

**APPENDIX K      HERITAGE IMPACT STATEMENT  
PREPARED BY URBIS**

**BRISBANE GENERAL  
HOSPITAL PRECINCT  
HERITAGE PRECINCT DA  
HERITAGE IMPACT  
STATEMENT**

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Appendix A Hazardous Materials report

# EXECUTIVE SUMMARY

The site of the Brisbane General Hospital Precinct is permanently entered in the Queensland Heritage Register as a State Heritage Place under the *Queensland Heritage Act 1992*.

The Brisbane General Hospital Precinct site is also subject to the Heritage Overlay of the Brisbane City Plan 2014 (the City Plan) as a Local Heritage Place.

While subject to the heritage entry of the Brisbane General Hospital Precinct, part of the Brisbane General Hospital Precinct site is included in the Herston Quarter Priority Development Area (PDA).

The Brisbane General Hospital Precinct contains three major heritage buildings that are located in the Herston Quarter PDA and are the subject of this report:

- The Lady Norman Hospital;
- The Lady Lamington Nurses' Home; and
- The Edith Cavell Block.

The Lady Norman Hospital was constructed in 1895 as the main children's hospital building at the site. It is a two storey masonry building with verandahs to the north and south, which has been used most recently for office accommodation. The building is a rare nineteenth century hospital building in Queensland. Given the rate of change in the provision of health-related services since its original construction, and the age of the building generally, the Lady Norman Hospital building is also remarkably intact.

The Development Application seeks a Development Approval for a Material Change of Use for a series of land uses to be accommodated in the Lady Norman Hospital. It is important to note that no schemes have been prepared for the precise adaptation of the building for any use as part of the current proposal. A preferred use and proposed scheme will be prepared for this building after the Development Approval has been issued (EDQ), through a compliance assessment approval process with Economic Development Queensland under the Development Approval that is sought currently.

The Sylvia Moffat Theatre, a freestanding addition to the Lady Norman Hospital from the early twentieth century, will be demolished under a separate Development Application lodged with EDQ. The Sylvia Moffat Theatre is not included in the register entry for the Brisbane General Hospital Precinct State Heritage Place, and therefore its demolition has no negative impact on the cultural heritage significance of the Brisbane General Hospital Precinct site.

The Lady Lamington Nurses Home building was constructed in several stages, from the late 1890s to the late 1930s. A large building constructed in five distinct stages, the Nurses Home contains two discrete built forms – the lower rise “E” shaped facebrick building with encircling verandahs facing the east, and the two rendered masonry tower blocks on the western side.

The building is quite intact from its various iterations and extensions and is an important and culturally significant example of a nurses' quarters in Queensland given its age, size, built form and general presentation.

The existing partitions comprising the corridors and rooms across all floors are constructed of a combination of timber boards, cement sheet or glazed infill. Suspended ceilings have been installed throughout most floors. The current partitions do not comply with current fire ratings or achieve satisfactory acoustic performance.

The large size of the building and the current state of the fabric externally and internally means that the conservation and adaptation of the Lady Lamington Nurses' Home for a new use is a major challenge, with many competing outcomes and requirements to address.

It is proposed to adapt the Lady Lamington Nurses Home for student accommodation purposes across all wings and floors. While the external fabric is largely retained (or reconstructed where required due to poor condition), this use requires the demolition of most of the internal fabric of the building. While extant masonry walls internally are largely retained, the current lightweight partitions that comprise the former accommodation rooms in the building will be demolished, and new internal construction proposed to deliver the new use of student accommodation.

The applicant considers that the proposed use of the building for student accommodation purposes aligns very closely with the intent of the original construction and use of the place. In this regard the proposed scheme is more than suitable in a use sense, as the closest contemporary use to the original use of the building as nursing accommodation.

The applicant considers that no other modern use of the Lady Lamington Nurses' Home will replicate the repetitive cellular arrangement of the former accommodation rooms across all floors of the building (the original use). Commercial offices would require an open plan layout for most of the interiors, residential accommodation would also require larger floor plates, individual access points and additional lifts, while hotel accommodation would require larger room sizes than currently exist and may be difficult to deliver in a double-loaded corridor arrangement.

The adaptation of the building for this student accommodation use will require substantial modifications internally, and to a lesser extent externally, to make the buildings compliant with modern standards and codes for fire rating and equitable access, as well as the introduction of modern services and other requirements.

Given its condition, size and age, the Lady Lamington Nurses' Home needs a viable use that can provide a commercial return. The changes contemplated for code compliance and services provision and installation would be necessary were the buildings to be adapted for commercial office use, short term accommodation, or indeed any other use. Some extent of modification and alteration will be required to these buildings whatever the proposed use.

The proposed scheme seeks the removal of these lightweight partitions throughout the building, the reconstruction of the current double-loaded corridor arrangement of the floors, and the construction of new fire rated partitions to provide new student accommodation rooms. The current format of small single rooms is largely followed, while some two-bedroom units are proposed in places. Existing amenities will be demolished, and new amenities and facilities provided in these existing spaces.

The offset of the central corridor throughout many of the floors of the wings of the building is an issue to address. This has been decided upon after much discussion and consideration, as a means to increase the yield of the development within the existing footprint of the building, to deliver a great return for the project. This is not denied. A wider room to one side allows more double rooms to be provided while utilising existing window locations to the external elevations for each room. While the "offset" is noticeable on a floor plan, and in an assessment and regulation sense, it is argued that this altered corridor alignment will be less noticeable and perhaps not noticeable by users and visitors to the building when the project is delivered. The corridors will continue to have rooms opening off on either side; its precise location in the floor plan of each wing will not be obvious to users.

Again, the applicant maintains that no other proposed use for this building will provide a double loaded corridor in these buildings. In this regard the proposal continues a significant component of the use and form of the building, albeit in newly constructed fabric for compliance purposes, and with a slightly offset corridor.

It is noted that internal masonry walls will be largely retained throughout the building, and the corridor will remain in this existing location around these areas of the buildings. Internal spaces identified as significant in the 2018 Conservation Management Plan (CMP) prepared by Metro North for this building, such as the main entrance hall, vestibule, matron's quarters and waiting rooms, and the charge nurses' bedrooms, sitting rooms and box rooms, in the original 1897 wing of the building, and the staircases and identified joinery, will be retained.

The 1897 and 1914 sections of the building features timber double hung sash windows to the external verandahs to most rooms. The 1931 section of the building contains timber French doors to the external verandahs.

While the double hung sash windows remain operable, the windows do not provide sufficient head heights when open to allow for ease of access and use.

The proposed scheme seeks to remove the sash windows to most rooms of the building and replace them with modern but complementary French doors, constructed of timber like the other joinery, to allow for use of the verandah spaces by the students. Some representative examples of the double hung sash windows will be retained in certain areas of the buildings. The existing timber French doors in the 1931 wing will be retained.

Other changes that are required to the building are the removal and replacement of the timber verandahs throughout the building, and the removal and reconstruction of the timber balustrading and handrails

throughout. This replacement is required due to the poor condition of these elements of the building. Once reconstructed, the handrails will need to be modified to achieve compliance with modern standards and codes.

It is emphasised that the Lady Lamington Nurses' Home has been vacant and unused for close to 30 years. The building will never be reused for its original purpose again, with fundamental changes to the training of nurses since the late nineteenth century, and indeed the fundamental changes of nursing over this time, from a vocation to a profession.

The building is in a fair condition and state of repair in many places and will need considerable reconstruction and investment of funds to allow it to be used for any purpose.

The proposed development will allow a building that has been vacant and unused for many years to have a new life. Some major changes are required to deliver this new use. These modifications are required to deliver this project – it is highly unlikely the Lady Lamington Nurses' Home can be reused in its current state and condition. Changes need to be made to the building to allow this new use.

The student accommodation use is the closest modern use to the significant original use of the place. No other use is similar to this former use of small repetitive rooms, cellular arrangement of spaces, central double-loaded corridor, shared facilities and a sense of collegial living.

A small single storey masonry building to the north of the North Tower of the Lady Lamington Nurses' Home will be demolished as part of the proposal. This building, constructed in the 1930s or 1940s and thought to be originally used for storage, is not included in the register entry for the Brisbane General Hospital Precinct, and is not referenced in the CMP for the Lady Lamington Nurses' Home. Its demolition has no negative impact on the cultural heritage significance of the Brisbane General Hospital Precinct site.

The Edith Cavell Block was constructed in 1922 and provided on-site accommodation for nurses who worked in the nearby children's hospital. At three storeys with a part basement level, the building was constructed of facebrick masonry with a roughcast finish to the upper floor. The building was used as nurses' accommodation until the late 1980s, when it was adapted for use as offices.

The building has been closed and vacant for a few years and was badly damaged with water ingress due to a storm in 2014. The internal partitions and ceilings have been infested with mould and need to be removed throughout the building.

The proposed use of the Edith Cavell Block as part of this Development Application is for a child care centre on the basement (ground) floor and the second floor, with commercial uses on the first (in part) and third floors and centre activities (food and drink outlet, shop) on the first floor. New internal partitions are required to accommodate these uses, while external changes to the building fabric have been minimised. An internal lift is proposed, while an external lift and fire stair structure is proposed to the north-west of the site for the child care centre use and an external fire isolated stair structure is proposed to the north-east for the commercial office use. These additions minimise impacts on the external fabric of the building and are reversible.

The adjoining "milk shed" building, an extension to the Edith Cavell Block to the west, will be demolished under a separate Development Application lodged with EDQ. This extension is not included in the register entry for the Brisbane General Hospital Precinct State Heritage Place, and therefore its demolition has no negative impact on the cultural heritage significance of the Brisbane General Hospital Precinct site. Some of the bricks from this extension will be retained and reused in the landscaping for the wider scheme.

The wider scheme and the proposed adaptation of the Lady Norman Hospital Building, the Edith Cavell Block and the Lady Lamington Nurses' Home as part of this Development Application is recommended to EDQ for assessment and approval.

# 1. INTRODUCTION

This Heritage Impact Statement has been prepared for Australian Unity Funds Management Limited and Cedar Pacific Investment Management and concerns a series of heritage buildings and spaces within the Brisbane General Hospital Precinct site, which is partly located in the Herston Quarter Priority Development Area (PDA).

The Herston Quarter PDA contains a range of heritage places that are contained within the designated Brisbane General Hospital Precinct.

The Brisbane General Hospital Precinct site is permanently entered in the Queensland Heritage Register as a State Heritage Place under the *Queensland Heritage Act 1992*.

This report has been prepared in support of a Development Application to Economic Development Queensland (EDQ), for the proposed adaptation of the main heritage buildings in the Brisbane General Hospital Precinct for new uses. The former Lady Lamington Nurses' Home will be adapted as student accommodation across all buildings. The Edith Cavell Block will be adapted for use as a child care centre and commercial office space. No specific scheme is proposed for the adaptation of the former Lady Norman Hospital Building as part of this Development Application. The reuse of the building will be addressed at a later stage under a compliance assessment process as part of the overall Material Change of Use development approval.

Other works are proposed to the grounds of the Brisbane General Hospital Precinct including some partial excavation, regrading of levels and the provision of new public realm within the wider site.

## 1.1. BACKGROUND

The former Lady Lamington Nurses Home, Edith Cavell Block and the former Lady Norman Hospital are major features of the Brisbane General Hospital Precinct site, which is located at 40 Bowen Bridge Road, Herston.

The site of the Brisbane General Hospital Precinct is permanently entered in the Queensland Heritage Register as a State Heritage Place under the *Queensland Heritage Act 1992* (QHR ID# 601903).

The former Lady Norman Hospital building was constructed in the late 1890s as a children's hospital at the wider Brisbane General Hospital site. A two storey masonry building, the hospital provided large ward spaces on both levels, as well as operating rooms and rooms for nurses. More recently the building has been used as offices for the wider hospital.

The Lady Lamington Nurses Home building was constructed in several stages, from the late 1890s to the late 1930s. A large building with five distinct wings, the Nurses Home contains two distinct built forms – the lower rise "E" shaped facebrick building with encircling verandahs facing the east, which was constructed in three stages, and two rendered masonry tower blocks on the western side, which were themselves constructed in two stages. The Lady Lamington Nurses Home operated as nurses' accommodation from its original construction, until the 1980s. It has been vacant since that time.

The Edith Cavell Block was constructed in the early 1920s as a single building of three storeys with a basement and is a facebrick building with roughcast render on the second floor. The building also provided accommodation for the nursing staff of the Brisbane General Hospital from its original construction through to the 1980s. An extension was made to the west of the building shortly after its original construction (the milk shed) which is not part of the heritage entry for the Brisbane General Hospital Precinct State Heritage Place. A swimming pool was also constructed to the north in the 1950s, while a drystone wall constructed in the 1990s. More recently the Edith Cavell Block has been used as offices for the wider hospital.

While subject to the heritage entry of the Brisbane General Hospital Precinct, these buildings and part of the Brisbane General Hospital Precinct site are included in the Herston Quarter Priority Development Area (PDA).

The designation of part of the Brisbane General Hospital Precinct site in the Herston Quarter PDA does not override these heritage considerations. The PDA designation does however remove the site from the standard approvals processes of Development Applications within the Brisbane City Council local government area, and referral to the State Assessment Referral Agency (SARA) for the consideration of state interests including cultural heritage.

The assessment of Development Applications in the Herston Quarter PDA will be undertaken by EDQ, without the formal technical advice from the heritage officers of the Department of Environment and Science (DES). However, considerations of heritage significance and impacts of development will remain issues in the assessment of proposed adaptations to heritage places in the PDA by EDQ.

The Herston Quarter PDA is being redeveloped by Australian Unity Funds Management Limited as a landmark Brisbane destination and global benchmark for health precincts. Australian Unity has entered into an agreement with the Metro North Hospital and Health Service (Metro North) to deliver a major upgrade to the Herston Health Precinct. The master plan for Herston Quarter currently includes:

- New private hospital, Specialist Rehabilitation and Ambulatory Care Centre (SRACC) and supporting health services;
- Restoration and adaptive use of significant Heritage buildings existing on the site, providing a mix of student accommodation, child care facilities, commercial suites, retail and food and drink outlets;
- New residential accommodation positioned to take advantage of the site's proximity to the CBD and public transport infrastructure;
- Specialised retirement living and aged care accommodation to encourage intergenerational living, socialisation and interaction; and
- Significant revitalisation of the public realm to create a series of attractive places and destinations.

The proposed restoration and adaptive use of the heritage buildings is an essential component of the Herston Quarter project.

## 1.2. THE BRISBANE GENERAL HOSPITAL PRECINCT

The Brisbane General Hospital Precinct is a State Heritage Place that contains a range of health-related heritage buildings that are currently vacant and not used as part of the adjacent Royal Brisbane and Women's Hospital. These buildings will be adapted for new uses as part of the Herston Quarter redevelopment.

These buildings date from the 1860s to the 1940s and include the following buildings and places that are part of the Herston Quarter:

- Lady Norman Wing (1895);
- Lady Lamington Nurses' Home (low rise wings – 1897, 1914 and 1931);
- Edith Cavell Block (1922); and
- Lady Lamington Nurses' Home (Block 1 north tower – 1936 and Block 2 South Tower – 1939).

Positioned on the highest point of the hospital site, the Nurses' Homes and Edith Cavell Block are visible from across the northern suburbs of Brisbane and are set amongst landscaped grounds with pathways, stone and brick walls, gardens and mature trees; forming the residential core, a central component to the functioning of the hospital from the 1890s until recent times.

## 1.3. THE SITE

The site is located within the suburb of Herston, approximately 3 kilometres north of the Brisbane Central Business District. The site of the Development Application is 300 Herston Road, Herston.

Please refer to **Figure 1** for an aerial photograph of the Heritage Precinct site.

The subject site is formally described as Lot 545 on SP289113. The site comprises one land parcel with a total area of 5.292 hectares.

