

5 May 2021



Phil Priest
 Director, Development Approvals and Design
 Department of Environment, Land, Water and Planning

Dear Mr Priest

St Vincent's Hospital Aikenhead Centre for Medical Discovery - Design Review April 2021

We thank DELWP for requesting a review of the St Vincent's Hospital Aikenhead Centre for Medical Discovery (ACMD) by the Victorian Design Review Panel.

The Office of the Victorian Government Architect's views, which are based on a meeting with Denton Corker Marshall, Lovell Chen, St Vincent's Hospital Melbourne and Contour on 6 April 2021, discussions with DELWP, Heritage Victoria and the City of Yarra, a site visit on 15 April 2021 and the Victorian Design Review Panel discussion are as per the following report.

If you require further clarification, please contact our office on 9651 6583 to discuss.

Yours sincerely,

Jill Garner
Victorian Government Architect

CC: Sarah Collie, DELWP
 Nicola Stairmand, Heritage Victoria
 John Theodosakis, City of Yarra
 Mary Osman, City of Yarra
 Wojciech Pluta, Project Architect, Denton
 Corker Marshall
 Peter Lovell, Heritage Consultant, Lovell Chen
 Andrew Crettenden, Project Director ACMD, St
 Vincent's Hospital Melbourne
 Andrew Rodda, Planning Consultant, Contour
 Lucy Kolomanski, Planner, Contour
 Libby Gordon, Project Manager, Johnstaff
 Kim Au, Project Manager, Johnstaff

Panel Members

The VDRP members who attended the design review session were Jill Garner (Chair), Tim Leslie, Helen Day, Dean Boothroyd and Peter Williams.

Confidentiality

The advice contained in this letter and attached report is offered in confidence.

The OVGA will use reasonable endeavours to keep information confidential. For instance, VDRP panel members are subject to a duty of confidentiality.

The advice contained in this letter and report is confidential but the OVGA reserves the right to provide its reports, advice and documents relating to panel hearings to other parties, such as the Minister, responsible authority or decision maker. The OVGA also reserves the right to authorise others to distribute its advice and reports more broadly where it deems necessary to do so; for instance, to accord natural justice.

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VICTORIAN DESIGN REVIEW PANEL

St Vincent's Hospital

Aikenhead Centre for Medical Discovery (ACMD)

27 and 31 Victoria Parade, Fitzroy

April 2021

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Documentation

Information presented at review:

- Digital presentation by Denton Corker Marshall

Information provided to panel ahead of review:

- Architectural design report and drawings, Denton Corker Marshall Architect
- Heritage Impact Statement, Lovell Chen
- Sustainable Management Plan, LCI Consultants
- Town Planning and Urban Context Report, Contour
- World Heritage Environs Area Strategy Plan: Royal Exhibition Building and Carlton Gardens, October 2013
- Review of the Royal Exhibition Building and Carlton Gardens World Heritage Management Plan, Discussion Paper, DELWP, 2020

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St Vincent's Hospital Aikenhead Centre for Medical Discovery Design Review Report – April 2021

The Department of Environment, Land, Water and Planning (DELWP) requested an independent design review of the St Vincent's Hospital Aikenhead Centre for Medical Discovery (ACMD) by the Victorian Design Review Panel (VDRP). We thank Denton Corker Marshall for their presentation of the project, and DELWP, the City of Yarra, Heritage Victoria, St Vincent's Hospital Melbourne, Lovell Chen, Contour and Johnstaff for attending the review. This is the first review of the project. The proposal is currently subject to a planning application.

The site is one of the most prominent and unique in inner Melbourne. Embedded within the St Vincent's Hospital precinct, the site is located on the intersection of Nicholson Street and Victoria Parade in Fitzroy on the edge of Melbourne's CBD. It is opposite the Carlton Gardens and Royal Exhibition Building, which are inscribed on the UNESCO World Heritage List. The site is included in the World Heritage Environs Area (WHEA) although does not form part of the Area of Greater Sensitivity as identified in the World Heritage Strategy Plan. As such, the site is not included in the World Heritage Environs Area Precinct which triggers policy guidance for the WHEA Area of Greater Sensitivity. It is understood that a review of the World Heritage Management Plan (WHMP) is currently underway and it is possible that a strengthening of the planning controls will form part of the review.

St Vincent's Hospital and its project partners aim for the ACMD to become Australia's first hospital-based biomedical engineering facility with a focus on research and education. The project is funded by Governments (State and Federal), St Vincent's Hospital and project partners that include universities, medical research institutes and health services. The proposal is to:

- demolish the existing 11 storey Aikenhead building,
- demolish the Daly Wing infill building,
- demolish most of Brennan Hall leaving 7 m on Victoria Parade, and
- construct a new 11 storey building on the site.

