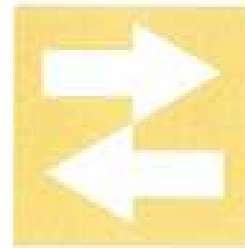


Appendix J – Traffic Report (O'Brien)

URaP-TTW Pty Ltd



Traffic

Traffic and Parking Report for O'Brien Building - Burton Street, Darlinghurst

for St Vincent's Hospital

19 September 2006

Job No: 061383 UT

URaP – TTW Pty Ltd Consulting Engineers ACN 101 643 010
L3, 48 Chandos Street St Leonards NSW 2085 PO Box 738 Crows Nest 1585
T 61 3 9602 1433 F 61 3 9602 4040 urap@ttw.net.au www.ttw.com.au

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1 INTRODUCTION

1.1 Background

The St. Vincent's and Mater Health Sydney Darlinghurst Campus is a dominant feature of the Darlinghurst area and functions as one of the major Hospitals precincts within the Sydney Metropolitan area.

The relocation of mental health and associated services onto the St Vincent's site from Caritas (into the area currently occupied by the O'Brien building) was identified as the preferred strategy by the Department of Health during 2005. This strategy provides for a new building to be developed on the O'Brien site with funding provided partially through the State Capital Works Program and partially from sale of the existing Caritas site in Burton Street, Darlinghurst.

The proposal is to accommodate mental health, alcohol and drug, and community health services reflecting a new integrated model of care. This is to be achieved within a new state-of-the art facility on the main hospital campus, in the location currently occupied by the O'Brien Building (which is to be demolished).

The main concerns of this study relate to the provision of adequate and appropriate parking facilities and vehicle access to and from the proposed new O'Brien Building.

1.2 The Study Area

The Study Area is bounded by Barcom Avenue, Victoria and Burton Streets as shown in Figure 1.

The site is located at the north-east corner of the St Vincent's Hospital precinct and is bounded by Burton Street and Barcom Avenue on its northern and eastern side, respectively.

The existing project building includes:

- A nine storey building with total function area of some 11,000m²
- Two driveways along Burton Street and one access lane via Barcom Avenue
- Parking area for some 30 vehicles within the site.

1.3 Scope of the Report

The report is divided into four sections, following the Introduction.

- Section 2; covering the existing conditions.
- Section 3; covering the development proposal.
- Section 4; containing the summary & conclusions, and
- Appendices; setting out data used in the study.

2 EXISTING CONDITIONS

2.1 Project Site

Currently, the site forms part of the St Vincent's Hospital campus that provides various services related to mental health, drug and alcohol and community health.

The historical data indicates a work force of some 450 personnel and some 200 attendance of outpatients per day.

2.1 Area Travel Characteristics

The travel characteristics of the site's population are based on extensive travel surveys which were carried out by the Transport Data Centre (Department of Infrastructure and Planning, 2001) for various areas within Metropolitan Sydney.

The results of this survey revealed that the level of car use (car driver) associated with journey to work (JTW) trips in Sydney CBD is 15.7% since the majority of JTW trips take place by public transport. It is important to note that this category of car use (i.e. car driver) has decreased from 20.4% in 1991 to 15.7% in 2001, based on data obtained from the Transport Data Centre.

The other available data to show travel pattern for the area is from the community profile for Darlinghurst (source: City of Sydney, Community Profile). This document indicates the level of car use for JTW in the Darlinghurst area is 20.7%.

Considering the characteristics of the development site and its proximity to public transport and the profile of its employees, it is considered that the use of the Sydney CBD mode split would be most representative of the development site.

However, this traffic report has used a mode split of 30% to assess traffic generation to and from the site as a worst case scenario.

2.3 Existing Traffic and Parking Conditions

2.3.1 Approach Routes

The major approach routes to the project site are from Burton Street, Victoria Street and Barcom Avenue. The immediate vehicular access to the site can be gained via Barcom Avenue and Burton Street.

Burton Street is a main road, which also provides a major approach route to the site. Burton Street has four lanes with an average traffic volume of some 7,500 vehicles per day (RTA-Data Centre).

Victoria Street is restricted to a one-way direction (north to south) for vehicular travel. Victoria Street carries 13,000 vehicles per day while Darlinghurst Road, a complementary parallel road that has a one-way traffic movement from south to north carries about 12,000 vehicles per day.

The intersection of Victoria Street with Burton Street is controlled by traffic signals. Pedestrian crossings are provided as part of the traffic signals.

Barcom Avenue forms the eastern boundary of the site and has a one-way traffic movement from south to north. The nature of the street is generally residential with on-street parking along its side. Barcom Avenue has a traffic volume of about 1000 vehicles per day.

Intersection Operation

The adequacy of an intersection's capacity is judged according to whether or not it can physically and operationally cater for the traffic using it.

The performance of the intersections has been assessed using the intersection modelling software INTANAL. This model provides parameters for the performance of an intersection, including the degree of saturation (DoS) and the average delay per vehicle.

INTANAL provides an accurate and consistent guide to the performance of an intersection under various given different traffic flow scenarios.

Satisfactory operation of an intersection would normally continue up to a DoS of 0.80 to 0.85, which is a Level of Service (LoS) "C". At this LoS, operating speeds are still reasonable, and acceptable delays are experienced. LoS "A" and "B" represent a "very good" and "good" intersection performance respectively.

The recommended criteria for evaluating capacity of intersections are shown in Table 2.1.

Table 2.1 Criteria for Evaluating Capacity of Intersection Operation

Level of Service	Degree of Saturation	Average Delay (Sec/Veh)
A/B very good operation	less than 0.80	0-28
C satisfactory	0.80 to 0.85	29-42
D poor but manageable	0.85 to 0.90	43-56
E/F bad, extra capacity required	over 0.90	57 to >70

Intersection counts at intersection of Burton and Victoria Street in the vicinity of the site have been conducted and the results of this survey are shown in Appendix A.

Accordingly, an assessment of this intersection has been carried out. The results of this assessment indicate that the intersection operates at a good level of service (please see Appendix A, for definition). The results of this analysis are shown in the Table 2.2.

Table 2.2 Existing Intersection Performances

Intersection Burton and Victoria Streets	AM	PM
Average Delay	17.4	12.4
Highest Delay	30.1	17.0
Degree of Sat.	0.71	0.67
Level of Service	B	B

2.3.2 Parking

The streets surrounding the project site such as Burton and Victoria Streets provide time restricted on-street parking.

An observation of on-street parking showed that most streets in the vicinity of the site are being well utilised while period parking spaces are consistently available during the day. There are a total of some 7 time-restricted (2 hour) spaces along Burton Street, near to the project site which are generally used during the day.

Due to the characteristics of the area i.e. parking restrictions (such as residential permit parking schemes) and its close proximity to public transport facilities, the demand for parking is limited to short stay parkers or passing through traffic. This can be observed by the parking activities within the surrounding streets to the site (such as Burton and Victoria Streets and Darlinghurst Road) that while there is a consistent demand, some spaces are still available for on-street parking.

2.4 Public Transport

The study area is well serviced by public transport. Kings Cross Station is the closest rail access to the Study Area, located at about 5 to 10 minutes walking distance from the project site.

There are numerous bus routes that service the area including Bus Route 389 along Burton Street. A list of bus routes servicing the area is shown in Table 2.4 (a map of bus routes is also available in Appendix A).

Table 2.4 Bus Routes Services

ROUTE No.	CONNECTING	SERVICES PER WEEK
200	Bondi Junction to Chatswood	7 Day
311	Railway Square to City	7 Day
323	Watson Bay to Circular Quay	7 Day
389	Dover Heights to Martin Place	7 Day

2.5 Pedestrian Facilities

The streets within the study area in the vicinity of the development site all have footpaths with ramps for wheelchair access.

Pedestrian crossings are provided at the following signalised intersections:

- Victoria and Burton Streets
- Darlinghurst Road and Burton Street
- Victoria and Liverpool Streets
- Liverpool and West Streets

3 PROJECT CONCEPT PLAN

3.1 Future Population

The new O'Brien Building will accommodate a number of mental health, alcohol and drug and community health related services that currently are taking place in the vicinity of the site and/or have been as part of the existing O'Brien Building.

It is envisaged that the new complex will operate more efficiently by centralising all facilities in one location. Accordingly, a similar level of workforce is anticipated for the site.

The information on future activity of the site provided by the Hospital for the O'Brien Building redevelopment project indicates that a total of some 200 staff will be employed at the site with some 360 outpatient attendance per day.

3.2 Project Proposal

The proposed total functional area for the building comprises of a gross floor area (GFA) of 7,376 m².

The proposal provides 228 basement car parking over four levels (each with about 57 cars).

The carpark access to the site will be provided via Burton Street. It is envisaged that the current access to the current courtyard adjacent to the site from Barcom Avenue will be restricted to only occasional/special use access (Hospital Transport Services will continue to use this area) . No vehicular connection between Barcom Avenue and Burton Street will be accommodated.

Service vehicles access and delivery will be via the existing loading dock and access point at the Aikenhead building.

All the emergency (e.g. Fire Brigade) access to the site will be maintained per existing situation.

3.3 Parking

A total of 228 parking spaces are proposed as part of the new O'Brien Building. The parking area will be used by staff only.

The investigation of the existing situation also revealed that most visitors to the area use public transport as their mode of transport while service vehicles and couriers continue to use motor vehicles.

It should be noted that:

- Currently the site provides a limited number of parking for staff use.
- The majority visitors/outpatients to the area using mental health, drug and alcohol and community health related services use public transport or use parking facilities (such as on-street parking or pay off-street parking) within the area.
- The main users of the new building are already within the area using the current health related facilities. Therefore the new O'Brien Building would not generate a higher demand for parking within the area (near to St Vincent's Hospital campus).
- The new O'Brien Building complex will provide more efficient services which will result in a lower number of attendance (outpatients) per day and a lower staff number.

As mentioned earlier, the proposed parking provision will be used by staff only and this would provide an adequate level of parking for staff as well as work vehicles related to health services.

It is anticipated that a portion of staff (out of 200) will be using public transport. Therefore, the proposed 228 parking spaces will meet the demand of the new facility. This level of parking provision would relieve some parking demand from other areas (such as the main St Vincent's Hospital building) that could provide parking for visitors and outpatients within the hospital area.

Due to the site's physical constraints, the proposed parking arrangement will involve some stack parking. However, since the carpark is mainly used by staff and work related vehicles such measure will not affect the functionality of the carpark.

3.4 Access

The main pedestrian access to Site will be from Burton Street.

The vehicular access to the site will also be from Burton Street while the existing access from Barcom Avenue will be maintained but downgraded to a limited use for occasional/special services.

Bus stops in the vicinity of the site provide public transport facilities to and from the site. Kings Cross Train Station is also located within a short walking distance to the site.

The site is designed on the basis of best practice and current guidelines, catering for disabled access and parents with prams.

The vehicular access to the site is via Burton Street and will be restricted to "left-in" and "left-out" only.

The proposed access strategy will have no adverse impact on Barcom Avenue or residential streets in the vicinity to the site.

The main directional approach routes to the site will be to Burton Street from Kings Cross Road/Nield Avenue or Oxford Street/Darlinghurst Road.

Traffic management measures have also been considered to ensure minimal vehicular traffic conflict at the entry and exit to the site. A concept plan is shown in Figure 3.

Access points to the car park will be controlled by a boom gate during business hours and a security gates during after hours away from the point of the entry to the site. The driveway will have a 7.0 metre width in accordance with Council's code and the Australian Standards.

3.5 Impact of the Development

The total number of staff will be similar to the current situation. The additional vehicular traffic generation from the development site is related to the number of staff who drive a car to work and those who will be dropped off/picked up to/ from the work and visitors/outpatients at the new O'Brien Building

This will result in an additional maximum 50 vehicle trips per peak hour. This is based on the following:

- Number of staff at the new site = 200
- Number of visitors to the site = 360
- Percentage of car use = 20.7% for 'car driver' + 2.7% for 'car passenger' = 23.4% (based on journey to work data from *City of Sydney*)
say using 30% as a conservative measure
- Staff Traffic generation = $0.30 \times 200 = 60$ vehicle trips on a 2 hour peak arrival or departure
- Visitors to the site = $0.30 \times 360 = 108$ vehicle trips during a day

Considering a two hour peak period and taking into account that not all staff start at the same time, this is equivalent to some 30 vehicle trips per peak hour. Similarly arrival and departure of visitors take place during the day, say 6 hours and this will result in some 20 vehicle trips per peak hour.

