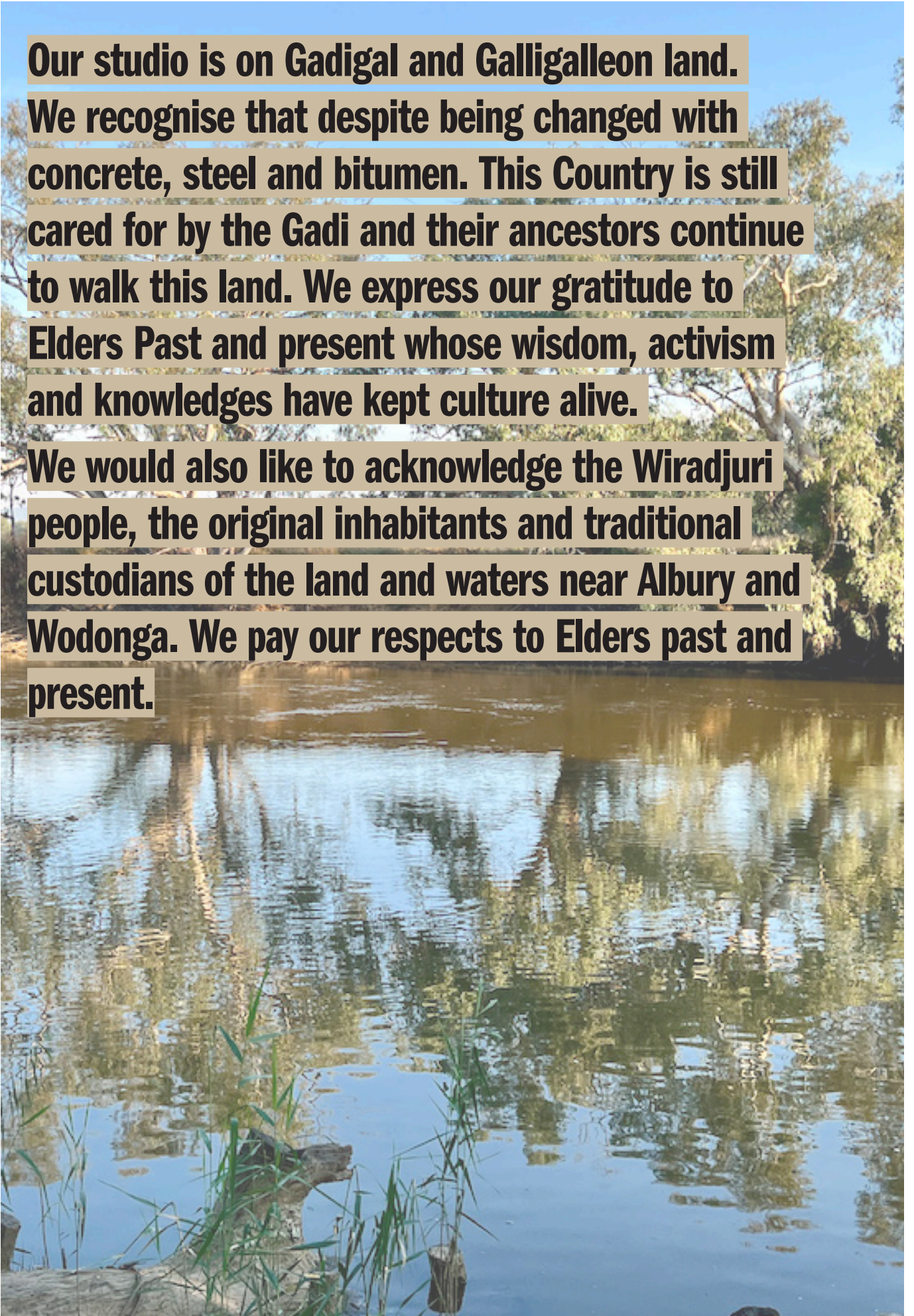


**ALBURY WODONGA  
REGIONAL HOSPITAL  
NORTHEAST  
BUILDING  
ARCHITECTURE REF**



**Our studio is on Gadigal and Galligalleon land. We recognise that despite being changed with concrete, steel and bitumen. This Country is still cared for by the Gadi and their ancestors continue to walk this land. We express our gratitude to Elders Past and present whose wisdom, activism and knowledges have kept culture alive. We would also like to acknowledge the Wiradjuri people, the original inhabitants and traditional custodians of the land and waters near Albury and Wodonga. We pay our respects to Elders past and present.**



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Rev	Date	Approved By	Description
01	04.10.2024	Catherine Loker	Draft for review
02	29.11.2024	Catherine Loker	For Approval
03	24.01.2025	Catherine Loker	For Approval

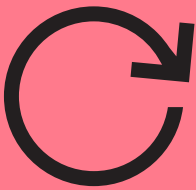
# DESIGN STATEMENT

**The Northeast Building is part of the broader Albury Wodonga Regional Hospital Redevelopment Project. Creating approximately 2,700 square metres of space, this facility will meet essential hospital needs by providing interim space for Allied Health, Pharmacy, and the medical workforce. This arrangement will allow for the continuity of operations, while enabling the demolition of existing structures, to make way for the new Clinical Services Building (which is under a separate application).**

**The Northeast Building is designed to offer safe, flexible, and adaptable spaces that will continue to serve healthcare services even after its initial use as decant space is complete, presenting long term value for the hospital.**

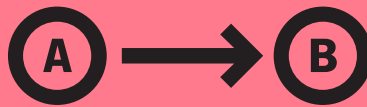
- The location of the Northeast Building was carefully chosen through extensive consultation and a thorough cost-benefit analysis, ensuring minimal disruption to the hospital's campus and ongoing operations. The site is situated outside the main construction zones and future master plan areas.
- The site allows for existing clinical connections to be maintained, for example clinical spaces are located on level 2, the same as the current hospital.
- The building's design considers the surrounding architecture and recent architectural extensions. While it will align with the existing campus through choice of already present materials, the design will also give the Northeast Building its own distinct identity.
- The building is set back from the hospital boundary and will have minimal visual and lighting impact to surrounding neighbours. The pedestrian safety, overall amenity and lighting design will meet relevant standards and guidelines. Primary pathways are located in visible areas and will meet CPTED principles.

# PROJECT OBJECTIVES



## Continuity of services

- Enable continuity of services by relocating impacted services, displaced by AWRHP Main Works.



