



New South Wales Government
Independent Planning Commission

TRANSCRIPT OF PROCEEDINGS

RE: WENTWORTHVILLE NORTHSIDE WEST CLINIC EXTENSION
(SSD-17899480)

DEPARTMENT MEETING

COMMISSION PANEL: DIANNE LEESON (Panel Chair)
 ADRIAN PILTON

OFFICE OF THE IPC: JANE ANDERSON
 OLIVER COPE
 HEATHER WARTON

DPE: KAREN HARRAGON
 DAVID GIBSON
 NATHAN STRINGER
 JESS WATSON

LOCATION: VIA VIDEO CONFERENCE

DATE: 9.00AM, TUESDAY, 24 JANUARY 2023

TRANSCRIBED AND RECORDED BY APT TRANSCRIPTIONS

MS LEESON: Before we begin, I would like to acknowledge that I am speaking to you from Ngarigo Land, and I acknowledge the traditional owners of all the country from which we virtually meet today, and pay my respects to their Elders past and present.

Welcome to the meeting today to discuss the Wentworthville Northside West Clinic Extension Project currently before the Commission for determination. The applicant, Ramsay Health Care, is seeking approval for redevelopment of the Wentworthville Northside West Clinic, including the demolition of an existing two-storey building at the rear of the site, and construction and operation of a four-storey extension to the existing stage 1 clinic building. The proposal includes alterations and additions to the existing building, landscaping, tree removal, new car parking, and infrastructure improvements.

My name is Dianne Leeson. I'm the chair of this Commission Panel. I'm joined by my fellow Commissioner Adrian Pilton. We are also joined by Jane Anderson and Oliver Cope from the Office of the Independent Planning Commission, and Heather Warton, who is assisting the Commission. In the interests of openness and transparency, and to ensure the full capture of information, today's meeting is being recorded, and a complete transcript will be produced and made available on the Commission's website.

This meeting is one part of the Commission's consideration of this matter and will form one of several sources of information upon which the Commission will base its determination.

It is important for the Commissioners to ask questions of attendees and to clarify issues whenever it is considered appropriate. If you are asked a question and are not in a position to answer, please feel free to take the question on notice, and provide any additional information in writing, which we will then put up on our website. I request that all members here today introduce themselves before speaking for the first time, and for all members to ensure that they do not speak over the top of each other to ensure accuracy of the transcript. We will now begin.

So, thank you for meeting with the Commission on this matter. I note that you've sent through a presentation going through the key issues of the assessment and pretty much in alignment with your agenda that we forwarded. I suggest that we leave it to you to go through the presentation, and we'll have it as a conversation on the way through. So we won't hear a presentation from you and then come back to all of your questions,

we'll simply run it as a question and answer on the basis of your presentation as we go through, if that's okay with you.

MS HARRAGON: Thank you, Commissioner Leeson, and we understand that we'll be taking the opportunity to respond to any of your questions through our PowerPoint.

MS LEESON: Okay.

10 MS HARRAGON: So if you're happy now, I will, we will share our PowerPoint full screen, but I will just do a quick introduction. So good morning. My name is Karen Harragon. I am Director, Social Infrastructure and Infrastructure Assessments at the Department of Planning and Environment. I am here with my colleagues David Gibson, Nathan Stringer and Jess Watson from the Social Infrastructure Assessment Team.

20 Our presentation today will outline the Department's approach to the assessment of the SSD application for the redevelopment of the Wentworthville Northside West Clinic. The application is SSD, as it is development for the purpose of a hospital, with a capital investment value of more than 30 million. The proposal was referred to the Commission as Cumberland City Council objected to the application during exhibition of the EIS.

The matters that we are going to focus on today include the Department's key issues of concern, taking into consideration the issues raised in the submissions on the application, including built form and urban design, which will include building height and FSR, BCA compliance matters, tree removal and landscaping, flooding, traffic and parking. I'm now going to ask David to provide a brief overview of the site and the proposed development and we'll be sharing the PowerPoint and full slide. Thanks, David.

30

MS LEESON: Thank you.

MR GIBSON: Thanks, Karen. I'm not Jess Watson, but I'm having difficulties with my laptop, so I've jumped onto Jess's laptop, so apologies for that. Thank you, Karen, and good morning, all. My name is David Gibson. I'm the Team Leader of the Social Infrastructure Assessment Team. I'm going to start off today with a brief overview of the site and the surrounds, and then we'll get Nathan to run through the key issues that were considered in the Department's assessment report.

40 So Wentworthville Northside West Clinic is obviously located in Wentworthville, in the Cumberland LGA. It's approximately 23 kilometres west of the CBD, and 2.7

west of the Parramatta CBD. The site is located at 23 to 27 Lytton Street, and it's around 400 metres south of the Wentworthville town centre, and the Wentworthville railway station.

The site is zoned R4 high-density residential, and is subject to development controls under the Cumberland LEP, namely being height and FSR. The proposal of permissible with consent within the zone as an inanimate use, so it's not specifically described as being either permissible or prohibited within the zone.

