



**NGH**



**Health  
Infrastructure**

# **Statement of Heritage Impact**

## **Temora Hospital Redevelopment Project Final v2.2**

**September 2024**

**Project Number: 22-610**



## Document verification

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## Acronyms and abbreviations

AHD	Australian Heritage Database
BCD	(NSW) Biodiversity and Conservation Division, formerly the Office of Environment and Heritage
<i>Burra Charter</i>	Refers to <i>The Burra Charter</i> prepared by Australia ICOMOS
<i>Cultural Significance</i>	Aesthetic, historical, scientific, social, or spiritual value for past, present or future generations
CHL	Commonwealth Heritage List
CMP	Conservation Management Plan
DCP	Development Control Plan
DPE	NSW Department of Planning and Environment
EP&A Act	<i>Environmental Planning &amp; Assessment Act 1979</i>
EPBC Act	<i>Environment Protection and Biodiversity Conservation Act 1999</i> Legal framework for the protection and management of places of national environmental significance
<i>Fabric</i>	Physical material of the place including components, fixtures, contents and objects
HA	Heritage Assessment
<i>Heritage Significance</i>	A term used to describe the inherent cultural and historical value of an item
HIA	Heritage Impact Assessment
HCA	Heritage Conservation Area
ICOMOS	International Council on Monuments and Sites
<i>Interpretation</i>	All the ways of representing the <i>cultural significance</i> of a place
LEP	Local Environment Plan
LGA	Local Government Area
NHL	National Heritage List
NPW Act	<i>National Parks &amp; Wildlife Act 1974 (NSW)</i>
NSW	New South Wales
OEH	(NSW) Office of Environment and Heritage (now the Biodiversity and Conservation Division (BCD)), formerly Department of Environment, Climate Change and Water
<i>Place</i>	Site, area, land, landscape, building or other works, and may include components, contents, spaces, and views
<i>Reconstruction</i>	Means returning a <i>place</i> to a known earlier state and is distinguished from <i>restoration</i> by the introduction of a new material into the <i>fabric</i>

<i>Restoration</i>	Means returning the existing <i>fabric</i> of a <i>place</i> to a known earlier state by removing accretions or by assembling existing components without the introduction of a new material
SHR	State Heritage Register
RNE	Register of the National Estate
UNESCO	United Nations Educational, Scientific and Cultural Organisation
WHL	World Heritage List

## Executive summary

### Location

The subject land comprises the Temora Hospital and associated buildings within Lot 2 DP572392 at 168–182 Loftus Street, Temora (the Site Area) (Figure 1-1 and Figure 1-2). It is in the Temora Local Government Area (LGA) and is part of the Riverina Region of NSW. The Site Area is bordered by Loftus Street to the south, Whiddon Residential Care and Gloucester Street to the west, residential development to the north and vacant land to the east.

The Temora Hospital is a 28-bed facility. Temora District Hospital provides emergency, general, surgical, obstetric, pathology and radiology services. Community health services include community nursing, domestic violence counselling, physiotherapy, mental health, and transitional aged care. Additional services provided by visiting staff include speech pathology, dietetics, dental and occupational therapy.

### Background assessment

The Temora Hospital (the Site Area) is identified as Lot 2 572392 within the town of Temora. The hospital is a critical health facility servicing the surrounding area. The Site Area is an approximately 245m x 180m area located on the eastern side of the town of Temora. The Site Area is currently occupied by the existing facilities and concentrated in the north-eastern portion of the Site Area with the remaining area consisting of paved areas with minor areas of lawn and garden mainly in the south.

### Proposal

Following an extensive consultation and master planning process, the existing hospital building, and the former nurses' quarters are to be removed and a new hospital building is to be constructed on the site of the existing hospital building.

The proposed works for the Site Area are as follows:

- Demolition of the existing hospital building, nurses' quarters and associated buildings, and new build on the existing site. The new building is proposed to retain the 'Hospital on the Hill' and landscaped gardens and tree plantings qualities of the site.
- Construction of roads, driveways, and pedestrian pathways within and surrounding the hospital.
- Construction of additional carparks, and hydraulic, ICT, fire, and electrical services.

### Statement of significance

The following statement of cultural (heritage) significance is taken from the SHI NSW Heritage (2017) listing for the Temora and District Hospital:

*The hospital occupies a prominent location in the town, has provided excellent medical services for the town and wider district since 1939 in this location replacing the hospital of 1908. The current building retains the stylistic features from the art deco period. # 4701905 on Australian Institute of Architects (NSW) registry listing.*

The following is an updated summary statement of significance prepared by NGH:

The Temora & District Hospital site is a good representative example of an Interwar era International-style regional hospital building and has historical significance as the central location for health services in Temora since the early 20<sup>th</sup> century: represented primarily by the 1930s hospital building, by extant memorial and other plantings/landscaping, and by extant ancillary buildings, including the nurses' quarters. The Temora & District Hospital has aesthetic/technical significance as a 1930s Interwar, International-style purpose built regional hospital, including design features that are both functional for hospital services and have some aesthetic significance. The Temora and District Hospital is a good representative example of a 1930s-1940s era regional hospital building in a formal landscape setting.

## **Conclusion**

This report assesses heritage impacts to the Temora Hospital site, including both visual and material impacts from the proposed works. In conclusion:

- The proponent has engaged in a thorough master planning process that has considered the heritage values of the place and has considered various options to avoid or minimise any heritage impacts from the proposal.
- The new hospital building will be constructed on the same footprint as the existing 1930s hospital building and will replace the existing building. Additionally, the modified nurses' quarters building is to be removed. This results in the loss of two locally listed heritage items within the wider hospital site - to provide modern healthcare facilities for residents of Temora and surrounding areas – but the retention of the garden setting within the heritage curtilage.

The design of the new hospital has aimed to respond to the relevant DCP controls and has been designed to be sympathetic to the heritage values of the place (in form, massing and location) but does not attempt to replicate the existing hospital building. Instead, the new hospital has been designed to be understood as a new, modern building but with appropriate design sympathetic to its setting and retaining elements of the original structure where possible (retention of the curved ground floor wall for inclusion into the new staff courtyard). The retention of the heritage listed buildings is not possible due to the space available for the new hospital and the need to provide modern health care services.

However, the proposed works will retain and expand the existing landscaping and tree plantings, elements that have been identified as high heritage significance within the site and the setting of the 'hospital on the hill' will remain, providing continuity of use of the place for the Temora community.

## **Recommendations**

It is recommended that:

- (a) Where additional changes not addressed in this document are proposed, further assessment and investigation may be required.
- (b) Temora Shire Council should continue to be consulted at relevant stages of the project.
- (c) The historic garden setting of the place should continue to be prioritised for retention in its current location and layout.



- (d) Prior to demolition, an archival recording of the site in line with the relevant Heritage NSW guidelines should be undertaken to record the existing physical aspects of the site.
- (e) An interpretation plan for the site should be undertaken by a qualified heritage consultant.
- (f) All opportunities for retention of significant/existing spaces or settings that allow or promote public/visitor amenity are to be considered, to promote heritage outcomes and to promote health and community outcomes.
- (g) Significant examples of heritage fabric or moveable heritage are to be salvaged prior to the demolition of hospital buildings, subject to a salvage plan developed in consultation with Temora Shire Council.
- (h) Any unexpected heritage finds will be managed in accordance with Council's *Unexpected Heritage Find Procedure (version 2)* (PMHC, July 2020).

# 1. Introduction

## 1.1 Background

NGH Pty Ltd (NGH) was commissioned by New South Wales (NSW) Health Infrastructure to prepare a Statement of Heritage Impact (SOHI) report for the Temora Hospital Redevelopment Project (the Project).

The Project provides a range of new clinical and non-clinical facilities to support capacity issues and existing infrastructure deficiencies on the campus. This involves a master plan prepared and informed by the design team, in collaboration with clinicians, staff and community. The master plan is a high-level document that identifies the key elements of the hospital, shows the space each service requires and how they best connect and function with each other. It defines and prioritises areas for the new hospital, now and into the future.

This SOHI report outlines the significance of each of the structures or other heritage features or values impacted or potentially impacted by the project, analyses any heritage impact(s) from the proposed works, and provides mitigation measures where appropriate to minimise the overall impact of the proposal on the heritage values of the locally heritage listed Temora Hospital.

The management of heritage places and new development within Temora is controlled by the Local Environment Plan (2010) and Temora Shire Council Development Control Plan (DCP) (2012). This document is informed by the DCP and LEP.

Background historical information provided in this report was mostly obtained through a synthesis of existing heritage listing information and relevant heritage studies.

This Statement of Heritage Impact assesses the potential impact of the proposed works and has been prepared in accordance with the following guidelines:

- *Guidelines for preparing a statement of heritage impact* (Department of Planning and Environment 2023)
- *Assessing heritage significance: Guidelines for assessing places and objects against the Heritage Council of NSW criteria* (Department of Planning and Environment 2023)
- *Australia ICOMOS Burra Charter* (ICOMOS Australia, 2013). The Charter sets the standard of practice for providing advice or making decisions about undertaking works at places of cultural significance, including owners, managers, and custodians (ICOMOS, 2013).

A site visit was carried out by NGH Heritage Consultant, Petra Balanzategui on 18 January 2023, to understand extant items and features within the Site Area, and any adjacent heritage items or conservation areas, if relevant. This report addresses built heritage items or values only. A separate Aboriginal Due Diligence was completed for the Site Area.

*Please note that this SOHI report was originally completed in 2023, prior to the SOHI guideline change. In consideration of the updates to the guidelines, an additional section in section 5 of this document has been added to address the additional aspects to the guidelines.*

## 1.2 Location

The subject land comprises the Temora Hospital and associated buildings within Lot 2 DP572392 at 168–182 Loftus Street, Temora (the Site Area) (Figure 1-1 and Figure 1-2). It is in the Temora Local Government Area (LGA) and is part of the Riverina Region of NSW. The Site Area is

bordered by Loftus Street to the south, Whiddon Residential Care and Gloucester Street to the west, residential development to the north and vacant land to the east.

The Temora Hospital is a 28-bed facility. Temora District Hospital provides emergency, general, surgical, obstetric, pathology and radiology services. Community health services include community nursing, domestic violence counselling, physiotherapy, mental health and transitional aged care. Additional services provided by visiting staff include speech pathology, dietetics, dental and occupational therapy.

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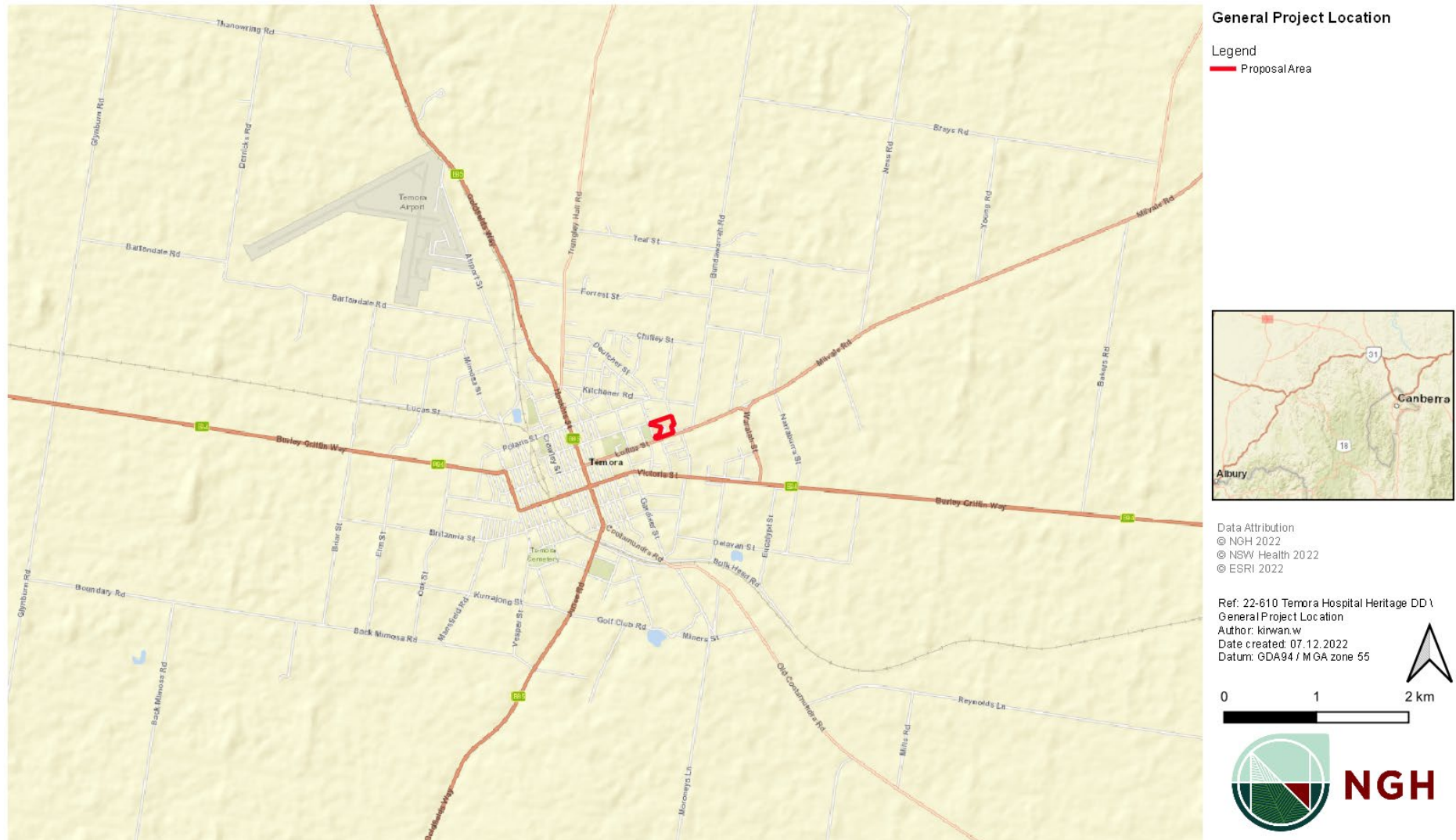


Figure 1-1. General Project Location Map.



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Figure 1-2. Detailed Project Location Map.

### 1.3 Proposal objective and rationale

Following an extensive consultation and master planning process, the existing hospital building and the former nurses' quarters are to be removed and a new hospital building is to be constructed on the site of the existing hospital building.

### 1.4 Purpose

The purpose of this study is to assess the impact of the proposed works on the heritage values of the locally listed (heritage listed) Temora and District Hospital.