## Project Timeline

- The Northeast Building must be operational by late 2025 to allow for the preparation, demolition of existing facilities, and the commencement of the main AWRHP works



## Potential future use

- Provide space that can be used by AWH for suitable services, minimising redundant activities.

# SITE CONTEXT



View from corner of Bilba Road and East St



View from corner of Borella Road and East St



Approximate building footprint



View towards existing entry



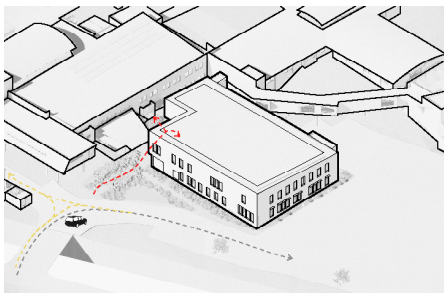
View of existing north facade



View to existing cafe

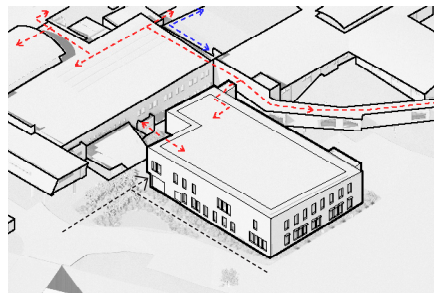
# DESIGN CONCEPT

**The Northeast Building follows the project's calm and uncluttered architectural style while integrating with the existing structures and architectural language.**



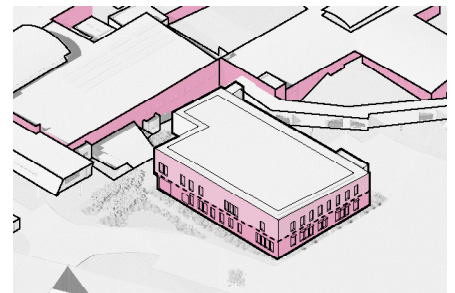
## Site wide movement

- The Northeast Building is designed and placed to allow the continuation of operational vehicle and access movements.
- The existing vehicle entry into the car park is maintained to reduce impact on landscape and maintain public access.



## Clinical and Public connections

- The building upper level contains clinical spaces and connects to the main hospital entry level (level 2). This allows public to move through the hospital at the same level.
- The building lower level contains administrative functions, which are adjacent and proximal to current hospital administration.
- The upper building connection and internal vertical movement (lift and stair) allow the Northeast Building to be used in a variety of ways in the future.

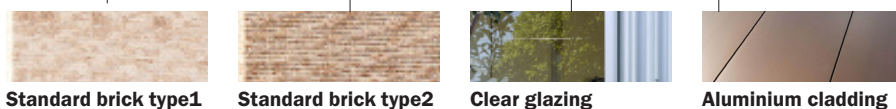
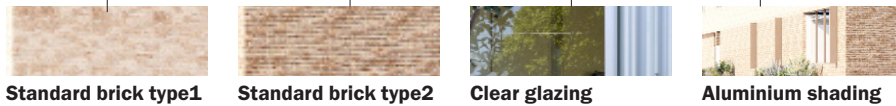


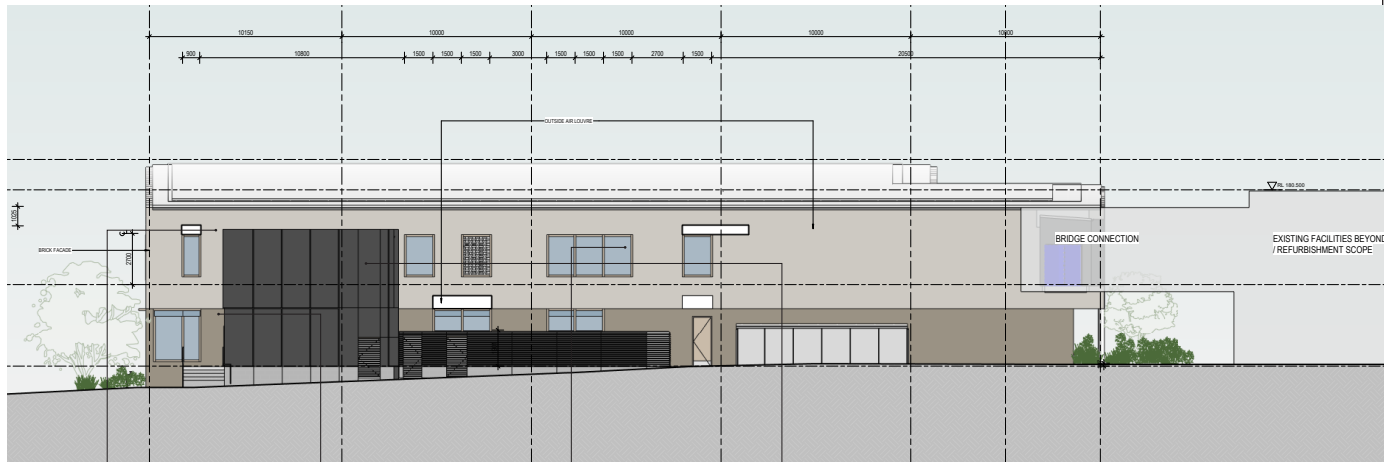
## Contextual

- The chosen primary materials are robust and well tested. They are also already present on site.
- The tonal quality is similar to the existing, but restrained and reduces visual clutter.
- While the design aligns with the intent of the Clinical Services Building, it features distinct detailing to ensure it complements the existing architecture without feeling like an entirely new structure. At the same time, it maintains its own unique identity as a separate building.