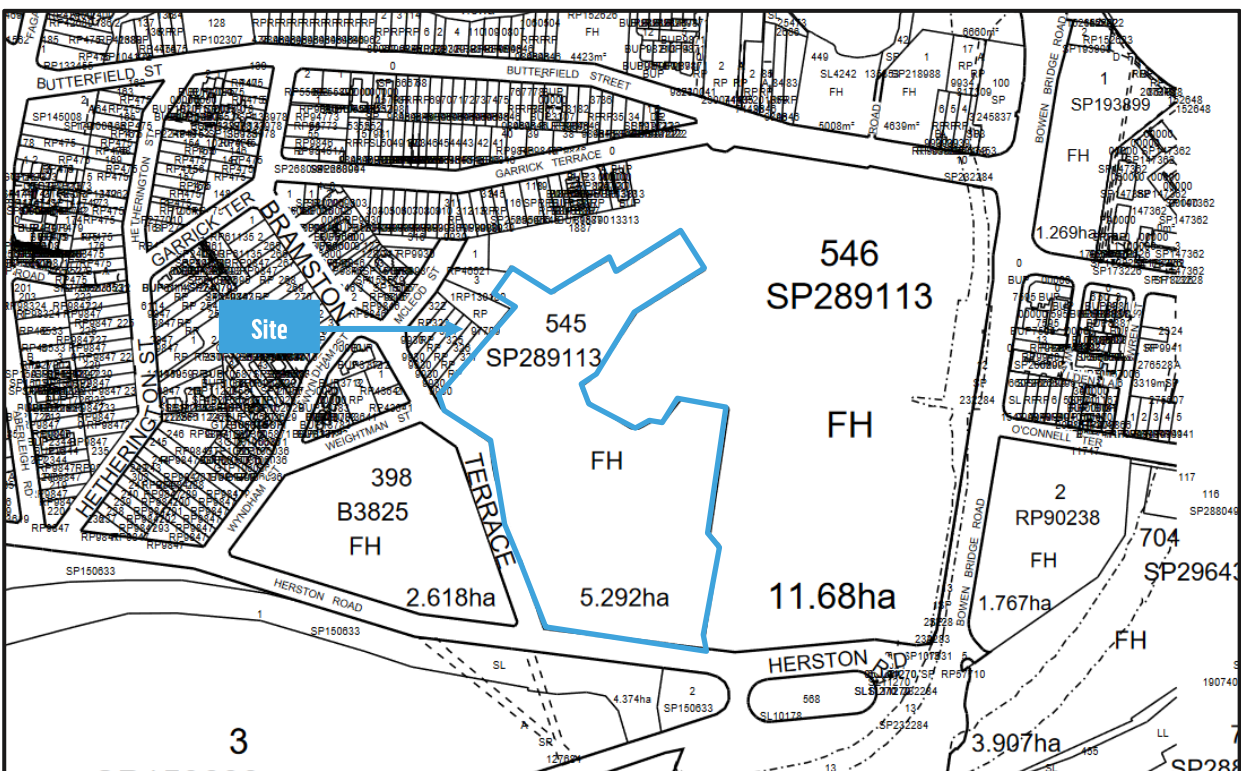
Please refer to **Figure 2** for a cadastral plan of the Heritage Precinct site.

Figure 1 – Aerial photograph



Source: Nearmap

Figure 2 – Cadastral mapping



Source: DNRM, SmartMap

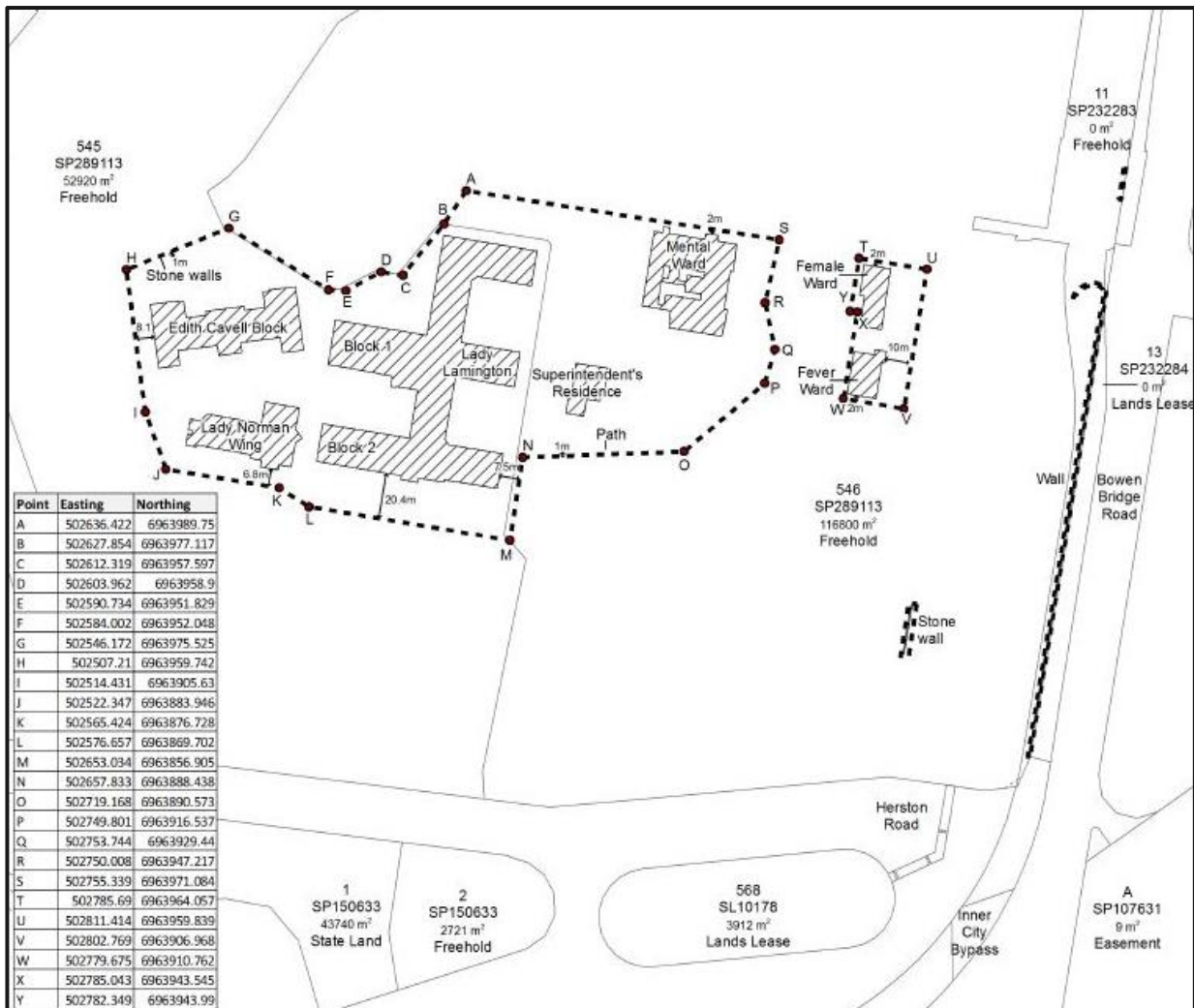
The site is held under freehold title. Metro North Hospital and Health Service is the registered owner of the site.

The State Heritage Place of the Brisbane General Hospital Precinct is partly within the Herston Quarter PDA and partly outside the PDA.

The below image is taken from the register entry for the site and shows the curtilage for the heritage entry for the Brisbane General Hospital Precinct in the Queensland Heritage Register, and the identified buildings that

comprise the entry. The Superintendent's residence, the mental, fever and female wards and the stone retaining wall are not located in the Herston Quarter PDA, are not subject to this development application and are not discussed in this report.

Figure 3 – Heritage mapping



Source: Department of Environment and Science – register entry QHR ID# 601903.

## 1.4. THE PDA DEVELOPMENT SCHEME

The PDA Development Scheme prepared by the DSDMIP in November 2017 informs and regulates development in the Herston Quarter PDA.

While primarily a planning document, the Development Scheme makes specific references to the Brisbane General Hospital Precinct and contains a series of heritage provisions concerning the potential conservation and adaptive reuse of the buildings within the Brisbane General Hospital precinct site.

Section 2.4.1 of the Development Scheme contains PDA-wide criteria concerning land use, built form and heritage.

For heritage matters, the Development Scheme requires that development delivers high quality built form outcomes that:

- improve the access to and amenity of PDA significant heritage buildings;
- provide for the conservation and adaptive re-use of PDA significant heritage buildings with a range of uses that contribute to and complement activity in the PDA.

The Development Scheme includes a designated Heritage precinct. This precinct incorporates the western half of the Brisbane General Hospital precinct as entered in the Queensland Heritage Register, including the Lady Lamington Nurses' Home, the Edith Cavell Block and the Lady Norman Wing. As noted above the Superintendent's Residence, the Female Ward, the Fever Ward and Mental Ward are not part of the PDA and are not part of the proposed development.

Section 2.5.3 of the Development Scheme contains provisions for the Heritage Precinct in the PDA. The precinct intent for the Heritage Precinct is that development in the precinct will (inter alia):

- *provide a range of land uses that contribute to the activation and vibrancy of the precinct;*
- *activate the PDA significant heritage buildings;*
- *complement other activities in the PDA including residential, food and beverage, retail, commercial and accommodation uses.*
- *provide for the conservation and adaptive re-use of the heritage place in a way which:*
  - *preserves its cultural heritage significance while allowing for the functional requirements of the new use;*
  - *respects the historic built form character and setting.*

In terms of the conservation and adaptive reuse of the individual heritage places in the Heritage Precinct, the Development Scheme refers to the requirements, standards and guidance identified in the "Developing Heritage Places: Using the development criteria document", which was prepared by the Department of Environment and Heritage Protection (DEHP).

The Development Scheme also includes an Implementation Strategy that identifies a number of key objectives and actions that support the achievement of the vision for the PDA. One of the focus areas of this implementation strategy is the conservation and adaptive reuse of the Brisbane General Hospital Precinct heritage place.

The conservation and adaptive re-use of the Brisbane General Hospital heritage place is to catalyse the broader activation and revitalisation of the PDA and contribute to a distinctive character and identity for the broader Herston Quarter Precinct.

A series of actions to deliver this objective include the following:

- *Investigate strategies to ensure the heritage place is adaptively re-used in the short and long term to help activate the PDA and contribute to its identity, vibrancy and sense of place.*
- *Respond to the cultural significance of the heritage place in accordance with the principles of the Burra Charter*
- *Prepare a conservation management plan to manage the construction and operational impacts on the heritage place, and to provide guidance for their ongoing care and maintenance.*
- *Engage with key heritage stakeholders where appropriate to deliver relevant interpretation material for the heritage place in the PDA and the broader Herston Health Precinct to highlight their cultural heritage significance including recognition that the buildings are one of the most significant groups of health-related heritage listed buildings in Queensland.*
- *Consult with the Department of Environment and Heritage Protection (DEHP) and the Queensland Heritage Council to obtain advice regarding all significant heritage matters.*
- *Ensure DEHP are notified of any archaeological artefacts discovered during site works and relevant requirements are met in accordance with the provisions of the Queensland Heritage Act 1992.*

The Conservation Management Plans (CMPs) referenced above have been prepared for the various buildings at the site by Thom Blake and Peter Marquis-Kyle for Metro North, in 2018. These CMPs have been used and referenced in the preparation of this Heritage Impact Statement.

## 1.5. THE DEVELOPMENT APPLICATION

A Development Application is being prepared on behalf of the Herston Development Company Pty Ltd, or Australian Unity for the assessment and approval by EDQ.

The proposed scheme is for the adaptive use of the heritage buildings within the Herston Quarter PDA for new uses. The development area is generally referred to as the 'Heritage Precinct'.

As the site is located within the Herston Quarter PDA, the development application seeks approval from the Minister of Economic Development Queensland's (MEDQ) for the following purposes:

- PDA Development Application for a PDA Development Permit for a Material Change of Use – Rooming Accommodation (Student Accommodation), Childcare Centre, Food & Drink Outlet, Shop, Health Care Service, Research and Technology Industry, Office, Indoor Sport and Recreation, Short Term Accommodation and carrying out Building Work on a State Heritage Place.

## 1.6. THIS REPORT

This report concerns the proposed adaptation of the heritage buildings for the uses identified as part of the Development Application. The report acts as the Heritage Impact Statement for the Brisbane General Hospital precinct prepared as part of the overall Development Application.

The plans for the proposed adaptation have been reviewed for the preparation of this Heritage Impact Statement. These include the following:

- Lady Lamington Nurses' Home adaptation – Nettleton Tribe Architects;
- Edith Cavell Block adaptation – Elevation Architecture;
- Lady Norman Hospital works – Hassell.

The background history and cultural significance of the site and these buildings are discussed, and the proposed redevelopment of the buildings is reviewed.

The impacts of the project on the cultural heritage significance of these components of the Brisbane General Hospital Precinct as a State Heritage Place is then assessed.

## 2. UNDERSTANDING THE PLACE

### 2.1. THE BRISBANE GENERAL HOSPITAL PRECINCT

The following discussion on the history and development of the Brisbane General Hospital Precinct is adapted from existing material in the heritage entry for the site, and the CMPs prepared for the individual buildings by Metro North.

#### 2.1.1. Background

The Brisbane General Hospital opened at this Herston site in January 1867, with the first buildings located at the south-east corner of Bowen Bridge and Herston Roads. A separate children's hospital was constructed on an adjoining site to the west in the early 1880s, while the Wattlebrae Infectious Disease Hospital was constructed in the early twentieth century north of O'Connell Terrace. The Brisbane Women's Hospital was constructed in the 1930s on Bowen Bridge Road further to the north, and on the lower side of the elevated hill at the site.

The current hospital, known as the Royal Brisbane and Women's Hospital (RBWH), is one of the largest in Australia and provides an extensive range of general and specialist services. It is a major teaching facility for medical, nursing and paramedical training, and a major medical research facility for Queensland.

The RBWH is accommodated in a range of modern buildings. Most of the heritage buildings that remain on the site are not actively used as part of the provision of health services at this hospital site.

The Brisbane General Hospital Precinct comprises a collection of buildings and landscape features dating from the 1860s to the 1940s including as follows:

- The former Fever Ward (1875);
- The former Female Ward (1885);
- The Lady Norman Hospital Building (1895);
- The Lady Lamington Nurses' Homes (1897, 1914 and 1931)
- The former Mental Ward (1918);
- The Edith Cavell Block (1922);
- Lady Lamington Nurses' Home Block 1 north (1936), and Block 2 south (1939);
- The former Superintendents Residence (1941);
- A Brisbane tuff Wall (circa 1866) associated with the early entrance road from Herston Road; and
- A substantial Brisbane Tuff retaining wall dating from the late 1930s / early 1940s along Bowen Bridge Road.

This report concerns itself with three of the above elements:

- The Lady Norman Hospital Building;
- The Lady Lamington Nurses' Home;
- The Edith Cavell Block.

The Lady Lamington Nurses' Homes and Edith Cavell Block are located at the highest point of the hospital site and are visible from the north and south. Together with the former Superintendent's Residence, these buildings are set among landscaped grounds with pathways, stone and brick walls, gardens and mature trees and form the former residential core of the former hospital site. These buildings and spaces were a central component of the functioning of the hospital from the 1890s until recent times.

The Brisbane General Hospital was initially managed by a committee and funded by a mixture of public subscriptions and government subsidies. In 1863, the Queensland Government established a hospital reserve of 15 acres on Bowen Bridge Road which the committee accepted, while expressing concern that it was not a convenient site for the residents of Brisbane. The site, known as 'The Quarries', was bounded by

Bowen Bridge Road to the east, O'Connell Terrace to the north and the open space of Victoria Park to the west and south. The General Hospital opened in January 1867 in a two storey stone building with a central tower designed by the Government Architect, Charles Tiffin.

The nineteenth century British convention of local authorities administering isolation or infectious diseases hospitals was adopted in Queensland with the Health Act of 1900. The Metropolitan Joint Board for Infectious Diseases was formed in Brisbane and in 1902 the Wattlebrae Infectious Disease Hospital was established on a site adjacent to the children's hospital.

By the early 1900s the Hospital Committee that ran the facility experience severe financial difficulties. The growth in Brisbane's population was not matched by increases in voluntary contributions and new facilities and upgraded existing facilities were necessary. Considerable construction work was undertaken between 1909 and 1920 including a range of new buildings for patients, outpatients and operating theatres.

The Queensland Government assumed control of the Brisbane General Hospital in 1917 due to these financial issues. The *Hospitals Act* of 1923 signalled the transition from hospitals operating as charitable institutions to essential community services which were funded and maintained by the state. Developments in medicine, the increasing population and changing social conditions and attitudes to health care resulted in increasing numbers of people seeking treatment at the hospital. The Brisbane and South Coast Hospitals Board was established in 1924 and assumed responsibility for the General Hospital and Hospital for Sick Children.

A single storey brick building for the treatment of fever cases was erected in 1875, to the north of the site overlooking O'Connell Terrace. Modelled on the pavilion plan, which was based on contemporary ideas about the importance to healing of a healthy environment created with natural ventilation and efficient sanitation, this building contained a single open ward surrounded by verandahs providing accommodation for 25 patients. The Fever Ward was converted to a gynaecological ward in 1890 and along with two adjacent Female Wards constructed in 1885, became the focus of female health care in the Hospital. The Female Wards, distinguished by prominent roof ventilators, were also based on the pavilion plan and constructed on a base of Brisbane Tuff quarried from the site. In the 1930s, the former Female Ward accommodated a clinic for the treatment of poliomyelitis under the direction of Sister Elizabeth Kenny.

### **2.1.2. Lady Norman Wing**

The Hospital for Sick Children was established in 1883 in a two-storeyed timber building at the western end of the site. Responding to the constant problem of overcrowding in the Children's Hospital, a two storey masonry building was constructed in 1895. The building was named the Lady Norman Wing, in honour of the wife of then Queensland Governor Sir Henry Norman who opened the building and had an active interest in the hospital. The building was designed by JJ Clark and Charles McLay, and followed the pavilion planning of hospital buildings of this period, with large single spaces for wards to allow for cross ventilation with each bed placed by a window.

