



**ORANGE HEALTH CAMPUS
BLOOMFIELD HOSPITAL**

**PREFERRED PROJECT REPORT
and
REVISED STATEMENT OF COMMITMENTS**

November 2006

Table of Contents

1. INTRODUCTION.....	3
2. RESPONSE TO SUBMISSIONS	3
3. PREFERRED PROJECT REPORT	12
4. STATEMENT OF COMMITMENTS	13
4.1 General	13
4.2 Demolition	13
4.3 Services	13
4.4 Vegetation	14
4.5 European Heritage.....	14
4.6 Aboriginal Heritage.....	15
4.7 Access for People with Disabilities	15
4.8 Construction Management	15
4.9 Ecological Sustainable Development	16
4.10 Operation.....	16
4.11 Access and Movement	17
4. CONCLUSION	18
APPENDIX 1 PROPOSED PLAN OF SUBDIVISION	19

1. Introduction

The Environmental Assessment and supporting documentation for a Project Application to allow the development of the Orange Health Campus at Bloomfield Hospital were exhibited from 20th September to 20th October 2006. During that time submissions were received from the Roads and Traffic Authority (Regional Development Committee Western Region), Department of Environment and Conservation, and from a local resident. In addition a late submission was received from the NSW Heritage Council. NSW Health (the proponent) has been provided with a copy of these submissions and, in accordance with Section 75H(6) of the EP&A Act, responds to the issues raised in the submissions. A response is also provided to the issues raised by the Council.

The proponent has sought advice from its consultant team in preparing the responses.

As a consequence of the submissions and general comments from the community and other stakeholders in the process, the project has been amended as outlined in Section 3.

In order to deal with the issues raised and the changes to the project application, NSW Health has revised its Statement of Commitments to take into account issues which were feasible and which minimised the environmental impact of the proposal. The revised Statement of Commitments is included in Section 4.

2. Response to Submissions

Submission from Regional Development Committee Western Region (RTA)

Submission:

Forest – Huntley Roads Intersection:

Intersection performance is adequate at present but will require monitoring on an annual basis or should crashes increase significantly. An assessment of the required upgrade should be considered when the worst approach level drops to LOS C. Analysis of an appropriate treatment then should be undertaken that allows for projected future growth, and the plans referred to relevant agencies. Intersection upgrade should occur before worst approach level of service drops of LOS D.

Response:

As detailed in the Environmental Assessment (EA) traffic report (Appendix 5), the trip distribution assumed for the hospital was formulated after discussions with Council's Traffic Engineer. An ongoing review of traffic flows through this intersection would allow confirmation of assumptions in the traffic report and an assessment of changing background traffic flows through this intersection.

It is proposed that an audit of traffic movement at this intersection be undertaken no later than 12 months, and no sooner than 6 months, after the project is completed for the purpose of confirming the assumptions in the traffic report of the EA.

Submission:

Moulder Street – Lords Place and Peisley Street Intersections:

Lords Place intersection: Based on the trip distribution identified in the environmental assessment, and the crash history of this intersection, there is a potential for increased east-west traffic flow and an increased risk at the intersection. It may therefore be beneficial to change priority at the intersection to give Moulder Street traffic priority.

Response:

Traffic travelling to / from the hospital across the highway will have a number of north – south route options available. Our traffic report noted that there is the potential that traffic volumes in Moulder Street may increase slightly. Reversing of intersection priority is a local matter to be dealt with by Council.

Submission:

Peisley Street intersection:

As per point c) the Peisley Street intersection should be monitored over the life of the development for traffic and safety problems associated with changing traffic flows.

Response:

The proponent concurs with this statement however this monitoring will be the responsibility of Council and the RTA.

Submission:

Forest Road Accesses

Opposing traffic should be separated through the installation of a minimum 1.2m wide median.

Response:

A 2.4m wide median is proposed at the Forest Road access to the hospital.

Submission:

The Bloomfield access should include a widened sealed shoulder or left turn lane.

Response:

The proposed development will include widening of the shoulder at the Bloomfield entrance. The design of these works should comply with RTA Road Design Guide standards.

Submission:

Ensure lighting of the accesses and the median conforms to the appropriate level of Australian Standard AS1158.

Response:

The proponent agrees and a statement of commitment has been made.

Submission:

Signposting of the access should conform to Australian Standards AS1742.