# DESIGN CONCEPT

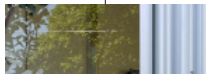




**Standard brick type1**



**Standard brick type2**



**Clear glazing**



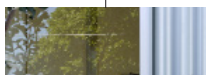
**Aluminium cladding**



**Standard brick type1**



**Standard brick type2**

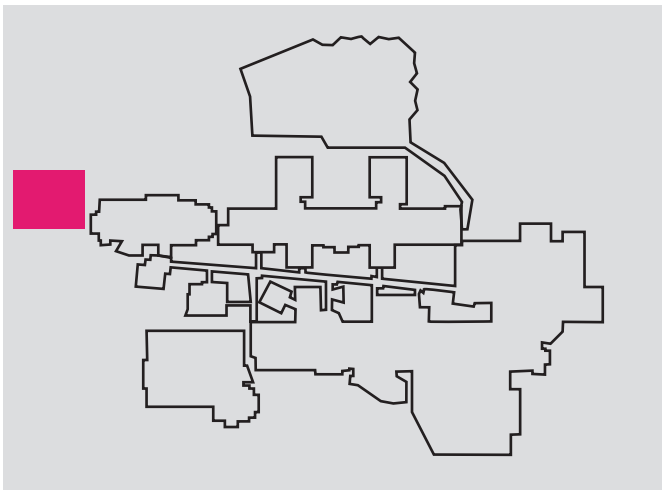


**Clear glazing**



**Aluminium shading**

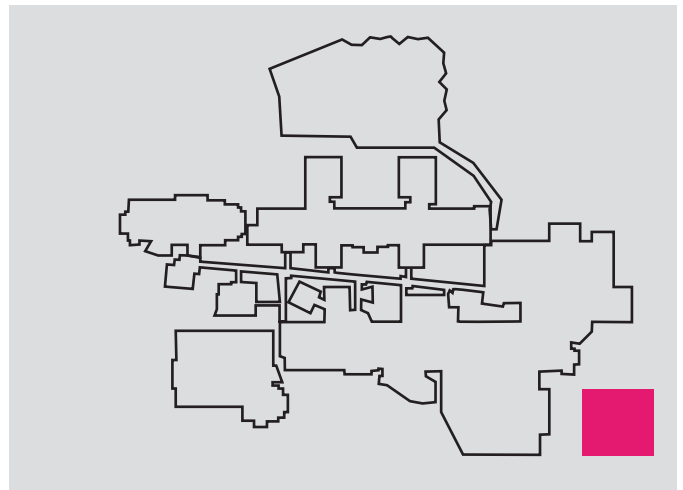
# DESIGN OPTIONS



## Design Option 1

### North west

- Provided short-term opportunity for decant activities, but would need to be demolished and removed prior to main works completion
- Did not offer any long term use for capital investment
- Located near the primary public entry (main works project scope), which would result in clutter and visual impact to amenity and public arrival experience

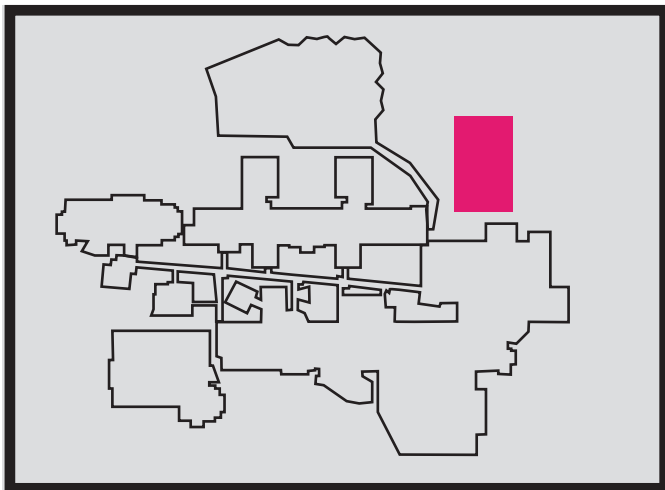


## Design option 2

### South east

- Limited space availability and require additional site grading works
- Did not allow for direct clinical connections

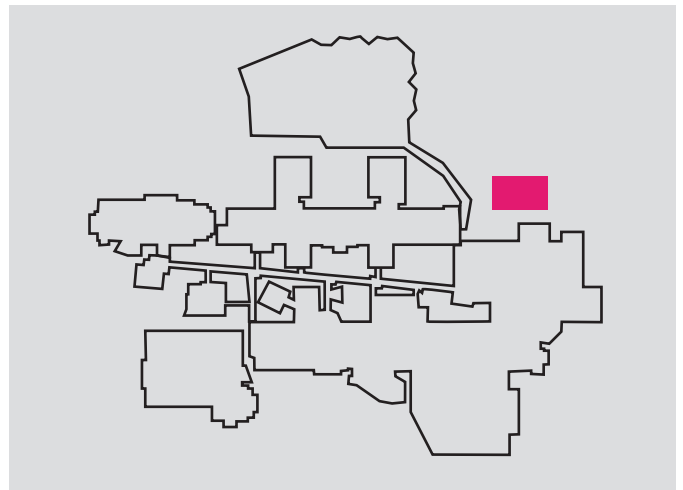
# Location and volume studies were undertaken and dismissed through consultation and analysis



## Design option 3

### North east (selected design option)

- Minimised impact to existing operations
- Connect to upper and lower levels
- Allowed future development (masterplan as well as the NE development opportunity zone)
- Loss of garden space
- Close to existing building



## Design option 4

### North east (3 levels)

- Would result in splitting clinical areas over two floors (one floor without direct connection to existing hospital)
- In consultation this was viewed as a significant draw back
- Would require additional infrastructure (additional lifting and building services)

# CONNECTING WITH COUNTRY

**Hassell acknowledges the work by Connecting with Country consultant Yerrabingin in facilitating and coordinating the Country Through Desktop Research Report, community consultation, and Design Jam outcomes.**

**Guided by Yerrabingin's Design Narratives and Principles, the project design approach will be crafted and shaped by the elements and qualities of Country, which in turn reflect and aid in nurturing Country.**

Working with and nurturing Country means listening to Country (WANGGANI DHAYAR), a 'cultural topography that frames the ancient knowledge of the Australian Landscape. Connected and nurtured through an oral tradition of dance, stories, song and art carefully designed and maintained, gifted to each generation.'

The project takes a holistic site approach, incorporating the garden strategies that are present in the wider Albury region to compliment the internal built forms. The Northeast building sits within this overall site approach.

This is accompanied by the wellbeing

journey's 'look and feel' - adopting a building material strategy that is based on natural tones, and human scale elements.

Conversations with Wiradjuri community have led to three key design principles:

#### – Wellbeing Journey

The design integrates a landscape and nature experience, allowing patients and staff to walk through and immerse themselves in gardens. The planting, paving, and seating are inspired by Wiradjuri narratives, including planting ecologies and story narratives.

