1972

THE PARLIAMENT OF THE COMMONWEALTH OF AUSTRALIA

*Parliamentary Standing Committee on Public Works*

# REPORT

relating to the proposed construction of a

# REHABILITATION CENTRE

at

# Camperdown, New South Wales

(THIRTY-FIRST REPORT OF 1972)

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PARLIAMENTARY STANDING COMMITTEE ON PUBLIC WORKS

# REHABILITATION CENTRE, CAMPERDOWN NEW SOUTH WALES

## R E P O R T

By resolution on 31 August 1972, the Senate referred to the Parliamentary Standing Committee on Public Works for investigation and report to the Parliament, the proposal to construct a Rehabilitation Centre at Camperdown, New South Wales.

The Committee have the honour to report as follows:

### THE REFERENCE

1. The proposal referred to the Committee is for the construction of a five storey, 200 patient day attendance rehabilitation centre on the corner of Missenden Road and Lucas Street, Camperdown.

2. The proposed centre will supplement the Mount Wilga combined day attendance/residential rehabilitation centre at Hornsby and will alleviate a long standing need in New South Wales for additional treatment capacity.

3. The estimated cost of the work when referred to the Committee was $3,5 million. Subsequently we noted that the estimate had been reduced to $3.365 million following a closer study of cost control procedures.

## THE COMMITTEE'S INVESTIGATION

4. The Committee received written submissions and drawings from the Departments of Social Services and Works and took evidence from their representatives at public hearings in Canberra. Written submissions were also received from the Dubbo Regional Rehabilitation Centre Committee, the Royal Prince Alfred Hospital, the Civilian Maimed and Limbless Association, the Faculty of Medicine of the University of Sydney, and Dr G.G. Burniston of the Rehabilitation Medicine Department of the Prince Henry and Prince Of Wales Hospitals.

5. We inspected the proposed site at Camperdown.

6. The Committee's proceedings will be printed as Minutes of Evidence.

## COMMONWEALTH REHABILITATION SERVICE

7. The Commonwealth Rehabilitation Service provides without charge rehabilitation treatment and vocational training for persons suffering from a physical or mental disability who:

- receive, or are eligible for an invalid or widow's pension;
- receive, or are eligible for a sickness, unemployment or special benefit;
- receive a tuberculosis allowance; or
- are young people, 14 or 15 years of age, and who without treatment or training, would be likely to qualify for an invalid pension at 16 years of age.

8. Disabled persons not eligible for the service without charge may be provided with treatment or training on a payment basis.

9. The Department of Social Services is also responsible under the Defence (Re-establishment) Act for providing rehabilitation services to discharged National Servicemen who are not eligible for this type of assistance from the Repatriation Commission. Commonwealth employees receiving workers' compensation are also eligible for treatment and training.

10. Rehabilitation Centres In each of the mainland States, the Department of Social Services operates a rehabilitation centre which is equipped and staffed to provide specialised programmes of remedial treatment and assessment of employment potential.

11. Skilled therapists, working under medical supervision and using modern methods and equipment, help the disabled to achieve maximum physical restoration. Patients requiring artificial limbs or other surgical aids or appliances are prepared for their fitting and trained in their use. The severely handicapped learn to meet the demands of daily living, confidence is restored and residual abilities that can aid physical and economic independence are developed. Preliminary training, education, sporting activities and a wide range of amenities are provided to help in treatment, in physical, mental and social adjustment, in assessment, and in the development of future work capacity.

12. Resident patients are accepted as well as those who are able to live at home and attend daily.

13. Rehabilitation in New South Wales Since the transfer of rehabilitation treatment activities from Jervis Bay in 1957, the Mount Wilga combined day attendance/residential centre at Hornsby, some 18 miles from the centre of Sydney, has been the only rehabilitation centre operating in New South Wales.

Mount Wilga was acquired in 1952 and commenced operation in 1953 as a small day attendance centre catering for some 40 patients. In 1957 after an extensive building programme its capacity was increased to 70 resident patients and 70 day patients. The acquisition of adjoining properties and the subsequent addition of remedial buildings and facilities have further increased the capacity to some 70 male and 41 female resident patients and 100 day patients.

