

		<b>FRAC INFORMATION PAPER</b>
		<b>Date: 16 November 2018</b>
<b>Author</b>	John Manning, Property and Facilities Manager	
<b>Endorsed by</b>	Dale Oliff, Chief Executive Officer	
<b>Reviewed by</b>	The Executive Leadership Team (reviewing on 28 November 2018)	
<b>Subject</b>	Ministry Of Health Seismic Quarterly Update	
<b>RECOMMENDATION</b> It is recommended that the Committee: <ul style="list-style-type: none"> <li>a) <b>NOTES</b> the content of the report outlining the current seismic status of HVDHB owned buildings on the Hutt campus</li> </ul>		
<b>APPENDICES</b> <ul style="list-style-type: none"> <li>1. Ministry of Health quarterly seismic report</li> </ul>		

**1. OVERVIEW**

HVDHB has no earthquake prone buildings (EPBs) in its portfolio and as such no legislative requirement under the recently passed “The Building (Earthquake-Prone Buildings) Amendment Act 2016”, or the Hutt City Council bylaws to initiate any work related to seismic integrity.

There are a number of buildings scoring just above the 33% cut off for Earthquake Prone Building (EPB) designation. These could be considered a risk to occupants in an earthquake. Options available to the DHB at this time are either (a) strengthening to an agreed level of NBS, (b) redevelopment (including strengthening) or (c) demolition. These options need to be considered in the context of a **Campus wide Master Site Plan**.

A detailed Clinical Services Plan is being worked on now, which is expected to be completed by late 2018, and this will support and inform the DHB’s requirements for future buildings and facilities, which will see the development of a **Master Site Plan**, completion date is planned for mid to late 2019.

From the Master Site Plan, appropriate investment decisions can be made as to the future of the campus building stock, with particular regard to Seismic considerations.

**2. NON-STRUCTURAL SEISMIC RISK**

Under H&S legislation, the DHB is required to identify and mitigate risk arising from any non-structural building component that could cause harm in a seismic event, such as unsecured furniture, heavy plaster ceiling tiles, plant and equipment, lighting, etc. Late 2017, HVDHB engaged a specialist engineer to undertake a preliminary survey of non-structural elements and provide a report. The report highlighted some areas that fall short of the desired NZS4219, for securing non-structural elements.

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HVDHB has compiled a list of the most obvious items that represent a high risk ie, water storage tanks bracing and pipework, water shut off valves, passenger lifts control cabinets, and heavy ceiling tiles. Business cases approved for remedial works, which began in April 2018. This work is likely to take up to three years to complete.

**3. PRIORITY BUILDINGS**

Note that the DHB has already undertaken seismic assessments of all buildings on the campus, and there are no EPB's. The Hutt Valley DHB is situated within a High Risk Zone, and has Priority Buildings on site, under the MBIE definitions of priority buildings.

Definitions: Section 133AE(1)(a) of the Building Act 2004 says that a priority building means:

- a) A Hospital building that is likely to be needed in an emergency (within the meaning of the Civil Defence Emergency Management Act 2002) to provide –
- Emergency medical services: or
  - Ancillary services that are essential for the provision of emergency medical services.

**Table 4: hospital buildings used for emergency purposes**

Type of hospital building	Likely to be included or excluded as a priority building	Reasons
Operating theatre	Included	Used for emergency medical services
Emergency room (ER)	Included	Used for emergency medical services
Integrated Family Health Centre or community services	Excluded	No linkage to emergency medical services or providing emergency services
Maternity ward	This depends on the internal practices of the DHB	Only included if it provides emergency medical services
Mental health facilities	Excluded	No linkage to emergency medical services or providing emergency medical services
Aged residential care facility	Excluded	No linkage to emergency medical services or providing emergency services
Ancillary services	Included, but only those essential for the provision of emergency medical services	For example, a building that holds the back-up power generator for the hospital is likely to be included but a building that serves as a kitchen/laundry or other ancillary service is likely to be excluded.  Facilities such as the pipe connections for heat, steam or power are not in scope of the earthquake-prone building provisions

Given the above, Hutt Valley DHB believes our priority buildings are:

- EDT (new building) – Emergency Department & Theatre Block (also contains CSSD central sterile, and 2 x Generators) building #227. It is rated at 100% NBS at I.L.4;
- EDT (older building) – ICU (intensive care unit) building #221. It is rated at 100% NBS at I.L.4;
- Heretaunga Block – (Radiology, CT and MRI scanners, Maternity & delivery) building #201. It is rated at 43% NBS at I.L.3;
- Garages – (2x Generators) building #219. It is rated at 100% NBS at I.L.3.

The table below identifies all buildings below 67%NBS (defined as Earthquake Risk under the Building Act) and the current activity and estimated costs around improvement of structural integrity.

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Building	%NBS	Current activity
Clock Tower Annexe Bldg 207 (Food Services Building)	36%	The DHB is investigating options for this building within the context of the future plans for the service and the wider hospital campus. A proposal to relocate the Kitchen / Cafeteria services was tabled with ELT 2017. Costs to strengthen to 67%NBS estimated at \$1,945,000 - \$2,600,000 (2012 prices). Pricing excludes any other refurbishment or upgrade costs that may be opportune to address during any disruption. 2017 cost estimates now put this work at \$3.5M
Heretaunga Ward block Bldg 201	43% longitudinal 48% transverse for an IL3 building	Two concept schemes have been presented for strengthening building to above 67% NBS. Estimated concept preliminary only costs. Scheme (1) \$14,320,000 Scheme (2) \$17,320,000 Pricing excludes any other refurbishment or upgrade costs that may be opportune to address during any disruption. 2017 cost estimates now put this work at \$23M
Care Ward Block Bldg 218	35%	Building remains at 35% due to transverse walls as the lowest scoring component. Highest scoring component is the lift and shear core at 75%NBS Estimated cost to strengthen is \$1.2M. Pricing excludes any other refurbishment or upgrade costs that may be opportune to address during any disruption. 2017 cost estimates now put this work at \$1.7M
Pilmuir House Bldg 212	60%	Costs to strengthen to 67%NBS estimated at \$2M. Pricing excludes any other refurbishment or upgrade costs that may be opportune to address during any disruption. 2017 cost estimates put this work at \$2.5M
Clock Tower Main Bldg 203/4/5/6	34%	Costs to strengthen to 67% NBS estimated at \$3M. Pricing excludes any other refurbishment or upgrade costs that may be opportune to address during any disruption. 2017 cost estimates put this work at \$4M
F.Block Bldg 208	44%	Costs to strengthen to 67%NBS estimated at \$1M. Pricing excludes any other refurbishment or upgrade costs that may be opportune to address during any disruption. 2017 cost estimates now put this work at \$1.4M
Kowhai Centre Bldg 214	39%	This building was closed late 2016 due to several major compliance related issues, for a building that was designated for overnight sleeping accommodation. Several options are being considered for short term use, with a view to likely demolition in 4-

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		5 years after site master planning is confirmed. Short-term usage may include records storage, with a downgraded BWOFF to reflect the new use.
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