#### – Places of Rest and Recovery

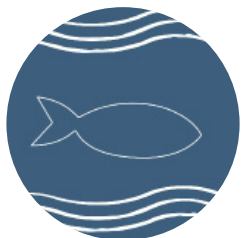
Access to nature is fundamental to the design, with courtyards serving as areas for rest and external therapy, directly linked to clinical services. Outdoor gathering spaces support diverse cultural practices, promoting a holistic view of wellbeing. Inspired by Country, these spaces feel natural and non-intrusive, accommodating various gathering and cultural activities connected to therapy. The layout maximizes exposure to nature for staff and patients, providing access to daylight and views of the sky and surrounding nature, both near and distant.

#### – Sensing Country:

Internal colour palettes and materials are inspired by the Albury landscape. For examples the use of Brick as the primary material for the Northeast Building. The hand-crafted, textural nature connect back to the approach being taken for the Clinical Services Building.

The engagement with community is ongoing.

## Yerrabingin Design Principles



### Living River Country

Connection to the River in Albury through its proximity to the Hospital, bringing connection to Country and the spirit of River Country into the Hospital redevelopment.



### Healing Country, Healing People

The health of Country and its people is intricately connected for Aboriginal people. Country is healthy when Aboriginal people can carry out their custodial responsibilities and care for it.



### Life of the River Red Gum

The River Red Gum is reminiscent of the human body, which is able to adapt to changing environmental conditions. The hospital design can reflect the life of the River Red Gum by providing an environment that supports balance and health for patients, staff, and visitors alike.

## Yerrabingin Design Narratives



### Wellbeing Journey

Albury Hospital is placed to provide a series of unique journeys. These experiences will prioritize wellbeing, recovery, and comfort.



### Paces of Rest and Recovery

Creating places for private and quiet recovery, spill-out spaces to rest with Country for patients, staff and visitors. Rest and recovery should be inclusive of groups and allow spaces for ceremony and Sorry business.



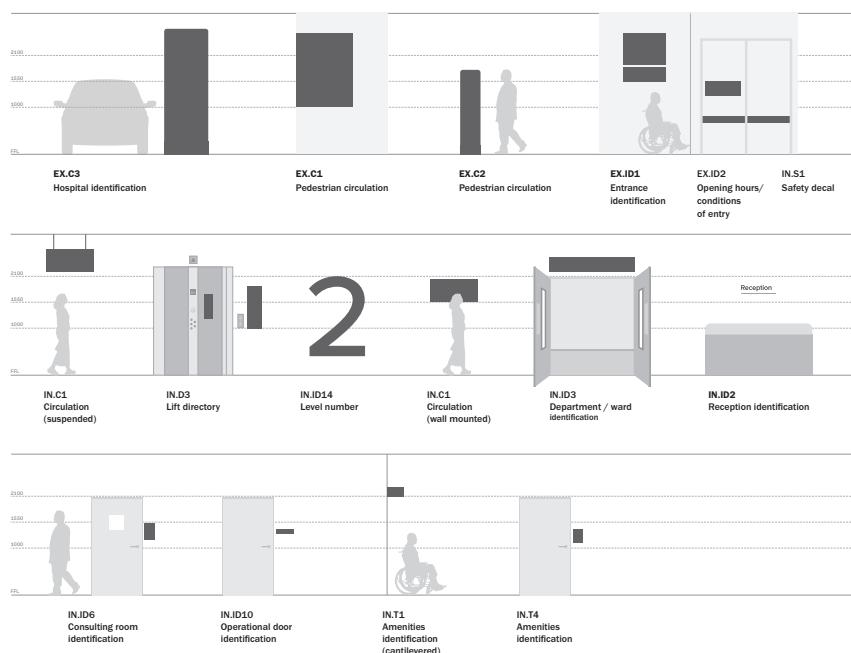
### Sensing Country

With Country at the forefront of design and understanding the elements of Wiradjuri Country we can encourage a softer and more welcoming clinical experience. By centring Country in design we have the opportunity to bring the healing qualities of Country to a hospital setting as well as provide reciprocal care to Country.

# WAYFINDING

**The primary focus of way-finding within the northeast building is to enable seamless journeys and support continuity of service with the interim relocation of Allied Health, Pharmacy and workforce impacted by the AWRHP Main Works.**

## Sign Types Overview



## Wayfinding Priorities

- Identification of site entry and car park on East St (as part of a broader sitewide entry strategy)
- External pedestrian wayfinding from the northeast car park to northeast building entry
- Clear identification of the northeast building entrance
- Internal wayfinding and level directories guiding Allied Health patients from their arrival on level 1 to level 2
- Identification of Allied Health department and reception
- Identification of amenities
- Identification of clinical rooms and facilities
- Identification of the relocated Pharmacy
- Internal wayfinding supporting seamless connections to and from the northeast building to clinical spaces and other destinations the current hospital
- Operational signage for the L1 workforce and training facilities

This is a detailed architectural floor plan of a building, likely a school or institutional facility. The plan is oriented with a grid system (A-F, 1-6) and includes numerous labels for rooms and equipment. Key areas include:

