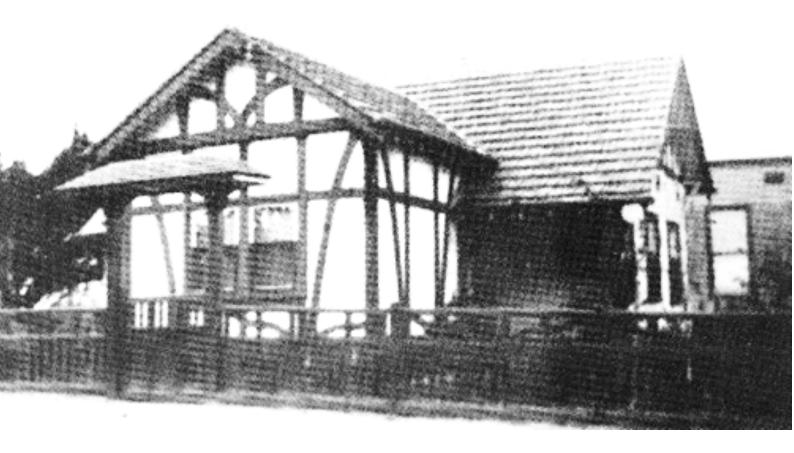


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HERITAGE IMPACT STATEMENT

WORKS FORMING PART OF THE CROYDON COMMUNITY
WELLBEING PRECINCT AT THE
MATERNAL & CHILD HEALTH CENTRE VHR H0054
1 CIVIC SQUARE, CROYDON



PREPARED FOR:

Maroondah City Council

DATE:

19 September 2025

FILE:

2022-087

PROJECT TEAM

Jim Gard'ner | Director

Jessica Hogg | Heritage Consultant

Cover page image: Maternal & Child Health Centre viewed from Civic Square (c .1930)

(Source: Highlights of the history of Croydon, p 93)

DOCUMENT VERSIONS

Project No.	Version	Issued To	Date Issued
2022-087	Draft v1	Sze Lay Ng, Senior Assets Project Manager, Maroondah City Council	18 March 2025
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SUMMARY

HERITAGE IMPACT STATEMENT FOR:

[Former] Maternal & Child Health Centre, 1 Civic Square, Croydon

VICTORIAN HERITAGE REGISTER (VHR) NUMBER: H0054

The works associated with the development of the adjacent Croydon Community Wellbeing Precinct (CCWP) including landscaping works, tree removal and fencing as well as a suite of conservation (repainting and timber repair) works to the retained maternal and child health centre building.

PRE-APPLICATION MEETING NUMBER: P39295

Architectural drawings and photographs were provided to Heritage Victoria in February 2024 and a pre-application response letter was received on 7 February 2024 [P39295], which requested that a full heritage permit be lodged under s.93 of the *Heritage Act 2017*.

Additionally, a planning permit application [M/2024/901] for the broader Croydon Community Wellbeing Precinct project was submitted in late 2024. Subsequently Council's planning department referred the planning permit application to Heritage Victoria, who issued further pre-application advice in the form of a letter dated 14 February 2025 (reference P40751). The letter included feedback pertaining to the impact of the scheme shown in the planning permit application in terms of the architectural context, landscaping and external features, proposed diagonal path and historical changes to the Maternal & Child Health Centre.

REQUEST FOR FURTHER INFORMATION:

Following lodgement of the application on 6 May 2025 Heritage Victoria issued a Request for Further Information (RFI) letter on 17 June 2025. The RFI was not responded to prior to the 17 July 2025 deadline and therefore permit application P39295 lapsed. This HIS addresses the information sought in the RFI and supports the new permit application which has substantially reduced tree removal and a narrower, redesigned path. The revised value of the works is \$98,000.

ADDRESS AND LOCATION DESCRIPTION:

The heritage place building is located at the corner of Mt Dandenong Road and Civic Square, Croydon and comprises the Tudor-Revival style Maternal & Child Health Centre building [B1] and the Lych Gate [B2] addressing Civic Square.

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PREPARED FOR:

City of Maroondah

1 BACKGROUND

The Maternal & Child Health Centre at Croydon (the heritage place) is of historical, architectural and social significance to the State of Victoria and was included in the Victorian Heritage Register (VHR) as heritage place H0054 in 2005.

Operating since 1930 until recently, the Maternal & Child Health Centre is proposed to form part of the larger Croydon Community Wellbeing Precinct (CCWP) project based in the adjacent Croydon Entertainment Centre (Croydon Hall) at 202-210 Mt Dandenong Road, Croydon, which is included as HO108 in the Schedule to the Heritage Overlay of the Maroondah Planning Scheme. An amended planning permit for the CCWP project was issued by Maroondah City Council (Council) on 2 June 2025 (M/2024/901/A).

This Heritage Impact Statement (HIS) assesses the impacts that the proposed works required to facilitate the development of the CCWP will have on the cultural heritage significance of the Maternal & Child Health Centre and its setting. The works to the heritage place are relatively limited and principally comprise landscaping works including the creation of a new path, tree removal, new signage and fencing and repainting of the heritage building and lych gate, which are proposed to be retained in their entirety.

All photographs were taken on 30 January 2023 or 5 June 2025 by GJM Heritage unless otherwise stated.

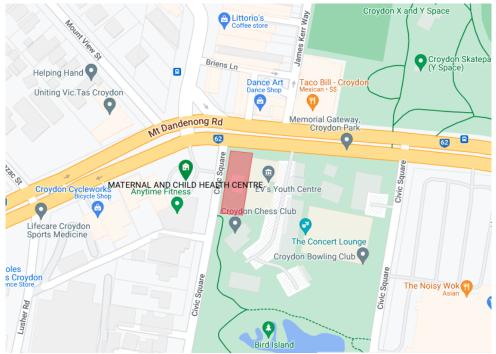


Figure 1. Location map of the heritage place - indicated (Source: HermesOrion database).

2 HISTORY

An extensive history is provided in the citation for the place (attached to this memorandum) available on the Victorian Heritage Database. The following history draws from and summarises that provided in the citation, which is attributed to Michele Summerton and Cheryl D. Crockett.

The heritage place forms part of the traditional lands of the Kulin Nation and was frequented by Wurundjeri Woi Wurrung peoples.

The health of mothers and babies became particularly topical in Australia in the early twentieth century. Pregnancy and childbirth as well as early infant care became the focus of medical research and attention, and better health care for these groups was advocated for by women's groups. The rhetoric of the time described the grave concerns society had around these issues, such as when in 1928 the Royal Commission on Health reported that maternal mortality and disability constituted a 'grave and national danger.'

Education was put forward as one solution. For example, medical practitioners encouraged breast feeding over cow's milk. In order to improve education on the 'feeding, nursing and care of infants,' the establishment of ante-natal and infant clinics was recommended across Victoria, taking inspiration from the already-established baby clinics in New South Wales and similar facilities in England.

The government was not initially responsive to this recommendation. In May 1917, three women opened the first baby health clinic in Victoria in a Richmond shop offered by the local Council, in a voluntary capacity. The following year, the Victorian Baby Health Centre Association had been formed, still in a voluntary capacity, to oversee the replication of the baby health centre model throughout the suburbs. The service relied on voluntary aid, in some capacity, until 1976 when it was incorporated fully into local health services.

The construction of purpose-built baby health centre buildings was not an official priority in the early years of the movement. Centres were typically opened in any available location or space that could accommodate their needs, such as RSL buildings, municipal halls and churches. In the wake of a report submitted to the Health Minister by key members of the State-run Infant Welfare Section, it became evident that communities were intent on providing permanent accommodation for infant welfare activities. Some funding was made available, however much of the onus was on local councils, especially early in the movement between 1920 and 1950. Very few centres from this period survive, and those that do are an enduring testimonial to the strength of the baby health centre movement in Victoria and the determination of local women.

The first committee of the Croydon Baby Health Centre was formed in January 1927 with Mrs Douglas Lilley as President, Mrs HC Turner (mother of Dame Phyllis Frost) as Secretary and the Shire Secretary Mr Winterburn as Treasurer. Croydon's first centre opened in the Mechanic's Hall in February 1927 and Beatrice Chalmers appointed as the first Sister. Permanent, purpose-built quarters were opened in July 1930 by the President of the Lilydale Shire, Cr. W. J. Watson. The council had donated the land and contributed to the cost of the building with the committee raising the remaining funds. The building was described as being "of picturesque design, typical of an English village cottage". The building was designed by Marcus Barlow (1890-1955) who was believed to have donated his services.

