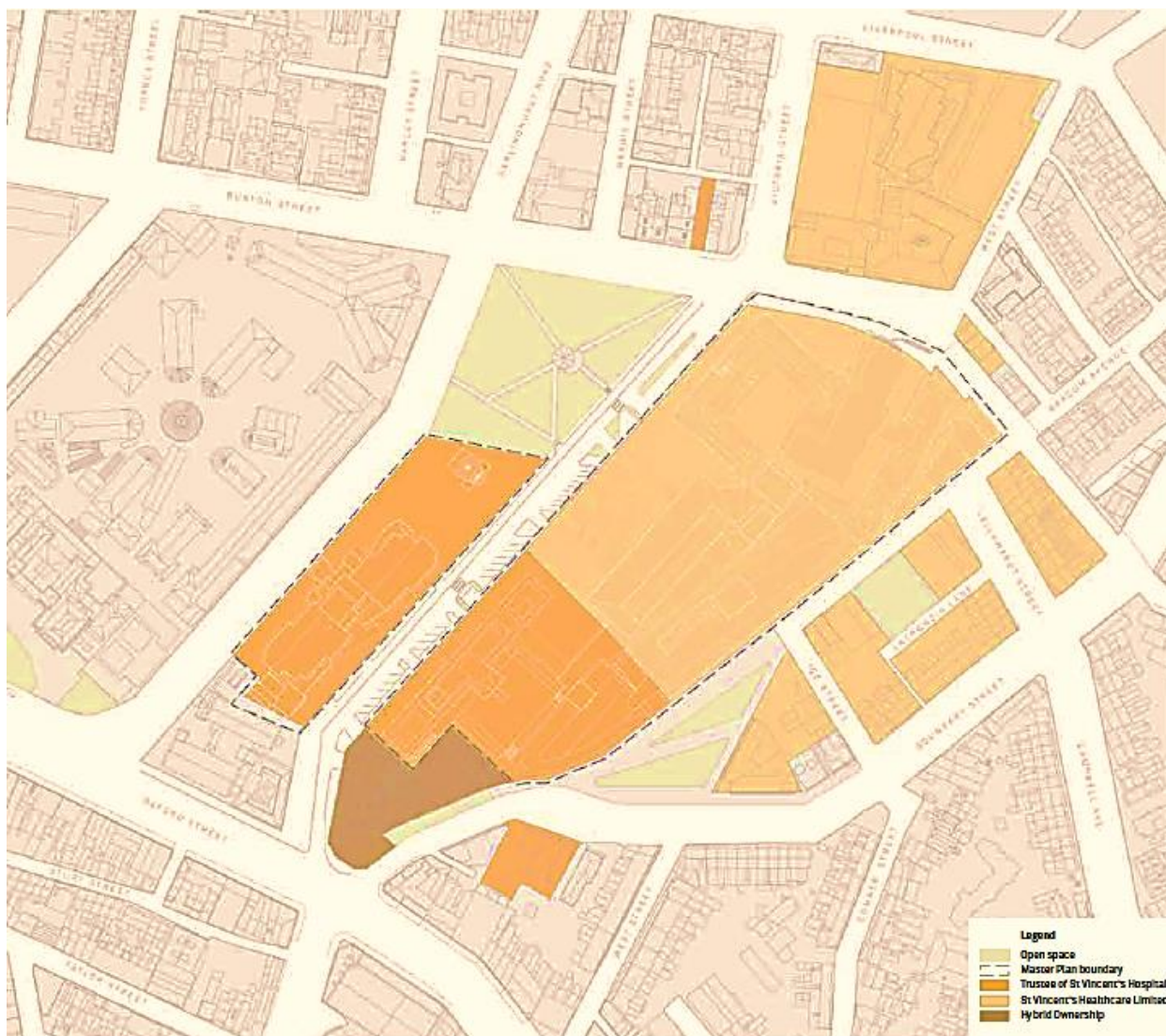
FIGURE 2 – SITE BUILDING MAP FOR ST. VINCENT'S HOSPITAL SHOWING THE LOCATION OF THE PRIVATE HOSPITAL (ITEM 5)



### 2.2 SITE OWNERSHIP

St Vincent's Campus Darlinghurst has different ownership, as illustrated in Figure 3

FIGURE 3 – SITE OWNERSHIP MAP



[Source: Hassell, Master Plan 2012]

## 2.3 THE PRIVATE HOSPITAL

There are 9 buildings (or groups of buildings) on the overall site, as illustrated in Figure 2 (above). A brief description of the private Hospital is provided below. No changes are proposed to overall site other than the Private Hospital.

### St Vincent's Private Hospital (Building 5)

St Vincent's Private Hospital (Figure 4) is a concrete building that was completed in 1976.

There is a landscaped forecourt in front of the building, which includes a paved footpath, lighting, seating, plantings, interpretation and a foundation stone for the former Xavier Nursing Home (Figure 5). There is a small garden directly north of the Private Hospital, which includes a stone capital and commemorative plaque for the planting of a tree (Figure 6). The garden was built to commemorate the centenary of the Private Hospital in 2009.



FIGURE 4 – BUILDING 5, ST VINCENT’S PRIVATE HOSPITAL



FIGURE 5 – GARDEN WEST OF BUILDING 5, LOOKING NORTH

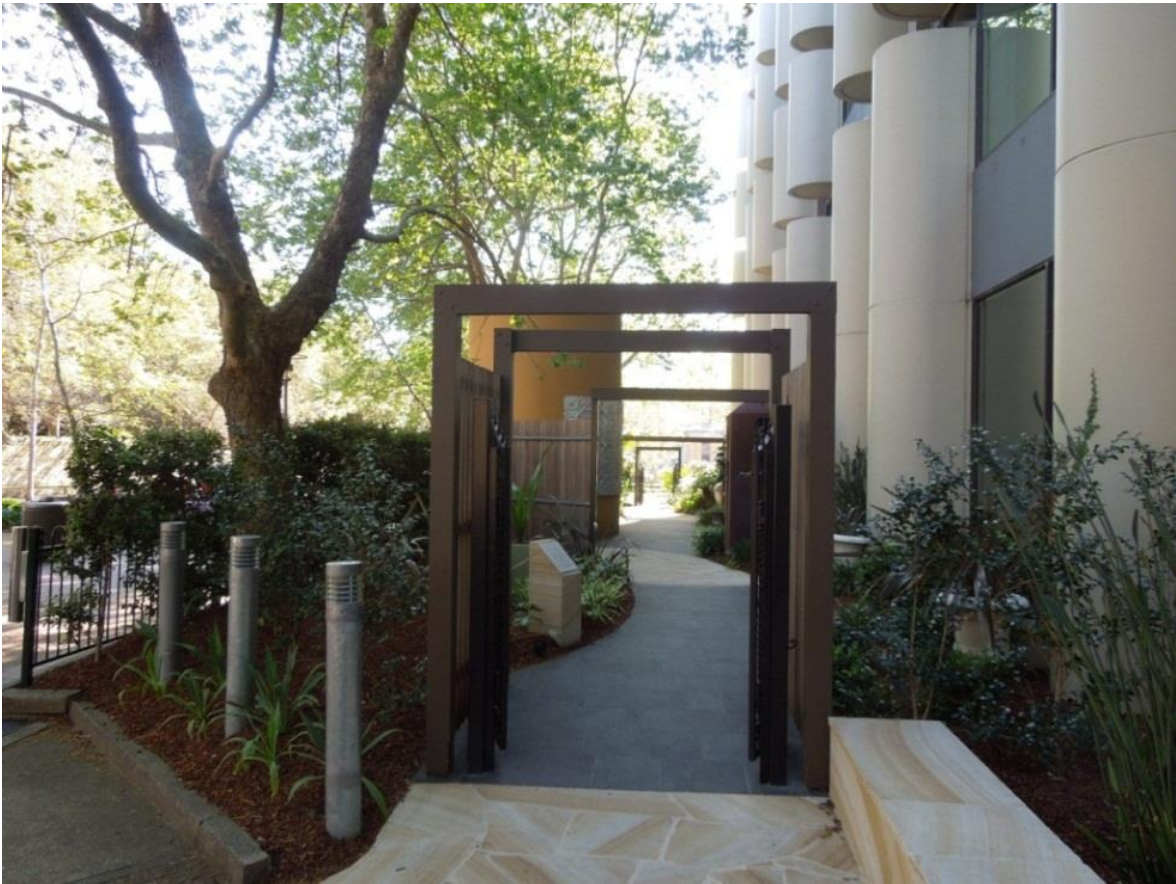




FIGURE 6 – GARDEN NORTH OF THE PRIVATE HOSPITAL WITH CAPITAL AND MEMORIAL PINE TREE



## 3 Historical Overview

This Section provides a historical overview of the site's use and development from Aboriginal occupation to European colonisation and the establishment of St Vincent's Hospital. Relevant National, State and Local historical themes are provided at the end of this Section.

### 3.1 ABORIGINAL HISTORY

Prior to the appropriation of their land by Europeans, Aboriginal people lived in small family or clan groups that were associated with particular territories or places. It seems that territorial boundaries were fairly fluid, although details are not known. The language group spoken across Sydney was known as Darug (Dharruk – alternate spelling). This term was used for the first time in 1900, as before the 1800s language groups or dialects were not discussed in the literature. The Darug language group is thought to have extended south from Port Jackson, north from Botany Bay, and west from Parramatta.<sup>1</sup>

The name Gadigal (Cadigal, Cadi) was used in the earliest historical records of the European settlement in Sydney to describe the Aboriginal band or clan that lived on the southern shore of Port Jackson, from South Head west to the Darling Harbour area. The term Eora is also used as a name for the Aboriginal people south of Port Jackson. The term Eora was likely a word used by the Gadigal to refer to an Aboriginal person, rather than a reference to a clan or band in particular. However, the term Eora became a widespread term for the Aboriginal people on the southern shore of Port Jackson, and is currently used by Gadigal people to refer to the central Sydney area – referred to as 'Eora Country'.<sup>2</sup>

The European colonisation of Australia began with the establishment of a colony at Sydney Cove by Captain Arthur Phillip in January 1788 on land inhabited by the Gadigal people. Many of the early interactions between the British and the Gadigal were amicable. Watkin Tench, Captain of the Marines with the First Fleet, documented his first meeting with the Gadigal people, when he and a landing party visited the south shore of Port Jackson. Tench noted that they were greeted by a dozen Aboriginal people, with the landing party and the Aboriginal people cautiously approaching each other before observing one another and exchanging items. Tench noted that the Aboriginal people in the surrounding area made regular visits to the settlers at Sydney Cove in the first few days after their landing, but their visits very quickly dropped in frequency.<sup>3</sup>

As the colony at Sydney Cove expanded, the land inhabited by the Gadigal people was quickly divided into land grants by the Governor of NSW. The degree of vegetation clearance and development on each land grant remained largely tied to pastoral and other agricultural activities practiced on each grant, as well as growing population pressure from the colony. In the pockets of remnant vegetation or areas not yet built upon, the Gadigal people continued to gather, practice their traditional activities, and live side-by-side with the colonists. Early documentation at Woolloomooloo, located approximately 1 km north of the Hospital site, suggest that in the early 1800s that area remained a place frequently used by the local Aboriginal people for corroborees and other activities.<sup>4</sup>

The subject site became an important part of the story of interaction and co-existence between the local Aboriginal people and the growing settlement of Sydney. It was situated adjacent to Rushcutters Creek, the headwaters of which were located across the northern portion of Surry Hills and Taylor Square. The site covered the gentle to moderate slopes on the western side of Rushcutters Creek, with the top of the watercourse located to the east of the site and the western portion of the site no more than 150 m away from fresh water. This water source was important to the early colony of Sydney, and due to its seemingly reliable nature, was also likely to have been very important to the Gadigal people.

Despite the increase in subdivision and development in the area during the 19<sup>th</sup> century, the site continued to be inhabited by the local Aboriginal people and renowned by the residents of the

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<sup>1</sup> Matthews and Everitt 1900; Attenbrow 2010:31,34

<sup>2</sup> Attenbrow 2010:22,35-36; City of Sydney Council 2012c

<sup>3</sup> Tench 1789:54-58,63-64

<sup>4</sup> Attenbrow 2010:138

surrounding residential subdivisions for its remnant bushland. The bushland on Barcom Glen became known as 'West's Bush'. Obed West maintained close contact with the local Aboriginal people of the area, having lived on the property since he was a young child. When the West family first settled at Barcom Glen, the local Aboriginal people were the only other inhabitants of the area.<sup>5</sup>

The local Gadigal people of the area have sometimes been referred to as the 'Womerah tribe', however although many early writers referred to Aboriginal groups as 'tribes', 'these groups were not tribes in the current anthropological sense of the word'. Hence, the name Womerah may have referred to the local family group of the Gadigal people or a local descent group of the Gadigal people associated with the Darlinghurst and Rushcutters Bay area. A street named Womerah Avenue, approximately 120 m north of the subject site, was probably named in reference to the name 'Womerah' for the original Aboriginal inhabitants of the area.<sup>6</sup>

An account of Aboriginal activities in the latter half of the 1800s at Point Piper, immediately north-east of Barcom Glen, was published in the *Sydney Morning Herald* in 1930. The article included information on Aboriginal fishing practices, which included providing fish and oysters to Woollahra House:<sup>7</sup>

The aborigines were amazingly expert spear-men. Standing on rocks above the water, and with spear poised to strike, they seldom failed in the unerring aim.... It was about ten feet long, and had three [sic] prongs made of umbrella wires, barbed at the points, and tightly bound to the end of the spear. Many of the rock carvings on Point Piper that have often been the subject of Press correspondence were the work of aborigines 60 years ago.

The use of umbrella wires is an example of the incorporation of European materials into tool manufacturing traditions, which occurred across Australia, often evidenced by the re-use of glass or ceramic as tools by Aboriginal people.

## West's Bush

The term West's Bush, or variations on that name (Westbush, Granny West's Bush), appears in several personal or historical accounts of the Darlinghurst area published in various newspapers in the early 20<sup>th</sup> century. The exact extent of the area called West's Bush varies between each account, but it can generally be surmised that the remaining undeveloped portions of Barcom Glen on the western side of Rushcutters Creek, including portions of the subject site, were in the mid to late 19<sup>th</sup> century referred to as West's Bush. The presence of one of the last large land grants in the area, with its remnant vegetation and cleared spaces, must have provided quite a contrast to the surrounding dense residential subdivisions of Darlinghurst, Surry Hills and Paddington.

Aboriginal people continued to inhabit the area called West's Bush in Barcom Glen until the area became heavily developed and subdivided in the second half of the 1800s. A number of the published accounts of West's Bush detail observations of the Aboriginal people that continued to frequent or live at West's Bush. The information contained in the published accounts of West's Bush provides important insights into the continued use of the area by Aboriginal people, but as they were published at a time when some people's attitudes toward Aboriginal people were vastly different to contemporary values, some of the language used in the following quotes would today be viewed as unacceptable.

An article in the *Sydney Morning Herald* on 6 February 1912 on the demolition of Barcom Glen House refers to Aboriginal people gathering at West's Bush:<sup>8</sup>

It is also interesting to recall the fact that the high, thickly-wooded ground on the western boundary of the estate, known as Westbush, was a favourite camping place of the blacks. Many and wild were the corroborees the aborigines held there.

The article notes that the area became a distribution point for blankets to the local Aboriginal people, an annual activity across the colony of New South Wales started by Governor Macquarie in 1814:<sup>9</sup>

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<sup>5</sup> Marriott 1982:140,194

<sup>6</sup> Marriott 1982:140; Attenbrow 2010:22

<sup>7</sup> *Sydney Morning Herald* 15 February 1930:13

<sup>8</sup> *Sydney Morning Herald* 6 February 1912:12

It was also a much patronised camping ground when the annual distribution of blankets took place at Christmas time. So popular was it, indeed, with the blacks that the residents were at last forced to seek police assistance to have them removed.

Aboriginal people from 'all over' gathered at West's Bush during a visit by the Duke of Edinburgh. The Duke of Edinburgh visited Australia between late 1866 and early 1867.

An article in the *Clarence and Richmond Examiner* on Saturday 22 February 1913 includes a letter documenting the memories of the Darlinghurst area by the author's mother:<sup>10</sup>

Now that I am on the subject of old Sydney, you may be interested to learn that the thickly populated portion of Darlinghurst extending from Womerah Avenue to Surry-street was, little more than thirty years ago, known as Granny West's Bush. Just on the site occupied by Womerah Avenue was a well-known camping ground of blacks. There amongst the tall trees and luxuriant scrub, mum says, it was a common sight to see the aboriginals squatting by their camp fires, or at night to hear the welkin ring with their corroborees.

An article by W. H. West in the *Sydney Morning Herald* in 1930 makes reference to an Aboriginal camp in West's Bush, as well as another Aboriginal gathering place in Edgecliff:<sup>11</sup>

Sixty years ago the city did not extend beyond the top of William-street, and an aboriginal camp was pitched in West's Bush, which began at the intersection of Brougham-street and Victoria-road.... The aboriginals had two distinct camps in Bellevue Hill bush – one on the side overlooking Edgecliff and Double Bay tennis courts, and the other at the intersection of South Head-road and Victoria-street.

Contemporary historical references to Aboriginal people at West's Bush note that the current location of St Vincent's Hospital covered much of the area known as West's Bush where Aboriginal people would gather each Queen's Birthday for the annual blanket handout. The City of Sydney website includes historical information for Barcom Avenue Reserve, the triangle of land between West Street, Boundary Street and Little Barcom Avenue immediately east of the St Vincent's Private Hospital. The information includes a reference to Barcom Avenue Reserve being part of West's Bush where Aboriginal people 'continued to gather here for decades and on Queen Victoria's birthday each year were presented with a gift of blankets'.<sup>12</sup>

### Aboriginal place names

The Aboriginal history of the area is reflected by some of the place names in the vicinity of Barcom Glen, including the name Woolloomooloo and Womerah. Early European records indicate Woolloomooloo, located approximately 1 km north of the subject site, was a local place name of the Gadigal people. Obed West believed the place name was more accurately spoken by the local Aboriginal people as 'Wullah Mullah' rather than Woolloomooloo. Womerah, suggested by Obed as the name of the local Gadigal people remains a street name immediately north of the site. Other local place names, such as 'Kogarah/Kogerah/Kogerrah' – the Aboriginal place name for Rushcutters Bay, have largely been replaced by European place names.<sup>13</sup>

## 3.2 EARLY DEVELOPMENT OF THE AREA

Development in the Darlinghurst area began slowly because its rocky ridges and shallow soils were not suitable for agriculture and other, more arable land was favoured during the early years of European settlement. The area was located at some distance from the centre of settlement, making it a suitable

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<sup>9</sup> *Sydney Morning Herald* 6 February 1912:12

<sup>10</sup> *Clarence and Richmond Examiner* 22 February 1913:7

<sup>11</sup> *Sydney Morning Herald* 15 February 1930:15

<sup>12</sup> Whitaker 2007:43; City of Sydney 2012b

<sup>13</sup> Attenbrow 2010:138, Table 2.1; Marriott 1982:194-195



location for Darlinghurst Gaol, which was constructed between 1822 and 1841. The gaol and associated courthouse still stand and are located opposite the subject site, to the west of Darlinghurst Road.

Darlinghurst was named after Governor Ralph Darling ('hurst' being an old English word for a heavily-timbered hill). His successor was Richard Bourke was a period of active economic growth that transformed the area.<sup>14</sup>

From around 1810, the site was part of the area of land that was in the possession of Thomas West, who had arrived in the colony as a convict. In 1810 West applied to Governor Macquarie for permission to build a watermill on a site about 1.5 miles from the town of Sydney, near the South Head Road. Macquarie granted permission for the construction of the mill on the site and gave West an exclusive right to the stream to be used to power the mill, with a further promise that West would receive a lease or grant of the land once the mill was completed.