- Classrooms:** L1-N100-01 through L1-N100-10, L1-N100-11 through L1-N100-14, L1-N100-15 through L1-N100-18, L1-N100-19 through L1-N100-22, L1-N100-23 through L1-N100-26, L1-N100-27 through L1-N100-30, L1-N100-31 through L1-N100-34, L1-N100-35 through L1-N100-38, L1-N100-39 through L1-N100-42, L1-N100-43 through L1-N100-46, L1-N100-47 through L1-N100-50, L1-N100-51 through L1-N100-54, L1-N100-55 through L1-N100-58, L1-N100-59 through L1-N100-62, L1-N100-63 through L1-N100-66, L1-N100-67 through L1-N100-70, L1-N100-71 through L1-N100-74, L1-N100-75 through L1-N100-78, L1-N100-79 through L1-N100-82, L1-N100-83 through L1-N100-86, L1-N100-87 through L1-N100-90, L1-N100-91 through L1-N100-94, L1-N100-95 through L1-N100-98, L1-N100-99 through L1-N100-102, L1-N100-103 through L1-N100-106, L1-N100-107 through L1-N100-110, L1-N100-111 through L1-N100-114, L1-N100-115 through L1-N100-118, L1-N100-119 through L1-N100-122, L1-N100-123 through L1-N100-126, L1-N100-127 through L1-N100-130, L1-N100-131 through L1-N100-134, L1-N100-135 through L1-N100-138, L1-N100-139 through L1-N100-142, L1-N100-143 through L1-N100-146, L1-N100-147 through L1-N100-150, L1-N100-151 through L1-N100-154, L1-N100-155 through L1-N100-158, L1-N100-159 through L1-N100-162, L1-N100-163 through L1-N100-166, L1-N100-167 through L1-N100-170, L1-N100-171 through L1-N100-174, L1-N100-175 through L1-N100-178, L1-N100-179 through L1-N100-182, L1-N100-183 through L1-N100-186, L1-N100-187 through L1-N100-190, L1-N100-191 through L1-N100-194, L1-N100-195 through L1-N100-198, L1-N100-199 through L1-N100-202, L1-N100-203 through L1-N100-206, L1-N100-207 through L1-N100-210, L1-N100-211 through L1-N100-214, L1-N100-215 through L1-N100-218, L1-N100-219 through L1-N100-222, L1-N100-223 through L1-N100-226, L1-N100-227 through L1-N100-230, L1-N100-231 through L1-N100-234, L1-N100-235 through L1-N100-238, L1-N100-239 through L1-N100-242, L1-N100-243 through L1-N100-246, L1-N100-247 through L1-N100-250, L1-N100-251 through L1-N100-254, L1-N100-255 through L1-N100-258, L1-N100-259 through L1-N100-262, L1-N100-263 through L1-N100-266, L1-N100-267 through L1-N100-270, L1-N100-271 through L1-N100-274, L1-N100-275 through L1-N100-278, L1-N100-279 through L1-N100-282, L1-N100-283 through L1-N100-286, L1-N100-287 through L1-N100-290, L1-N100-291 through L1-N100-294, L1-N100-295 through L1-N100-298, L1-N100-299 through L1-N100-302, L1-N100-303 through L1-N100-306, L1-N100-307 through L1-N100-310, L1-N100-311 through L1-N100-314, L1-N100-315 through L1-N100-318, L1-N100-319 through L1-N100-322, L1-N100-323 through L1-N100-326, L1-N100-327 through L1-N100-330, L1-N100-331 through L1-N100-334, L1-N100-335 through L1-N100-338, L1-N100-339 through L1-N100-342, L1-N100-343 through L1-N100-346, L1-N100-347 through L1-N100-350, L1-N100-351 through L1-N100-354, L1-N100-355 through L1-N100-358, L1-N100-359 through L1-N100-362, L1-N100-363 through L1-N100-366, L1-N100-367 through L1-N100-370, L1-N100-371 through L1-N100-374, L1-N100-375 through L1-N100-378, L1-N100-379 through L1-N100-382, L1-N100-383 through L1-N100-386, L1-N100-387 through L1-N100-390, L1-N100-391 through L1-N100-394, L1-N100-395 through L1-N100-398, L1-N100-399 through L1-N100-402, L1-N100-403 through L1-N100-406, L1-N100-407 through L1-N100-410, L1-N100-411 through L1-N100-414, L1-N100-415 through L1-N100-418, L1-N100-419 through L1-N100-422, L1-N100-423 through L1-N100-426, L1-N100-427 through L1-N100-430, L1-N100-431 through L1-N100-434, L1-N100-435 through L1-N100-438, L1-N100-439 through L1-N100-442, L1-N100-443 through L1-N100-446, L1-N100-447 through L1-N100-450, L1-N100-451 through L1-N100-454, L1-N100-455 through L1-N100-458, L1-N100-459 through L1-N100-462, L1-N100-463 through L1-N100-466, L1-N100-467 through L1-N100-470, L1-N100-471 through L1-N100-474, L1-N100-475 through L1-N100-478, L1-N100-479 through L1-N100-482, L1-N100-483 through L1-N100-486, L1-N100-487 through L1-N100-490, L1-N100-491 through L1-N100-494, L1-N100-495 through L1-N100-498, L1-N100-499 through L1-N100-502, L1-N100-503 through L1-N100-506, L1-N100-507 through L1-N100-510, L1-N100-511 through L1-N100-514, L1-N100-515 through L1-N100-518, L1-N100-519 through L1-N100-522, L1-N100-523 through L1-N100-526, L1-N100-527 through L1-N100-530, L1-N100-531 through L1-N100-534, L1-N100-535 through L1-N100-538, L1-N100-539 through L1-N100-542, L1-N100-543 through L1-N100-546, L1-N100-547 through L1-N100-550, L1-N100-551 through L1-N100-554, L1-N100-555 through L1-N100-558, L1-N100-559 through L1-N100-562, L1-N100-563 through L1-N100-566, L1-N100-567 through L1-N100-570, L1-N100-571 through L1-N100-574, L1-N100-575 through L1-N100-578, L1-N100-579 through L1-N100-582, L1-N100-583 through L1-N100-586, L1-N100-587 through L1-N100-590, L1-N100-591 through L1-N100-594, L1-N100-595 through L1-N100-598, L1-N100-599 through L1-N100-602, L1-N100-603 through L1-N100-606, L1-N100-607 through L1-N100-610, L1-N100-611 through L1-N100-614, L1-N100-615 through L1-N100-618, L1-N100-619 through L1-N100-622, L1-N100-623 through L1-N100-626, L1-N100-627 through L1-N100-630, L1-N100-631 through L1-N100-634, L1-N100-635 through L1-N100-638, L1-N100-639 through L1-N100-642, L1-N100-643 through L1-N100-646, L1-N100-647 through L1-N100-650, L1-N100-651 through L1-N100-654, L1-N100-655 through L1-N100-658, L1-N100-659 through L1-N100-662, L1-N100-663 through L1-N100-666, L1-N100-667 through L1-N100-670, L1-N100-671 through L1-N100-674, L1-N100-675 through L1-N100-678, L1-N100-679 through L1-N100-682, L1-N100-683 through L1-N100-686, L1-N100-687 through L1-N100-690, L1-N100-691 through L1-N100-694, L1-N100-695 through L1-N100-698, L1-N100-699 through L1-N100-702, L1-N100-703 through L1-N100-706, L1-N100-707 through L1-N100-710, L1-N100-711 through L1-N100-714, L1-N100-715 through L1-N100-718, L1-N100-719 through L1-N100-722, L1-N100-723 through L1-N100-726, L1-N100-727 through L1-N100-730, L1-N100-731 through L1-N1

# BETTER PLACED ASSESSMENT

**Better Placed is a policy initiative from NSW government. Seven distinct objectives have been created to define the key considerations in the design of the built environment. The below is an assessment against these objectives.**

## Better Fit

- The northeast building's design aligns with the surrounding architecture through complementary, purpose-driven materials. It integrates seamlessly with the project's main works and future masterplan, ensuring longevity. The materials are simple, durable, and already present on-site. The building form and placement minimises impact to existing services and is set back from frontages, with minimal impact to views lines.

