

We object to the project as it stands. The projects identifies one giant 9 storey building. The objection is based on the following grounds.

A) The proposal suggests; that it will provide a 24 hour emergency dept to support Illawarra Health ED (Emergency Dept). However, the definition, in this development's context, needs to be clarified. Is this going to be a 24 hour primary care unit? (GP practice), similar to the Emergency at Bulli Hospital? or will it be a fully functioning Emergency dept? And if so, what level? The illawarra needs one that will it provide level 3-4 services similar to the ED in CBD Sydney? A separate 24 hour primary care service can also be attached. But the definition needs to be clarified because as it stands, the term "E.D." it is misleading.

B) Wollongong Medical Centre, also located on Crown St, was established and approved, in the 80s on the basis that it would function as a 24 hour "E.D." to support Illawarra Health. Leave was granted and codes and policy ignored, by Council based on the notion it would assist the community. The defintion of this again, also was not clarified. Once approval was granted, the only people the medical centre served was the owners.

Once opened, this centre functioned as a "primary care" unit. A GP's medical centre. And. after a few months, the medical centre (despite being in high demand), stopped staying open 24 hours and closed it's doors at 10pm. Over time, it closed sooner and sooner, so, that after a few years it was closing at 6pm. The doctors wanted to spend time wth their young families they said. And a lack of doctors / Gps was not the issue. The community was deliberately misled.

Further to this, the medical centre would redirect people (including leaving a note on the access point, sliding doors) to ED Wollongong Hospital after these hours or for emergency and serious matters.

Almost immediately, the service became a CASH and RUN scenario by the owners. A cash cow. A revolving door of patients, a cattle call of patients, and money earned by the owners. They became multimillionaires and moved to Bellevue Hill and eventually, sold the business.

So, the iussue here is, is this proposed development also manipulating the system to get approval? Is it going to be a genuine ED? and will it be 24 hours or not? will it change it's policies once it is given the approval and opens it's doors? or will modify its policies once open? All I see here is yet another cash cow, with little or no relief for the community, and patients once again being redirected to Wollongong Hospital E.D. after hours.

C), What makes the E.D. systems work in Sydney, is that every hospital in the city have fully functioning ED. Most of which are level 4. **(Refer to footnote (1))** Each ED is fully functioning, capable of addressing all needs. Further to this system, all services are in constant communication. Paramedics are also included in this communication web. Paramedics' are in constant contact with the EDs, so when an ED is full, they notify the paramedics and those paramedics then redirect that/those patient(s) to an ED that has available beds. Thus, no patient waits more than 15 minutes to be seen, and 30 minutes to be assessed. Will this happen in this instance? or again, is this nothing but a cash and grab?

D) The other reason the system in Sydney works, particularly in the Eastern Suburbs complex (i.e. POWH, Sydney Kids, Royal Women's), is that the hospitals are linked via corridors and staff, medical teams and emergencies can easily move within the complex, from one hospital to the other, in "covered" corridors.

The design presented here doesn't offer this. It is nothing but a standalone business. So, if there was an emergency that the proposed "ED", couldn't address, and say needed to be transferred to Wollongong Hospital or in the extreme circumstance, needed to be air lifted to a Sydney-based, there are no easy access corridors to get that patient from hospital A (the proposal) to hospital B (Wollongong) or the helipad. Hence, this makes me wonder whether this proposal is of any value at all? Again, a cash and grab by the developers.

E) The other issue in the Illawarra, is the inability to attract top students and the best of the best consultants. Instead, they prefer Sydney CDB Hospitals or the regional New Castle hospitals. This design does nothing to assist this. There is nothing innovative, enticing or appealing about it. Again, bringing to mind, a cash and grab scenario by the developer. The Illawarra, needs highly qualified, highly specialised and the brightest students and minds. So, the design needs to be amended to appeal to those groups.

F) Next the overarching slogan for the region is, "City of Innovation" yet this design provides nothing innovative! It is a 9 storey block! This concerns me further because buildings such as this design contribute to global warming and the environmental issues we now see. This needs to be demonstrated in this design, if the government is genuine in its claims to tackle this problem. In fact, this should be considered on all future developments, including hospitals.

G) Finally, the design is aesthetically unattractive. I would think, the purpose of any major development is to improve the life of those who reside and work in a region, and compliment the topography respecting its history and looking toward the future. Thus, producing a design or product that will stand the test of time. This design, seriously fails on this.