Governor Macquarie took an active interest in the construction of the mill, which was the first watermill in the colony and was completed in January 1812. In 1813 Macquarie granted a pardon to West as a reward for the construction of the mill and he gave him a cow from the government herd. Although no formal land grant was made, West continued to occupy the land and build a house and fences upon it, as well as a number of quarries. This property, known as Barcom Glen, covered around 71 acres and was crossed by Rushcutters Creek.<sup>15</sup>

The geology of the area meant that it was rich in raw materials that were urgently needed for the development of the fledgling colony. During 1830 Thomas West made a number of complaints about the Department of Public Works taking stone from his quarries and puddling clay to make bricks on his land. A plan of the area dating to 1831 (Figure 8) shows that a brick kiln and three huts had been built to the south-east of the gaol, in western portion of the subject site. In 1832 a brick maker who had formerly lived near the intersection of South Head Road (now Oxford Street) and Darlinghurst Road explained that he had permission from Governor Macquarie to make bricks on this land and that he had occupied it for 18 or 20 months (c. 1821), without interference from Thomas West. Sometime after Macquarie left the colony in 1821, the brick maker was turned off the land by Major Ovens, who was then responsible for the supervision of convict gangs and who wanted to use the land to make bricks for the government. It is therefore likely that the brick kiln and huts that were present on the site in 1831 were used by convicts in the manufacture of bricks for government projects.<sup>16</sup>

Construction of Busby's Bore began in September 1827 and was completed 10 years later. The bore was a water supply tunnel that extends from Centennial Park to Hyde Park, which was designed to carry water from the Lachlan Swamp, now Centennial and Queen's Parks to the city centre.<sup>17</sup> Busby's Bore runs underground directly south of the Hospital site along Oxford Street.

Three quarries are also shown on the 1831 plan, to the east and north-east of the gaol. One of these appears to have been located beneath the present day Xavier and Aikenhead buildings on the St Vincent's Campus, south of the Barcom Avenue and Ice Street intersection, while another was located to the east of the subject site between Ice Street, Leichhardt Street, Barcom Avenue and Boundary Street.

In January 1831 West blocked access to one of his quarries near Darlinghurst Gaol, from which the Department of Public Works had been taking stone to build the Commissariat Stores at Circular Quay. This action led to the Crown taking West to court to recover 30-40 acres of land that it claimed he had no right of possession to. The minutes of the court case reveal a considerable degree of confusion over the extent of West's property, however, it was eventually found that the property did include the subject site on its western side, extending to beyond Rushcutters Creek on the east and to Rushcutters Bay in the north (Figure 7). Eventually, a notice of a grant of 71 acres to Thomas West was published in *the NSW Government Gazette* in 1844.

The original home occupied by West and his family seems to have been located close to the mill, along with a large garden. In 1832, a stonecutter was assigned to West for work at Barcom Glen, and in the

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<sup>14</sup> Heritage Branch 2012d

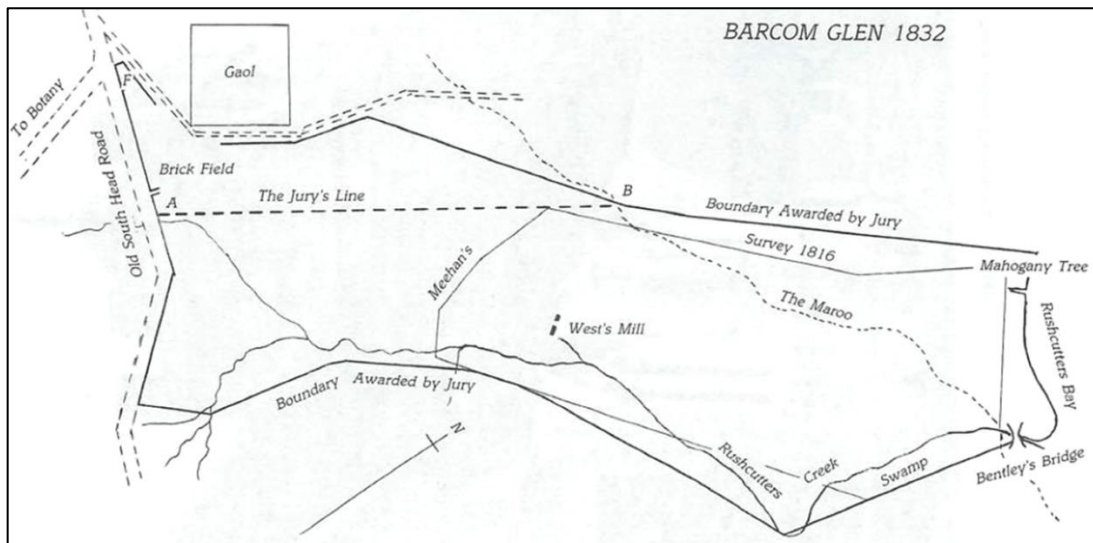
<sup>15</sup> *The Sydney Gazette and NSW Advertiser* 18 January 1812:4; *The Sydney Morning Herald* 22 October 1832:2; *The Sydney Gazette and NSW Advertiser* 25 December 1813:1

<sup>16</sup> Marriott 1982:142; *The Sydney Gazette and NSW Advertiser* 20 Oct 1832:3

<sup>17</sup> Heritage Branch 2012c

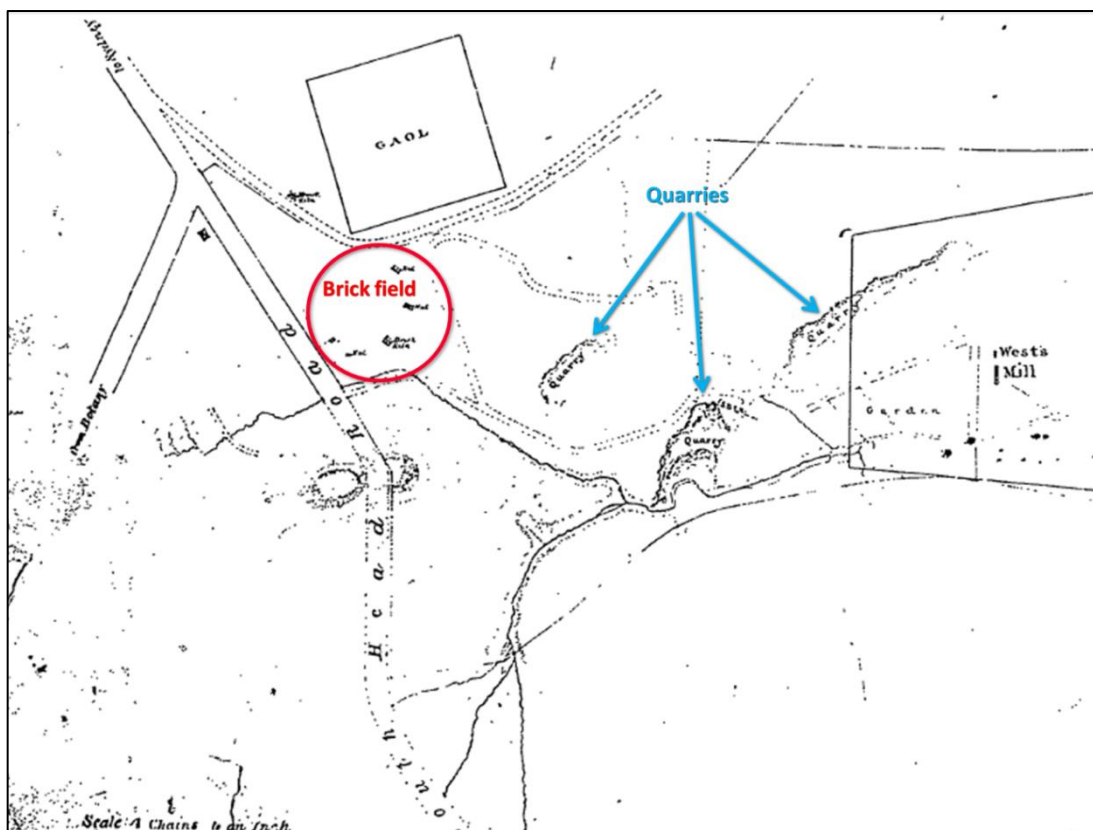
following year two more labourers and a carter were contracted. While it is not known what these labourers were working on, it is possible that they were employed for the construction of a new house on the property.<sup>18</sup>

FIGURE 7 – PLAN SHOWING THE EXTENT OF WEST'S LAND (BOLD LINE), AS DETERMINED BY THE JURY IN 1832



[Source: Marriott 1982: PI 32]

FIGURE 8 – 1831 PLAN SHOWING DEVELOPMENT ON WEST'S LAND



[Source: J.T. Larmer *Plan of Land to the South-East of the Town of Sydney 1831* in CRM 2002:6]

Work commenced in 1835 on construction of the Darlinghurst Goal, however it took 50 years to finish. The building was designed by Colonial Architect Mortimer Lewis but was radically changed by George

<sup>18</sup> Marriott 1982:152

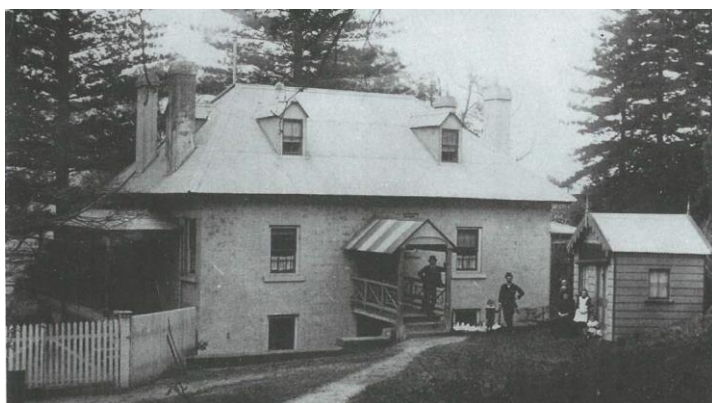
Barney who took over the project. Darlinghurst Goal was used as an internment camp during World War I and in 1921 the buildings were converted into the East Sydney Technical College.<sup>19</sup>

Construction for the Darlinghurst Court House and Residence commenced in 1835 but was not completed until 1844. The buildings were designed by the Colonial Architect Mortimer Lewis and are fronting Oxford Street. The extension facing Victoria Street was designed by the office of the Government Architect and completed 1965.<sup>20</sup>

When the Darlinghurst Goal and Court House were built, prisoners were marched from the old goal near Circular Quay to the area that is now Green Park. Green Park was granted to council for a public recreation ground in 1875. A bandstand was erected in Green Park to host public band concerts in 1925. The park was named after Alderman James Green who represented the district from 1869 to 1883.<sup>21</sup>

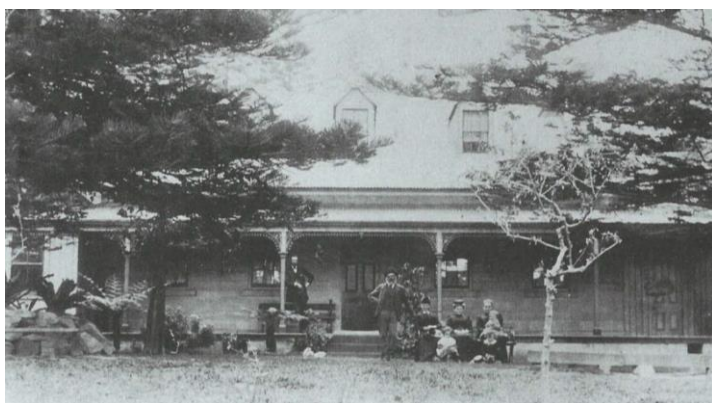
In 1836 West sold more than half of the property to his son Obed. This portion of the property was roughly the area that had been surveyed by Meehan in 1816 (Figure 7) and included the site of the original mill and house. Obed West lived on the property in 'Barcom Glen House' (Figure 9 and Figure 10) until his death in 1891. This house overlooked Rushcutters Bay and was demolished in 1912. Prior to its demolition it was described as a square-built house that was constructed of stone quarried from the estate.<sup>22</sup>

FIGURE 9 –BARCOM GLEN HOUSE FROM THE REAR



[Source: Marriott 1982:Pl. 31]

FIGURE 10 – BARCOM GLEN HOUSE FROM THE FRONT



[Source: Marriott 1982:Pl. 44]

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<sup>19</sup> Dictionary of Sydney 2008

<sup>20</sup> Heritage Branch 2012b

<sup>21</sup> City of Sydney, plaque in Green Park

<sup>22</sup> Marriott 1982:159; *Australian Town and Country Journal* 5 September 1891:19; *Sydney Morning Herald* 6 February 1912:12

In the 1840s Thomas West drew up a plan for the subdivision of his portion of Barcom Glen. He reserved for himself an area of around 2.5 acres at the south-west corner of the estate, within the present-day St Vincent's Campus. This area was located in the eastern portion of the site and was bounded by Great Barcom Street (now Barcom Avenue) and the former Little Barcom Street, from Oxford Street to as far as Ice Street. Here he built a stone house (Figure 11), which appears to have been located at the northern end of Little Barcom Street, accessed from Great Barcom Street. This house and two other structures built of brick or stone are present on a plan of the area dating to 1845 (Figure 13).

From 1850 Thomas West disposed of most of his property by giving or selling it to various members of his family, including his daughter Naomi Dobson, her children, and J. B. Holdsworth, who had married one of West's grand-daughters. Naomi Dobson lived in the house at the end of Little Barcom Street with her mother, Mary, and Thomas gave her reversionary title to the house, its contents, and the 2.5 acres of land, following the life use of it by Mary. Mary died in 1865, and Naomi continued to live in the house until her death in 1882. In 1890 the Sisters of Charity purchased the land that had been occupied by Naomi Dobson and converted the house built by Thomas West into a Hospice for the Dying.<sup>23</sup>

From the mid-19<sup>th</sup> century, the land within the eastern portion of the site (not including the area then owned by the Sisters of Charity or the property occupied by Naomi Dobson) began to be subdivided and developed. Additional buildings of wood, stone, brick and iron had also been constructed in the eastern portion of the site by this time. Four brick terraces and associated structures had been built fronting Victoria Street, as well as a larger brick building that was labelled as a 'Parsonage' on a later plan from 1887 (Figure 15). The parsonage (or presbytery) was built c. 1861 and was the residence of Archbishop Polding until his death in 1877. This building was not demolished until the 1970s.<sup>24</sup>

In 1866 three quarters of an acre of land between Barcom Avenue and "a lane parallel with Victoria-street" (which was known as Little Barcom Street by 1887) was advertised for sale as a desirable building site for the construction of "genteel cottages". By 1887 much of the area in the eastern portion of the site, to the south of St Vincent's Hospital, was built up with terrace housing (Figure 15 and Figure 16).<sup>25</sup>

FIGURE 11 – HOUSE BUILT BY THOMAS WEST IN SOUTH-WEST CORNER OF BARCOM GLEN



[Source: *Australian Town and Country Journal* 9 Oct 1897:27; later Hospice for the Dying]

<sup>23</sup> Marriott 1982:178-9

<sup>24</sup> AHMS 2006:15-16

<sup>25</sup> *Sydney Morning Herald* 22 Oct 1866:7



FIGURE 12 – SACRED HEART PRESBYTERY, ND



[Source: St Vincent's Archives, 2012;  
Note palisade and stone fence along  
western side of Victoria Street and brick  
wall to eastern side of Victoria Street]

FIGURE 13 – DETAIL FROM 1845 PLAN SHOWING STRUCTURES WITHIN THE SITE



[Source: City of Sydney Archives 2012 – Francis W. Shields Plan of Sydney 1845]; The plan is overlaid on a current aerial photograph to the right.



FIGURE 14 – DETAIL FROM 1865 PLAN SHOWING STRUCTURES WITHIN THE SITE



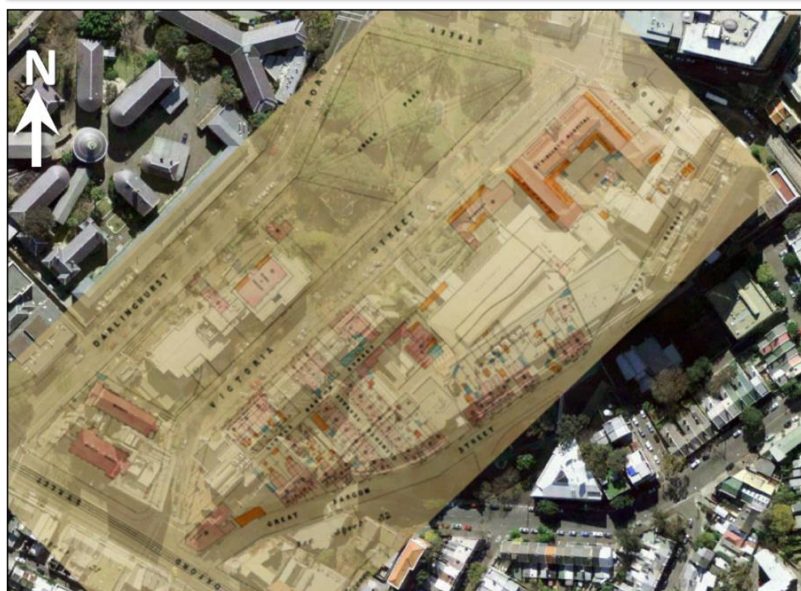
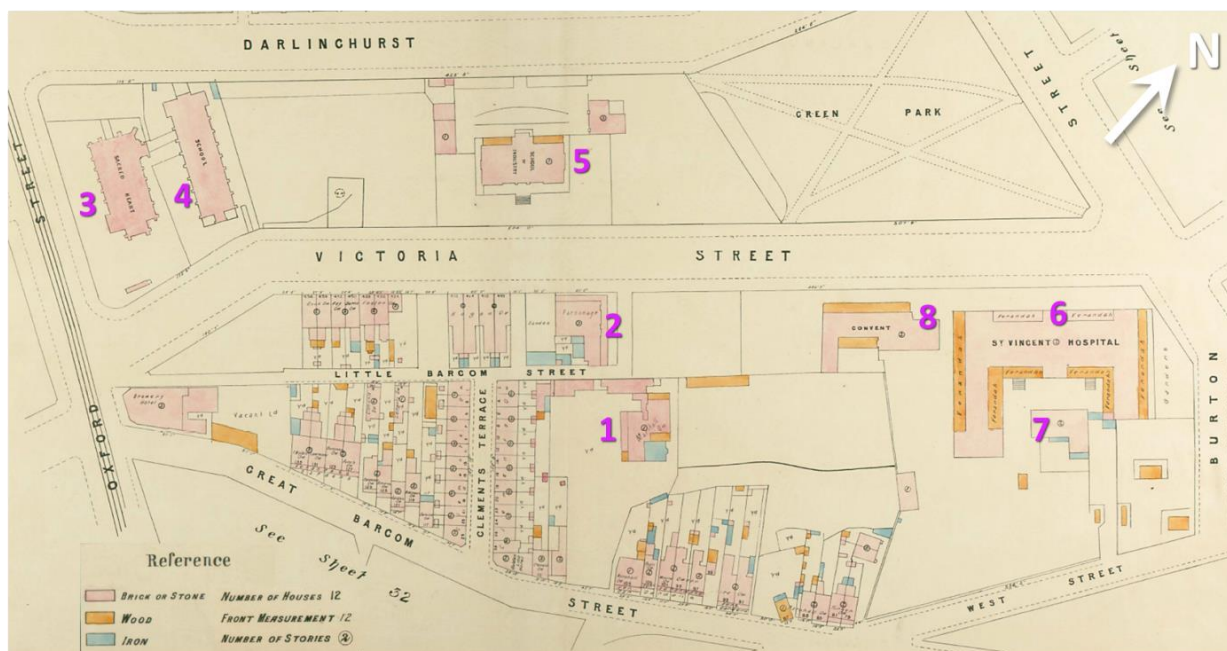
[Source: City of Sydney Archives 2012 – Trigonometrical Survey of Sydney 1855-1865]; The plan is overlaid on a current aerial photograph to the right.