Table 1-1. Heritage sites subject to this heritage impact assessment.

Heritage Item	Proximity to the Site Area location	Rationale for inclusion in this report
Temora and District Hospital	The listed curtilage incorporates the entire property.	The Site Area is listed as Item I108 in Schedule 5 of the Temora LEP 2010.

This assessment has been prepared in accordance with the Heritage NSW guidelines: *Guidelines for preparing a statement of heritage impact* (2023) and *Assessing heritage significance: Guidelines for assessing places and objects against the Heritage Council of NSW criteria* (2023), and other relevant guidelines or requirements.

This report includes the following:

- Review of existing heritage assessments and condition of relevant heritage items.
- Searches of national and state heritage databases. This includes the Australian Heritage Database (World, National and Commonwealth Heritage Lists), and the Heritage NSW State Heritage Inventory, State Heritage Register and the relevant Section 170 register.
- Search of the Council LEP and DCP.
- Review of relevant literature.
- Information from the site visit.
- An updated assessment of the heritage significance of the place.
- An analysis of heritage impacts.
- Recommendations.

### 1.5 Report structure

This report:

- Outlines the background of the current study/proposal (Section 1).
- Presents statutory heritage listings and legislative requirements (Section 2).
- Provides an historical and physical overview of the place (Section 3).
- Describes and evaluates the significance of affected items within the heritage place and their tolerance to change (Section 4).

- Provides a description of the proposed works and assesses the potential impacts from the proposal (Section 5).
- Provides recommendations in the context of heritage significance and project requirements (Section 6).

Note, it is outside of the scope of this report to provide a detailed historical account of the area. We have relied upon previous historical information in secondary sources.



## 2. Legislative and non-statutory considerations

Places of heritage value can be subject to different levels of recognition and protection. This protection (at local, state, and national levels) includes specific measures for the protection of heritage items. The text below provides a summary of the legislative framework at each level of government and commentary on relevant listings or otherwise for the project area.

### 2.1 Environment Protection and Biodiversity Conservation Act 1999

The Commonwealth *Environment Protection and Biodiversity Conservation Act 1999* (EPBC Act) provides a legal framework for the protection and management of places of national environmental significance. The heritage lists addressed by the EPBC Act include the United Nations Educational, Scientific and Cultural Organisation (UNESCO) World Heritage List (WHL), National Heritage List (NHL) and the Commonwealth Heritage List (CHL).

All WHL properties in Australia are protected and managed under the EPBC Act. The NHL protects places that have outstanding value to the nation. The CHL protects items and places owned or managed by Commonwealth Government agencies. The Commonwealth Department of Environment and Energy is responsible for the implementation of national policy, programs, and legislation to protect and conserve Australia's environment and heritage. The Minister's approval is required for controlled actions which would have a significant impact on items and places included on the WHL, NHL or CHL.

The Australian Heritage Database (AHD) includes the NHL, which includes the natural, historic and Indigenous places that are of outstanding national heritage value to the Australian nation. The AHD also contains the CHL, which comprises those places on Commonwealth lands and waters, or under Australian Government control, which could have heritage values at the Commonwealth level. Items on both lists are protected under the EPBC Act. The AHD also includes places listed as having World Heritage value by UNESCO. There are no items listed on the WHL, NHL or CHL in the vicinity of the project area.

References to the Register of the National Estate (RNE) were removed from the EPBC Act in 2012. The RNE is no longer a statutory list but remains an archive of information about more than 13,000 places throughout Australia. The RNE includes 4 entries for the area surrounding the project area. These entries, while contributing to the character and built environment of the project area, do not carry statutory weight (unless they are also listed on a separate statutory list). As such they do not necessarily require assessment or consideration in relation to this project.

Table 2-1. Results from search undertaken of the Australian Heritage Database.

Item Name	Status and Listing ID	Location and proximity to the Site Area
Temora Post Office	( <a href="#">Listed Place</a> ) Commonwealth Heritage List 106129	990m south-west of the project area
Boginderra Hills Nature Reserve	( <a href="#">Registered</a> ) Register of the National Estate (Non-statutory archive)	17.25km north-east of the project area

Item Name	Status and Listing ID	Location and proximity to the Site Area
	725	
Ingalba Nature Reserve	( <a href="#">Registered</a> ) Register of the National Estate (Non-statutory archive) 724	8.75km west of the project area
Ingalba Ornithological Area	( <a href="#">Indicative Place</a> ) Register of the National Estate (Non-statutory archive) 103130	8.75km west of the project area
Narraburra Hills Ornithological Area	( <a href="#">Indicative Place</a> ) Register of the National Estate (Non-statutory archive) 103123	11.75km north of the project area

## 2.2 NSW Heritage Act

### 2.2.1 State Heritage Register

Natural, Aboriginal, and built/historic heritage is protected in NSW under the *Heritage Act 1977*. Heritage NSW in the NSW Department of Planning, Industry and Environment is responsible for the administration of the Act.

The Act creates the State Heritage Register (SHR) which provides permanent protection for State Significant heritage items and places. Items of State heritage significance are defined as ‘a place, building, work, relic, moveable object or precinct which is of historical, scientific, cultural, social, archaeological or natural significance to the State’ (Section 4A(1) of the Act). The effect of SHR listing is that a person cannot damage, destroy, alter or move an item, building or land without approval from the Heritage Council of NSW. Information about items included on the SHR can be found in the NSW State Heritage Inventory (SHI), an electronic database of statutory listed heritage places and items in NSW.

The Heritage Council of NSW, constituted under the *Heritage Act 1977*, is appointed by the Minister for Heritage and is responsible for oversight of relevant heritage matters in NSW.

When items are listed on the SHR, most applications to carry out works on those items require Heritage Council approval or exemption under sections 57 or 60 of the Act.

A search of the study area and surrounds confirms one item listed on the SHR in Temora. As the proposed project area is more than 500m away from the State Heritage Register-listed site, it is not impacted by the proposed works at the Temora Hospital site.

Table 2-2. Places listed under the NSW Heritage Act.

Item name	Location and proximity to the Site Area	LGA	SHR listing ID
Temora Railway Station Group	1.4 km west	Temora	01265

### 2.2.2 State agency heritage registers

Under Section 170 of the Heritage Act, State agencies and authorities in NSW are required to keep a register of heritage places for which they are responsible. The s.170 registers are also recorded on the SHI.

The Temora and District Hospital (the subject of this report) is listed on the LEP and the Department of NSW Health Section 170 Heritage and Conservation Register as:

*The hospital occupies a prominent location in the town, has provided excellent medical services for the town and wider district since 1939 in this location replacing the hospital of 1908. The current building retains the stylistic features from the art deco period.*

*The large site includes the following buildings of significance: Hospital building, nurses' home and mortuary. The hospital building is on three levels and is in the international style of the period with distinguishing features such as circular windows and projecting balconies.*

Table 2-3. Locations listed on the State Agency Heritage Register

Item Name	Address	Suburb	LGA	Government body responsible for the heritage site
Temora and District Hospital	Loftus Street	Temora	Temora LGA	NSW Ministry of Health
Temora Railway Station Group	Cootamundra-Griffith Railway	Temora	Temora LGA	TfNSW

## 2.3 NSW Environmental Planning & Assessment Act

The *Environmental Planning & Assessment Act 1979* (EP&A Act) controls land use planning in NSW. The planning system established by the EP&A Act requires that local authorities prepare an LEP and associated DCP under Part 3. These planning instruments include provisions relating to the management and protection of heritage. Each LEP contains a schedule of all known heritage items within an LGA subject to these protections.

### 2.3.1 Temora Shire Council Local Environmental Plan 2010

The Temora Shire Council LEP 2010 identifies and protects heritage conservation areas and listed buildings/items, identifies environmentally sensitive land, and prescribes land use practices.

Heritage items on the LEP are listed and described in Schedule 5. Heritage conservation areas are shown on the Heritage Map as well as being described in Schedule 5.

There are 38 local heritage items in the Temora Shire Council area within 1km of the project area (the Temora and District Hospital site). They are:

Table 2-4. LEP listed heritage items within 1km of the Site Area.

Item name	Location	Proximity to the Site Area	Listing ID	Impacted by proposed works?
Temora and District Hospital	Loftus Street	The Project Location	I108	Yes
Thurles House	156 Anzac Street	240m west	I17	No
Goode House	157 Loftus Street	300m south-west	I80	No
Booralga House	179 Polaris Street	340m north-west	I12	No
Anderson House	175 Kitchener Road	370m north-west	I79	No
House	155 Carson Street	380m south-west	I93	No
Craigendoran House	119 Asquith Street	390m west	I13	No
Matthews House	23 Redmond Street	400m west	I82	No
Temora War Memorials Callaghan Park	Loftus Street	620m west	I52	No
Seventh Day Adventist Church	Polaris Street	740m north-west	I102	No
Temora Public School original building	119 De Boos Street	750m west	I11	No
St Marys Catholic Presbytery	Loftus Street	770m west	I3	No
St Annes original school building	123 De Boos Street	780m west	I4	No
Roman Catholic Church	Loftus Street	790m west	I2	No
St. Josephs Hall	Loftus Street	790m west	I5	No

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*Temora Hospital Redevelopment Project Final v2.2*

Item name	Location	Proximity to the Site Area	Listing ID	Impacted by proposed works?
Rotunda House (former maternity hospital)	De Boos Street	820m west	I95	No
Uniting Church	De Boos Street	830m west	I75	No
Parry House (Former surgery)	145 De Boos Street	840m south-west	I94	No
Temora Fire Station	147 De Boos Street	850m south-west	I10	No
St Andrews Presbyterian Church and hall	De Boos Street	860m west	I6	No
Carlton House	126 De Boos Street	850m south-west	I91	No
Court House	152 De Boos Street	870m south-west	I8	No
Temora Council Chambers	105 Loftus Street	880m west	I109	No
House (Police Lock-up Keepers)	150 De Boos Street	880m south-west	I90	No
House (Police Station)	148 De Boos Street	880m south-west	I89	No
St Pauls Anglican Church	Loftus Street	900m south-west	I55	No
Strand Theatre	157 Hoskins Street	920m west	I39	No
Suttons Motors	149 Hoskins Street	930m west	I32	No
Mortlake House	109 Victoria Street	940m south-west	I14	No
ANZ Bank	165 Hoskins Street	940m west	I30	No
Masonic Hall and Temple	160 De Boos Street	950m south-west	I9	No
Terenge House	107 Victoria Street	950m south-west	I15	No
Thoms Target	175-177 Hoskins Street	960m south-west	I26	No

***Statement of Heritage Impact***  
***Temora Hospital Redevelopment Project Final v2.2***

Item name	Location	Proximity to the Site Area	Listing ID	Impacted by proposed works?
CBC Bank	169 Hoskins Street	960m south-west	I28	No
Temora Ambulance Station	117-119 Hoskins Street	960m west	I34	No
Railway Hotel	134 Hoskins Street	980m west	I33	No
Temora House	172-174 Hoskins Street	990m west	I27	No
Westpac Bank	190 Hoskins Street	1000m south-west	I25	No





Figure 2-1. LEP Heritage Items located near the Temora Hospital.



## **Heritage conservation – LEP Clause 5.10**

Clause 5.10 of the LEP stipulates that heritage is to be conserved and managed. The objectives of subclause 1 are particularly pertinent to this report and are as follows:

- (a) to conserve the environmental heritage of Temora Shire Council*
- (b) to conserve the heritage significance of heritage items and heritage conservation areas, including associated fabric, settings and views*
- (c) to conserve archaeological sites*
- (d) to conserve Aboriginal objects and Aboriginal places of heritage significance*

### **(4) Effect of proposed development on heritage significance**

*The consent authority must, before granting consent under this clause in respect of a heritage item or heritage conservation area, consider the effect of the proposed development on the heritage significance of the item or area concerned. This subclause applies regardless of whether a heritage management document is prepared under subclause (5) or a heritage conservation management plan is submitted under subclause (6).*

### **(5) Heritage assessment**

*The consent authority may, before granting consent to any development:*

- (a) on land on which a heritage item is located, or*
- (b) on land that is within a heritage conservation area, or*
- (c) on land that is within the vicinity of land referred to in paragraph (a) or (b),*

*require a heritage management document to be prepared that assesses the extent to which the carrying out of the proposed development would affect the heritage significance of the heritage item or heritage conservation area concerned.*

The Temora Shire Council LEP is supported by the Temora Shire Council DCP 2012, which provides more detailed standards and controls for specific types of development. The objectives of the Temora Shire Council DCP 2012 are to:

- provide guidance and the relevant development controls to assist with the conservation of individual heritage items within Temora Shire (Heritage items and the Temora Heritage Conservation Area are listed in Schedule 5 of the Temora Local Environmental Plan 2010).

Table 2-5. Relevant sections of the Temora Shire Council DCP 2012.

