

*Parliamentary Standing Committee on Public Works*

**REPORT**

relating to the proposed construction of an

**EXTENSION TO THE PODIUM OF  
CANBERRA HOSPITAL — STAGE 1**

**Australian Capital Territory**

**(ELEVENTH REPORT of 1975)**

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PARLIAMENTARY STANDING COMMITTEE ON PUBLIC WORKS

CANBERRA HOSPITAL -  
EXTENSIONS TO PODIUM - STAGE 1

R E P O R T

On 14 July 1975, His Excellency the Governor-General in Council referred to the Parliamentary Standing Committee on Public Works for investigation and report to the Parliament, the proposal to extend the Podium of Canberra Hospital - Stage 1.

The Committee have the honour to report as follows:

THE REFERENCE

1. The proposal referred to the Committee is for the construction of a four level, air conditioned extension to the podium of the Canberra Hospital. The extension will provide facilities for enlarged casualty, outpatients and day patients departments, consulting suites for use by specialists, central administration area and new intensive care and coronary care areas.
2. The estimated cost of the proposal when referred to the Committee, at May 1975 prices, was \$7.6 million. At the time of the public hearing this estimate had risen to \$8.17 million.

THE COMMITTEE'S INVESTIGATION

3. The Committee inspected the Canberra Hospital sites last year in relation to a previous reference. We received written submissions and drawings from the Capital Territory Health Commission and the Department of Housing and Construction and took evidence from their representatives at a public hearing

in Canberra on 1 September 1975. The Committee also received written submissions and took evidence from a representative of the Royal Australian Nurses Federation and a private practitioner (anaesthetist). A written submission was also received from a Senior Specialist in Surgery at the Canberra Hospital.

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

#### THE NEED

5. Historical Background The existing hospital has a permanent capacity of 600 beds following extensions recommended by the Committee in 1956 and 1960. The only major development at the hospital in the intervening years has been the expansion of laundry and sterilising facilities to provide interim facilities until the Central Hospital Services Complex at Mitchell (formerly Crace) is operational early in 1976.

6. Present Situation The Committee were advised that the Canberra Hospital is a major general hospital providing a wide range of services for inpatients and outpatients which can only operate efficiently with adequate space and modern plant and equipment. In many respects it has become a large medical centre for not only the Australian Capital Territory but also for the south-east region of New South Wales.

7. In recent years many medical specialities and sub-specialities have been established in the A.C.T. most of them based on the Canberra Hospital. This trend accelerated with the recruitment of staff and development of special clinical units in preparation for hospital medibank which was introduced on 1 July 1975. It is now very rarely necessary for A.C.T. residents to travel to Sydney or Melbourne for specialised medical attention which cannot be provided in the A.C.T.

8. The accommodation of these new clinical units with salaried staff and special investigative facilities has placed a great strain on the hospital and there are now severe limitations of space which inhibit the optimal development of some clinical services.
9. In particular, it is becoming impossible, without a major hospital extension, to provide satisfactory accommodation for full-time salaried and part-time sessional specialists. This will undoubtedly interfere with their recruitment.
10. The Committee were advised that the existing accommodation falls far short of that required to allow the efficient functioning of Canberra Hospital. The proposed extension and the relocation of existing space will greatly assist the efficient operation of the hospital.
11. Committee's Conclusion There is a need to extend the podium of the Canberra Hospital.

#### THE PROPOSAL

12. Consultations The proposal stems from recommendations made by a working party which was established by the then Minister for Health in March 1971 to prepare a master plan for the long term development of Canberra Hospital. Organizations represented on this working party included the Department of Health, the Canberra Hospitals Management Board, the Australian National University, the Department of Housing and Construction and the National Capital Development Commission.
13. The working party was assisted in the detailed planning of the proposed extensions by other working parties with special expertise in the particular sections which are proposed for inclusion in the first stage of construction. Membership of the smaller working parties comprised representatives of the A.C.T. Medical Association, Canberra Hospital, the

Department of Housing and Construction, the Australian National University and the then A.C.T. Health Services. Membership of these working parties was such that they were competent to examine and make recommendations in regard to the physical facilities required for a possible Faculty of Medicine and a number of other facilities, which were either required or needed expanding, to provide all the general hospital services for a population of some 80,000 people in "Old Canberra" and, at the same time, consider the need for integration of the hospital into the proposed regional hospital concept for the Australian Capital Territory.