A number of alterations and additions have been made to the building to accommodate expansion and changes to the service. The building was extended to the south by the addition of a toddlers' room and a pram shelter in 1959 to plans drawn up in Barlow's office, 'Marcus Barlow, Van Rompaey & Kerr', 1956. Originally the entrance was from the side of the porch into what was then the waiting room. The rest of the space was divided into a consulting room, kitchenette and a test feed room. In 1966 the main entrance was moved to its current position, replacing a window, and the waiting room converted to a consulting room. The new waiting room area was opened up by the removal of walls with the test feed room moved to an addition along the north side and the toddlers' room converted to a kitchen.

Croydon became important as the hub health centre for the expansion of baby and maternal services in the outer eastern area. The building has been used continually as a baby health centre since its opening.





Figure 2 (at left) and Figure 3 (at right). Croydon Maternal & Baby Health Centre, c 1930 (Source: Highlights of the history of Croydon, p 93)



Figure 4. Historic aerial image of the two heritage buildings at Mount Dandenong Road, showing early tree planting arrangement. Subject site at left. (Source: Melbourne and Metropolitan Area Project, December 1945, Run 12, Landata)

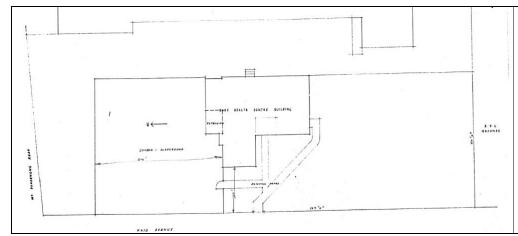


Figure 5. 1966 site layout plan, showing 'garden playground' at north end of the site and main entry with footpaths from the west (Haigh Avenue, now Civic Square). (Source: Council building files)

3 DESCRIPTION

The former Maternal & Child Health Centre is located at the far northeast corner of the CCWP site, addressing Civic Square to the west. Access is via a timber-framed lych gate with timber shingle roof on the west boundary, or from the south via an at-grade car park. The topography slopes gently down from Mount Dandenong Road to the southeast.

A single-storey gable-roofed building is approximately centrally located on the site. The building is approximately L-shaped in plan, with the long section (and main gable roof ridgeline) parallel with Civic Square, and a projecting gable-end extending west at the northern end of the principal (west) elevation. The roof is steeply-pitched and clad in terracotta tiles, with visible projecting rafter ends at shallow eaves. Simple timber bargeboards finish the gable ends, which project slightly and are lined with timber lining boards. A single chimney with staggered chimney breast is located at the western end of the north elevation. The terracotta chimney pots described in the Statement of Significance are missing.

Walls are timber-framed, with imitation half-timbering painted brown and infill rendered panels. Windows are timber-framed sash windows with architraves and sills all painted white, with diamond quarries set in lead frames to the older (northern) section windows and a six-over-one glazing pattern to the southern additions. An awning with timber brackets is located over the infilled aperture of a removed rear door at the east elevation.

A portico is located at the internal corner of the L-shaped plan, with a deeply recessed main entry. The heavy timber door suite is original. A small metal plaque mounted on timber backing is located within the portico and commemorates a 'Mrs May Lilley'. The interior contains original architectural elements including architraves to the doors and windows, wainscoting (dado) and picture rails, cornices and decorative ceiling battens, noting that these have all been overpainted. The hearth has been infilled. The interior spaces have been subject to a number of fit outs throughout its history.

A collection of objects is stored in the room at the southwest corner of the building and is thought to contain the heritage-listed objects noted in the Statement of Significance.

A metal hanging sign is mounted on a decorative bracket at the principal (west) elevation that reads 'CROYDON BABY HEALTH CENTRE.' Part of the weathervane with stork-carrying-baby motif appears to be missing with the base of the weathervane with cardinal letters mounted on the apex of the gable end over the principal elevation.

The Maternal & Child Health Centre occupies a treed landscape that is domestically scaled. A timber fence evident in an historic photograph from c.1930 (Figure 2) has been replaced by later metal fencing and gates. A later outbuilding is to the building's northeast and adopts Tudor Revival style. Overgrown vegetation along the boundaries largely obscures the building from public realm views.



Figure 6. Existing view looking southeast to subject site from the intersection of Civic Square and Mt Dandenong Road



Figure 7. Looking east across Civic Square roadway towards principal (west) elevation of the Maternal & Child Health Centre (largely obscured by mature trees) showing lych gate entry.



Figure 8. Closer view of lych gate (with later infill fencing) showing timber shingle roof and timber framing.





Figure 9 (left). Detail view of lych gate timber detailing.

Figure 10 (right). Detail view of lych gate commemorative plaque reading "ERECTED TO THE MEMORY OF BEATRICE CHALMBERS 1ST SISTER IN CHARGE OF THIS CENTRE WHO DIDED WHILST ON DUTY 27TH MAY 1931."



Figure 11. Looking north to main entry of building, showing imitation half-timbering, exposed eaves brackets, timber-framed sash windows, diamond pane glazing, etc.



Figure 12. Detail of main entry in recessed portico.



Figure 13. Detail of projecting gable end at principal (west) elevation.



Figure 14. North elevation, showing chimney breast and other historic detail.



Figure 15. Similar view of north elevation showing chimney detail.



Figure 16. Closer view of main entry in recessed portico.





Figure 17 (at left). Looking south along rear (east) elevation.

Figure 18 (at right). Infilled rear doorway at approximate centre of east elevation with awning.









Figure 19 (at left). Hanging wrought iron sign mounted on principal (west) elevation at gable end.

Figure 20 (at right).

Weathervane at roof ridgeline over west-facing gable end (note: no stork detail)

Figure 21 (at left). Plaque mounted in entry portico reading 'In Loving Memory of Mrs. May Lilley the First President of the Croydon Baby Health Centre Committee."

Figure 22 (at right). Later outbuilding.





Figure 23 (at left). Original front door suite detail.

Figure 24 (at right). Early screen door detail at main entry.





Figure 25 (at left). Interior view looking northeast.

Figure 26 (at right). Interior view looking north.





Figure 27 (at left). Interior view looking southeast.

Figure 28 (at right). Interior view east.

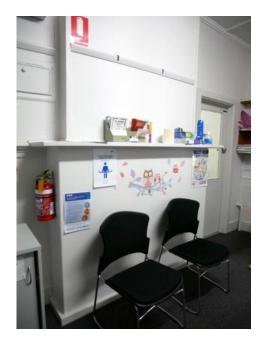




Figure 29 (at left). Infilled original fireplace.

Figure 30 (at right). Later kitchen fitout.

4 CULTURAL HERITAGE SIGNIFICANCE

The Maternal & Child Health Centre at Croydon is of historical, architectural and social significance to the State of Victoria and is included on the Victorian Heritage Register (VHR) as heritage place H0054.

4.1 Extent of Registration

The extent of registration for H0054 includes land, buildings and structures and objects, as follows:

 All of the building and structure marked as follows on Diagram 54 held by the Executive Director:

B1 Building B2 Lych Gate

2. All of the following objects:

1937 Measuring Table Croydon Baby Health Centre Committee Minute Books, 1926Ð1950 (4 volumes)

Croydon Baby Health Centre Nurses Report Books, 1927-1969 (2 volumes)

3. All of the land marked L1 on Diagram 54 held by the Executive Director being part of the land described in Certificate of Title Volume 3309, Folio 767.

We note that a mapping error has resulted in the mapped extent (available from DataVic and as depicted in VicPlan) of both H0054 and the Heritage Overlay (H013 – Maroondah Planning Scheme) for the Maternal & Child Health Centre not aligning with the actual registered extent included in the VHR described by Diagram 54. The registered extent of the VHR listing takes precedence over the VicPlan mapped extent as well as the Heritage Overlay. The mapping error and discrepancies are illustrated in Figure 6. Note: this discrepancy does not affect this assessment.