- 10 So this is an aerial view of the hospital site, which adjoins a Council reserve set around Finlaysons Creek drainage catchment to the west. You can just see the concrete drainage canal running through the reserve there. A public access laneway adjoins the site to the south, which is basically those bunch of trees just south of where it says "site". The site contains an existing two-storey building fronting Lytton Street, which was constructed in 2015 and known as stage 1 of the overall development. At the rear and to the west of the stage 1 building lies an older structure known as the west wing.

- 20 The existing clinic site contains two parking areas, including an at grade car park to the south, and a car park within a fairly large undercroft area beneath the stage 1 building. Four driveways currently provide access to and from Lytton Street for both parking and for service vehicles. An existing Council pipeline easement runs east-west through the southern car park.

The site generally slopes from east to west, and subject to overland flows during significant flooding events. The clinic currently provides 70 inpatient units and nine consulting suites over 2,786 square metres of floor area. At the time that this application was lodged, the clinic had 45 fulltime equivalent staff.

- 30 So whilst it's located in a residential area, the existing stage 1 building, which was granted consent by Council and built in 2017, is institutional in appearance and contains a significant undercroft, as I mentioned previously, presenting for Lytton Street. The extent of physical works to construct the proposed extensions to stage 1 would be concentrated to the southern and western portions of the site. This area is indicated on the slide, and I will provide a more detailed overview of the application and the proposed works in a moment.

- MS LEESON: David, if I can just interrupt you there. We're reasonably familiar with the proposal, so we probably don't need too much description of the proposal.

40

MR STRINGER: Okay.

MS LEESON: If we can keep moving through.

MR GIBSON: So we'll push on. Probably don't need 4 or 5. Let's go straight to slide 6, and I'll just give you a very brief outline of the application description, and then I'll get Nathan to launch into the key issues.

10 So an outline of the DA that we're currently considering is construction of a western wing extension adjacent to the Council reserve, construction of southerly extension along and adjacent to the southern boundary, internal alterations to the stage 1 building, use as a hospital, landscaping works, provision of car parking, addition of car parking spaces, and some three-pylon signs.

MS LEESON: David, are you able to - just while we're on this slide, we'll stop you. The Commissioners have questions on this. Can you just quickly describe the extent of alterations to the existing building? They are all internal to facilitate the connection to stage 2, are they?

MR GIBSON: That's correct, yes.

20

MS LEESON: So there are no other - - -

MR GIBSON: Nathan, if you just - I'll just get Nathan to chip in.

MR STRINGER: There's some - there are some minor rearrangement of some internal rooms. They're putting a gym and a new kitchen area, a café kind of space, for the staff and patients, and then there will be new lobby entrance which connects to the ground adjacent to the loading bay area.

30 MS LEESON: Yes. So the new gym, café area, as we understand it, purely for the hospital-related use, it's not public-related use, and that's repurposing those areas that are currently - - -

MR STRINGER: Yes.

MS LEESON: - - - they are flood prone, and the inpatient units will obviously be demolished and moved, and that entry way that you describe, that entry lobby, was put for us yesterday by the applicant that that's not for patients or visitors' first arrival to the site, it's really an internal lobby area for people coming out of the café or the gym
40 or some of those external landscape areas. Is that your understanding?

MR STRINGER: Yes. It connects to the lift overrun, which is part of the new southern wing extension, but in order to adjoin into the existing building, there's a new entry at that lower ground level.

MS LEESON: Yes, but it's not like the main entry lobby for the building, is what was described to us yesterday.

MR STRINGER: No.

10 MS LEESON: Okay. Thank you. And just while we're on it, that lift overrun, that's very much in the area of 3.6-metre, I think, height exceedance.

MR STRINGER: 3.85.

MS LEESON: 3.85, I beg your pardon.

MR STRINGER: Yes.

20 MS LEESON: Okay. Thank you. Adrian, have you got any questions while we're on this slide?

MR PILTON: Not at this stage, no, thank you.

MS LEESON: Thank you.

MR GIBSON: Okay. Thanks for that, Nathan. So just wrapping up, we're also talking about removal of 35 trees. Obviously there's additional planting to compensate for that, and importantly, there's the realignment of the Council pipeline easement closer to the southern site boundary. So we'll just go straight into the key
30 issues now, and Nathan will speak to those for you. Thank you.

MS LEESON: Thank you.

MR STRINGER: Thanks, David. As mentioned earlier, I'm Nathan Stringer, and I'm currently acting as a Principal Planner in the Social Infrastructure Assessments Team. So I'll speak about the Department's key assessment issues, taking into consideration the issues raised in agency comments and in Council and community objections during exhibition. I'll start with our assessment of the built form.

40 So as touched on earlier, the development includes construction of southern and western wings. The southern wing, which is shown in the image to the left, includes

three floors of aged care set above a ground level undercroft car park, and the western wing includes two floors of patient care set above two levels of parking. So the extensions have been designed to enable level internal access through the development to the first floor of the existing stage 1 building.

As shown in the image to the right, the overall layout of the site provides a series of pavilion-style structures, which are perforated by courtyards and balconies. The Department considers this layout would enable appropriate solar access to the landscaped and the internal areas, which would provide an adequate amenity for future users. I'll discuss solar access in more detail later in this presentation.