A new landmark building is proposed. The glass façade draws inspiration from crystalline structures associated with ACMD biomedical research. All elevations aim to maintain a consistency in architectural expression by using a standardised façade module with changes in materiality to suit functional requirements.

Summary issues

This report provides an overview of the VDRP discussion and issues raised in the review.

Currently subject to a planning application, the design might be considered well advanced, however we propose the architectural expression requires significantly more detailed consideration. It is important that design, detail and construction is of the ambition, quality and integrity reflective of the significance of the site and the ACMD. Further development and articulation of the proposal is critical for this to be achieved. A summary of key issues includes:

- A comprehensive masterplan for the entire St Vincent's Hospital campus is needed to understand the future built vision for the precinct and the role of the ACMD within it.
- We see value in the retention of Brennan Hall and recommend further exploration of how the proposal might leverage from its cultural and institutional significance and its formal 'difference'.
- While we can in principle accept the height, mass and 'object' status of the concept, it is

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critical that this proposal does not set a precedent for the remaining campus regarding height, mass and materiality.

- The architectural language, façade expression and detailing require further consideration and articulation.
- If this building is to signify the corner, it needs to be considered in the round - all four façades need to be acknowledged and detailed.
- We are concerned about the proposal's 'commercial' design language – the departure from an existing site character needs to be more convincing and more clearly 'not commercial'.

Precinct Masterplan

A comprehensive masterplan for the entire St Vincent's Hospital campus is needed to understand the future built vision for the precinct and the role of the ACMD within it.

The St Vincent's Hospital precinct is in a prominent and important location, opposite a UNESCO world heritage site and just outside the Hoddle Grid, only separated from the Melbourne CBD by Victoria Parade. The proposal was presented as the first stage of several planned by the St Vincent's Hospital. Without fully understanding the longer term vision, ambition, intention and potential future context, it is challenging to anticipate the full implications of the ACMD proposal. An informed judgement should ideally be based on understanding the bigger picture.

We consider a site masterplan for the St Vincent's precinct is critical to clarify the future ambitions for the campus. A study of future / long-term volumes, open space, connections, built form, public realm and landscape is needed. The cumulative impact of different stages on the qualities of the precinct needs to be clearly understood. A masterplan vision can ensure a coherent outcome is achieved, future potential is maximised and unintended consequences are avoided. We recommend that design guidelines are articulated to inform a preferred architectural language across the campus to ensure consistency, to create a positive design legacy and to be respectful of the site's heritage. The site masterplan needs to be fully appraised with a commitment to its guiding the appropriate form, finish and quality of all future developments. A site masterplan would work to frame the intended approach to this ACMD building within the context of its possible future surroundings.

As the first stage in a future vision for the larger site, this proposal must work with, not preclude the precinct's future potential. For example, the lane located to the north of the ACMD site should be given a name and 'presence' in the masterplan. Depending on the laneway's role within its broader context, locating the ACMD's services and back of house here may need to be revisited.

The ACMD marks the corner of two wide boulevards and is a gateway site, so a 'distinctive' design solution for this site is appropriate. As the first stage in a larger vision, the ACMD can be treated as a benchmark building that sets a standard for design, detailing and construction quality across the campus.

A masterplan should formulate the approach to the site's existing heritage fabric.

The partial demolition of Brennan Hall does not engage with or reflect its unique and relevant history. We acknowledge there are challenges with retaining and integrating Brennan Hall due to its condition and its structure being linked to that of the existing Aikenhead building. However, we see considerable value in its retention given its cultural and institutional significance and the

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international context of it being one of only four (of its type) in the world. In the context of a precinct masterplan, its formal 'difference' is likely to be important. Rather than a constraint, Brennan Hall could be understood as an opportunity. We recommend exploring how the design might better leverage the site's existing heritage fabric, possibly integrating the space as part of the proposal to alleviate floor area pressure. Both short- and long-term interfaces between the Hall, the new ACMD and the campus need to be better understood and more carefully addressed.

Height and Massing

The height of the ACMD is not to set a precedent for the height and bulk of the remaining campus.

Images suggest that the height of the new ACMD will not negatively impact the dome of the Royal Exhibition Building. It does not appear to block key viewlines or compete in terms of style or prominence due to the distance and dislocation from the Royal Exhibition Building. While the height and massing of the ACMD are not an issue in principle, we do not support this setting a precedent, or suggesting a departure from, the existing scale of the St Vincent's Hospital precinct in general. We would not support a (future) second stage to the east being of a similar height or mass. This would result in a poor urban outcome, creating a sheer street wall to Victoria Parade.

The particular site conditions, including its location on a corner and the Carlton Gardens located to the West, support the concept of a singular volumetric object of this scale. We acknowledge and do not have a problem with the need for increased floor to ceiling heights to accommodate services needed for a facility of this nature. There is value inherent in enabling institutions like this one to grow, upgrading medical facilities on site and extending biomedical engineering and translational medtech research opportunities within this precinct.