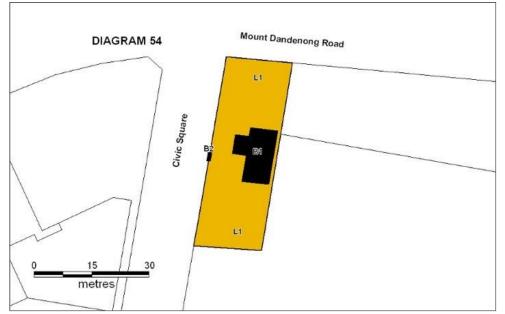


Figure 31. Diagram 54 as held by the Executive Director, Heritage Victoria, describing the extent of registration for H0054 which includes all of the land marked 'L1,' and all of the building and structure marked as follows: B1 Building and B2 Lych Gate. (Source: Victorian Heritage Database, accessed 7 February 2023)



Figure 32. Aerial map overlaid with the extent of registration for VHR H0054 (Source: VicPlan)



Figure 33. Aerial map overlaid with the Heritage Overlay (pink), showing HO108 – Croydon Entertainment Centre and HO13 – Maternal & Child Health Centre (Source: VicPlan)

Note: the extent of registration included in the Victorian Heritage Register for the Maternal & Child Health Centre does not match that of HO13, and HO108 extends west into the VHR registered land.

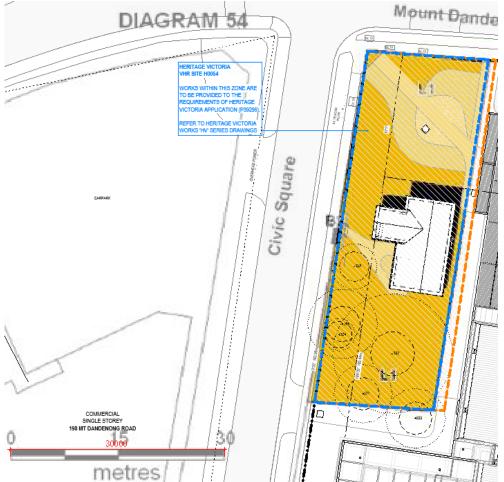


Figure 34. Drawing (prepared by CO.OP Studio (March 2025)) of subject site overlaid on Diagram 54, showing scale bar, showing interpreted (actual) extent of registration in blue.
VicPlan/DataVic boundary polygon shown in orange.

4.2 Statement of Significance (VHR)

The Statement of Significance for the Maternal & Child Heath Centre provided describes its historical, architectural and social significance to the State of Victoria, as follows:

What is significant?

The health of mothers and infants became of increasing concern in the first decades of the twentieth century. The early baby health movement was driven by committed volunteers frustrated at government inaction. Dr Isabella Younger Ross (1887 – 1956) who had studied infant health in England helped set up Victoria's first baby health clinic in Richmond in 1917. By 1918 the voluntary Victorian Baby Health Centres Association (VBHCA) was formed to oversee the growing number of centres. Financial support also came from local councils and in 1926 the State government formed the Infant Welfare Section of the Public Health Department and appointed Dr Vera Scantlebury Brown as the first Director.

The first committee of the Croydon Baby Health Centre was formed in January 1927 with Mrs Douglas Lilley as President, Mrs. HC Turner (mother of Dame Phyllis Frost) as Secretary and the Shire Secretary Mr Winterburn as Treasurer. Croydon's first centre opened in the Mechanic's Hall in February 1927 and Beatrice Chalmers appointed as the first Sister. Permanent, purpose-built quarters were opened in July 1930 by the President of the Lilydale Shire, Cr. W. J. Watson. The council had donated the land and contributed to the cost of the building with the committee raising the remaining funds. The building was described as being "of picturesque design, typical of an English village

cottage." The building was designed by Marcus Barlow (1890 – 1955) who was believed to have donated his services.

The building is a triple-fronted Old English timber cottage featuring box-style timber framing with curved braces. It has a gabled terracotta roof with a chimney in the angle with clinker soldier-course capping and terracotta pots. The porch is recessed in the angle with a timber panelled door, balustrade and brackets at timber posts. The building also features diamond pane sash windows and decorative wrought iron work including a flat metal weathervane depicting the silhouette of a stork carrying a baby and an ornate sign attached to the front of the building. A lych gate, dedicated to the memory of the first sister, Beatrice Chalmers who died on duty in 1931, has decorative fretwork brackets supporting a hipped roof and timber shingles. A 1937 timber measuring table remains in the consulting room.

A number of alterations and additions have been made to the building to accommodate expansion and changes to the service. The building was extended to the south by the addition of a toddlers' room and a pram shelter in 1959 to plans drawn up in Barlow's office, Marcus Barlow, Van Rompaey & Kerr, 1956. Originally the entrance was from the side of the porch into what was then the waiting room. The rest of the space was divided into a consulting room, kitchenette and a test feed room. In 1966 the main entrance was moved to its current position, replacing a window, and the waiting room converted to a consulting room. The new waiting room area was opening up by the removal of walls with the test feed room moved to an addition along the north side and the toddlers' room converted to a kitchen.

Croydon became important as the hub health centre for the expansion of baby and maternal services in the outer eastern area. The building has been used continually as a baby health centre since its opening.

How is it significant?

The Croydon Maternal and Child Health Centre is of historical, architectural and social significance to the State of Victoria.

Why is it significant?

The Croydon Maternal and Child Health Centre is of historical significance for pioneering the introduction and expansion of baby health services in the outer eastern suburbs of Melbourne. The building is believed to be the oldest and furthermost extant purpose-built baby health centre in outer metropolitan Melbourne. The minute books and report books provide a unique record of the development of the centre and enhance the historical significance of the centre. The centre also has historical associations with the significant architect Marcus Barlow. Barlow was concerned with a number of social and community issues and was a member of the Housing Investigation and Slum Abolition Board and one of the earliest consultant architects appointed by the Housing Commission. Barlow's other works included Manchester Unity Building, 1932, Howey House, 1936, Century Building, 1938 and Jenson House, 1939.

The centre is of architectural significance for its Old English design and for the extent to which the characteristics of this design are exhibited throughout the overall scheme. Such elements include: diamond pane sash windows; half timbering; decorative wrought iron detailing such as the ornate front door hinges and latch handle, the small grille on the front door, and the wrought iron hanging sign on the front of the buildings; the weathervane attached to the chimney in the form of a stork carrying a baby; the front door constructed of stained, vertical timber boards; the timber porch entry; the textured chimney with brick decoration and pottery lid; timber bargeboards; projecting eaves brackets; as well as the shingled lych gate at the entry to the property. The building is unique as the only baby health centre known to be designed in this style,

a style which demonstrates a philosophical association between early baby health centre designs and domestic housing designs, both traditionally perceived as the domain of women and children. The building is also significant as a rare example of a baby health centre designed by a notable architect, Marcus Barlow.

The building is of social significance for its enduring civic value to the community. As a baby health centre, the building is socially and culturally important for marking phases in the lives of mothers and infants. The centre symbolises the combined initiatives of local women and shire officers, and a permanent baby health centre was symbolic of a culturally progressive caring society, a place associated with new scientific ideas and programs designed to improve the health education of women raising families in the outer suburbs.

4.3 Place-specific permit exemptions

The citation for Maternal & Child Health Centre includes the following specific permit exemptions, several of which duplicate the more recent Heritage Victoria *General Permit Exemptions* (August 2024):

Exterior:

Removal of extraneous items such as air conditioners, pipe work, ducting, wiring, antennae, aerials etc, and making good.

Installation and repairing of damp proofing by either injection method or grout pocket method.

Installation or removal of external fixtures and fittings such as, hot water services and taps.

Interior:

Painting of previously painted walls and ceilings provided that preparation or painting does not remove evidence of any original paint or other decorative scheme.

Installation, removal or replacement of carpets and/or flexible floor coverings.

Installation, removal or replacement of curtain tracks, rods and blinds.

Installation, removal or replacement of hooks, nails and other devices for the hanging of mirrors, paintings and other wall mounted art works.

Demolition or removal of non-original stud/partition walls, suspended ceilings or non-original wall linings (including plasterboard, laminate and Masonite), bathroom partitions and tiling, sanitary fixtures and fittings, kitchen wall tiling and equipment, lights, built-in cupboards, cubicle partitions, computer and office fitout and the like.

Removal or replacement of non-original door and window furniture including, hinges, locks, knobsets and sash lifts.

Installation of stud walls, which are removable.

Refurbishment of existing bathrooms, toilets and kitchens including removal, installation or replacement of sanitary fixtures and associated piping, mirrors, wall and floor coverings.

Removal of tiling or concrete slabs in wet areas provided there is no damage to or alteration of original structure or fabric.

Installation, removal or replacement of ducted, hydronic or concealed radiant type heating provided that the installation does not damage existing skirtings and architraves and that the central plant is concealed.

Installation, removal or replacement of electrical wiring.

Installation, removal or replacement of electric clocks, public address systems, detectors, alarms, emergency lights, exit signs, luminaires and the like on plaster surfaces.