Council did raise concerns during exhibition regarding the failure of the proposal to comply with setback controls under the DCP. The DCP requires setbacks of six metres from the front and rear, and three metres from the side boundaries.

So the Department notes that the development exceeds the required setbacks to both the front and the side boundaries. However, along the western side boundary, it would fail to meet the minimum six-metre setback from the Council reserve, having been set back by between zero and three metres at car parking levels, and between one and 4.5 metres at the floors above.

It would, however, be separated from the adjacent properties to the west by the reserve, and the Department therefore considers that the setback is acceptable in the context of this site. In having regard to the acceptability of the impact on the reserve, the Department considered overshadowing and the principle for impacts on the public domain views established in the Land and Environment Court case *Rose Bay Marina Pty Limited v Woollara Municipal Council & Anor*. The Department's assessment concluded that the overall environmental impacts to the reserve are acceptable and that the proposal would have only minimal impacts on views and vistas currently obtained from the reserve.

It is also important to note that the setback of the existing west wing building, which is proposed for demolition, does not comply with the DCP.

MS LEESON: Nathan, just while you're discussing that setback on the western side, is part of the acceptability of that because of the extent of landscape screening that's there?

MR STRINGER: Yes. Yes. That would provide screening from that site, which also would reduce any impacts on views and vistas from the park.

MS LEESON: And from the residential buildings across the other side of the park.

MR STRINGER: Yes.

MS LEESON: Thank you.

MR STRINGER: So moving on to the height of the building, the control under the LEP is 15 metres for this site. As you can see on the images in the slide, the height limit is shown shaded in red. Anything in grey above that is not compliant with the control.

So when we first received the application, the proposal exceeded the height control by up to 4.6 metres. The application did subsequently reduce this, resulting in a maximum height exceedance of 3.85 metres. So as the proposal exceeds the control, the applicant did submit a clause 4.6 variation request. The Department has assessed the proposed height exceedances against the objectives of clause 4.3 of the LEP, which is the height of building clause. I'll expand on those now.

Objective A seeks to establish a maximum height of buildings to enable appropriate development density. The Department considers that the height exceedance would allow for the provision of a suitably sized mental health facility while accommodating the constraints of the site. For example, our at grade car parking would allow for the retention of overland flows across the site, and for the hospital to remain operational during flood events.

The applicant has advised that the building height reflects clinical functional requirements for internal level connections with the existing stage 1 building. So therefore internal ramps between the buildings, their wards and extensions would not be appropriate.

The Department is satisfied that the applicant has adequately demonstrated that those internal ramps would result in a loss of floor space and circulation, and that a compliant development could therefore not be delivered without significant implications for the functioning of the facility. A redesign of the building to achieve full compliance with the height control would not be warranted in this instance.

Whilst the proposal does have a variation to the permitted density, which also results in a 9 per cent FSR, floor space ratio, exceedance, for the reasons discussed further in our presentation, this is considered acceptable. Overall, the Department is satisfied the proposed height variation is consistent with objective A of the LEP.

Moving to objective B, which seeks to ensure that the height of buildings is compatible with the character of the locality. So as you can see in the image to the left, the east and south of the site contains low density residential properties, with a height control of 9 metres. The sites zoned R4 high density residential adjoining to the north are yet to be developed in accordance with the current zone. However, they do have a height control of between 12.5 and 15 metres.

MS LEESON: Sorry, Nathan, just - - -

10 MR STRINGER: Moving to the north - - -

MS LEESON: Nathan, sorry, it's Dianne Leeson. Just to interrupt you there, I mean, we did go to site, we've had a good look at the surrounding areas, as they exist. The future – so we probably don't need to belabour a lot around compatibility with the character of the locality at the moment - - -

MR STRINGER: Okay.

20 MS LEESON: - - - but there's a question around the future desired character of the area. Is that what you were about to speak to?

MR STRINGER: It, yes.

MS LEESON: Okay. Thank you.

30 MR STRINGER: So the future desired character of those sites to the north is a higher density residential character of up to 15 metres, obviously 12.5 at the site immediately adjoining. But further to the northeast along the site, there are obviously current buildings which do approach that control of 18 metres, and then across the Council reserve, the controls allow for 15 and then within the two centre future character, further to the northwest, the controls allow heights of between 30 and 41 metres.

MS LEESON: Now, that's fine, Nathan. We understand all that quite well.

MR STRINGER: Okay.

MS LEESON: So I think we can probably move through.

40 MR STRINGER: Okay, no worries. So the proposal has been designed to take advantage of the natural slope of the site, which means that the exceedances along Lytton Street are minimal, which up to only - it was 0.6 metres. As mentioned

previously, the greatest exceedance of 3.85 is within the centre of the site, at the proposed lift overrun. This, however, would be largely screening public sightlines from Lytton Street. Due to the location of the overrun towards the centre of the site, the impact of the exceedance would be negligible when viewed from the Council reserve also.

The Department notes the site allows generous setback from adjacent properties to the south and west by the virtue of Lytton Street and the public laneway, including separation between the development and the lower density residential built form.

10 We're satisfied that the proposal has been designed to provide a sense of transition from adjoining and adjacent residential properties, and the future development character would be facilitated by the R4 high density zoning to the north. The development would remain compatible with the overall emerging character of the locality. It would therefore be consistent with objective B of clause point 3 of the LEP.