The parsonage (or presbytery) was built c. 1861 and was the residence of Archbishop Polding until his death in 1877. This building was not demolished until the 1970s.<sup>26</sup>

In 1866 three quarters of an acre of land between Barcom Avenue and a lane parallel with Victoria Street (known as Little Barcom Street by 1887) was advertised for sale as a desirable building site for the construction of 'genteel cottages'. By 1887 much of the area in the eastern portion of the site, to the south of St Vincent's Hospital, was built up with terrace housing (Figure 15).<sup>27</sup>

By the mid-1880s, most of the land in Darlinghurst to the south of William Street had been completely developed with terrace housing. Much of this housing was occupied by workers who were employed around Woolloomooloo Bay and their families.<sup>28</sup>

FIGURE 15 – 1887 PLAN OF PART OF THE SITE



1. House built by Thomas West (later Hospice for the Dying)
2. Presbytery/parsonage
3. Sacred Heart Church
4. Sacred Heart School
5. Female School of Industry
6. De Lacy Building
7. Auxiliary hospital building containing kitchen, staff dining room and laundry
8. Sisters of Charity Convent

[Source: City of Sydney Archives 2012 – Rygate and West's Plans of Sydney 1887, Sheet 24; The plan is overlaid on a current aerial photograph below.]

<sup>26</sup> AHMS 2006:15-16

<sup>27</sup> *Sydney Morning Herald* 22 October 1866:7

<sup>28</sup> Dunn 2012



### 3.3 DEVELOPMENT OF INSTITUTIONS: 1850S-1880S

#### Sacred Heart Church and School

In 1850 the original Sacred Heart Church was constructed on a small parcel of land immediately south of the western portion of the site (Figure 16). The church was the first built in the eastern suburbs and was constructed of stone with a chancel, sacristy, bell tower and crypt. The crypt was initially used as a school by the Sisters of Charity, who founded St Vincent's Hospital. The priests who administered Sacred Heart lived in the presbytery on the other side of Victoria Road from 1861. The Church was enlarged in 1862 and in 1876 the interior was redesigned and altered in the style of English church architect Augustus Charles Pugin.<sup>29</sup> The Sacred Heart Church was the first of several religious institutions to be established in the area.

FIGURE 16 – SACRED HEART CHURCH, 1907



[Source: City of Sydney Archives 2012, Image No. NSCA CRS 51/205]

In 1873 an additional parcel of land was obtained to the north of the church for the establishment of a school. The school opened at the end of 1880 and was a two-storey building, with girls taught on the upper level (accessed from Darlinghurst Road) and boys taught on the lower level (accessed from Victoria Street). The Sacred Heart School was designed by architect Joseph Sheerin.<sup>30</sup>

By 1883 the Sisters of Charity and the Marist Brothers shared the teaching responsibilities. The school continued to operate on the site until 1986. Figure 15 (above – Bldg. Nos. 3 & 4) shows the location of the church and school in 1887.

In 1911 a larger church was built on the site to accommodate an expanded congregation and to accommodate for road widening of Oxford Street. The new church incorporated the foundations and some walls of the original church. Sacred Heart Church was designed by James Nangle and completed in 1912. The second church and original school building still stand on the site.<sup>31</sup>

In 1933 stained glass windows were added to the western elevation of the Church. In 1958 a fire in the Church damaged the altar and sacristy. The Church underwent various alterations in the 1960s and 1970s.

In 2004–2005 the Notre Dame University took over the site as one of its two new campuses in Sydney. Controversy has surrounded the use of the site by the University and its impact on the church building. The Church and School were restored in 2007. An eight storey building was built behind the Church, fronting Oxford Street, in 2007 for Notre Dame University (Figure 15 above). The new building was designed by Marcus Collins Architects and it replaced a car park.

<sup>29</sup> AHMS 2006:15-17; Dunn 2008

<sup>30</sup> City of Sydney 2012a

<sup>31</sup> City of Sydney 2012a

## The Female School of Industry

A plan of the subject site dating to 1887 (Figure 15 above – Bldg. No. 5) shows a three-storey brick building labelled ‘School of Industry’ and associated structures located within the western portion of the site, north of the Sacred Heart Church and school. This building housed the Female School of Industry, which was originally established at a site on Macquarie Street in 1826 to cater for neglected girls in Sydney. The school was a private institution funded by subscribers and controlled by a voluntary committee comprised of ladies of high social rank. This committee was led by Eliza Darling, the wife of Governor Darling. The school was intended to produce a well-trained and obedient class of domestic servants to work in the homes of the elite.<sup>32</sup>

Most of the girls were admitted to the school free of charge as they were orphaned or came from impoverished backgrounds. The school was a custodial institution, with girls taken from the control of their relations and not allowed to leave the institution until they were apprenticed at age 14. The school provided education in reading, writing and basic arithmetic, with the educational focus placed on domestic training in every branch of household work.<sup>33</sup>

In 1870 the school was moved from its Macquarie Street site to a new two-storey building provided by the Government on vacant Crown Land between Victoria Street and Darlinghurst Road (Figure 17). The ground floor included a large dining room, kitchen, scullery and washroom, school-room, laundry, bathroom and lavatory, committee room and the Matron’s apartments. Dormitories for the girls and residential staff occupied the upper floor.<sup>34</sup>

FIGURE 17 – FEMALE SCHOOL OF INDUSTRY ON VICTORIA STREET, C. 1870S



[Source: State Records NSW 2012, Image No. 4481\_a026\_000245, No date; Note the part stone and palisade fence and part stone and brick fence along this part of Victoria Street]

<sup>32</sup> Ramsland 1986:20-21

<sup>33</sup> Ramsland 1986:50-51

<sup>34</sup> Ramsland 1986:104

### 3.4 SISTERS OF CHARITY: 1815-1857

The Sisters of Charity order was founded in Dublin, Ireland in 1815 by Mother Mary Aikenhead. The Sisters initially worked in a women's refuge in Dublin, which was followed by visitations to the sick and poor, orphanages and goals. Mother Aikenhead founded a temporary cholera hospital in Dublin in 1833 and sent three Sisters to Paris to learn nursing and hospital management at the Hôpital de la Pitié, which was run by the Sisters of St Thomas of Villeneuve. On their return, Mother Aikenhead opened St Vincent's Hospital in Dublin, a non-government, privately funded hospital to care for the sick, poor and disadvantaged.<sup>35</sup>

In 1838 Mother Aikenhead selected five Sisters to establish a mission in Australia: Mother Mary John Cahill, Sister Mary de Sales O'Brien, Sister Mary Baptist De Lacy, Sister Mary Xavier Williams (novice) and Sister Mary Lawrence Cator. The Sisters arrived in Australia on the *Fraxis Spaight* on 31 December 1838, accompanied by Bishop William Ullathorne.<sup>36</sup>

From 1839 to 1848 the Sisters lived at St Mary's Convent in Parramatta, where they worked in the female factor in Parramatta. By 1840 the Sisters numbered nine with local recruits and they established a second convent known as St Mary's Convent in College Street, opposite Hyde Park in Sydney. The Sisters became involved in helping the local community, visiting the poor and sick. They visited Darlinghurst Goal and the Sydney Infirmary (later Sydney Hospital) in Macquarie Street.

By 1848 Mother Cahill, Mother Williams and Mother O'Brien had left for Hobart and Sister Cator had left the Congregation. In 1853 three of the Sisters died during an influenza epidemic, prompting plans and fundraising for a hospital.<sup>37</sup>

Following fundraising efforts St Vincent's Hospital at 'Tarmons' in Potts Point was opened and the first out-patient was admitted on 25 August 1857 (Figure 18). St Vincent's was the first non-government hospital in NSW. The women's ward opened in November 1857 and the men's ward in April of the following year. The Hospital was open to persons of any religious denomination, and it was hoped through expansion that treatment could be offered for all illnesses. Both men and women were admitted and later children. The hospital at 'Tarmons' was in high demand and within a few years room for expansion was needed. The hospital at Darlinghurst was established a short while later.<sup>38</sup>

FIGURE 18 – TARMONS, POTTS POINT, 1857



[Source: St Vincent's Hospital Archives 2012 (P0264)]

<sup>35</sup> For further information on the establishment of St Vincent's Hospital at Potts Point in the 1830s and work of the Sisters of Charity in Victoria, Queensland and Tasmania, reference can be made to the GML 2010:8-11 CMP.

<sup>36</sup> Suttor 1967

<sup>37</sup> GML 2010:9

<sup>38</sup> Whitaker 2007:2,191

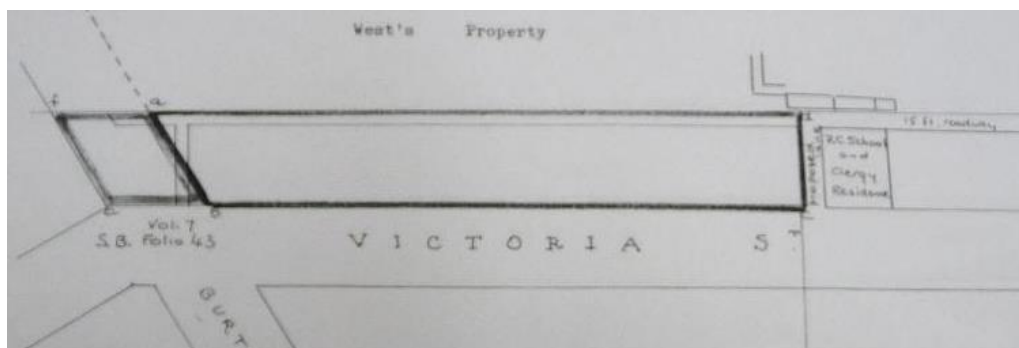
Mother Baptist De Lacy, who was one of the first five Sisters to travel from Ireland, was the first Rectress of the hospital. The objective of the hospital was to provide free medical attention to the poor, as described in its first annual report: <sup>39</sup>

The sick poor are the only persons who can be admitted to this charity; during the stay of the patients they are, without any expense to themselves, fed, clothed, washed; in fact, they are entirely provided for in every respect, are under the professional care of the surgeon and are nursed by the sisters.

### 3.5 ESTABLISHMENT OF ST VINCENT'S HOSPITAL AND HOSPICE IN DARLINGHURST: 1855-1910

A crown allotment of three roods was offered for sale in Darlinghurst in 1855. There were no takers for the land, potentially due to the proximity to the goal, so it was offered by the government to the Sisters of Charity for 'residence of the Sisters of Charity and free hospital'. The narrow allotment on Victoria Street was 450 feet by 50 feet (Figure 19).

FIGURE 19 – CROWN LAND GRANT TO THE SISTERS OF CHARITY, 1855



[Source: Land Titles, SB Vol 7 Fol 43]

In 1864 the Sisters purchased land adjoining the 1855 land grant in Darlinghurst and began planning a purpose-built, 150-bed hospital to be located on the corner of Victoria Street and Burton Street. This building is still standing, originally known as the St Vincent's Hospital and later renamed the De Lacy Building (Figure 15 above – Bldg No. 6 and Figure 20 below).

St Vincent's Hospital was designed by architect Oswald H. Lewis, son of Colonial Architect Mortimer Lewis, and consisted of two storeys with large wards and good ventilation. The foundation stone was laid on 12 May 1868 by Archbishop Polding and the hospital was opened on 20 October 1870. Patients were moved from Potts Point to the new hospital in Darlinghurst by horse-ambulance.

Initially the hospital had two main wards (one for men and one for women), with 40 beds in each. A Naval Ward was opened in 1875, which admitted members of the Royal Navy for a fee. Later this service was also provided to members of the French and German navies and, along with continuing donations and bequests, provided a steady income for the Sisters. <sup>40</sup>

A timber paling boundary fence was added in 1874 (Figure 20), which was replaced in 1878 with a sandstone dwarf wall with iron railing and a brick boundary wall.

<sup>39</sup> *St Vincent's Hospital Annual Report 1857* in Whitaker 2007:3

<sup>40</sup> GML 2010:11-12,32



FIGURE 20 – DE LACY BUILDING, CORNER VICTORIA AND BURTON STREETS, EARLY 1870S



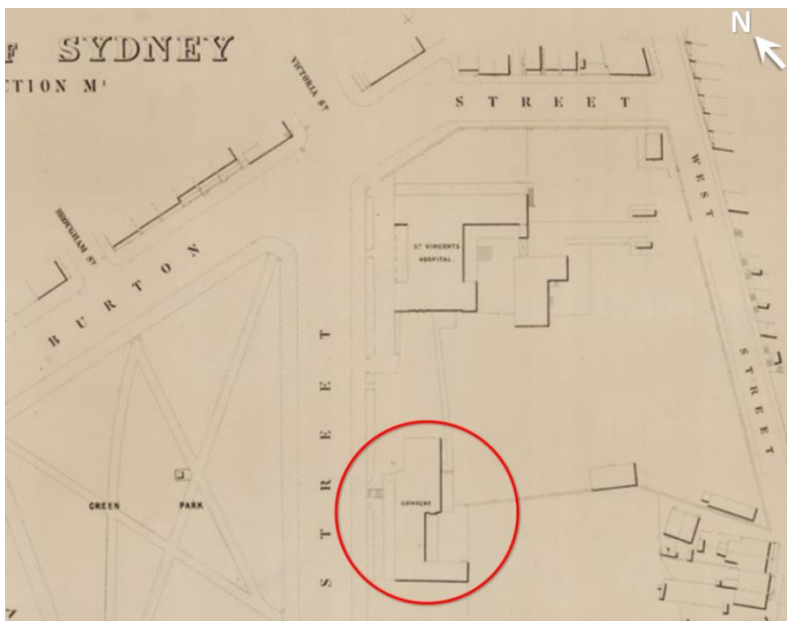
[Source: State Library of NSW, Image No. a089173h (from GML 2010:18)]

In 1882 a new convent was constructed fronting Victoria Street and the Sisters moved into it, freeing up space for 30 additional beds in the hospital. This convent was a two-storey building, constructed of brick, and was located to the south of the hospital (Figure 22). An 1884 plan (Figure 21) shows that the convent was linked to the hospital by a path, but the addition of the south wing of the De Lacy Building brought the hospital much closer to the convent by 1897 (Figure 15 above – Bldg. No. 6).<sup>41</sup>

In 1884 work began on a south wing addition to the hospital. This wing had been part of the original design for the building, but was not completed until 1888. The wing provided space for an additional 175 beds. In 1892 the north wing of the building was extended, increasing the number of beds to 204. For the first time the NSW Government contributed £1,000 to the cost of the new facilities.

The kitchen, a dining room for the nurses and a laundry were accommodated in a two-storey brick structure located to the rear of the hospital building (Figure 15 above – Bldg. No. 7). This auxiliary building is shown on plans dating to 1884 and 1887 and in photographs from 1897 (Figure 24). Other small outbuildings were located further to the east. The 1897 photograph also illustrates the social conditions in the area at the time, with the glass along the top of the brick wall.

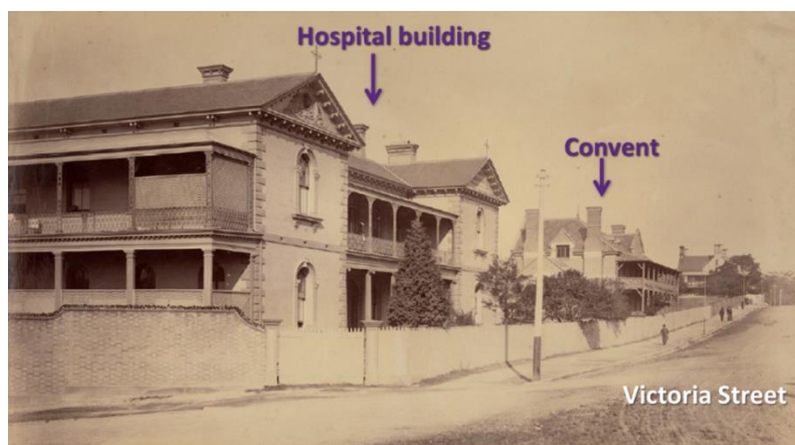
FIGURE 21 – PLAN SHOWING THE ORIGINAL RELATIONSHIP BETWEEN THE DE LACY BUILDING AND CONVENT, 1884



<sup>41</sup> GML 2010:12

[Source: Detail from 1884 Metropolitan Detail Series Plan in GML 2010:19; Convent building is circled below.]

FIGURE 22 – VIEW SOUTH ALONG VICTORIA STREET, 1887



[Source: St Vincent's Hospital Archives 2012 in GML 2010:19]

In 1888 the Sisters of Charity purchased the land that had been occupied by Naomi Dobson and converted the house built by Thomas West into a Hospice for the Dying (Figure 23). The establishment of the Hospice recognised that terminal patients needed palliative nursing care rather than acute care in a private hospital. The Hospice was located in Barcom Street providing accommodation for eight beds.<sup>42</sup>

In 1891 the hospice was described as being built of brick and stone, with a shingled roof and six rooms on a single storey. A kitchen and laundry were located to the rear, with a garden for the patients.<sup>43</sup>

FIGURE 23 – THE ORIGINAL HOSPICE FOR THE DYING, C. 1890S



[Source: Whitaker 2007:27; This building was located within the central portion of the site.]

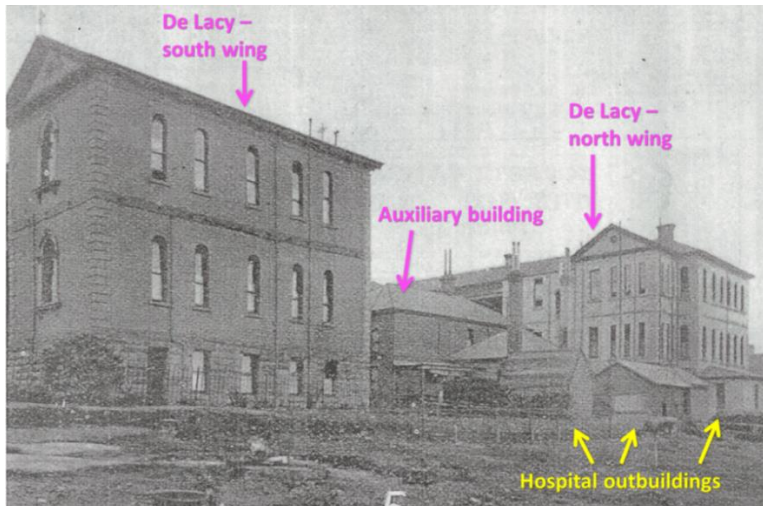
The colony was affected by economic depression for much of the 1890s. Since the late 1890s the Sisters of Charity have continued to expand their health services throughout Victoria, Queensland and Tasmania.

In 1897 a chapel was built adjoining the convent to the south with seating for 125 worshippers.<sup>44</sup>

<sup>42</sup> The original Hospice for the Dying was located within the central portion of the site.

<sup>43</sup> 1891 Assessment Book No. 3273, Fitzroy ward; *Australian Town and Country Journal* 1896:34

FIGURE 24 – DE LACY BUILDING AND ANCILLARY STRUCTURES FROM THE REAR, 1897

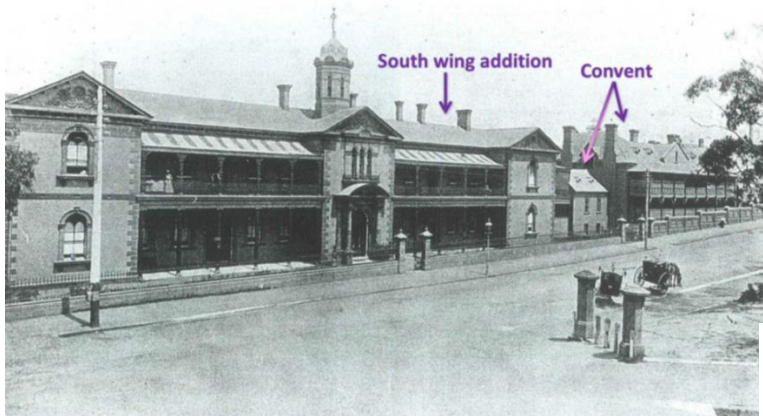


[Source: St Vincent's Hospital Archives 2012]

In 1901 the original hospice was demolished and a new two-storey hospice with a capacity of 40 beds was built on the land between Barcom Avenue and Victoria Street.