14. Further Consultation The Committee received submissions from parties directly involved in the operation of the hospital facilities affected by this proposal. They were mainly concerned about variations to the detailed layout of facilities and they considered they had had little or no opportunity to express their views during the planning stages of the proposal. The Committee were assured by the departmental representatives that opportunity had been given to all groups associated with the hospital to participate in consultations. The Committee were also assured that it is the intention of the Capital Territory Health Commission that full consultation will take place with all interested parties before the working drawings for the extension are finalised.

15. Accommodation The proposal is to provide an enlarged casualty, outpatients and day patients facility, consulting suites for use by specialists, an effective central administrative area, new intensive care and coronary care areas and to augment existing engineering services to accommodate these facilities.

16. The podium extension will provide the following accommodation: A basement for the plant room; a lower ground floor comprising recovery ward, day surgery ward, casualty, outpatients clinics, staff clinics and ambulance entry; a mezzanine floor and ground floor comprising entrance,

admission and discharge, consulting suites, administration, coronary care unit, intensive care unit, dental unit and clinics; a first floor administration area comprising finance, general services, medical, nursing and plant room. In addition, the boiler house will be extended to provide space for the additional engineering equipment required to provide a service to the proposed works.

17. Mortuary The Committee are concerned that it is proposed to incorporate the existing mortuary building in the extensions, adjacent to the new entrance to the casualty and outpatients area. The Committee concluded that it would be most desirable to relocate the mortuary as suggested by the departmental representatives. As the existing mortuary equipment could be re-utilised, the overall cost of such a transfer should be minimised. The present mortuary building could then be used to expand the proposed intensive resuscitation area.

18. Child Care Facility The Committee noted that no provision had been made on the lower ground floor plan for an area where small children could be left whilst parents are seeking aid in either the casualty or outpatients departments. The Committee consider a glassed-in area which could be observed from the waiting areas where these small children could play would substantially lessen the discomfort of both parents and hospital staff.

19. Committee's Conclusion The proposed facilities are necessary and should be provided. Consideration should be given to relocating the mortuary. Consideration should be given to providing a small child care facility adjacent to the casualty and outpatients waiting areas.

THE SITE

20. The peninsula site, 9 hectares in area, is bounded on the south, west and east sides by boundary lines set back from Lake Burley Griffin and on the northern side by a proposed new roadway. The site is landscaped and has an internal road system.

21. The hospital buildings occupying the site comprise: Child care centre, nurses home, main ward block, boiler house, laundry, staff accommodation, psychiatric block, maternity block, two single storey wards and two residences.

22. The extension to the podium will be erected between the existing podium of the main ward block and the nurses home.

23. Committee's Conclusion The site selected is suitable.

CONSTRUCTION

24. Design Concepts The National Capital Development Commission is very interested in the development of the hospital peninsula and the appearance of the various buildings comprising the complex when viewed from the opposite shores of Lake Burley Griffin. Consequently, the design now before the Committee has been evolved with officers of the Commission, the Department of Housing and Construction and the Capital Territory Health Commission and has the Commission's approval in principal.

25. Structure The building structure will be reinforced concrete frames with beam and slab construction. Floors will be reinforced concrete and the metal deck roof will be supported on steel beams and purlins.

26. External Finish The external finish will be face brickwork to match the existing podium.

27. Internal Finishes Generally all internal partitions will be painted concrete block or prefabricated timber partitions. Floors will be finished in either carpet, vinyl tiles, granolithic or ceramic tiles. Ceilings will be off form concrete, acoustic tiles or plaster. Appropriate fittings will be provided throughout the building.