Okay. Moving on to objective C, which seeks to minimise the visual impacts of the development, as mentioned, the lift overrun is in the centre of the site, which would be obscured in sightlines from Lytton Street, set behind the front of the extension in the

20 existing stage 1 building. That is shown in the image to the left. Given the minimal 2 per cent height exceedance along Lytton Street, the Department is satisfied the development would not cause visual harm in these views.

Allowing for the slope of the site, the development steps towards the Council reserve, as shown in the images to the right. Immediately along that Western frontage, the structure would exceed the control by between 0.85 metres and 3.3 metres. However, the greatest exceedances are set back behind the boundary, so that lift overrun, which exceeds the control by 3.85 metres or 25.7 per cent, that is set further back from the

30 irregular boundary by up to 16 metres.

The Department does consider that the design of the building would reduce the visual impact of that lift overrun by ensuring that it's setback from that western site boundary and behind those southern wings. Additionally, the reserve contains significant vegetation and additional tree planting is proposed, so this will further mitigate those impacts.

MS LEESON: Nathan, we might come back to that tree planting later, in the landscape issue, and around flooding. So just park that thought for the moment.

40 MR STRINGER: Yes.

MS LEESON: Again, we're reasonably familiar with all the documentation that's been provided, so I think so far as the objectives are concerned, you've outlined that very well in the assessment report, so we could probably, I think, skip through that, and for my mind, unless Adrian Pilton has got a question on the FSR, I think we can probably move through that as well, given that it's a product of the height and the setbacks. Adrian, are you comfortable with that?

MR PILTON: I'm very comfortable. Thanks, Di.

10 MS LEESON: Thanks.

MS HARRAGON: We might just move to slide 13, and we might just quickly touch, then, on the SDRP, the State Design Review Panel, and the government architect's advice while we're on that slide.

MS LEESON: Thanks, Karen. That's where I wanted to get to, just to see what their final position might be, because there's a bit of a tricky interplay here between car parking, flooding and getting the development in accordance with sort of the strategic merit of the proposal, I suppose. So if you can take us through that, then we'll chip in
20 with any questions.

MR STRINGER: Thanks, Karen. So, yes, prior to the lodgement of the SSD, the design did go to the SDRP, as you know. The panel advised they don't support the non-compliances with the height and FSR controls, and they made key recommendations regarding built form. This included a recommendation to remove the undercroft car park to allow for a redistribution of that floor space, to provide usable space at ground-floor level. This would have reduced the building's overall height and scale and bulk, and the Department agrees that this would have created a better public interface along Lytton Street.

30 The panel recommended, in the event that the undercroft was retained, that the applicant should reduce the number of parking spaces to enable internal communal spaces, increased internal communal spaces, and increased landscaping at ground level. The panel also suggested that the applicant reduce the height of the undercroft, which would result in a reduction to the overall building height.

The amendments were not made by the applicant. At RTS stage, the Department strongly encouraged the applicant to consider lowering the height of the southern building to ground level. However, the applicant reiterated their concerns that these
40 changes would require construction of a basement car park, which would in turn cause flooding issues. Any basement car park would have also encroached into Council's

pipeline easement. So these design amendments, the applicant argued, would also remove their ability to provide those level internal connections to the stage 1 ward.

MS LEESON: Yes. Thank you. Adrian, do you have any questions around that?

MR PILTON: No, I'm happy. Thank you.

MS LEESON: Thank you. Thanks.

10 MR STRINGER: Okay. So we'll move onto the BCA compliance issue. The applicant did submit a BCA report which identified a number of key issues of noncompliance that to date have not been adequately resolved. The Department holds concerns that they have not submitted sufficient evidence to demonstrate that the development can meet BCA compliance without major design amendments. This is particularly pertinent given the fine balance of the Department's assessment of the proposal's height and FSR exceedances.

20 So the BCR[sic] report notes a number of fire safety performance and emergency egress issues, and it recommends some design solutions to address these. For example, spandrels may be needed to be provided at the interface with the existing stage 1 building, should it not be fitted with sprinkler system.

The applicant hasn't adequately demonstrated that the design of the development as proposed would meet the BCA requirements without the need for significant amendments. So the Department also holds concerns regarding the location of the rear emergency fire stairs adjacent to the western boundary, so that's stair 2, which you can see in both of these images. The one on the left shows the lower portion of the site, the southern portion, and the one on the right is just zoomed in to get a clearer view.

30 So as you can see, those stairs, they are sited right along the boundary of the site, along – adjacent to that southern wing extension. The applicant hasn't sought approval from Council to access that Council land. So as a result of the building, patients would be required – patients located within that western portion of the southern wing extension would be required to evacuate the building in an emergency within a narrow rear setback, and then travel back under the building for a considerable distance through that courtyard, which contains a number of obstacles.

40 The Department is concerned that many of these patients could be expected to be vulnerable, potentially having been medicated at night to sleep, or to have impaired cognitive function due to onsite mental health treatments. The Department isn't satisfied that the applicant has demonstrated that the final built form of the

development, which could potentially need to be altered to address fire safety performance and emergency egress issues, would not result in significant design changes.