Installation, removal or replacement of bulk insulation in the roof space.

Installation of plant within the roof space.

Installation of new fire hydrant services including sprinklers, fire doors and elements affixed to plaster surfaces.

Landscape:

The process of gardening and maintenance, mowing, hedge clipping, bedding displays, removal of dead plants, disease and weed control, emergency and safety works to care for existing plants and planting themes.

Repairs, conservation and maintenance to hard landscape elements, roads and paths, drainage and irrigation system.

Management of trees in accordance with Australian Standard; Pruning of amenity trees AS4373.

Removal of plants listed as noxious weeds in the Catchment and Land Protection Act 1994.

Installation, removal or replacement of garden watering and drainage systems.

Non-commercial signage, lighting, security fire safety and other safety requirements, provided no structural building occurs.

Resurfacing of existing paths and driveways.

5 CONDITION OF THE REGISTERED PLACE

The building is in generally good condition noting that it has undergone a number of alterations throughout its history. The interior detailing of the building is generally less intact although the remaining original features are also in good condition. Missing elements include the chimney pots and sections of the stork-carrying-baby weathervane.

The lych gate is in fair condition with some evidence of timber decay and the original timber fence is missing. The mature trees have been assessed by Tree Logic (refer arborist report) and have been found to be in fair to good health with the understorey plantings and weed removal required before final assessment of some trees can be made.

6 CURRENT USE OF THE REGISTERED PLACE

The building is currently vacant. It is ultimately proposed to repurpose the Maternal & Child Health Centre for an allied community use within to the new CCWP development. Works to enable the reuse if the Maternal & Child Health Centre will be subject to a future permit application under Part 5 of the Heritage Act.

7 PREVIOUS PERMIT APPLICATION RFI

Heritage Victoria in its RFI letter of 17 June 2025 sought the following information:

- Please confirm whether retention of the existing canopy trees is possible; if so, the drawings should be revised accordingly. Currently the proposed landscape works involve removing all trees in front of the building except for Tree 328. Trees 328 to 336, situated at a prominent street intersection, are mature and hold significant landscape value. Most are suitable for long-term retention, with Trees 323 and 328 identified as the most important, alongside several others of elevated value.
- The Heritage Impact Statement (HIS) references a Landscape Specification and Civil Drawings, but these documents have not yet been submitted for review. Civil drawings should also assess the path's impact on the Tree Protection Zones (TPZs) of the trees recommended for retention.
- Specifications for the proposed bollard lighting will need to provided.
- Concerns are also raised about the fence continuing on either side of Tree 328. It may be more appropriate to terminate the fence before the TPZ and introduce a return fence and lych gates, reflecting the original layout seen in early site photographs.
- The current scale and width of the proposed diagonal path, appears visually dominant and may benefit from a reduction to better suit the heritage context.

In response to this the proposed works have been redesigned to retain a substantially larger number of trees to the north of the Maternal & Child Health Centre. The proposed interpretative fencing has been located to avoid the Structural Root Zones (SRZ) of the retained trees and the proposed diagonal path has been redesigned in consultation with Treelogic to enable the increased tree retention. No separate landscape specification (beyond that provided in the Landscape Package prepared by Site Image) has been prepared and the more substantial drainage work has also been omitted negating the need for a separate civil work plan. CO.OP drawing A201 rev. B shows the extent of the amended (1,800mm wide) path, which will be formed of exposed aggregate concrete rather than brick pathing to minimise impacts on the subsoil.

The datasheet for the proposed EWO EL710 bollard light have been provided in the new application package in response to the June 2025 RFI.

8 PROPOSED WORKS

The proposed works are described in the following documentation:

- Drawing HV201, Existing and Proposed General Arrangement Plan, prepared by CO.OP Studio, revision C dated 19 September 2025;
- Drawing HV401, Existing and Proposed Elevations, prepared by CO.OP Studio, revision A dated 12 September 2025;
- Tree Impact Assessment, prepared by Treelogic, dated 29 November 2024 with addendum dated 2 April 2025;
- Letter from Treelogic regarding additional tree retention dated 10 September 2025;
- Landscape drawings, prepared by Site Image Landscape Architects, dated 19
 September 2025;
- EWO EL710 bollard lighting datasheet.

8.1 Conservation works

A full programme of internal and external conservation works will be prepared as part of the future adaptive reuse of the Maternal & Child Health Centre building. The following conservation works are proposed to be undertaken as part of this project:

- rectification of drainage issues arising from the build-up of landscape surfaces against the building;
- general cleaning (using non-abrasive techniques) of walls, rainwater goods, etc;
- cleaning of the plaque in the entry portico;
- localised timber repair as required prior to repainting of timberwork;
- make good of remnant holes and fixings from (now removed) signage at the principal (west) elevation;
- repainting of exterior timber elements (including lych gate), noting that
 existing colour scheme appears to be original. Timber elements including
 half-timbering to be Dulux 'Mission Brown' and walls in Dulux 'Natural
 White'.



Figure 35. Proposed west (principal) elevation of Maternal & Child Health Centre (extract of dwg HV401, rev. A)



Figure 36. Proposed paint finishes (extract of dwg HV401, rev. A)

PNT-21
MCH COTTAGE
EXISTING EXTERNAL WALLS

PNT-23 MCH COTTAGE EXISTING TIMBER STRAPPING, FRAMING, FASCIAS

PAINT DULUX 'NATURAL WHITE' PAINT DULUX 'MISSION BROWN'

8.2 Interior works

No works to the interior of the Maternal & Child Health Centre are proposed as part of this permit application.

8.3 Landscape works

8.3.1 Tree works

Landscape works include the removal of one (1) tree (#327) to the west of the Maternal & Child Health Centre building and three (3) trees to the front (north) of the building (#331, 333 & 334). Other trees within the extent of registration are proposed to be retained subject to detailed arboricultural advice follow the removal of understorey vegetation and weed species. Treelogic have been engaged for the construction phase of the project to inform detailed design and implementation of

works within the Notional Root Zone (NRZ) and to establish appropriate Tree Protection Zones (TPZ) and mitigation actions.

The three (3) trees are proposed to be removed from the northern part of the subject site, as follows:

Tree No. (Treelogic Impact Assessment report, March 2024)	Species (Common Name)	Age
327	Arbutus unedo (Irish Strawberry Tree)	Early-mature
331	Arbutus unedo (Irish Strawberry Tree)	Semi-mature
333	Malus sp. (Apple)	Maturing
334	Arbutus unedo (Irish Strawberry Tree)	Early-mature

Note: this represents a substantially increased retention of trees to the north of the Maternal & Child Health Centre building in comparison to the original permit application.

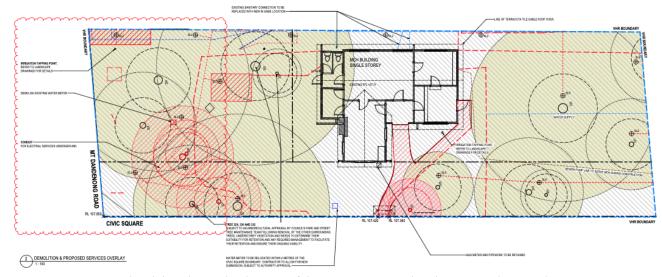


Figure 37. Tree removal and demolition plan (extract of dwg HV201, rev. C, dated 19 September 2025)

8.3.2 New fence treatments

The lych gate at the west boundary of the subject site is specifically identified in the extent of registration as 'B2' and is proposed to be retained and conserved. An interpretive timber fence treatment is proposed to extend to the north and south of the lych gate and is based on that evident in the historic photograph at Figure 2. The new fence will be 1.0m in height and extend for a length of 9.04m north and south of the gate, with an additional non-contiguous 6m length of fencing beyond the SRZ of retained trees at the southern part of the Civic Square boundary.

The amended fence design has been prepared in consultation with Treelogic to avoid adverse impacts on retained trees.

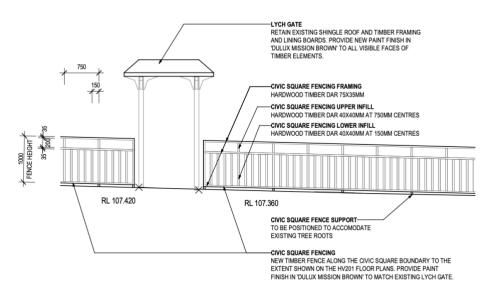


Figure 38. Elevation of retained lych gate and proposed interpretive fence extensions. Note all fence elements to be painted 'DULUX MISSION BROWN.' (extract of dwg HV201, rev.B, dated 12 September 2025)

D1 PROPOSED ELEVATION - LYCH GATE & TYPICAL CIVIC SQUARE FENCING

8.3.3 New landscaping

Site Image Landscape Architects in consultation with Treelogic and CO.OP have prepared landscape documentation.