In 1908 the Hospice moved across Victoria Street into the former Female School of Industry building and the 1901 hospice building was converted into the first St Vincent's Private Hospital. Verandahs and balconies were added to the external facades of the former School of Industry building, and in 1908 a new convent was built to the north of the hospice (Figure 26). In 1908 electricity was installed at the Darlinghurst hospital complex. In 1909 St Vincent's Private Hospital was added to the complex in the building that previously housed the Hospice for the Dying, and they accepted fee paying patients.

FIGURE 25 – DE LACY BUILDING'S SOUTH WING ADDITION, 1905



[Source: Whitaker 2007:38; Note the stone and palisade fence along the eastern side of Victoria Street]

<sup>44</sup> Whitaker 2007:26



FIGURE 26 – SACRED HEART HOSPICE (LEFT) AND CONVENT (RIGHT), VICTORIA STREET, 1908



[Source: St Vincent's Hospital Archives 2012]

### 3.6 DEVELOPMENT OF THE HOSPITAL SITE: 1911-2012

Throughout the 20<sup>th</sup> and 21<sup>st</sup> centuries, development of the hospital continued within the site, with the demolition and construction of numerous buildings.

Figure 27 shows the front of the De Lacy Building in 1911. Note the high sandstone and palisade fence fronting Victoria Street and the sandstone gate pillars in the background to the Convent.

FIGURE 27 – DE LACY BUILDING, 1911



[Source: St Vincent's Hospital Archives 2012 (P0009)]

The Xavier Nurses' Home was constructed in 1913 to the south-east of the De Lacy Building (Figure 28), which expanded the available patient accommodation in the Hospital building. This building was named after Sister Xavier Cunningham who was the first Australian born Rectress.

FIGURE 28 – XAVIER NURSES' HOME, 1916



[Source: St Vincent's Hospital Archives 2012 (P0223)]

In 1918 the front of the De Lacy Building was modified in the Free Classical style, with the work carried out in stages and finished by 1920. Works included a third level addition to the Victoria Street frontage.

A third floor and elaborate façade were also added to the Hospice for the Dying by 1918 on the opposite side of Victoria Street (Figure 29).

FIGURE 29 – HOSPICE FOR THE DYING IN THE REMODELLED FEMALE SCHOOL OF INDUSTRY BUILDING, 1918



[Source: Whitaker 2007:54]

In October 1922 additions to St Vincent's Hospital were opened by his Excellency the Governor Sir Walter Davidson.<sup>45</sup>

The Sacred Heart Hospice Annual Report of 1924 illustrated the statue of Joseph on the staircase of the Hospice building. This statue is now located in the Sacred Heart Chapel.

<sup>45</sup> *The Sydney Morning Herald* 12 October 1922:5

FIGURE 30 – SACRED HEART HOSPICE FOR THE DYING, 1924



[Source: Sacred Heart Hospice for the Dying 1925:16]

In 1927 the Sacred Heart Chapel was built in the garden to the north of the hospice and convent in 1927 (Figure 31). The 1890s brick wall along Victoria Street was partly a metal palisade fence adjacent to the Sacred Heart Hospice for the Dying in the 1920s.

FIGURE 31 – THE SECOND HOSPICE BUILDING, POST-1927

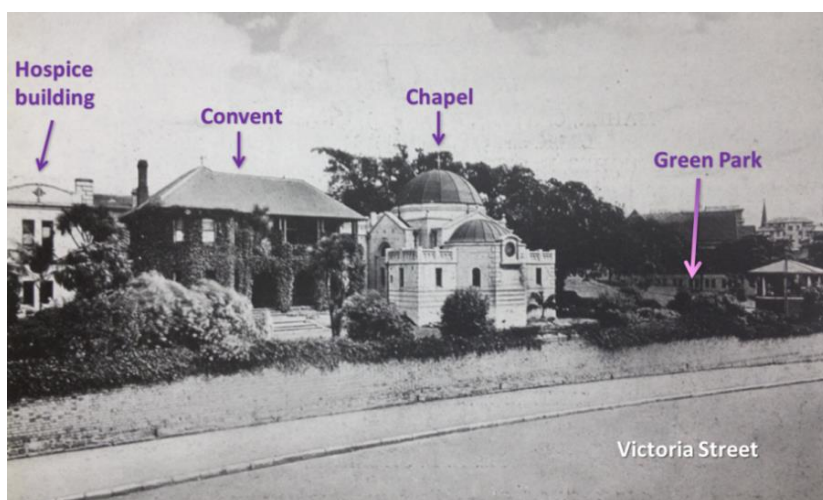


[Source: Whitaker 2007:53; By this time the building was used as St Vincent's Private Hospital and the third hospice building on the other side of Victoria Street is visible in the right background.]

Figure 32 shows the Hospital buildings on the western side of Victoria Street in 1928.



FIGURE 32 – SACRED HEART HOSPICE FOR THE DYING, 1928



[Source: Whitaker 2007]

The Hospital did not receive any regular funding from the Government, only for *special purposes* over the years and would have totalled only a few thousand pounds. The Ladies Auxillary who formed in 1928 raised money for various hospital needs, such as a new electrocardiograph that was purchased at the time. The Ex-Nurses Association also donated six cots for the children's ward.

The depression years of 1929-1933 affected contributions to the Hospital, which affected the purchase of new equipment and improvements to buildings.

By 1936 another rebuilding program was underway. The first priority was a new boiler house in order to be ready for the demands of other new buildings. This was built to the south-east of the private hospital building. A third storey was also added to the Convent.

In 1937 the State Government approved a loan of £100,000 to St Vincent's Hospital for 'hospital purposes'.<sup>46</sup> A fourth floor was added to the De Lacy Building at this time to its Victoria Street frontage.

Plans were drawn up in 1937 for a new Outpatient Block by architects Stephenson, Meldrum and Turner. The foundation stone was laid by Archbishop Gilrey on 28 November 1938. The new Xavier Nurses' Home housed 140 nurses.

By 1937 Barcom Avenue Park was established on a narrow triangular shape block at the southern end of Boundary and Barcom Streets. The terraces on the site were resumed and demolished in 1926.

The seven-storey Services Block was opened in early 1941 at the rear of the De Lacy Building on Burton Street (Figure 33). It housed the Outpatients Department and a state of the art boiler room and medical training school. It was renamed the O'Brien Wing in 1988 after Sister Mary Francis de Sales O'Brien, one of the original founding five Sisters of Charity.<sup>47</sup>

<sup>46</sup> *The Sydney Morning Herald* 26 June 1937:14

<sup>47</sup> *The Courier Mail* 29 November 1938:11; *The Sydney Morning Herald* 6 April 1937:7

FIGURE 33 – OUTPATIENT BLOCK, 1941, LOOKING NORTH ALONG WEST STREET TOWARDS BURTON STREET



[Source: State Library of NSW 2012, Image No. hood\_10292]

Throughout the 1940s various departments were established at the Hospital, providing a new range of medical services, such as Neurosurgery and Clinical Photography.

In 1943 a noteworthy change occurred in medical staff at St Vincent's Hospital with the appointment of the first two resident women doctors.

A plan to develop the Hospital was proposed by Stephenson and Turner architects in 1944 (Figure 35). This included the demolition of St Vincent's Hospital (De Lacy) and replacement with a new seven-storey public hospital. The works did not go ahead due to lack of funds.

Figure 35 shows the subject site in 1949. Buildings still existing on the site today include the Sacred Heart Church, Sacred Heart School and the Chapel (western portion), De Lacy Building (central portion) and most of the terrace housing purchased over time by the Hospital for various uses (eastern portion).



FIGURE 34 – PLAN FOR SUGGESTED DEVELOPMENT OF HOSPITAL SITE, 1944

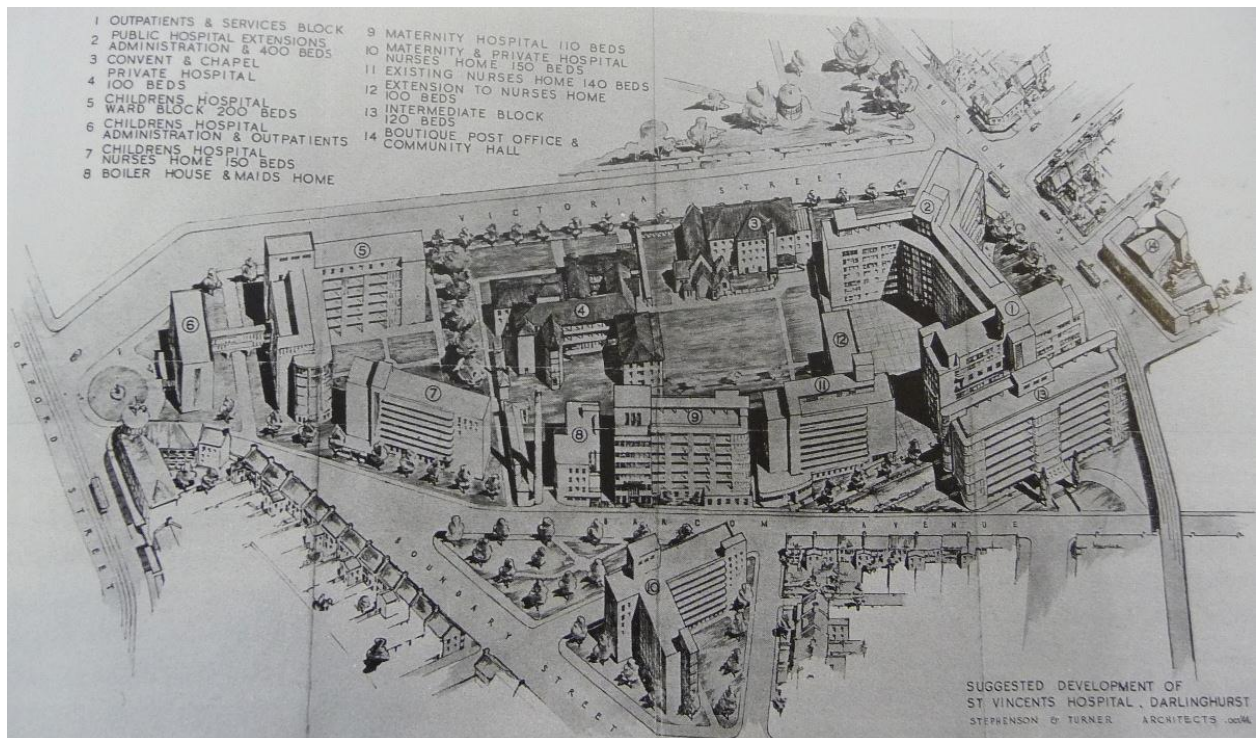


FIGURE 35 – AERIAL OF SITE, 1949



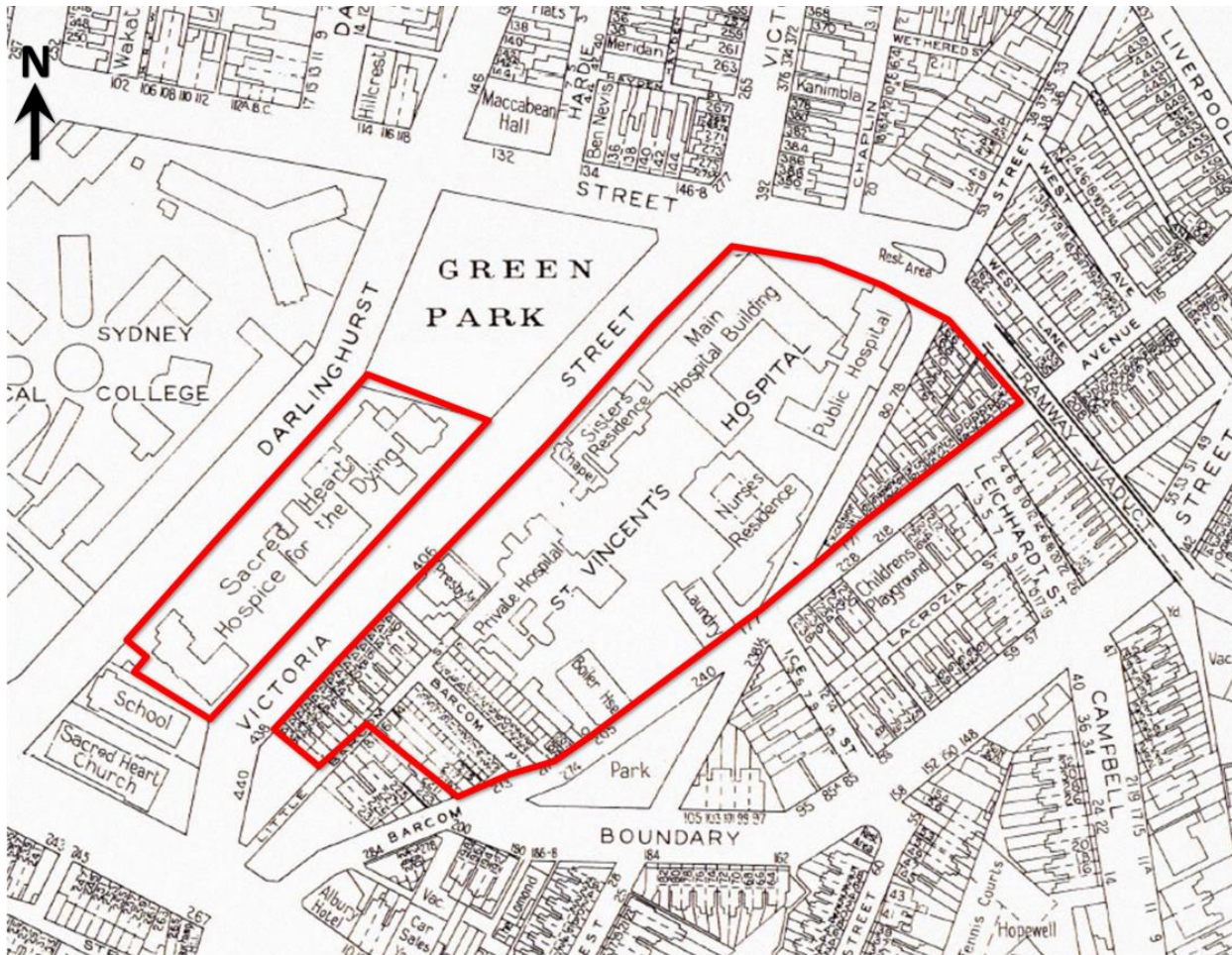
[Source: City of Sydney Archives 2012 – 1949 Aerial Survey of the City of Sydney AO054]



By 1954 negotiations with the Commonwealth Government and Hospitals' Commission of NSW resulted in the agreement for a new 100-bed thoracic block to enable the Hospital to carry out treatment for Tuberculosis patients. The discovery of antibiotics such as penicillin proved of such value in the treatment of the disease that by the time the building was complete, Tuberculosis was far less prevalent.

Figure 36 shows the subject site in 1956.

FIGURE 36 – PLAN OF SITE, 1956



[Source: City of Sydney Archives 2012 – City Building Surveyor's Detail Sheets – Paddington]

In 1957 the Hospital purchased Babworth House in Darling Point, the home of Sir Samuel Hordern, and donated it to the Hospital for use as a convalescent annex. Following structural alterations the after-care unit of 60-beds opened in August 1961.

The Notre Dame Nurses Home was opened in October 1959 on the corner of Burton and Chaplin Streets (north of the subject site and current location of Garvan).

The Cameron Wing Thoracic Unit opened on West Street to the east of the Private Hospital in May 1960. It was built to treat Tuberculosis; however the disease was not as prevalent by the time it was finished. This building was later demolished to make way for the Xavier Building.

Figure 37 shows the Outpatient Block (now demolished) and the Hospital Building (De Lacy) on the corner of Burton and Victoria Streets in 1960. The sandstone and palisade wall with brick piers along the street boundary was still there at this time.



FIGURE 37 – OUTPATIENT BLOCK AND HOSPITAL BUILDING, ON THE CORNER OF BURTON AND VICTORIA STREETS, 1960



[Source: St Vincent's Hospital Archives 2012 (P0065)]

In 1962 the old Reception House in Forbes Street was acquired and the Caritas Centre was opened in October, receiving day and outpatients.

During the 20th century, St Vincent's Hospital gradually acquired the ownership of all but two of the sites in the Garvin Precinct, land on the north-east side of Burton and Victoria Streets. In 1963 the Garvin Institute was opened allowing expansion into clinical research (Figure 38).

FIGURE 38 – GARVIN, 1963



[Source: St Vincent's Hospital Archives 2012 (P0257); Note the low stone and palisade fence outside the De Lacy building]

By 1964 there was a proposal to develop the hospital to a 600-bed capacity. The proposal envisioned a new ward block on West Street. In 1964 the Clinical School opened on the corner of Barcom Avenue and Burton Street. It was later named the Cator Building after Sister Mary Lawrence Cator. This portion of West Street appears to be resumed for use by the Hospital during the mid-late 1960s.

By 1965, the Sacred Heart Convent had been extended to the east and occupied the area that is now the Sacred Heart Hospice garden.<sup>48</sup>

Figure 39 shows the Sacred Heart Hospice fronting Victoria Street in the 1960s. The street edge wall along Victoria Street had a portion of palisade fencing still.

FIGURE 39 – SACRED HEART HOSPICE ON VICTORIA STREET, C. 1960S



[Source: St Vincent's Hospital Archives 2012 (P0209)]

FIGURE 40 – SACRED HEART HOSPICE ON DARLINGHURST ROAD, ND



[Source: St Vincent's Hospital Archives 2012 (P0201)]

Figure 41 shows the Sacred Heart Hospice and Convent in 1965 on the western portion of the subject site with Green Park in the foreground.

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<sup>48</sup> Anne Cooke pers. com. 2012

FIGURE 41 – AERIAL VIEW OF THE SACRED HEART HOSPICE AND ST VINCENTS HOSPITAL, 1965



[Source: St Vincent's Hospital Archives 2012 (P0019); The high wall along the eastern side of Victoria Street had been removed by this stage.]

The Excelsior Hotel was located on the corner of Barcom and West Streets (Figure 42). It was affectionately known as 'The Wedge' and was a favourite watering hole for Hospital staff. The hotel ceased trading on 2 March 1968.

FIGURE 42 – EXCELSIOR HOTEL, 'THE WEDGE', 1986



[Source: St Vincent's Hospital Archives 2012 (P0216-01)]

In October 1969 the foundation stone was laid for the new Ward Block, which replaced the Excelsior Hotel. The Ward Block opened in 1970 on the corner of Barcom and Burton Streets, west of the Clinical School (Cator Building), with a new accident and emergency department (Figure 43). The Ward Block



was later named the Cahill Building after Mother Mary John Cahill. At the same time extensions were undertaken to the Notre Dame Nurses Home.

FIGURE 43 – WARD BLOCK AS VIEWED FROM WEST STREET, 1970



[Source: St Vincent's Archives (P0010)]

A new entrance to the hospital was established on Burton Street in 1970 to house the Admissions and Enquiry Desk (Figure 44).