So to address this - - -

10 MS LEESON: Sorry, Nathan. When we met with the applicant yesterday, obviously the BCA compliance issue came up, and they, you know, expressed their preference that this not be a deferred commencement, that this could be dealt with, and there would not be any changes to building envelope as a result of this. We've asked them to come back to us this week with how they would prefer to see the recommended condition worded, so we'll take that onboard.

MR STRINGER: Okay.

20 MS LEESON: Is your concern here, subject to a certifier or a compliance expert dealing with it, that if there was access through that back fence, which is the palisade fence that Council requires, in an emergency, that that would satisfy the compliance? Is that your understanding?

MS HARRAGON: Can I just speak to that. So Council are prohibiting access through that fence, and have asked for a condition to be imposed.

MS LEESON: Thank you.

MS HARRAGON: So our preference is, you should be obtaining the solution to your BCA requirements within the provision of your site, unless you've got a legal right to do otherwise.

30 MS LEESON: Okay. No. It's very hard to understand that Council is not going to grant access. Thank you.

MS HARRAGON: Yes. And I'd probably just add to that as well, Commissioner, that even if Council were to do so, I'm a little bit challenged to have what could be a potentially large number of people who are compromised walking into a Council reserve at night where there's an open drainage channel, so - - -

MS LEESON: Thank you. Yes. Thank you.

40 MR PILTON: Do I understand it, in that lefthand diagram, that the arrow is the exit path you're suggesting?

MS HARRAGON: Well, we've reached the conclusion that that's the only physical way that you could get out of that exit. So we've added the green arrow, I can confirm that, and the applicant has included - - -

MR PILTON: But that's over the top of the ramp down to the loading dock.

MS HARRAGON: It is indeed, Commissioner. So the alternative to that is that you would travel in a more westerly - sorry - northeast, north direction along the reserve,
10 back behind through another part of the building, which that distance to travel would be extraordinarily long, should these buildings be on fire.

MS LEESON: So if I can just summarise and pick up your point, then, Adrian - well, we've got a few things. One is, Council won't get access to access the reserve. The Department has concerns about accessing the reserve given the nature of the patients and night-time issues. That to try and exit the site coming back up that driveway, it's quite steep, we noticed when we were out there onsite the other day. And so
20 alternative access is really, as you're suggesting now, to perhaps come in a northerly direction, which is a long path of travel. Is that more or less - - -

MS HARRAGON: Which - yes. The only solutions would be along the back of the proposed car park that they're looking at building, which would be a much longer distance as well. And I guess this is also dependent upon the nature of the methodology of performance solution, because if they're going to have fire-isolated parts of the building, as compared to sprinkling of different areas, that again might determine how many people might be coming down that ramp and where their exit might be as well. So there's - we were quite concerned by the number of non-compliances that hadn't been addressed by the time they chose to lodge it.

30 MS LEESON: Okay. Thank you. I think I did read somewhere they were proposing to sprinkle the building, but it wasn't - now that you've mentioned it - it wasn't clear whether it was the entire building, or just portions of the building. Just while we're on that BCA compliance issue, has the Department got any concerns that stage 1 is not compliant at the moment? Is there a review required of stage 1? Or only as it - - -

MS HARRAGON: Yes. When - - -

MS LEESON: Sorry, or only stage 2?

40 MS HARRAGON: We're more concerned about the new wing. The stage 1, which will obviously have to be - the certifier will have to form their own opinion on whether

the minor internal works that are going on will require them to reconsider the compliance for that, anyway, but our bigger concern is the new building.

MS LEESON: Okay. Thank you.

MR STRINGER: It is probably worth nothing that in the BCA report, the expert that conducted that report noted that they did not gain access to the stage 1 building.

10 MS LEESON: Yes. Thank you. All right. Adrian, any questions further on the compliance issue?

MR PILTON: No, I can see it's a real issue.

MS LEESON: Yes. It's very much an issue. Okay. Thank you for that. I'm happy to keep moving through.

20 MR STRINGER: Okay. We'll move to flooding, if that suits. So the site is impacted by overland flows during the 1 per cent, 0.5 and 0.2 per cent annual exceedance probability events, as well as during the probable maximum flood event. For example, during that 1 per cent AEP event, the site would see overland flows of depths of below 10 centimetres, but with some small sections of flow of up to 25 centimetres at the loading bay. This would progressively increase during each of these events, the 0.5 and the 0.2, up until the PMF event, where the majority of the site still wouldn't exceed 10 centimetres in depth. But, however, small areas would approach 0.5 and 0.75 metres in depth, typically along that loading bay area.

30 During these events, the proposed car parking and the patient care areas would not be affected. So despite the low depth of that and velocity of that water within the site, access to Lytton Street would be impacted during the flood events. For example, during the PMF event, the site would be flood-affected for up to two hours, no access or egress would be possible.

So in general, the post-development flood hazard at the surrounding, and surrounding the site would remain the same. There's a small area of the southern undercroft where the basketball court is, in the landscape area. That would have hazards of up to the H5 category, which is unsafe for vehicles and people. So flood warning signage would be installed to mitigate the impact of this. The signage would be installed within the stairwells that would provide access to that.