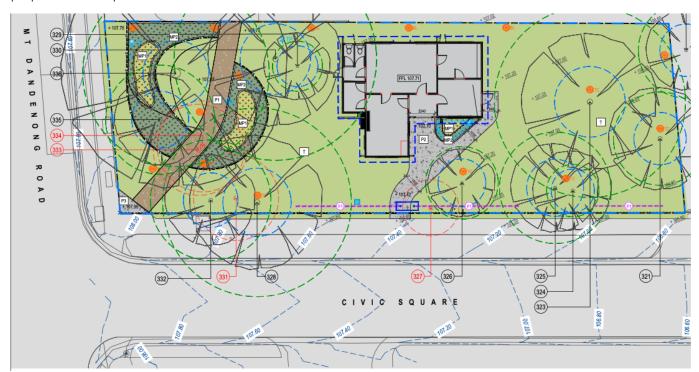


Figure 39. Landscape plan (extract of Site Image dwg HVL102, rev. D, 19 September 2025)

The existing concrete split path from the west boundary (via lych gate) is proposed to be demolished and slightly reconfigured to provide additional width at the junction, however the alignment remains substantially the same as existing and as that shown in the 1966 site plan at Figure 5. This new path will be in a brushed concrete finish.

A new diagonal path is proposed across the northern end of the site along the anticipated desire line between the pedestrian crossing at Dandenong Road and the entry to the new community hub building. This path is proposed to be lit by bollard lighting on either side (serviced by underground electrical connections) and will be finished in exposed aggregate. The proposed width of the path has reduced from 2,000mm wide in the earlier application to the 1,800mm minimum width required for two wheelchair users to pass as set out in Australian Standard AS1428.2-1992 Design for Access and Mobility.

The balance of the site landscaping will comprise lawn, reinstating the open character evident in Figure 2 and in its former use as a 'garden playground' - refer Figure 5. Retained mature trees will be up-lit by in-ground spotlights. The area to the northwest of the diagonal path will include a garden bed planted with 'flowering shrubs and groundcovers' comprising a mix of hardy species (exotic and natives) with cottage garden characteristics including colourful mass flowering traits and dense growth habits suitably for pruning and clipping.

PLANT MIX 01 - FLOWERING SHRUB MIX



PLANT MIX 02 - FLOWERING GROUND COVER MIX



Figure 40. Plant schedule (extract of Site Image dwg HVL201, rev. C, 19 September 2025)

ALTERNATIVE PROPOSALS THAT WERE 9 CONSIDERED AND REASONS WHY THESE WERE DISMISSED

9.1 **Trees**

Initially all trees to the north of the Maternal & Child Health Centre building were proposed to be removed, however the project team revisited this aspect of the design and found it possible to retain a Liquidambar (Tree #328) and a number of other smaller trees that contribute to the landscape context of the site.

9.2 Diagonal Path

In response to queries raised by Heritage Victoria, the project revisited the proposed diagonal alignment of the path at the northern end of the subject site. Ultimately, the path alignment is informed by the retention of mature trees, reconfiguration of the existing pedestrian crossing at the northwest corner of the CCWP site and the expected increase in pedestrian traffic at the completion of the project.

These works are necessary to provide universal access consistent with the requirements of the *Disability Discrimination Act 1992* to the main entrance of the new CCWP from the Civic Square to the west. There are no alternative locations for a pathway that serves this function. If no path was provided at this location it is considered highly likely that users of the CCWP would create a disfiguring informal 'desire line' pathway.

The 1,800mm width of the pathway has been established by the expected pedestrian traffic and the width required for wheelchair users to comfortably pass each other in accordance with AS1428.2-1998.

10 HERITAGE IMPACT ASSESSMENT

10.1 The extent to which the application affects the cultural heritage significance of the place (relates to s.101(2)(a))

10.1.1 Conservation works

The proposed conservation works will clean, repair and repaint the exterior fabric of the building enhancing the visual presentation of the heritage place. The works anticipate the building's future adaptive reuse without introducing new fabric or other interventions.

10.1.2 Trees

The 1945 aerial photograph of the site (Figure 4) shows mature trees forming part of the place's setting since at least that time and, given the building's 1930 construction, the trees in that photograph likely date to an early planting scheme.

However, the trees at the subject site generally comprise maturing exotics that were planted more recently some of which have been identified by Treelogic as being likely to be self-seeded and are overgrown. It is noted that neither the trees nor the garden setting itself are explicitly identified in the Statement of Significance for the place. In terms of the trees' heritage value, the key consideration is their contribution to the setting of the Tudor-revival building.

The retained trees will maintain setting of the Tudor Revival-style Maternal & Child Health Centre building. Alongside the retained lych gate and proposed interpretive sections of stylistically-consistent fencing, the retained trees will ensure the scheme's landscape character remains legible whilst the views to and from the place are reinstated.

10.1.3 Fencing

The early (c1930) photographs of the place show a low, sculptural timber fence with lych gate in the Tudor Revival style matching the architectural detail of the building. In the context of the place's pending adaptive reuse, and its relationship with other buildings and facilities within the CCWP, the complete enclosure of the site by a fence is no longer desirable or appropriate, especially given the presence on mature trees on the historic fence line.

The retention and conservation of the lych gate as well as the installation of an interpretive timber fence treatment with detailing based on historic imagery along the west boundary will enhance the relationship between the building and its surrounding streetscape and reinstate its historic landscape character and setting. The reinstatement of this fence will enhance the legibility of the place's historical and aesthetic cultural heritage values.

10.1.4 Landscape treatments

The new landscape treatments are restrained, ground-level interventions that maintain the open treed character of the place's historic setting and enhance it by providing up-lighting to mature trees.

The layout of the existing path to the west of the building – at its main entry – which dates to at least 1966 (Figure 5) will be retained and the path regraded to meet current design standards, but otherwise resurfaced to match the existing path.

These landscape treatments will have only minor impacts on the historical, architectural or social heritage significance of the heritage place.

10.2 What physical and/or visual impacts will result from the proposed works? (relates to s.101(2)(a) and (f))

The proposed conservation works will enhance the physical fabric of the place through localised repair works and the reintroduction of fencing detailed to match historical imagery. This will enhance the condition and visual presentation of the place. Similarly, the erection of the interpretative lengths of fence to the Civic Square boundary will improve the presentation and legibility of the heritage place.

The proposal will physically impact the setting of the place by removing four (4) trees and introducing new ground-level contemporary landscape treatments. The reduction in understorey vegetation and weed species will open views to the heritage building from the public realm and improve public safety consistent with Crime Prevention Through Environmental Design (CPTED) principles.

10.3 Measures proposed to avoid, limit or manage the detrimental impacts (relates to s.101(2)(b), (d) and (f) and s.101(3) of the *Heritage Act 2017*)

The retention of a mature Liquidambar (Tree 328) and a further nine (9) trees on site limits the detrimental impacts of the proposed tree removal and allows the opened, tree character of the place to remain legible whilst balancing the need to integrate the site within the broader CCWP. These changes will help enable the place's future adaptive reuse.

10.4 The extent to which the application, if refused, would affect the reasonable or economic use of the registered place (relates to s.101(2)(b))

Not applicable.

10.5 The extent to which the application, if refused, would unreasonably deterimentally affect the ability of the public authority to perform a statutory duty (relates to s.101(2)(d))

Maroondah City Council has a general duty to provide community facilities such as those proposed to be accommodated by the new CCWP. The works within the setting of the Maternal & Child Health Centre help provide access to these functions as well as providing for the future adaptive reuse of the heritage place itself by improving its relationship to these adjacent community facilities.

11 Affect on the world heritage values of the listed place or any relevant approved World Heritage Strategy Plan (relates to s.101(2)(e))

Not applicable.

11.1 Has the proposal been influenced by, or does it address any local planning scheme or *Building Act* 1993 requirements? (relates to s.101(2)(f) and s.101(3)(b))

The proposed works do not address any specific local planning scheme requirement.

The *Building Act 1993* and the Building Regulations 2018 adopt the Building Code of Australia which is part of the National Construction Code (NCC). Amongst other things, Part D4 of the NCC sets down minimum provisions for access for people with disabilities consistent with the expectations of the *Disability Discrimination Act 1992* (Cth). The proposed works will ensure that universal access is provided to the CCWP from Civic Square.