Section	Objectives	Controls
7.0 Maintenance of a Heritage Item	<ul style="list-style-type: none"> <li>• Ensure roofs are secure and without gaps or broken tiles that will allow water penetration.</li> <li>• Keep trees and branches pruned and clear of roofs and walls.</li> <li>• Ensure roof and site drainage systems are operating efficiently, check condition of gutters, drainpipes and drains regularly and keep clear of debris.</li> <li>• Regular monitoring of walls and cladding for structural soundness and protection from water, wind, dust and vermin.</li> <li>• Weed and prune plants, and repair significant garden structures.</li> <li>• Regularly check and repair broken fencing.</li> <li>• Maintain adequate under floor ventilation.</li> </ul>	<ul style="list-style-type: none"> <li>• Demolition of heritage items is generally not supported.</li> <li>• Contact the Council to arrange a meeting with the Heritage Advisor if you are considering demolition of a heritage item</li> </ul>
7.1 Alterations and additions to heritage items	<ul style="list-style-type: none"> <li>• Protect heritage significance by minimising impacts on the significant elements of heritage items.</li> <li>• Encourage alterations and additions which are sympathetic to the building's significant features and which</li> </ul>	<ul style="list-style-type: none"> <li>• Avoid changes to the front elevation - locate new work to the rear of, or behind the original building section.</li> <li>• Design new work to respect the scale, form, massing and style of the existing building, and not visually dominate the original building.</li> <li>• The original roof line or characteristic roof elements are to remain identifiable and not be dwarfed by the new works.</li> </ul>

Section	Objectives	Controls
	<p>will not compromise heritage significance.</p> <ul style="list-style-type: none"> <li>Ensure that alterations and additions respect the scale, form and massing of the existing building.</li> </ul>	<ul style="list-style-type: none"> <li>Retain chimneys and significant roof elements such as gables and finials where present.</li> <li>Ensure that the new work is recognisable as new, “blending in” with the original building without unnecessarily mimicking or copying.</li> <li>Complement the details and materials of the original roof including ridge height and slopes without compromising the ability to interpret the original form.</li> <li>New materials are to be compatible with the existing finishes. Materials can differentiate new work from original building sections where appropriate, for example by the use of weatherboards where the original building is brick or by the use of “transitional” materials between old and new.</li> <li>Retain front verandahs. Reinstating verandahs and removing intrusive changes is encouraged, particularly where there is physical and/ or historic evidence.</li> </ul>
7.2 Materials, finishes and colours	<ul style="list-style-type: none"> <li>Encourage materials, finishes and colours that are suitable to the period of the building.</li> </ul>	<ul style="list-style-type: none"> <li>Select materials to be compatible, but not necessarily matching the materials of the building. The materials should complement the period and style of the heritage item.</li> <li>Colour schemes are to reflect the period and detail of the property.</li> <li>Painting or rendering face brick is generally not supported.</li> </ul>
7.3 Adaptive reuse of heritage items	<ul style="list-style-type: none"> <li>Encourage heritage items to be used for purposes appropriate to their heritage significance.</li> </ul>	<ul style="list-style-type: none"> <li>The adaptive reuse of a heritage item should minimise alterations or interference with significant fabric. The changes are to enable the continued interpretation of the original use.</li> <li>Ensure that new services are sympathetically installed especially where upgrading is required to satisfy fire or BCA requirements.</li> </ul>

Section	Objectives	Controls
7.4 Development in the vicinity of a heritage item	<ul style="list-style-type: none"> <li>Encourage development in the vicinity of a heritage item to be designed and sited to protect the significance of the heritage item.</li> </ul>	<ul style="list-style-type: none"> <li>The adaptive reuse of a heritage item is to minimise alterations or interference</li> <li>Alterations and additions to the buildings and structure, and new development are to be designed to respect and complement the heritage item in terms of building envelope, proportions, materials, colours, finishes and building street alignment.</li> <li>Development in the vicinity of a heritage item is to minimise the impact on the setting of the item by: <ul style="list-style-type: none"> <li>✓ Providing an adequate area around the heritage item to allow its interpretation.</li> <li>✓ Retaining original or significant landscaping associated with the heritage item.</li> <li>✓ Protecting and allowing the interpretation of archaeological features associated with the heritage item.</li> <li>✓ Retaining and respecting significant views to and from the heritage item.</li> </ul> </li> </ul>

## 2.4 The Burra Charter

The Australia ICOMOS (International Council on Monuments and Site) Charter for the conservation of places of cultural significance (ICOMOS Australia, 2013) sets a standard of practice for those who provide advice, make decisions about, or undertake works to places of cultural significance including owners, managers and custodians. The Charter is not a statutory document but does provide specific guidance for physical and procedural actions that should occur in relation to significant places. A copy of the charter can be accessed at <http://icomos.org/australia>. This SOHI has been prepared in accordance with the principles of the Burra Charter.

An appreciation of landscape is highlighted in the 1999 revision of the Burra Charter of Australia ICOMOS, placing greater emphasis on 'setting'. Article 8 of the Burra Charter now reads:

*"Conservation requires the retention of an appropriate visual setting and other relationships that contribute to the cultural significance of the place. New construction, demolition, intrusions or other changes which would adversely affect the setting or relationships are not appropriate".*

## **3. Historical and physical overview**

### **3.1 Local area**

The Temora region has a long history of intensive agricultural and pastoral use, with the first pastoral station established in 1847 by John Donald McCansh. Gold was discovered in the area in 1869 with gold prospecting intensifying from 1879 with the Temora district proclaimed a gold field in 1880 (Temora Shire Council 2023). During the gold rush, Henry Margules, a German mining registrar and land agent, selected the area which went on to become Temora. Surveyor Adalbert Schleicher, and unofficial town Mayor, August Ludwig Deutscher, also assisted in developing the town (Temora Shire Council, 2023).

During the early 1880s, Temora's population reached around 15,000 with the rapid growth due mostly to the discovery of gold. In 1881, more than 35,000 ounces of gold was mined from the fields, mainly in many small findings. During the gold rush era, Temora's hospitality industry was forced to expand alongside its growing population. However, very few of the town's gold rush hotel buildings survived past the 1920s (Temora Shire Council, 2023).

During the ensuing years Temora became an increasingly important wheat and wool growing centre in the Riverina region, with the construction of railway lines connecting it directly to other towns in the region. When a petition in 1886 called for a train to run from Cootamunda on the Southern Line via the fastest route, it heralded a new era of economic prosperity for Temora's wool growers and farmers. The line became a reality in 1893, and still serves as a freight line to this day (Temora Shire Council, 2023).

During WWII the No. 10 Elementary Flight Training School was established in Temora by the Royal Australian Air Force (RAAF). No. 10 EFTS was the largest and longest established flying school in the Commonwealth throughout WWII and saw more than 10,000 personnel involved in training more than 2,400 pilots. At its peak, the unit contained 97 de Havilland Tiger Moth aircraft, requiring the establishment of a further four satellite airfields around Temora. The Temora Aeroclub is custodian of one of the remaining original Bellman hangars built at Temora airport by the RAAF (Temora Shire Council, 2023).

#### **3.1.1 Temora and District Hospital**

The following summary of historical information for the Temora and District Hospital is taken from the SHI database and is provided here as a concise and comprehensive summary of the history of the hospital:

*Because of the disrepair and condition of the "Old Hospital" in Twynam Street, moves were made to erect a new one on the eastern side of the town. The foundation stone was laid on the 31st August, 1938 by the Hon. H. P. Fitzsimons, M.L.A., the Minister for Health. The new Hospital was completed by the end of 1939, at a cost of 76,000 pounds, and came into use in March, 1940. Originally it was built as a 76 bed hospital, the architect being Mr. Leighton Smith. (It is believed to be a plan originally conceived for Manly). The extensive gardens and tree plantings were planned by Mr. W. A. Reichstein, at the time, Chairman of the Board of Directors. On 27th July, 1926, the Temora District Hospital had been accepted as a Training Hospital for General Student Nurses. On 25th July, 1960 it was accredited as a training hospital for Nursing Aides, the last intake for trainee nurses being in 1979. In 1974, the Home nursing Service commenced, with one sister working out of the Hospital.*

*Exactly fifty eight years to the day after that inaugural meeting had taken place to establish a hospital in Temora, the foundation stone was unveiled 31st August 1938 for Temora's fourth public hospital, it was completed by the end of 1939 at a cost of seventy six thousand pounds and came into use 16th March 1940. Originally it was built as 76 bed hospital, at the time many opponents branded it to be a white elephant that would never be filled.*

*The architect of this so called white elephant was Mr Leighton Irwin, it is believed that the plan for Temora's new hospital was originally conceived for Manly. There is some conjecture that the hospital was built back to front where it now stands, the rounded section of this building on the northern side that once was the Children's ward is thought to have been designed as an entrance. Looking at the aspect of the building one could easily come to this conclusion, however there is no evidence to suggest that this is correct.*

*Mr W.A. Reichstein, a member of the Board of Directors, also at that time the Chairman, took it upon himself and began to design an extensive garden that contained many trees including cedars, gums, wattles, poplars, cypresses, ironbark's and fruit trees, a task made even harder as the hill on which the hospital was constructed was strewn with quartz rock. There were hard clay soils to contend with as well, never the less his plan was realized and the gardens were established. This can do attitude of the Hospital Board of Directors was necessary because upon completion of the new Hospital there was no money left for the furnishings. Therefore it was incumbent on the community to band together and go about the mammoth task of raising the funds to acquire them. It was reported at the time that this was done with great gusto.*

*The new Temora District Hospital was well equipped, with its children's and maternity wards on the ground floor, the female ward (west wing) together with the private ward (east wing) on the first floor, its male ward and later a solarium on the second floor, with an operating theatre, pathology laboratory, X-ray room, casualty department, offices and thirteen person lift, and also boasting a resident doctor's two room flat. With all the dedicated staff and extensions to the eastern wing of the hospital in the late 1950's, then again in the late 1970's. Temora District Hospital grew to have a total of 110 beds. There was at least one occasion when 110 beds proved to be inadequate, the recollections of one of the domestic staff of that time has the matron coming down to the kitchen and instructing them they would have to prepare a few more meals that day, as they had just placed patients beds in the aisles.*

*On 25th July 1960 Temora District Hospital was accredited as a training hospital for nursing aides. This then meant that that there up to twenty nurses for a morning shift, up to ten nurses for the evening shift, and up to seven nurses for the night shift working every day, all of whom were under the strict control of a Matron who lived on the hospital grounds in a flat on the lower floor of the nurses quarters. The Matron then, was virtually on call 24/7, and whenever the Matron was on leave, the senior head sister would take over in her absence. The nurses were given various tasks (some not so pleasant) to perform as part of their training. Occasionally when in the operating theatre they were required to place an arm over a difficult patient who was resisting the anaesthetic being administered to them. The nurse had to hold the patient down with all her weight, until the anaesthetic, (which was ether in those days) would take effect. Sometimes these tasks they were given were not always explained as well as perhaps they should have been. A trainee nurse working in the male ward was sent to prepare a patient for a simple*



appendicectomy. She was told to shave him in readiness for this operation. She did not just shave the abdominal area which was required for this procedure, she went above and beyond, (let's just say beyond), when the hospital gowns were lifted in the operating theatre, there was much discussion and amusement at the man-scaping that had taken place. It is thought that this particular gentleman went on to live a perfectly normal, healthy and happy life, not at all scarred by his close encounter.

There weren't just appendicectomies carried out at Temora District Hospital, there were procedures such as hysterectomies, mastectomies, hernia's, amputations, and countless tonsillectomies, needless to say the doctors and nurses were always kept very busy in maternity delivering the baby boomers of that era. The Hospital was always full, bearing in mind, there were no age care facilities at this time, these facilities came in the middle of 1977 with the completion of Greenstone Lodge, then later again with the completion of Narraburra Lodge. Nurses would arrive in Temora from everywhere, places like Marrickville in Sydney and neighbouring towns like Gundagai, in some cases from overseas, to take up their training at Temora District Hospital. Many stayed on in the Temora District to marry local men and raised their families. With all these dedicated nurses and doctors going about their daily business, the recollections of the nurses that worked at the Temora District Hospital at this time, indicate it was a very enjoyable place to work. Inevitably all good things end, with the last intake for trainee nurses in 1979.

Apart from the many nurses, doctors and administration staff that were required to run the Temora District Hospital smoothly. There were the very important and sometimes forgotten domestic staff. Numbering around twenty three, their job was not just keeping the hospital clean and sterile, theirs were also the cooking and preparing of up to and sometimes over three hundred meals per day, then delivering them to all parts of the hospital, not only catering for the patient's needs, the staff as well, and there were all those very necessary cups of tea. Also part of their duties was cleaning of the matron's flat along with the nurse's quarters. This in itself was quite a task, as there were up to forty nurses living there, many of whom had to sleep on the louvered veranda. Sleeping space was at a premium back then. When nurses went on holiday they were required to clear out their rooms to make way for other nurses, or just to get nurses off the cold veranda in the winter months.

There was an old house that originally stood on the block of land before the hospital was built, it was located to the east, near where the rear car park for nurses is now situated. The old house was renovated, and divided up into small rooms, it then became the Sister's quarters. This also had to be kept clean and tidy by the domestic staff.

There was a laundering facility at the Temora District Hospital, washing all the linen, bed covers, towels, and surgical gowns, anything that was soiled in the day to day procedures of a very busy hospital. There were several maintenance men, a painter, electrician, plumber and carpenter to take care of any repairs, or general maintenance that was required. The hospital had to be in top working order and kept running efficiently. There was also a large amount of gardening too. There was a full time gofer, his correct job title is unclear, however his job was to simply run errands, deliver massages, take scripts down town to the chemists, then return with the much needed drugs, or any other requirements of the hospital from down town. Apparently he carried out these errands by push bike, up and down the hill several times a day, with just a hessian bag strapped over his shoulder to carry his freight.



*There were engineering staff whose job it was to operate the boiler. The wood fired (tubed type) boiler of that time was a very essential part of the day to day running of the Temora District Hospital. It was necessary for the central heating system of the entire hospital. Also there was a smaller boiler at the ready just in case there were any issues, or maintenance requirements of the main boiler. Hot water with a special chemical added to prevent oxidisation was pumped through an elaborate plumbing system to the numerous radiators placed throughout the hospital. Throughout the colder months of the year the boiler would be manned by three shifts twenty four hours per day, there were two shifts during the warmer months. The heat generated by the boiler was also used by the steam cookers in the kitchen, and to heat the dryers in the laundry, as well as a hot water supply for the showers and bathrooms of the hospital. The heat was also used for the sterilization of surgical instruments and equipment which were used in the operating theatre.*

*The hunger for wood by this boiler was insatiable, consuming up to one and a half tons in an eight hour shift. It was the responsibility of numerous contractors over the years to keep a steady supply of wood to the Temora District Hospital, the last of these contractors was Ken Smith, who recalls that he alone had delivered approximately ten thousand imperial tons. At a maximum length of six feet and with the preferred length of five feet averaging five loads per fortnight, two long stock piles of wood appeared and grew so big it could have been said they were a landmark feature in themselves. Two rows were necessary as dry wood had become very hard to find due to the appetite of this boiler. One row was continually added to with green wood, while it was drying, the other row of seasoned wood supplied the boiler. Green wood weighs a bit heavier than when it has seasoned. For example ten tons of green wood once seasoned will weigh approximately eight tons, with the princely sum of two pounds six shillings and eight pence on offer per ton, green wood proved to be quite a financial windfall for these wood carting contractors. However the hospital board were well aware of the unavailability of dry seasoned wood, and were happy to pay for this tonnage shortfall, it was very necessary have a large stock pile of wood in reserve due to the importance that this boiler played in the day to day running of the Temora District Hospital. The stock piles of wood were gradually allowed to run down and from 1975 through to 1978 there was a gradual transition from wood fired heating, to a diesel fired system of heating for the boiler.*