40 The applicant provided an outline emergency management plan which demonstrates that the safety of patients and staff during flood events can be ensured. The flood

modelling and emergency management procedures provided have been assessed by the Department's environment and Heritage Group, and by the New South Wales State Emergency Service, who have not raised any objections to the proposal or the flood mitigation measures. So the Department is satisfied that the applicant's flood modelling demonstrates that the development would not result in adverse flood impacts offsite.

10 MS LEESON: Thank you. And you've clarified, that H5 area that's shown in the post-development scenario, I don't think it is covered in the assessment report. But that's basically the basketball court area. Is that right?

MR STRINGER: Yes. Yeah.

MS LEESON: Thank you.

20 MR PILTON: May I ask just a - this might be a naïve question, but with the overland flow going through that southern section, the flood report calls for a – sort of a light to open to fence along the boundary, presumably to allow the water to flow freely through it, but along that fence it's got very dense landscaping, and I'm wondering if any thought had been given to the fact that that might act as a bund, particularly if there's any debris coming down with overland flow.

MS HARRAGON: Perhaps, Commissioner, we can revisit the species. Knowing what the height of that overland path of flow is, maybe there's some value in being gained by having some species where there's a reasonable bare trunk and they're maintained as a bare trunk up to a metre in height for the lower level of the trees.

30 MR PILTON: Maybe someone could have a look, because I haven't got the drawings here in front of me, but I'm pretty sure it's all fairly low, dense ground covers and shrubs through there.

MS HARRAGON: Yes. Because I think that the situation is that balance of trying to maintain solar access, as well as maintain privacy at the lower level, but we'll see what could be improved by that.

MR PILTON: Yes. And there's not much room for trees along there, either.

40 MS LEESON: No, and it is a balancing issue down there, that the flood management, the landscape and the privacy - I mean, on a positive note, the, moving those inpatient units by demolishing the western wing and putting them higher is a very good

outcome for the development. But there are those perimeter issues that need to be addressed.

MR STRINGER: Yes, absolutely. I think there is a net - the Department thinks there's a net overall benefit to the proposal in terms of flooding simply because of the relocation of those existing inpatient units.

MS LEESON: Okay.

10 MR STRINGER: If there's no other questions, I might move on to the traffic and parking section - probably parking is most important here, so I might not go through the traffic.

So Council did raise parking as a key issue in its submission. The proposal itself would result in the provision of 77 onsite car parking spaces. This is six more than what is required under the former Holroyd development control plan, which applied to the site up until November 2021. So when the applicant was getting their EIS together, this, the DCP, applied to the site. It's worth noting that the replacement DCP does not provide parking rates for rehabilitation centres or for public hospitals.

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So in the absence of current DCP outlining those requirements, Council request that onsite parking be determined in accordance with the Guide to Traffic-Generating Development, so this would require a minimum of 102 onsite parking spaces, which is 25 more than what has been proposed. The applicant subsequently undertook a survey which demonstrates that surrounding streets have an average occupancy rate of 39, and therefore would have capacity to accommodate additional street parking if necessary. The applicant also undertook a first principles approach to determining parking requirements, which takes into consideration the staff and patient numbers at the site, as well as ABS data for trip to work statistics.

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It indicated that the site requires 81 onsite, or 81 parking spaces, which is four more than what's proposed, but they have demonstrated in their parking survey that there is scope for that to be accommodated on-street.

So essentially the Department is satisfied that the parking spaces proposed is acceptable. Given that the number of on-street parking spaces exceeds that required off-street parking spaces, exceeds that required by the former DCP, which applied to the site until November 2021, given that the applicant has provided more recent data to calculate the required parking provisions, which is therefore more suitable in
40 determining parking rates for this development than Council's preferred option of the Guide to Traffic-Generating Development, and the parking survey demonstrates their

sufficient capacity for any excess parking to be accommodated on surrounding streets. The applicant also did provide traffic modelling which demonstrates traffic generated by the development is acceptable, as shown on the right here.

10 MS LEESON: Nathan, just on the Guide to Traffic-Generating Development, I think the applicant suggested it wasn't particularly relevant. Council is obviously of a view that it is. Is the Department comfortable to set it aside? I mean, it does generate 102 spaces, as you say, which would be in fact difficult to accommodate on the site, I don't disagree with that, but I'm just interested in your comments on the relevance of the RTA guide.

MR STRINGER: The Department considers that the guide is relevant, but as with any project it's a balancing act. In this instance, it's balancing against the request from the SCRP to reduce parking further, as well as those points put forward about the fact that the former DCP was significantly less than that Guide to Traffic-Generating Development, that the current DCP doesn't provide them, and the fact that the applicant has undertaken some site-specific work for this particular development. So on balance, the Department considers that this outcome is acceptable.

20 MS LEESON: Okay. And do you know why the Council has, in their most recent submission of September last year, changed that number to 95? They've asked minimum requirement of 95.

MR STRINGER: Yes. It went up from 102 to 105, but they didn't explain why that was.

MS LEESON: It hasn't been explained why they've gone back to 95?

30 MR STRINGER: I think it was 105.

MS LEESON: I beg your pardon - - -

MS HARRAGON: Perhaps we can take that offline and we can clarify.