This level of vehicle traffic would have a minimal impact on the road system and the intersections' operation of the area. This is because, the number of approach routes to the site and its distribution during a one-hour period is only about one car per every 1 minute. Therefore, the intersections surrounding the site will continue to operate at a good level of service. The intersection of Victoria and Burton Streets will continue to operate at Level of Service "B" (i.e. 'good', please see Appendix A) with average delay of 19.0 seconds/vehicle.

Table 3.1 Future Intersection Performances

Intersection Burton and Victoria Streets	AM	PM
Average Delay	19.0	14.4
Highest Delay	35.0	21.1
Degree of Sat.	0.78	0.68
Level of Service	B	B

It should be noted that the current level of traffic is similar within the area because the new development provides the same facilities as the current uses.

The total parking demand for the site will be accommodated with the provision of 228 spaces. This measure will assist with reducing the

current parking demand for the area within the nearby carparks and street parking.

The on-street parkers consists of some vehicles parked by residents and visitors to other establishments in the immediate vicinity of the site.

The additional total peak hourly traffic would be in the order of some 50 vehicles for a worst case scenario.

This level of traffic is well within the road and intersection capacity of the street system in vicinity of the site and would have a minimal impact on the operation of the road network.

The proposal allows vehicles to enter and exit the site in a forward direction. The driveway area would allow for adequate visibility for entering and emerging drivers.

As noted earlier, signalised pedestrian crossings are available at intersections of Burton Street with Victoria Street and Darlinghurst Road providing a safety for pedestrian crossing the streets. Pedestrian network is well established as part of the street system.

3.6 Points of Consideration

The following points address the relevant key issues with respect to traffic and transport aspects of the proposed project.

- The assessment of the traffic impact on the road network and the expected traffic generation from the proposed project are analysed and detailed as part of this report.
- The proposed project involves the redevelopment of the existing facilities at the current site. It is expected that the future activities on the site will be similar to its existing operation.
- The Impact of vehicular traffic on the street system will be minimal due to the low usage of cars among staff. Similarly, parking demand for the site will also be low. However, it is envisaged that the proposed on site parking will meet an appropriate demand for the development. It is important to appreciate the nature and characteristics of the proposed development (as a health care related facility) where some staff and visitors utilise the site not on a regular and 8 – 5 basis but on staggered hours.

- > The proposed access strategy for the site minimises the use of Barcom Avenue and residential streets in vicinity to the site.
- > **Consultation** with RTA and Council's representatives with regard to the proposal and its access arrangement took place on Tuesday 28th August 2006 at Council's office (City of Sydney). Both Council and the RTA agreed with the access arrangement scheme off Burton street (in concept). They raised no major issues. A copy of concept drawing is shown in **Appendix B**.
- > The proposed master plan for the project provides an integrated land use and transport strategy not only to satisfy the current initiatives (by governmental instruments) but to ensure workable and efficient operation at the site.
- > Appropriate incentive schemes are considered by the Hospital management to encourage higher use of public and active transport (e.g. Introduction of higher parking fees).
- > The project contains the following characteristics which are in accordance to SEPP 66 principles.
 1. The project site is located in the Sydney CBD.
 2. The site has high accessibility to public transport. Buses provide services at the vicinity to the site (within walking distance) while a train station is located about 400 m from the site.
 3. The project site is located in an area with commercial and retail land uses (including food supermarket). This would reduce the level of daily trips to other destinations by staff and visitors to the site. Accordingly, multi-purpose trips could take place as part of the staff daily journey to work trips.
 4. Ample transport choices are available for the site's patrons and staff. These include: bus, train, bicycle, walk, private car and taxi. Bicycle storage areas will be provided at appropriate locations within the project site.
 5. A safe and efficient access for all modes of transport has been catered as part of the proposals. A "kiss and ride" facility could be provided as part of the "No Parking" restrictions west of the proposed driveway at an access point along Burton Street.

4 CONCLUSION

The approach routes to the site are Burton Street and Barcom Avenue. These roads have a satisfactory level of service and will continue to have a similar level of service once the proposed precinct is completed.

The vehicular accesses to and from the site will be mainly via Burton Street with limited use of Barcom Avenue (less use than its existing situation).

The access to the site from Burton Street will be limited to "left in" and "left out". The access layout is in accordance with the Roads and Traffic Authority's Guidelines, Australian Standard and Council's Code.

It has been estimated that 50 vehicles during a peak hour could be generated by the proposed development. Thus this level of vehicular traffic resulting from the subject development will not be significant and the road network will continue to have good operational characteristics.

The proposed development provides a total of 228 parking spaces to accommodate the parking demand.

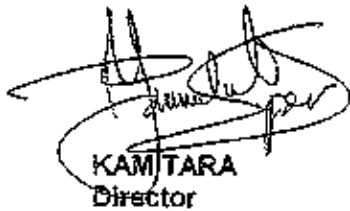
Bus routes provide numerous services to the development site in addition to Kings Cross Train Station which is situated within a short walking distance to the project site.

Pedestrian facilities, access and footpaths are available within the route network in the vicinity to the development site. Pedestrian amenities such as ramps and access ways also are included as part of the proposal.

The carpark layout will be reviewed during the design development process and amendments will be made to improve its functionality within the constraints of the site dimensions and structural elements. Consequently, the dimensions of spaces should be substantially compatible with those given by *Australian Standards 2890.1 Parking Facilities – Off-street Parking* that would offer a high level of service to users.

It is recommended, that bicycle parking facilities be provided as part of the project proposal.

Prepared by:
URaP-TTW PTY LTD



KAM TARA
Director

APPENDIX A

Figure 1 Locality of Site

Burton Street, Darlinghurst, NSW.



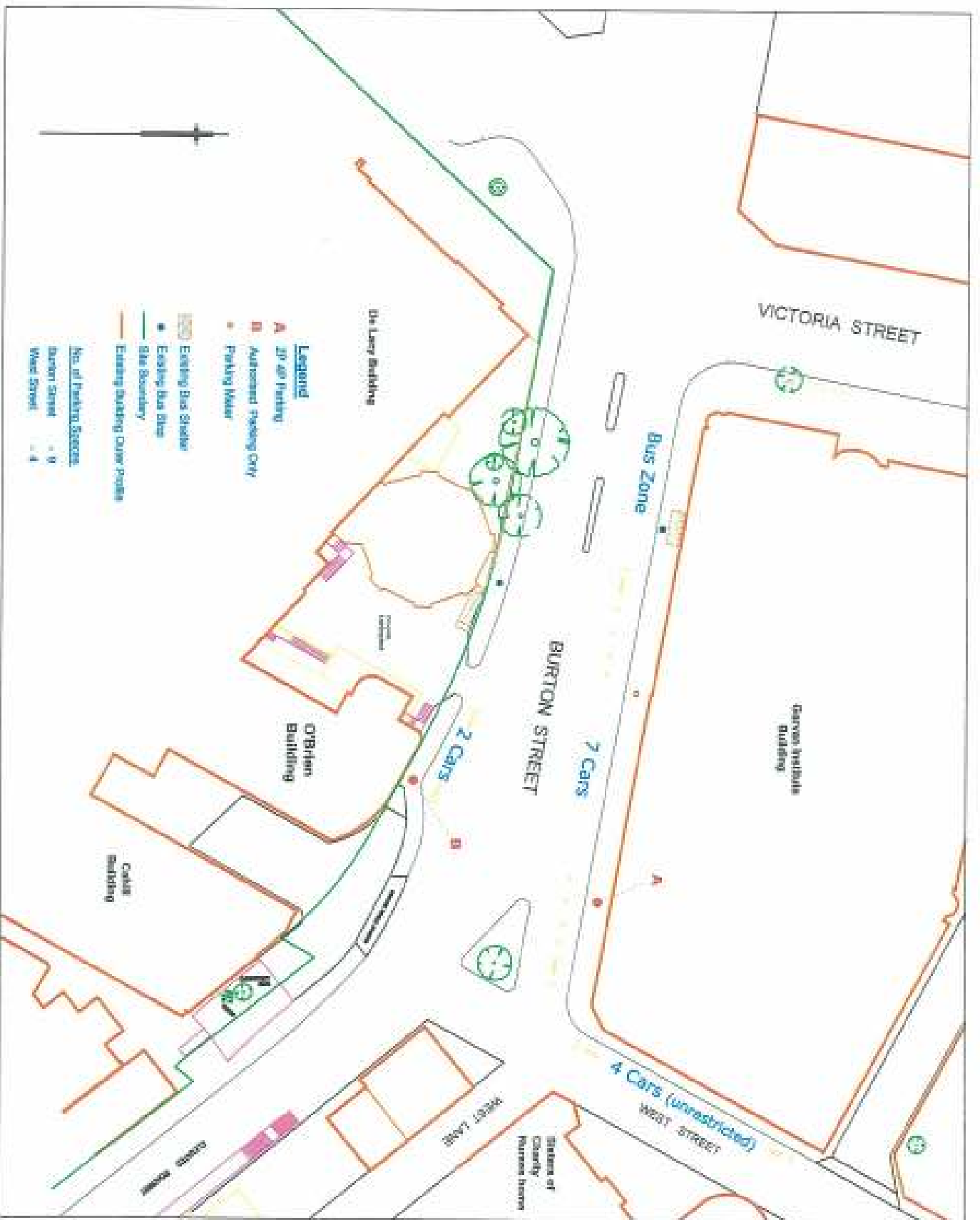


Fig.2 Existing Condition(Parking) for O'Brien Site

APPENDIX A

Intersection Level of Service

The adequacy of the capacity of an intersection is judged by whether it can physically and operationally cater for the traffic using it.