14. We noted with satisfaction that between July 1948 and June 1972, the Commonwealth Rehabilitation Service in New South Wales assisted 9,749 persons of whom 6,810 were restored to employment. During 1971/72, 353 persons were placed in employment after treatment and training.

## THE NEED

15. Mount Wilga Rehabilitation Centre The present capacity of Mount Wilga is considered to be about the maximum to which a centre should be developed in the interests of economy, efficiency and patient management. However, treatment demand is such that the centre usually has an attendance roll of over 200 patients, which is double the centre's outpatient capacity. The result is that some patients can only be treated two or three days per week and unfortunately, the average duration of treatment is thereby prolonged.

16. There is a substantial waiting list for admission to the centre. At 30 June 1972, 98 cases were awaiting admission as residents and 106 as day patients. Although in the last year, 442 persons were admitted to Mount Wilga, many disabled persons have to wait 4 to 10 months before receiving treatment. Due to the large waiting list, consideration of other cases who may be suitable for rehabilitation assistance often has to be deferred for lengthy periods.

17. The location of the centre at Hornsby, in itself, presents problems. There are constant difficulties and considerable costs involved in transporting day patients unable to cope with public transport from the eastern, southern, western and south-western suburbs of Sydney. The Committee were told that a day attendance centre at Camperdown would cater for patients from these areas and that Mount Wilga could then continue to operate as a combined residential/day centre for up to 200 persons, with those attending daily being drawn from the surrounding northern areas.

18. Growth in Demand Increases in population, invalid pensioner and sickness benefits, referrals to the Commonwealth Rehabilitation Service, the rising incidence of accidents and disablement in the community and improved treatment techniques are all contributing to a growing and continuing need for modern rehabilitation services.

19. The Committee were told that the New South Wales population growth rate between 1966 and 1971 was 8.30 per cent. Over the same period, invalid pensioners increased from 42,692 to 56,756, sickness benefits from 28,947 to 29,033 and referrals to the Rehabilitation Service, from 8,749 to 12,015. An important factor in the latter increase is improved treatment techniques which have resulted in acceptance of cases previously considered unremedial.

20. Committee's Conclusion It was evident from the Committee's investigation that if the Commonwealth Rehabilitation Service is to properly perform its function in New South Wales, there is a need to supplement the existing facilities. We therefore concluded that there is a need for the work in this reference.

## THE SITE

21. The proposed site covers about one acre, and is bounded by Missenden Road and by Lucas and Dunblane Streets. The land, previously used for industrial and residential purposes, is now zoned for hospital use. It is irregular in shape and partly occupied by old industrial buildings and small substandard unoccupied dwellings.

22. The site is 1½ miles from Central Railway Station and less than one mile from the Redfern, Erskineville and Newtown Railway Stations. Bus services pass within ½ mile of the site.

23. It is adjacent to the Royal Prince Alfred Hospital, which is the largest public hospital in Australia and the major training and teaching hospital for undergraduate and postgraduate medical students, physiotherapists, occupational therapists and nurses. The Committee noted the convenience of the site for patient employment opportunities, training establishments, other hospitals and voluntary agencies, and general operational supervision. In addition transport savings would also be significant.

24. We concluded that the improved accessability of day treatment facilities for patients living in the eastern, southern, south-western and western suburbs of Sydney will permit greater flexibility in all treatment arrangements and so enable more productive use to be made of facilities. The Committee agree that the site selected is suitable.

## THE BUILDING PROPOSAL

25. Planning Outline The proposed centre has been planned to provide an efficient operational layout which, at the same time, will create a pleasant atmosphere within the comparatively small site area, and will blend with the surroundings without the appearance of an institution.

The building has been designed for later vertical extension should the need arise.

26. The various units of the centre will be self-contained but will be linked by a system of corridors, ramps, galleries, stairs and lifts to permit convenient circulation for patients and staff. Throughout the centre, special building requirements for disabled persons will be incorporated.

27. The main patient reception area will be undercover at lower ground floor level, but, vehicles will also be able to deliver patients to a ground floor level entry. Undercover parking will be available for some 75 cars and buses in the basement and lower ground floor.

28. Particular attention has been paid to fire precautions throughout the building involving location of stairways, ramps and fire escape doors.

