



27 September 2019

Christine Kelly
Suite 2.14, 55 Miller Street
Pymont NSW 2009

Dear Christine,

Thank you for the opportunity to review the above project. Please find below a summary of advice and recommendations arising from the design review session held on Wednesday 11 September 2019.

Please note that this letter of advice relating to the SDRP will be distributed to the meeting attendees.

For the next SDRP, the design team must provide clear architectural drawings, with options shown using consistent scale, drawing type and style to enable ready comparison by the panel. In future presentations, neighbouring properties must be shown in plans, sections and all 3D views.

The design team's stated objective of improved legibility and wayfinding is not manifest in the current proposal. Retention and modification of Hotham House will help promote a sense of main entrance and address for the hospital to Hotham Road and is supported by current planning which uses a north south 'street' axis to connect to the northern mental health wing and the southern wing of the hospital.

The following recommendations relate to design considerations for the hospital, site and future stages of development:

We support:

- The scale of the proposed building to the north and its relationship to the neighbouring residential buildings.
- Overall volume and bulk of the proposed building – however a more integrated approach to context, material and formal references to local character and further articulation to address internal amenity (including daylight, outlooks, ventilation, orientation).
- Development of the veranda typology as a circulation device and as a shading element to promote passive thermal comfort.
- The retention and reuse of Hotham House.

Ongoing design development should address:

- Wayfinding throughout the site, both internally and externally, should be legible, simple and clear. Internally this would suggest corridors with natural light introduced at key junctions and at termination of axes, and

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externally a clear architectural language which indicates entries and destinations.

- A hierarchy of entries should be established using the landmark Hotham House to establish a principle identity and address.
- Clear internal circulation and orientation through rationalization of planning – consider simplifying main axes into a north/south and an east/west cruciform.
- Careful location of lifts and stairs in relation to the program of the floor plans. Open ended corridors with natural light and open stairs and voids connecting floors are encouraged.
- Internal courtyards further developed with a Landscape Architect for enhanced planting and usable, attractive respite spaces for patients, visitors and staff.
- Present clear circulation diagrams through the site, covering regular pedestrians and vehicles, therapeutic, visitor and emergency traffic.
- Corner of the building on Hotham Road and President Ave requires careful consideration of bulk, scale, materiality and built form. Precedent studies of successful corner buildings are encouraged.
- Analysis of the established suburban local character to develop the architectural language of the building, including roof forms, window proportions and styles, material palette and surface articulation.
- Separation of staff and patient carparking to rationalise arrival points within the hospital.
- Car parking, while a critical aspect of the brief, should not be allowed to drive the overall site planning strategy, but rather serve the broader movement needs of visitors, staff and patients.
- Provide tertiary street access to the campus for pedestrians arriving from all directions and by all transport modes.
- A tree retention and replacement plan to demonstrate canopy and green open space strategy. Where possible, established trees should be retained
- Landscape Architect to attend all SDRP sessions in future.
- A statement on the buildability of the proposed building and evidence of early structural engineering rationale to support planning approach from basement to roof.
- Providing usable external spaces and opening the campus for passive use by the local community.

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We acknowledge the design team requested more time to prepare for the first SDRP and that some documents were not complete. We hope the opportunity for the panel to comment early has been valuable to the design development process.

For the next SDRP, it is requested that the planning strategy be presented clearly with consistent, clear drawings with regard to the advice and recommendations above.

We trust this information is helpful and look forward to seeing the proposal as it develops.

Sincerely



Rory Toomey
Principal Design Excellence

Meeting Attendees:

Stephen Phillips	Imagescape Design Studios
David Wenkart	Macquarie Health Corporation
Christine Kelly	Image Scape Design Studios

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