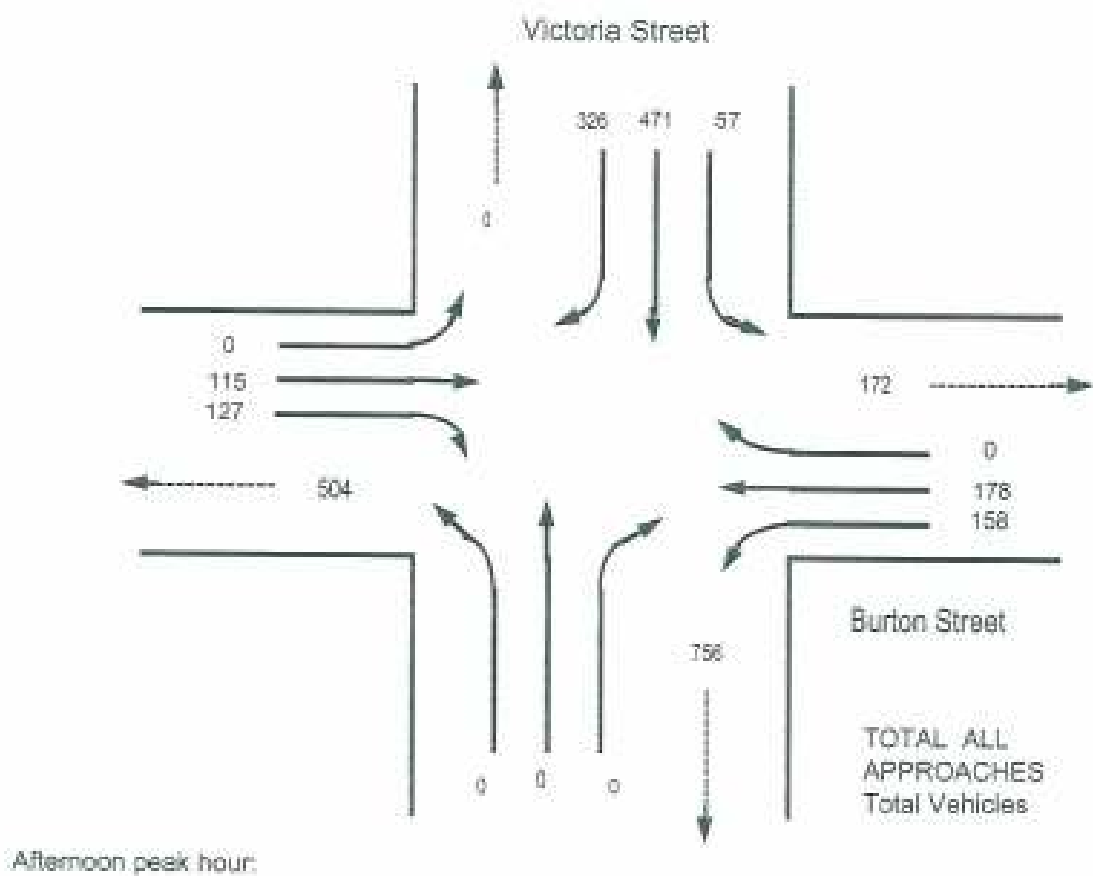
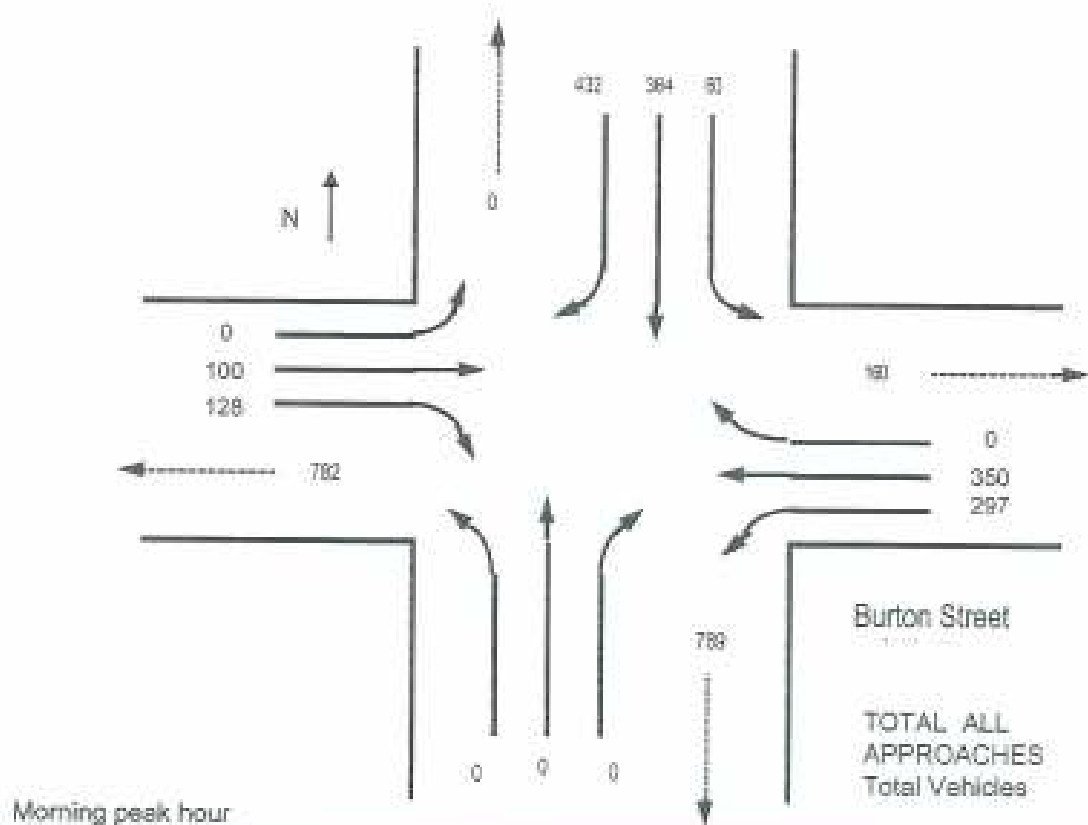
The performance of the intersections have been assessed using the intersection modelling software INTANAL. This model provides parameters of the performance of an intersection including the degree of saturation (DoS) and the average delay per vehicle. INTANAL does provide an accurate and consistent guide to the performance of an intersection under the given different traffic flow scenarios.

Satisfactory operation of an intersection with signals would normally continue up to a DoS of 0.80 to 0.85 which is a LoS C. At this LoS, operating speeds are still reasonable and acceptable delays are experienced.

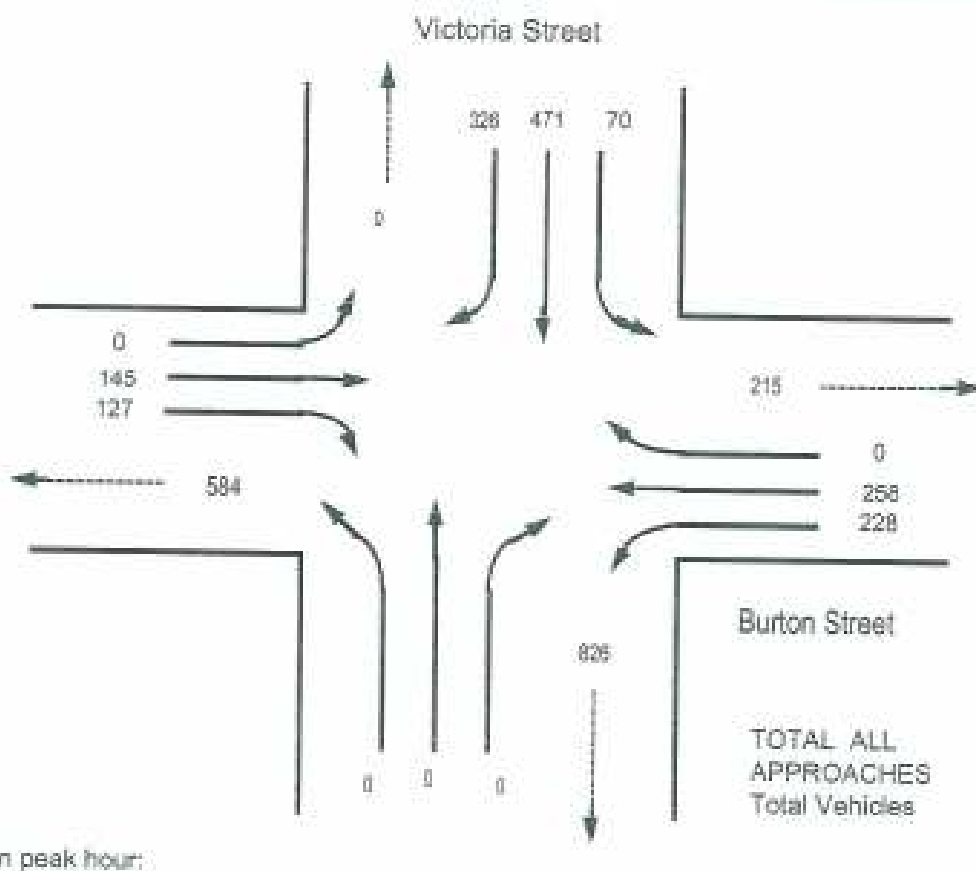
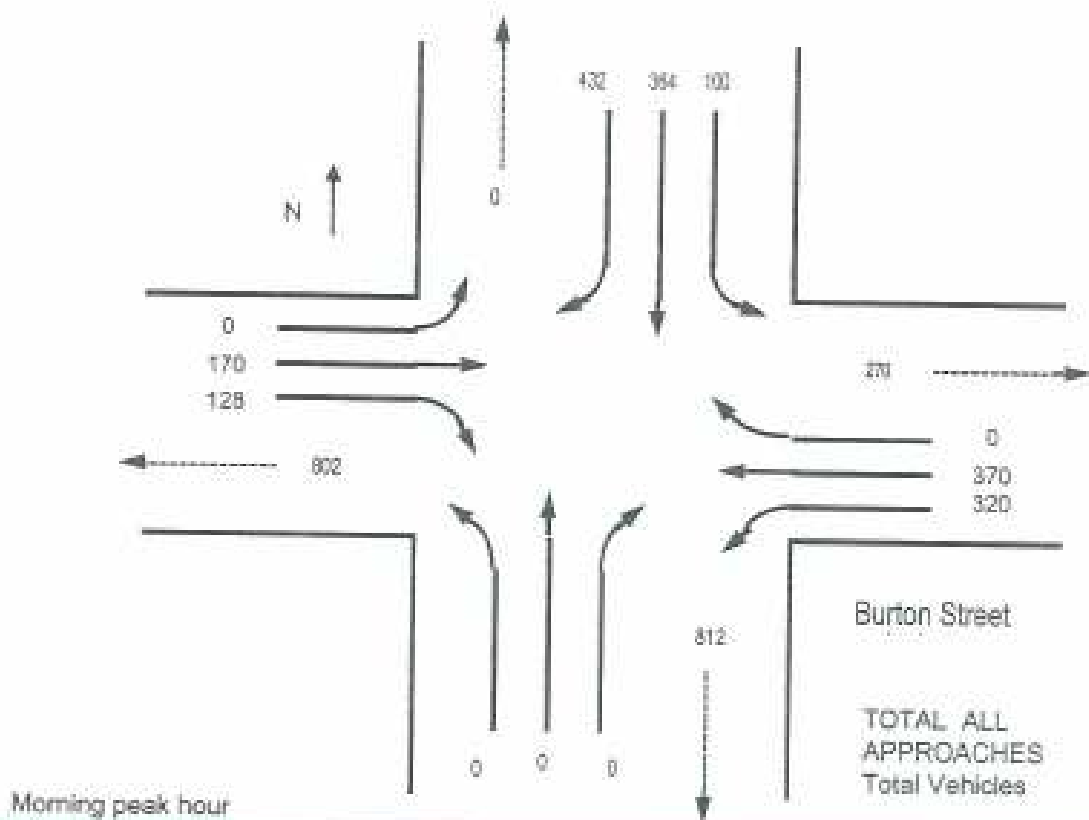
The recommended criteria for evaluating capacity of intersections are shown in Table A1

Table A1 Criteria for Evaluating Capacity of Intersection

Level of Service	Degree of Saturation (DoS)	Ave. Delay/ Veh. (Secs)
A/B good operation	less than 0.80	Less than 28
C satisfactory	0.80 to 0.85	29-42
D poor but manageable	0.85 to 0.90	43-56
E at capacity		57-70
F unsatisfactory, extra capacity required	over 0.90	Over 70