The Lady Norman Wing contained four wards, two on each floor positioned at right angles off a connecting corridor, as well as accommodation for nurses, a consulting room, lavatories and conveniences. The wards, were named after a series of women who had made a significant contribution to the hospital (Cowlshaw, McConnel, Gray and Raff), were ventilated by opposite rows of windows and doors that opened onto verandahs, some of which were later utilised to accommodate patients during times of overcrowding. Subsequent additions included a milk kitchen, treatment rooms and lavatories in the 1950s, and the remodelling of wards in the 1960s and 1970s, including one for use as nursing tutorial and lecture rooms.

The building was adapted for use as offices in the 1990s but retains its principal spaces and planning and is substantially intact.

A separate annexe or addition survives adjacent to the original building to the north. Known as the former Sylvia Moffat operating theatre, this building was originally constructed in 1908 as an additional operating theatre with ancillary rooms. The building was extended in 1950 with another brick building that doubled the size of the original building, providing an additional operating theatre and other ancillary facilities. A second extension was added in about 1970. The building was extensively modified in 1984 when converted to offices and storage and little evidence remains of the original use. The Sylvia Moffat Theatre is not included in the heritage entry for the Brisbane General Hospital Precinct and is not of cultural heritage significance.

### **2.1.3. Lady Lamington Nurses' Home (1897 and 1914)**

In 1893 the annual report of the hospital committee referred to the necessity for improved accommodation for the nursing staff. Constructing a separate building for nurses was a costly exercise and, as the hospital

relied on donations, it was not easy to attract funds for such a project over and above seeking funds for the direct care of the sick. The committee approached the government for assistance in March 1895. The Colonial Secretary, the Honourable Horace Tozer, was receptive and agreed to assist by contributing one pound for every pound given by the public. Although the committee was expecting more assistance – indeed it was hoped the government would fully fund the project – planning of the new quarters began in earnest.

The first major decision the committee had to make was where to locate the new building. A site on the highest point of the hospital reserve was chosen, for two reasons. It remained close but clearly separated from the wards and other hospital buildings below, facing Bowen Bridge Road. And further, the building would be perfectly placed to capture breezes and protect the health of the nurses within the hospital complex.

The second task of the committee was to select an architect. The committee agreed to conduct a competition and invited designs for the proposed nurses' home. The competition was advertised on 5 October 1895 and entrants had six weeks to submit their designs.

The designs were to satisfy the following criteria, among others.

- Cost no more than £3,500;
- Provide accommodation for 52 nurses, including one head nurse and four charge nurses, plus a dining room for 40 persons, and a kitchen to cook for 100;
- Be built in brick or brick and cement, on a concrete or stone foundation;
- Be built on an area of ground 120 feet x 120 feet (37 m x 37 m), with provision for future extensions;
- Each floor to be built to allow easy examination for white ants;
- Each bedroom was to be furnished with a bed, a wardrobe, a chest of drawers with a mirror, a chair, a circular table, a small bookshelf and wash stand;
- The head nurses and four charge nurses to have their own sitting rooms and the ward nurses and assistant nurses to share sitting rooms according to rank;
- Each sitting room to be provided with a fireplace;
- Six bathrooms and six earth closets to be provided;
- Staircases to be arranged to reduce the risk of fire by preventing ventilation from the lower floors into the upper storeys;
- Each room to have floor-to-ceiling sash windows and each floor its own verandah.

Fourteen designs were submitted and the committee, assisted by AB Brady, the Government Architect from the Department of Public Works, judged the entry submitted by John Hall and Son in conjunction with Robin Dods to be the winner. The successful entry won £30. The *Brisbane Courier* provided a detailed description of the Hall and Dods scheme:

*[It] has been planned to suit the highest portion of the proposed site, the grades there being less steep and requiring less alteration on by cutting. The general plan is in the shape of the letter T, and provision is made for duplication by adding a wing, which with the other portion will form a letter H. The design is very simple, the architects relying for effect on a tile roof, bungalow-shaped, with ornamental louvre gables, introduced at the termination of the main ridges, with a central turret over the entrance hall. The main entrance is at the internal angle, where the floor is not too far from the ground, and through a vestibule. The staircase hall is reached where the head nurses' sitting room is centrally placed, also a visiting-room for nurses to meet their friends. The corridors all connect with this hall, and are shut off from them by swing doors to prevent draughts or improper ventilation. The housemaids' quarters, which had to be separate from those of the nurses, are provided for in the basement portion of the north wing.*

*The cubicle system of bedrooms has been adopted, each compartment being partitioned off by walls 8 ft. high, thus giving free access of air over the whole of the wards, which are 12 ft. in height. The general sitting rooms are placed at the end of the east wing, and have windows opening on to three sides—north, south and east.*

*The question of ventilation has received the utmost consideration by the architects, Mr. Dods having had considerable practical experience in this direction. The doors and windows of the cubicles are directly in a line with one another, which gives a through circulation of air not obtainable in any other way. The windows are all large and carried down to floor level, and have over each a fan-light opening up to the ceiling, hung on hinges so as to direct the draught upwards. There are also numerous air flues connected with air extractors on the roof. Coolness is also provided for by the continuous verandas and balconies on all sides. There seems to be one slight objection to the planning, that is, that one of the wings extends to the rear facing the west, and will not participate in the prevailing easterly and northeasterly breezes.*

This description highlights some of the key design elements of the building, which were continued in subsequent additions.

Climatic considerations were paramount. The particular requirements of nurses' quarters were also important. It was not simply a matter of providing a series of rooms to accommodate the nursing staff. The underlying philosophy of modern nursing practice was embedded in the planning of the building.

The 'cubicle' system was adopted and was a key feature of the nurses' home. Nurses were not provided with separate bedrooms but cubicles which were described 'as one of a series of separate sleeping chambers as distinct from an undivided dormitory'. With the cubicle system, which survived until the late 1950s, nurses were afforded limited privacy. Modern nursing operated on the strictest of hierarchies, with all nursing personnel answerable to the matron. In addition to her responsibility for the working of the hospital, every nurse had to answer to the matron 'both on and off duty'. Part of the matron's role was to mould and police the behaviour of the nurses. Therefore, in the design of the Lady Lamington Nurses' Home, the matron's suite of rooms was located on the ground floor next to the main entrance foyer. From this position she could monitor the comings and goings of all nurses. Nurses had to maintain curfews during free time, and any entry into the building after hours would have been noticed by the matron in this key location. Similarly, the charge sisters' rooms were strategically placed so as to reinforce the supervision aspect of spatial planning. One set of rooms was located on the first floor at the junction between the two wings of cubicles. A second set of rooms were located on the ground floor at the northern end of the north wing of the building. These arrangements reflected the matron's duty of care for the young women.

In addition to these key elements, the building had several innovations, including a corner entrance between the two wings and a steep, ventilated roof clad with Marseilles pattern tiles, a material then unfamiliar in Brisbane.

Tenders were called on 2 May 1896 for the construction of the nurses' quarters. A tender for £4,995 submitted by the builders Crawford and Cameron was accepted in June 1896. This exceeded the original amount set by the committee. Advice from the medical superintendent, Dr Ernest Jackson, regarding the cubic air space allowance for each nurse resulted in an increase from 1,350 to 1,500 cubic feet. Use of superior internal finishes also accounted for part of the cost increase.

On 14 September 1896, with the building almost complete, a memorial stone was placed beside the front entrance during a ceremony presided over by the governor's wife, Lady Lamington. At the ceremony, the chairman of the hospital committee informed the guests that as a small mark of the appreciation of the committee for her ladyship's kindness in performing the ceremony, the committee had decided to name the institution the Lady Lamington Home for Nurses.

The nurses' home was completed in 1897, and 50 nurses, four charge sisters and the matron, took up residence. The area immediately in front of the building was levelled and landscaped. A substantial brick retaining wall was constructed to define the space. The walling and entrance stair were topped with a moulded cap and the pillars at the base of the entrance stairwell were 'surmounted with a cap and concrete ball'.

Built of brick with a Marseilles tiled roof, the building was enclosed by verandahs. The semicircular steps to the courtyard garden became a popular posing place for nurses' photographs. Although the competition brief called for a kitchen and dining room, these were not included.

Lady Lamington Nurses' Home (named for the wife of the then Queensland Governor) was the first of Dods' Queensland buildings and established the practice of Hall & Dods, which quickly became the leading architectural firm in Queensland undertaking numerous residential, commercial, ecclesiastical, and hospital works. Dods has been acknowledged as one of the most significant early twentieth century Australian architects, and one of few Arts and Crafts-influenced practitioners in Queensland.

Arts and Crafts was an international design movement that flourished between 1860 and 1910, its influence continuing into the 1930s. The movement championed traditional craftsmanship using simple forms and drew from an eclectic range of stylistic elements and details. Importantly, it valued local variations in traditions so that good design would have relevance within its context. For Dods this translated into designs that were climatically responsive, paying attention to aspect and ventilation, with well-proportioned solid forms, wide porches or verandahs, and prominent steep roofs.

In 1914, Hall & Dods called tenders for additions forming the building into a 'U' shape in plan; the contract being let to Brisbane builder George Day at a price of £11,889.

Lady Lamington was to form the first part of what became the residential precinct for the hospital site which stretched from the top of the hill down towards Bowen Bridge Road. It included the Edith Cavell Memorial Block for Nurses (1922), Medical Officers Quarters (1934; 1939), Medical Superintendent's Residence (1941), and two other residences (erected 1941).

#### **2.1.4. Lady Lamington Nurses' Home (1931, Blocks 1 and 2 1936 and 1939)**

With an increase in nursing staff in the early 1930s, further accommodation was required. In 1931, the architects Atkinson and Conrad in association with Lange Powell added the northern wing to the Lady Lamington Nurses' Home, creating the E-shaped plan of the building that remains presently.

In 1936, the first of the two tower blocks on the western side of the original Lady Lamington Nurses' Home, Block 1 (north), was constructed. The second tower, Block 2 (south), was constructed in 1939. Both connected to the first and second floors of Lady Lamington.

In their planning the layouts of the towers were very similar to the earlier quarters, with a centrally located double loaded corridor with small rooms opening out from either side onto verandahs.

Semi-partitioned cubicles, with access from a central corridor and to a common verandah, remained on each of the accommodation floors of the new buildings. The individual cubicle size was also slightly enlarged, from 10 feet by 10 feet in the earlier wings to 9 feet by 12 feet in the tower blocks. Each tower was eight storeys, and the new buildings incorporated modern lifts and stairwells in recognition of contemporary fire regulations for tall buildings. On the ground floor of the North tower, provision was made for a lecture room for nurses, and the ground floor of the South tower became a recreation hall.

The increasing emphasis on professionalising the training of the nurses saw the inclusion of a dedicated lecture theatre in the north tower. In addition, a recreation hall was located on the ground floor of the South tower, acknowledging the extra-curricular needs of the young women trainees. This facility was initially planned to be included in the North tower, but the pressing needs for accommodation meant this had to be delayed and included in the South tower. The use of the Spanish mission aesthetic produced a roof-line and parapet that cleverly concealed a laundry and drying areas. With the completion of the South tower in 1938, the Lady Lamington Nurses' Home provided accommodation for 447 nurses, seven charge nurses and the matron.

Together, they provided a further 242 'cubicles' for nurses. Significantly, the new quarters reduced the provision for special arrangements for senior nurses. In the 1938 South tower, only two small suites of rooms, one each on floors 5 and 6, were allowed in the design. Anecdotal evidence suggests that by the 1940s senior sisters were all located together on one floor, rather than dispersed strategically through the quarters.

The architectural vocabulary employed was quite different to the existing nurses home, using the contemporary Spanish Mission style favoured by the architect AH Conrad, which became the hospital's 'house' style.

By the end of the 1930s the site had become the largest hospital complex in Australia and has continued to expand, except for disruptions caused by World War II.

A small single-storeyed library was built between the Blocks 1 and 2 in the 1950s. The roof on the northern block was rebuilt after being destroyed by fire in 1993, and the Marseilles tiles on the Lady Lamington roof were replaced in 2012.

#### **2.1.5. Edith Cavell Block (1922)**

Between 1908 and 1923, major development of the Children's Hospital was undertaken in response to the increasing population and advances in medicine and surgery.

While the Lady Norman Hospital opened in 1895 as discussed above, the capacity of the hospital was further increased with the construction of the Lady O'Connell wing in 1899. A single-storey brick building, this block was designed to treat fever patients in summer and pneumonia cases in winter. It also housed the dispensary and outpatients' department. By 1900 the hospital accommodated 104 patients.

The period from 1908 to 1923 was one of major development on the children's hospital site. New wards and facilities were constructed, and the existing buildings extended and modified. This expansion was prompted by a steady increase in the population, as well as advances in medicine and surgery. In 1908, a second storey was added to the O'Connell wing, and in the same year an operating theatre was constructed adjacent to the Lady Norman wing.

Another new ward was constructed in 1909 for diphtheria patients. Other additions to the Children's Hospital included a single storey isolation ward in 1912, and in 1916 an open-air pavilion for orthopaedic patients. A new laundry was constructed the same year.

The need for new nurses' quarters for the nurses who worked at the Children's Hospital became more pressing as the hospital continued to expand. The increase in beds required an increase in the nursing staff. Accommodation for nurses became increasingly crowded, and in 1913 the hospital committee had plans prepared to 'provide increased and better accommodation for the nursing and domestic staff'. The committee had to buy land from the adjoining Herston Estate for the new quarters for £2,000. The outbreak of World War I delayed fund raising, and building costs escalated. The state government promised a loan of £8,000 but the committee was still well short of the £41,000 needed for construction. In March 1919, the Children's Hospital Nurses' Quarters Fund was established and managed by a committee chaired by the mayoress of Brisbane. Some funds were raised but still not sufficient to even consider construction.

The children's hospital committee pressed the government for a much more substantial contribution. In December 1916, the Queensland Patriotic Fund conducted, with the government, the Golden Casket Art Union, a lottery to raise funds for the Repatriation Fund of Queensland. The government decided that the proceeds from the sixth Golden Casket should be directed to the children's hospital, specifically to allow the construction of the nurses' quarters to proceed. The Golden Casket contribution was £13,000. Again, the government was confident that opponents of state-sponsored gambling could not object to a community benefit.

As the state government became the major contributor to the building costs, the design of the building was undertaken by the Department of Public Works. Although the department had not previously designed nurses' quarters, it had a tradition of producing substantial, well-designed and practical civic buildings, including schools, asylum wards, police stations and government offices. On 14 February 1921, the foundation stone was laid for the new nurses' quarters by the governor, Sir Matthew Nathan. As the public works department was already responsible for the supervision of the construction of the nurses' home, few delays occurred.

The building was completed by August the following year, and it was opened by Sir Matthew Nathan on 4 August 1922.

The building was of load-bearing brick construction, with concrete floors on the verandahs and bathrooms, and timber floors internally. The bearers and joists were of hardwood and the flooring was ash. The building was three storeys in height, with an H-shape plan and similar layout on each level. The roof was covered with Australian red tiles in a Marseilles pattern. The internal partitions were constructed of reinforced cement plaster.

The nurses' rooms or cubicles, with a few exceptions, were of similar dimensions across the building – 2.8 metres by 3.3 metres with 2 metre high partitions. This style of accommodation was similar to the cubicles in the Lady Lamington Nurses' Home. Corridors were centrally located on each level. Verandahs on the rear or north elevations provided areas for relaxation and views across the northern suburbs.

On its original construction, the building contained the following accommodation. At the basement level was a box room (for luggage), laundry, and boiler room and coal store. On the ground floor was an entrance hall, nurses' sitting room, writing room, waiting room, locker rooms, two day rooms and 28 bedrooms, together with a self-contained flat for the matron with a sitting room, bedroom and bathroom with toilet. Two store rooms and two bathroom blocks at each end of the building were also located on this floor. On the first floor was the entrance hall, board room, nurses' writing room, housekeeper's sitting room and bedroom, two locker rooms, two day rooms, a self-contained sick nurses' quarters and 28 bedrooms. Again, two store rooms and two bathroom blocks at each end of the building rounded out the accommodation on this level. On the second floor of the building was an entrance hall, nurses' sitting room, nurses' writing room, two day

rooms, two locker rooms and 34 nurses' bedrooms. Again, two store rooms and two bathroom blocks at each end of the building rounded at the accommodation on this level.

In 1924, a kitchen and dining room was constructed adjacent to the nurses' home to the west and connected by a walkway. This building was of similar construction to the main nurses' block (the milks shed extension). The building was initially occupied by nursing staff from the children's hospital. Following the Hospital Act 1923, the Brisbane and South Coast Hospitals Board was established in 1924. This board took control of the Brisbane General Hospital, the Hospital for Sick Children, the Lady Bowen Hospital and the Lady Lamington Hospital. Although no changes were immediately made to the management of the Edith Cavell block and the adjoining Lady Lamington Nurses' Home, the operations were gradually merged. Consequently, nurses from the general hospital were accommodated in the Edith Cavell block, along with the nurses from the children's hospital.

During the period the building was used as nurses' quarters, from the original construction to the 1990s, only minor changes were made to the building. In the late 1950s and early 1960s, the nurses' cubicles were converted to individual rooms, by extending the dividing partitions up to the ceiling. On the north-east corner of the ground floor, six rooms were adapted to make a flat for a senior staff member.

The most obvious change to the building and site was the construction of a swimming pool in 1958 in the grounds immediately to the north. It was built of a cost of £10,000 for the recreation of the nurses in the building.