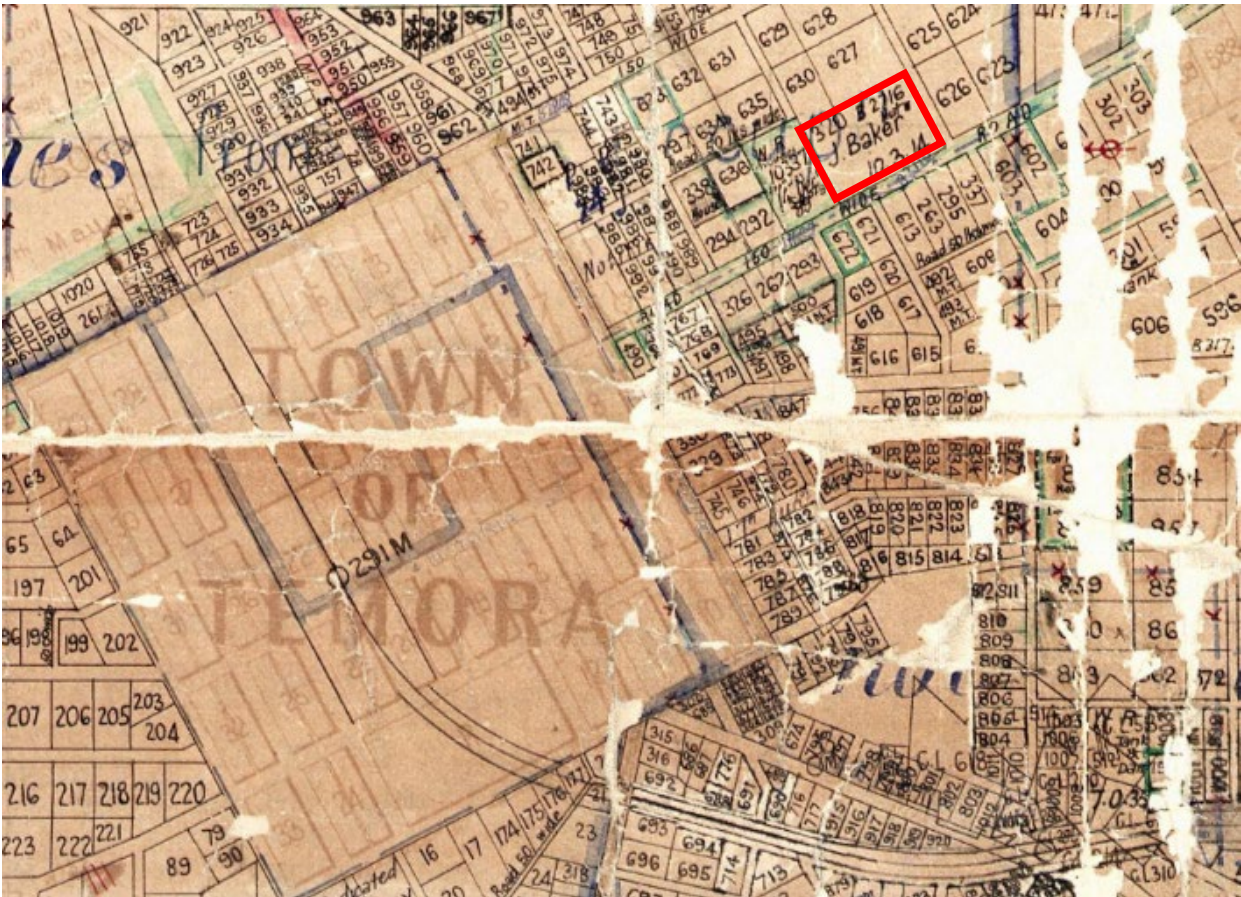


Figure 3-1. Historic Parish Map from 1891 with the approximate location of the Site Area outlined in red and labelled with the name J. Baker (NSW Land Registry Services).



Figure 3-2. 1940 view from Loftus St showing a gravelled Gloucester Street and gardens in the foreground, together with the newly constructed hospital and nurses' quarters in the background (NSW Government, 2017).





Figure 3-3. View looking toward Gloucester Street showing the rounded children's ward ground floor, with resident Doctors two room flat second floor next to lift tower (NSW Government, 2017).



Figure 3-4. View showing one of two stockpiles of wood for the boiler in the foreground with fruit trees and hospital in the background (NSW Government, 2017).



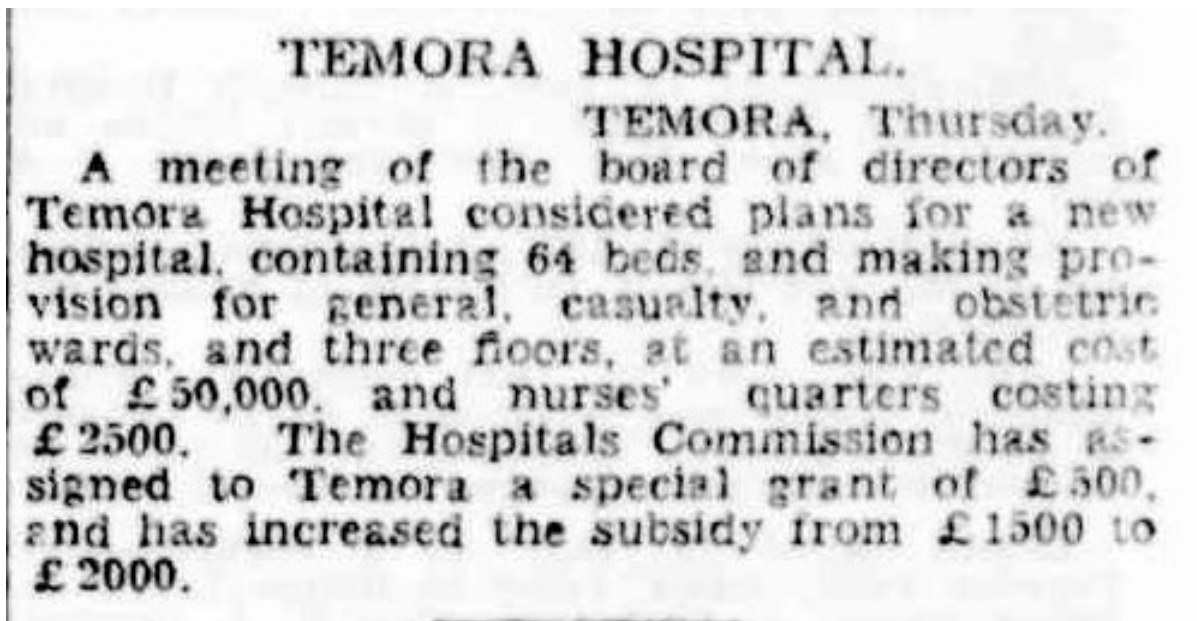


Figure 3-5. Article from the Sydney Morning on Friday 16 April 1937.



Figure 3-6. Article in the West Wyalong Advocate on Monday 20 December 1948.



Figure 3-7. Historic aerial imagery from 1961.



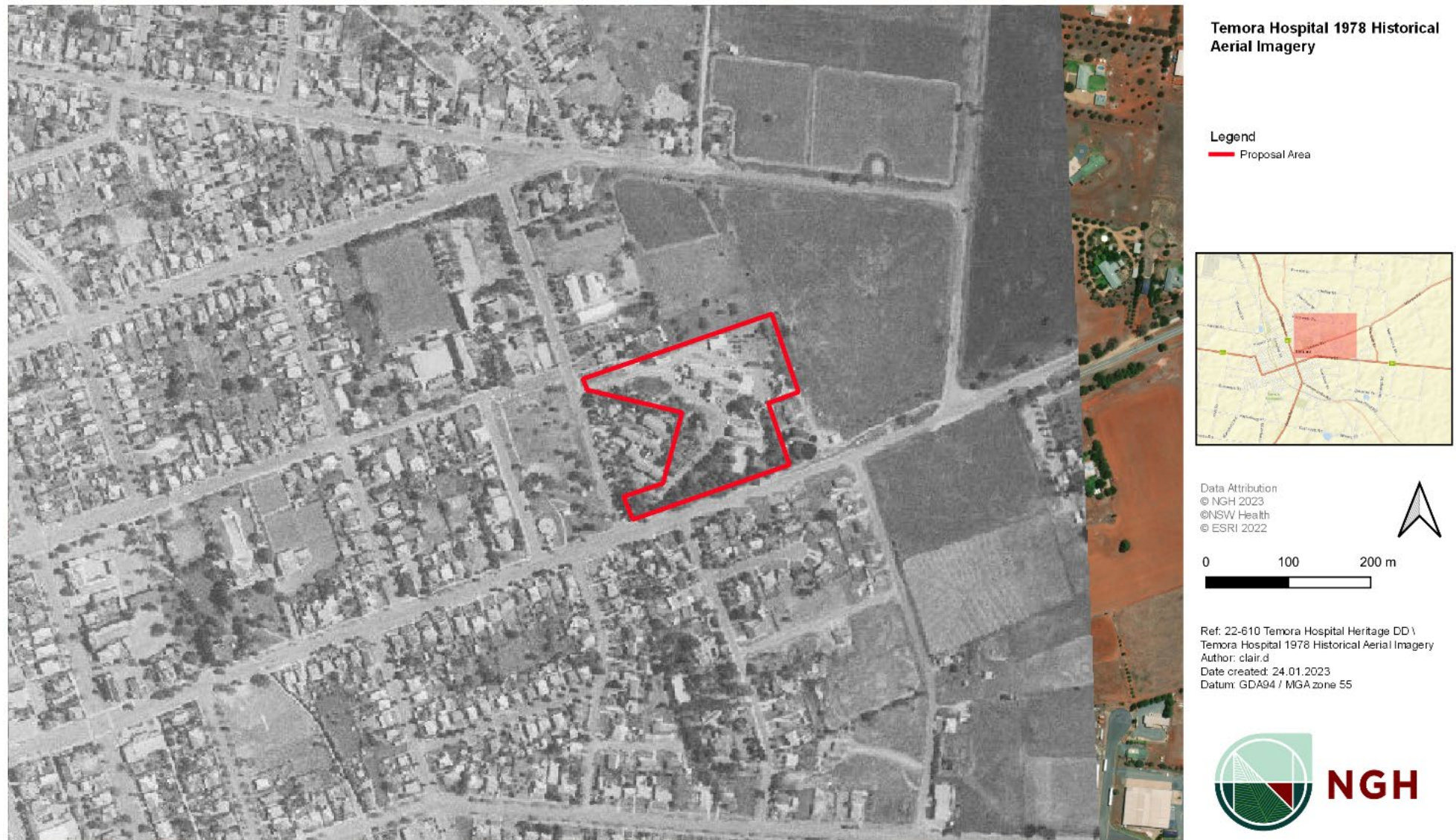


Figure 3-8. Historic aerial imagery from 1978.





Figure 3-9. Historic aerial imagery from 1997.



## 3.2 Site visit

- A site visit was completed by Senior Heritage Consultant Petra Balanzategui on 18 January 2023 to ascertain the existing physical aspects of the site.
- The Temora Hospital and its associated buildings and garden were examined during the site visit to help understand their significance and to understand the setting and physical 'relationships' between the main hospital building, ancillary buildings, gardens and other features within the heritage listed area.
- Interior photographs were taken of the former nurses' station and the nurses' quarters.

The tunnel under the hospital no longer in use and was not accessible.



Plate 3-1. Entrance to the property with 1980s addition of administrative block and pathology department



Plate 3-2. Entrance to the hospital with carpark. View to north east



Plate 3-3. The rear of the hospital. View to south



Plate 3-4. Circular projecting balcony at rear of hospital. View to west





Plate 3-5. The rear of the hospital. View to south east



Plate 3-6. The western end of the nurses' quarters. View to east



Plate 3-7. The eastern end of the main building. View to north



Plate 3-8. The eastern end of the main building. View to west

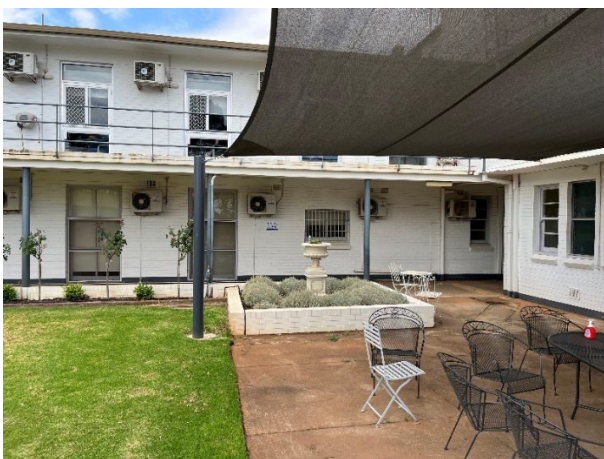


Plate 3-9. Covered lunch area to the east and rear of the main entrance. View to south



Plate 3-10. View from the main entrance to the east





Plate 3-11. The western end of the main building. View to south



Plate 3-12. The western end of the main building. View to east



Plate 3-13. Driveway leading to emergency department and entrance of hospital. View to north west



Plate 3-14. Small building at the rear of the hospital. View to north west



Plate 3-15. The Nurses Quarters. View to south



Plate 3-16. The Nurses Quarters. View to south east



Plate 3-17. The rear of the Nurses Quarters. View to north east



Plate 3-18. Close up of ground floor of Nurses Quarters. View to south





Plate 3-19. Pergola which was constructed in 2021. View to west



Plate 3-20. Daycare Centre at rear of hospital. View to south



Plate 3-21. Daycare Centre



Plate 3-22. Detail of railing on Daycare Centre



Plate 3-23. Small set of donated iron gates between the main hospital building and the nurses quarters building. View to north west