11.2 Assessment of the affect of the proposal on the cultural heritage significance of those adjacent places (relates to s.101(2)(f) and s.101(3)(b))

The Maternal & Child Health Centre immediately adjoins the HO108 - Croydon Entertainment Centre to the west - refer Figure 33.

This – much altered – hall dating from 1909 with the Moderne-style foyer added in 1937 forms an integral part of the CCWP redevelopment approved under Council permit M/2024/901/A. The proposed works to the Maternal & Child Health Centre

will help facilitate access to the new facility from Civic Square and will not have any adverse impact on the retained front portion of the Croydon Entertainment Centre.



Figure 41. (left) Croydon Entertainment Centre viewed from Mt Dandenong Road.

CONCLUSION

The proposed works are necessary to prepare the heritage place for its future adaptive reuse as well as integrate it within the redevelopment and renewal of the adjacent community buildings to its immediate east and south. The project carefully balances conserving the historical, aesthetic and social heritage values of the place by retaining and restoring key physical elements and providing an interpretive fence treatment.

The new landscape treatments within the registered extent of VHR H0054 provide universal access and a pedestrian connection between Croydon's key commercial strip along Main Street to the northwest of the site, and the redeveloped Croydon Community Wellbeing Precinct to the east and south. The works include provision of improved drainage around the building, local timber repair and repainting of the heritage fabric and the introduction of new interpretative fencing which represents a positive outcome under s.101(2) and 101(3) of the Heritage Act.

APPENDIX I: VICTORIAN HERITAGE DATABASE CITATION FOR VHR H0054 MATERNAL & CHILD HEALTH CENTRE

MATERNAL AND CHILD HEALTH CENTRE



MATERNAL AND CHILD HEALTH CENTRE SOHE 2008



MATERNAL AND CHILD HEALTH CENTRE SOHE 2008



h00054 1 croydon maternal health centre may05 front



h00054 croydon maternal health centre may05 lych gate2



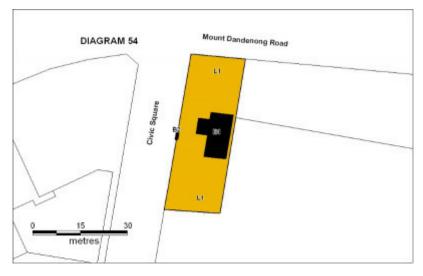
h00054 croydon maternal health centre may05 main room



h00054 croydon maternal health centre may05 north side3



h00054 croydon maternal health centre may05 sign



h00054 croydon baby health centre plan

Location

12 CIVIC SQUARE CROYDON, MAROONDAH CITY

Municipality

MAROONDAH CITY

Level of significance

Registered

Victorian Heritage Register (VHR) Number

H0054

Heritage Overlay Numbers

HO13

VHR Registration

September 8, 2005

Heritage Listing

Victorian Heritage Register

Statement of Significance

Last updated on - June 10, 2005

What is significant?

The health of mothers and infants became of increasing concern in the first decades of the twentieth century. The early baby health movement was driven by committed volunteers frustrated at government inaction. Dr Isabella Younger Ross (1887-1956) who had studied infant health in England helped set up Victoria's first baby health clinic in Richmond in 1917. By 1918 the voluntary Victorian Baby Health Centres Association (VBHCA) was formed to oversee the growing number of centres. Financial support also came from local councils and in 1926 the State government formed the Infant Welfare Section of the Public Health Department and appointed Dr Vera Scantlebury Brown as the first Director.

The first committee of the Croydon Baby Health Centre was formed in January 1927 with Mrs Douglas Lilley as President, Mrs HC Turner (mother of Dame Phyllis Frost) as Secretary and the Shire Secretary Mr Winterburn as Treasurer. Croydon's first centre opened in the Mechanic's Hall in February 1927 and Beatrice Chalmers appointed as the first Sister. Permanent, purpose-built quarters were opened in July 1930 by the President of the Lillydale Shire, Cr. W. J. Watson. The council had donated the land and contributed to the cost of the building with the committee raising the remaining funds. The building was described as being "of picturesque design, typical of an English village cottage". The building was designed by Marcus Barlow (1890-1955) who was believed to have donated his services.

The building is a triple-fronted Old English timber cottage featuring box-style timber framing with curved braces. It has a gabled terracotta roof with a chimney in the angle with clinker soldier-course capping and terracotta pots. The porch is recessed in the angle with a timber panelled door, balustrade and brackets at timber posts. The building also features diamond pane sash windows and decorative wrought iron work including a flat metal weathervane depicting the silhouette of a stork carrying a baby and an ornate sign attached to the front of the building. A lych gate, dedicated to the memory of the first sister, Beatrice Chalmers who died on duty in 1931, has decorative fretwork brackets supporting a hipped roof and timber shingles. A 1937 timber measuring table remains in the consulting room.

A number of alterations and additions have been made to the building to accommodate expansion and changes to the service. The building was extended to the south by the addition of a toddlers' room and a pram shelter in 1959 to plans drawn up in Barlow's office, Marcus Barlow, Van Rompaey & Kerr, 1956. Originally the entrance was from the side of the porch into what was then the waiting room. The rest of the space was divided into a consulting room, kitchenette and a test feed room. In 1966 the main entrance was moved to its current position, replacing a window, and the waiting room converted to a consulting room. The new waiting room area was opened up by the removal of walls with the test feed room moved to an addition along the north side and the toddlers' room converted to a kitchen.

Croydon became important as the hub health centre for the expansion of baby and maternal services in the outer eastern area. The building has been used continually as a baby health centre since its opening.

How is it significant?

The Croydon Maternal and Child Health Centre is of historical, architectural and social significance to the State of Victoria.

Why is it significant?

The Croydon Maternal and Child Health Centre is of historical significance for pioneering the introduction and expansion of baby health services in the outer eastern suburbs of Melbourne. The building is believed to be the oldest and furthermost extant purpose built baby health centre in outer metropolitan Melbourne. The minute books and report books provide a unique record of the development of the centre and enhance the historical significance of the centre. The centre also has historical associations with the significant architect Marcus Barlow. Barlow was concerned with a number of social and community issues and was a member of the Housing Investigation and Slum Abolition Board and one of the earliest consultant architects appointed by the Housing Commission. Barlow's other works included Manchester Unity Building, 1932, Howey House, 1936, Century Building, 1938 and Jensen House, 1939.

The centre is of architectural significance for its Old English design and for the extent to which the characteristics of this design are exhibited throughout the overall scheme. Such elements include: diamond pane sash windows; half timbering; decorative wrought iron detailing such as the ornate front door hinges and latch handle, the small grille on the front door, and the wrought iron hanging sign on the front of the building; the weathervane attached to the chimney in the form of a stork carrying a baby; the front door constructed of stained, vertical timber boards; the timber porch entry; the textured chimney with brick decoration and pottery lid; timber bargeboards; projecting eaves brackets; as well as the shingled lych gate at the entry to the property. The building is unique as the only baby health centre known to be designed in this style, a style which demonstrates a philosophical

association between early baby health centre designs and domestic housing designs, both traditionally perceived as the domain of women and children. The building is also significant as a rare example of a baby health centre designed by a notable architect, Marcus Barlow.

The building is of social significance for its enduring civic value to the community. As a baby health centre, the building is socially and culturally important for marking phases in the lives of mothers and infants. The centre symbolises the combined initiatives of local women and shire officers, and a permanent baby health centre was symbolic of a culturally progressive caring society, a place associated with new scientific ideas and programs designed to improve the health education of women raising families in the outer suburbs.