AM AND PM PEAK HOUR TRAFFIC MOVEMENTS ON A WEEKDAY
INTERSECTION OF BURTON and VICTORIA STREETS



AM AND PM PEAK HOUR TRAFFIC MOVEMENTS WITH DEVELOPMENT
INTERSECTION OF BURTON and VICTORIA STREETS



APPENDIX B

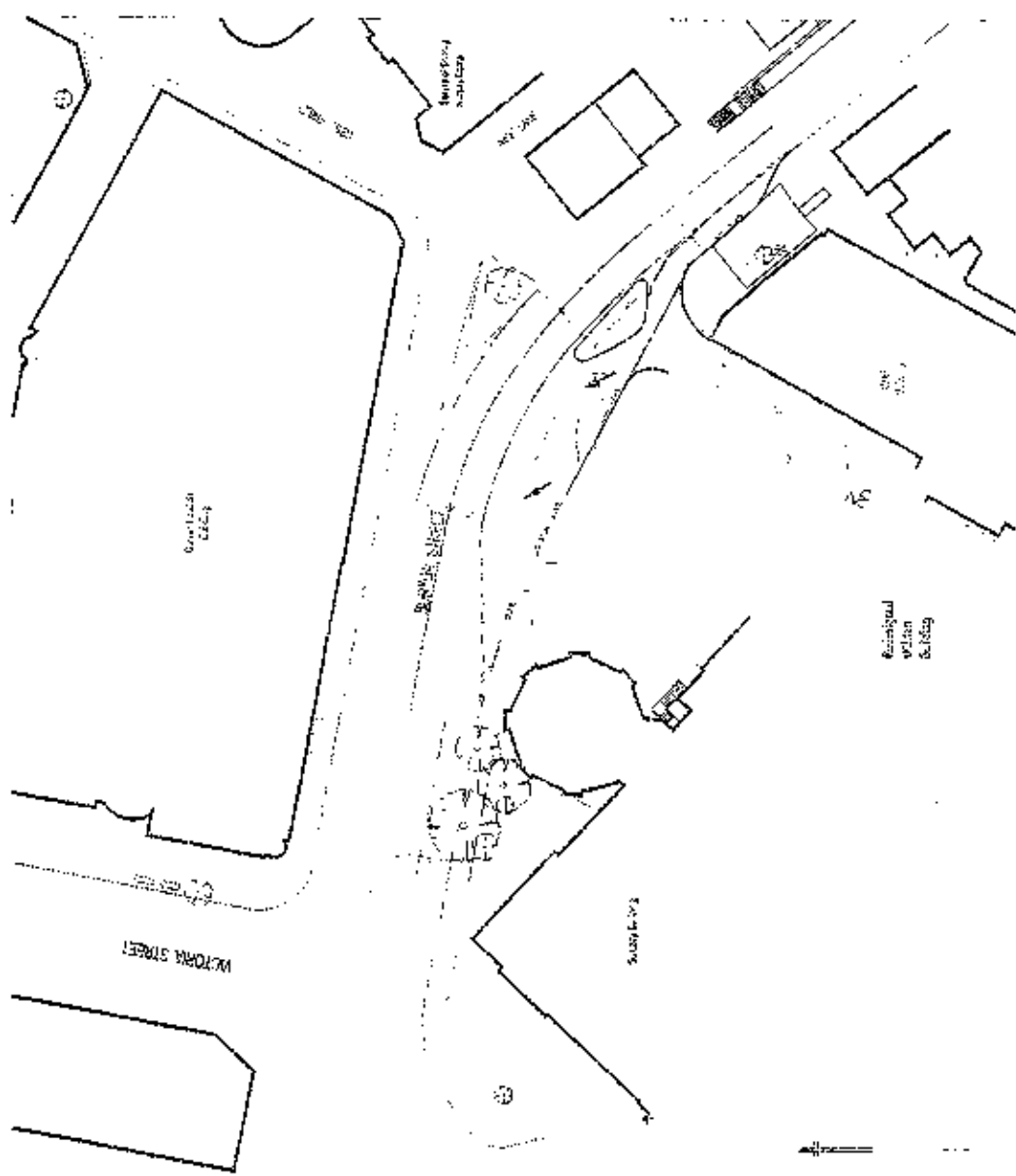
Accession Plan

Page 1 of 1

Project Name: ST VINCENT'S ORPHAN PROJECT

Client: ST VINCENT'S ORPHAN PROJECT

Accession Plan: ST VINCENT'S ORPHAN PROJECT



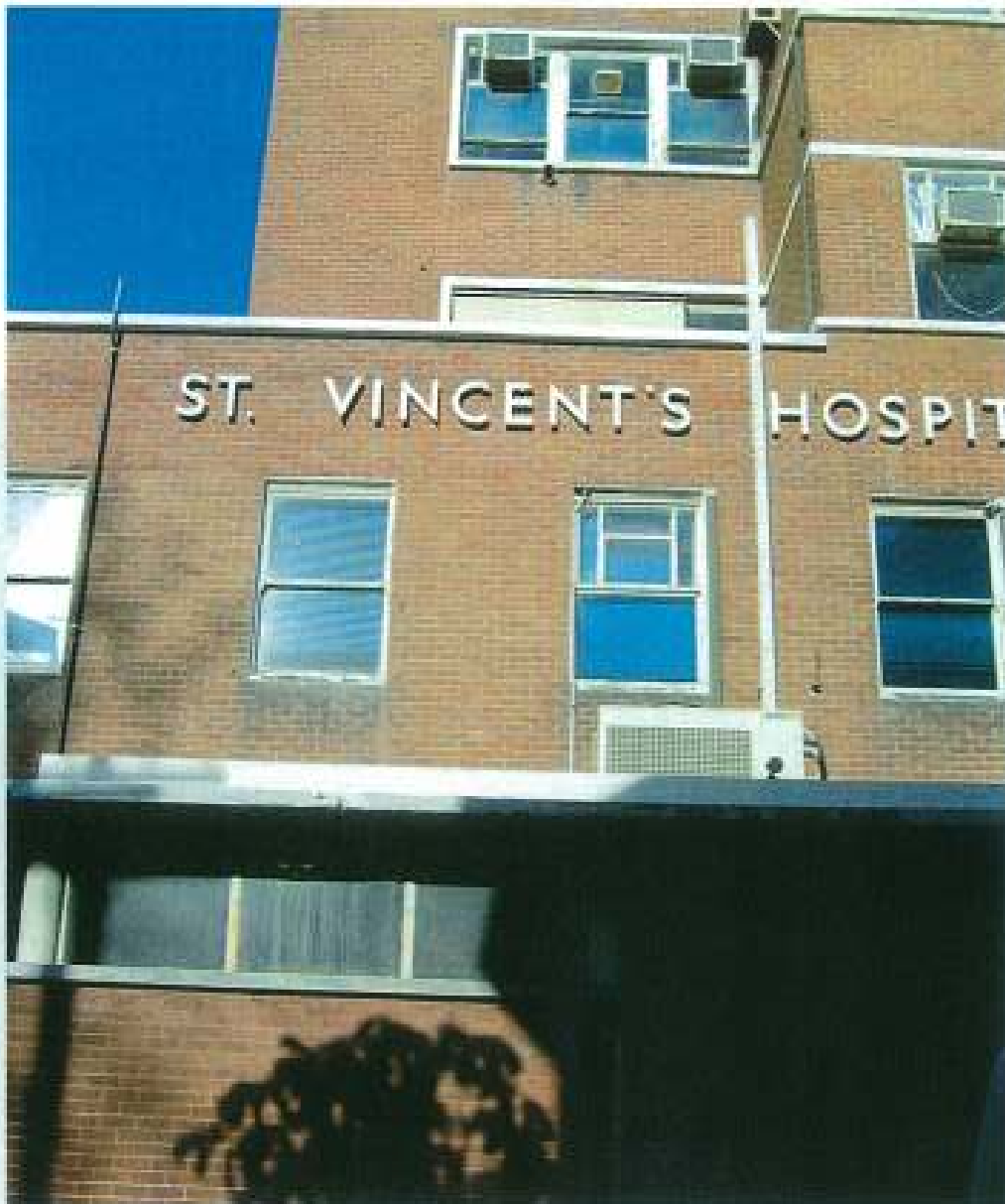
Appendix K – Heritage Impact Statement (O'Brien)

Graham Brooks & Associates



GRAHAM BROOKS
AND ASSOCIATES

ARCHITECTS
HERITAGE
CONSULTANTS



August, 2006

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Introduction

1.1 Context of the Report

This *Heritage Impact Assessment* has been prepared for *St. Vincent's and Mater Health, Sydney*. It aims to state the likely impact that proposed demolition and redevelopment of site would have on any heritage value of the *O'Brien Wing (Former Outpatients Block)* or on the adjacent and proximate buildings on the St. Vincent's Hospital complex, or on the local precinct.

The *O'Brien Wing* is situated in Burton Street, Darlinghurst, near the corner of Burton and Victoria Streets. This building, of seven stories above ground, with one basement level was designed in 1937/38 and opened as the St. Vincent's Hospital Outpatients Block in 1941. It replaced previously existing hospital facilities. In that way it has been part of the evolving story of site, as the hospital has responded to community and medical changes in its ongoing provision of a wide range of health care services. The building is representative of the modernist idiom of that era, yet it has been subject to some modification since its inception. It is adjacent to, and situated immediately behind the *de Lacy Building*, which incorporates much of the later nineteenth century building fabric of the original hospital and convent.

The Local Government Area of Sydney includes the St. Vincent's Hospital Group (in particular the Main Building – *de Lacy*), with a primary address of 440 Victoria Street, Darlinghurst as a listed item on its Local Environmental Plan. (South Sydney Amending LEP 2000: Listing Number 1114: Gazetted 28 July 2000; Gazette No. 97). The subject site, the *O'Brien Wing* in Burton Street, is not included in any City of Sydney Heritage Conservation Area, nor is it proximate to any other heritage item in Burton Street.

Graham Brooks and Associates Pty Ltd has provided independent advice on this matter, having been commissioned to prepare a Heritage Report in order to outline any significant heritage considerations which will have a bearing on the proposal.

1.2 Authorship

This Report has been written by Graham Brooks and Associates Pty. Ltd. All contemporary photographs included in this Report were taken by Graham Brooks and Associates in July 2006 specifically for the preparation of this Report.



Figure 1:
The O'Brien Wing from Burton Street, looking east. The building is in the modern style of the late 1930s, characterised by clean horizontal delineations.
(Source: Graham Brooks & Associates, July 2006)



Figure 2:
The new deused entrance way to the O'Brien wing, which presents in a relatively poor state of repair, and evidences some of the alterations necessary for contemporary use, such as the air-conditioning units.
(Source: Graham Brooks & Associates, July 2006)

Graham Brooks & Associates PTY LTD
Incorporated in NSW
Architects, Planners & Heritage Consultants
71 York St, Level 1
Sydney 2000 Australia
Tel: (61) 2 9299 8600
Fax: (61) 2 9299 8711
Email: gbsmain@gbsheritage.com
www.gbsheritage.com
ABN: 56 073 802 730
CAN: 073 802 730
Nominated Architect: Graham Leslie Brooks
NSW Architects Registration: 3838

O'Brien Wing, St. Vincent's Hospital
Burton Street, Darlinghurst
Graham Brooks & Associates Pty Ltd

1.3 Site Identification

The study area for this *Report* is the building known as the O'Brien Wing, which forms part of the St. Vincent's Hospital Main Site Group. It is located on the south side of Burton Street, at the north end of the main hospital complex. The site is located within the Local Government Area of the City of Sydney. However, the east boundary of the Hospital site, along Boundary Road, meets the Local Government area of Woollahra at a Woollahra Council conservation area.



Figure 4.
Map showing the location of the subject building, indicated by the arrow. The property is sited on the south side of Burton Street, immediately behind the de Lacy Building of the Hospital, which in turn fronts onto Victoria Street.

(Source: <http://www.wherere.com>, May 2006)

The directional references of this *Report* refer generally to the Burton Street side of the property, as north, and the Victoria Street side of the property as west.



Figure 3.
The O'Brien Wing, is hemmed in on three sides by other hospital wings. The image above taken from the north (Burton Street) side, shows its junction with the de Lacy Building at what was previously the entrance to the former outpatients block.
(Source: Graham Brooks & Associates, July 2006)



Figure 5.
The southeast corner of the O'Brien Wing is shown above to the left. The pedestrian thoroughfare is part of what was once West Street, and the junction connects it with the Conell wing to the east (right).
(Source: Graham Brooks & Associates, July 2006)

History

2.1 Brief Descriptions of the Style and Origins of the Building within its Context.

The name for the O'Brien Wing, as it is now known, came about in 1888. The hospital adopted a new numbering system for the floors throughout the whole site, and a new naming system for the principal buildings within the Hospital, naming them after the founding Sisters of Charity. Thus this former Outpatients Block was named the O'Brien Wing, after Sister Mary de Sales O'Brien, one of the original founding five sisters to arrive in Australia from Dublin, Ireland, in 1838. These sisters opened the first Catholic Hospital in Australia in at Potts Point in 1857, moving it to Darlinghurst in 1870. Since that time and to the present, St. Vincent's Hospital has become one of the leading medical institutions in Australia. The partnership of the Sisters of Charity and colleagues who comprise the Sisters of Charity Health Service is the largest non-Government, not-for-profit health care provider in Australia, currently operating 17 facilities.

Plans were drawn up for this particular building in 1937/38, and it was completed and opened in 1941 as the St. Vincent's Hospital Outpatients Block at a completion cost of 150,000 pounds (in relative current cost, a figure perhaps greater than \$25 million). It was a notably large exercise at the beginning of the Second World War, comprising seven floors, plus basement level, and a services buildings atop; and was a relatively tall building for the era. It was built in the then fashionable Modernist Style, with clean lines, horizontal delineations, some curved surfaces and much use of glass, including glass bricks. The wing was announced and described in the Hospital's Annual Report of 1939 as a fine seven-story wing, which included Outpatients Department, five Operating Theatres, X-ray unit, Mortuary, and Postmortem Facility, Pathological and Dispensing sections, a Nurses Home, General Kitchen, Doctors and Nurses Dining Rooms and a state of the art Boiler Room. It was also a medical School Training Unit (with laboratories, Lecture Hall and a museum).

The building seems to have replaced other buildings and facilities that were formerly on the site, at a corner which then comprised Burton Street and West Street. In more recent years, West Street has been closed off to become part of the Cahill Building as well as built junction space between buildings, and for ambulance access. In 1963 a new six-story addition was made on the western side of the Outpatients Block and in 1967 the 7th Floor was refurbished as a Professional Department following affiliation with University of New South Wales.