## Better Performance

- The materials are robust and suitable for the bushfire-prone site, with lighter colours to reflect

sunlight and use masonry, allowing for more potential to use recycled content. The location of the building minimizes long-term waste and temporary works. The simple, repetitive, prefabricated structural and facade grid reduces construction waste. The design can be reused by the health service in a controlled manner over the medium to long term.

## Better for Community

- The building will house essential community and hospital services. Its design blends with the hospital's existing layout to minimize disruption during the construction period and the long term use of the site.
- The building is also conveniently located near public transport routes

## Better for People

- It follows familiar architectural styles within the context, with safe, accessible design principles like level access, lifts and clear way finding. There are multiple opportunities for passive surveillance and landscaping is designed in way to enable sight lines and reduced blind spots

## Better Working

- The building's design aligns with the hospital's flow and networks,

functioning as an extension to improve staff access and operations. Located near current administrative and clinical activities, it also allows flexibility in internal wall placement for future uses

## Better Value

- The building offers long-term value by supporting temporary hospital relocations during construction as well as serving future Health Service needs. This reduces waste and the cost of temporary solutions over the long term as the hospital adapts in the near future. The materials chosen are robust, easy to source and are designed for the medium term.

## Better Look and Feel

- The building is welcoming and appealing. It's planning is designed in line with contemporary ways of working, encouraging its use by staff and the community.

# DESIGN GUIDE FOR HEALTH

**Design principles provide a framework for analysis, understanding and decision-making. They are fundamental touchstones, guiding the long and complex process of scoping, developing and delivering a health facility. The below is an assessment against these principles.**

## **Designing for Dignity**

- Dignity is about equity, ensuring health facilities welcome people of all ages, abilities, backgrounds, and socio-economic groups. Inviting, well-maintained spaces are essential to reduce stress and anxiety, as worn or overly clinical environments can undermine excellent medical care. The Northeast Building achieves this through accessible, landscaped pathways leading to the front door, large group spaces near entry points, durable materials, and an open, flexible work environments. In addition covered entry is provided. The building is primarily a staff facility, however level

connection is provided to the main public circulation floor to facilitate consultation.

## **Design for wellbeing**

- Noting that more than half of the floor area of this building is staff only, The Northeast Building design includes landscaped pedestrian pathways with canopy cover and is overall scaled appropriately, sitting lower than the existing building. It also provides level connections for staff and the public to the existing hospital.

## **Design for efficient and flexible delivery of care**

- Clinical adjacencies and efficiencies have been addressed through thorough consultation and peer review. The building's simple structural design allows for future flexibility
- The building is positioned to enable and facilitate the long term masterplan of the precinct.

## **Design with Country**

- Refer to above section

## **Design for neighbourhood and surrounding environment**

- The Northeast Building enhances the area's quality by using complementary, durable materials

that reflect the design of existing buildings. It fits well within the broader precinct scale and connects to the main public floor of the hospital while providing suitable spaces for staff and administration. The building is also planned with consideration for future developments outlined in the project and master plan.

## **Design for connection**

- The building design incorporates spaces for training and research, supporting the main functions of the project while allowing ongoing operations. It facilitates the co-location of staff facilities and embraces a contemporary workplace approach with open, collaborative spaces. The building is physically connected to the hospital and offers views of the local context.

## **Design for sustainability**

- A precinct wide approach has been taken for the Northeast Building, where elements appropriate to be delivered for the portion of work incorporated. For example
  - Solar panels
  - Water sensitive urban design
  - Low window to wall ratio
  - Sun shading
  - Refer to Sustainability report.

# QUALITY ASSURANCE

**As part of the NSW Government commitment to design excellence, the project has undergone peer review under the Quality Assurance process.**

A design review of the Northeast Building was undertaken 19.11.24, which associated reporting and communication.

The following key themes were supported:

- Support for the overall design approach including

- Use of brick as the primary facade material
- The tone, composition and fenestration placement
- Support for the building location
- Reinforced the permanent nature of the building and should be supported by budgetary allocation to ensure lasting materials are installed
- Support for landscape inclusion and intent
- Unlikely to be pre-fabricated given programme and budget constraints and support the team's decision to go to market based on a traditional methodology.

A summary of key queries and comments:

- Budgetary support should be retained for the inclusion of planting, clear roof line and brick materiality
- Consider parking strategy and impact to site pinch points
- Consider structural strategies as they relate to facade choice and procurement
- Monitor budget constraints relative to overall project aspirations.

These comments have integrated into the design as represented in this document.

# CPTED

## Crime Prevention Through Environmental Design

**Crime Prevention through Environmental Design (CPTED) is a crime prevention strategy that focuses on the planning, design and structure of cities and neighbourhoods. It reduces opportunities for crime by using design and place management principles that reduce the likelihood of essential crime ingredients (law, offender, victim or target, opportunity) from intersecting in time and space.**

The design of the Northeast building and landscape applies CPTED principles to enhance safety and functionality. The following outline specific strategies employed

### Territorial Re-enforcement

- Community ownership of public spaces fosters a sense of care, encouraging their use and enjoyment while deterring crime through effective supervision and higher risks for offenders. The northeast building's design

reflects this through lasting and durable brick materials, cared for landscaping with tree canopies at entry points, and its role as a prominent, community-centred hospital. With a focus on health and community, the building connects to the public through its services and design tailored to Albury's local needs.