Permit Exemptions

Seneral Exemptions:Seneral exemptions apply to all places and objects included in the Victorian Heritage Register (VHR). General exemptions have been designed to allow everyday activities, maintenance and changes to your property, which don't harm its cultural heritage significance, to proceed without the need to obtain approvals under the Heritage Act 2017.Specific exemptions may also apply to your registered place or object. If applicable, these are listed below. Specific exemptions are tailored to the conservation and management needs of an individual registered place or object and set out works and activities that are exempt from the requirements of a permit. Specific exemptions prevail if they conflict with general exemptions.Find out more about heritage permit exemptions here.>Specific Exemptions:>span class="c1">General Conditions: 1. All exempted alterations are to be planned and carried out in a manner which prevents damage to the fabric of the registered place or object. General Conditions: 2. Should it become apparent during further inspection or the carrying out of works that original or previously hidden or inaccessible details of the place or object are revealed which relate to the significance of the place or object, then the exemption covering such works shall cease and the Executive Director shall be notified as soon as possible. Note: All archaeological places have the potential to contain significant sub-surface artefacts and other remains. In most cases it will be necessary to obtain approval from Heritage Victoria before the undertaking any works that have a significant subsurface component. General Conditions: 3. If there is a conservation policy and plan approved by the Executive Director, all works shall be in accordance with it. Note: The existence of a Conservation Management Plan or a Heritage Action Plan endorsed by Heritage Victoria provides guidance for the management of the heritage values associated with the site. It may not be necessary to obtain a heritage permit for certain works specified in the management plan. General Conditions: 4. Nothing in this determination prevents the Executive Director from amending or rescinding all or any of the permit exemptions. General Conditions: 5. Nothing in this determination exempts owners or their agents from the responsibility to seek relevant planning or building permits from the responsible authorities where applicable. Minor Works: Note: Any Minor Works that in the opinion of the Executive Director will not adversely affect the heritage significance of the place may be exempt from the permit requirements of the Heritage Act. A person proposing to undertake minor works may submit a proposal to the Executive Director. If the Executive Director is satisfied that the proposed works will not adversely affect the heritage values of the site, the applicant may be exempted from the requirement to obtain a heritage permit. If an applicant is uncertain whether a heritage permit is required, it is recommended that the permits co-ordinator be contacted.

contacted.
contacted conditioners, pipe work, ducting, wiring, antennae, aerials etc, and making good. Installation and repairing of damp proofing by either injection method or grout pocket method. Installation or removal of external fixtures and fittings such as, hot water services and taps. class="c3">Painting of previously painted walls and ceilings provided that preparation or painting does not remove evidence of any original paint or other decorative scheme. Installation, removal or replacement of carpets and/or flexible floor coverings. Installation, removal or replacement of curtain tracks, rods and blinds. devices for the hanging of mirrors, paintings and other wall mounted art works. removal of non-original stud/partition walls, suspended ceilings or non-original wall linings (including plasterboard, laminate and Masonite), bathroom partitions and tiling, sanitary fixtures and fittings, kitchen wall tiling and equipment, lights, built-in cupboards, cubicle partitions, computer and office fitout and the like. class="c3">Removal or replacement of non-original door and window furniture including, hinges, locks, knobsets and sash lifts. Installation of stud walls, which are removable. <p class="c3">Refurbishment of existing bathrooms, toilets and kitchens including removal, installation or

replacement of sanitary fixtures and associated piping, mirrors, wall and floor coverings. class="c3">Removal of tiling or concrete slabs in wet areas provided there is no damage to or alteration of original structure or fabric. Installation, removal or replacement of ducted, hydronic or concealed radiant type heating provided that the installation does not damage existing skirtings and architraves and that the central plant is concealed. Installation, removal or replacement of electrical wiring. Installation, removal or replacement of electric clocks, public address systems, detectors, alarms, emergency lights, exit signs, luminaires and the like on plaster surfaces. class="c3">Installation, removal or replacement of bulk insulation in the roof space. class="c3">Installation of plant within the roof space. Installation of new fire hydrant services including sprinklers, fire doors and elements affixed to plaster surfaces. Landscape: <p class="c3">The process of gardening and maintenance, mowing, hedge clipping, bedding displays, removal of dead plants, disease and weed control, emergency and safety works to care for existing plants and planting themes. Repairs, conservation and maintenance to hard landscape elements, roads and paths, drainage and irrigation system. Standard; Pruning of amenity trees AS4373. the Catchment and Land Protection Act 1994. Installation, removal or replacement of garden watering and drainage systems. Non-commercial signage, lighting, security fire safety and other safety requirements, provided no structural building occurs. paths and driveways.

Construction dates 1930,

Architect/Designer Barlow, Marcus,

Heritage Act Categories Registered place, Registered object integral to a registered place,

Other Names INFANT WELFARE CENTRE, BABY HEALTH CENTRE,

Hermes Number 6054

Property Number

History

class="c1">This history was written by Michele Summerton. It draws largely on Cheryl D. Crockett, 'The History of the Baby Health Centre Movement in Victoria 1917 - 1976, Including a Heritage Study of Extant Purpose-built Baby Health Centre Buildings Constructed Before 1950', Department of History, Monash University, 31 January 1997. The health of mothers and babies became a topic for concern in Australia in the first decades of this century. There were concerns about the birthing process and the sicknesses, permanent disabilities and even deaths experienced. The authorities were slow to address these worries, and the dissemination of safer birthing control methods was also officially discouraged. During these years newly formed womens groups were involved in these issues, but even by 1928, years after these issues were first raised, a Royal Commission on Health reported that maternal mortality and disability still constituted 'a grave national danger' (Crockett 1997:1: Royal Commission on Health, Report, Commonwealth Parliamentary Papers 1926-28 vol 4, p 32). 1909 with the formation of the Lady Talbot Milk Institute. Its main activity was to oversee the distribution of regulated fresh milk supplies, as there were increasing doubts about the quality of cow's milk (as a very perishable commodity) and its suitability for infants, a concern that was already being addressed in NSW and overseas. The Institute relied on state and municipal grants, and Talbot nurses visited houses imparting knowledge to women on how to nurse their children and store milk. Small ice chests and blocks of ice were also sent as part of the service (Crockett:2) By 1916 it was becoming clear that the best food for babies is human milk. That year a report by a committee of Melbourne medical practitioners advised that every effort should be made to educate mothers about maintaining their health and to encourage them to breast feed their babies. They advised that any cow's milk should be pure and the supply should be controlled and adequately provided. They noted that mortality rates amongst infants had largely been due to infected milk, and they deplored the conditions under which most milk was still handled between the numerous stages between

farm and home. In order to improve education on the 'feeding, nursing and care of infants', the committee recommended the establishment of ante-natal and infant clinics similar to those in England (Crockett:2: VPRS 9291P1/17/T/6, p 34). They strongly advised on implementing a system of health administration in all country and suburban municipalities which would be controlled by the state government health department. They specifically referred to the system of baby clinics already established in New South Wales and their benefits. In emphasising the necessity of clinics, they pointed to the fact that during 1915, 9107 children died within their first year, and of these 3227 or 35% died within the first week of life. Such clinics should provide a service for expectant mothers as well as post-natal care and advice. They further advised that the government conduct an experiment by establishing a clinic in one selected area first. (Crockett: 3: VPRS 9291P1/17/T/6, pp 38, 40) There was evidently no immediate response to the committee's advice. The following year, in May 1917, three women in a voluntary capacity opened the first baby health clinic in Victoria in a shop front offered by Richmond Council. By 1918 a voluntary body, the Victorian Baby Health Centres Association had been formed to oversee and affiliate new centres now growing in number. The Public Health Dept offered little more than to pay half the salaries of qualified baby health centre sisters; local councils were expected to fund all other expenses. The State didn't extend their interest until 1926 when they formed the Infant Welfare Section and appointed Dr Vera Scantlebury Brown as the first Director. In 1946 Dr W Barbara Meredith became Director of the Maternal and Child Hygiene Section of the Health Department. When she retired in 1960, Dr Alice E. (Betty) Wilmot remained in the position until 1976. That year the voluntary aspect of the service ceased and maternal and infant welfare combined with other local health service. contributions, the tardy activity of the Health Department as well as its appointment of 3 women directors over a period of 50 years, all combined to influence the unique form of the early services in Victoria. class="c1">Purpose-built Baby Health Centres The need to construct purpose-built baby health centre buildings was not an official priority in the early years of the movement. Most infant welfare organisations felt it more important to make municipal authorities aware of maternal and infant welfare concerns and to provide funding for nurses. More often known as depots, centres could be opened in any available accommodation which fitted their needs. Even in the 1960s some were still operating from R.S.L. quarters, and in municipal and church halls. The trend to having specific purpose-built centres began in 1926, in the wake of a report submitted to the Health Minister by Drs. Scantlebury and Main, although some centres existed before this date. Once it was evident that communities were intent on providing permanent accommodation for infant welfare activities, the VBHCA made some effort to ensure that suitable buildings were constructed (Crockett: 53). No subsidies were provided to councils by the government until 1948 (Crockett: 53), when 80,000 pounds were made available for grants towards the building of infant welfare and pre-school centres. However due to scarcity of materials and restrictions imposed by the Building Materials Control Acts which were not lifted until August 1952, very few buildings were erected immediately (Crockett: 59). Before the introduction of the government subsidy, only a few centres were council initiated or funded. the 1920s, to the baby boom period of the 1950s) no longer survive. The few that do, stand as memorials to the determination of local women, and collectively they are an enduring testimonial to the strength of the baby health centre movement in Victoria. Summary dates: 1909 Talbot Milk Institute (charitable funding from grants) 1916 Committee report advises on setting up centres <p class="c1">May 1917 3 women open volunteer centre in Richmond 1918 Victorian Baby Health Centres Assoc. (voluntary) Scantlebury Brown 1926 First purpose-built centres open 1946 Dr Barbara Meredith - Director of Maternal & Dir Government introduces subsidies to councils to establish centres 1960 Dr Betty Wilmot, Director until 1976 HISTORY OF PLACE: Coburg's first baby health centre was established in reaction to the pneumatic influenza epidemic of 1919 which was probably brought back by troops returning from the war. Richard Broome's history of the municipality, Coburg, Between Two Creeks, is a good source for information: 'In all, 11 552 Australians died of pneumonic influenza; worldwide fatalities were estimated at twenty-one million, more than the number killed in the war. At Coburg there were 66 admissions and 2 deaths at the local hospital during the first wave and 306 admissions and 19 deaths during the second. An unknown number were ill at home, but medical authorities estimated that one third of the population fell ill. Coburg recorded the third-lowest suburban death rate from influenza due perhaps to the sparsely settled nature of the suburb. Dr Wallace and the hospital staff who laboured eighteen hours a day played their part. A grateful Council gave Wallace *100, Mitchell *10 and Miss Dyall, supervisor of the hospital kitchen, *5 bonus. In response to the emergency, a group of people met at Mrs J. H. Ward's house at 25 Victoria Street in mid-April 1919, to form a branch of the Royal Victorian Trained Nurses' Association. One hundred members, each contributing five shillings, guaranteed the nurse's salary, and nurse Wooton was on the job within three weeks. Mrs Whitham and Sister Holland lobbied the Council on behalf of the association and urged it to consider establishing a Truby King baby health centre, as the district had too many infant deaths for a suburb without slums. Dr (later Sir) Frederick Truby King the New Zealand infant health