FIGURE 44 – ROTUNDA, 1970

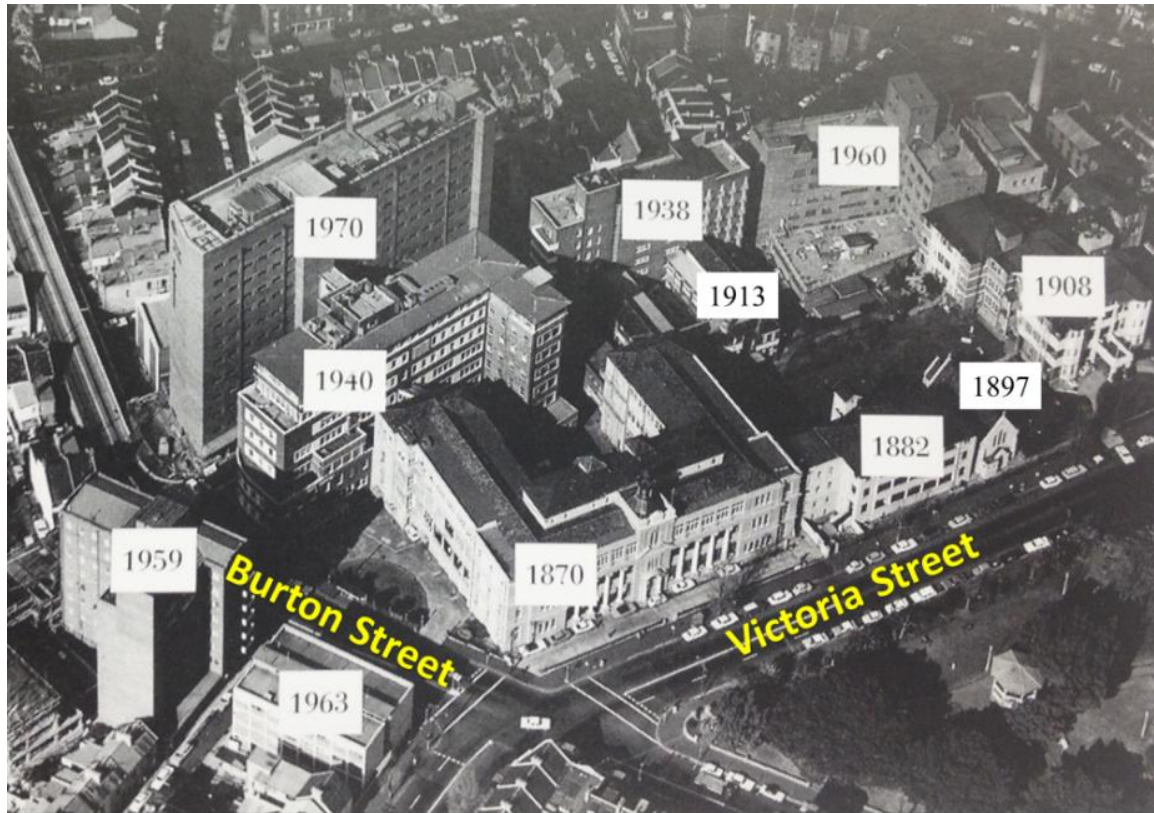


[Source: St Vincent's Hospital Archives 2012 (P0271-01)]

Figure 45 shows the Hospital site in 1970, prior to demolition of the Xavier Nurses Home, Convent, Chapel, Private Hospital Building and the original O'Brien Building.



FIGURE 45 – CONSTRUCTION DATES OF STRUCTURES WITHIN THE HOSPITAL SITE ON 1970 PHOTOGRAPH



- |                                                   |                                         |
|---------------------------------------------------|-----------------------------------------|
| 1870 – De Lacy Building                           | 1938 – Extension to Xavier Nurses' Home |
| 1882 – Convent                                    | 1940 – original O'Brien Building        |
| 1897 - Chapel                                     | 1960 – The Cameron Wing                 |
| 1908 – Private Hospital/original hospice building | 1970 – The Ward Block (Cahill Building) |
| 1913 – Xavier Nurses' Home                        |                                         |

[Source: Whitaker 2007:107]

Figure 46 illustrates the new retaining wall going in adjacent to the Sacred Heart School on the western portion of the site.

FIGURE 46 – EXCAVATION FOR THE NEW BUILDING AND RETAINING WALL, 1970



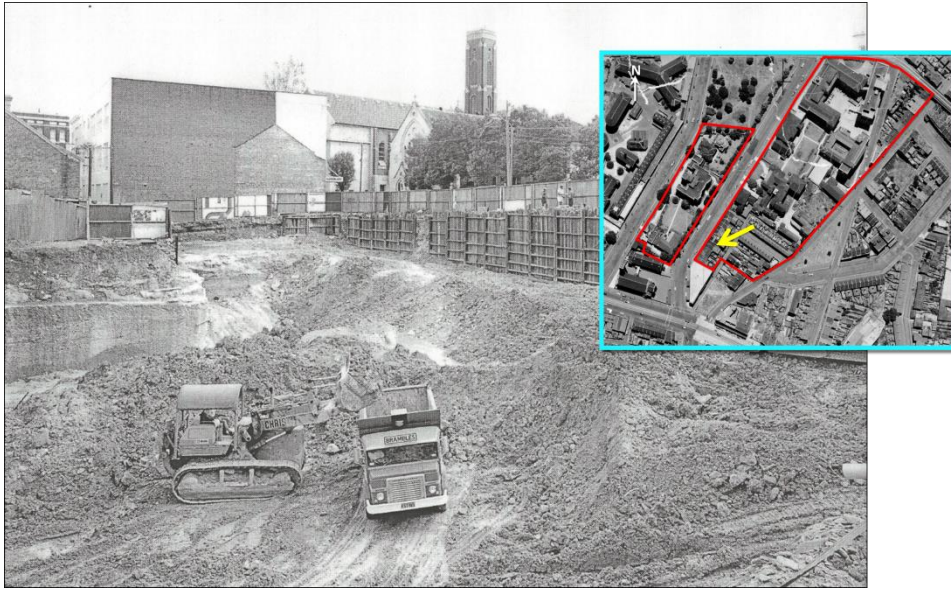
[Source: City of Sydney Archives, Image No. NSCA CRS 871/66 (t) 1]

In 1972 extensions to the Notre Dame Nurses' Home were completed, which included a chapel to seat 100 people. In June 1972 the chapel was blessed by Archbishop by James Freeman.

The Xavier Chapel was opened at the Hospital in 1973.

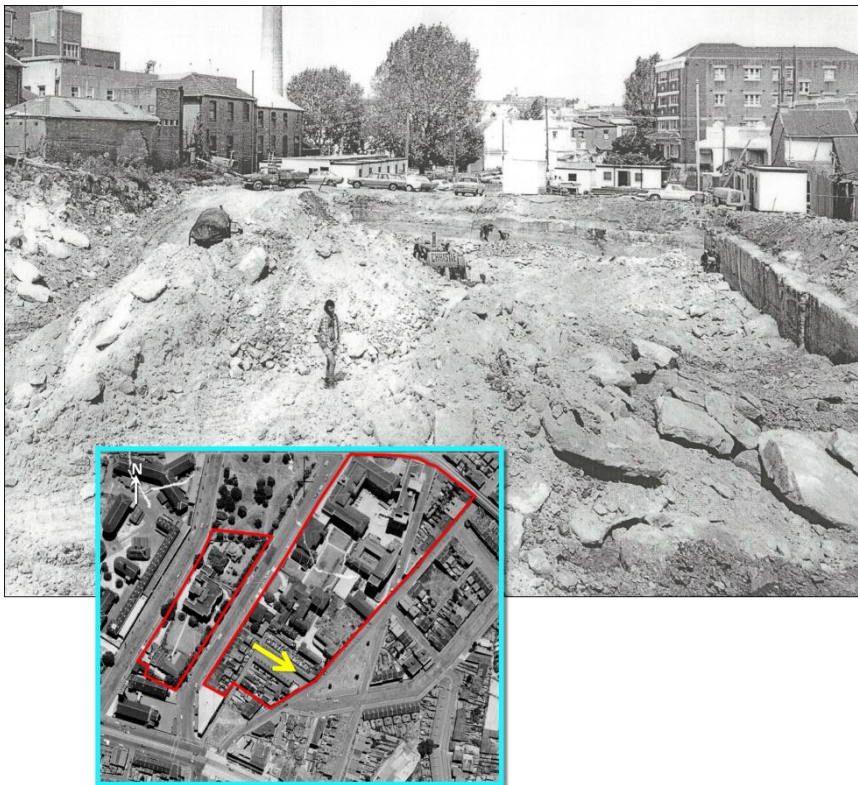
Figure 47 and Figure 48 show excavation undertaken in the southern area of the eastern portion of the subject site for construction of the new Private Hospital building, which opened in 1976.

FIGURE 47 – EXCAVATION FOR THE NEW PRIVATE HOSPITAL BUILDING, 1975



[Source: St Vincent's Hospital Archives 2012]; Inset shows location of photograph.

FIGURE 48 – EXCAVATION FOR THE NEW PRIVATE HOSPITAL BUILDING, 1975



[Source: St Vincent's Hospital Archives 2012]; Inset shows location of photograph.



FIGURE 49 – CHAPEL & CONVENT FROM THE REAR, DURING THE CONSTRUCTION OF THE NEW PRIVATE HOSPITAL, 1975



[Source: GML 2010:29; Note the southern elevation of the De Lacy building is partly obscured by the convent.]

In 1976 the Hospital purchased land south of the Private Hospital. Later that year a new 148-bed private hospital replaced the original private hospital in an area that had been occupied by terrace housing in 1976 in the southern area of the central portion of the site.

Civil Civic were the original Construction Company for the SVPH building. Civil and Civic no longer exist and are now part of Lend Lease.

Jon Mitchell & Associates of 17 Northcliff Street, Milson's Point were the original Architects who worked for Civil and Civic.

The Project was a Design and Construct Project by Civil and Civic.

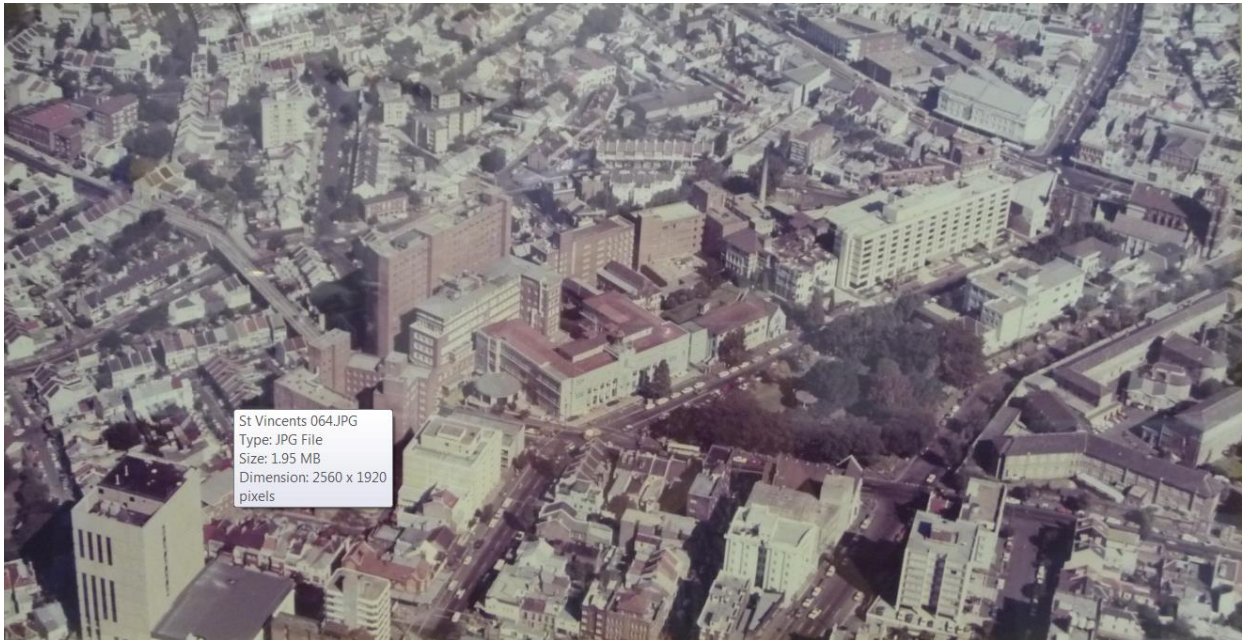
A review of the Board of Architects in NSW did not show Jon Mitchell as an active however he was an associate in 1969 and a fellow in 1981.

In 1981 two floors were added to the Private Hospital, increasing its capacity to 230-beds.

Figure 50 shows an aerial of the Hospital in 1977. The figure shows the new octagonal entrance to the Hospital on Burton Street near the corner of Victoria Street.



FIGURE 50 – AERIAL OF HOSPITAL SITE, 1977



[Source: St Vincent's Hospital Archives 2012 (P0016)]

Figure 51 shows an aerial view of the middle of the eastern portion of the site in late 1970s, looking north towards the De Lacy.

FIGURE 51 – HOSPITAL BUILDINGS, C. 1970S



[Source: St Vincent's Hospital Archives 2012]

In July 1980 the St Vincent's Advisory Board was formed to advise the Sisters of Charity in matters pertaining to the administration and management of the Hospital. Figure 52 and Figure 53 show aerial views of the area in 1980.

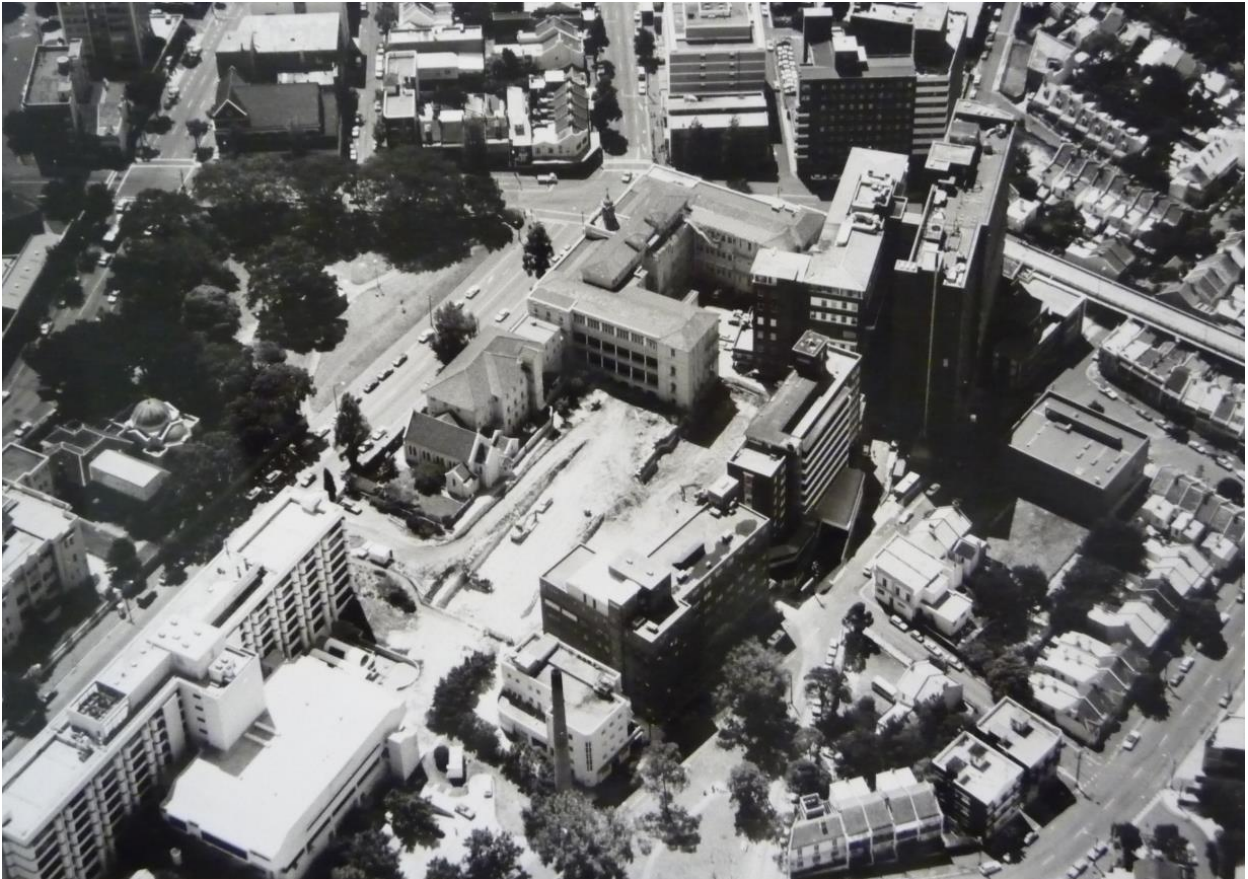
FIGURE 52 – AERIAL OF GAOL AND HOSPICE SITE, 1980, SHOWING NEW PRIVATE HOSPITAL TO THE RIGHT HAND SIDE OF THE PHOTO.



[Source: St Vincent's Hospital Archives 2012 (P0017-1)]



FIGURE 53 – AERIAL OF HOSPITAL SITE, 1980, SHOWING PRIVATE HOSPITAL TO THE BOTTOM LEFT



[Source: St Vincent's Hospital Archives 2012 (P0017-4)]

Figure 54 shows the Boiler House and Chimney on Barcom Avenue around the early 1980s. This was demolished in 2002 to make way for the Xavier Building.

FIGURE 54 – BOILER HOUSE ON BARCOM AVE, C.1980S



[Source: St Vincent's Hospital Archives 2012]



There was a long association with alcohol and drug problems in Sydney's inner city suburbs and St Vincent's Hospital Alcohol and Drug Unit were in constant demand. This resulted in the opening of a 20-bed non-medical residential detoxification centre (Gorman House) in October 1981 at 7 Ice Street and Rankin Court Alcohol Service in 1982 at 366-368 Victoria Street (now demolished for the Garvin Cancer Centre). Other new facilities opened at the hospital included a Diabetic Day Care and Family Planning Centre in June 1982, and an additional floor to the Cameron Wing was completed.

The hospital undertook an extensive building program during the 1980s, as well as significant expansion of medical research, administrative and financial restructuring and new clinical units, such as the Heart-Lung and Bone Marrow Transplant Units.

In 1984 the Xavier Nurses' Home building was demolished (Figure 55 and Figure 56). The Department of Public Works published a report on the findings, although it was not an Archaeological investigation as is undertaken today.

FIGURE 55 – XAVIER NURSES' HOME BUILDING, 1984



[Source: St Vincent's Hospital Archives 2012 (P1029-09)]

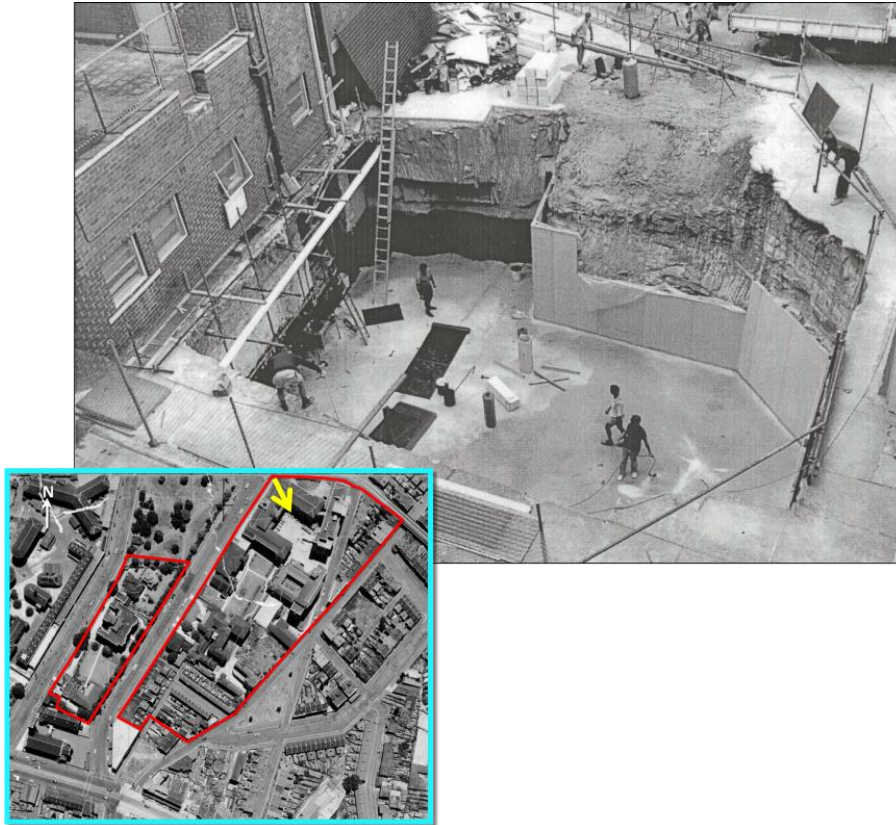
FIGURE 56 – DEMOLITION OF XAVIER NURSES' HOME BUILDING, 1984



[Source: St Vincent's Hospital Archives 2012]; Inset shows location of photograph.