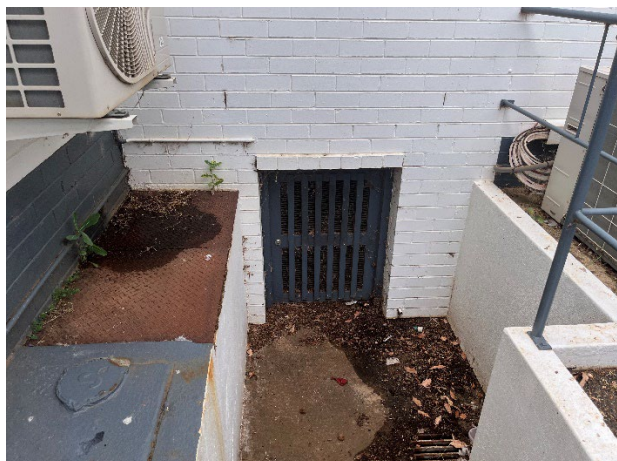


Plate 3-24. Tunnel beneath building that is no longer in use





Plate 3-25. Interior feature



Plate 3-26. Central staircase



Plate 3-27. Level 2 former administration window or nurses station



Plate 3-28. Ward 201



Plate 3-29. Example of extant original or early flooring



Plate 3-30. Internal door feature





Plate 3-31. Ward 7



Plate 3-32. Example of hospital room



Plate 3-33. Former nurses station now being used as storage



Plate 3-34. Example of internal room



Plate 3-35. Former children's ward now being used as a communal area

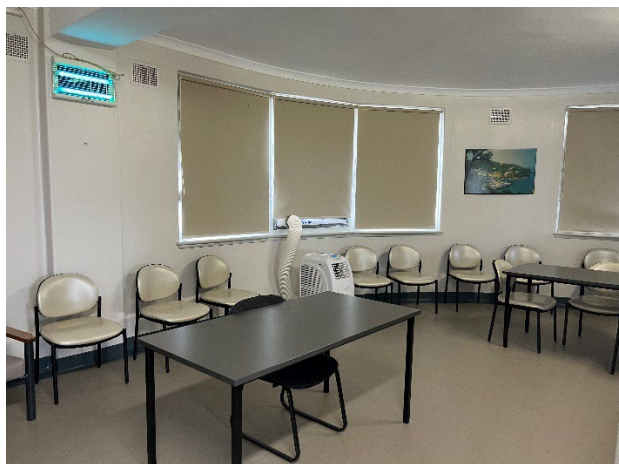


Plate 3-36. Former children's ward now being used as a communal area





Plate 3-37. Bathroom



Plate 3-38. Bathroom and laundry



Plate 3-39. Stairs at entrance area of nurses quarters



Plate 3-40. Significant building fabric: timber doors





Plate 3-41. Original bifold doors in communal area. The kitchen has renovated with modern fittings, date unknown



Plate 3-42. Storage cupboard



Plate 3-43. Loungeroom in nurses' quarters



Plate 3-44. Loungeroom and kitchen in nurses' quarters



Plate 3-45. Renovated hallway on ground level of nurses' quarters



Plate 3-46. Internal space

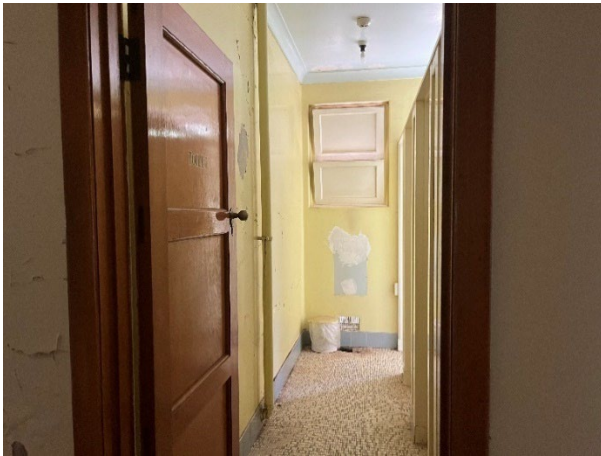


Plate 3-47. Bathroom on second floor of building



Plate 3-48. Enclosed veranda on second level of Nurses Quarters





Plate 3-49. Nurses quarters on second level of building which are no longer in use



Plate 3-50. One of the many former bedrooms on the second floor of building



Plate 3-51. Bathroom on second floor of building



Plate 3-52. Light switch on second floor of building

### 3.3 Condition grading of the buildings

The following table (Table 3-1) outlines the general criteria applied when grading the general condition of relevant buildings within the heritage curtilage. This is followed by NGH's assessed grading for each building (Table 3-2). It should be noted that the assessment undertaken was visual only and does not include any form of structural or detailed assessment. Further and more detailed analysis of the condition of different elements may be applied later when the nature of works or interventions to any or all buildings is known. If required, an engineering assessment may



be required to determine the structural stability of some or all buildings. This assessment is a ‘high level’ summary that will inform master planning for the hospital site.

Table 3-1. Condition grading of buildings.

Condition	Definition as utilised by NGH in this report
Excellent	The building is in almost original condition and shows no signs of deterioration.
Good	The building only shows minor signs of deterioration and would require only minor works to restore the structure.
Fair	The building only shows moderate signs of deterioration and would require works to restore the structure.
Poor	The building has sustained significant damage and includes major areas of deterioration. The building may display areas of potential structural issues.
Safety hazard	The building appears to represent a significant safety hazard and cannot be entered/approached without significant risk of collapse.

Table 3-2. Assessed condition of buildings (January 2023).

Location	Assessed condition of the building at NGH site visit
Main hospital building	Good
Nurses Quarters	Good
Daycare centre	Good

### 3.4 Gradings of significance

The following table is taken from the NSW Heritage Office publication *Assessing Heritage Significance* (2001). It provides a standard framework for assessment of heritage places. For this report the framework is used to understand the relative significance of different elements within the hospital site.

Table 3-3. Gradings of significance outlined in the NSW Heritage Office publication *Assessing Heritage Significance* (2001).

Grading	Justification	Status
Exceptional	Rare or outstanding element directly contributing to an item's local and State significance	Fulfil criteria for local or State listing
High	High degree of original fabric. Demonstrates a key element of the item's significance. Alterations do not detract from significance.	Fulfil criteria for local or State listing.

Grading	Justification	Status
Moderate	Altered or modified elements. Elements with little heritage value, but which contribute to the overall significance of the item.	Fulfil criteria for local or State listing.
Little	Alterations detract from significance. Difficult to interpret	Does not fulfil criteria for local or State listing
Intrusive	Damaging to the item's heritage significance.	Does not fulfil criteria for local or State listing.

The brief assessment of the grading of the Temora Hospital includes:

Table 3-4. Gradings of significance for the Temora Hospital, in accordance with the NSW Heritage Office publication *Assessing Heritage Significance* (2001).

Elements of the structure	Grading	Justification
Hospital Building	Moderate	The main hospital building is a significant example of an interwar International Style regional hospital building. The building has been altered in the second half of the 20 <sup>th</sup> century, with some alterations (such as the pathology building and air condition units) being intrusive changes to the original 1939 building. While some later changes to the building detract from its significance, overall, the main hospital building retains a "Moderate" grading.
Nurses Quarters	Little	The Nurses Quarters is an example of an earlier residence that has been relocated and converted for a new use as a separate ancillary building to the main hospital. The Nurses Quarters has some historical significance for its former use but has been heavily modified and has little aesthetic significance.
Gardens	High	The hospital grounds and gardens are associated with the early development and landscaping of the hospital grounds in the early to mid-20 <sup>th</sup> century, with later additions.
Daycare centre	Little	This is a modern c1980s or later brick ancillary building with little or negligible heritage significance.

### **3.5 Consultation with Council regarding the project**

NGH has been provided a brief summary of the heritage consultation for the project that has been undertaken with Temora Council.

On the 16 February 2024, a meeting was held between the Temora Council Heritage Advisor and the project team for the Temora Health Service Redevelopment in order to discuss the heritage impact of the proposed redevelopment of the Temora and District Hospital.

Temora Council were presented with the proposed redevelopment plans via a presentation and were provided the opportunity to comment on the designs. Generally, the meeting was positive and the inclusion of the existing north-facing ground floor curved wall into the design for the staff courtyard was well received by Council. Council requested that a modification to the design include retaining the current roof, balustrade and windows of the curved room.

HDR (the project architects) investigated this request and made a determination that this outcome was not possible with the new hospital design. The retention of these elements could not easily or sympathetically be integrated with the new building, and in addition the roof would need to be removed (which is integrated with the concrete window heads) as it is currently unstable and lined with bonded asbestos for waterproofing.

No further response on the issue has been received from Council and no further meetings in regards to heritage of the site have occurred or are planned to occur.

## 4. Heritage significance

### 4.1 Introduction

‘Heritage significance’ is a term used to describe the inherent cultural and historical value of an item. Significance may be contained within the fabric of a building or other place, in its setting and its relationship with other nearby items.

The main aim in assessing significance is to produce a succinct statement of significance, which summarises an item’s heritage values. The statement is the basis for policies and management structures that will affect the item’s future (Department of Planning and Environment 2023b).

The NSW Heritage Division recommends assessment of heritage items in a number of situations, which include:

- Making decisions about whether to retain an item.
- Considering changes to an item.
- Preparing a heritage study.
- Preparing a conservation management plan.
- Considering an item for listing on the State Heritage Register or on the schedule of heritage items in a local environmental plan, or.
- Preparing a statement of environmental effects or a heritage impact statement as part of the development and building approval process.

The following assessment of significance is based on the NSW heritage assessment criteria. The criteria encompass the four values in the Australia ICOMOS Burra Charter (2013), which are commonly accepted as generic values by Australian heritage agencies and professional consultants:

- Historical significance.
- Aesthetic significance.
- Scientific significance.
- Social significance.

The above are expressed as criteria in a more detailed form than this to:

- Maintain consistency with the criteria of other Australian heritage agencies.
- Minimise ambiguity during the assessment process.
- Avoid the legal misinterpretation of the completed assessments of listed items.

### 4.2 Heritage assessment criteria

#### **Assessments of Significance**

In order to undertake an assessment of an item against the NSW heritage assessment criteria, the guidelines recommend that the following steps be undertaken:

- Summarise what is known about the place or object;
- Describe the evolution and details of the place or object, its previous and current uses, its associations with individuals or groups and its meaning for those people;

- Conduct a comparative analysis of the place or object against similar ones;
- Assess the significance using the criteria;
- Consider the integrity and condition of the place or object;
- Determine the place or object's level of heritage significance;
- Prepare a succinct statement of heritage significance;
- Get feedback; and
- Write up information

The seven NSW Heritage Significance criteria listed below outline the potential categories of significance an item may be listed within (Department of Planning and Environment 2023b).

#### **4.2.1 Criterion (a) – Historical:**

**An item is important in the course, or pattern, of NSW's cultural or natural history (or the cultural or natural history of the local area)**

<b>Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (a)</b>	
<b>A place or object is important in the course or pattern of an area's history if it:</b>	
<ul style="list-style-type: none"> <li>• is the product of</li> <li>• is an example of</li> <li>• was influenced by</li> <li>• has influenced</li> <li>• is associated with</li> <li>• has a symbolic association with</li> <li>• something that has made a strong contribution to the course or pattern of development of our culture, society or environment.</li> </ul>	
<b>Places or objects that meet criterion (a) might include:</b>	
<ul style="list-style-type: none"> <li>• those that demonstrate strong associations with past customs, cultural practices, philosophies or systems of government, regardless of the intactness of the place or any structure on the place</li> <li>• those that are associated with significant historical events, regardless of the intactness of the place or any structure on the place</li> <li>• cultural landscapes and other evidence demonstrating overlays of the continual pattern of human use and occupation where the physical fabric (above or below ground) demonstrates any of the points described above.</li> </ul>	

#### **4.2.2 Criterion (b) – Associative:**

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



### **Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (b)**

#### **Guidelines for inclusion:**

- A place or object has special associational value if it is associated with a person, organisation or group of people who have made an important or notable contribution to the course, pattern and development of our cultural and/or physical environment. In this context, special association may relate not only to the 'great' and well known, but also to the influential, the exemplary, and the innovative.

#### **Places or objects that meet criterion (b) might include:**

- demonstrate strong associations with a particular event, historical theme, people, or philosophies and ideologies
- are associated with significant historical events, regardless of the intactness of the place or any structure on the place.

### **4.2.3 Criterion (c) - Aesthetic/Technical**

***An item is important in demonstrating aesthetic characteristics and/or a high degree of creative or technical achievement in NSW (or the local area)***

### **Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (c)**

#### **Guidelines for inclusion:**

A place or object is important because of its aesthetic significance if that place or object exhibits sensual qualities that can be judged to be of significance against various ideals including beauty, picturesqueness, evocativeness, expressiveness, landmark presence, streetscape contribution, symbolism or some other quality of nature or human endeavour.

Alternatively, a place is important in demonstrating a high degree of creative or technical achievement at a particular period if that place illustrates artistic or technical excellence, innovation, accomplishment, extension or creative adaptation in a variety of fields of human endeavour including but not exclusive to art, engineering, architecture, industrial or scientific design, landscape design, construction, manufacture, and craftsmanship or some other technical field.

#### **Places or objects that meet criterion (c) might include:**

- demonstrate creative or technical excellence, innovation or achievement
- demonstrate aspirations, tastes and fashions
- have been the inspiration for creative or technical achievement
- demonstrate distinctive aesthetic attributes in form or composition
- demonstrate a highly original and influential style, such as an important early (or seminal) work of a major architect

#### **Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (c)**

- are an archaeological resource
- demonstrate the culmination of a particular architectural style (known as climactic).

#### **4.2.4 Criterion (d) – Social:**

***An item has strong or special association with a particular community or cultural group in NSW (or the local area) for social, cultural or spiritual reasons***

#### **Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (d)**

##### **Guidelines for inclusion:**

A place or object is important for its strong or special association with a particular community or cultural group. This could be for social, cultural or spiritual reasons that have a perceived meaning or symbolic, spiritual or moral value that is important to them and which generates a strong sense of attachment.

Alternatively, a place is important when the community exhibits strong or special feelings or attaches community identity to it, or the community gathers especially for spiritual reasons, recreation or resort.

The place or object may be Aboriginal or non-Aboriginal or a natural environment. The natural place or object does not have to be a built/constructed/modified (culturally created) place and could be in an unmodified natural form or format.

##### **Places or objects that meet criterion (d) might include:**

- are esteemed by the community for their cultural values such as places that support cultural traditions or practices
- are considered sacred and/or if damaged or destroyed would cause the community a sense of loss
- contribute to a community's sense of identity such as places of reverence and worship.

#### **4.2.5 Criterion (e) - Research**

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

#### **Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (e)**

##### **Guidelines for inclusion:**

A place or object has potential to yield information that will contribute to an understanding of an area's history if it can be demonstrated that with further examination or research, it may reveal

**Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (e)**

information that will contribute to our understanding of our past.

The potential to contribute to our understanding of the past may be found in archaeological deposits, complexes, buildings and structures, gardens and plantings.

**Places or objects that meet criterion (e) might include:**

- have the potential to yield new or further substantial information (such as scientific, archaeological, architectural)
- are an important benchmark or reference site, place or type
- contribute evidence to our understanding of past natural and cultural patterns, development or activity that is unavailable elsewhere.

#### **4.2.6 Criterion (f) - Rarity**

***An item possesses uncommon, rare or endangered aspects of NSW's cultural or natural history (or the cultural or natural history of the local area)***

**Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (f)**

**Guidelines for inclusion:**

A place or object demonstrates rare, uncommon or endangered aspects of an area's cultural or natural heritage. The place or object illustrates past human activities or achievements that are at risk of being lost, and/or are of exceptional interest. Past human activities and achievements can include a way of life, custom, process, function, land use, design or some other activity or achievement that is no longer practised.