Figure 0:
The image above shows the junction between the O'Brien Wing and the Cahill Wing to the east (left), with emergency vehicle access under the junction.
(Source: Graham Brooks & Associates, July 2006)

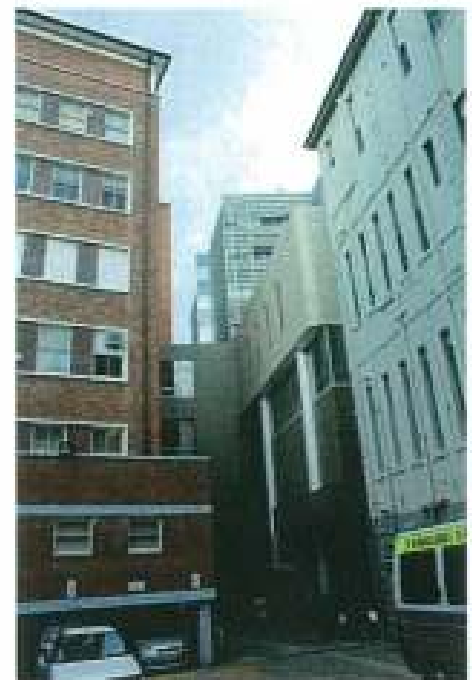


Figure 1:
An image of another junction between the de Lacy Building and the O'Brien Wing, taken from Burton Street.
(Source: Graham Brooks & Associates, July 2006)

O'Brien Wing, St. Vincent's Hospital
Burton Street, Darlinghurst
Graham Brooks & Associates Pty Ltd



Figure 8:
The O'Brien Wing as the then new Out Patients Block, in 1941, looking north
along West Street, towards Burton Street. Note older buildings in the bottom
right corner, which have since been replaced.
(Source: PICMAN Michael Library Database. Sourced, August 2008)



Figure 9:
View of the O'Brien Wing, the then new Outpatients Block, taken in the 1940s
from Burton Street, with the de Lacy Building to the right. Note the tram lines
running along Burton Street.
(Source: PICMAN, Michael Library Database. Sourced August 2008)

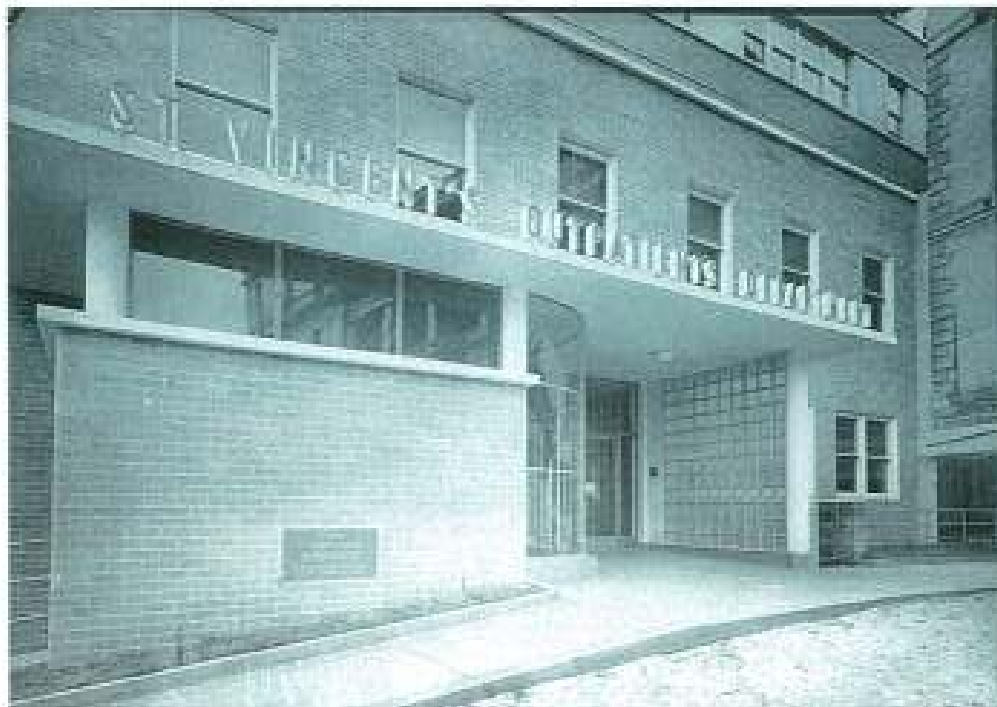


Figure 10:
Photograph taken January 1941 of the entrance to the new building, which, as noted above is an Outpatients Block. The new building presents
as state of the art, in the then new modernist style.
(Source: St. Vincent's Archives, July 2008)



Figure 12: The 1937/38 ground plans, show the location of the proposed new wing (as indicated by the arrow). It can be seen that the new building, proposed as an Outpatients Block was to be constructed over demolished buildings, which were primarily service buildings to the main de Lucy Building of the Hospital (immediately above). Until the later twentieth century, these two buildings comprised the major public outreach of the Hospital. It may be noted that West Street is still open along the east facade of the proposed building. The tram lines can be seen as running along Burton Street.
(Source: City Archives, Sydney City Town Hall, August 2008)

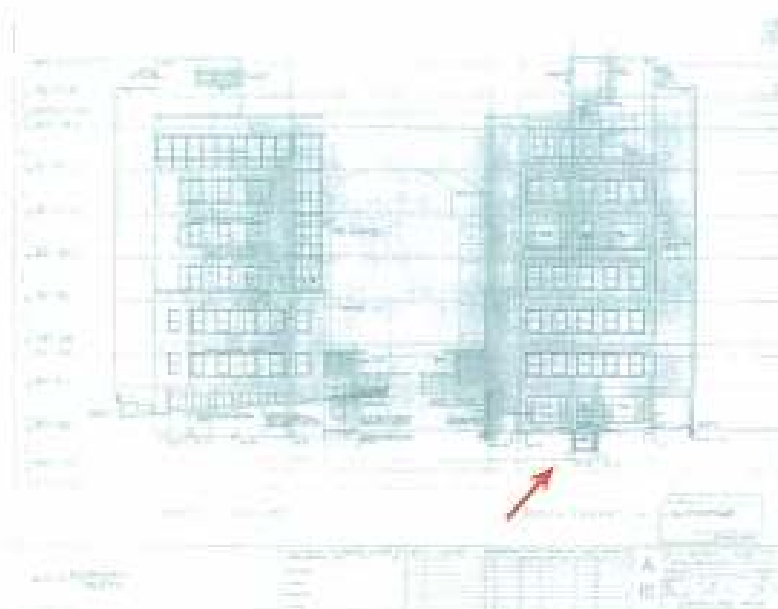


Figure 14: North and south elevation drawings of the proposed new Outpatients Block (now the O'Brien wing). Illustrate the seven levels plus basement and services. The drawings indicate that considerable excavation work would have taken place at the time. The depth of the lift well in this regard is of particular note.
(Source: City Archives, Sydney City Town Hall, August 2008)

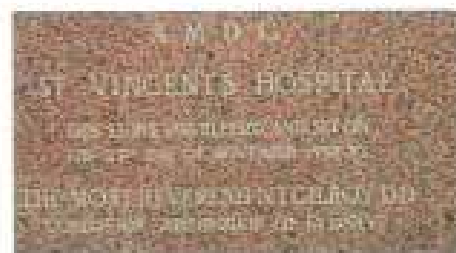


Figure 11: Image of the foundation stone of the O'Brien Wing, (then the Outpatients Block) noting November 1938, and headed by the motto 'Ad Maiorem Dei Gloriam', which characterized the particular Jesuit ideology of the Sisters of Charity.
(Source: Graham Brooks & Associates, July 2008)



Figure 13: Sister Mary Francis de Sales O'Brien, one of the original founders. A French educated Irish woman, she maintained with the other four an opposition to being incorporated into the Benedictine identity and program of the Sydney diocese, and an assertion of the independence of the Congregation and its works.
(Source: St. Vincent's Hospital Archives, July 2008)



Figure 15: Front entrance way of the O'Brien Wing, showing signs of deterioration, but characterised by the clean horizontal lines and glassed areas of the modern era design.
(Source: Graham Brooks & Associates, July 2008)

O'Brien Wing, St. Vincent's Hospital
Burton Street, Darlinghurst
Graham Brooks & Associates Pty Ltd.

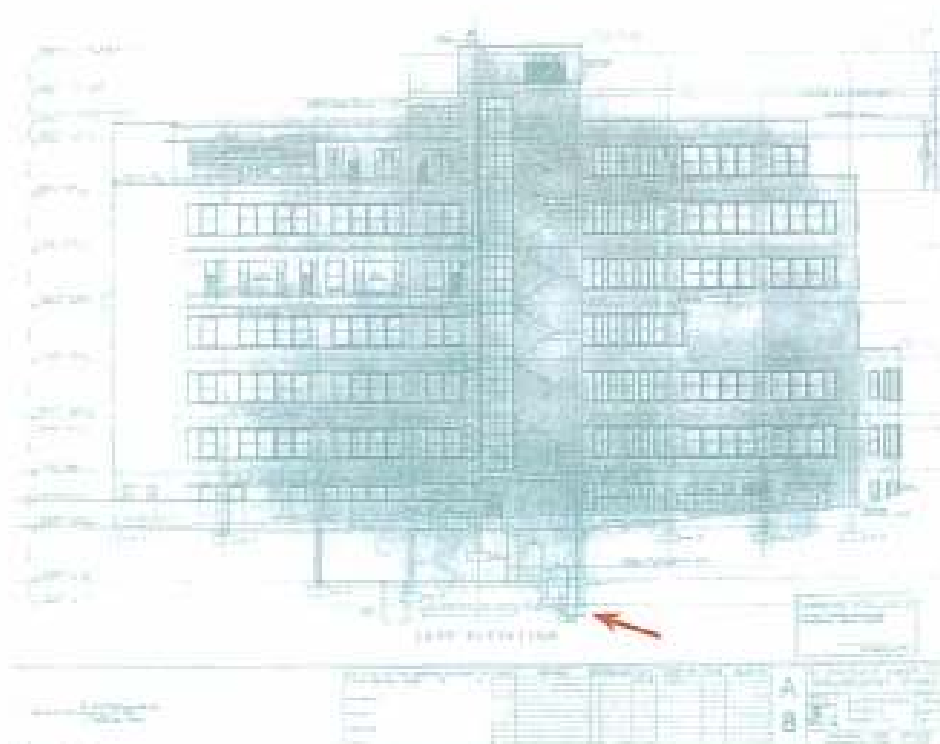


Figure 14:
The east elevation of the proposed new building (1937/38) showing the service tower atop the building and the depth of the basement excavation, the lift well and other service arrangements below ground level.
(Source: City Archives, Sydney City Town Hall, August 2006)

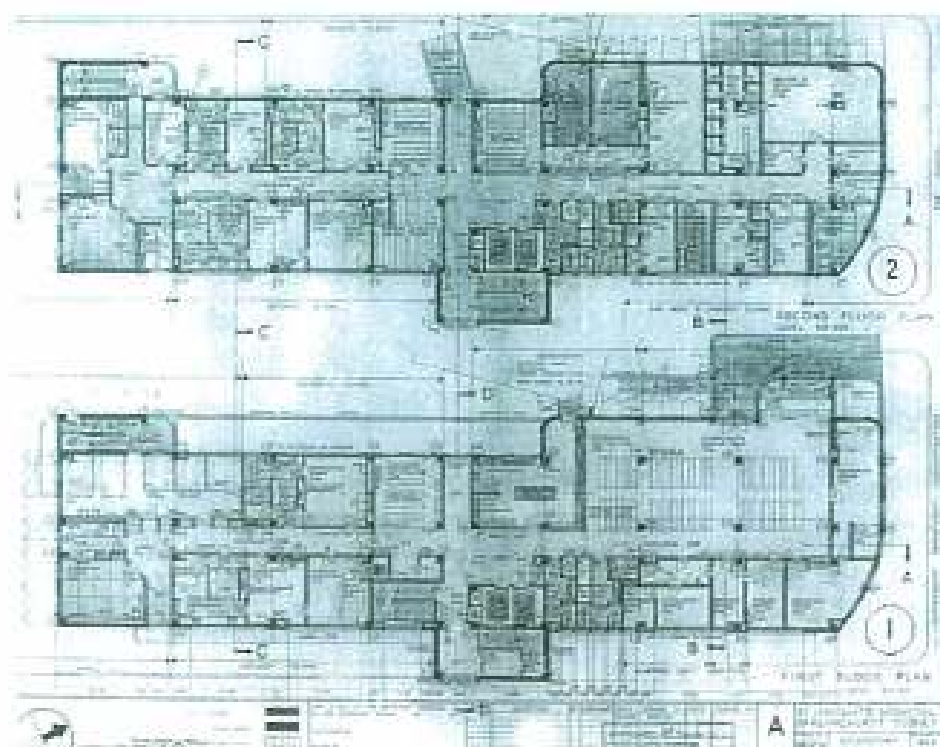


Figure 15:
The ground floor and first floor plans of the proposed new building (1937/38). The ground floor shows the outpatient's waiting area to the right (north side) and the consulting rooms to the left (south side).
(Source: City Archives, Sydney City Town Hall, August 2006)

2.2 Relationship to the de Lacy Building

The subject building (the O'Brien Wing) is situated immediately at the rear of the de Lacy Building, which is the principal original building of the hospital complex, and which fronts Victoria Street. The de Lacy Building was probably commenced in 1868 as indicated by the date of the laying of the cornerstone by Archbishop Polding. It had substantial additions and adaptations through to the mid 1920s, when the Italianate three level structure was completed. This mid 1920s building is the general current presentation of the west facade (Victoria Street) of the Hospital. The O'Brien Wing is connected by walkways at the rear to this earlier main building.