In the same year an excavation was undertaken in the rear courtyard of the De Lacy Building for a new radiation bunker (Figure 57).

FIGURE 57 – CONSTRUCTION OF RADIATION BUNKER IN COURTYARD OF DE LACY BUILDING, 1983



[Source: St Vincent's Hospital Archives 2012]; Inset shows location of photograph.

In late 1983 the Federal and State governments approved the National Cardiac Transplant Program at St Vincent's Hospital. Advances in treatment meant that organ rejection could be overcome. Dr Victor Chang performed the first transplant treatment under this project in February 1984. The first AIDS case in Australia was treated at St Vincent's Hospital in 1983. By 1987 the hospital was treating about half of Australia's HIV/AIDS patients.

In 1984-1985 the doctors' industrial dispute with the NSW Government, following the introduction of Medicare, threatened patient services, changed community perceptions of medical services and reduced the role of visiting medical staff to St Vincent's Hospital.

The 1882 convent and 1897 chapel on Victoria Street were demolished in 1985 to make way for the construction of the Aikenhead Building (Figure 61), which was opened in 1988. The Sacred Heart Hospice on the western side of Victoria Street was rebuilt at this time. Figure 58 illustrates the Convent and Chapel on Victoria Street shortly before they were demolished.

In the mid-1980s the sandstone and brick wall still extended on the southern side of Victoria Street in front of the Convent and Chapel (Figure 58) and northern side in front of the Hospice (Figure 59). Figure 60 shows the wall along Darlinghurst Road.



FIGURE 58 – DE LACY, CONVENT, CHAPEL AND PRIVATE HOSPITAL ON VICTORIA STREET, 1984



[Source: St Vincent's Hospital Archives 2012 (P1029-06)]

FIGURE 59 – HOSPICE, VICTORIA STREET, 1986



[Source: St Vincent's Hospital Archives 2012 (P1029-20)]

FIGURE 60 – HOSPICE, DARLINGHURST ROAD, 1986



[Source: St Vincent's Hospital Archives 2012 (P1029-21)]



In March 1986 the Sisters of Charity moved into a new building in West Street (north of subject site). 1986 was also a year of resources shortages with a drop in nurses forcing closure of beds. A request was received from the Sacred Heart Hospice for the use of Babworth House in Darling Point, which had been vacant since 1980, so that it could be used whilst the new hospice was built on the Darlinghurst site (western portion). Babworth House was used as a convalescent and geriatric unit after the Hospice vacated and moved into their new building in 1988.

The Hospital adopted a new naming system for principal buildings in 1988, naming them after four of the pioneer Sisters of Charity to arrive in Australia. These included the Ward Block (Cahill), Services Block (O'Brien), original hospital building (De Lacy) and Clinical School (Cator).

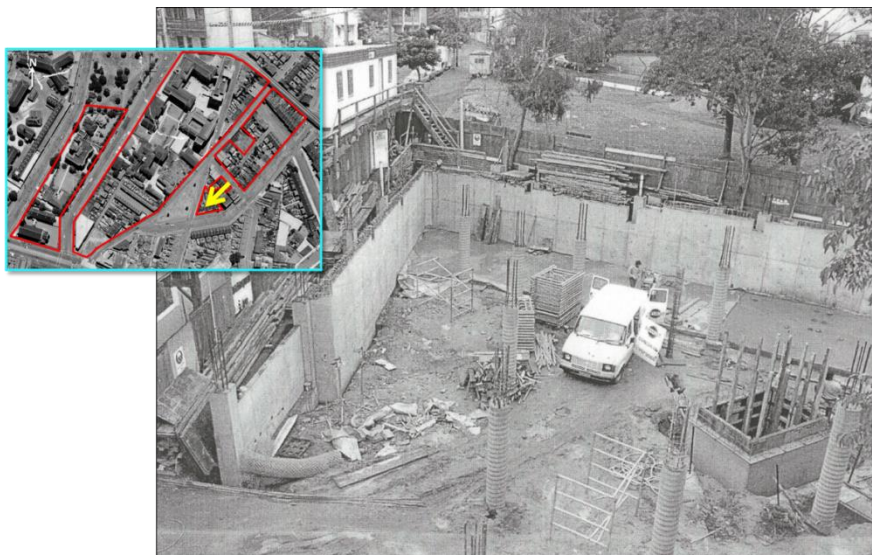
FIGURE 61 – CONSTRUCTION OF THE AIKENHEAD BUILDING (LEFT) AND CAR PARK, 1988



[Source: St Vincent's Hospital Archives 2012; Inset shows location of photograph.]

The Centre for Immunology opened on Boundary Street in 1989. Figure 62 shows the building under construction a few years earlier. Five terraces were demolished to make way for the new two storey building with basement level. The foundation stone was laid by Sir Peter Abeles, Chairman of the Australia Cancer Foundation for Medical Research and blessed by the Most Reverend Bishop John Heaps, D.D, M.B.E on 23 November 1987.

FIGURE 62 – CONSTRUCTION OF THE CENTRE FOR IMMUNOLOGY BUILDING, C.1987



[Source: St Vincent's Hospital Archives 2012]; Inset shows location of photograph.

In 1990 St Vincent's Clinic opened in the area between the private hospital and Oxford Street, providing consulting rooms for specialists. The Clinic was built on two corner allotments, which formerly housed Penn's Hardware building and a car park. The clinic was more attractive to doctors who would see private and public patients, and specialist equipment could be funded and setup in the clinic for use by the Hospital.

Figure 63 shows the Penn's Hardware building on the corner of Oxford Street prior to demolition.

FIGURE 63 – PENN'S HARDWARE BUILDING, C. 1980S



[Source: St Vincent's Hospital Archives 2012 (P1029-28)]

In 1991 St Vincent's Hospital was incorporated under its own Act of Parliament and is now known as St Vincent's Hospital Limited.<sup>49</sup>

The foundation of the Victor Chang Cardiac Research Institute in 1994 further expanded the capacity of the campus.

<sup>49</sup> St Vincent's Hospital Sydney 2012

In 1996 the Sisters of Charity established the Sisters of Charity Health Service, a national organisation governing all of their health facilities. This brought the St Vincent's Hospital, St Vincent's Private Hospital and Sacred Heart Hospice in Darlinghurst under a single Board of Directors and executive structure. Following this, the Sisters of Mercy in North Sydney entered into a partnership with the Sisters of Charity where they merged their recently rebuilt Mater Hospital in North Sydney with the Sisters of Charity facilities in Darlinghurst. The new entity became the St Vincent's & Mater Health, which began operation on 1 January 2001. In 2005 St Joseph's Village at Auburn also joined St Vincent's & Mater Health.

Figure 64 shows the Cameron Wing (foreground) and Boiler House (background), looking south along West Street in 1998.

FIGURE 64 – CAMERON WING, WEST STREET



[Source: St Vincent's Hospital Archives 2012 (P1029-25)]

In November 2002 the Xavier Building (a 360-bed public hospital facility) was built along Barcom Avenue, linking the public and private hospitals, and an expansion of the private hospital was completed.

The O'Brien Building was demolished in 2007. The new O'Brien Building was completed in 2010.

In 2007 St Vincent's Hospital celebrated 150 years of providing high quality of care and compassion for the community. A sesquicentenary Mass was held on 26 August 2007 in St Mary's Cathedral.<sup>50</sup>

In 2008 a new building opened to the east of Sacred Heart Church for use by the University of Notre Dame. Building work also commenced on a new facility within the grounds of St Vincent's Hospital that encompassed a mental health, drug and alcohol, and community health unit.

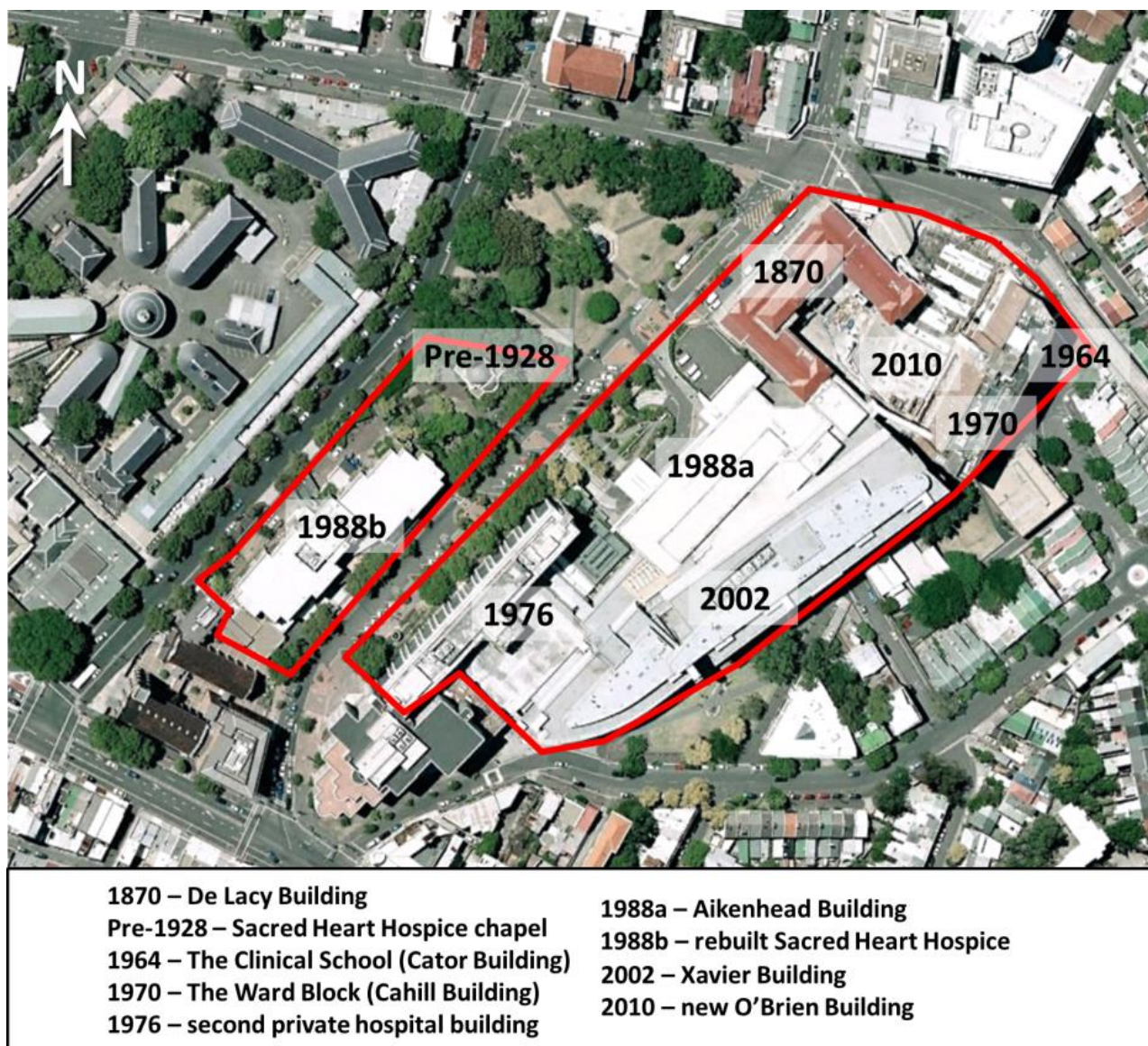
Today, St Vincent's Hospital is a public teaching hospital operated by the Sisters of Charity through a Board of Directors in accordance with the teachings of the Catholic Church. The Sisters' philosophy is to provide an environment of Christian care and compassion for the sick and poor. Since its founding in 1857, St Vincent's Hospital has served the local communities of Sydney, Waverley and Woollahra, expanding its services to provide national, regional and local health services throughout Sydney. St Vincent's Hospital has a continuing mission in the evolving health care system, which it achieves with financial assistance of government subsidies and private contributions.

Figure 65 shows an aerial view of the site in 2012 with the dates of existing buildings.

<sup>50</sup> Catholic Religious Australia 2012



FIGURE 65 – AERIAL PHOTOGRAPH SHOWING THE CONSTRUCTION DATES OF STRUCTURES WITHIN THE SUBJECT SITE, 2012



[Source: Google Maps 2012]

### 3.7 SIGNIFICANT PERSONS

St Vincent's Hospital is associated with the five founding Sisters of Charity in Australia, Mother Mary John Cahill, Sister Mary de Sales O'Brien, Sister Mary Baptist De Lacy, Sister Mary Xavier Williams and Sister Mary Lawrence Cator. The Hospital has an ongoing association with the Sisters of Charity. Figure 66 and Figure 67 show the Sisters of Charity in 1893 and 1997.

FIGURE 66 – SISTERS OF CHARITY, 1893



[Source: St Vincent's Hospital Archives 2012 (P0413)]

FIGURE 67 – SISTERS OF CHARITY, 1997



[Source: St Vincent's Hospital Archives 2012 (P0218)]

### **Mother Baptist De Lacy (1799-1878)**

Alicia De Lacy was born in Limerick, Ireland in 1799 and joined the Sisters of Charity in 1835 as Sister Mary Baptist. She trained as a nurse in Dublin and was one of the five pioneer Sisters of Charity who arrived in Sydney in 1838.<sup>51</sup> She pioneered the training of nurses in Australia and was the driving force behind the establishment of St Vincent's Hospital at Tarmons in 1857, and the founder Rectress, serving both the Catholic and non-Catholic communities. She returned to her congregation in Ireland in 1859 where she ministered to the poor in Dublin until her death in 1878. De Lacy is buried beside Mary Aikenhead in St Mary's Convent Cemetery in Donnybrook. The 1870 De Lacy Building (7) was named after Mother Baptist De Lacy.

### **Mother Mary John Cahill**

Mother Cahill was one of the original founding five Sisters of Charity in Australia. The 1970 Ward Block was renamed the Cahill Building in 1988 after Mother Cahill.

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<sup>51</sup> GML 2010:15



### **Sister Mary de Sales O'Brien**

Sister O'Brien was one of the original founding five Sisters of Charity in Australia. For a period of time Sister O'Brien was a Rectress of the Hospital. The 1941 Services Block was renamed the O'Brien Wing in 1988 after her. This building was demolished in 2007 and the new O'Brien Building completed in 2010 was also named after her.

### **Sister Mary Xavier Williams**

Sister Mary Xavier Williams was one of the original founding five Sisters of Charity in Australia. The Xavier Building was completed in 2002 and named after Sister Mary Xavier Williams.

### **Sister Mary Lawrence Cator**

The Clinical School built in 1964 and later named the Cator Building after Sister Mary Lawrence Cator

### **Architect Oswald H. Lewis**

Oswald Lewis worked his early years in partnership with his father, Colonial Architect Mortimer Lewis. Lewis designed the 1870 original design of the De Lacy Building. Mortimer Lewis designed the Darlinghurst Goal in 1835 on the western side of Darlinghurst Road.

### **Architects Herbert Edmund Wardell and George Denning**

Herbert Edmund Wardell was the son of William Wardell, Victorian Government Architect. In 1890 Herbert joined his father's practice in Sydney. At the time of his father's death the firm consisted of W Wardell, HE Wardell and Walter Liberty Vernon. Herbert continued the practice until his retirement in 1935.<sup>52</sup>

Herbert Wardell was involved in a variety of domestic and commercial projects throughout this career, including Cliveden Mansions in Melbourne in the 1880s. His main commercial clients were the ES&A Bank, Union Bank and Bank of Australasia. In 1921 Wardell was joined by Laidley Downing in partnership, becoming Wardell and Downing, and in 1927 by John More, lecturer and designer at Sydney University from 1919 until 1927. They became Wardell, Moore and Downing until Wardwell retired in 1935. Wardell and Denning were responsible for St Carthage's Cathedral (1892-1906) in Lismore, '38 Wing' at St John's College at the University of Sydney (1918-1938) and Lewisham Hospital (1947). Wardell also worked on St Mary's Cathedral, Sydney after his father's death in 1899. The existing 1920s presentation of the De Lacy Building is attributed to architects Wardell and Denning.

## **3.8 HISTORICAL THEMES**

Historical themes can be used to understand the context of a place, such as what influences have shaped that place over time. The Heritage Council of NSW established 35 historical themes relevant to the State of New South Wales. These themes correlate with National and Local historical themes. Historical themes at each level that are relevant to St. Vincent's Private Hospital are provided in Table 2.

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<sup>52</sup> GML 2010:15



## 4 Significance

### 4.1 WHAT IS HERITAGE SIGNIFICANCE?

Before making decisions to change a heritage item, it is important to understand its values. This leads to decisions that will retain these values in the future. Statements of heritage significance summarise a place's heritage values – why it is important, why a statutory listing was made to protect these values.<sup>53</sup>

The environmental heritage of NSW includes components of the living and non-living environment. It consists of both natural heritage – land resources, marine, estuarine and inland waters and diverse animal and plant life – and cultural heritage, reflected in the evidence of human occupation and settlement.<sup>54</sup>

### 4.2 SIGNIFICANCE ASSESSMENT: ST VINCENTS PRIVATE HOSPITAL SITE

The following assessment of significance (Table 1) and statement of significance (Section 4.5) has been undertaken for the St Vincent's Private Hospital Sydney. (Figure1).