Until the 1970s, almost all registered nurses who worked in the Brisbane General Hospital and the Children's Hospital lived on site. Registered nurses were paid a wage plus board and lodging. If a registered nurse chose to live away from the hospital, she was paid an allowance. In 1969, after consent from both employers and employees, the wage was changed from a 'living in' to a 'living out' wage. This meant that a wage was paid from which a charge for board and lodgings could be deducted if applicable. This deduction represented one third of a nurse's wages, and from this time many registered nurses opted to find their own accommodation off the hospital site. The situation for student nurses was different; the hospital boards still 'required' them to live in the hospital until 1973. Eventually student nurses could seek permission from their parents to live out.

Although the numbers of student nurses living in was greatly reduced by the late 1980s, the demise of the nurses' home was ultimately sealed with the change from hospital-based to university-based training for nurses. By the late 1980s, nurses were no longer living in the Edith Cavell block.

In 1990, the University of Queensland leased the Edith Cavell block from the North Brisbane Hospitals Board and began the process of converting the building into office and research facilities. All levels were progressively altered, principally for offices. The extent of changes varied. In some areas, the original partitions were completely removed and refitted with a new configuration. However, the original configuration of corridors and rooms remained in other areas.

In late 2014, the roof of the Edith Cavell block was badly damaged in a severe hail-storm. Water entered the building and caused damage to all levels. The building was deemed unsafe and the university was forced to vacate – since then the damaged roof has been repaired but the building has remained unused, and the internal partitions have been compromised.

## **2.2. PHYSICAL CONDITION**

### **2.2.1. Lady Norman Wing**

An L-shaped, two-storey brick building designed to the pavilion plan, each floor consists of a large ward and a smaller ward opening onto wide verandahs. Set at right angles, the wards are connected by a two-storey brick core that contains a large central staircase and various rooms along a central corridor; a faceted bay projects from the northeast corner. The intersecting hipped roof is clad in corrugated metal and features six corbelled brick chimneys; a lantern is centred over the core. Two brick towers with distinctive pyramidal roofs attach to the western side of the building accommodating ablutions facilities.

The verandahs have stop-chamfered timber posts with moulded capitals and decorative cast iron balustrades (first floor) with timber top-rails. Early timber joinery is retained throughout, including: narrow double-hung sash windows (core); top-hung awning windows (towers); and alternating casement windows and French doors, with fanlights, in the wards. Some verandahs on the northern side are enclosed and doors modern replacements.

The building retains the principal spaces and planning, and while some of the wards have been partitioned for offices the ward spaces are largely discernible. Many original internal features remain including the decorative staircase with stop-chamfered timber posts with moulded capitals and brackets; timber-framed skylight, and fireplaces. Many internal finishes are intact. The ripple iron ceiling to part of the upper floor remains, with a fretwork ceiling vent retained in one room. In the entrance foyer is a bronze plaque in memory of Mary McConnel, the founder of the Hospital for Sick Children.

### **2.2.2. Lady Lamington Nurses' Home**

The Lady Lamington Nurses' Homes consists of three linked buildings which form an integrated complex organised around a series of courtyards, which were constructed over a period of more than 40 years.

The low rise building itself was constructed in three stages and is a facebrick building, E-shaped in plan, with timber and concrete verandahs and Marseille tiled roofs. The building is situated on the crest of the hill on a steeply sloping site, and has walled courtyards facing east which contain established gardens.

Attached to the western side of the low rise masonry Lady Lamington Nurses Home are two eight-storey tower blocks (Block 1, north; and Block 2, south) of rendered masonry construction with Spanish Mission influences. These towers are positioned opposite the southernmost and central wings of the earlier building.

Built in three stages (southern wing 1897, central wing 1914, and northern wing 1931) the Lady Lamington Nurses Home is two storeys with a basement in the original section. At the north-eastern corner, the building becomes a five storey building with the fall in land to the north. The courtyard gardens are accessed from the verandahs via concrete staircases ornamented with concrete spheres mounted on low pillars.

The verandahs have simple timber balustrades constructed of square dowels and arched timber valances between the verandah posts at the second top level; the ground floor level at the southernmost end. Below this level the verandah posts are mostly brick forming a screen wall with arched openings. The verandah floors, timber in the first stage, are concrete in stage two and three. The continuous verandahs are connected vertically by a series of external fire escape stairs and ladders.

The building has a gambrel roof, which also covers the verandahs, and a number of brick chimneys. The chimney nearest the north eastern corner is brick with cement render bands. The English bond brickwork in the first section has been coated with a red pigment, and a cement-lime mixture has been painted on to resemble stretcher bond; and the basement brickwork is dark brown, contrasting with the red brick used elsewhere.

All the wings are connected by long central corridors which have rows of identical cell-like rooms on either side; some larger rooms, with fireplaces, are located at the northern end of stage one. Each room opens onto the verandah via large double hung windows with sills at floor level (stage one and two) or French doors (stage three), with fanlights; the spaces between the interior partitions and the ceilings have been in-filled, mostly with glass louvres and flat sheeting. Large sitting rooms, with fireplaces, are positioned at the eastern end of the north and south wings, and the ground floor of the southern wing contains a main entrance, lobby area and large open space. Internal staircases and bathrooms are positioned adjacent to the western end of the central and northern wings.

Early interior joinery, finishes, linings and fixtures are retained throughout, including: panelled doors, with fanlights; moulded archways, architraves, skirtings and picture rails; decorative fireplace hearths and surrounds; plastered walls, V-jointed tongue and groove boards, pressed metal and galvanised ripple iron ceilings (some concealed by later flat sheeting); door and window hardware; internal staircase balustrades; and functional features such wall-mounted bin frames and laundry chutes.

The eight-storey North and South Tower Blocks are similar in appearance and organisation and form two sides of a bitumen surfaced yard which is open at the western end. The lower two storeys, one of which is partly below ground level, have external walls of face brickwork while the upper six storeys are finished with white-painted cement render. Arcaded verandahs run along the northern and southern elevations. Both buildings have a number of decorative features that connect them to the Spanish Mission style such as textured render, arched openings, ornate columns at the uppermost level and decorative brackets and awnings at the ground level. Windows are metal-framed with smallish panes. Both buildings have flat roofs with sloped tiled parapets. The lift motor rooms which protrude above the parapet level have Marseille tiled external walls and castellated parapets.

A lift and staircase are located at the eastern ends of the tower blocks, with a concrete staircase with metal balustrade at the western ends. The lift shaft in Block 1 is partly enclosed by a decorative screen. The eastern and western ends of the buildings are connected on almost every level by a central corridor off which

open a row of identical, cell-like rooms on both sides. Each room opens onto the verandah via timber French doors. On the lowest floor of the southern building (Block 2) is a large recreation room containing a stage.

Early interior joinery, linings and fixtures include: plastered walls and columns with recessed dado and picture rails (ground floor); moulded architraves, skirting and cornices; and decorative glass light fittings.

### 2.2.3. Edith Cavell Block

The Edith Cavell Block is H-shaped in plan, three-storeys with a basement, and clad in face brick. The south elevation is symmetrical about a projecting central bay with a polychrome arched loggia entrance at ground level. This bay is divided by brick piers between which there are concrete spandrel in-fills and sash windows. The central wing terminates in pavilions to the east and west. The external walls are faced at ground and first floor level with glazed brown bricks and above with a rough-cast finish. The south elevation has a regular rhythm of flat arched window openings with prominent rendered keystones and rendered sills. The striking north elevation consists of a polychrome arched loggia to the ground level opening from the building to the garden and swimming pool area. Verandahs to the first and second floors are divided into bays by brick piers and in-filled with painted timber slatted balustrading. These verandahs overlook the garden and swimming pool with change shed.

The building externally is in good condition; in particular, the roof which has been recently replaced, as well as the brickwork and rough cast on the second level. The external timber windows are in fair to reasonable condition. The original windows and doors to the verandahs are in good condition. The external timber stairs and verandah balustrades are also in good condition.

The storm in November 2014 caused substantial damage internally, particularly to the modern fabric and partitions. Plasterboard ceilings were the most severely affected, as well as the plasterboard walls. The original fabric, including the timber floor structure and flooring experienced some damage. The damage was limited partly by the original structural timbers being hardwood and the crow's ash floor. The main internal stairs are intact.

The building could not be internally inspected for the preparation of this Heritage Impact Statement. While this is not an ideal circumstance, the building is effectively quarantined due to the mould infestation, due to the water damage from the 2014 storm. Most elements of the interior of the building are now infested with visible mould. This occurs to the ceilings, walls, and floor finishes on the ground, first and second floors of the building.

Hazardous material consultants inspected the building and prepared a report for Australian Unity on this matter in August 2018. The report made the following site observations:

- Visible mould was observed to the ceilings, walls, and floors to varying extents throughout the ground floor.
- Airborne mould spores were taken and found to be elevated throughout the ground floor.
- Visible mould was observed to have grown on textile (i.e. carpets, soft furnishings).
- Visible mould was observed to permeable building fabrics (i.e. plasterboard walls and ceilings).
- Extensive visible mould was observed to the ceilings, walls, and floors throughout the first and second floor.
- Airborne mould spores were taken and found to be very high throughout the first and second floor.
- Visible mould was observed to contain active growth on textiles (i.e. carpets, soft furnishings).
- Visible mould was observed to contain active growth to permeable building fabrics (i.e. plasterboard walls and ceilings).

To address and ameliorate this mould infestation, the Hazardous Material Report made the following conclusions. Remediation procedures within the above-mentioned areas should include:

- All porous linings (i.e. plasterboard) should be removed as mould can penetrate the material.
- Any air conditioning or ducting must be disposed of mould contaminated waste.
- All accessible surfaces of the rooms should be vacuumed with a class H HEPA vacuum to remove remaining mould spores.

- Spray an application of anti- fungal and/or anti- microbial solution by a competent mould remediation specialist.
- It should be considered that ventilation panels should be installed periodically to allow for fresh air/ air movement throughout the riser. This will reduce the risk of mould growth and reduce the humidity build up.”
- No textile materials or furnishings can be salvaged/retrieved (i.e. carpets, chairs, cushions).
- No electrical/technical items can be salvaged/retrieved (i.e. computers, printers).
- No permeable building fabrics can be salvaged/retrieved (i.e. plasterboard)
- No air conditioning units or ducting can be salvaged/retrieved.
- Sealed or finished furniture (i.e. desks) are able to be salvaged/retrieved providing decontamination procedures outlined above are adhered to.

Further, the report advised as follows for the ground floor:

- No textile materials or furnishings can be salvaged/retrieved (i.e. carpets, chairs, cushions).
- No electrical/technical items can be salvaged/retrieved (i.e. computers, printers).
- No permeable building fabrics can be salvaged/retrieved (i.e. plasterboard)
- No air conditioning units or ducting can be salvaged/retrieved.
- Sealed or finished furniture (i.e. desks) are able to be salvaged/retrieved providing decontamination procedures outlined above are adhered to.

On the first floor, the consultant’s advice is that no items can be salvaged or retrieved. This includes building fabrics, furnishings, textiles, electrical equipment, and stored items. On the second floor, the consultant’s advice again is that no can be salvaged or retrieved. This includes building fabrics, furnishings, textiles, electrical equipment, and stored items.

A copy of this report is appended to this Heritage Impact Statement at **Appendix A**.

## 2.3. PHOTOGRAPHS



Picture 1 – Lady Norman Hospital.

Source: Urbis



Picture 2 – Lady Norman Hospital.

Source: Urbis



Picture 3 – Lady Norman Hospital.

Source: Urbis



Picture 4 – Lady Norman Hospital.

Source: Urbis



Picture 5 – Sylvia Moffat Theatre at the Lady Norman Hospital Building.

Source: Urbis



Picture 6 – Sylvia Moffat Theatre at the Lady Norman Hospital Building.

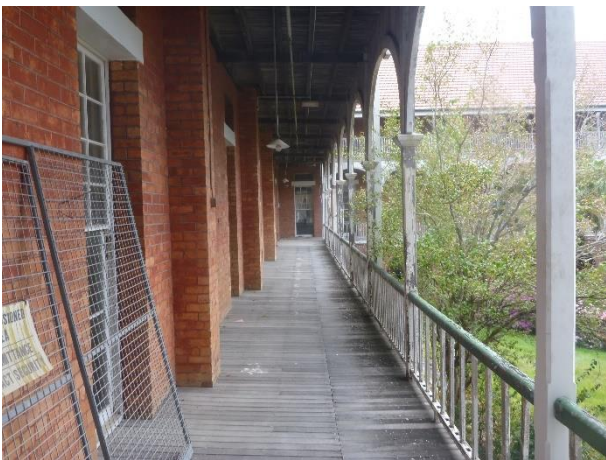
Source: Urbis



Picture 7 – Lady Lamington Nurses Home, first stage  
Source: Urbis



Picture 8 – Lady Lamington Nurses Home, original plaque  
Source: Urbis



Picture 9 – Lady Lamington Nurses Home, typical verandah  
Source: Urbis



Picture 10 – Lady Lamington Nurses Home, entrance detail  
Source: Urbis



Picture 11 – Lady Lamington Nurses Home, front entrance  
Source: Urbis



Picture 12 – Lady Lamington Nurses Home, southern wing  
Source: Urbis



Picture 13 – Lady Lamington Nurses Home, masonry wall eastern side

Source: Urbis



Picture 14 – Lady Lamington Nurses Home, second stage

Source: Urbis



Picture 15 – Lady Lamington Nurses Home, typical interior

Source: Urbis



Picture 16 – Lady Lamington Nurses Home, typical interior

Source: Urbis



Picture 17 – Lady Lamington Nurses Home, original fireplace

Source: Urbis



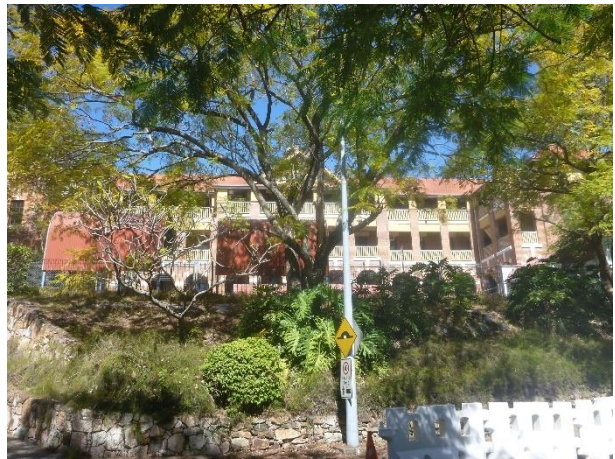
Picture 18 – Lady Lamington Nurses Home, tower block lift car

Source: Urbis



Picture 19 – Edith Cavell Block, southern elevation

Source: Urbis



Picture 20 – Edith Cavell Block, northern elevation

Source: Urbis



Picture 21 – Edith Cavell Block, drystone wall

Source: Urbis



Picture 22 – Edith Cavell Block, drystone wall

Source: Urbis



Picture 23 – Edith Cavell Block, northern elevation

Source: Urbis



Picture 24 – Edith Cavell Block, detail

Source: Urbis

## 3. CULTURAL HERITAGE SIGNIFICANCE

### 3.1. DEFINITIONS

Cultural significance is the term used to embrace the range of qualities that make some places especially important to the community, over and above their basic utilitarian function. These places are usually those that help understand the past, enrich the present, and that will be of value to future generations.

The *Burra Charter* of Australia ICOMOS defines cultural significance as *aesthetic, historic, scientific or social value for past, present, and future generations.*

The *Queensland Heritage Act 1992* defines cultural heritage significance of a place or feature of a place as:

*...its aesthetic, architectural, historical, scientific, social, or other significance, to the present generation or past or future generations.*

Part 4 of the *Queensland Heritage Act 1992* covers the registration of places in the Queensland Heritage Register. Section 35 of the Act states that a place may be entered in the register as a State heritage place if it satisfies one or more of the following eight criteria of cultural heritage significance:

- (a) *The place is important in demonstrating the evolution or pattern of Queensland's history;*
- (b) *The place demonstrates rare, uncommon, or endangered aspects of Queensland's cultural heritage;*
- (c) *The place has the potential to yield information that will contribute to an understanding of Queensland's history;*
- (d) *The place is important in demonstrating the principal characteristics of a particular class of cultural places;*
- (e) *The place is important because of its aesthetic significance;*
- (f) *The place is important in demonstrating a high degree of creative or technical achievement at a particular period;*
- (g) *The place has a strong or special association with a particular community or cultural group for social, cultural or spiritual reasons;*
- (h) *The place has a special association with the life or work of a particular person, group or organisation of importance in Queensland's history.*

### 3.2. STATEMENT OF CULTURAL SIGNIFICANCE

The DES register entry contains a statement of cultural significance for the Brisbane General Hospital Precinct as follows:

***Criterion A: The place is important in demonstrating the evolution or pattern of Queensland's history***

*The Brisbane General Hospital Precinct is important in demonstrating the development of hospital health care in Queensland since the 1860s and changes in government involvement in the financing and control of the state's health services from the mid-19th century. The place is also important for its association with the development of nursing training and medical education and research in Queensland.*

*The former Fever Ward (1875) is the oldest building to remain on the site and, along with the adjacent Female Ward (1885), demonstrates the early development of the Hospital.*

*The Nurses' Homes (Lady Lamington: 1897, 1914, 1931; Block 1, 1936; and Block 2, 1939) demonstrate the important role of the nursing profession in the provision of health care in Queensland,*

which for many years was exclusively female. Nurses' quarters were an essential part of a hospital complex in the late 19th and early 20th centuries, providing on-site accommodation for nursing and training staff, and regulating nurses' behaviour and lifestyle. The two tower blocks demonstrate the significant growth of the state's premier hospital during the 1930s and correspondingly the implementation of the state Labor government's new health policies.