### Surveillance

- People feel safer in public spaces when they can see and interact with others, especially those connected to the area, such as shopkeepers or nearby residents. The Northeast Building enhances safety through features like large windows near entry points for passive surveillance, low plants to maintain visibility, and the placement of busy spaces (cafes, meeting rooms, conference rooms, waiting areas) near entrances. Windows provide clear views between internal and external areas, while CCTV, help points, and security personnel ensure monitoring and assistance as needed

### Access

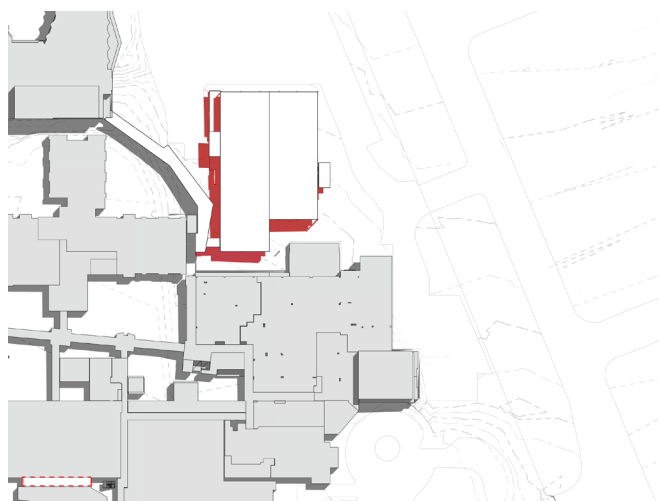
- Access control measures in the Northeast Building guide and manage the movement of people and vehicles, enhancing safety and crime prevention. Clear wayfinding ensures simple pedestrian routes

to and around the building. Landscaping, pavement, and building design intuitively direct visitors and staff to pathways and entry points. Doors and egress points are equipped with access control and monitoring, while external areas provide two-way movement and alternative route options for flexibility and security

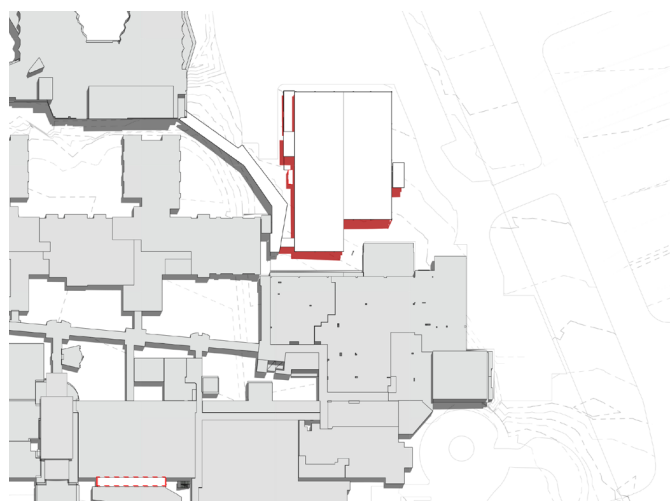
### Space / Activity Management

- Effective space and activity management is essential for maintaining community safety and natural control. The Northeast Building supports this by enabling hospital staff to monitor and care for public spaces, using durable materials and low-maintenance landscaping, providing both low and high-level lighting, ensuring active monitoring by security and maintenance teams, and extending existing facilities management strategies.