Figure 17:
Photograph of the original hospital, now the de Lacy Building, taken ca. 1870. This building was substantially extended and modified during the next 50 years, to gradually take on the current Italianate form.
(Source: St. Vincent's Hospital Archives, July 2008)



Figure 18:
Photograph of the original hospital (now the de Lacy Building, taken circa 1867, it appears by this time to have been plaster rendered. The view is looking south along Victoria Street towards Oxford Street. The stone pillar boundary markers are clearly seen at the corner of the property. The next building looking up the hill is the Sisters of Charity Convent.
(Source: St. Vincent's Hospital Archives, July 2008)



Figure 19:
The plaque on the corner of Burton and Victoria Streets marks the location of the original foundation stone for the St. Vincent's Hospital complex when it was transferred from 'Tarmore' at Potts Point, to this site in the late 1860s.
(Source: Graham Brooks & Associates, July 2008)



Figure 20:
Interior reception area of the de Lacy Building, which was finely detailed over some decades, and now presents as a significant connection to the history and memories of the Hospital.
(Source: Graham Brooks & Associates, July 2008)



Figure 21:
Early photographs indicate stone boundary markers at the corner of Burton and Victoria Streets. The intention is to repair, restore and replace these stone pillars in their approximate position, as part of the proposed redevelopment works.
(Source: Graham Brooks & Associates, July 2008)



Figure 20:
Photograph taken between 1880 and 1910, from Burton Street, across Green Park towards the front of the main hospital building (now the de Lacy Building). The street lamps appear to be gas. Sydney streets did not become electrified until the first decade of the twentieth century. The building has already been extended to the south so that the original double wing facade has now become triple wing. It is by this time evidently becoming an eclectic mixture of styles: an ornate Free-Classical central wing, with prominent cupola, more simple north and south wings, and a colonial verandah, with strip-painted corrugated iron roof cladding. Boundary marker fencing pillars are in evidence at the corner of the park. These are also in evidence in earlier photographs of the precinct from the 1870s, and they correspond in style to the boundary pillars on the opposite corner at the St. Vincent's site. The tram lines do not seem to be in present at the time this photo was taken.
(Source: St. Vincent's Hospital Archives, July 2006)

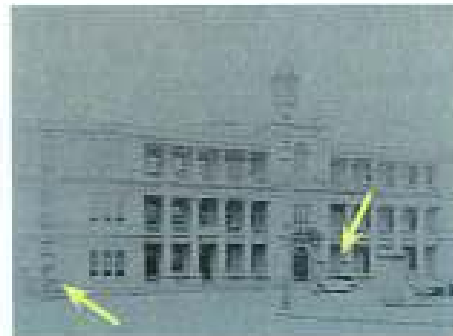


Figure 21:
This view of the hospital was used for some years on the front cover of the Annual St. Vincent's Hospital Reports. It was taken soon after completion of the new additions and modifications. Note that it shows three sets of boundary pillar markers in the precinct. The older gas-style lamps are still evident.
(Source: St. Vincent's Hospital Archives, July 2006)



Figure 22:
View across Green Park towards the main hospital building (now the de Lacy). The original Convent Building is seen to the right.
(Source: PICMAN Mitchell Library Database Sourced, August 2006)

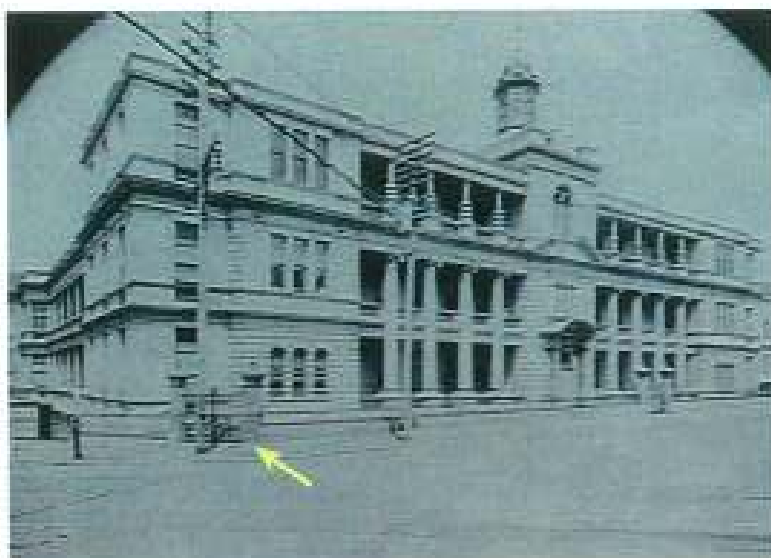


Figure 24:
By the mid-1920s the de Lacy Building is presenting in quite a different fashion. In this view, taken from the northwest, the Art Deco design has now been incorporated into the whole building, with bold use of column work and general strong symmetrical classical form. The building is now three stories high. The stone pillar boundary markers are clearly seen on the corner of Burton and Victoria Streets. A similar set is also seen at the main entrance way. The corner is now characterised by numerous overhead electrical wires.
(Source: St. Vincent's Hospital Archives, July 2006)



Figure 25:
Looking east, along Burton Street. This image is taken during the 1940s and the squared-off top of the Outpatients block (the current subject O'Brien Wing) can be observed above the de Lacy building at the rear. Extensions to the de Lacy building, at its rear (east) side and above its former level can also be seen. Note that by this time the tram lines ran along Burton Street.
(Source: PICMAN Mitchell Library Database Sourced, August 2006)

Physical assessment

3.0

The subject building, the O'Brien Wing of St. Vincent's Hospital, Daringhurst, is a modernist style building designed during 1937/38. The Foundation stone was laid in November 1938 and the building was opened in 1941. The exterior presents in combinations of dark red face brick with slim concrete columns, concrete cappings and segmented window areas. The windows are slim line timber and steel framed. In general, the building has been maintained at a high level and therefore, apart from incidental deterioration of non-used elements and redundant areas, (such as paint-work and superficial concrete fragmentation) the general form, and the substantial state of the building fabric presents as being in a sound state of repair.

When the subject building opened in 1941 it represented state of the art medical care, housed within a state of the art building. The Hospital's Annual General Reports indicate that it was considered a flagship. Externally, the building displayed the clean lines and horizontal delineations of the modernist style. Its interior configurations were purpose built rather than an adaptation, and were suited exactly to the principles, procedures, practices and equipment that was the then contemporary expression of the hospital system. The outpatients block was conveniently situated on the tram line. It had a large reception and waiting area. It featured a number of consulting rooms, and it contained within itself ready access to a range of associated services such as Operating Theatres, X-ray unit, Mortuary, Postmortem and so forth. The general quality of the building therefore was of a high standard in both its general form and structure, as well as its fit-out.

However, it is appreciated that the built fabric of health care facilities represents a constantly evolving response to developments in medical technology, changes in social need and legislative considerations, on established sites that are often physically constrained. Flexibility and adaptability of interior configurations for instance has become a preeminent consideration in health care construction, and it is clear that the subject building no longer meets this need.

Some contemporary efficiencies of operation require for instance larger scale modern services: greater electrical capacity; integrated air-conditioning; larger and more efficient elevators; contemporary large-scale medical equipment; information technology capacity and routing and so forth. For the subject building moreover, the level of accretions, modifications and ad hoc inter-building junctions have had a disproportionately high bearing upon its viability, ordinary functionality and requisite maintenance.



Figure 26:
Image taken at the former entrance-way to the subject building (the former Outpatients Block, and now the O'Brien Wing) showing incidental deterioration of finish on steel frames and concrete. Note the modernist curved glass surface, the slender concrete column-work and the horizontally oriented window openings.
(Source: Graham Brooks & Associates, July 2008)



Figure 27:
An image of the same area of the subject building taken from the street side (Burton Street) and showing the close proximity of the subject building to the Dr. Lucy Building. It also indicates the generally good state of repair of the face brick and concrete work.
(Source: Graham Brooks & Associates, July 2008)

O'Brien Wing, St. Vincent's Hospital
Burton Street, Daringhurst
Graham Brooks & Associates Pty Ltd



Figure 28:
View of the subject building, the O'Brien Wing, taken from Burton Street (north). The image shows the combinations of flat and curved surfaces, and the generally clean lines of the building, offset at intervals by staggered surfaces, the use of the thin concrete bands to delineate facades and some floor levels, and the white painted concrete in-fill along the principal window sections.
(Source: Graham Brooks & Associates, July 2006)



Figure 30:
This image illustrates one of the many junctions between the subject building and the surrounding buildings, such as the de Lacy and the Cahill. Over some decades, these junctions have been created in a manner that often has had to address non-aligned levels and interior layouts. Such junction points will require care of address in the proposed new redevelopment.
(Source: Graham Brooks & Associates, July 2006)



Figure 29:
View of the northwest corner of the building taken from Burton Street. This image illustrates the messy ad hoc arrangements for the air-conditioning units.
(Source: Graham Brooks & Associates, July 2006)



Figure 30:
Illustrating the complexity of the intersections between the buildings and some of the various necessary accretions and service adaptations.
(Source: Graham Brooks & Associates, July 2006)

Assessment of Cultural Significance

4.0

4.1 Heritage Listing

The following authorities were consulted in order to ascertain whether the subject building is heritage listed:

- Australian Heritage Council – Commonwealth listing;
- NSW Heritage Office – State listing;
- National Trust of Australia (NSW Chapter) and
- Sydney City Council – Local listing.

The Australian Heritage Council

The the subject property, known as the O'Brien Wing (formerly the Outpatients Block of the St. Vincent's Hospital Complex, Victoria Street, Darlinghurst) **is not listed** on the Register of the National Estate (RNE) as an item of national significance.

The NSW Heritage Office

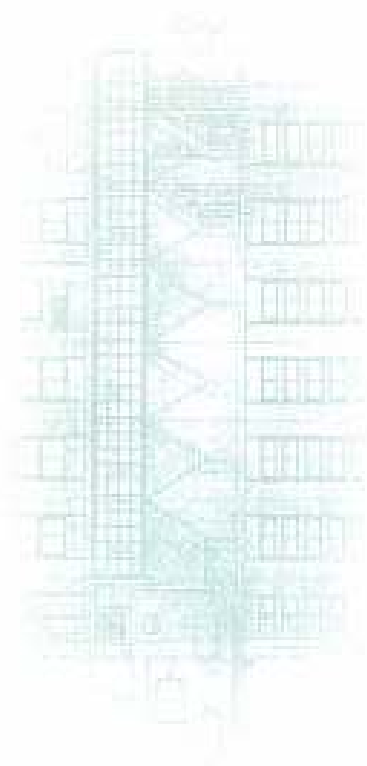
The the subject building, known as the O'Brien Wing (formerly the Outpatients Block of the St. Vincent's Hospital Complex, Victoria Street, Darlinghurst) **is not listed** on the State Heritage Register (SHR) as an item of state heritage significance.

National Trust of Australia (NSW)

The the subject building, known as the O'Brien Wing (formerly the Outpatients Block of the St. Vincent's Hospital Complex, Victoria Street, Darlinghurst) **is not listed** on the heritage register of the National Trust of Australia.

Sydney City Council

The subject building, the O'Brien Wing, within Lot 2 DP 804735, is included *de facto* as part of the Local Government Area of Sydney's inclusion of the general *tableau* of the St. Vincent's Hospital Group, which has a primary address of 440 Victoria Street, Darlinghurst. In particular the listing names the Main Building, the de Lacy as a listed item on its Local Environmental Plan (South Sydney Amending LEP 2000: Listing Number 1114: Gazetted 29 July 2000; Gazette No. 97). The subject site, the O'Brien Wing (formerly the Outpatients Block) in Burton Street, is not named as an individual item however, though it is adjacent to the de Lacy Building. The subject building is not in a City of Sydney Heritage Conservation Area, nor is it proximate to any other heritage item in Burton Street.



4.2 Assessment of Significance

In order to ascertain whether or not the subject building, within the St. Vincent's Hospital Complex, possesses that degree of heritage significance which has implications for the proposed major demolition and re-development work, the following assessment has been carried out. The assessment is based upon the criteria set by the NSW Heritage Office for ascertaining whether or not an item possesses heritage significance and if so, what the nature of this significance is.