29. The ground, first and second floors will be air conditioned whilst other areas will be heated and ventilated.

30. Layout of Facilities and Services The partial basement will contain air conditioning plant and mechanical equipment, stores, an automotive repair unit as part of the occupational therapy section, and a car park. Access to the area will be by lifts, stairs and vehicular ramps.

31. The lower ground floor will contain the occupational therapy section which will include the metalwork, woodwork, welding and process workshops as well as offices, and work areas for light trades, radio, pottery, printing, a remedial kitchen and an activities of daily living unit. Also located at this level is the main patient's reception area and change, toilet and locker rooms.

32. Located on the ground floor will be administrative offices, reception and waiting areas, and the medical and physiotherapy sections. The medical section will include offices, treatment and recovery rooms, a records area and a conference room seating 60 for case discussion and student training. The physiotherapy section will contain a plinth area, a plaster room, treatment rooms, outdoor exercise areas, a gymnasium, two hydrotherapy pools and change rooms, toilets, showers and a drying room.

33. Counselling and education, and social work will be conducted on the first floor. The proposed facilities include classrooms and study rooms, offices, a reference library, stores and a rooftop exercise area.

34. The partial second floor will contain food services, amenities and dining rooms for patients and staff. The patients dining room will serve 200, cafeteria style, but provision will be made for a waitress service for those patients unable to serve themselves. A special diets kitchen will also be included. The staff dining room will seat 100. The patients' lounge area which includes a canteen will adjoin their dining room. In addition a recreation hall will be provided at this level which will double for visual education and lecture theatre use. Other facilities include staff and visitors' lounges, domestic staff and students' common rooms, staff change and locker rooms, and toilets and ablutions.

35. Structure The five storey structure will have maximum flexibility by the use of concrete columns and slabs. The external infill walls will be concrete as will the footings under columns and external walls.

36. Fittings and Finishes External walls will be concrete with an applied finish, window frames will be anodised aluminium and the insulated roof will have a trafficable surface.

Internal walls will be concrete, masonry and laminated plaster board and finishes will include off-form concrete, render, ceramic tiles and low maintenance vinyl. Floors will be finished with either vinyl, ceramic tiles, timber or granolithic, and ceilings will be off-form concrete, suspended plaster board or acoustic tiles.

37. Built-in fittings and equipment are to be provided according to functional needs.

38. Engineering Services Mechanical services will include air conditioning, heating, ventilation, boiler plant, domestic hot water services, emergency power plant, sanitary dispensers, drinking water coolers and an incinerator.

39. Electricity will be supplied through a substation on the lower ground floor. Lighting will conform with the Australian Standard Lighting Code and other electrical services include a master and slave clock system, a public address system and battery operated emergency lighting.

40. Fire protection measures include an automatic sprinkler system in critical areas and the fire isolation of sections of the building. Fire stairs and escape ramps will be provided in addition to hydrants, hose reels and portable extinguishers.

41. Four passenger lifts will be installed and provision will be made for the installation of a fifth. A goods hoist will be provided in the basement.

42. Areas adjacent to the building and the internal courtyards will be landscaped.

43. Committee's Conclusion The Committee recommend the construction of the work in this reference.

## ESTIMATE OF COST

44. The estimated cost of the proposed work when referred to the Committee by the Senate on 31 August 1972 was $3.5 million. However, we were informed during the course of the enquiry that, principally by the application of stringent cost control procedures, it is expected that savings of the order of $135,000 can be made in the cost without material detriment to the concept.

45. The Committee were told that when the Government originally examined the proposal, it was estimated to cost $2 million. Development of the plans then took place and at the point when approval was given for the work to be referred to the Committee, the estimate stood at $3.5 million. Because of this escalation in cost, the Departments concerned were directed to examine the possibility of effecting savings of up to $500,000 and to submit the result of the deliberations to the Committee. The outcome of this study showed that whilst savings of $135,000 are possible without financial or architectural loss, savings over that figure would materially effect the scope and overall efficiency of the project.

46. Whilst we recommend the construction of the proposal at $3.365 million, we find it unfortunate, to say the least, that the Government should put forward a proposal for Parliamentary examination without its cost limit having been agreed. Also we find it difficult to understand why, if it is possible to reduce the estimated cost of a project of this nature by some 4% by "stringent cost control procedures", the same procedures should not be applied to all Commonwealth works proposals.