specialist, had recently been summoned by King George V to demonstrate his system of care in England. Victoria as yet had no Truby King centre, although infant welfare centres had been established in 1917. When the first Australian nurse trained in these New Zealand methods became available in October 1919, the Coburg branch of the Trained Nurses' Association lobbied the Council which, after grumbling about its debts, voted six to three to set aside *200 for a nurse's salary and rent, thereby making Coburg the first Truby King centre in Victoria. Governor-General's wife, Lady Munro Ferguson, and a host of medical and civic dignitaries. King's rather eccentric claims were that the essentials of healthy infant development comprised 'a capacious jaw, furnished later with sound teeth, and a large nasal cavity'. He spoke strongly against bottle feeding, adding: 'The aboriginals both here and in New Zealand were infinitely better equipped in the directions he had mentioned than the cultured inhabitants'. Lady Munro Ferguson spoke and two students from Heatherton College, South Yarra, used dolls to demonstrate bathing, dressing and child care. The centre, at 336a Sydney Road east, had a 'homelike, restful room, opening onto a wide balcony 30 feet long; two ante-rooms, bath-room, kitchen, and an attractive playground'. On the wall was the motto: 'Pure Air and Sunshine is as Necessary for babies as for plants'. The centre attracted many visits from those interested in infant health. opened initially part-time, but after August 1922 was open every afternoon, leaving mornings for home visiting. The Moreland school girls attended once a week for instruction in child care. The centre stressed breast feeding, advised mothers who had feeding difficulties and gave expert advice on artificial feeding. The cost of Willsmere milk forced some mothers to use local, non-bottled, non-pasteurised milk. Sister Kirkland instructed them in the 'humanizing' of this milk at home (the modification of cow's milk by the additions of water, sugars and fats). Her methods were adapted to 'the ordinary house facilities of a not wealthy suburb, no ice chest, but ordinary water, or "kerosene tin" coolers or bran boxes'. The results were said to be excellent and in the first year there were no deaths among the infants attending the centre. Increasing popularity and a growing population led to overcrowding at the Truby King centre. By February 1925 Sister Duff reported to the management committee that on 'some afternoons, mothers have to stand and wait until someone leaves the room. The room is not large enough to allow any more chairs. If the attendance of mothers increases the room will require expanding'. On 24 July 1926 a new brick centre was opened in Elm Grove which still tends the infants of Coburg to this day' (Broome: 197-98). centre. Sir Truby King had laid the foundation stone in October 1925. Designed by architect, R. McC. Dawson, the new red brick bungalow style building was the first purpose-built Truby King centre in Victoria. The local Coburg City Band shared the premises. The Truby King Movement In September 1920, the Society for the Health of Women and Children of Victoria (SHWC), often known as the Truby King Society, was set up in Victoria. It adopted the baby care methods promoted by Dr Truby King. Similar in aim to the Victorian Baby Health Care Association (VBHCA), it too, developed its own training school, and methods which became known as the 'Plunket Nursing System'. It also opened centres, with the Coburg example of 1919 pre-dating the actual formation of the Society. Crockett writes, 'King had set himself up as an expert in infant welfare in New Zealand at a time when New Zealand led the world in containing the incidence of infant mortality. Indeed, in 1918, the VBHCA examined and considered, but later dismissed the 'Plunket Nursing System'. Doctors in Australia for the most part were singularly unimpressed by King's 'charismatic character', his exhortations for strict routine, and his expensive and complicated formula for humanized milk which they deemed to be fat-rich but protein-deficient. The VBHCA had studied ideas in North America, England and New Zealand before deciding to ignore King's methods, instead choosing other expert opinions to develop a system which they believed suited the complex conditions affecting the mother and baby in Australia, to honour the individual rather than adhere to strict feeding and disciplinary codes'. class="c1">'In spite of their similar objectives, therefore, a great deal of antipathy and competition developed between the two societies' (Crockett: 18). 'Truby King supporters had produced a major coup against the VBHCA ... by being the first to construct a purpose built training hospital - the Tweddle Baby Hospital - in 1923, but wherever they gained a stronghold in the suburbs, especially in the Footscray and Dandenong regions, purpose built buildings were soon in evidence' (Crockett: 53). Notes by Frances O'Neill on Baby Health: The health of mothers and babies at birth and in the first years of infant life was of increasing concern in the first years of the twentieth century. In 1917 the first baby health centre was opened in Richmond. The Victorian Baby Health Centres association was formed the following year to form and organise new centres and their voluntary committees.. The Society for the Health of Women and Children of Victoria (Plunket Society) commenced shortly afterwards. The no of centres of trained infant welfare nurses and of mothers and infants attending centres grew rapidly. At the same time, infant and maternal mortality declined. The State formed an Infant Welfare Section of the Public Health Department and appointed Dr Vera Scantlebury Brown as the first Director in 1926. Maternal and child welfare services have become part of community health services in Victoria and the voluntary aspect has disappeared. purpose built infant welfare centre buildings were initially funded by voluntary activity. Before 1949 no government subsidies were provided for these buildings, Only a few were council funded.

class="c1">The most important buildings are those built before 1950 as they were community funded and built sometimes with voluntary labour.

Extent of Registration

NOTICE OF REGISTRATION

As Executive Director for the purpose of the **Heritage Act 1995**, I give notice under section 46 that the Victorian Heritage Register is amended by including the Heritage Register Number 54 in the category described as a Heritage place and Heritage Objects:

Maternal & Child Care Health Centre, 12 Civic Square, Croydon, Maroondah City Council.

EXTENT:

1 All of the building and structure marked as follows on Diagram 54 held by the Executive Director:

B1 Building B2 Lych Gate

2. All of the following objects:

1937 Measuring Table

Croydon Baby Health Centre Committee Minute Books, 1926D1950 (4 volumes)

Croydon Baby Health Centre Nurses Report Books, 1927-1969 (2 volumes)

3. All of the land marked L1 on Diagram 54 held by the Executive Director being part of the land described in Certificate of Title Volume 3309, Folio 767.

Dated 8 September 2005

RAY TONKIN

Executive Director

[Victoria Government Gazette G 36 8 September 2005 1996]

This place/object may be included in the Victorian Heritage Register pursuant to the Heritage Act 2017. Check the Victorian Heritage Database, selecting 'Heritage Victoria' as the place source.

For further details about Heritage Overlay places, contact the relevant local council or go to Planning Schemes Online http://planningschemes.dpcd.vic.gov.au/