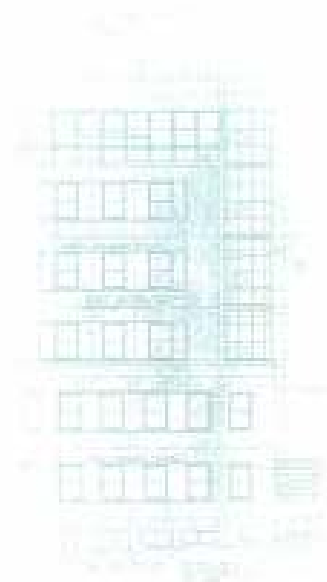
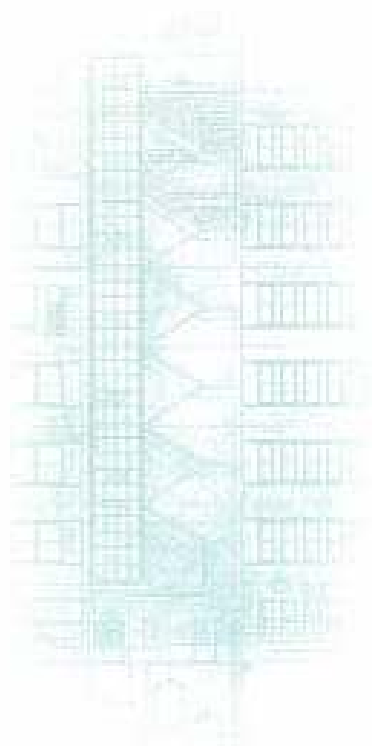
Criterion (A) – Historical Significance

An item is important in the course, or pattern, of NSW's cultural or natural history (state significance); OR it is important in the course, or pattern, of the local area's cultural or natural history (local significance).

Guidelines for Inclusion: When the item shows evidence of a significant human activity or is associated with a significant activity or historical phase. When it maintains or shows the continuity of a historical process or activity.

Guidelines for Exclusion: When the item has incidental or unsubstantiated connections with historically important activities or processes. When it provides evidence of activities or processes that are of dubious historical importance or has been so altered that it can no longer provide evidence of a particular association.

The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst, reflects something of the ongoing evolution of this hospital site, and of health care generally in the State of NSW. In particular its construction represented an emergence of buildings specifically designed and constructed for integrated and multi-disciplined health care. It was a major private work, undertaken at a significant time between the Depression and the early stages of the Second World War. However, while it may be said to have a general significance to this evolving story, the building itself, has only a moderate heritage value under this category since, in our opinion, it is more properly seen as part of a larger site, and a much wider context of philosophical initiatives and physical expressions in health care services.



(B) – Associational Significance

An item has strong or special association with the life or works of a person, or group of persons, of importance in NSW's cultural or natural history (state significance); OR it has strong or special association with the life or works of a person, or group of persons, of importance in the cultural or natural history of the local area (local significance)

Guidelines for Inclusion: When an item shows evidence of a significant human occupation or is associated with a significant event, person or group of persons.

Guidelines for Exclusion: When an item has incidental or unsubstantiated connections with historically important people or events. When it provides evidence of people or events that are of dubious historical importance or has been so altered that it can no longer provide evidence of a particular association.

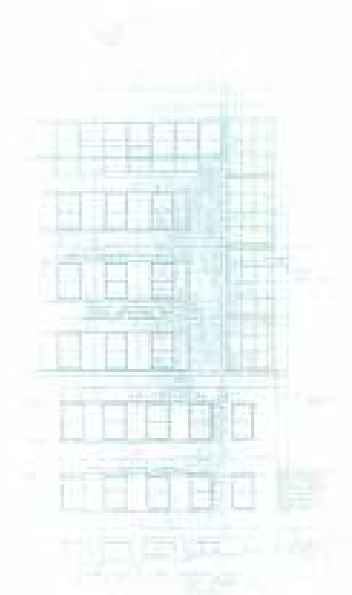
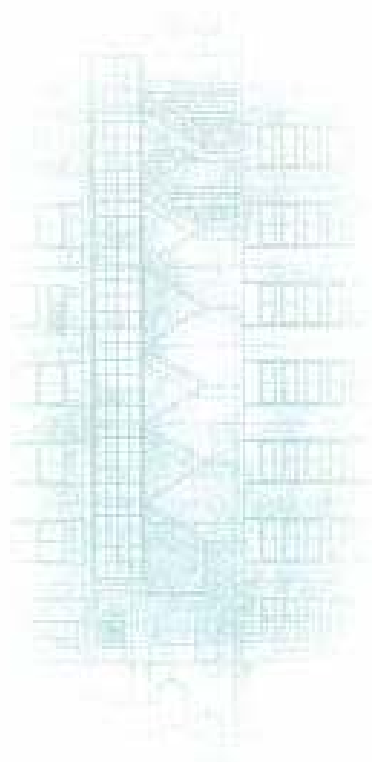
The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst, has a place in the story of association with the general works of the St. Vincent's Hospital Complex and the Sisters of Charity. It has also had a recognised part in the life of the local and wider community, particularly for outpatient services in emergency medicine. Beyond that, it has no particular association with the life and works of any person of note. As a heritage item however, the subject building, in our opinion, has little significance under this category.

Criterion (C) – Aesthetic Significance

An item is important in demonstrating aesthetic characteristics and/or high degree of creative or technical achievement in NSW (state significance); OR it is important in demonstrating aesthetic characteristics and/or high degree of creative or technical achievement in the local area (local significance).

Guidelines for Inclusion: When an item shows or is associated with, creative or technical innovation or achievement. When it is the inspiration for a creative or technical innovation or achievement, is aesthetically distinctive, has landmark qualities or exemplifies a particular taste, style or technology.

Guidelines for Exclusion: When an item is not a major work by an important designer or artist, has lost its design or technical integrity. When an item's positive visual or sensory appeal or landmark and scenic qualities have been more than temporarily degraded or has only a loose association with a creative or technical achievement.



O'Brien Wing, St. Vincent's Hospital
Barton Street, Darlinghurst
Graham Brooks & Associates Pty Ltd

The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst, was at the time of its design and construction, a state of the art facility in a state of the art building. Its interior configuration was purpose built, and externally, the building displayed the clean lines and horizontal delineations of the modernist style; with asymmetrical proportions, combinations of flat and curved surfaces, smart and slim-line concrete structure and accentuations, large window areas, slim-line framing and so forth. Since that time however the building has had substantial interior modifications as part of the changing response to medical evolution, and notably a large number of external accretions. Its physical situation along Burton Street, a main public transport route, initially lent the building a landmark quality. In recent decades however it has been necessarily hemmed in on three sides by significantly larger developments which eclipse it. The subject building, in our opinion, has a moderate degree of significance under this category.

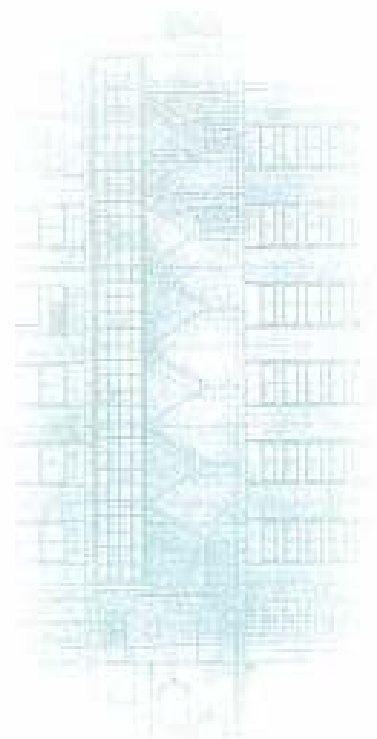
Criterion (D) – Social Significance

An item has a strong or special association with a particular community or cultural group in NSW for social, cultural or spiritual reasons (state significance); OR has strong or special association with a particular community or cultural group in NSW for social, cultural or spiritual reasons (local significance).

Guidelines for Inclusion: When an item is important for its association with an identifiable group or is important to a community's sense of place.

Guidelines for Exclusion: When an item is only important to the community for amenity reasons or is retained only in preference to a proposed alternative.

The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst, was for some years located on a major public transport route of the tramway system, and would have been an evident landmark of the local area. Moreover, it was closely associated the provision of emergency and outpatient medical care, in often acute circumstances, in a notably colourful community. However, in our opinion the building itself, since it functioned as part of a more generalised sense of place and service provision, achieves little to moderate recognition under this category.



O'Brien Wing, St. Vincent's Hospital
Burton Street, Darlinghurst
Graham Brooks & Associates Pty Ltd

Criterion (E) – Technical/Research Significance

An item has potential to yield information that will contribute to an understanding of NSW's cultural or natural history (state significance); OR has potential to yield information that will contribute to an understanding of the area's cultural or natural history (local significance).

Guidelines for Inclusion: When an item has the potential to yield new or further substantial scientific and/or archaeological information. When it is an important benchmark or reference site or type or provides evidence of past human cultures that is unavailable elsewhere.

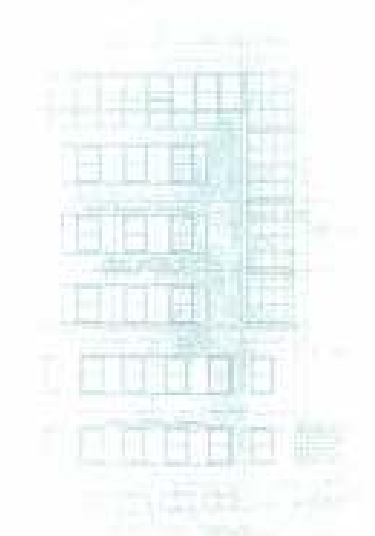
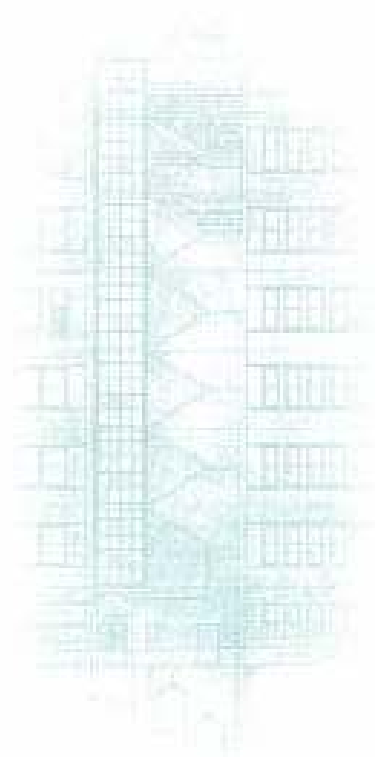
Guidelines for Exclusion: When the knowledge gained would be irrelevant on science, human history or culture. When the item has little archaeological or research potential or only contains information that is readily available from other resources or archaeological sites. Where the knowledge gained would be irrelevant to research on science, human history or culture.

The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst has been subject to ongoing change since its establishment sixty five years ago, in both usage and configuration. Being an active part of a rapidly changing field, it now has almost no potential to yield technical and research information about its medical activity at any particular point during this time. Moreover, as a style it is a good but representative example of modernist architecture and is therefore, in our opinion, not likely to yield any further insights into this style.

Criterion (F) – Rarity

An item possesses uncommon, rare or endangered aspects of NSW's cultural or natural history (state significance); OR possesses uncommon, rare or endangered aspects of the area's cultural or natural history (local significance).

Guidelines for Inclusion: Where an item provides evidence of a defunct custom, way of life or process or demonstrates a process, custom or other human activity that is in danger of being lost. Where it shows unusually accurate evidence of a significant human activity or is the only example of its type. When an item demonstrates designs or techniques of exceptional interest or shows rare evidence of a significant human activity important to a community.



O'Brien Wing, St. Vincent's Hospital
Burton Street, Darlinghurst
Graham Brooks & Associates Pty Ltd

Guidelines for Exclusion: When an item is not rare or is numerous and not under threat.

The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst is, in our opinion, not a rare building in style or cultural contribution, or in contribution to any significant human activity which stands in danger of loss. Therefore, in our opinion it achieves little significance under this category.