Response:

The proponent agrees and a commitment has been made.

Submission:***Internal Access and Parking:***

The committee expressed concern with the proposed main entrance where emergency vehicles must mix with heavy vehicles making deliveries, patients being dropped off or picked-up at the main entrance, visitors searching for a parking space, and pedestrians crossing the internal roads. The committee considered a separate priority access should be constructed for ambulance only access, and it should be the aim to separate ambulance access from general parking access. Hence the following is considered appropriate:

- *Construct an ambulance only access north of the main access to join with the north-south internal road currently proposed to provide access to the 11 car public car park.*

Response:

The proponent does not agree with concerns that the existing entry arrangements for ambulances would cause delays by mixing with other traffic. The current proposal allows an ambulance to enter the site and travel unimpeded to the ambulance parking area with priority over all other traffic. Providing a separate entrance to the north would require an ambulance to give way to entering traffic where the service road meets the main entry.

Therefore the proponent and its traffic consultant recommend the as proposed entry / exit arrangements be maintained.

- *Consideration should be given to a roundabout opposite the centre of the main parking area to distribute road user types (i.e. delivery – left, emergency / drop off – straight, and parking – right) and provide direct access to the main parking area (208 car public car park) from the north.*

Response:

The proponent does not recommend a roundabout be provided adjacent to the Porte Cochere. The traffic generated by the public is by far the greatest volume of traffic travelling into and out of the main entry. The design of the main entry has given careful consideration to provide the public with a clear choice in their desired route of travel. That is, to either enter the Porte Cochere or to travel to the main public car park.

The provision of a roundabout to accommodate a 19.0m semi trailer would result in a large amount of land lost at the main entry of the hospital. Traffic volumes to and from the service road would be low, and would consist of mainly staff or service vehicles. The peak period of staff generated traffic would occur at shift changeover, outside the expected peaks of the public travelling to and from the hospital. The current proposal is considered the preferred layout as it minimises vehicle conflict and promotes efficient vehicle access to key destinations.

- *Close the main car park access opposite the 'drop off zone' exit. Signpost the 'drop off zone' exit "No Right Turn".*

Response:

The proponent's traffic advisers does not recommend a "No Right Turn" sign at the southern end of the Porte Cochere. Right turn movements out of the Porte Cochere must be accommodated as the Forest Road access provides the only opportunity to turn right out of the site. Vehicles undertaking this right turn will have a clear view of traffic exiting the main car park. The majority of vehicles who enter the Porte Cochere will not turn right out of the Porte Cochere and instead travel straight or turn left to access the main public car park. The proposed Porte Cochere and driveway access arrangements are considered satisfactory.

- *Remove the pedestrian crossing from the main car park and through the 'drop off zone' and from across the ambulance area entrance. Fence or landscape the parking area to encourage pedestrians to access the main entrance from the south of the main entrance and via the pedestrian crossing immediately north of the bus bay.*

Response:

The proponent does not agree with removing the proposed pedestrian access through the Porte Cochere. The pedestrian crossing and pathway which crosses the Porte Cochere would mainly be used by visitors who parked at or near the northern end of the public car park. The majority of visitors would cross at the second pedestrian crossing on the northern side of the bus bay.

The Porte Cochere has been designed as a very low speed environment with parking not permitted in close proximity to the pedestrian crossing point. The proposed design is considered satisfactory.

- *Ban parking on internal roads*

Response:

The proponent concurs with this condition and parking would be banned on all internal roads within the site except the short term parking proposed within the Porte Cochere.

- *Change access to the 11 car public car park to the northern internal road, maintaining separation from the separate ambulance access recommended ban.*

Response:

As the separate ambulance access is not supported for reasons listed above, no changes are deemed necessary for the car park in question.

- *Signposting of the internal roads and intersections must be clear, concise and conform to Australian Standard AS1742.*

Response:

The proponent concurs with this condition. This is a matter for Council's signage policy and would most appropriately be dealt with by Council's planners in their consideration of the application. A commitment to prepare a wayfinding signage plan has been made.

- *Sight lines must be maintained at all internal road intersections, curves and pedestrian facilities.*

Response:

The internal road network has been developed with the aim of minimising vehicle conflict points and maximising available sight distances at internal intersections. As stated above parking on internal roads around the hospital will be banned therefore preventing vehicles parking close to intersections impeding sight distance.