TABLE 1 – ASSESSMENT OF HERITAGE SIGNIFICANCE: ST VINCENT'S PRIVATE HOSPITAL

Criteria	Significance Assessment
<b>A – Historical Significance</b> <i>An item is important in the course or pattern of the local area's cultural or natural history.</i>	<p>St Vincent's Private Hospital has no identified historic significance and has local historic interest only for its continuation and extension of a private hospital on the site, erected 1976.</p> <p>The site's historical layering demonstrates the hospital's development and expansion from a small hospital to the existing large institutional scale, reflecting changing technologies associated with the provision of medical care and public health for over 150 years.</p>
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>shows evidence of a significant human activity <input type="checkbox"/></li> <li>is associated with a significant activity or historical phase <input type="checkbox"/></li> <li>maintains or shows the continuity of a historical process or activity <input checked="" type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>has incidental or unsubstantiated connections with historically important activities or processes <input type="checkbox"/></li> <li>provides evidence of activities or processes that are of dubious historical importance <input type="checkbox"/></li> <li>has been so altered that it can no longer provide evidence of a particular association <input type="checkbox"/></li> </ul>
<b>B – Associative Significance</b> <i>An item has strong or special associations with the life or works of a person, or group of persons, of importance in the local area's cultural or natural history.</i>	<p>St Vincent's Hospital associative significance with the Sisters of Charity who established the hospital in 1857 and the Hospice for the Dying in 1890. The Sisters of Charity Health Service partnership is the largest non-government, not-for-profit health care provider in Australia.</p> <p>The associative significance is significant however it does not relate to the fabric of the existing SVPHS.</p>
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>shows evidence of a significant human occupation <input type="checkbox"/></li> <li>is associated with a significant event, person, or group of persons <input type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>has incidental or unsubstantiated connections with historically important people or events <input type="checkbox"/></li> <li>provides evidence of people or events that are of dubious historical importance <input type="checkbox"/></li> <li>has been so altered that it can no longer provide <input type="checkbox"/></li> </ul>

<sup>53</sup> Heritage Office 2001

<sup>54</sup> Heritage Office 2000

Criteria	Significance Assessment
	evidence of a particular association <input type="checkbox"/>
<b>C – Aesthetic Significance</b> <i>An item is important in demonstrating aesthetic characteristics and/or a high degree of creative or technical achievement in the local area.</i>	<p>Civil and Civic were the original Construction Company for the SVPH building. Civil and Civic no longer exist and are now part of Lend Lease.</p> <p>Jon Mitchell &amp; Associates of 17 Northcliff Street, Milson's Point were the original Architects who worked for Civil and Civic.</p> <p>The Project was a Design and Construct Project by Civil and Civic.</p> <p>The St Vincent's Private Hospital is within a group of major institutional landmark buildings with visual and functional connections to Green Park and surrounding heritage items and conservation areas.</p> <p>Various streets in the surrounding area are recognised as heritage streetscapes or are within conservation areas, such as Darlinghurst Road, Victoria Street, Barcom Avenue, Boundary Street, Burton Street and Oxford Street. The streets aesthetic values include street plantings, landmark and contributory buildings, significant vistas and its overall topography.</p>
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>shows or is associated with, creative or technical innovation or achievement <input type="checkbox"/></li> <li>is the inspiration for a creative or technical innovation or achievement <input type="checkbox"/></li> <li>is aesthetically distinctive <input type="checkbox"/></li> <li>has landmark qualities <input type="checkbox"/></li> <li>exemplifies a particular taste, style or technology <input type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>is not a major work by an important designer or artist <input checked="" type="checkbox"/></li> <li>has lost its design or technical integrity <input type="checkbox"/></li> <li>its positive visual or sensory appeal or landmark and scenic qualities have been more than temporarily degraded <input type="checkbox"/></li> <li>has only a loose association with a creative or technical achievement <input checked="" type="checkbox"/></li> </ul>
<b>D – Social Significance</b> <i>An item has strong or special association with a particular community or cultural group in the local area for social, cultural or spiritual reasons.</i>	<p>St Vincent's Hospital and Sacred Heart Hospice are likely to have social significance at a State level for the major role in the lives of generations of people, including local residents, former and current management and staff, and those who have come to be treated from throughout NSW, although this has not been assessed. The social significance of the Private Hospital is not such that it may not be altered and extended as any significance is associated with the use.</p>
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>is important for its associations with an identifiable group <input type="checkbox"/></li> <li>is important to a community's sense of place <input checked="" type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>is only important to the community for amenity reasons <input type="checkbox"/></li> <li>is retained only in preference to a proposed alternative <input type="checkbox"/></li> </ul>
<b>E – Research Potential</b> <i>An item has potential to yield information that will contribute to an understanding of the local area's cultural or natural history.</i>	<p>Any archaeological features or deposits within the subject site would be of research potential at the local level for their ability to provide information regarding the history of the site. Such information could relate to Aboriginal activities on the site during pre and post-contact, early European settlement, and the evolution of the hospital and domestic life within urban Darlinghurst during the 19<sup>th</sup> and 20<sup>th</sup> centuries.</p> <p>The site's movable heritage, inclusive of artefacts and historical records in the St Vincent's Hospital Archives, presents a holistic historical record that may be of research interest and interpretive value.</p>

Criteria	Significance Assessment
	The SVPHS site has been assessed as having no archaeological potential.
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>has the potential to yield new or further substantial scientific and/or archaeological information <input type="checkbox"/></li> <li>is an important benchmark or reference site or type <input type="checkbox"/></li> <li>provides evidence of past human cultures that is unavailable elsewhere <input type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>the knowledge gained would be irrelevant to research on science, human history or culture <input type="checkbox"/></li> <li>has little archaeological or research potential <input checked="" type="checkbox"/></li> <li>only contains information that is readily available from other resources or archaeological sites <input type="checkbox"/></li> </ul>
<b>F – Rarity</b> <i>An item possesses uncommon, rare or endangered aspects of the local area's cultural or natural history.</i>	The St Vincent's Private Hospital site is not considered to have any aspects that are rare to the area's cultural or natural history.
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>provides evidence of a defunct custom, way of life or process <input type="checkbox"/></li> <li>demonstrates a process, custom or other human activity that is in danger of being lost <input type="checkbox"/></li> <li>shows unusually accurate evidence of a significant human activity <input type="checkbox"/></li> <li>is the only example of its type <input type="checkbox"/></li> <li>demonstrates designs or techniques of exceptional interest <input type="checkbox"/></li> <li>shows rare evidence of a significant human activity important to a community <input type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>is not rare <input checked="" type="checkbox"/></li> <li>is numerous but under threat <input type="checkbox"/></li> </ul>
<b>G – Representative</b> <i>An item is important in demonstrating the principal characteristics of a class of NSWs (or the local area's):</i> <ul style="list-style-type: none"> <li><i>cultural or natural places; or</i></li> <li><i>cultural or natural environments.</i></li> </ul>	The St Vincent's Private Hospital building, erected 1976, is an example of a building of its period but is not considered to be of such representative value to warrant listing as an individual item.
<b>Guidelines for Inclusion</b> <ul style="list-style-type: none"> <li>is a fine example of its type <input type="checkbox"/></li> <li>has the principal characteristics of an important class or group of items <input type="checkbox"/></li> <li>has attributes typical of a particular way of life, philosophy, custom, significant process, design, technique or activity <input type="checkbox"/></li> <li>is a significant variation to a class of items <input type="checkbox"/></li> <li>is part of a group which collectively illustrates a representative type <input type="checkbox"/></li> <li>is outstanding because of its setting, condition or size <input type="checkbox"/></li> <li>is outstanding because of its integrity or the esteem in which it is held <input type="checkbox"/></li> </ul>	<b>Guidelines for Exclusion</b> <ul style="list-style-type: none"> <li>is a poor example of its type <input type="checkbox"/></li> <li>does not include or has lost the range of characteristics of a type <input type="checkbox"/></li> <li>does not represent well the characteristics that make up a significant variation of a type <input checked="" type="checkbox"/></li> </ul>

#### 4.3 STATEMENT OF SIGNIFICANCE: ST VINCENT'S PRIVATE HOSPITAL DARLINGHURST

St Vincent's Hospital overall has State historical significance as the first non-government hospital in New South Wales, being established by the Sisters of Charity in 1857 to provide free medical attention to the sick, poor and disadvantaged.

St Vincent's Hospital has State associative significance with the five original founding Sisters of Charity in Australia, after which several Hospital buildings have been named: Mother Mary John Cahill, Sister



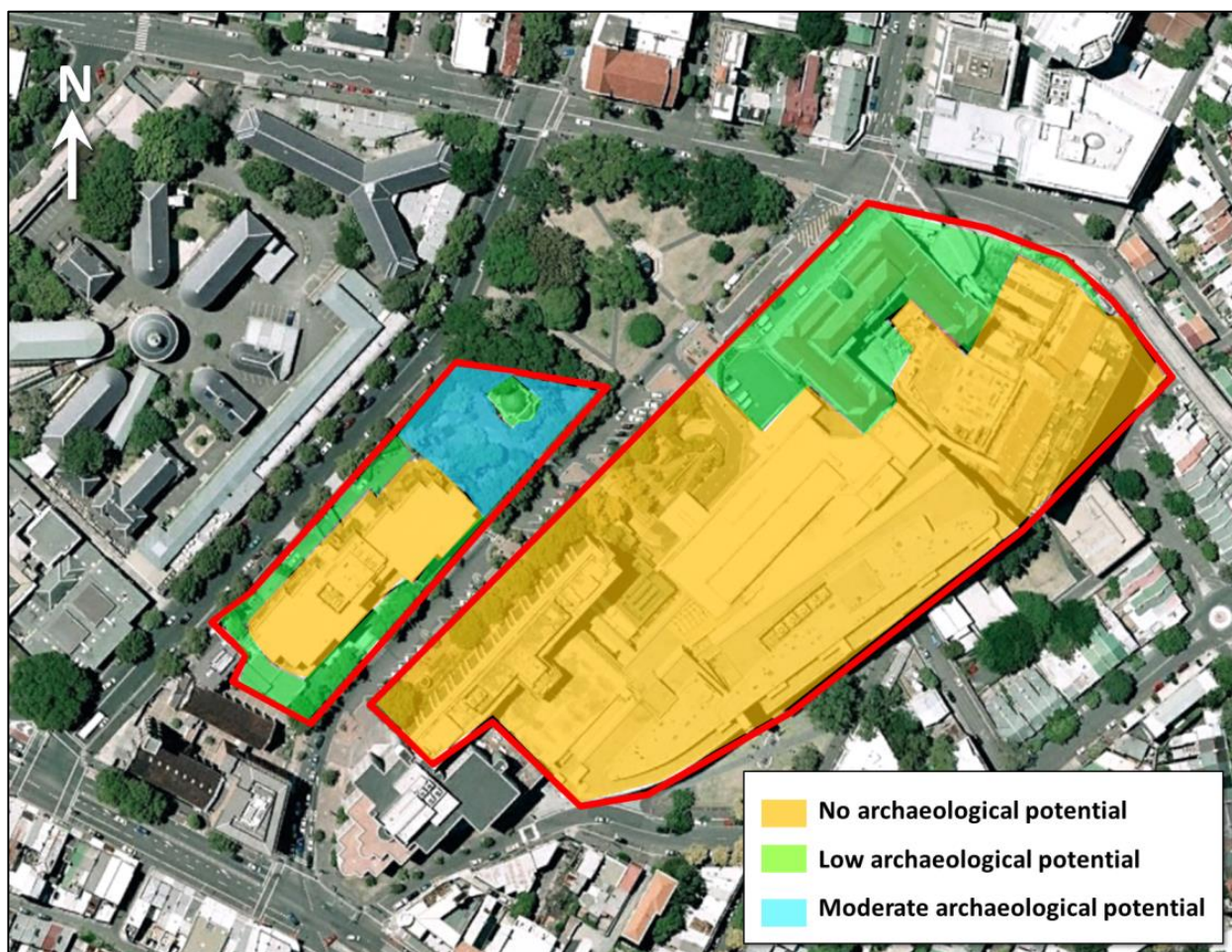
Mary de Sales O'Brien, Sister Mary Baptist De Lacy, Sister Mary Xavier Williams and Sister Mary Lawrence Cator. The Hospita is associated at the local level with various prominent architects responsible for their design, such as Wardell and Denning for the 1920s presentation of the De Lacy Building.

The site's historical layering demonstrates the hospital's development and expansion from a small hospital to the existing large institutional scale. There are significant vistas around the site to landmark buildings and Green Park, which contributes to the site's aesthetic significance at the local level. The heritage streetscapes in the surrounding area are also of aesthetic value for their street plantings, contributory buildings and significant vistas.

Although the site's social significance has not been assessed, the overall is likely to have social significance at a State level for the major role in the lives of generations of people, including local residents, former and current management and staff, and those who have come to be treated from throughout NSW.

The **St Vincent's Private Hospital Sydney** has no identified significance and although it was architect designed it is not considered to meet the threshold for aesthetic significance. The historic and social significance relates to the site as a whole and specifically the De Lacy building and certain built elements and moveable heritage however all earlier fabric on the subject site, including the terraces, was removed for the construction of the Private Hospital.

FIGURE 68 - LEVELS OF HISTORICAL ARCHAEOLOGICAL POTENTIAL WITHIN THE BROADER SITE



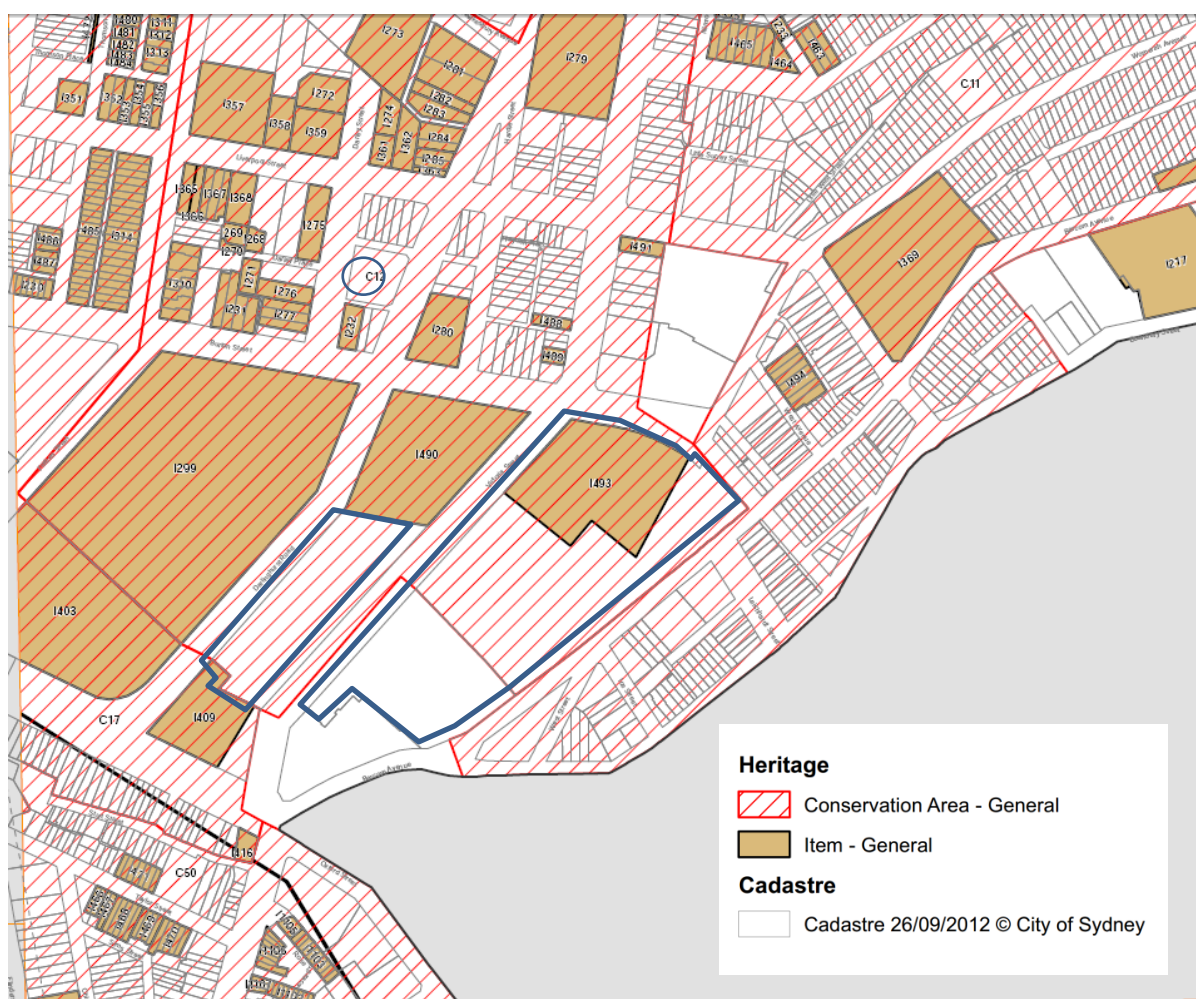
Map from Artefact Report, 2012, illustrating the archaeological potential of the site. Impact Assessment

## 4.4 HERITAGE LISTING

The St Vincent's Hospital site (SVH) is partly heritage listed under the Sydney Local Environmental Plan 2012, as shown on the heritage map below, having a heritage item and being in the Conservation Area, C12, and subject to the provisions of the Sydney Development Control Plan 2012, however the St. Vincent's Private Hospital site (SVPHS) is not listed and is not within a Conservation area in these instruments as it is excluded from the instruments. It has been accorded as having no archaeological significance by Artefact due to the high level of excavation of the site.

It is considered that if the building had been included in the DCP for the area it would have been coloured as detracting in its contribution to a conservation area in accordance with the associated buildings on the site, excluding the De lacy building, still extant, and the O'Brien building, now demolished.

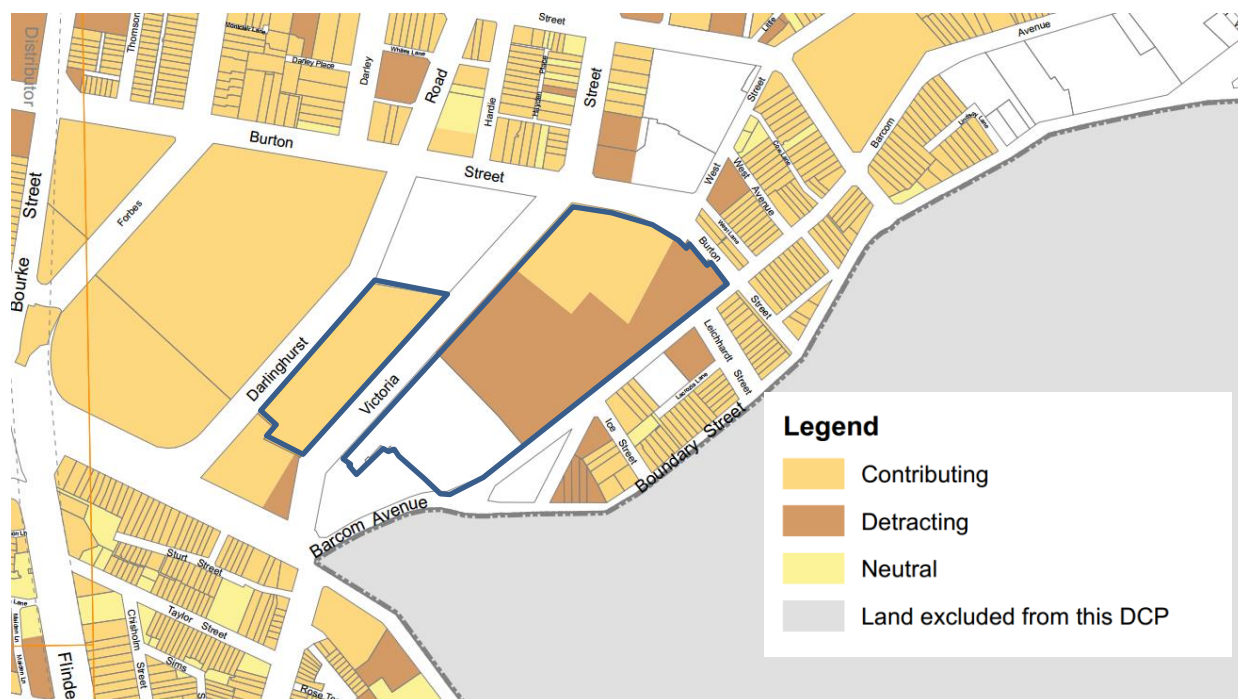
FIGURE 69 – SYDNEY HERITAGE MAP 2012 SHOWING SUBJECT SITE IN BLUE BORDER



[Source: Sydney LEP 2012, Sheet HER\_022]



FIGURE 70 – SYDNEY DCP 2012 CONTRIBUTORY MAP



[Source: Sydney DCP 2012, Contributory Map 022]

## 4.5 STATUTORY CONTROLS

### 4.5.1 SYDNEY LOCAL ENVIRONMENTAL PLAN 2012

The proposed works are addressed in the table below in relation to the relevant clauses in the LEP.