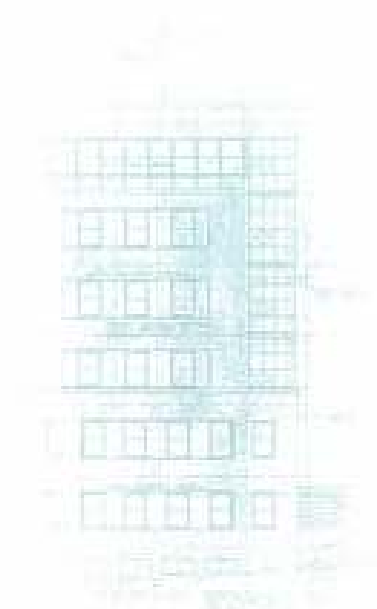
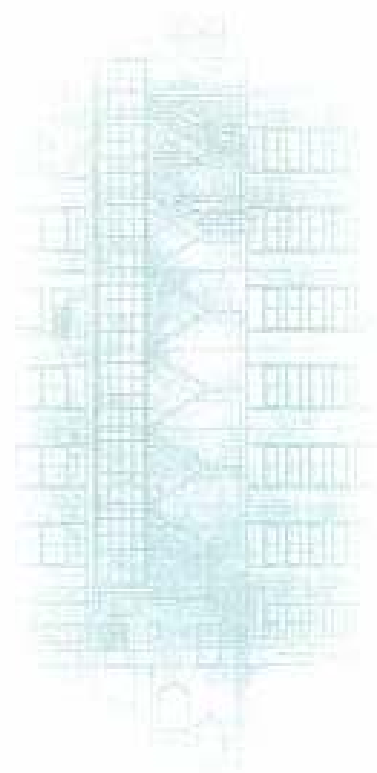
Criterion (G) – Representativeness

An item is important in demonstrating the principal characteristics of a class of NSW's cultural or natural places or cultural or natural environments (state significance), OR is important in demonstrating the principal characteristics of a class of the area's cultural or natural places or cultural and natural environments (local significance).

Guidelines for inclusion: When an item is a fine example of its type or has the principal characteristics of an important class or group of items. When an item has attributes typical of a particular way of life, philosophy, custom, significant process, design, technique of activity or is a significant variation to a class of items. Where it is outstanding because of its setting, condition or size or may be part of a group, which collectively illustrates a representative type. When an item is outstanding because of its integrity of the esteem in which it is held.

Guidelines for Exclusion: When an item is a poor example of its type or does not include or has lost the range of characteristics of a type. An item that does not represent well the characteristics that constitutes a type or variation from it.

The subject property, known as the O'Brien Wing (formerly Outpatients Block) of the St. Vincent's Hospital Darlinghurst is representative in two ways: Firstly, it is a good and characteristic, but not outstanding example of a larger scale public building in the modernist style; and secondly it is representative of an evolving response of the health care system to social, legislative, technological and medical changes. In our opinion, the subject building achieves a moderate significance under this category.



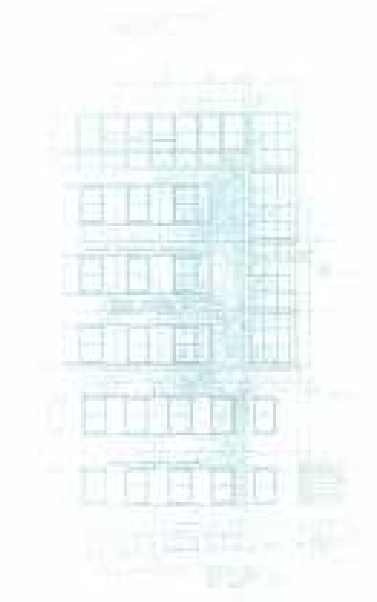
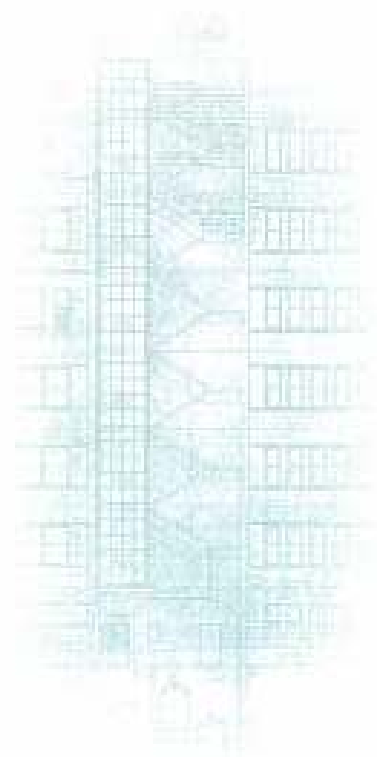
O'Brien Wing, St. Vincent's Hospital
Bunnet Street, Darlinghurst
Graham Brooks & Associates Pty Ltd

4.3 Statement of Significance

The subject property, known as the *O'Brien Wing* (formerly the *Outpatients Block*) of the *St. Vincent's Hospital Darlinghurst*, was designed in 1937/38 and opened as the *St. Vincent's Hospital Outpatients Block* in 1941. It replaced previously existing hospital facilities. The building is representative of the modernist idiom of that era and also represented an emergence of buildings specifically designed and constructed for integrated and multi-disciplined health care. For some decades it had a recognised part in the life of the local and wider community, particularly for outpatient services in emergency medicine. In its early years it had some measure of landmark quality, until it necessarily became hemmed in on three sides by significantly larger developments which eclipsed it.

The subject building has however been subject to considerable modification in both usage and configuration since its inception. In that way it has been part of the evolving story of site, as the hospital has responded to community and medical changes in its ongoing provision of a wide range of health care services. The buildings current inability to meet the standards of contemporary health care provision renders it substantially redundant.

In our opinion, the subject building is most properly to be seen as part of the story of association with the conceptual and strategic general works of the *St. Vincent's Hospital Complex* and the *Sisters of Charity*. In our opinion therefore, the proposed demolition and redevelopment of this site may be seen as the continuation of the story of place.



Legislative Considerations

5.1 Planning Controls Affecting the Proposed Development

For the purpose of making a full assessment of the proposed demolition and redevelopment, we have included a perusal of the legislative effect of current planning instruments at the local Government level having a bearing on the proposed works.

South Sydney Local Environmental Plan

The relevant consent authority for this area is the City of Sydney Council. For heritage considerations, the relevant document is the South Sydney Local Environmental Plan 1998 (as amended 2000). Additionally South Sydney (Heritage Conservation) Development Control Plan 1998 also has bearing on this proposal for the subject site. Generally the considerations of this extensive document are commensurate with the guidelines of the NSW Heritage office as generally applied to Development Control Plans in NSW.

Part 4 ~ Special Provisions

"Clause 22: In respect of heritage aims:

22 (b) to integrate heritage conservation into the planning and development control processes;

22 (e) to ensure that any development is undertaken in a manner that is sympathetic to, and does not detract from, the heritage significance of heritage items, of heritage conservation areas and their setting, and of streetscapes within heritage streetscape areas and their setting; and

22 (g) to enable the adaptation of existing non residential buildings or works of heritage significance in a manner which is compatible and sympathetic with the fabric and character of the building or works and the use and fabric of neighbouring land and buildings

22 (i) to require, when considered necessary, the consideration of a statement of heritage impact or a conservation management plan before consent is granted for development relating to a heritage item, or development within a heritage conservation area or a heritage streetscape area, or development relating to a building older than fifty years; and

22(j) to ensure the sympathetic use of sites containing buildings or facades of historic or streetscape importance which contribute to the character of the locality."



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Response:

In our opinion, the proposed demolition and re-development of the site of the O'Brien Wing (formerly the Outpatients Block) of the St. Vincent's Hospital complex will not involve the demolition or destruction of any specifically listed significant heritage fabric. The proposal is however sited adjacent to the heritage listed de Lacy Building and it is also *de facto*, sited within a group listed site, being the St. Vincent's Hospital Group, in the Local Environmental Plan, (South Sydney Amending LEP 2000; Listing Number 1114; Gazetted 28 July 2000; Gazette No. 97). The general aims of heritage conservation (as highlighted above) therefore, are in process of consideration for the Indicative Re-development Plan.

While the proposed demolition and re-development is not situated within a conservation area nor proximate to any heritage item along Burton Street, nevertheless, the indicative plan should aim to be sympathetic to the general aesthetic and heritage qualities of the precinct. Other specific Development Instruments, which are under the direct oversight of the Director General of Planning, are outside the scope of this Heritage Assessment Report.



5.2 Heritage Impact Assessment

This assessment is based upon three separate components set out as follows:

- An assessment based upon the physical inspection of the site, (refer to Section 3 of this report);
- An assessment based upon the Statement of Cultural Significance, (refer to Section 4 of this report);
- An assessment based upon the pertinent legislation, (refer to Section 5 of this report).

The report has also deemed that the this assessment must measure the impact, if any, of the proposed redevelopment would have upon individual elements, as well as the general presentation of the surrounding precinct.

Response:

Having inspected the site and examined all physical and graphic material in detail, the development proposal, in our opinion, could be managed in such manner as to ensure that it would have no material negative impact on the group listed heritage item, being the St. Vincent's Hospital complex, nor on the particular specifically heritage listed item within that complex, the *de Lacy Building*.

Moreover, in our opinion, the proposal would have no negative impact upon the legibility, integrity and general presentation of the surrounding precinct. Moreover, it could, in our opinion lend vitality to that precinct through increased public engagement and improved aesthetic quality.



We are required to address the queries raised in the NSW Heritage Office guidelines for the preparation of statements of heritage impact. In respect of new development adjacent to a heritage item, we are required to address the following issues:

- *How is the impact of the proposed development on the heritage significance of the item or area to be minimised?*
- *Why is the new development required to be adjacent to a heritage item?*
- *How does the curtilage allowed around the heritage item contribute to the retention of its heritage significance?*
- *How does the new development affect views to and from the heritage item? What has been done to minimise negative effects?*
- *Is the development sited on any known, or potentially significant archaeological deposits? If so, have alternative sites been considered? Why were they rejected?*
- *Is the new development sympathetic to the heritage item? In what way (e.g. form, siting, proportions, design)?*
- *Will the additions visually dominate the heritage item? How has this been minimised?*
- *Will the public, and users of the item, still be able to view and appreciate its significance?*

Taking the questions together we respond as follows:

In our opinion, the proposed demolition and redevelopment would not have any direct negative impact on the cultural significance of the group heritage item or the specifically listed item within that group. As noted, it is seen as part of the ongoing history of evolution of site for long-standing specific purpose of place, and therefore constitutes continuity of use. The site has been tightly contained within its context for a number of decades, and there is therefore, in our opinion, little alteration of principal views. Moreover the immediate streetscape would have little foreseen negative variation, given this same containment of site. It is further noted that no other heritage item presents outside the site in the immediate vicinity. The current building, the O'Brien wing, when it was constructed between 1936 and 1941, entailed significant excavation work at some depth, and it is therefore unlikely that new archaeological material is to be found. It is our opinion that the new development could be managed in such manner that new components will be compatible to existing adjacent heritage fabric; however, Graham Brooks and Associates are not involved with the preparation of the proposed project.



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Conclusion and Recommendations

The O'Brien Wing, a building of seven stories above ground, with one basement level was designed in 1937/38 and opened as the St. Vincent's Hospital Outpatients Block in 1941. It replaced previously existing hospital facilities. The building, which was state of the art at the time of its inception, was constructed in the modernist idiom. It represented an emergence of buildings specifically designed and constructed for integrated and multi-disciplined health care. For some decades it had a recognised part in the life of the local and wider community, particularly for outpatient services in emergency medicine. In its early years it had some measure of landmark quality, until it necessarily became hemmed in on three sides by significantly larger developments which eclipsed it.

Over some decades, it has been subject to considerable modification in both usage and configuration as new challenges in the provision of contemporary health care services have had a disproportionately high bearing upon its viability, ordinary functionality and requisite maintenance. In this way it has been part of the evolving story of site, as the hospital has responded to community and medical changes on an established site that is physically constrained. In our opinion therefore, the subject building is most properly to be seen as part of the story of association with the conceptual and strategic general works of the St. Vincent's Hospital Complex and the Sisters of Charity. In our opinion therefore, the proposed demolition and redevelopment of this site may be seen as the continuation of the story of place.

The current proposal provides an opportunity for this continued evolving process which would, in our opinion be consonant with the historical intentions of the facility, representing for contemporary and future circumstances, a continuation of use in place. While the subject building, in our opinion contains little building fabric which commands a strong aesthetic presence, nor a strong legibility in the local precinct, our recommendation is that it be **thoroughly documented**, in terms of images, history and description of use and layout.

In our opinion, the proposal would not involve the demolition or destruction of any significant heritage fabric and the redevelopment proposal could be managed in such manner as to ensure that there would be no material negative impact on the heritage value of the group listed site, or the specifically listed de Lacy Building, or the immediate precinct outside the site. In addition, it has the capacity to lend vitality to the precinct through increased public engagement and improved aesthetic quality.



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