- *Bicycle access and secure parking should be provided for both visitors and staff.*

Response:

The proponent agrees and notes that appropriate bicycle parking and shower facilities have already been planned into the design of the site.

- *Intersections and curves must accommodate vehicle swept paths on the left side of all internal road centrelines.*

Response:

Roads throughout the site have been tested using the AutoTURN vehicle swept path program which has analysed the largest vehicle expected on each road. This analysis has found the internal road network and all internal intersections to be satisfactory in their layout.

- *Lighting of all internal roads and pedestrian areas is to conform to Australian Standard AS1158.*

Response:

A commitment to this effect has been made.

Submission from RTA

The following provides comments on matters raised in the letter dated 6 October 2006 from the RTA to the General Manager of Orange Council.

- *RTA concurs with all issues raised by the Western Regional Development Committee in particular the requirements for the various intersections located throughout the City of Orange and the need for appropriate street lighting along Forest Road. All of these points must be considered and addressed by the determining authority.*

Response:

No further comment required.

- *A copy of the detail construction plans for the proposal roadworks associated with both access points onto Forest Road are to be submitted to RTA for approval prior to works commencing. The plans are to include details of all proposed signage and linemarking. The design should be appropriate for the current speed zoning however the speed zone will be assessed for appropriateness upon receipt of the detail plans.*

Response:

Orange City Council is responsible for the design and construction of all road works in Forest Road associated with the new hospital.

- *Provisions for crossing the internal service road from the main public car park area to the hospital are to be made. It is suggested to provide a painted pedestrian crossing (zebra) to the south of the ambulance path.*

Response:

The pedestrian crossing points throughout the site have had regard to the pedestrian desire lines between the hospital and car parks. The proponent concurs with this suggestion and a commitment has been made accordingly

- *RTA will need involvement or opportunity to comment in regard to the development of the preferred emergency route for emergency vehicles particularly in regard to crossing the Mitchell Highway.*

Response:

The proponent agrees with this request and suggests that NSW Health, the ambulance service and the RTA convene a workshop to determine the best emergency routes to / from the new hospital.

- *The internal road network and parking areas should be clearly signposted to avoid confusion. Signage should direct the public to the additional public parking areas in the event that one car parking area is full.*

Response:

The proponent agrees and as stated above a wayfinding signage plan will be developed.

- *RTA will need to be involved in any signposting scheme located within the city particularly in regard to classified road sign locations and sign design.*

Response:

Agreed.

- *Pedestrian facilities are to be maintained / provided in Forest Road to assist pedestrians wishing to access the existing Post Office / shop opposite.*

Response:

The design of the existing Bloomfield access has maintained the pedestrian refuge. Linemarking for the proposed 'seagull' intersection into the site has also accounted for the chevron linemarking of the existing pedestrian refuge.

- *Provision for the existing shared footpath / cycleway are to be made at each intersection. The refuge in the centre of the access needs to be a minimum of 2.4m wide to accommodate bicycles.*

Response:

The proposed central median of the main access driveway in Forest Road has been designed at a width of 2.4m and therefore is considered satisfactory.

- *All parking is to be contained with the site.*

Response:

The provision of parking within the site has been determined from surveys of the existing Orange Base Hospital. All parking will be contained with the site.

- *It appears as though the hospital is still accessible from the access on Huntley Road. If this is the case the standard of this existing access should be assessed and addressed. It is suggested that a minimum the formation of Huntley Road should be widened to allow passing opportunity.*

Response:

The proponent and its traffic advisers do not believe that Huntley Road will require widening as part of this development. There are a number of existing passing opportunities along this road corridor.

Whilst a road connection will exist to Huntley Road, signposting will be installed advising the public that access to the hospital is not permitted via the internal road both at the Huntley Road end and the rear staff car park.

If 'public' traffic is observed to use this road connection to access the hospital, consideration should then be given to determining what best course of action is appropriate to deter this from continuing. This will be a management issue for the new hospital with assistance from Council and the RTA. It is noted there are passing opportunities along this road connection.

Submission from Dr Peter Bilenkij

The following provides comments on matters raised in the letter from Dr Peter Bilenkij, not dated, which suggested an alternative access arrangement to improve access to the proposed ambulance bay for ambulances.