Built in response to problems of overcrowding, the Lady Norman Wing (1895) is the only building surviving from the pre-1920 era of the Children's Hospital complex. Constructed to accommodate the increasing numbers of nurses required during a time of expansion, the Edith Cavell Block (1922) demonstrates the early 20th century development of the Children's Hospital.

The former Mental Ward (1918) was the first attached to a general hospital in Queensland for patients being treated for mild psychiatric disorders and demonstrates changing attitudes in the treatment of patients with mental illnesses in Queensland. Extended in 1948, the building is also important for its later use as a hospital for the treatment of prisoners and acute alcoholics.

The former Superintendent's Residence (1941) demonstrates the practice (since 1866) of accommodating the medical superintendent on the Hospital site.

The Nurses' Homes, Edith Cavell Block, Superintendent's Residence, and associated garden setting, have developed to form a residential core, a central component of the functioning of the Hospital from the 1890s until recent times.

The mature plantings, gardens, pathways, walls and select designated roads are important in demonstrating early planning and subsequent development of the Hospital site, and contribute to the settings of the place's buildings.

**Criterion B: The place is important in demonstrating the evolution or pattern of Queensland's history**

The former Fever and Female wards are important as rare surviving examples of single-storey pavilion plan ward buildings, following a scheme employed universally from the 1860s to the 1940s in Queensland hospitals and aimed at healing patients by promoting natural ventilation and good sanitation.

**Criterion D: The place is important in demonstrating the principal characteristics of a particular class of cultural places**

With its collection of residential and ward buildings, set in landscaped grounds, the Brisbane General Hospital Precinct is important in demonstrating the principal characteristics of a late 19th and early 20th century hospital complex.

The former Fever and Female wards, with their single open ward space and roof ventilation features, demonstrate the principal characteristics of single-storey 19th century pavilion wards.

The Lady Norman Wing is a fine example of a two-storey late Victorian-era hospital block designed to a pavilion plan. The building was designed by architects John James (JJ) Clark and Charles McLay, both of whom made important contributions to Queensland architecture.

The Nurses' Homes and Edith Cavell Block are planned in a similar way: over a number of levels small accommodation rooms or cells are accessed off a central corridor and open to verandahs. This layout typifies institutional residential buildings erected during this time; as does the Lady Lamington, being planned around courtyards and gardens to create residential amenity and seclusion within the Hospital complex.

Lady Lamington is highly intact and the earliest surviving nurses' quarters in Queensland. A fine building in an Arts and Crafts-influenced style, it is an excellent example of the work of RS (Robin) Dods, one of Queensland's pre-eminent architects. Influenced by the Spanish Mission style, established by architectural firm Conrad and Atkinson from the 1920s as the Brisbane General Hospital's house style, Blocks 1 and 2 echo some of the motifs of Lady Lamington.

The Edith Cavell Block, designed by the Department of Public Works, is a good example of a public building in an Arts and Crafts-influenced style.

*The former Mental Ward was the first in Queensland attached to a general hospital for the treatment of patients with acute psychiatric disorders and served as a model for other psychiatric wards within a general hospital.*

**Criterion E: The place is important in because of its aesthetic significance.**

*The Brisbane General Hospital Precinct is notable for the collective quality of its groups of buildings and landscape elements, and is important for the range of building types and architectural stylistic influences employed there. Occupying a prominent hilltop off Bowen Bridge Road, a major arterial road for Brisbane, the Hospital is a major city landmark. The dramatic siting of some its buildings is made possible by the steeply sloping site.*

*Visible both from within the Hospital and from surrounding suburbs, the Nurses' Homes symbolise the significant contribution made by the nursing profession to the provision of health care in Queensland. The dramatic views uphill towards the Nurses' Homes contrasts with the repose of the picturesque garden setting the Lady Lamington shares with the former Superintendent's Residence and Mental Ward below. Lady Lamington is a fine building; the quality and inventiveness of its design, construction and detailing, enhancing the site with its views, elevation, and sudden falls.*

*Sited on the western ridge of the steeply sloping site, the Edith Cavell Block commands a dramatic view to the north and its striking northern elevation is enhanced by the open space and mature plantings around it.*

*Discrete in scale and materials, the former Superintendent's Residence belongs to a cohesive group of residential buildings within a garden setting in the centre of the Hospital site.*

*The Brisbane Tuff wall to Bowen Bridge Road is an imposing presence on this major city arterial road and is synonymous with the Hospital.*

**Criterion F: The place is important in demonstrating the evolution or pattern of Queensland's history**

*The Lady Lamington Nurses' Home evidences the early development of architectural interest in refining elements associated with domestic buildings and climate control. The building's design uses devices such as awnings, verandahs, building orientation, cross ventilation achieved with partitions instead of walls, and large well-placed openings reworked for a different scale of building. These were to be abiding interests of Robin Dods in his reworking of the Queensland architectural idiom.*

**Criterion G: The place is important in demonstrating the evolution or pattern of Queensland's history**

*The Brisbane General Hospital Precinct has a special association with the Brisbane community in being its principal hospital complex since 1867.*

**Criterion H: The place has a special association with the life or work of a particular person, group or organisation of importance in Queensland's history**

*The Brisbane General Hospital Precinct is important for its association with major figures in the development of medicine and health services in Queensland, and for its strong association with the work of influential Queensland architects.*

*The 1918 component of the former Mental Health Ward is important for its association with Dr HB Ellerton who influenced its design and was instrumental in improving the treatment of the mentally ill in Queensland and establishing facilities for it in a hospital setting.*

*The former Superintendent's Residence is important for its association with Dr Aubrey Pye, medical superintendent from 1933 to 1967 and the first to occupy it.*

*Lady Lamington is the first Queensland building designed by Robin Dods and marks the beginning of a long association between the Hospital and the firm he established with Francis Hall.*

*The pre-eminent interwar architectural firm Conrad and Atkinson were important hospital architects from the 1920s and architects to the Brisbane Hospital from then until the 1980s.*

## 4. THE PROPOSED DEVELOPMENT

### 4.1. LADY LAMINGTON – STUDENT ACCOMMODATION

The proposed adaptation of the Lady Lamington Nurses Home is a major adaptive reuse of a heritage building in Brisbane.

The entire building – the low rise E shape masonry building, and the North and South towers will be converted for use as student accommodation.

The proposed development will include a total of 723 beds across 507 rooms, as well ancillary areas such as entry pavilion, communal space and study rooms, kitchen and dining areas, management office spaces and laundry facilities associated with the student accommodation use. A retail tenancy is also proposed at the ground level of the southern tower to provide an active frontage to the adjoining Herston Square.

Car parking is not proposed to be provided in support of this student accommodation use given the site's location in proximity to the major public transport interchanges including the RBWH and Herston bus stations and the Exhibition railway station.

Generally, the external building elevations are retained in recognition of their heritage significance. To accommodate the new uses, adaptation of internal areas, wall structures and external terraces is required. A new entry pavilion is proposed between the two towers to provide a new entry point to the student accommodation facility and enhance accessibility from Herston Square.

The proposed adaptation of the Lady Lamington Nurses Home has been designed to ensure residents are provided within a diverse range of open space areas for their exclusive use:

- A roof deck atop the North and South towers of Lady Lamington which will provide elevated outdoor spaces to enjoy city views;
- Landscaped courtyards to the east of the Lady Lamington Building and adjacent to the new entry pavilion at the west of the building will be provided for the exclusive use of the Student Accommodation; and
- The proposed 'Retreat' to the south-east of Lady Lamington will be a transition zone that draws on the natural amenity of the 'green heart' to the east of the Lady Lamington building, providing a quiet sub-tropical landscaped setting for residents to retreat and linger.

#### 4.1.1. Background

The Lady Lamington Nurses Home has been vacant or heavily underutilised for close to 30 years. The building will never be reused for its original nursing accommodation purpose again, with fundamental changes to the training of nurses since the late nineteenth century and indeed the fundamental changes of nursing over this time, from a vocation to a profession.

Parts of the building are in very poor condition – the timber verandah floors in places, the timber handrails and balustrading to the verandah, and the valances and other detailing to the verandah. Much of this fabric needs to be reconstructed to allow the building to be utilised for any purpose. Internally many of the partitions are similarly in poor condition. Bathrooms need upgrading, fire services need upgrading – the interior of the building is not in a state that lends itself to a new and viable use in its existing condition.

As noted above the project will deliver of 723 beds across 507 rooms. Most rooms will be singles, while some larger rooms provide double or twin accommodation. The rooms will not have their own facilities so communal kitchens and bathrooms are provided on a number of floors, as per the original configuration. Other common areas will be provided for dining halls, lounges, laundries, cinema and gym on the ground floors of the tower blocks and the lower rise building. The courtyards between the towers and the wings of the lower rise building will be largely private external gardens and common areas for the student accommodation use.

#### 4.1.2. Demolition

The architectural plans for the proposed development illustrate the proposed demolition and alterations to the overall building that are required to facilitate this student accommodation use. It is readily acknowledged that this demolition is extensive. This is explained further below.

Externally the following demolition is proposed:

- Timber boarded verandahs to the 1897, 1914 and 1931 wings across all floors;
- Narrow timber staircases on verandah spaces connecting the floors;
- Timber fretwork and detailing to the verandahs, and the timber balustrades to the 1897, 1914 and 1931 wings across all floors;
- Double hung sash windows at identified locations will be removed (some of these elements will be retained);
- Parts of the masonry undercroft to the 1897 wing to both the eastern and western elevations;
- The masonry courtyard wall to the eastern side of the site between the 1897 and 1914 wings;
- The existing ground level of the space between the tower blocks, to the floor level of the tower blocks;
- Modern fire stairs to the western elevation of the 1897 wing;
- The masonry retaining walls to both towers and the associated staircases to the ground floor levels of the tower blocks;
- Fire staircases to both tower blocks;
- Glazing, light weight walls and windows to all floors of the northern and western elevations of Block 1 (North Tower);
- Windows and sills to western, northern and southern elevations of Block 2 (south tower) on the ground floor to allow for retail access;
- Windows and sills to the southern elevation of Block 1 (north tower) on the ground floor to allow for access to the kitchen;
- General openings to the external elevations of the towers to achieve fire stair egress;
- A small freestanding masonry building with a tiled roof to the north of the North Tower.

The reasoning for the demolition of these elements is provided in the assessment of impact chapter of this report.

It is readily acknowledged that internally the proposed demolition for this scheme is extensive. Most of the internal walls of the low rise Lady Lamington Nurses Home and the two tower blocks are predominantly lightweight (timber, cement sheet, or glazing infill). The proposed use for student accommodation requires substantial internal modifications to make the building compliant with modern standards and codes for fire rating, equitable access, and noise attenuation, as well as the introduction of modern services and other requirements. It is considered that given the existing materials, the condition of the materials, and the extent of the building across many floors, the Lady Lamington Nurses' Home is all but unusable in its current form and state.

The following elements of internal building fabric are proposed to be demolished:

- Lightweight walls creating rooms and corridors, and timber doors to all wings and floors of the building (masonry walls will be retained across all floors where extant);
- Internal lightweight partitions to ground floor levels of both tower blocks;
- Existing bathroom facilities, fixtures, fittings, doors, etc to all floor and wings;
- Excavation under and removal of masonry foundations to the 1897 wing of the building.

### **4.1.3. Retention of Fabric**

Many elements of fabric are retained as part of this project.

The following list is not exhaustive, but highlights those particular details or elements that are to be retained:

- Entrance staircases to 1897 and 1931 wings;

- Entrance gate and piers to eastern 'entrance' of Lady Lamington site;
- Timber French doors to the 1931 wing of the low rise building on all floors and to all floors of both tower blocks;
- Internal masonry walls and staircases to the low rise building;
- Original sitting room, matrons' quarters, waiting room and entrance, box room, nurse's cubicle and charge nurses' room on identified floors;
- Original timber entrance doors in identified locations;
- Original pressed metal ceilings, custom orb (ripple iron) ceilings, timber ceilings in places;
- Fireplaces in sitting rooms and other rooms (where identified).
- Lift, stairwell and staircases in both tower blocks.

#### **4.1.4. New Construction**

New construction is proposed externally and internally to deliver this student accommodation project.

Externally the following new construction will be provided:

- New timber boarded verandah constructed to all wings and across all floors to replace extant timbers like-for-like;
- New timber verandah fretwork and detailing, and timber balustrades to be constructed to match existing on a like-for-like basis;
- New French doors to replace identified double hung sashes that are to be removed,
- The masonry courtyard wall to the eastern side of the site between the 1897 and 1914 wings will be reconstructed in face brickwork to match existing;
- New security line, pergola and landscaping to the western elevation;
- New entrance pavilion to the western elevation.

Internally the following new construction will be provided:

- New compliant partitions to create new rooms and corridors, new doors, floor finishes and ceilings;
- New bathroom facilities, fixtures, etc;
- New corridor locations for the double loaded corridor.

## **4.2. EDITH CAVELL BLOCK – CHILD CARE CENTRE AND OTHER USES**

The Edith Cavell Block is similar in many respects to the Lady Lamington Nurses' Home, but is slightly different.

At its original construction, the building demonstrated the same cellular internal form with double loaded corridors extending from the central lobby or foyer on each floor. While fabric survives that demonstrates this original layout on some of the floors, the building has experienced a greater level of intervention and alteration than the Lady Lamington Nurses Home. In the 1990s, after the building had ceased operating as nurses' accommodation the building was adapted as commercial offices. Partitions were removed on the eastern wing of the ground floor and throughout the second floor, with new partitions constructed and suspended ceilings introduced.

In late 2014, a severe hail storm damaged the roof and interior of the Edith Cavell Block. The tiled roof was damaged and large volumes of water entered the building and caused damage to all levels. While the damaged roof was repaired, the building was vacated, and the interior retained. Since then the building has been unused.

The internal walls of the building are plasterboard and were water-affected in the 2014 storm and are now infested with visible mould. This occurs at the ceilings, walls, and floor finishes to the ground, first and

second floors of the building. Hazardous material consultants have inspected the building and prepared a report for Australian Unity on this matter.

#### **4.2.1. Background**

Australian Unity proposes to adapt the Edith Cavell Block as part of the Herston Quarter project, for a mix of uses.

A three storey masonry building with a partial basement (or ground floor), the scheme for this building provides for commercial offices and other Centre Activity tenancies on the first and third floors, and a new childcare centre facility for the Lady Ramsay Childcare Centre located on the partial basement (ground) floor and second floor of the building.

The separate “milk shed” building is to be demolished under a separate Development Application for demolition at the site. This building is not part of the heritage entry of the site and is therefore not considered to be of cultural significance. Some of the brickwork from the milk shed may be retained and incorporated into the proposed landscape works for the project.

The swimming pool to the north of the building will be infilled and the space modified to provide the outdoor play area for the child care centre. Much of the existing open space, drystone wall and mature plantings that frame the northern elevation of the Edith Cavell Block will be retained.

Currently the Edith Cavell Block does not have a lift to service the floors. An internal lift is proposed to be installed in the centre of the building near the central staircase to provide a central lift access across all floors, while an external lift is proposed in a new structure on the northern side of the building. This external lift will provide separate and secure access to the child care centre on the second floor.

Offices, storage and other spaces for the child care centre will be provided on the ground and first floors of this new building. Given the site levels the first floor of this new structure is located at the basement level of the Edith Cavell Block.

The new building is separated from the northern elevation of the main building, is predominantly glazed to allow views through to the main building and will touch the Edith Cavell Block lightly. The addition has been designed and located to require only limited modification of the existing fabric of the building to connect the two, with removal of the extant timber balustrade to the north-western verandah. The structure will be wholly reversible with little if any impact on significant fabric (with the potential reconstruction of the balustrading) and is required to achieve compliant access.

This new lift structure and stairwell will ameliorate equitable access issues to the building from this northern side. Ground levels across this part of the site vary greatly, and equitable access to the child care centre is required from the car park and drop-off for the child care which will be located roughly in the footprint of the milk shed extension. This area will be landscaped, with terraced gardens to remediate the level differences.

A fire isolated enclosed staircase will be constructed to the north-eastern corner of the building, accessed from the third floor only. This structure will be glazed and will connect to the existing building only lightly. Again, the addition has been designed and located to require only limited modification of the existing fabric of the building, with removal of the extant timber balustrade to the north-western verandah. The structure will be wholly reversible with little if any impact on significant fabric (with the potential reconstruction of the balustrading) and is required to achieve fire egress.