TABLE 2 – RELEVANT LEP CLAUSES

CLAUSE	DISCUSSION			
<p><b>5.10 Heritage conservation</b></p> <p><b>(2) Requirement for consent</b></p> <p>Development consent is required for any of the following:</p> <p>(a) demolishing or moving any of the following or altering the exterior of any of the following (including, in the case of a building, making changes to its detail, fabric, finish or appearance):</p> <p>(i) a heritage item,</p>	<p>The SVPHS site is not subject to heritage provisions as it does not contain a heritage item, It is in the vicinity of a number of heritage items and is adjacent to heritage conservation areas.</p> <p>It is adjacent to the C12 Conservation Area (East Sydney and Darlinghurst) and is adjacent to the C11 (Barcom Avenue) Conservation Area, C50 (Sydney LGA - Paddington) Conservation Area and the Woollahra LGA - Paddington Conservation Area.</p> <p>The heritage item on the adjacent site is specified in the LEP Schedule 5 as:</p> <table><tr><td>Darlinghurst</td><td>St Vincent's Hospital group including buildings and their interiors and fencing to Victoria Street</td><td>394–404 Victoria Street</td></tr></table> <p>The Inventory form in the NSW heritage database refers to the Main Building, known as the De Lacy building and the</p>	Darlinghurst	St Vincent's Hospital group including buildings and their interiors and fencing to Victoria Street	394–404 Victoria Street
Darlinghurst	St Vincent's Hospital group including buildings and their interiors and fencing to Victoria Street	394–404 Victoria Street		



	<p>O'Brien Wing.</p> <p>The O'Brien Wing is a six-storey brick building that was built in 2010 with four basement levels. It replaced the 1941 Outpatient Block that was also called the O'Brien Building, located in the courtyard of the De Lacy Building. The 1941 and 2010 buildings were named after Sister Mary de Sales O'Brien, one of the original founding five Sisters of Charity in Australia.</p> <p>The listing therefore actually only refers to the De Lacy building as the 1941 inter-war functionalist O'Brien Wing was demolished.</p>
(ii) an Aboriginal object,	There are no known aboriginal objects on the site.
(iii) a building, work, relic or tree within a heritage conservation area,	The site is not within a conservation area.
(b) altering a heritage item that is a building by making structural changes to its interior or by making changes to anything inside the item that is specified in Schedule 5 in relation to the item,	The site does not contain a heritage item.
(c) disturbing or excavating an archaeological site while knowing, or having reasonable cause to suspect, that the disturbance or excavation will or is likely to result in a relic being discovered, exposed, moved, damaged or destroyed,	The SVP HH site has been the subject of an archaeological assessment prepared by Artefact . The report assessed the potential of the subject SVPHS site and is illustrated in the map above under Section 4.4 'Statement of Significance'. The site comprises an area of 'No Archaeological Potential'.
(d) disturbing or excavating an Aboriginal place of heritage significance,	Not applicable
(e) erecting a building on land:	Not applicable
(i) on which a heritage item is located or that is within a heritage conservation area, or	
(ii) on which an Aboriginal object is located or that is within an Aboriginal place of heritage significance,	Not applicable
(f) subdividing land:	Not applicable
(i) on which a heritage item is located or that is within a heritage conservation area, or	Not applicable
(ii) on which an Aboriginal object is located or that is within an Aboriginal place of heritage significance.	Not applicable
<p><b>(4) Effect of proposed development on heritage significance</b></p> <p>The consent authority must, before granting consent under this clause in respect of a heritage item or heritage conservation area, consider the effect of the proposed development on the heritage significance of the item or area concerned. This subclause applies regardless of whether a heritage management document is prepared under subclause (5) or a heritage conservation</p>	<p>The subject proposal has been designed with regard to the effect on the heritage significance of the area. It has also had regard to the services required for a world class Private Hospital in the 21<sup>st</sup> Century. The impact on the locality is assessed under the City of Sydney Development Control 2012 provisions, below.</p>

management plan is submitted under subclause (6).	
<p><b>(5) Heritage assessment</b></p> <p>The consent authority may, before granting consent to any development:</p> <p>(a) on land on which a heritage item is located, or</p> <p>(b) on land that is within a heritage conservation area, or</p> <p>(c) on land that is within the vicinity of land referred to in paragraph (a) or (b),</p> <p>require a heritage management document to be prepared that assesses the extent to which the carrying out of the proposed development would affect the heritage significance of the heritage item or heritage conservation area concerned.</p>	This Heritage Impact Statement assesses the proposal.
<p><b>(6) Heritage conservation management plans</b></p> <p>The consent authority may require, after considering the heritage significance of a heritage item and the extent of change proposed to it, the submission of a heritage conservation management plan before granting consent under this clause.</p>	A CMP is not considered to be required for the SVPHS building.
<p><b>(7) Archaeological sites</b></p> <p>The consent authority must, before granting consent under this clause to the carrying out of development on an archaeological site (other than land listed on the State Heritage Register or to which an interim heritage order under the <u>Heritage Act 1977</u> applies):</p> <p>(a) notify the Heritage Council of its intention to grant consent, and</p> <p>(b) take into consideration any response received from the Heritage Council within 28 days after the notice is sent.</p>	<p>Sections 139-145 of the Heritage Act prevent the excavation or disturbance of land known or likely to contain relics, unless in accordance with an excavation permit.</p> <p>Refer separate report by Artefact for the Archaeological assessment.</p>
<p><b>(8) Aboriginal places of heritage significance</b></p> <p>The consent authority must, before granting consent under this clause to the carrying out of development in an Aboriginal place of heritage significance:</p> <p>(a) consider the effect of the proposed development on the heritage significance of the place and any Aboriginal object known or reasonably likely to be located at the place by means of an adequate investigation and assessment (which may involve consideration of a heritage impact statement), and</p> <p>(b) notify the local Aboriginal communities, in writing or</p>	<p>There are no sites registered under the NP&amp;W Act within the subject site.</p> <p>Refer separate report by Artefact for the Archaeological assessment</p>

in such other manner as may be appropriate, about the application and take into consideration any response received within 28 days after the notice is sent.	
<p><b>(9) Demolition of nominated State heritage items</b></p> <p>The consent authority must, before granting consent under this clause for the demolition of a nominated State heritage item:</p> <p>(a) notify the Heritage Council about the application, and</p> <p>(b) take into consideration any response received from the Heritage Council within 28 days after the notice is sent.</p>	Not applicable

#### 4.5.2 SYDNEY DEVELOPMENT CONTROL PLAN 2012

The proposed works are addressed in the table below in relation to the relevant provisions in the DCP.

TABLE 3 – DEVELOPMENT CONTROL PLAN

PROVISION	DISCUSSION
<p><b>Heritage</b></p> <p><b>Provisions</b></p> <p><b>3.9.1 Heritage Impact Statements</b></p> <p>(1) A Heritage Impact Statement is to be submitted as part of the Statement of Environmental Effects for development applications affecting:</p> <p>(a) heritage items identified in the Sydney LEP 2012; or</p> <p>(b) properties within a Heritage Conservation Area identified in Sydney LEP 2012.</p> <p>(2) The consent authority may not grant consent to a development application that proposes substantial demolition or major alterations to a building older than 50 years until it has considered a heritage impact statement, so as to enable it to fully consider the heritage significance of a building and the impact that the proposed development has on the building and its setting.</p> <p>(3) A Heritage Impact Statement is to be prepared by a suitably qualified person, such as a heritage consultant. Guidelines for the preparation of Statements of Heritage Impact are available on the website of the Heritage Branch, NSW Department of</p>	<p>The SVPHS site is not a heritage item</p> <p>This SVPHS site is not within a conservation area.</p> <p>Not applicable</p> <p>Complies</p>



<p>Planning at <a href="http://www.heritage.nsw.gov.au">www.heritage.nsw.gov.au</a>.</p> <p>(4) The Heritage Impact Statement is to address:</p> <p>(a) the heritage significance of the heritage item or the contribution which the building makes to the heritage significance of the heritage conservation area;</p> <p>(b) the options that were considered when arriving at a preferred development and the reasons for choosing the preferred option;</p> <p>(c) the impact of the proposed development on the heritage significance of the heritage item, heritage items within the vicinity, or the heritage conservation area; and</p> <p>(d) the compatibility of the development with conservation policies contained within an applicable Heritage Conservation Management Plan or Conservation Management Strategy, or conservation policies within the Sydney Heritage Inventory Report.</p> <p>(5) Where the site adjoins another local government area, the Heritage Impact Statement is to address the potential impact on adjoining or nearby heritage items or heritage conservation areas in the adjoining local government area.</p> <p>(6) Where the development application proposes the full or substantial demolition of a heritage item, or a contributory building within a heritage conservation area, the Heritage Impact Statement is to:</p> <p>(a) demonstrate why the building is not capable of retention or re-use;</p> <p>(b) include a statement from a quantity surveyor</p>	<p>Not applicable</p> <p>Not applicable. The design has been resolved to respond to the existing buildings on the site and the relationship of the overall hospital site to the surrounding conservation areas. The location and form of the proposed SVPH building is such that it has no direct impact on the surrounding areas and is a well resolved response to the existing site.</p> <p>Not applicable</p> <p>Not applicable</p> <p>The site is nearby the Paddington Conservation Area in the Woollahra LGA and within and adjacent to conservation areas within the City of Sydney LGA. The proposed building will not impact on the heritage significance of the Paddington CA. The height is moderated by the topography and the distance to the proposed new structures from streets nearby, such as Boundary Street, where there is virtually no impact, but the proposal is screened by existing buildings to the east of the SVPHS site, and the Paddington slopes, where the hospital buildings generally form part of the ridge top view. The proposal will be visible from the Darlinghurst Conservation area across Green Park. The massing of the SVPHS building will not diminish an understanding or significance of conservation areas in the vicinity. This site is now well recognised for its difference in scale and use to the surrounding conservation areas and these areas still remain discrete and protected in terms of their controls, their low scale and distance from the subject proposal. The proposed SVPHS on Victoria Street has been through a number of design iterations to achieve a well resolved design for the area. The overall design presents as clearly contemporary but with simple and restrained detailing.</p> <p>Not applicable</p>
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<p>comparing the cost of demolition to the cost of retention if the demolition is recommended primarily on economic grounds;</p> <p>(c) include a report by a suitably qualified structural engineer if the demolition is proposed on the basis of poor structural condition; and</p> <p>(d) include a pest inspection report if the building is a weatherboard building.</p> <p>(7) When giving consent to the full or partial demolition of a heritage item, a building in a heritage conservation area, or a building older than 50 years, Council may require photographic recording of the building as a condition of consent.</p>	
<p><b>3.9.3 Archaeological assessments</b></p> <p>(1) An archaeological assessment is to be prepared by a suitably qualified archaeologist in accordance with the guidelines prepared by the NSW Office and Environment and Heritage.</p> <p>(2) For development proposals in Central Sydney, refer to the Central Sydney Archaeological Zoning Plan to determine whether the development site has archaeological potential.</p> <p>(3) An archaeological assessment is to be submitted as part of the Statement of Environmental Effects for development applications affecting an archaeological site or a place of Aboriginal heritage significance, or potential archaeological site that is likely to have heritage significance.</p> <p>(4) An archaeological assessment is to include:</p> <p>(a) an assessment of the archaeological potential of the archaeological site or place of Aboriginal heritage significance;</p> <p>(b) the heritage significance of the archaeological site or place of Aboriginal heritage significance;</p> <p>(c) the probable impact of the proposed development on the heritage significance of the archaeological site or place of Aboriginal heritage significance;</p> <p>(d) the compatibility of the development with conservation policies contained within an applicable</p>	<p>Complies and is subject to a report by Artefact, under separate cover.</p>

<p>conservation management plan or conservation management strategy; and</p> <p>(e) a management strategy to conserve the heritage significance of the archaeological site or place of Aboriginal heritage significance.</p> <p>(5) If there is any likelihood that the development will have an impact on significant archaeological relics, development is to ensure that the impact is managed according to the assessed level of significance of those relics.</p>	
<p><b>3.9.4 Development of sites of State heritage significance or containing more than one heritage item</b></p> <p>(1) This provision applies to development that will introduce major changes to a heritage item identified in Schedule 5 of the Sydney LEP 2012 as being of State heritage significance or to a site containing more than one heritage item, if the development involves:</p> <p>(a) demolition that will result in a reduction of the building envelope of the heritage item by more than 35%;</p> <p>(b) an increase in the size of the building envelope of the heritage item by more than 20%; or</p> <p>(c) building over more than 20% of a heritage item's building footprint within the airspace above the item, but not within the airspace next to the item.</p> <p>(2) When considering an application for development to which this provision applies, the consent authority is to:</p> <p>(a) appoint a committee that includes heritage professionals to examine and advise on the merits of the proposal;</p> <p>(b) be satisfied that that committee has followed an appropriate public process for the purpose of that examination; and</p> <p>(c) consider the advice of the committee, but is not bound by the advice of the committee.</p> <p>(3) The consent authority may waive the requirement made by provision (2) if the development is the subject of a site-specific development control plan or a competitive design process.</p>	<p>Although the De Lacy building is acknowledged as having state significance on a number of criteria in the CMP it is not listed on the State Heritage Register and is registered as a local item in Schedule 5 of the Sydney LEP 2012.</p> <p>Analysis under this clause does not apply as the site does not relate to a Heritage Item.</p>



<p><b>3.9.6 Heritage conservation areas</b></p> <p>Buildings and sites within heritage conservation areas are identified on the Building contributions map as being contributory, neutral or detracting to the character and heritage significance of the heritage conservation area. The contribution of these buildings is based on studies carried out by heritage consultants for the City.</p> <p>(1) Development within a heritage conservation area is to be compatible with the surrounding built form and urban pattern by addressing the heritage conservation area statement and responding sympathetically to:</p> <ul style="list-style-type: none"> <li>(a) topography and landscape;</li> <li>(b) views to and from the site;</li> <li>(c) significant subdivision patterns;</li> <li>(d) the type, siting, form, scale, materials and details of adjoining or nearby contributory buildings; and</li> <li>(e) the interface between the public domain and building alignments and property boundaries.</li> </ul> <p>(2) New infill buildings and alterations and additions to existing buildings in a heritage conservation area are not to be designed as a copy or replica of other buildings in the area, but are to complement the character of the heritage conservation area by sympathetically responding to the matters identified in (1)(a) to (e) above.</p>	<p>The subject site is not included on the relevant Buildings Contributions map.</p> <p>The proposed new SVPHS building only occur on previously developed hospital sites. The area was previously occupied by terraced dwellings and these were demolished in 1976.</p>
<p><b>3.9.9 Detracting buildings</b></p> <p>Detracting buildings are buildings that are intrusive to a heritage conservation area because of inappropriate scale, bulk, setbacks, setting, design or materials. They do not represent a key period of significance and detract from the character of a heritage conservation area.</p> <p>(1) Development on sites containing detracting buildings is to improve the contribution of the site within the heritage conservation area.</p> <p>(2) Alterations and additions to detracting buildings are to:</p> <ul style="list-style-type: none"> <li>(a) remove inappropriate elements or features that are</li> </ul>	<p>Part of the subject site, which includes the subject SVPHS, has been excluded from the buildings map, however the adjacent buildings on the SVH site, being the O'Brien, Cahill, Cator, Aikenhead and part of the Xavier building have been designated as detracting on the site map. If included in the mapping it is assumed that the existing SVPHS would have been designated as detracting on the criteria used.</p> <p>The difficulty of the current classification for these buildings is that the buildings do not fit the characteristics of the surrounding low scaled areas primarily comprising terraces and low scaled interwar residential flat buildings. These buildings are actually not necessarily detracting on the large hospital site on which they are located. They are in fact contributing to the overall hospital site for a world class medical service. They should not be classified as contributing, or not, to the small lot conservation areas with particular heritage characteristics.</p>

intrusive to the heritage significance of the heritage conservation area; and	This is an inherent difficulty with this classification as it does not take account of well-designed buildings, such as the Kinghorn Cancer Centre, that contribute to the architectural quality of the area but are not heritage items in their own right so they are classified as 'detracting' in conservation area terms. This is the issue on such important institutional and medical sites where new architecture can contribute to the local area aesthetically but not in terms of the historic character established 80 to 150 years ago.
(b) respect the prevailing character of the area and street in terms of bulk, form, scale and height.	It is considered that the new building will not be detracting in architectural quality- it will in fact contribute to Sydney's history of hospital architecture - however it does not have a relationship in scale and form to the 'contributory items' in the neighbouring conservation areas but this is an accepted situation with regard to the overall site.  The controls pertaining to conservation areas with respect to materials are therefore not relevant except for the appearance of the overall scheme in relation to impact on the vicinity. The proposal for the SVPHS is considered suitable for the reasons outlined above in 3.9.6.

## 4.6 HERITAGE OFFICE GUIDELINES

The proposed works are addressed in relation to relevant questions posed in the Heritage Office's 'Statement of Heritage Impact' guidelines

TABLE 4 – RELEVANT QUESTIONS

QUESTION	DISCUSSION
The following aspects of the proposal respect or enhance the heritage significance of the item or conservation area for the following reasons:	The subject proposal does not impact on the heritage significance of the site. The site is well separated from the heritage items in the vicinity and forms part of the overall hospital precinct without any direct relationship to contributory buildings in the conservation areas.
The following aspects of the proposal could detrimentally impact on heritage significance. The reasons are explained as well as the measures to be taken to minimise impacts:	There are no other buildings or places directly affected by proposal, except that it is visible from the adjoining from Green Park. However, it is a Hospital Precinct and this precinct has been changing since the beginning of the 20th C – with an expectation that the site will provide world class medical services. The scale and bulk of the proposal will not diminish the appreciation of buildings and precincts in the vicinity.
The following sympathetic solutions have been considered and discounted for the following reasons:	The design process has been a professional one which has involved urban design, architecture, planning and heritage expertise- along with traffic and other specialists - and the process has considered the impact in terms of the opportunities of new facilities within this sensitive location.
<b>Demolition of a building or structure</b> Have all options for retention and adaptive re-use been explored? Can all of the significant elements of the heritage item be kept and any new development be located elsewhere on the site? Is demolition essential at this time or can it be postponed in case future circumstances make its retention and conservation more feasible? Has the advice of a heritage consultant been sought? Have the consultant's recommendations been implemented? If not, why not?	There is no demolition planned for a heritage item.
<b>Partial Demolition &amp; Major partial demolition &amp;</b>	There is no demolition of identified heritage fabric or

QUESTION	DISCUSSION
<b>Minor additions &amp; Major additions</b>	alterations or additions to this fabric in this application.
<p><b>New development adjacent to a heritage item</b></p> <p>How does the new development affect views to, and from, the heritage item?</p> <p>What has been done to minimise negative effects?</p> <p>How is the impact of the new development on the heritage significance of the item or area to be minimised?</p> <p>Why is the new development required to be adjacent to a heritage item?</p> <p>How does the curtilage allowed around the heritage item contribute to the retention of its heritage significance?</p> <p>Is the development sited on any known or potentially significant archaeological deposits?</p> <p>If so, have alternative sites been considered? Why were they rejected?</p> <p>Is the new development sympathetic to the heritage item?</p> <p>In what way (e.g. form, siting, proportions, design)?</p> <p>Will the additions visually dominate the heritage item?</p> <p>How has this been minimised?</p> <p>Will the public and users of the item, still be able to view and appreciate its significance?</p>	<p>The development is separated from the De Lacy building by other St Vincent Hospital buildings and the application involves changes to non-significant fabric. There is no impact on heritage items in the vicinity.</p>



## 5 Conclusion and Recommendations

The proposal relates to the upgrading of the SVPHS and is assessed as being suitable in heritage terms.

The proposal has taken into account the significant elements on the site, including the brick and stone walls and the setbacks from important local items such as Green Park.

This development will be visible from within and without the precinct. It is considered that the changes proposed are acceptable within the parameters of the CMP and the controls for heritage in the City of Sydney. The issue for heritage is whether community heritage assets are diminished in community appreciation terms. It is concluded that although changed the SVPHS proposal will not diminish the heritage significance of Darlinghurst and Paddington or the items in the immediate vicinity.

The proposed external design of the hospital building will be well resolved and has had regard to the existing development in the neighbouring conservation areas by the design and location of the proposed new development.

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[Note: Some government departments have changed their names over time and the above publications state the name at the time of publication.]





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