MS LEESON: No, no, they're asking for a minimum of - according to their letter of 8 September last year, "a minimum of 95 parking spaces shall be provided." They're saying there's a shortfall of 18, which would make the arithmetic work. Okay. We're talking with Council later. We'll ask them that question. And the other question - - -

40 MS HARRAGON: And probably - could I just add to the discussion around the suitability of the guidance on car parking rates. It's certainly open to the Department

and to a determiner to have regards of the very nature of this particular health facility. You know, I think the functionality of it might mean that a lot of these inpatients will probably not drive to their, to this hospital for their stay. So maybe that's a consideration that we certainly had regard to when we were looking at numbers.

MR STRINGER: Yes.

10 MS LEESON: The applicant did put that to us yesterday, that their protocols are that their patients don't drive to site, certainly those that are in for, I think, about a 21-day period. The Guide to Traffic-Generating Development also says that there should be comparison drawn with similar development, so - and it calls up private hospitals, and this is probably atypical of your normal private hospital, which is surgeries and things like that. But there's no, I can't see that they've done any comparisons with a similar development. Is there any evidence of that? Have you, you know, is that relevant?

MS HARRAGON: Yes. We've got no evidence that they did that work. Whilst they kept revisiting the park assessment, we're not aware of them having surveyed similar functionality at other clinics of this nature.

20 MS LEESON: No. I mean, it appears that they've worked out their car parking requirements based on the way the facility will operate, and then they've done a survey of available on-street parking, and they're relying on it for their overflow. I mean, having said that, when we were out there last week, I think it was, the car parks weren't full, so it was, the southern car park in particular wasn't full, so it might not be that much of an issue, but we'll certainly discuss it further with Council.

I don't have any further questions on the - I think you're right, traffic is manageable. The parking we've discussed. Adrian, do you have any more questions on the parking?

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MR PILTON: I'm happy with that. Thank you.

MS LEESON: Okay.

MS HARRAGON: We might move to slide 17 and talk regarding tree removal and landscaping.

MS LEESON: Thank you.

40 MR STRINGER: Thanks. So tree removal and landscaping were key assessment issues raised by Council, as well as the Department's Environment and Heritage

Group. The Department has no concerns regarding the 35 trees proposed for removal to accommodate the development. However, the Environment and Heritage Group has raised concern that there is insufficient evidence to demonstrate the ongoing viability of three additional trees that would be subject to major encroachment. So that's two trees that are within the Council reserve, which, if we zoom in, I think it's 48 and 49, which is the - in the left, the two green trees with the red in the centre, and then the tree 43 is on the site. The applicant - - -

MS LEESON: Does Council have any concerns about that?

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MR STRINGER: Council hasn't raised any concerns about that, no.

MS HARRAGON: You can actually add to that as well, a tree that we were anticipating trying to amend the building in order to save, we also found out they've already issued an order for it to be removed already. So, yes, it can be quite challenging to – I guess to continue to fight the battle of trees at that stage.

MS LEESON: Thanks.

20 MR STRINGER: Yes. I think - we also didn't receive any information as to why Council hasn't raised concerns about those trees. So the applicant refused to undertake additional root mapping, which was requested by us to demonstrate that those trees would remain viable. The Environment and Heritage Group is therefore not satisfied that information has been submitted to adequately demonstrate the ongoing viability of those trees. So to address those concerns, we've recommended conditions to assist in mitigating and remediating any impacts that might occur to the trees. That includes requirements for arborist supervision during construction works, as well as post construction tree modelling. Those conditions were recommended by EHG.

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The proposal involves both soft and hard landscaping, including within the ground level undercroft beneath the southern wing extension, and landscaping to patient terraces and central courtyards. Council requested additional planting around the site boundary, to be set around a palisade fence, as discussed previously. The applicant incorporated this into the development at RTS stage. It's noted that the ability to undertake deep soil planting along the southern boundary will be constrained by the Council's easement, which is to be relocated to run the full length of this boundary inside the site.

40 Overall, the Department is satisfied that the removal of the existing trees is justified, and that the replacement planting can suitably offset the localised impact of tree

removal. The Department is also satisfied that the hard and soft landscaping would be of a suitable quality.

MR PILTON: I would note that I think that there's actually 13 replacement trees proposed rather than 11, but of those 13, there's five of them are dwarf magnolias, which I wouldn't classify as a tree. They're only about three or four metres high, so I think we can probably say there's really only eight trees that are replacing those. The eight eucalypts.

- 10 MS HARRAGON: Commissioner, we'd be open to looking at a drafting of the condition that we currently have about the final landscaping plan to require them to achieve a certain number of trees for the contributory crown.

MR PILTON: Okay. Thank you.

MS HARRAGON: I think we can propose an offer in a memo.

MR PILTON: Okay. Thank you.

- 20 MS LEESON: Thank you. Adrian, do you have any other questions or comments on the, or questions on the proposed landscaping in that undercroft area?

MR PILTON: No. I'm a little bit doubtful about the ability of those species to survive under that very shaded area, but - and they are shade-tolerant plants, but they'll need extreme care, I think, so survive. However, I think that's an issue for the owners.