28. Mechanical Services Full air conditioning will be provided in all occupied areas of the podium extension. Cooling will be achieved by the connection of air handling equipment to a central chilled water system and heating will be provided from steam generated in the existing boilers. Exhaust ventilation will be provided for service areas such as bathrooms, toilets, dirty utility rooms, lift machinery rooms and ambulance bays.

29. The central chilled water plant will be located in an extension to the existing boiler house. Space will be provided to allow for the installation of additional plant to meet future load increases.

30. Cooling towers will be located on the roof of this new extension. These towers are required to provide cooling water to the central plant. The possibility of using water from Lake Burley Griffin to provide the cooling water is currently being examined and if this proves feasible the cooling towers will not be necessary.

31. The existing boilers have enough steam capacity to cope with the additional load of the podium extension.

32. Chilled water and steam will be reticulated to the various buildings in pipes mounted in underground box culverts, tunnels and corridors. Allowance will be made in chilled water and steam pipe sizing for future connection to additional areas.

33. Domestic hot water will be provided by calorifiers located in the basement plant room of the podium.

34. Medical oxygen, vacuum and air will be provided in the operating theatre suites, casualty, intensive and coronary care units, recovery wards and day care wards.

35. Emergency power generating capacity will be increased to meet the new anticipated loads.

36. Miscellaneous services will include pen washers, drinking water units, refrigerators, macerators and pantry equipment.

37. Electrical Services. Power supply will be taken from an existing supply authority sub-station, enlarged to provide for the additional load. The present system of "non-essential" and "essential" reticulation will be extended to the new extensions. Electrical services including lighting, power and communication systems will be provided as necessary within the new extensions.

38. Lifts Three bed/passenger lifts will be provided, viz:-

- one bed/passenger lift for the transport of bed trolleys and attendant equipment to and from the intensive and coronary wards;
- two bed/passenger lifts for the transport of bed trolleys and pedestrians between the lower ground, mezzanine and ground floors.

39. Civil Services An existing road on the south-west side of the podium will provide vehicular road access to the podium extensions at lower ground floor level to the ambulance and mortuary areas, while the present road to the front entrance of the hospital will also allow patient and visitor set-down and pick-up at the ground floor entry to the extensions. Driveways, layby car parking, footpath reconstruction and ancillary works will be provided as required.

40. Site works will include excavations for the basement plant floor. Appropriate measures will be taken in the design and construction of this floor and the foundations to prevent ingress of water from the adjacent Lake Burley Griffin.

41. Hydraulic Services The extension will be connected to the Canberra water supply and sewerage system. There are already existing mains which traverse the site and which must be relocated to clear the proposed extensions.

42. Fire Protection The building generally will be of fire resistant construction. Fire doors will be provided in corridors to sub-divide areas into fire/smoke isolated compartments. These fire doors will be held open by magnetic devices interconnected with the fire alarm system. An automatic fire detection and alarm system will be installed throughout the building with manual fire alarm points at selected locations. Fire hydrants will be provided adjacent to the building and within the building where coverage from external hydrants is not adequate. Fire hose reels and portable fire extinguishers will be provided within the building.

43. Landscape The existing landscaped areas disturbed by building works will be replanted to conform to the overall landscaping design.

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

#### PROGRAM

45. The estimated time for preparing contract documents, calling, analysing and accepting a tender is 15 months. Construction is expected to take 28 months following acceptance of a contract.

ESTIMATE OF COST

46. The estimated cost of the project when referred to the Committee, at May 1975 prices, was \$7.6 million. At the time of the Committee's hearing this had risen to \$8.17 million made up as follows:

	\$
Building work	3,484,000
Mechanical services	3,276,000
Electrical services	926,000
Hydraulic and civil works	298,000
Lifts	186,000
	<hr/>
	8,170,000
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RECOMMENDATIONS AND CONCLUSIONS

47. 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.