Whilst the proposal would reduce travel times slightly for ambulances, it would impact on general vehicle traffic movements in and around the main entry of the hospital. As the public traffic would not have a clear view of the Porte Cochere, this would create confusion near the intersection adjacent to the ambulance bays. As these confused motorists would have passed the entry to the car parks, they would be required to turn right and travel south along the spine road to access the car park.

Overall the negatives of the alternative access arrangement outweigh the positives of improving ambulance travel times marginally.

Submission from Department of Environment and Conservation

The DEC advises that it can support the proposal in its current form and advises that a POEO licence may be required. The proponent notes this submission.

Submission from the Heritage Council

The application was submitted to the NSW Heritage Council. The Heritage Council resolved that the Heritage Council notes and supports the general principle of the project at Bloomfield Hospital of consolidating a new general hospital with the existing mental health facilities on the site thereby continuing its historic use for psychiatric care.

The Heritage Council acknowledges that the proposal will have impacts on the heritage values of the site and strongly recommends that, in order to minimise those impacts, a number of measures be considered for inclusion in the conditions of consent. These measures are discussed below with the response of the proponent provided.

Submission:

- a) *To maintain sufficient separation between the new buildings and the existing buildings and their landscape setting, there be no new buildings located between the northern alignment of the formal ward gardens of building numbers 40, 41, 46, 47, 48 as shown on plan ORA_DA01) Forest Road to the west and the above buildings, as shown on the application drawings.*
- b) *Any new or infill buildings and alterations to existing buildings on the site south of the proposed 'Acute Mental Health' building should comply with the Heritage Council's Design In Context infill guidelines.*
- c) *To better maintain the visual connection between the historic ward buildings (buildings no. 40, 41, 46, 47, 48, 50, 51, 15 to 19 as shown on plan ORA_DA01) the parklands and the integrity of the landscape setting, further design options should be investigated to relocate the proposed General Hospital and Acute Mental Health buildings to the west of a line being parallel to Forest Road from the intersection of Artisan Way and Canobolas Drive.*

Response:

The proponent does not accept that the project should be changed as requested by the Heritage Council. Numerous design and siting options have been investigated by the Government Architects Office and NSW Health as summarised in Section 1.3 and 1.4 of the EA. This included consultation with Heritage Office during design and in the preparation of the application. The proposed design is considered to be the best solution that meets both the functional needs of the proposed hospital and the integration of the existing and proposed mental health functions and the existing site conditions.

Any alternatives which retain the buildings and their outlook will require the removal of vegetation and buildings elsewhere on the site and are likely to be within the City's water supply area. These alternatives have associated problems. The project as submitted represents the preferred option in that it provides an acceptable trade-off between heritage and other environmental and operational issues and results in a functional and efficient development accessible to the population of Orange and the surrounding area.

Submission:

- d) *That there be further project applications for building works on the site and for the detailed landscaping proposed for the whole of the site.*

Response:

The proponent does not agree that further project applications are required. Plans of the proposed new buildings will continue to be developed in detail through the detailed design phase. A detailed landscape plan has been submitted for the development area of the site as part of this application and an additional plan for the whole site is not necessary or required for this development.

Submission:

- e) *In order to establish a framework for long term management for the heritage values of the whole of the historic Bloomfield site, an effective management strategy should be prepared for the remaining parts of the historic hospital site. This strategy should include appropriate adaptive re-use options and integration of the remaining buildings into the new hospital in a sympathetic manner and management of the cultural landscape values of the site.*

Response:

The Conservation Management Plan submitted as part of this application provides a strategy for the management of the site. This will be used as a basis for any future development. As a result, no additional strategies are required and will not be produced as part of this application.

Submission:

- f) *An interpretation strategy and plan should be prepared in accordance with the Heritage Office's guidelines. The interpretation plan should include all parts of the site and after its approval the plan should be implemented prior to the completion of any building works approved for the site.*

Response:

The proponent undertakes to produce an interpretation strategy for the site that forms part of this development. A commitment has been made accordingly.

Submission:

- g) *All heritage aspects of the works should be supervised by an appropriately qualified heritage consultant to ensure that the impact on the significant fabric is minimised and appropriate mitigation measures are taken.*

Response:

The proponent agrees and a commitment has been made..