**Places or objects that meet criterion (f) might include:**

- provide evidence of a defunct custom, way of life or process
- are the only example of their type demonstrate designs or techniques of exceptional interest
- show rare evidence of a significant human activity important to a community.

#### **4.2.7 Criterion (g) – Representative:**

***An item is important in demonstrating the principal characteristics of a class of NSW's cultural or natural places; or cultural or natural environments. (or a class of the local areas)***

##### **Guidelines for the inclusion or exclusion of an item as being of state or local heritage significance against criterion (g)**

**A place or object is important in demonstrating the principal characteristics of a particular class of cultural or natural places or objects if it displays:**

- the defining features, qualities or attributes of a type
- variation within a type
- evolution of a type
- transition of a type

and where the type or class of cultural or natural places illustrates a range of human or environmental activities including:

- a way of life
- a custom
- an ideology or philosophy
- a process
- a land use
- a function
- a form
- a design
- a style
- a technique
- some other activity or achievement.

##### **Places or objects that meet criterion (g) might include:**

- demonstrate the stages of development of a class of cultural places, including experimentation
- are recognised as an example of a type, style, taxonomic group, etc.
- demonstrate land-use influence on the geographical, financial, etc. development of an area
- demonstrate in their fabric the impact of an ideology, value or philosophy or association with a custom
- include complexes where more than one building or structure survives, demonstrating a way of life, often with associated furniture, fittings and other objects.

## 4.3 Heritage assessment

In this section, the Temora Hospital is assessed against the seven NSW Heritage Significance criteria listed in Section 4.2.

### 4.3.1 Temora Hospital

For the purposes of this report, it is confirmed that the Temora and District hospital site has been assessed previously and is already heritage listed as a local heritage item. Key considerations for this report are to understand why individual elements within the site and the site are significant, and to understand the ‘tolerance’ of individual elements (buildings, structures, areas, setting, landscape features) to change. In other words, this report confirms the original heritage listing of the place and focuses on the relative significance of different buildings and features, within the context of minimising heritage impacts to the heritage values of the place, while accommodating necessary change to allow new health infrastructure. Change in this context is the redevelopment of the site for a modern hospital building or buildings. Therefore, the objective of the project is to improve health facilities and services at the site while addressing heritage significance/constraints, and, where possible, to retain the heritage values of the place and avoid or minimise impacts to the heritage significance of the place.

## 4.4 Statement of significance

### 4.4.1 Temora & District Hospital

The following statement of cultural (heritage) significance is taken from the SHI NSW Heritage (2017) listing for the Temora and District Hospital:

*The hospital occupies a prominent location in the town, has provided excellent medical services for the town and wider district since 1939 in this location replacing the hospital of 1908. The current building retains the stylistic features from the art deco period. #4701905 on Australian Institute of Architects (NSW) registry listing.*

The following table provides an updated assessment of the Temora & District Hospital based on NGH’s site visit and from documentary research conducted by NGH. The information in table 4.1 does not replace the statement of significance above, but rather provides additional information to help understand the significance of the place and any impacts resulting from the hospital redevelopment project.

Table 4-1. Assessment against the seven NSW Heritage Significance criteria.

NSW Heritage Significance criteria	Assessment of significance	Meets/Does not meet criterion at a State or Local level of significance
(a) Historical	The Temora & District Hospital site has historical significance as the central location for health services in Temora since the early 20 <sup>th</sup> century: represented primarily by the 1930s Interwar, International style regional hospital building, by extant memorial and other plantings/landscaping,	<i>Main hospital building: Meets criterion (a) at a local level.</i> <i>Setting/formal landscaping &amp; plantings:</i>

NSW Heritage Significance criteria	Assessment of significance	Meets/Does not meet criterion at a State or Local level of significance
	and by extant ancillary buildings, including the nurses' quarters. While all extant buildings and features (including later extensions to the main hospital) reveal the development of the site for health services over different periods, the most significant items are the original 1939 hospital building and the setting (the hospital grounds).	<p><i>Meets criterion (a) at a local level.</i></p> <p><i>Nurses quarters: Meets criterion (a) at a local level.</i></p> <p><i>c1980s childcare centre: does not meet criterion (a) at a local level.</i></p> <p><i>Pathology building (addition to main building): INTRUSIVE/does not meet criterion (a) at a local level.</i></p>
(b) Associative	The Temora & District Hospital is associated with notable local health practitioners and with notable 20 <sup>th</sup> century champions for the development of a new hospital at the current site.	<i>The main hospital building and formal landscaping features/plantings, meet criterion (b) at a local level.</i>
(c) Aesthetic /Technical	The Temora & District Hospital has aesthetic/technical significance as a 1930s Interwar, International-style purpose built regional hospital, including design features that are both functional for hospital services and have some aesthetic significance. While post World War 2 additions to the building are generally sympathetic to the original building in scale and reveal changes to the hospital since its opening in 1939, the additions have lower significance than the original building and, in the case of the pathology addition, are intrusive.	<p><i>The main hospital building meets criterion (c) at a local level.</i></p> <p><i>The nurses' quarters meets criterion (c) at a local level.</i></p> <p><i>Pathology building (addition to main building): INTRUSIVE/does not meet criterion (a) at a local level.</i></p> <p><i>c1980s childcare centre: does not meet criterion (a) at a local level.</i></p>
(d) Social	The Temora & District Hospital has social significance as the main location for local health services (for patients and healthcare practitioners/staff) for more than a century, including hospital services in the hospital building for more than eighty years. It is likely that many citizens of Temora and district worked in, were born at, or otherwise have close associations with	<i>The main hospital building has some social significance, particularly as the public face of the hospital.</i>



NSW Heritage Significance criteria	Assessment of significance	Meets/Does not meet criterion at a State or Local level of significance
	the hospital.	
(e) Research	The Temora and District Hospital is assessed as not revealing any notable research value.	<i>The hospital site in its entirety does not meet criterion (f) at a local/state level.</i>
(f) Rarity	The Temora and District Hospital is assessed as not containing, revealing, or representing any notable rarity values.	<i>The hospital site in its entirety does not meet criterion (f) at a local/state level.</i>
(g) Representative	The Temora and District Hospital is a good representative example of an Interwar era International-style regional hospital building.	<i>The main hospital building, and its setting meets criterion (g) at a local level.</i>

#### 4.4.2 Summary statement of cultural significance

The Temora & District Hospital site is a good representative example of an Interwar era International-style regional hospital building and has historical significance as the central location for health services in Temora since the early 20<sup>th</sup> century: represented primarily by the 1930s hospital building and by extant memorial and other plantings/landscaping, and by extant ancillary buildings, including the nurses' quarters. The Temora & District Hospital has aesthetic/technical significance as a 1930s Interwar, International-style purpose built regional hospital, including design features that are both functional for hospital services and have some aesthetic significance. The Temora and District Hospital is a good representative example of a 1930s-1940s era regional hospital building in a formal landscape setting.

## **5. Impact assessment**

### **5.1 Proposed development**

The proposed works for the Site Area are as follows:

- Demolition of the existing hospital building, nurses' quarters and associated buildings, and new build on the existing site. The new building is proposed to retain the 'Hospital on the Hill' and landscape garden qualities of the site as well as a key curved ground floor wall.
- Construction of roads, driveways, and pedestrian pathways within and surrounding the hospital.
- Construction of additional carpark, and hydraulic, ICT, fire, and electrical services.


A full set of architectural drawings for the proposed redesign are attached in Appendix B of this report.

Figure 5-1 and Figure 5-2 below outline the proposed new hospital building and the proposed retention of the ground floor curved wall for use as a staff courtyard.

The proposed demolition and redesign of the hospital building aims to take into account the service needs of the community for medical services, whilst acknowledging the history and significance of the 'hospital on the hill'.

Whilst the main hospital building is proposed to be demolished, a key design element of the building (the curved ground floor wall) will be retained and utilised in the new building, and the hospital grounds and landscaped gardens will be retained and expanded in reference to the significance of these elements of the site.

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NOT SCALE DRAWINGS MANUALLY OR ELECTRONICALLY.



TREE PROTECTION ZONE FOR  
HIGHER RETENTION VALUE TREES

REV	DESCRIPTION OF CHANGE	DATE	CHECKED	ISSUED
0	PRELIMINARY	1/1/03	ADR	
1	PRELIMINARY	1/1/03	ADR	
2	FOR INFORMATION	1/1/03	ADR	
3	FOR INFORMATION	2/1/03	ADR	
4	FOR INFORMATION	1/1/04	ADR	
5	PRELIMINARY	7/1/04	ADR	

**LEGEND**

- SITE BOUNDARY
- LOT BOUNDARY
- PROPOSED HOSPITAL BUILDING - ROOF
- PROPOSED GARAGE / DRIVEWAYS / WALKWAYS
- EXISTING GARAGE / DRIVEWAYS / WALKWAYS
- TREES RETAINED
- PROPOSED TREES
- PROPOSED LANDSCAPE AREAS
- TREE PROTECTION ZONE FOR HIGHER RETENTION VALUE TREES



NSW Health Infrastructure

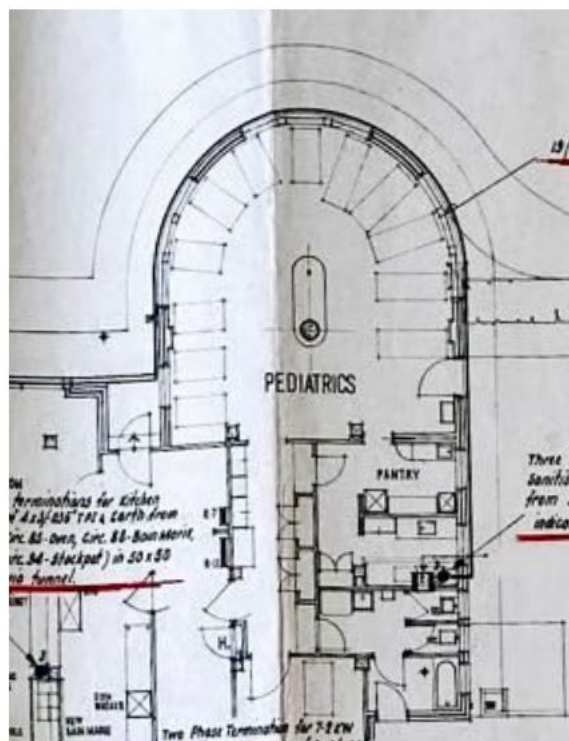
PROJECT  
TEMORA HOSPITAL  
REDEVELOPMENT  
TEMORA NSW 2666

**SITE PLAN - PROPOSED**

SCALE	PROJECT NUMBER
1:500 @ A1	130908
DRAWING NUMBER	ISSUE
130908-HDR-AR-DWG-1301	5
PROJECT STATUS	
PRELIMINARY	

| 52





Floor plan from previous renovation works. Date Unknown.



Paediatrics wing in foreground.



Staff courtyard concept.

Figure 5-2. Proposed integration of existing ground floor curved wall into design of new hospital building.

## 5.2 Relevant DCP controls

The following table (Table 5-1) outlines relevant DCP controls with commentary on the design and development phase of the project. Note: this is general information on pertinent heritage controls within the DCP but is not planning advice. Council must be consulted for more detailed information.

Table 5-1. Objectives and controls in the Temora Council DCP relating to the Project Area.

DCP Section	Control	Comments/key considerations
7.0 Maintenance of a Heritage Item	<ul style="list-style-type: none"> <li>Demolition of heritage items is generally not supported.</li> <li>Contact the Council to arrange a meeting with the Heritage Advisor if you are considering demolition of a heritage item.</li> </ul>	<ul style="list-style-type: none"> <li>Consultation has been undertaken with Temora Council (Section 3.5 of this report).</li> <li>NSW Health Infrastructure identified that retention of the existing building would not be possible due to modern standards and requirements in a hospital building. In recognition of the aesthetic significance associated with the current Interwar Hospital building it was identified that a ground floor curved wall could be maintained and integrated into a staff courtyard in the new building concept.</li> <li>Reception from Council regarding the retention of the curved wall was positive.</li> </ul>
7.1 Alterations and additions to heritage items	<ul style="list-style-type: none"> <li>Avoid changes to the front elevation - locate new work to the rear of, or behind the original building section.</li> <li>Design new work to respect the scale, form, massing and style of the existing building, and not visually dominate the original building.</li> <li>The original roof line or characteristic roof elements are to remain identifiable and not be dwarfed by the new works.</li> <li>Retain chimneys and significant roof elements such as gables and finials where present.</li> <li>Ensure that the new work is recognisable as new, "blending in"</li> </ul>	<ul style="list-style-type: none"> <li>Some of these controls are less relevant to this project but were considered in the master planning process.</li> <li>When avoiding 'changes to the front elevation': this requirement relates more easily to residences and shop fronts but can still guide the design approach for this project, for example through consideration of sympathetic options and approaches.</li> <li>All controls are to be considered in the planning and design of the new hospital building(s); in particular the new building(s) and/or additions to existing buildings should be sympathetic</li> </ul>

DCP Section	Control	Comments/key considerations
	<p>with the original building without unnecessarily mimicking or copying.</p> <ul style="list-style-type: none"> <li>• Complement the details and materials of the original roof including ridge height and slopes without compromising the ability to interpret the original form.</li> <li>• New materials are to be compatible with the existing finishes. Materials can differentiate new work from original building sections where appropriate, for example by the use of weatherboards where the original building is brick or by the use of “transitional” materials between old and new.</li> <li>• Retain front verandahs. Reinstating verandahs and removing intrusive changes is encouraged, particularly where there is physical and/ or historic evidence.</li> </ul>	<p>to the heritage values of the place (for example, in form, massing and location) but should not attempt to replicate the existing hospital building. Instead, the new hospital should be understood as a new, modern building but with appropriate design sympathetic to its setting.</p> <ul style="list-style-type: none"> <li>• Temora Shire Council to be consulted at relevant stages.</li> <li>• The proposed design will result in front elevation design changes, but will remain as a ‘hospital on the hill’ with design elements included to complement the natural setting</li> </ul> <p>The access to the hospital through the gardens and tree plantings will be maintained from Loftus Street and exit will be via Gloucester Street. The design of the new building has aimed to highlight and continue the significance of the site as a place of continued healthcare for the community and maintained the gardens and hospital on the hill setting.</p>
7.2 Materials, finishes and colours	<ul style="list-style-type: none"> <li>• Select materials to be compatible, but not necessarily matching the materials of the building. The materials should complement the period and style of the heritage item.</li> <li>• Colour schemes are to reflect the period and detail of the property.</li> <li>• Painting or rendering face brick is generally not supported.</li> </ul>	<ul style="list-style-type: none"> <li>• This control does not apply to a new building or to a modern addition to the existing hospital building, however it may be relevant to any proposal to maintain, reuse or otherwise modify existing buildings or features where relevant.</li> <li>• Further advice should be sought from Council regarding specific design choices.</li> <li>• The architects for the design (HDR) have highlighted that the proposed new hospital will deliberately not present as an institutional building, nor will it replicate the art deco elements of the 1930s building.</li> </ul>