Limited removal of the existing drystone wall is required to allow for the drop-off and entry area, but this is at the shortest end of the wall where it largely merges into the landscape. Some of the stonework will be retained and again incorporated into the proposed landscape works at the entry of the childcare centre.

The central masonry section of the interior of the Edith Cavell Block is retained as part of this adaptation. As noted above a lift is proposed to be installed in this central space. The overrun for this lift can be accommodated within the existing roof cavity space, causing no disruption to the existing roof line or fabric.

Both the original partitions that remain and the later partitions of both wings will be demolished to facilitate this change of use for the building. As noted above the internal walls of the building are infested with visible mould as a result of the 2014 water damage, are not usable in their current form and need to be removed. New partitions are proposed to facilitate the child care centre use, and the commercial office space use. A representative arrangement of original rooms will be reconstructed on the first floor of the building.

Original doors, windows, mouldings and trims will largely be retained. Any new openings will be designed to match the original detail and material as closely as possible.

The main foyer, foundation stone and internal stairs will also be preserved, and where possible, proposed amenities will be located in the same spaces as where the original amenities were located, to minimise disruption to the original fabric.

Some modifications to the external walls are proposed to facilitate the child care centre. A limited number of windows will be removed and cut down to form doors along the northern elevation, while some internal masonry walls are modified to create additional openings for doors and windows to improve circulation and the overall use. Generally, however the masonry elevations are not affected by the proposed works. The northern verandahs will remain open, although modified to achieve compliance. Original balustrading and handrails to the northern verandahs will be retained with reconstructed elements to match existing where required. The balconies to the central wing on the southern elevation will be restored with the removal of later infill and aluminium windows.

#### **4.2.2. Demolition**

The plans for the proposed development illustrate the proposed demolition and alterations to the building that are required to facilitate the child care and commercial office use that is proposed for this building. The demolition proposed is somewhat extensive. This is explained further below.

Externally the following demolition is proposed:

- As noted above the entire “milk shed” extension will be demolished including all associated elements (slabs, roofing and any related structure) under a separate Development Application. The link to the Edith Cavell Block will also be demolished and the brick wall, sills, etc, and window of the building will be reconstructed to match the original detail. Some of the bricks will be retained on site for future reuse. The milk shed building is not part of the heritage entry for the site and is not of cultural heritage significance;
- The existing pool and associated services to the north of the building will be demolished and the space infilled to achieve a level outdoor play area;
- The pool services block, pool shelters and all associated elements including slabs, walls, roofing and any related structure will be demolished. All services will be capped and sealed;
- The existing garage/shed and all associated elements including slab, walls, roofing and any related structures will be demolished;
- Part of the extant drystone retaining wall will be removed. The stone will be retained for re-use as part of the proposed landscape works.
- An existing tree to the north of the building near the shed and pool amenities building will be removed;
- Identified timber staircases, balustrades and associated structures will be demolished in preparation for rectification work;
- Two windows on the ground floor of the southern elevation will be removed and the walls below sill height demolished to convert window opening to doorway. New doors will be fitted to these spaces.
- The later wall infills and aluminium windows to the enclosed southern verandah on the second and third floors, and the northern elevation on the second floor will be removed to allow for the restoration/reconstruction of the verandah spaces;
- The small concrete ramp to the southern elevation will be demolished;
- Parts of the existing balustrade to the ground floor southern elevation will be removed;
- Existing metal shutters to the northern elevation on the first and third floors will be removed.
- Identified existing balustrades will be removed and replaced with new timber balustrades to match original details.

The following elements of internal building fabric are proposed to be demolished:

- Extant partition walls and associated doors on all floors will be demolished. All extant internal ceilings will be demolished;
- Identified sections of existing masonry internal walls will be demolished to allow for new doors and windows to be fitted on the second floor as part of the child care centre fit-out;

- Identified doors will be removed and the openings modified to allow for new windows or doors;
- Identified windows and infill openings will be demolished;
- Parts of the existing floors in the central lobby spaces on all floors will be removed to allow for a new lift shaft to be installed;
- All existing floor finishes, fixtures and fittings in bathrooms will be demolished.

### **4.2.3. Retention of Fabric**

Many elements of fabric are retained as part of this project.

The following list is not exhaustive, but highlights those particular details or elements that are to be retained:

- Masonry internal walls are generally retained, with some minor modifications to some walls as noted above for the child care centre;
- The central staircase to all floors will be retained;
- The Crow's Ash timber floor will be retained throughout;
- Masonry floor structure of the building is retained throughout;
- Masonry walls are retained on the ground floor where they form rooms and will be adapted for use as part of the child care function (storage, laundry and resource room),
- Masonry walls on the other floors as dividing walls of the overall spaces are retained (with some slight modifications as discussed above);
- Extant partitions to the north-west wing on the first floor will be retained/reconstructed as representative original spaces (nurses' cubicles) in the building;
- Most windows and doors are retained – some are removed to provide for new access within the building for new uses as noted above;
- Most timber balustrading is retained – some sections are removed to allow for links to new structures as noted above.

### **4.2.4. New Construction**

New construction is proposed externally and internally to provide for the child care centre and commercial office project at the Edith Cavell Block.

Externally the following new construction will be provided:

- New entrance structure for the child care centre at the north-western corner of the building, which will connect to the child care centre on the second floor of the building;
- New fire isolated enclosed staircase to the north-eastern corner of the building, accessed from the third floor only;
- New outdoor play area and surrounding fence to the north of the building on the site of the former swimming pool;
- Outdoor dining area on the eastern side of the southern elevation of the building, with a new awning to be fixed to the masonry elevation;

Internally the following new construction will be provided:

- A lift will be installed in the central entrance lobby to extend through the first, second and third floors of the building. The lift overrun will not extend through the roof line of the building and will not require any changes to the tiled roof of the building;
- New construction on the first floor of the building for commercial uses on the western side and shop/food and drink outlet on the eastern side (the precise layout of these spaces will be determined on tenant requirements and will be approved via a compliance assessment process post-approval). New amenities

will be provided in the two southern wings of the building in the current amenities locations to utilise existing connection points for these services;

- New partitions are proposed on the second floor of the building to provide for the proposed child care centre. The existing entrances from the central lobby will be utilised, and the rooms will flow into one another with circulation and access provided largely via the northern verandah. The southern balcony is restored on this floor;
- New construction on the third floor of the building for commercial uses throughout the floor. The precise layout of these spaces will be determined on tenant requirements and will be approved via a compliance assessment process post-approval. New amenities will be provided in the two southern wings of the building in the current amenities locations to utilise existing connection points for these services. The southern balcony is restored to this floor.

### **4.3. LADY NORMAN HOSPITAL – CENTRE ACTIVITIES**

While the Lady Norman Hospital Building is proposed to be adapted for new uses as part of this Heritage Precinct Development Application, no precise schemes of adaptation have been prepared as yet.

The building has been identified for a range of possible land uses. These may include the following:

- Food & Drink Outlet, Shop, Health Care Service, Research and Technology Industry, Office, Indoor Sport and Recreation, Short Term Accommodation

It is proposed as part of this Development Application to establish a compliance assessment framework for development that can be enacted at a future stage of the development. As the specific areas for possible tenancies and the adaptations required for these works have not been confirmed at this stage of the application, it is proposed that the Development Approval will require a compliance assessment application for the future internal fit-out of these tenancies.

Some of these uses will present a better or more appropriate 'fit' for a heritage building of the age, intactness and significance of the Lady Norman Hospital. These issues will be determined at a later stage of this overall project.

#### **4.3.1. Background**

Lady Norman Hospital is currently vacant. It has been recently used as offices.

Approval has been sought from the Department of Environment and Science (DES) for a series of minor works to adapt the building as a site office for Watpac for a period up to two years for the construction activities that are occurring at the wider site.

An exemption certificate for these works was issued by the DES on 29 November 2018.

#### **4.3.2. Demolition**

No demolition is proposed to the Lady Norman Hospital as part of this development application.

To facilitate the proposed public realm of the wider development, the former Sylvia Moffat theatre extension to the Lady Norman Hospital Building will be demolished under a separate Development Application for demolition.

The Sylvia Moffat theatre is excluded from the heritage entry for the site and is not considered significant fabric.

#### **4.3.3. Retention of Fabric**

All fabric of the Lady Norman Hospital is retained as part of this development application. Proposed changes to the building will be sought under a compliance assessment framework following on from the EDQ development approval for this project.

Considerations of proposed uses, the schemes pursued and impacts on significant fabric will be examined at that time.

#### **4.3.4. New Construction**

No new construction at the Lady Norman Hospital is proposed as part of this Development Application.

# 5. ASSESSMENT

## 5.1. THE BURRA CHARTER

The *Burra Charter: the Australia ICOMOS charter for places of cultural significance, 1999* (the *Burra Charter*) of Australia ICOMOS is the accepted standard for heritage conservation in this country. The charter provides the general philosophies and approaches to conservation analysis for those who make decisions regarding historic buildings or places. A number of fundamental principles provide the basic framework of the charter:

- *the place itself is important;*
- *the aim of conservation is to retain the cultural significance of a place;*
- *cultural significance is demonstrated and reflected in its physical fabric, but also in its use, associations and meanings;*
- *significance should guide decisions;*
- *do as much as necessary, as little as possible;*
- *keep records; and*
- *do everything in a logical order.*

The *Burra Charter* contains a range of terms and definitions that are relevant in dealing with conservation issues with respect to cultural heritage places. These terms, and their *Burra Charter* definitions are as follows:

- **Place** means site, area, land, landscape, building or other work, group of buildings or other works, and may include components, contents, spaces and views;
- **Cultural significance** means aesthetic, historic, scientific, social or spiritual value for past, present or future generations. Cultural significance is embodied in the place itself, its fabric, setting, use, associations, meanings, records, related places and related objects. Places may have a range of values for different individuals or groups;
- **Fabric** means all the physical material including components, fixtures, contents, and objects;
- **Conservation** means all the processes of looking after a place so as to retain its cultural significance;
- **Maintenance** means the continuous protective care of the fabric and setting of a place, and is to be distinguished from repair. Repair involves restoration and reconstruction;
- **Restoration** means returning the existing fabric of a place to a known earlier state by removing accretions or by reassembling existing components without the introduction of new material;
- **Reconstruction** means returning a place to a known earlier state by and is distinguished from restoration by the introduction of new material into the fabric;
- **Adaptation** means modifying a place to suit the existing use or a proposed use;
- **Use** means the functions of the place, as well as the activities and practices that may occur at the place;
- **Compatible use** means a use which respects the cultural significance of a place. Such a use involves no, or minimal impact on cultural significance;
- **Setting** means the area around a place, which may include the visual catchment;
- **Interpretation** means all the ways of presenting the cultural significance of a place;

- **Related place** means a place that contributes to the cultural significance of another place.<sup>1</sup>

## 5.2. LADY LAMINGTON NURSES' HOME - DISCUSSION

The building is also in a fair condition and state of repair in places and will need considerable reconstruction and investment to allow it to be used for any purpose.

The building needs a viable use that provides a commercial return, and the changes contemplated for code compliance and service provision would be necessary were the buildings to be adapted for commercial office use, short term accommodation, or any other use. Some extent of modification and alteration will be required whatever the proposed use.

The existing partitions comprising the corridors and rooms across all floors are constructed of a combination of timber boards, cement sheet or glazed infill. Suspended ceilings have been installed throughout most floors. The current partitions do not comply with current fire ratings or achieve satisfactory acoustic performance.

While the double hung sash windows remain operable, the windows do not provide sufficient head heights when open to allow for ease of access and use.

The proposed scheme seeks to remove the sash windows to most rooms of the building and replace them with modern but complementary French doors, constructed of timber like the other joinery, to allow for use of the verandah spaces by the students. Some representative examples of the double hung sash windows will be retained in certain areas of the adapted building. The existing timber French doors in the 1931 wing of the building will be retained.

Therefore, the proposed scheme seeks the removal of these lightweight partitions throughout the building, and the reconstruction of the current double-loaded corridor arrangement of the floors and the construction of new fire rated partitions to provide new student accommodation rooms. The current format of small rooms for a single person is largely followed, while some two-bedroom units are proposed in places. Existing amenities will be demolished, and new amenities and facilities provided in these existing spaces.

While masonry walls are retained and the corridors near these masonry walls follow the existing alignments a short distance, in many places of the interior the location of the corridor is slightly offset from the current position. The reconstructed corridors allow a greater yield of rooms for the project.

Internal spaces identified as significant in the 2018 CMP such as the main entrance and associated rooms in the original wing, and the staircases, will be retained.

The 1897 and 1914 sections of the building feature timber double hung sash windows to the external verandahs to most rooms. The 1931 section of the building contains timber French doors to the external verandahs.

Other changes that will be required to the building are the removal and replacement of the timber verandahs throughout the building, and the removal and reconstruction of the timber balustrading and handrails throughout. Once reconstructed, the handrails will need to be modified to achieve compliance with modern standards and codes.

The two tower buildings contain lifts that run through all floors of the towers. These lifts are accessible from the lower rise building, which does not have lifts. While the existing lifts will be upgraded as part of this project, lifts are not required to be installed into the lower rise building to achieve compliance with current codes for access.

### 5.2.1. Impact of Proposed Use

The proposed use of the building for student accommodation purposes aligns very closely with the intent of the original construction and use of the place – a repetitive series of small and largely single rooms demonstrating a strong cellular internal form, with communal facilities for bathrooms, laundries, cooking and the like. In this regard the proposed scheme is more than suitable as a use, as the closest contemporary use to the original use of the building as nursing accommodation.

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<sup>1</sup> Peter Marquis-Kyle and Meredith Walker, *The illustrated Burra Charter*, (2004) p. 103.

### 5.2.2. Impact on Fabric

It is acknowledged that the proposal's impact on the existing fabric of the Lady Lamington Building is extensive. Large sections of original fabric are demolished or removed to deliver this project. The applicant considers that the extent of demolition is justified. This is discussed below.

Many of these elements are required to be demolished due to their condition. The timber boarded verandahs, the fretwork, valances and screens, and timber balustrades and handrails are in poor condition and cannot be reused as part of this student accommodation project. These elements will be reconstructed in a like-for-like manner.

The internal fabric of lightweight partitions (timber, cement sheet, or glazing infill) cannot be reused in their current form to deliver a project of the scale and use proposed. The interiors do not comply with current code requirements for fire safety, noise attenuation and modern standards of accommodation. These factors have determined or influenced the proposed demolition of the interiors.

It is also acknowledged in the conservation policies of the CMP that the building contains many similar and typical spaces. Not all of these need to be preserved.

### 5.2.3. Impact on Setting

The existing ground level between the tower blocks will be lowered as part of the proposed works to the grounds as part of this development application, to the ground floor level of the two towers. This will open up the setting of the building and improve views to the three distinct buildings.

The works to create a new security line and small structures associated with the student accommodation use will have acceptable impacts on views of these buildings. These works will be located at ground level and the new structures will be limited in height. The existing heritage buildings will remain the dominant elements in the view of the Brisbane General Hospital precinct from the west.

The setting of the building to the eastern side of the building, and the southern courtyard will be modified with the proposed excavation of the undercroft of the building, and the removal of masonry foundations under the building to create a new basement area under the building and to provide a connection between the western and eastern side of the site. This work is subject to geo-technical investigation of the ground surfaces and rock formations under the building which will be underway shortly, and further investigations of the structural integrity of the Lady Lamington building. The extent of excavation and ground surface modification is still to be determined.

This work will require the lowering of the level of the ground surface in this southern courtyard of the building. The main staircase is retained, and terracing of the ground level in the vicinity will be required to meet the level of the staircase and the retained paths at the southern end of the building.

The demolition of the small single storey masonry building north of the North Tower of the Lady Lamington Nurses' Home will have no impact on the cultural heritage significance of the Brisbane General Hospital Precinct site. The building is not included in the register entry for the Brisbane General Hospital Precinct and is not referenced in the CMP for the Lady Lamington Nurses' Home.

### 5.2.4. Consistency with Conservation Policies

The 2018 CMP contains a series of conservation policies that have been written to guide the conservation and adaptation of the Lady Lamington Nurses Home.

A review of the specifically relevant policies has been made as part of this assessment. The proposed development is considered to comply with the below conservation policies from the CMP.

#### *Adaptation*

*To keep the nurses' home in use, changes to its fabric and equipment will be needed. The impact of these changes on the significance of the place should be kept to a minimum. These principles should be followed:*

*Necessity—only changes that are critical for the ongoing use of the building should be made.*

*Visibility—the change should be clearly visible, and not disguised as original work.*

*Reversibility—when introducing new materials, consider as much as possible how to enable restoration or reconstruction of original form with minimal damage.*

*Policy 13: Apply the principles of necessity, visibility and reversibility when changes are made to the fabric of the nurses' home.*

The adaptation of the building for this student accommodation use requires substantial modifications internally, and to a lesser extent externally, to make the buildings compliant with modern standards and codes for fire rating and equitable access, as well as the introduction of modern services and other requirements.

While the proposed demolition of the internal areas and the external verandahs shown on the proposed plans may seem extensive, it is considered that these changes are necessary to allow the building to be adaptively reused for this proposed student accommodation use, or indeed any use that may be considered for this building.