	<u>Paragraph</u>
1. THERE IS A NEED TO EXTEND THE PODIUM OF THE CANBERRA HOSPITAL.	11
2. THE PROPOSED FACILITIES ARE NECESSARY AND SHOULD BE PROVIDED.	19
3. CONSIDERATION SHOULD BE GIVEN TO RELOCATING THE MORTUARY.	19
4. CONSIDERATION SHOULD BE GIVEN TO PROVIDING A SMALL CHILD CARE FACILITY ADJACENT TO THE CASUALTY AND OUTPATIENTS WAITING AREAS.	19

Paragraph

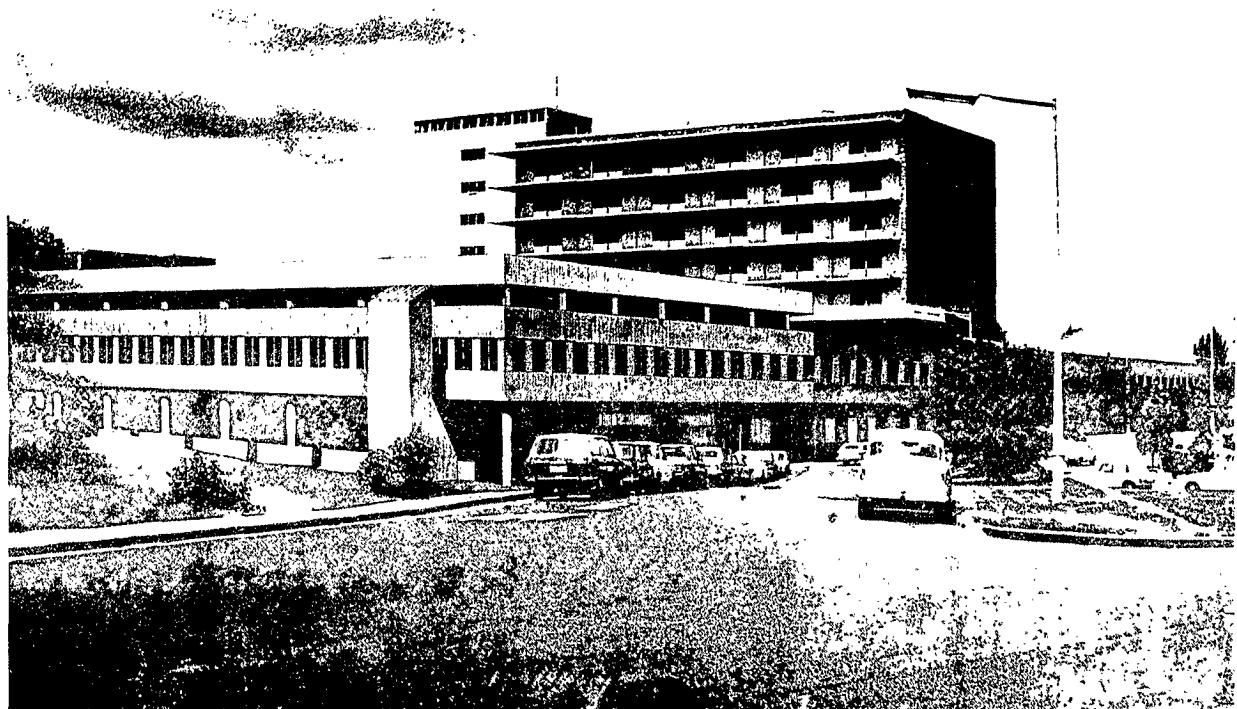
5.	THE SITE SELECTED IS SUITABLE.	23
6.	THE COMMITTEE RECOMMEND THE CONSTRUCTION OF THE WORK IN THIS REFERENCE.	44
7.	THE ESTIMATED COST OF THE PROPOSAL AT THE TIME OF THE COMMITTEE'S HEARING WAS \$8.17 MILLION.	46



(L.K. JOHNSON)  
Chairman

Parliamentary Standing Committee on Public Works,  
Parliament House,  
CANBERRA, A.C.T.

11 September 1975.



PERSPECTIVE OF PODIUM EXTENSION - STAGE 1 (Foreground)