Further to this, it breaches the height restrictions in the area and streets proposed. In fact, the proposed is a massive building smack in the middle of low density residential homes, with strict height restrictions. Which is rather ridiculous given the associated implications this will result in.

H) hence, I propose the following alternative design / options. A much better layout that addresses all of the former-mentioned issues. That is, separate the design into 3 sections. Medical Services, Medical residence and Executive Residence. And a "bridge(s)" connecting the hospitals and or buildings. (underground or above ground).

**Attachment 1 :** Provides a visual of a better alternative that considers the private hospital as stand alone.

Key to images in the attachment:

**Red:** VACANT LAND. Proposed site for standalone Medical Services, including "E.D". height? est. between 4-5 storey's.

**Blue:** Proposed site for executive stand alone homes. (no more than 2 storeys). Architecturally designed.

**Pink:** Proposed bridge(s) linking the sites (underground or above)

**Green:** Proposed Medical Residences (no more than 2 storeys).

Ensure ALL buildings have enough under-ground parking for ALL the residents and visitors.

In short, break the design up into 3-4 buildings. The end result of this, is a better layout, that meets current height restrictions, more aesthetic appeal, provides easy access between each site and considers the future.

The other benefit to this is that it is cost effective in that it best uses the current infrastructure. And the ED entrance is on the the main street, Crown St, next to the bus stop. No significant changes to infrastructure are required. Similar models such as this, work very well in Sydney and other health services I have worked in.

To summarise, the "Medical suites " and "ED" should be located directly opposite the hospital on **413 - 417 Crown St**. This is Vacant land, that has stood vacant for 60+ years. Then an underground tunnel or above ground bridge can be built linking the Medical Suites to the currently standing Private hospital buildings. This way, medical professionals and all staff have easy access between both hospitals.

Given this site will only hold the medical services (including the proposed emergency), then the building should be lower, thus being less obtrusive to the environment. Possibly 4-5 storeys, above ground and ensuring there is enough parking space for staff and visitors. Significant and appropriate landscaping also should be mandated, including 10m trees to support the green house and global warming issues.

Next, the medical residential building should be placed at **368 -366 Crown St Wollongong**. The best residential building I ever lived in was at Tamworth. it was only 2 storeys (the medical staff lived on the first floor and nursing and allied health ground floor and there was a pool for staff. It included, staff mixers. it also was landscaped. And all staff had space for their cars. In this case, this would be underground 2-3 levels. This model should be considered for this site also. It worked, and it worked very well and attracted the best students/staff.

Finally, **15-21 Urunga Pde**, should be developed as high end, architectually designed Executive residences. These residences, should be included in packages to attractfor the very best medical consultants and CEOs to the area. (A practice the Eastern Suburbs use). This also should also be landscaped to address issues of global warming and again including 5-10m trees. The maximum height of these buildings should be 2 storeys and very comfortable, you want good staff to stay! Thus meeting the height restrictions in the area.

Doing this, consutlatnts, medical staff etc can access both the medical suites, ED and the currently standing private hospital easily. And they're comfortable to encourage long term employment, and attract highly skilled and qualified professionals, including top students

Separate to this proposal but equally valuable to consider, there is an almost always empty car lot that exists directly opposite the current private hospital. If the public and private hospital could consider working together, then this site could be better utilised. First, to create underground car park (currently near it) and then place on top a 2 storey medical resident building. This would also meeting the residential height restrictions of the area effectively and attractively landscaped to meet the requirements of global warming.

Then another bridge (underground or above ground) can be built between the two sites (the medical residences and the private hospital) so that there is easy access between all buildings, including the public, private and landing pad for the helicopters.

**Attachment 2:** Considers and connects Wollongong and the private hospital, where by, both hospitals work together.

In conclusion, you want this development to do what it's supposed to do and what it is implying it will. That is, provide a high quality service to the community, that attracts and retains the best possible staff and lessen the burden on the ED at Wollongong Hospital. As well as protecting the environment and meeting the global warming goals.

You simply do not want this to be, yet another money grab exercise. Like so many others have done before them.

**Footnote;**

**(1) [Something that used to exist in the Illawarra up until the '80s. There were 4 emergency Departments in the region, all of varying levels. Bulli, Shellharbour, Port Kembla and Wollongong. It was effective and it worked. There were less people, but more high quality services.]**