DCP Section	Control	Comments/key considerations
		Alternatively, it will present as a modern building, sympathetic to the setting, reflective of local vernacular and capable of supporting the delivery of wellbeing and healthcare outcomes for the wider Temora community
7.3 Adaptive reuse of heritage items	<ul style="list-style-type: none"> <li>The adaptive reuse of a heritage item should minimise alterations or interference with significant fabric. The changes are to enable the continued interpretation of the original use.</li> <li>Ensure that new services are sympathetically installed especially where upgrading is required to satisfy fire or BCA requirements.</li> </ul>	<ul style="list-style-type: none"> <li>Development of new hospital facilities is a continuation of the existing use of the place.</li> <li>Priority should be given to retention of the historic garden setting of the place. The proposed design has recognised the significance of the setting of the hospital and has retained the gardens and the tree plantings within the site. The one storey structure will retain the historic 'hospital on a hill' significance without overpowering the surrounding landscape.</li> <li>Consultation with Council over the design has been undertaken (Section 3.5 of this report).</li> </ul>
7.4 Development in the vicinity of a heritage item	<ul style="list-style-type: none"> <li>The adaptive reuse of a heritage item is to minimise alterations or interference.</li> <li>Alterations and additions to the buildings and structure, and new development are to be designed to respect and complement the heritage item in terms of building envelope, proportions, materials, colours, finishes and building street alignment.</li> <li>Development in the vicinity of a heritage item is to minimise the impact on the setting of the item by: <ul style="list-style-type: none"> <li>✓ Providing an adequate area around the heritage item to allow its interpretation.</li> <li>✓ Retaining original or significant landscaping associated with the heritage</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>All opportunities for retention of significant/existing spaces or settings that allow or promote public/visitor amenity are to be considered, to promote heritage outcomes and to promote health and community outcomes, for example by providing 'break out areas', outdoor spaces, shade, etc within the hospital site. The proportions of the new building as a single storey will complement the aesthetic setting within the landscape and retained heritage gardens.</li> <li>The proposed new hospital design retains an original key curved ground floor wall to be utilised within the proposed staff courtyard. This retention of the</li> </ul>

DCP Section	Control	Comments/key considerations
	<p>item.</p> <ul style="list-style-type: none"> <li>• Protecting and allowing the interpretation of archaeological features associated with the heritage item.</li> <li>• Retaining and respecting significant views to and from the heritage item.</li> </ul>	<p>existing curved wall aims to incorporate a key design element of the original building into the new design.</p>

## 5.3 Heritage impact considerations

The (former) Heritage Office (now Heritage NSW) guideline *Principles of Conservation Work on Heritage Places* is relevant and can be applied to the Temora Hospital project. Some principles are applicable to this project and are discussed further on in this report.

The key principles are:

- **2.1 Continue to Use the Place**  
*The building should continue to be used, preferably for the purpose for which it was built, or for a use with which it has a long association.*
- **2.2 Repair Rather than Replace**  
*Keep as much of the historic fabric as possible. Heritage items are by definition authentic examples of the architecture and lifestyle of previous generations and should be respected as evidence of our past.*
- **2.3 Make Reversible Alterations**  
*If alterations must be made to significant building fabric, they should be as reversible as possible.*
- **2.4 Make a Visual Distinction Between Old and New**  
*Whilst being sympathetic and respectful to old material, detail of new work should generally be distinguishable from the old.*
- **2.5 Avoid Precise Imitation of Architectural Detail**  
*New additions should generally not imitate the precise architectural detail of historic buildings.*
- **2.6 Ensure Alterations are Sympathetic**  
*Generally, new additions should be sympathetic to the existing building. In this context, "sympathetic" means that new work is compatible with the character of the earlier building and with its context.*
- **2.7 Respect the Ageing Process**  
*There is no reason why old buildings, like old people, should not look old. There may be no reason to repair cracks that are structurally sound, to recoat worn surfaces, or to remove patina, or even to excessively clean surfaces where the coating of time is not destructive or concealing detail.*
- **2.8 Respect Previous Alterations**  
*If there are previous alterations, these may also contribute to the building's significance and should be respected.*
- **2.9 Discontinue Previous Unsound Practices**  
*Previous unsound practices or details should not be continued, whether in original work or subsequent repairs.*
- **2.10 Stabilise Problem Areas**  
*The correction of severe structural problems, such as leaning walls, warped beams or uneven floors may cause damage which lessens the authenticity of the building. It is usually better to secure and stabilise the problem area, as this may be sufficient to restore the structural stability of the building.*



- **2.11 Respect the Building's Context and Location**

*The early context or setting is generally part of the building's significance. If the building is deprived of any of its early context, significance may be lost.*

- **2.12 Ensure New Buildings fit into the Streetscape**

*Where a gap in an existing streetscape or series of buildings is to be filled by a new building, the bulk and height should not exceed the height of buildings next door.*

- **2.13 Maintain Views**

*Significant views of the building should be identified and maintained.*

- **2.14 Respect Contents**

*The removal of significant contents of a heritage building, such as furniture and furnishings, should be avoided, unless this is the only way they can survive.*

- **2.15 Seek Design Excellence**

*These principles provide a safe, respectful approach to heritage buildings, but they cannot be guaranteed to produce fine architecture. They should not prevent inventive, interpretive, contemporary design solutions of high architectural quality. New work may be quite different in spirit and appearance from the existing fabric, but still sympathetic to its heritage values.*

Table 5-2, below, provides guidance on the proposed development at the Temora & District hospital site. This information has been considered during the master planning phase of the hospital development process and remains relevant during the finalisation of planning for the site and implementation of new hospital infrastructure.

Table 5-2. Assessment of the proposed works.

Consideration	General comments in the context of the project objectives and expected works within the hospital site
2.1 Continued Use	<ul style="list-style-type: none"> <li>• The project and its location retains the use of the place as the primary hospital for Temora and district, including the full range of necessary healthcare and facilities for staff, patients, and visitors. The garden setting and amenity is retained.</li> </ul>
2.2 Repair rather than replace	<ul style="list-style-type: none"> <li>• Various options were considered in the master planning for this project. Retention of some fabric or moveable heritage was considered prior to the demolition of hospital buildings, however it has been determined that the retention and extensive renovation of the existing building would not be plausible due to the building specifications required for a modern hospital.</li> <li>• In order to retain some elements of the original building, the curved ground floor wall will be retained and used within the proposed staff courtyard.</li> </ul>
2.3 Make reversible alterations	<ul style="list-style-type: none"> <li>• The nature of the proposed works is, in general terms, to make permanent changes to improve healthcare services at the hospital, therefore most changes are not reversible.</li> </ul>
2.4 Make a visual distinction between	<ul style="list-style-type: none"> <li>• This approach has been incorporated in master planning and design for the new hospital. HDR architects have highlighted in their design</li> </ul>

Consideration	General comments in the context of the project objectives and expected works within the hospital site
old and new	<p>principles that it is generally considered good practice to not detract from the significance of heritage by replicating it. The design of the new hospital structure is intended to respect and consider the broader site, including the setting, historical use and local context. The hospital will deliberately not present as an institutional building, nor will it replicate the art deco elements of the 1930s building. Alternatively, it presents as a modern building, sympathetic to the history of the setting, reflective of local vernacular and capable of supporting the delivery of wellbeing and healthcare outcomes for the wider Temora community.</p> <ul style="list-style-type: none"> <li>The retention of the heritage element of the gardens retains the aesthetic setting and is considered a distinct part of the landscape.</li> </ul>
2.5 Avoid precise imitation of architectural detail	<ul style="list-style-type: none"> <li>New buildings or additions should not attempt to imitate earlier architectural features, etc. However, the new hospital building can reference the 'language' of the original building, its history, and its setting through careful and sympathetic design. The retention and reuse of the ground floor curved wall helps to retain a link with the original structure.</li> </ul>
2.6 Ensure alterations are sympathetic	<ul style="list-style-type: none"> <li>The final option is to replace the main hospital building and the nurses' quarters. The project does not involve alteration of the existing hospital.</li> </ul>
2.7 Respect the ageing process	<ul style="list-style-type: none"> <li>This principle is to be applied where extant items or features are retained, including for example the retention of patina on external surfaces, where relevant, for example on entrance gates and retained structures in the garden setting.</li> </ul>
2.8 Respect previous alterations	<ul style="list-style-type: none"> <li>In general terms it should not be assumed that a modern addition or alteration is not significant. In many cases, newer additions are a continuation of the 'story' of the place (in this case the story of hospital services in Temora). In other cases, a new addition or previous alteration may be intrusive (may have not respected the heritage values of the place and may detract from the place). At Temora hospital, it could be argued that the pathology wing, for example, is intrusive.</li> <li>The proposal is to remove the main hospital building and the nurses' quarters including previous alterations and therefore this consideration is not generally applicable. The retained curved, north facing ground floor wall is part of the original design.</li> </ul>
2.9 Discontinue previous unsound practices	<ul style="list-style-type: none"> <li>This guideline may be applied to a maintenance activity that is detrimental to heritage values, including for example the use of acrylic paint instead of oil-based paint on masonry surfaces.</li> </ul>
2.10 Stabilise problem areas	<ul style="list-style-type: none"> <li>This principle is likely less applicable to the Temora hospital redevelopment but could for example be applicable if there was damage to any retained heritage fabric during construction works.</li> </ul>

Consideration	General comments in the context of the project objectives and expected works within the hospital site
2.11 Respect the buildings context and location	<ul style="list-style-type: none"> <li>The new hospital building, should respect and consider the broader site and context, including the setting of the hospital and the historical use of the site including the gardens.</li> </ul>
2.12 Ensure new buildings fit into the streetscape	<ul style="list-style-type: none"> <li>While the hospital is located on an elevated location at the periphery of Temora, the scale, location, and design of the new building has been designed to be sympathetic to its surroundings and setting, including nearby buildings or features.</li> </ul>
2.13 Maintain views	<ul style="list-style-type: none"> <li>See above comment.</li> </ul>
2.14 Respect contents	<ul style="list-style-type: none"> <li>This principle is to be considered in relation to any moveable objects or fittings that may have significance (for example, historic furniture or healthcare equipment).</li> </ul>
2.15 Seek design excellence	<ul style="list-style-type: none"> <li>When introducing new buildings within a heritage site, good, sympathetic design is important: to ensure that new buildings are an appropriate addition to the built environment.</li> </ul>

## 5.4 Heritage impacts: analysis

The following questions (Table 5-3) are presented in the NSW Heritage Manual document *Statements of Heritage Impact* [Statements of Heritage Impact \(nsw.gov.au\)](http://www.nsw.gov.au) to understand and analyse heritage impacts to significant places (Heritage Office and DUAP, 2002).

Table 5-3. Heritage Impact Questions relevant to the proposed works.

Heritage Impact Question	NGH Assessment
What aspects of the proposal respect or enhance the heritage significance of the subject item?	<p>The proposal is a substantial upgrade of health infrastructure at the Temora &amp; District Hospital, including construction of a new hospital building to replace the existing building, and removal of the nurses' quarters.</p> <p>The proposal involves significant change within the curtilage of the Temora &amp; District Hospital. This includes demolition of the hospital and nurses' quarters, and construction of a new hospital building on the site of the current hospital. This is an opportunity to invest in new facilities at the hospital site while adopting good design outcomes and respecting the heritage significance of the hospital setting. The project involves the continuation of the historical use of the place for health purposes.</p> <p>The existing hospital was built in 1939 and is now characterised by poor condition and non-compliances with contemporary standards. Investigations of the building structure, engineering services, compliance with building code and disability access requirements, and presence of hazardous materials, have determined that the building and engineering services are at end of life. The staff accommodation block has also been identified to be in extremely poor condition.</p>



Heritage Impact Question	NGH Assessment
	<p>The existing configuration of the facility has been determined to be functionally and operationally poor and presents some impediments to patient-centred care. Adaptive reuse of the existing hospital building has not been deemed an appropriate response as, notwithstanding a substantial investment, the outcome would be severely compromised including low ceiling heights to accommodate engineering services, reduced window sizes to meet minimum performance requirements, and sub-optimal clinical adjacencies that do not support contemporary service models. Similarly, the staff accommodation block is not considered suitable for upgrade.</p> <p>While the proposal involves significant change (replacement of the current hospital building with a new hospital), the significant garden setting is to be retained.</p>
What aspects of the proposal could have a detrimental effect on the heritage significance of the subject item?	<p>The proposal is a substantial upgrade to health infrastructure at the Temora &amp; District Hospital, including construction of a new hospital building to replace the current hospital building. This involves the removal of the two main hospital buildings on site, requiring the full demolition of a 1930s hospital building. Heritage impacts were considered during master planning for the new hospital infrastructure. Whilst the demolition of the structure will result in the removal of a building identified as having moderate heritage significance, the new building will look to maintain the 'hospital on the hill' location and will retain the existing curved ground floor wall in the new design.</p> <p>The gardens and tree plantings (identified as being of high heritage significance to the site) will be retained and expanded.</p>
Have more sympathetic solutions been considered and discounted? Why?	<p>A thorough master planning process was undertaken prior to the decision to locate the new building on the same footprint as the existing hospital. This included consideration of various options, including locating the new building elsewhere on site, retention of part of the existing hospital, etc. Full details of the optioneering phase are outlined in the masterplan. In summary, the decision to replace the existing hospital with a new building on the same footprint has been informed primarily due to the following reasons:</p> <ul style="list-style-type: none"> <li>• The location of the existing building is the most suitable location for a hospital building (on a flat area of land at the apex of the site)</li> <li>• The existing building is nearly 100 years old and is not suitable for modern healthcare.</li> <li>• The new structure will maintain the continuity of the 'hospital on the hill' history of the site.</li> </ul>
<b>DEMOLITION OF A BUILDING OR STRUCTURE</b>	
Have all options for retention and adaptive re-use been explored?	Yes. Various options for retention and adaptive reuse were considered during the master planning phase.
Can all of the	Several options were considered and discounted in the master planning process.