47. The estimated cost at $3,365,00 is made up as follows:

| | $ |
|---|---|
| Building work | 1,964,000 |
| Mechanical services | 660,000 |
| Electrical services | 418,000 |
| Hydraulics | 323,000 |
| | $3,365,000 |

PROGRAMME

48. After an approval to proceed is given the preparation of final drawings and tender documents, calling and acceptance of tenders is expected to take 11 months. Construction time for the work is estimated at 24 months after a contract is let.

OTHER OBSERVATIONS

49. Report of Senate Standing Committee on Health and Welfare

Dr G.G. Burniston in his submissions directed the Committee's attention to the 1971 report of the Senate Standing Committee on Health and Welfare on the subject of mentally and physically handicapped persons in Australia. That Committee, in its report presented to the Senate on 5 May 1971, recommended

> "THAT all aspects of medical rehabilation at present carried out in facilities of the Commonwealth Rehabilitation Service should be undertaken in the State Hospitals or community Rehabilitation Centres, Units or Clinics.
>
> THAT the present Commonwealth Rehabilitation Service restrict its activities to programmes of vocational training, re-training and work adjustment, and that these vocational facilities be

available, not only to Social Service beneficiaries, but to all patients referred from the State Hospitals or community Rehabilitation Centres, Units and Clinics.

THAT a working party, comprising representatives of the Commonwealth Departments of Health, Social Services, Labour and National Service, Education and Science and the State Rehabilitation Centres, be appointed to carry out the above recommendations. "

50. On enquiry, we found that an interdepartmental committee has been appointed to examine the first two recommendations but beyond that no positive action has been taken by the Government to accept or reject the Senate Committee's recommendations.

51. We considered the impact of the recommendations on the proposed work at Camperdown and were concerned that submissions have not yet been made to the Government about them. In the event, we concluded that they would have no long term effect on the present proposals because should the State or another authority assume responsibility for Commonwealth rehabilitation functions and facilities, the Centre would be appropriately located as it is adjacent to the Royal Prince Alfred Hospital.

52. Regional Rehabilitation Centres Consideration of the Senate Committee's views then led us to examine the suitability and coverage of the Sydney based N.S.W. facilities of the Commonwealth Rehabilitation Service. In this connection, we noted with interest the recent statement of the Minister for Social Services on the proposal to open rehabilitation clinics in provincial centres. In New South Wales this means that in addition to the pilot project which has been operating in Newcastle for the last 18 months, a clinic is also to be established in Wollongong.

53. Whilst the present proposal conforms with Government policy on the provision of rehabilitation assistance by the Commonwealth, and will partly fill a pressing need for additional services, and the clinics in Newcastle and Wollongong will further broaden the scope of the Service, it seemed that an examination might now be made of whether the facilities of the service should be even more widely spread either on a regional or some other more decentralised basis.

## RECOMMENDATIONS AND CONCLUSIONS

54. The summary of recommendations and conclusions of the Committee is set out below. Alongside each is shown the paragraph in the report to which it refers.

| | | Paragraph |
|---|---|---|
| 1. | THERE IS A NEED TO SUPPLEMENT THE EXISTING FACILITIES OF THE COMMONWEALTH REHABILITATION SERVICE IN NEW SOUTH WALES. | 20 |
| 2. | THERE IS A NEED FOR THE WORK IN THIS REFERENCE. | 20 |
| 3. | THE SITE SELECTED IS SUITABLE. | 24 |
| 4. | THE COMMITTEE RECOMMEND THE CONSTRUCTION OF THE WORK IN THIS REFERENCE. | 43 |
| 5. | THE CONSTRUCTION OF THE PROPOSAL AT AN ESTIMATED COST OF $3,365,000 IS RECOMMENDED. | 46 |
| 6. | IT IS UNFORTUNATE THAT THE GOVERNMENT SHOULD PUT FORWARD A PROPOSAL FOR PARLIAMENTARY EXAMINATION WITHOUT ITS COST LIMIT HAVING BEEN AGREED. | 46 |
| 7. | STRINGENT COST CONTROL PROCEDURES SHOULD BE APPLIED TO ALL COMMONWEALTH WORKS PROPOSALS. | 46 |

(C.R. KELLY)
Chairman.

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19 October 1972.