MS LEESON: It's an issue for them, and I think it's something that we can have a look at when we go through the recommended conditions with a fine-tooth comb.

- 30 MR PILTON: Yes. Also at the front of the site on Lytton Street, where the new substation is, I have my doubts about how they're going to do, excavate for soil in there to provide for the new planting without creating a mound, which will presumably sort of not help the overland flow but we can look at that in detail in the conditions.

MS LEESON: Thanks, Adrian.

- MS HARRAGON: And another condition that we'd be able to work with you on would be potentially asking for a long-term maintenance schedule for the landscaping, and particularly having focus on maintenance focus after flood events, among other
40 things.

MR PILTON: That'd be great. Thank you.

MS LEESON: Thank you. That's a very good suggestion.

MS HARRAGON: Okay. So, thank you, Commissioners. If there's no more questions on this particular issue, I'll now conclude our presentation. So this concludes the presentation on the key issues of the application. The hospital redevelopment has been designed in part to respond to a number of challenges. This includes providing increased hospital accommodation and clinical floor space to an existing medical facility over a consistent floor plate height to maintain the current institutional architectural style of the existing hospital, to maintain the existing access driveways along Lytton Street, to reduce changes to current vehicle crossovers and functions, to maintain development away from the relocated Council easement that currently services the street, to take advantage of the adjoining public laneway to bring appropriate levels of separation to the southernmost adjacent dwelling, and the public domain in terms of privacy, amenity and overshadowing, and lastly to maintain flood flows through the proposed building's undercroft, which will ensure that the development maintains flood resilience in terms of habitable floor space and building access continuing to be flood-free and improved from the current operation. The proposal will support the delivery and enhance health services facility that will provide increased patient and clinical capacity to meet growing unmet demand in the region.

During its assessment, the Department identified a number of concerns to the development and requested the applicant give consideration to amending the development to respond to these concerns. The Department also considered a range of alternate design solutions that could have imposed – it could have imposed on the development by way of recommended conditions, which had the potential to reduce FSR, increase setbacks, reduce parking and reduce tree removal.

The Department was not satisfied that the imposition of such conditions to require significant amendments was warranted in the circumstances, having regard to the potential consequential impacts of the clinical function and viability of the facility, having regard to the circumstances of the actual site and the development.

Overall, the development concluded in its report the impacts of the development can be mitigated through the recommended conditions of consent and the development would be in the public interest. Thank you. I'll hand back to the panel.

MS LEESON: Thanks very much, Karen. That's been helpful as a closing remark. I have no further questions of the Department. Adrian, do you have any further

questions? If not, we'll ask the office if they have anything that we might have missed.

MR PILTON: I have nothing.

MS LEESON: No, nothing for you? Jane and Heather and Oliver, are there any issues that we've not discussed today that you think we should?

10 MS WARTON: Thanks, Dianne. Could I just check, the wording of the deferred commencement - - -

MS LEESON: This is Heather Warton, just for the transcript.

MS WARTON: Yes, sorry, this is Heather. The wording of the deferred commencement condition was intended that the applicant get a certifier to review their proposal, prepare a new report, and then submit that to the Department, and then, assuming everything was okay and nothing had to change, you'd issue an operational consent. Is that how it would work?

20 MS HARRAGON: I can't recall the specific wording, but it was certainly to have a new and updated BCA report that would come back, that would speak to a better detailed set of plans so that the number of non-compliances would no longer be in the report that was submitted supporting the proposal.

MS WARTON: What would happen if the certifier came back and said, "Oh, you're right, we can't rely on that egress, we have to do a redesign"? How would that pan out?

30 MS HARRAGON: That would actually require the applicant to lodge a mod.

MS WARTON: A mod? But it - before the consent became operational?

MS HARRAGON: That would not be unusual. That's actually occurred in a number of instances, including working with the IPC, and typically what we have achieved in those circumstances, when we actually get a compliant set of plans - in the example that we've dealt with before, we actually had a compliant set of plans submitted and a compliant BCA report, and the mod not only endorsed and reviewed that set for consistency and appropriateness, but we then also removed the deferred commencement condition as well at the same time, and in that respect, we actually just
40 consulted with the IPC at that time as well.

MS WARTON: Okay, great. Thanks. Yes, I understand. Thank you. And just one more issue about the car parking, am I right in thinking that the Department has reassessed the car parking for the whole development, as it will result with this extension, and not just the, just purely the extension, the parking generated from the extension?

MS HARRAGON: It was the - the traffic report is an assessment of the entire development. As I said, it will operate following the development being in place. So it's the full development, not just the extension.

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MS WARTON: Okay. Thank you.

MS HARRAGON: But it's certainly dependent upon how they've approached it, having regard to the way the facility operates at this time in terms of the behaviour of employees and the behaviour of patients.

MS WARTON: Okay, great, thanks.

MS LEESON: Thanks. Thanks, Karen. Then, I don't think the Commission has any more queries or issues to raise with the Department, so thank you very much for the presentation and your availability this morning. We will now close the meeting. Thank you.

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MS HARRAGON: Thank you, Commissioners, and thank you, Secretariat.

MEETING CONCLUDED