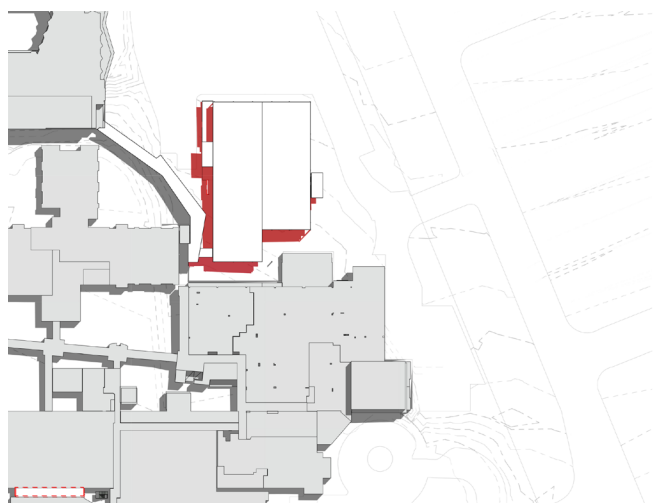
# SOLAR STUDIES



**Dec 21 - 9am**



**Dec 21 - 10am**



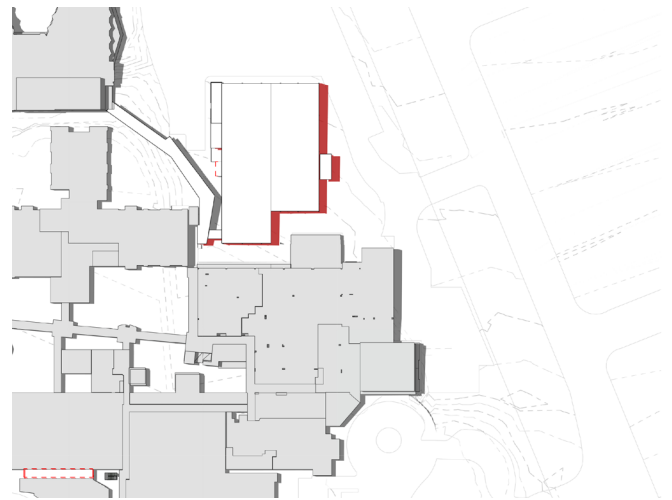
**Dec 21 - 1pm**



**Dec 21 - 2pm**



**Dec 21 - 11am**



**Dec 21 - 12pm**



**Dec 21 - 3pm**

# SOLAR STUDIES



**June 21 - 9am**



**June 21 - 10am**



**June 21 - 1pm**



**June 21 - 2pm**



**June 21 - 11am**



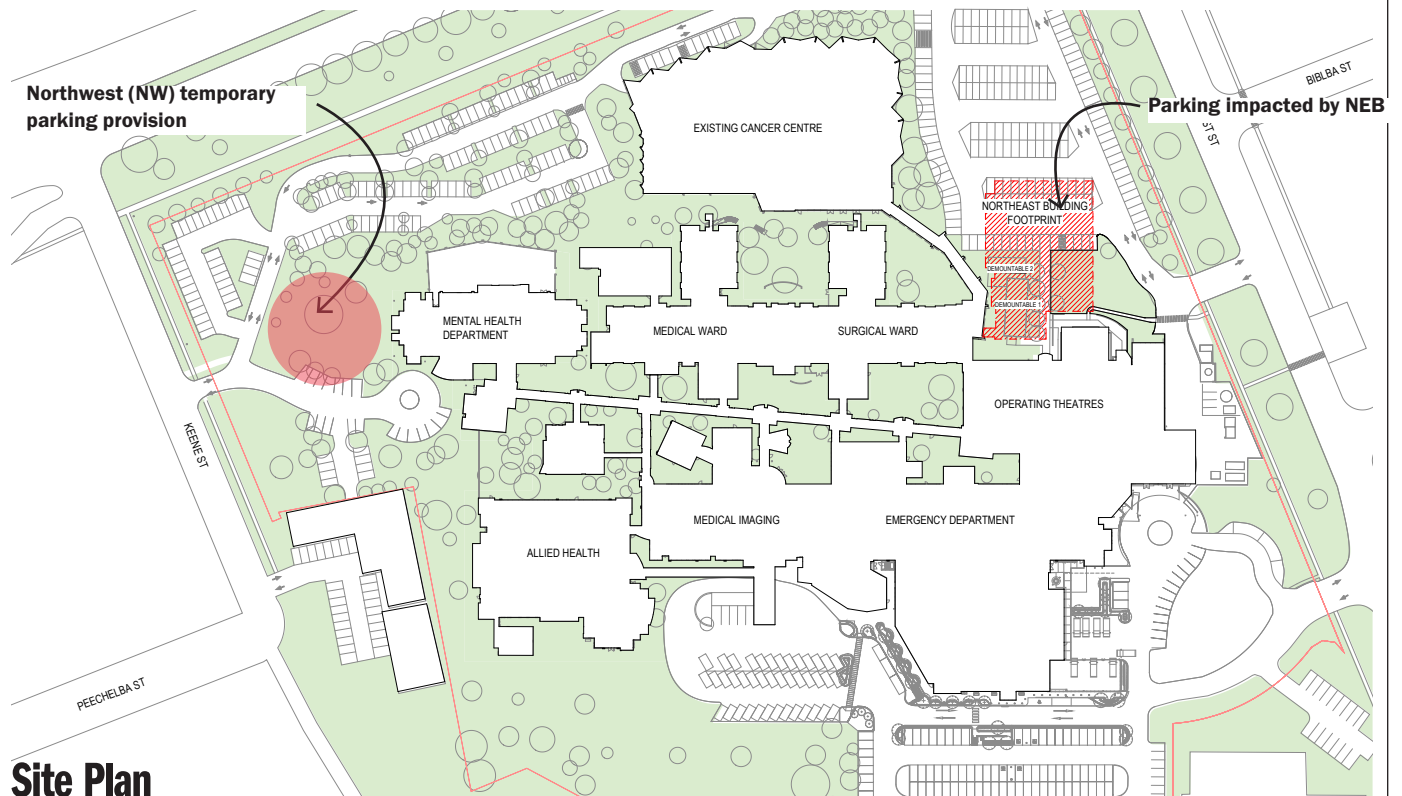
**June 21 - 12pm**



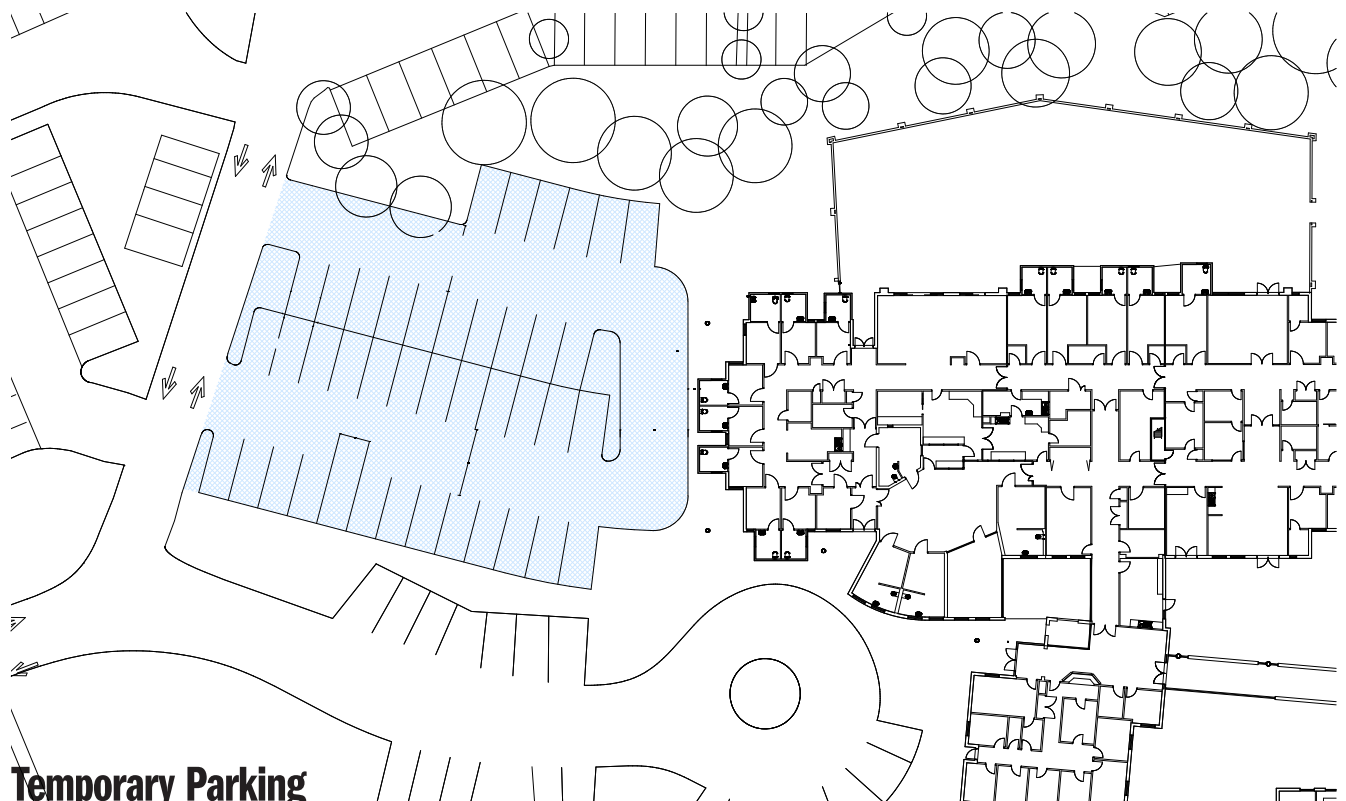
**June 21 - 3pm**

# TEMPORARY PARKING

**The existing extent of parking will be impacted by the Northeast Building. Prior to completion of the overall project, temporary parking will be constructed to mitigate parking number loss during construction. Refer Traffic Report (SCT) for further information.**



**Site Plan**



**Temporary Parking**



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