The new construction in the western courtyard, the changes to the external form of the building to the east and changes to the ground levels will be visible and clearly modern interventions into the site.

Given the extent of new construction that will occur internally for this new use and the need to remove existing fabric to achieve compliance, it is unlikely these external and internal changes will be reversible. The double hung sash windows that are removed to install new doors to these openings can be retained and stored on site for potential restoration in the future.

The internal partitions can be designed and installed in such a manner to be reversible, and minimise the impact on the original building fabric that is retained.

This new internal construction will be visibly modern and will not be detailed as early fit-outs. Finishes will be modern and contemporary. New doors to be constructed in place of windows will be modern but sympathetic to the retained building fenestration.

#### *Compatible uses*

*The building is capable of being adapted to a variety of uses.*

*Policy 14: The building may be put to any use which conforms to the policies set out in this conservation plan. The preferred option will, however, provide for uses that:*

- require the least disruption to the character and significance of the place and its setting;*
- make use of most major internal spaces in their original form;*
- ensure the continued viability of the building;*
- continue significant associations of the place.*

The proposed adaptation of the building for student accommodation use will remove most of the extant light-weight partitions in the interior. However, the masonry walls are retained and the major spaces of the original sitting room, matrons' quarters, waiting room and entrance and box rooms will be retained. Representative examples of a nurse's cubicle and charge nurses' room will be retained on some floors of the building.

The character of the building as a large building providing cellular like accommodation, in small rooms across the extent of the whole building will be retained with the proposed use of the building for student accommodation. No other modern use of the Lady Lamington Nurses' Home will replicate this repetitive cellular arrangement of the former nurses' accommodation across all floors of the building, albeit with new building fabric internally.

The proposed use will ensure the continued viability of the building. A recognised operator of student accommodation in Queensland will fund the adaptation and operate the building for this use. The building is very large, with many areas of floor space which will have one dominant use, with associated facilities.

The significant associations of the place will be maintained. Original rooms are retained in places throughout the low rise building particularly the original 1897 wing, and a series of four cubicle rooms will be reconstructed in the 1914 wing of the building, with part-height partitions, reconstructed joinery and bedroom furniture and the sash windows retained to the verandahs to assist in this interpretation. Original plaques will be retained where they are extant.

### *Palette of materials and methods*

*With any major adaptation proposed to the building, it is important that consistency is maintained regarding changes to the fabric and that the changes respect the significance of the building.*

*Policy 15: Develop a palette of materials and details for any major adaptation of the nurses' home.*

*This palette should include a set of architectural forms, design approaches, materials, colours and details that will make the new work discernible as a new historical layer in the building.*

A (preliminary) palette of materials for this adaptation project is included in the Nettleton Tribe drawings lodged with this application (04.1 External Materials). The palette of materials for external works are largely the extant fabric, as most external elements are retained as part of the scheme. Where timber detailing is required to be reconstructed it will match like-for-like, and will be painted white to match the existing. Where new elements are required a clear distinction between the original and new is proposed – new dark brick is proposed where new brickwork is detailed for example. New French doors proposed to the rooms are illustrated – these will be modern yet complementary to the building and its period of construction and not replicate early detail or door hardware. And further, where new timber handrails are proposed to demonstrate compliance with code requirements, these elements will be painted charcoal to distinguish from the lower and original handrails (which are green).

Internally new construction is proposed to be installed to facilitate the new use of student accommodation. Materials will include the following:

- a combination of polished concrete, carpet and vinyl to the reception and building common area floors,
- feature ceiling elements in reception and common areas,
- contemporary joinery and furniture in the reception, common areas and student rooms,
- modern plasterboard partitions for the rooms, etc.

It is acknowledged that the project is in the early stages of design, and a full palette of materials will be developed further into the project. It is confirmed though that new work will be discernible as a new historical layer in the building by utilising modern materials and ensuring that original details are not replicated in the new fit-outs. The intent of the policy will be achieved in the materials chosen and the building details that will be delivered.

*The original planning of the building is still evident and is an important aspect of the building's significance. The plan of corridors and rooms demonstrates aspects of the training of nurses in the 20th century. It is likely that, in adapting the building for a new use, different spatial configurations will be required, as well as additional services.*

*Policy 17: The original planning should be retained, where possible, including circulation patterns. Evidence of the layout of corridors should be retained where possible. Some walls may be removed between adjacent rooms to provide more appropriate spaces if required. Later walls and partitions may be removed if required.*

While the double loaded corridor arrangement of the internal spaces will be retained, the alignment of the corridors will be shifted slightly in plan so that the rooms are different widths to improve overall yield and numbers of beds. The corridor alignments will be retained where the masonry walls are retained in identified locations of the low rise building.

### *Significant spaces*

*Policy 18: Internal spaces that are highly significant that should be retained, where possible, include:*

- *main entrance and associated rooms, ground floor, 1896 wing;*
- *charge nurses' rooms and sitting room, ground floor 1896;*
- *matron's rooms, ground floor;*
- *representative of typical spaces.*

The proposed scheme retains the main entrance spaces and associated rooms, the charge nurses' rooms and sitting rooms and matron's room in the first stage of the building.

*The building contains many similar and typical spaces, not all of which need to be preserved.*

*Policy 19: Preserve representative examples of these types of spaces:*

*nurses' cubicles and sitting rooms in the 1896, 1931, and towers.*

Representative examples of sitting rooms are retained in the 1896 stage of the building. Representative examples of four nurses' cubicles will be reconstructed in the 1914 wing of the building, with part-height partitions, reconstructed joinery and bedroom furniture and the sash windows retained to the verandahs to assist in this interpretation.

A number of the policies acknowledge that changes will be required so that the building can demonstrate compliance with modern standards and codes. New services will be required, and fire prevention initiatives will be required. The following excerpts from the CMP demonstrate these considerations:

#### *Code compliance*

*Since the completion of the first stage of the nurses' home in 1896, major changes have occurred with building codes. These changes have been evident in the later stages, but extensive areas and building fabric are not code compliant.*

*Ensuring that the necessary compliance changes have a minimal impact on significant elements and spaces requires the utmost design skill and understanding of what is necessary for compliance.*

*Policy 20: Ensure that in undertaking changes necessary for National Construction Code or access compliance, alternatives are considered to ensure that the impact on cultural heritage values is minimised.*

The proposed changes to the building represent modifications to the original fabric to achieve an outcome for the proposed adaptive reuse. Any use the building is put to will require internal changes to be made. Given the size of the building, the current layout, its history and its cultural significance, the student accommodation use is perhaps the most appropriate use for the building into the future. It is acknowledged that modifications are required, but such changes will be required whatever use the building is given.

#### *New services*

*In adapting the building for a new use, the introduction of new or upgraded services should include plumbing, cabling, air-conditioning, security equipment and fire services.*

*Policy 21: New and upgraded services should be coordinated to minimise impact on the significance of the place.*

#### *Fire management*

*The building was not designed in accordance with current standards of fire resistance.*

*Policy 22: Adopt measures to protect the building and its occupants from the risk of fire; preferably methods of protection that involve minimal interference with significant fabric.*

It is noted that the current lightweight partitions throughout the Lady Lamington Nurses Home are not compliant for fire resistance for a residential use. To protect the buildings and occupants from the risk of fire, as the CMP acknowledges is required, these non-compliant partitions will need to be removed.

#### *Courtyards*

*The courtyards make an important contribution to the significance of the Lady Lamington Nurses' Home and require careful attention in how to maintain their special qualities.*

*Policy 23: The mature plantings, lawns, concrete paths, stone walls, brick edges and gardens beds should be conserved.*

These elements are largely retained with the proposed scheme. The eastern courtyards and gardens will remain in use as gardens and quiet areas for the students but will be 'privatised' for security considerations. This does not impact on the significance of these areas as spaces.

Some identified masonry walls will be reconstructed to match the existing walls due to their poor condition.

#### *Courtyard plan*

*Policy 24: Prepare a landscape plan to guide ongoing planning and maintenance of plantings in the courtyards. The plan should:*

- recognise the courtyards serve a dual purpose as a space for leisure and enjoyment, and also to be viewed from the verandahs*
- follow the original approach of a semi-formal arrangement of paths, lawn and garden beds*
- avoid roofed or covered structures*
- avoid planting large trees.*

*New fencing*

*Additional fencing may be required around the nurses' home for security.*

*Policy 26: New fencing should be discrete and not detract from views to and from the building.*

New fences will not detract from views to and from the building.

*Ground levels in and around Tower blocks*

*When the Tower blocks were erected, only sufficient soil and rock was removed to form a level base at the rear of the E wing. Hence, the area between the Tower blocks is almost two metres higher than the ground levels of the Tower blocks. The cost of excavating the Brisbane tuff in the 1930s was probably deemed to be too expensive and not critical, although steps were necessary from the doors facing the courtyard.*

*Policy 27: The lowering of the ground level in the tower block courtyard to ground floor level of both tower block is appropriate and does not diminish the significance of the place.*

The ground level in between the tower blocks will be lowered to match the ground floor level of the two tower block buildings. The proposal is consistent with the CMP in this regard.

## **5.3. EDITH CAVELL BLOCK – DISCUSSION**

As noted in the previous chapter the internal plasterboard walls and ceilings of the building were water damaged in the 2014 storm. These elements and other elements of the interior of the building are now infested with visible mould. This occurs to the ceilings, walls, and floor finishes on the ground, first and second floors of the building.

The condition of the interior has great consequences for the retention of internal building fabric, both the original partitions of the nurses' cubicles and the modern partitions that have been installed more recently. The internal plasterboard walls and ceilings cannot be retained for any new use of the building. The masonry walls and timber floors are not affected by the mould and can be retained.

### **5.3.1. Impact of Proposed Use**

The building will accommodate a child care centre on the ground floor (in part) and the second floor, with speculative

The child care centre will be located on the second floor of the building and requires a separate and accessible entrance from the remainder of the building. The new entrance structure is required to provide a secure entry to the child care centre, and to provide access to the centre for parents in close proximity of the vehicle drop off. The ground levels are also issues for the site and this building. The construction of the new entrance building, and the associated earthworks addresses some of these concerns by bringing parents and children to the centre via the lift, negating a requirement for external ramps and other site works to achieve compliant gradients.

The commercial uses on the first and third floors will utilise the main entrance to the building and the new lift to be installed as part of this proposed development.

The commercial and child care centre uses proposed for the Edith Cavell Block will utilise in the broadest sense the overall layout and planning of the building. The uses are contained to certain floors and will use the overall spaces of the building from either side of this central entrance.

The extant internal fabric of the building is largely removed and not reused as part of the child care centre, the commercial uses or the proposed centre activities in the building. While the masonry walls are retained and modified slightly to accommodate these uses, the plasterboard partitions are removed throughout the building, for reasons discussed below.

### **5.3.2. Impact on Fabric**

The proposed adaptation of the Edith Cavell Block proposes the removal of most internal partitions and ceilings to the first, second and third floors of the building. It is considered that no alternative to this removal is possible given the mould infestation that has taken place in the building. These elements of fabric cannot be retained.

Importantly the timber floors and masonry walls are not affected by this mould infestation, and can be and will be retained in the proposed adaptation of the building.

Some of the extant timber staircases on the northern elevation are retained or reconstructed. In any event the staircases are reused for egress as part of the proposed scheme.

Modifications to the external fabric are kept to a minimum as to what is required for the new uses to be accommodated. Some changes to existing windows is proposed, to remove the windows and brickwork below to create doorways and entrances for the centre activities uses on the first floor southern elevation, and for the child care centre on the second floor. However, this removal of windows is minimised – most windows are retained and will be incorporated into the scheme.

The form and space of the southern balconies on the second and third floors will be reconstructed with the removal of later infill and the restoration of the external spaces of these elements. Existing metal shutters will be removed to expose the original windows beneath.

Parts of the drystone wall to the north-east need to be demolished for site earthworks, and to provide the new access structure for Edith Cavell. This demolition is limited to what is considered necessary to achieve these new gradients and deliver the new entrance building. Most of the wall is retained however, and the removed stones will be retained and reused in the landscaping works proposed for the wider site.

The two new structures to the north of building – the new entrance building and the new fire stair – minimise the impact on significant fabric in the design and how the new touches the old. Both structures require only limited modification of the existing fabric of the building, with removal of the extant timber balustrade to both northern wings only. There is no modification to the significant masonry walls to achieve these connections. Both structures will connect to the Edith Cavell Block very lightly.

The demolition of the adjoining “milk shed” building to the west of the Edith Cavell Block will have no impact on the cultural heritage significance of the Brisbane General Hospital Precinct site. This extension is not included in the register entry for the Brisbane General Hospital Precinct State Heritage Place. Some of the bricks from this extension will be retained and reused in the landscaping for the wider scheme.

### **5.3.3. Impact on Setting**

The scheme involves the construction of two new built forms to the north of the Edith Cavell Block – the child care entrance building and the new fire stair.

Both structures have been designed and located in such a manner to minimise impacts on views to and from the building and will be finished in permeable materials to allow views through to the masonry building beyond.

The provision of outdoor dining to the eastern side of the southern elevation of the building and the new awning for this dining area will not have impacts on the setting of the building or views to the building from the south.

The changes to the ground levels of the site to the north of the building will arguably improve the setting of the Edith Cavell Block building improve views to the northern elevation.

### **5.3.4. Consistency with Conservation Policies**

The 2018 CMP contains a series of conservation policies that have been written to guide the conservation and adaptation of the Edith Cavell Block.

A review of the specifically relevant policies has been made as part of this assessment. The proposed development is considered to generally comply with the below conservation policies from the CMP.

### *Adaptation*

*To keep the Edith Cavell block in use, changes to the fabric will be needed. Some of these changes will be necessary for code compliance. The impact of these changes on the significance of the place should be kept to a minimum. These principles should be followed:*

*Necessity—only changes that are critical for the ongoing use of the building should be made.*

*Visibility—the change should be clearly visible, and not disguised as original work.*

*Reversibility—when introducing new materials, consider as much as possible how to enable restoration or reconstruction of original form with minimal damage.*

*Policy 12: Apply the principles of necessity, visibility and reversibility, where possible, when changes are made to the fabric of the Edith Cavell block.*

The changes proposed to the Edith Cavell Block are considered necessary to provide a new viable use for the building. The internal plasterboard partitions and ceilings are infested with mould and cannot be retained. These partitions cannot be reused for any purpose.

The removal of this existing fabric, some original and some introduced, is necessary to facilitate the adaptive reuse of this building. And equally, new internal construction of walls and ceilings is required to facilitate the adaptive reuse of this building and provide for these new uses.

This new internal construction will be visibly modern and will not be detailed as early fit-outs. Finishes will be modern and contemporary. New doors to be constructed in place of windows will be modern but sympathetic to the retained building fenestration.

The new entrance structures to the north of the building will be visibly modern, will require only the most necessary modifications to existing fabric (the removal of two small sections of timber balustrading), and will be reversible. The structures can be removed in the future and the timber balustrading reconstructed to restore the existing condition of the northern elevation of the building.

Given the extent of new construction that will occur internally for this new use and the need to remove existing fabric to achieve compliance, it is unlikely these external and internal changes will be reversible. Windows that are removed to modify openings for doorways can be retained and stored on site for potential restoration in the future. The internal partitions can be designed and installed in such a manner to be reversible, and minimise the impact on the original building fabric that is retained.

### *Compatible uses*

*The building is capable of being adapted to a variety of uses.*

*Policy 13: The building should be put to any use which conforms to the policies set out in this conservation plan. The preferred option would provide for uses that:*

- require the least disruption to the character and significance of the place and its setting*
- make use, where possible, of the major internal spaces in their original form*
- ensure the continued viability of the building*
- continue significant associations of the place.*

The proposed uses of the Edith Cavell Block are for a child care centre, and a combination of commercial office space and Centre Activities (food retail, shop). It is considered that these uses require a level of intervention into the building the same as any other land uses that could be accommodated in the building.

The internal building fabric cannot be retained – the adaptive reuse of the building for any purpose will require the removal of this fabric and the construction of new partitions and associated facilities to accommodate this use.

While some small changes are proposed with windows removed and the openings converted to the doorways, the level of retention of external fabric is relatively high and the extent of modifications have been minimised to accommodate this new use.

The building does not have a lift for circulation. This is a required intervention for any reuse. The child care centre needs a separate access for security – the separate access to the north provides for equitable access and alleviates the varying ground levels surrounding the site. The changes to the setting of the building to the north are considered necessary to bring patrons and visitors to the building equitably and simply.

While a new entrance is proposed for the child care centre from the north-west, the main central lobby will remain the principal entrance for the building with circulation within the building being generated from this central entrance. While the internal partitions are removed the masonry walls dividing the major spaces from one another are retained and only modified slightly, so that the major spaces in the building are largely retained. The existing amenities spaces in the two southern wings will be followed in the adaptation on most floors (the child care centre needs additional amenities). The verandah spaces are not enclosed and will remain as circulation spaces along the northern edge of the building.

The proposed uses will ensure the continued viability of the building. The existing child care operator at the hospital site will relocate to this building, and the other floors will be used for commercial office space or retail space.