Heritage Impact Question	NGH Assessment
significant elements of the heritage item be kept and any new development be located elsewhere on the site?	The final option retains the garden setting adjacent to the existing and proposed hospital building/location and retains a key original design feature of the curved wall. Examples of significant moveable items from the hospital buildings are to be retained (stored, gifted or displayed appropriately) following more detailed analysis of significance and application of an appropriate collection/retention/disposal process where appropriate.
Is demolition essential at this time or can it be postponed in case future circumstances make its retention and conservation more feasible?	The decision to remove and replace the main hospital building has been taken to allow construction of new health facilities within the parameters of the current hospital project and to meet the health needs of the Temora community.
Has the advice of a heritage consultant been sought? Have the consultant's recommendations been implemented? If not, why not?	NGH was engaged to provide heritage advice. Additionally, Urbis was engaged to complete the community consultation phase. Consultation for this project has included advice from heritage and planning personnel at Council. NGH's Regional Manager Heritage was invited to select meetings during the master planning process and NGH's input was considered during the master planning process, including in consideration of alternative options to full demolition. This advice was considered along with all other relevant factors.

## 5.5 Heritage Impact Assessment: Matters for consideration

As noted in Section 1.1 of this report, the original SOHI document for this proposal was completed in 2023, prior to the update of the SOHI guidelines. The following table (Table 5-4) provides a direct response to the guideline update in addition to the previous work that was completed for the project under the previous *Statement of Heritage Impact guidelines* (2002).

Table 5-4. Heritage Impact Assessment based on 2023 SOHI guidelines.

<b><u>Heritage Impact Assessment: Matters for consideration</u></b>	<b><u>NGH Response</u></b>
<p><u>Fabric and spatial arrangements</u></p> <p><i>Describe the proposed alterations and additions to the heritage item and potential impacts to significant fabric and/or spatial arrangements. Address impacts to aesthetic significance or the integrity of the place.</i></p> <p><i>Refer to Assessing heritage significance (Heritage NSW 2023) for further information.</i></p>	<p>The proposed works include the demolition of the Main hospital building (identified as having moderate significance) with retention of the ground floor curved wall of the original building to be incorporated into the proposed new design as part of the new staff courtyard.</p> <p>The proposed works will also involve the demolition of the other buildings on site, including the nurses' quarters (moderate significance). It has been identified that the current facilities do not meet modern standards of patient care and redundancies in the layout of the site have been identified, leading to non-optimal work flows.</p> <p>The proposed new building is a single storey structure, designed to help facilitate better patient care and conform to modern hospital standards.</p> <p>The proposed works will result in the loss of original fabric and therefore result in a moderate heritage impact.</p> <p>This has been mitigated in the design with the retention of the wall, and the retention of the landscaped garden setting which holds high heritage significance.</p> <p>The significance of the historical associations of the 'hospital on the hill' will be retained with the new building.</p>
<p><u>Setting, views and vistas</u></p> <p><i>Describe any impacts to the heritage item's setting including landscape, land use(s) and character. This is particularly relevant to new development and/or signage, flags, umbrellas, air conditioners, solar panels etc.</i></p> <p><i>Describe any impacts on significant views and vistas, including views to, from and within the heritage item. Include photographs or photomontages that indicate the potential visual impacts.</i></p>	<p>The main hospital building will be removed and the proposed new single storey hospital building will replace the original structure in the same location, with some extensions to the building footprint. The new structure will retain the position of the 'hospital on the hill' and as a result will continue the historical significance associated with the location.</p> <p>The new building will be a one storey structure to help reduce visual impact to the surrounds and has been designed in sympathy to the surrounding setting, noting that the new structure does not aim to appear institutional or to imitate the previous Inter War structure. The landscaping and tree plantings will remain on the site as elements of high heritage significance.</p> <p>The overall layout and views and vistas will be reasonably maintained in the new design.</p>



<b>Heritage Impact Assessment: Matters for consideration</b>	<b>NGH Response</b>
<p><u>Landscape</u></p> <p><i>Describe the proposed landscape works, features and vegetation and consider how this may impact on the significance of the heritage item.</i></p>	<p>The proposal includes the retention of the landscaped gardens and tree plantings at the site as they have been identified (Section 3 of this report) as being of high significance to the site.</p> <p>The entrance drive into the hospital will remain from Loftus Street and will result in visitors to the Hospital continuing to drive through the gardens to gain access to the hospital.</p>
<p><u>Use</u></p> <p><i>Describe how the proposed use contributes to or conflicts with the significance of the heritage item and if the proposed use will result in future changes (e.g. for the Disability Discrimination Act (Commonwealth), compliance, services etc.)</i></p>	<p>The original Inter War hospital building is proposed to be demolished and removed from the site. However, the proposed new hospital facility that meets current patient and equipment standards will replace the original in the same location. This new building will provide modern services to current standards to the residents of the Temora area. The site will therefore continue to be used as a hospital setting into the future, strengthening the association of the place with health care facilities.</p>
<p><u>Demolition</u></p> <p><i>If demolition is proposed, clearly describe the area of demolition, and assess the associated impacts, indicating whether the proposed demolition (whole/partial) will or will not have a major detrimental effect on the heritage significance of the heritage item.</i></p> <p><i>If any demolition is proposed to a heritage item listed on the State Heritage Register, the area of demolition must be clearly described, and the assessment must respond to s63(3)c of the Heritage Act</i></p>	<p>The proposed works will result in the demolition of all existing buildings on site, with the construction of one, single storey building situated in the same location of the existing Main hospital building.</p> <p>The proposed demolition will result in the loss of the Main hospital building (moderate significance) and the nurses quarters (moderate significance), original buildings at the site.</p> <p>In order to help mitigate the impact of the demolition of the main hospital building, the new designs aim to retain the curved ground floor wall, to be incorporated into the staff courtyard area.</p> <p>Whilst the demolition of these buildings will result in a negative heritage impact to the site, it has been identified that the existing hospital is not sufficient to meet the current needs of the community and it is not feasible to modify the existing structure due to low ceiling heights and asbestos material.</p> <p>The high significance elements of the site (the landscaping and tree plantings) will be retained and expanded with the new design, and the proposed new structure will retain the significant historical associations with the 'hospital on a hill' in Temora.</p> <p>The place, being the location of Temora's hospital for over 100 years, will remain the same and therefore the significance of the place and precinct will not be diminished.</p> <p>Section 63(3)(c) does not apply as the hospital is not a</p>

<b><u>Heritage Impact Assessment: Matters for consideration</u></b>	<b><u>NGH Response</u></b>
	State Heritage listed place.
<p><u>Curtilage</u></p> <p><i>Describe impacts to the identified curtilage, including on layout, use(s), built and landscape elements such as open space, plantings (trees, shrubs, ground covers). Describe any previous subdivision and consider how it may result in future development or affect the identified curtilage.</i></p>	<p>There will be no impact to the overall size of the lot or the curtilage of the heritage listing as a result of the proposed works.</p> <p>The proposed works involved the demolition of the main hospital building and other ancillary buildings from the site, to be replaced with one single storey hospital structure. The proposed new building will retain the location of the hospital on the hill, with the proposed general layout of the lot remaining relatively similar to the existing.</p> <p>The landscaping and tree plantings will be retained and expanded to help retain the high significance of these elements within the site</p>
<p><u>Moveable heritage</u></p> <p><i>Describe any impacts to moveable heritage.</i></p>	<p>Significant examples of moveable heritage are to be salvaged prior to the demolition of hospital buildings, in consultation with Temora Shire Council.</p>
<p><u>Aboriginal cultural heritage</u></p> <p><i>If the heritage listing of the item identifies Aboriginal cultural heritage values, an assessment of impacts to these values must be provided and an investigation conducted to confirm whether other relevant approvals (relating to Aboriginal cultural heritage) are required.</i></p>	<p>Temora and District Hospital listing does not identify Aboriginal cultural heritage values.</p> <p>A separate Due Diligence assessment has been completed for this project (NGH 2023).</p> <p>Impacts do not apply to this heritage value.</p>
<p><u>Historical archaeology</u></p> <p><i>Consider any impacts of the proposed works on the archaeological potential of the site.</i></p> <p><i>This information will determine if an archaeological assessment is required. If an archaeological assessment exists, refer to this report and describe any impacts on archaeology.</i></p>	<p>There are no identified archaeological impacts to the Temora and District Hospital listing.</p> <p>Impacts do not apply to this heritage value.</p>
<p><u>Natural heritage</u></p> <p><i>If the heritage listing identifies the heritage item as a place of natural heritage values, describe impacts to the identified natural heritage values. Note that ecological advice or reports may be required.</i></p>	<p>Temora and District Hospital is not listed as an item of natural heritage, however the landscaped gardens and trees have been identified as an important contributor to the heritage significance of the site.</p> <p>As a result, the gardens and trees have been retained and expanded in the proposed design plans.</p>
<p><u>Conservation areas</u></p>	<p>Temora and District Hospital is not located within a</p>

<b><u>Heritage Impact Assessment: Matters for consideration</u></b>	<b><u>NGH Response</u></b>
<i>If the heritage item is part of a conservation area, describe how the proposed works may impact on the significance of the conservation area.</i>	Conservation Area. Impacts do not apply to this heritage value.
<u>Cumulative impacts</u> <i>Assess the cumulative impact of the proposed works, considering previous approvals and future applications. Indicate whether the proposed works as part of this application are one part of a broader scope of works (or if they are related to any other applications) and if relevant, include a master plan. How do the proposed works contribute to the cumulative impact/effect of works to the heritage item?</i>	<p>The proposed works will involve the removal of all current buildings on site and their replacement with one single storey structure that has been designed to meet modern standards for patient needs and care.</p> <p>The removal of the buildings will result in the main hospital (identified as holding moderate significance) and the nurses quarters (moderate significance) being demolished.</p> <p>Whilst this will lead to a non-reversible impact on the original buildings and materials, the significance of the site has been identified to also lie within the historic associations with the 'hospital on the hill', as well as the landscape and natural significance of the site. These elements will be retained and enhanced within the proposed works.</p>
<u>The conservation management plan</u> <i>Assess the proposed works against any relevant policies of a conservation management plan (CMP) (for works to a State Heritage Register item)</i>	There is no CMP for Temora and District Hospital. Impacts do not apply to this heritage value.
<u>Other heritage items in the vicinity</u> <i>Describe any direct or indirect impacts to the significance of other heritage items in the vicinity.</i>	There are no other listed heritage items in the vicinity. Impacts do not apply to this heritage value.
<u>Commonwealth/National heritage significance</u> <i>For items on the Commonwealth Heritage List or National Heritage List, provide a separate assessment in accordance with national heritage assessment criteria and attach as an appendix to the SOHI.</i>	Temora and District Hospital is not an item of Commonwealth/National heritage significance. Impacts do not apply to this heritage value.
<u>World Heritage significance</u> <i>For properties on the World Heritage List, provide a separate assessment in accordance with UNESCO's World Heritage assessment criteria (outstanding universal values) and attach as an appendix to the SOHI.</i>	Temora and District Hospital is not an item of World heritage significance. Impacts do not apply to this heritage value.

## **6. Conclusion and recommendations**

### **6.1 Conclusions**

This report assesses heritage impacts to the Temora Hospital site, including both visual and material impacts from the proposed works. In conclusion:

- The proponent has engaged in a thorough master planning process that has considered the heritage values of the place and has considered various options to avoid or minimise any heritage impacts from the proposal.
- The new hospital building will be constructed on the same footprint as the existing 1930s hospital building and will replace the existing building. Additionally, the modified nurses' quarters building is to be removed. This results in the loss of two locally listed heritage items within the wider hospital site - to provide modern healthcare facilities for residents of Temora and surrounding areas – but the retention of the garden setting within the heritage curtilage.

The design of the new hospital has aimed to respond to the relevant DCP controls and has been designed to be sympathetic to the heritage values of the place (in form, massing and location) but does not attempt to replicate the existing hospital building. Instead, the new hospital has been designed to be understood as a new, modern building but with appropriate design sympathetic to its setting and retaining elements of the original structure where possible (retention of the curved ground floor wall for inclusion into the new staff courtyard). The retention of the heritage listed buildings is not possible due to the space available for the new hospital and the need to provide modern health care services.

However, the proposed works will retain and expand the existing landscaping and tree plantings, elements that have been identified as high heritage significance within the site and the setting of the 'hospital on the hill' will remain, providing continuity of use of the place for the Temora community.

### **6.2 Recommendations**

It is recommended that:

- (i) Where additional changes not addressed in this document are proposed, further assessment and investigation may be required.
- (j) Temora Shire Council should continue to be consulted at relevant stages of the project.
- (k) The historic garden setting of the place should continue to be prioritised for retention in its current location and layout.
- (l) Prior to demolition, an archival recording of the site in line with the relevant Heritage NSW guidelines should be undertaken to record the existing physical aspects of the site.
- (m) An interpretation plan for the site should be undertaken by a qualified heritage consultant.
- (n) All opportunities for retention of significant/existing spaces or settings that allow or promote public/visitor amenity are to be considered, to promote heritage outcomes and to promote health and community outcomes.
- (o) Significant examples of heritage fabric or moveable heritage are to be salvaged prior to the demolition of hospital buildings, subject to a salvage plan developed in consultation with Temora Shire Council.
- (p) Any unexpected heritage finds will be managed in accordance with Council's *Unexpected Heritage Find Procedure (version 2)* (PMHC, July 2020).



## 7. References

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## **Appendix A Unexpected finds procedure**

An unexpected heritage item means any unanticipated discovery of an actual or potential heritage item, for which the Proponent does not have prior approval to disturb or does not have a safeguard in place to manage the disturbance.

These discoveries are categorised as either:

- a) Aboriginal objects
- b) Historic/non-Aboriginal heritage items
- c) Human skeletal remains.

If any of the above items are suspected or identified during construction activities then a series of steps must be followed. These are outlined below:

1. all work should cease in that area and notify a Project Manager or Supervisor immediately of the find,
2. A 'no-go' zone should be established around the find, using visibility fencing (where applicable),
3. Inform all on-site personnel and staff of the find and the demarcated 'no-go' zone,
4. Contact a qualified archaeologist/heritage consultant to inspect the find and provide recommendations.
5. In the event that human remains are identified, complete steps 1–3. Replace Step 4 by immediately contacting the local police to investigate if the find relates to a criminal investigation. The police may take command of part or all of the site.
6. Once clearance of the site has been given by the qualified archaeologist/heritage consultant then works may proceed within the 'no-go' zone UNLESS specifically instructed by the professional that no further works can be completed.

## **Appendix B Architectural drawings**