Architectural Expression and Articulation

We have reservations regarding the proposal's complete departure from the existing architectural expression of the St Vincent's Hospital precinct.

The confluence of the site's corner position at the threshold of the city adjacent to significant boulevards and parkland and surrounded by masonry buildings are formative features that this design could more strongly respond to.

Cream brick is a key feature of the existing St Vincent's campus and this separates the architectural expression from its city context. Victoria Parade acts as a line of demarcation and we are concerned this proposal suggests a significant departure from the site's heritage, possibly establishing an undesirable precedent for future proposals. We are not convinced by the commercial expression that references nearby buildings to the south, such as Orica (ICI) House. If there were elements integrated as part of the façade expression and articulation that reference its masonry context it may recall the current Aikenhead building. If it is to be a distinctive 'glass object', what are the qualities and detail that makes it non-commercial to appropriately differentiate it from the city context south of Victoria Parade?

While we support the clear and simple intention of the architectural expression, it requires further articulation.

Given the particular nature of this site, a contemporary intervention that holds the corner is generally supported. We acknowledge the design response is linked to the building's purpose of

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being a biomedical engineering and research facility. However, we question how a 'landmark building' is possible in a campus context.

For this concept to be successful, the architectural language, detail and quality of construction needs to be excellent - potentially 'exquisite'. Another layer of articulation of façade, mass and form is needed. While the current Aikenhead building is of a similar scale and proportion, its mass is broken down by considered articulation of the façade and ground floor definition. This articulation is currently lacking from the proposal and it is important to understand and explore how similar interest and definition can be achieved.

The building and façade expression need to be considered in the round.

If the architectural intent is for the building to be understood as a sublime object on the corner of an important site, the building needs to be better designed in the round. While the mass of the south and west façades have been articulated by introducing cut outs, vertical gardens, and 'movement' between glass panels, the north and west façades are flat and blank (suggesting connection to future adjacent buildings). Critically, as a corner object, all four elevations need to be acknowledged, addressed and detailed. Assuming that two façades will be covered by future developments contradicts the intent of the ACMD being a landmark building. North and east facades are highly visible upon approach, as gateways to the city. The north façade will also be highly visible from the Royal Exhibition Building and therefore needs to be treated with particular consideration.

The façade performance requires further development.

Given the intent for this to be a state-of-the-art biomedical engineering and research facility, its prominent location and government funding being involved, we would expect the façade performance to go beyond a business as usual approach and be used more deliberate. We recommend embedding passive design principles within the façade. Tilted glass panels could be designed to correspond with ESD principles and also serve to mitigate wind conditions on the ground. Rainscreens might be added to break down the sheer façade and provide an opportunity to reference the masonry context and site heritage.

The glass façade needs to be developed to avoid any visual clutter.

If the façade is glass as indicated, interiors will be highly visible from the outside. There are many uses likely to be accommodated that will result in visible clutter, including equipment and workbenches. There is opportunity to develop the façade expression to screen cluttered interiors.

Attention to detail and prototypes are needed.

Glass is a challenging building material if the connotations of a commercial typology is to be avoided. Exploration of expression and well considered detailing will be critical to the success of this proposal as a beautiful object. Time and effort are needed for this to be developed. It is important the design team is given appropriate time and is engaged through to completion of the project. The behaviour of glass can be difficult to predict and often different to that anticipated in modelling, so we consider prototypes will be an essential part of the process to ensure glass behaviour and performance is fully understood.

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Lecture Theatre

We consider projecting the lecture theatre over the Nicholson Street footpath has the potential to signify the corner and highlight the entry to the ACMD. There may be aspects within the existing fabric, for example the undercroft of the Bolte building, that offer inspiration on further articulating and refining the proposal's presence on the corner.

The user experience of the protruding lecture theatre could be better considered. If this form is able to be occupied, there is opportunity for delightful engagement with the Royal Exhibition Building and gardens. As an example, the glass back wall of Deakin Edge at Fed Square offers a unique river backdrop for the space and this theatre could leverage its site location in a similar deliberate gesture.

Layout and Amenity

The approach to program needs to go beyond 'business as usual', given this is pitched to be a state-of-the-art medical research facility. The ground floor plane seems too constrained, compromising the quality of the user experience. More generosity is recommended. We recommend exploring how some of the program could be decanted – if Brennan Hall was to be retained some of the uses might be accommodated here.

In the interest of best practice, we recommend gender neutral toilets be integrated into the project.

This advice is to supplement the advice provided by DELWP and the City of Yarra in their negotiations with all parties. There may be both strategic and technical issues not raised in this letter that will require resolution.

Thank you for the opportunity to review this important project for the City of Yarra and Victoria.



Jill Garner
Victorian Government Architect