The significant associations of the place can be retained with the proposed reuse of the Edith Cavell Block for a child care facility. The child care use is within the realm of general care and guardianship of children – it is emphasised that the building was constructed for the accommodation of nurses who worked in the Children's Hospital and looked after children. This 'custodianship' that was associated with the building for many years will be continued with this proposed use.

#### *Palette of materials and methods*

*With any major adaptation proposed to the building, it is important that consistency is maintained regarding changes to the fabric, and that the changes respect the significance of the building.*

*Policy 14: Develop a palette of materials and details for any major adaptation of the Edith Cavell block. This palette should include a set of architectural forms, design approaches, materials, colours and details that will make the new work discernible as a new historical layer in the building.*

A (preliminary) palette of materials for the Edith Cavell Block adaptation is included in the Elevation Architecture drawings lodged with this application (Proposed Materials and Details). The new structures to the northern elevation of the building for access and circulation will be of modern materials and detailing, while the main masonry and timber elements of the existing building are retained. New timber balustrading will be installed to the existing staircase where required to match the detail of the original verandah balustrades, while a new metal perforated screen will be constructed to the existing northern verandahs to achieve compliance.

Internally new construction is proposed to be installed to facilitate the new use of the child care centre. It is likely materials will include the following:

- Modern plaster board partitions and ceilings;
- Modern doors and door hardware;
- Carpet floor finishes;
- Vinyl floor finishes;
- Modern tiled or vinyl floor finishes for bathrooms;
- Modern light fittings including downlights.

Again, it is acknowledged that the project is in the early stages of design, and a full palette of materials will be developed further into the project. It is confirmed though that new work will be discernible as a new historical layer in the building by utilising modern materials and ensuring that original details are not replicated in the new fit-outs. The intent of the policy will be achieved in the materials chosen and the building details that will be delivered.

#### *Internal spaces and planning*

*The original planning of the building is still evident and is an important aspect of the building's significance. The plan of corridors and rooms demonstrate aspects of the training of nurses in the*

*20th century. It is likely that, when adapting the building for a new use, larger spaces will be required, as well as additional services.*

*Policy 15: Aspects of the original planning should be retained, where possible, including the circulation patterns.*

*Evidence of the layout of the corridors should be retained, where possible. Walls may be removed between adjacent rooms to provide more appropriate spaces if required.*

*Later walls and partitions may be removed.*

As noted above the internal plasterboard partitions and ceilings are damaged and cannot be retained. New internal construction is required to facilitate the new uses proposed. These aspects of the original planning cannot be retained. Similarly, for these reasons evidence of the layout of the corridors cannot be retained.

In the broadest sense the existing circulation patterns will be retained with the new uses proposed. Workers and visitors to the building will enter from the main central entrance and traverse through the building into either end. As noted above the verandah spaces are not enclosed and will remain as circulation spaces along the northern edge of the building.

While the child care centre use will not follow the double loaded corridor with small rooms opening off the corridor, the commercial office use layouts have not been finalised. It is likely however that these will be open plan office spaces as is commonly provided for modern office layouts.

#### *Representative or typical spaces*

*The building contains many similar and typical spaces, not all of which need to be preserved. The original cubicles have significance in demonstrating the type of accommodation originally provided for nurses in 1922. Retaining a suite of four cubicles would demonstrate how they functioned.*

*Policy 16: Preserve representative examples of the original types of spaces, including a group of cubicles and a sitting room.*

Some original spaces will be retained with the proposal. A group of cubicle rooms will be retained on the first floor in the north-western wing of the building and adapted for use as office space, while a sitting room will be retained on the third floor.

#### *Code compliance*

*Since the completion of the building in 1922, major changes have occurred with building codes. Ensuring that the necessary compliance changes have a minimal impact on significant elements and spaces requires the utmost design skill and understanding of what is necessary for compliance.*

*Policy 17: Ensure that in undertaking changes necessary for National Construction Code or access compliance, alternatives are considered to ensure that the impact on cultural heritage values is minimised.*

The proposed changes to the building represent modifications to the original fabric to achieve an outcome for the proposed adaptive reuse. Any use the building is put to will require internal changes to be made.

The building does not have a lift or fire isolated stairs. An internal lift is proposed in a location and size that will have minimal impact on significant retained fabric. The lift overrun can be accommodated within the existing roof cavity space, causing no disruption to the existing roof line or roof fabric. The new lift and entrance structure to the north-west will provide a fire isolated staircase for the child care centre only. The secondary staircase to the north-east will provide a fire isolated staircase for the commercial office use on the third floor of the building.

In locating these fire isolated staircases in separate buildings to provide safe egress to demonstrate compliance the proposed scheme minimises the impacts on significant fabric in the provision of these essential service requirements.

#### *Lift*

*Currently vertical access in the building is limited to the main stairs. For compliance, a lift may be required.*

*Policy 18: A lift may be inserted internally. The location of the lift should take into account the original planning and the impact on significant fabric.*

A lift is proposed in the central lobby space throughout the building. The lift requires the removal of part of the concrete slab in this space for the lift shaft. This is necessary to provide for the lift. The lift overrun will not extend above the roof line of the building and will not require any modifications to the tiled roof of the building.

*New services*

*In adapting the building for a new use, new or upgraded services may be introduced including plumbing, cabling, air-conditioning, security equipment and fire services.*

*Policy 19: New and upgraded services should be coordinated to minimise impact on significance.*

*Fire management*

*The building was not designed in accordance with current standards of fire resistance. Any adaptation of the building will need to take account of necessary upgrades.*

*Policy 20: Adopt measures to protect the building and its occupants from the risk of fire. Preferred methods of protection should not involve minimal interference with significant fabric.*

New partitions to be installed to accommodate the proposed uses will be fire rated.

As noted above, new fire isolated staircases will be provided in separate structures to the north of the building, to demonstrate compliance with current fire management requirements. The proposed scheme minimises the impacts on significant fabric in the provision of these essential service requirements outside the current building envelope.

*The grounds*

*The mature plantings and drystone wall on the northern edge of the site contribute to the setting of the building.*

*Policy 21: The mature plantings and drystone wall should be conserved.*

The drystone wall is modified in part with some partial demolition for the provision of the child care parking, drop off zone and new entrance structure. The majority of the wall is retained and will be incorporated into the overall landscape design of the scheme.

## **5.4. LADY NORMAN HOSPITAL – DISCUSSION**

No building work is proposed to the Lady Norman Hospital Building component of the Brisbane General Hospital precinct.

### **5.4.1. Impact of Proposed Use**

No specific change of use is proposed to the Lady Norman Hospital Building yet as part of this development application.

Land uses that may be considered for the building into the future include Food and Drink Outlet, Shop, Health Care Service, Research and Technology Industry, Office, Indoor Sport and Recreation, and Short Term Accommodation.

These uses will be confirmed as part of a compliance assessment process after the development approval for the wider precinct.

### **5.4.2. Impact on Fabric**

No changes are proposed to the significant fabric of the Lady Norman Hospital building as part of this development application.

The Sylvia Moffat theatre will be demolished under a separate development application – the fabric of this building is not considered significant.

### 5.4.3. Impact on Setting

There will be no changes to the immediate setting of the Lady Norman Hospital Building as part of this Development Application.

The setting of the Lady Norman Hospital building will be improved by the separate demolition of the Sylvia Moffat Theatre. The northern elevation of the Lady Norman Hospital Building which is currently obscured by the Sylvia Moffat Theatre will be exposed and made visible by this demolition.

### 5.4.4. Consistency with Conservation Policies

The Development Application is considered to be wholly consistent with the significance assessment and conservation recommendations of the CMP.

## 5.5. CONSISTENCY WITH THE DEVELOPMENT SCHEME

It is considered that the proposal development of the Heritage Precinct at the Herston Quarter PDA satisfies and compliant with the relevant provisions in the Herston Quarter Development Scheme. While these heritage provisions are high level, broad and conceptual to some degree, the following is noted:

- The three buildings are currently vacant and have been for some time. The proposed redevelopment of these places as part of this proposal will provide for public access to the places and considerably improve the use and amenity of these significant heritage buildings.
- The proposal provides for the conservation and adaptive re-use of these significant heritage buildings. The uses proposed for these buildings are consistent with and will complement the proposed activity in the wider PDA.
- The proposed land uses for these buildings will provide a range of land uses that will contribute to the activation and vibrancy of the overall precinct, with retail and residential uses that will attract and maintain a large cohort of patrons;
- The proposed uses will activate the significant heritage buildings and complement other activities in the Herston Quarter PDA including residential, food and beverage, retail, commercial and accommodation uses;
- The proposed works to the buildings will provide for the conservation and adaptive re-use of the heritage places and will largely conserve their cultural heritage significance while allowing for the functional requirements of new uses;
- The proposed works will respect the historic built form character and setting, and in many respects improve the current settings of these heritage buildings.

## 5.6. INTERPRETATION

The implementation strategy in the PDA Development Scheme includes the following actions for the adaptive reuse of the Lady Lamington Nurses' Home.

Engage with key heritage stakeholders where appropriate to deliver relevant interpretation material for heritage buildings in the PDA and the broader Herston Health Precinct to highlight their cultural heritage significance including recognition that the heritage buildings are one of the most significant groups of health-related heritage listed buildings in Queensland.

The implementation strategy in the Herston Quarter PDA Scheme highlights the importance of providing relevant interpretation material for heritage buildings in the PDA and the broader Herston Health Precinct to highlight their cultural heritage significance, including recognition that the heritage buildings are one of the most significant groups of health-related heritage-listed buildings in Queensland.

The CMP notes that for almost 100 years, living in the nurses' home was a special experience for nurses who trained and worked at the Brisbane General Hospital. Former nurses have a special attachment to the place.

The CMP of the Lady Lamington Nurses' Home discusses interpretation as follows:

*Policy 28: Appropriate means of interpreting the building for users and visitors should be developed.*

*Policy 29: Engage a person/s with the appropriate skills and experience to prepare an interpretation plan for the nurses' home. The plan should deal with matters such as the following:*

- On-site interpretation of key spaces in the building, including the gardens, recreation hall, the matron's quarters, and typical examples of cubicles and sitting rooms*
- Engagement with the RBH Graduate Nurses' Association and other stakeholders*
- Hard copy and online publications*
- Events designed to engage former residents of the nurses' home*
- Oral history programs*
- Collection and conservation of significant associated objects*
- A program of labels, signs and other media throughout the building.*

On-site interpretation is proposed of key spaces in the buildings. Specific rooms and spaces within both the Lady Lamington Nurses Home and the Edith Cavell Block will be retained in-situ, or reconstructed as part of this project, to assist in the heritage interpretation of the former uses of these buildings for nursing accommodation.

In the Lady Lamington Building, the major internal spaces of the entrance hall, vestibule, matron's quarters and waiting room at the front entrance, and the charge nurses' bedrooms, sitting room and associated box room, will be retained on both floors of the original 1897 wing of the building.

Due to the fire compliance issue under the current Building Code, the original part height timber partitions nurses' cubicles cannot be reconstructed in the original 1897 wing. In the basement level of the 1914 wing, a group of four nurses' cubicles will be reconstructed in this space to demonstrate the former living conditions of nurses in this building. The cubicles will be reconstructed in timber as originally designed, with part height partitions of 2,100 mm high. In these reconstructed cubicles the extant double hung sash windows will be retained. The extant pressed metal ceilings will be retained in these spaces. The cubicles will be fitted out with a desk and robe to demonstrate the former use of the spaces for accommodation. A bed will be installed in each cubicle of modern design. The intention is to provide these spaces for passive recreation and reading/time out areas for the students. The rest of this wing will be allocated for common areas for students as well.

In the Edith Cavell Block, a series of partitions will be retained/reconstructed in the north-west wing on the first floor as representative original spaces of the former nurses' cubicles in this building.

Further to this, other elements of original fabric in both buildings will be retained as part of the proposal, including fireplaces, plaques, staircases, pressed metal ceilings, ripple iron ceilings, and identified joinery items.

Australian Unity has initiated the process to engage community and corporate partnerships to complete an Interpretation Plan. Australian Unity has met with MNHHS and the RBWH Nursing Museum about the project and commenced initial discussions to explore the options that may be available for the involvement of this organisation in the project into the future. Australian Unity will consider the preparation of information sheets and on-line publications on the history of the buildings and site. Australian Unity will continue the collaboration with MNHHS and community over the project redevelopment period.

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This report is dated 31 January 2019 and incorporates information and events up to that date only and excludes any information arising, or event occurring, after that date which may affect the validity of Urbis Pty Ltd's (**Urbis**) opinion in this report. Urbis prepared this report on the instructions, and for the benefit only, of Australian Unity/Cedar Pacific Management (**Instructing Party**) for the purpose of Heritage Impact Statement (**Purpose**) and not for any other purpose or use. To the extent permitted by applicable law, Urbis expressly disclaims all liability, whether direct or indirect, to the Instructing Party which relies or purports to rely on this report for any purpose other than the Purpose, and to any other person which relies or purports to rely on this report for any purpose whatsoever (including the Purpose).

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# **APPENDIX A      HAZARDOUS MATERIALS REPORT**

**29 AUGUST 2018**

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Client	Australian Unity
Client Contact	Maggie Wang
Client Details	Level 13, 500 Queen Street, Brisbane QLD 4000
Job address	Herston Quarter – Edith Cavill Building 300 Herston Road, Herston QLD 4006
HazSure Job No.	HC1826.2

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## **Mould Contamination Clarification – Edith Cavill Building**

Dear Maggie,

Please see below the advice following a query for regarding the potential to salvage/retrieve materials or items from the Edith Cavill building following the hazardous material survey of the building.

### **1. Background**

HazSure Consultants (HazSure) was engaged by Australian Unity (the client) to undertake hazardous materials survey of the Edith Cavill Building, which was conducted on Wednesday 27 June 2018 and Thursday 28 August 2018. Following the submission of the hazardous materials report, a query was raised to the potential of salvaging materials or items from the building.

### **2. Client requirements**

The client has requested clarification on the state of the materials throughout the Edith Cavill Building and the potential of salvaging or retrieving items from the building. As per the clients request the following was assessed:

- Undertake a desktop review of the submitted Hazardous Material Report (HC1825RPT001MSREVA).
- Clarify the extent of mould contamination throughout the Edith Cavill Building.
- Determine the availability of salvageable or retrievable items.
- Provide a report outlining results and conclusions for the specified areas.

### **3. Site Observations**

The site inspection and sample collection were conducted on Wednesday 27 June 2018 and Thursday 28 August 2018. The following site observations were made:

- Visible mould was observed to the ceilings, walls, and floors to varying extents throughout the ground floor.

- Airborne mould spores were taken and found to be elevated throughout the ground floor.
- Visible mould was observed to have grown on textile (i.e. carpets, soft furnishings).
- Visible mould was observed to permeable building fabrics (i.e. plasterboard walls and ceilings).
- Extensive visible mould was observed to the ceilings, walls, and floors throughout the first and second floor.
  - Airborne mould spores were taken and found to be very high throughout the first and second floor.
  - Visible mould was observed to contain active growth on textiles (i.e. carpets, soft furnishings).
  - Visible mould was observed to contain active growth to permeable building fabrics (i.e. plasterboard walls and ceilings).

## 4. Conclusions

As per the Hazardous Material Report (HC1825RPT001MSREVA), the remediation report outlines the below:

*“Remediation procedures within the above-mentioned areas should include:*

- *Removal of all textile covered/containing furniture, as well as carpets.*
- *All porous linings (i.e. plasterboard) should be removed as mould can penetrate the material.*
- *Any air conditioning or ducting must be disposed of mould contaminated waste.*
- *All accessible surfaces of the rooms should be vacuumed with a class H HEPA vacuum to remove remaining mould spores.*
- *Spray an application of anti- fungal and/or anti- microbial solution by a competent mould remediation specialist.*
- *It should be considered that ventilation panels should be installed periodically to allow for fresh air/ air movement throughout the riser. This will reduce the risk of mould growth and reduce the humidity build up.”*

The above recommendations have been providing as the building has been assessed to contain excessive levels of surface and airborne mould throughout the building. To clarify, HazSure Consultants recommend:

### Ground Floor

- No textile materials or furnishings can be salvaged/retrieved (i.e. carpets, chairs, cushions).
- No electrical/technical items can be salvaged/retrieved (i.e. computers, printers).
- No permeable building fabrics can be salvaged/retrieved (i.e. plasterboard)
- No air conditioning units or ducting can be salvaged/retrieved.
- Sealed or finished furniture (i.e. desks) are able to be salvaged/retrieved providing decontamination procedures outlined above are adhered to.

**Level 1**

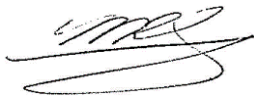
- No items to level 1 can be salvaged/retrieved. This includes building fabrics, furnishings, textiles, electrical equipment, stored items.

**Level 2**

- No items to level 2 can be salvaged/retrieved. This includes building fabrics, furnishings, textiles, electrical equipment, stored items.

Thank you for the opportunity to be able to supply you with advice. If you have further queries in relation to this report, please do not hesitate to contact me on (07) 3191 4684.

Kind regards,



Myles Stace  
Project Manager (*Asbestos and Built Environment*)  
Hazardous Materials Consultant  
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