Submission:

- h) *An archaeological monitoring and recording program should be undertaken during the works. If any unexpected archaeological relics are discovered during the construction, the work should be stopped and the Heritage Office, Department of Planning should be notified immediacy.*

Response:

It is noted that the DEC has no objection to the project. If any unexpected archaeological relics are discovered during the construction, they will be dealt with in accordance with the provisions of the Heritage Act in relation to relics. A specific commitment has been made, nonetheless.

Submission:

- i) *Should any Aboriginal objects be uncovered, excavation or disturbance of the area is to stop immediately and the Department of Environment and Conservation is to be informed.*

Response:

The proponent agrees and this has already been addressed in the Statement of Commitments.

3. Preferred Project Report

In response to the submissions made and comments from the community and stakeholders, no significant changes have been made to the Project as exhibited. Changes proposed are:

1. Approval is sought for the subdivision of land as shown in the plan of subdivision contained in Appendix 1. This plan is a plan of subdivision of Crown Land comprising Lot 206 in DP42900 to enable Crown Land on which the project is to be constructed to be transferred to the Health Administration Corporation.
2. Approval is sought for the construction of a Radiotherapy Unit. Provision was made in the project application for the future expansion of the general hospital building at ground floor level on the eastern end of the Inpatient Cluster for Radiotherapy. The proponent wishes to seek approval for the construction of this facility as part of this application. The facility will contain 2 radiotherapy bunkers and associated technical support and clinical support areas. The facility would be constructed in the area designated for this purpose and indicated on the project application drawing ORA_DA06. The building will be constructed of external materials that are compatible with the general hospital building that the Radiotherapy Unit will be part of.

This unit will be constructed in an area currently proposed for soft landscaping in the form of lawn and gardens.

Consideration has been given to the environmental impacts of this unit. The project already provides a wide range of services in cancer care and treatment on an inpatient and outpatient basis. The Radiotherapy Unit will complement these services in a manner that will have no significant adverse impact on the amenity of the area. The environmental impacts of the project with the Radiotherapy Unit will be the same as those assessed in the

Environmental Assessment prepared as part of the project application. The unit will have significant benefits in health service delivery to the area.

4. Statement of Commitments

In order to deal with the issues raised and the changes to the project application, NSW Health has revised its Statement of Commitments to take into account all issues which were considered reasonable and which minimised the environmental impact of the proposal. The revised Statement of Commitments follows showing amendments in **bold italics**. Other matters agreed by the proponent as outlined in the response to submissions can be dealt with as conditions of approval.

4.1 General

- A. The development will be undertaken generally in accordance with the Environmental Assessment Report dated September 2006 prepared by BBC Consulting Planners Pty Ltd (including accompanying Appendices) and drawings prepared by the Government Architects Office (ref. ORA_DA00-ORADA13) **and the Preferred Project Report prepared by NSW Health dated November 2006.**
- B. The proponent will obtain all necessary approvals required by State and Commonwealth legislation in undertaking the project.
- C. The proponent will liaise with the local community during the development process.
- D. The proponent will continue to liaise with Orange City Council during the development process.
- E. The proponent will continue to liaise with the Ex-Servicemen's Club.

4.2 Demolition

- A. Demolition will be undertaken in accordance with the requirements of *Australian Standards AS2601 – 2001: The Demolition of Structures* which is incorporated into the Occupational Health and Safety Act 2000 administered by WorkCover NSW.
- B. A Hazardous Building Materials Management Plan will be prepared prior to demolition commencing.
- C. Measures to control soil erosion during demolition will be introduced in accordance with currently accepted principles, as described in *Managing Urban Stormwater* (EPA NSW) and *Soil Erosion and Sediment Control* (The Institute of Engineers, Australia).

4.3 Services

- A. The proponent will comply with the requirements of the relevant public authorities in regard to the connection to, relocation and/or adjustment of services affected by the construction of the proposed development.
- B. All redundant plumbing and drainage is to be capped off in accordance with AS/NZ 3500 and NSW Codes of Practice Plumbing and Drainage.
- C. The design of the stormwater disposal system will be based on the latest edition of AR&R and Bureau of Meteorology ARI statistics, Authority guidelines and AS3500.

- D. The proponent will continue to liaise with the Ex-Servicemen's Club with reference to works to be carried out to the dam situated within the golf course.

4.4 Vegetation

- A. The proponent will provide landscaping in accordance with drawings prepared by the Government Architects Office (Ref. ORA_DL01-ORA_DL02).
- B. The proponent will seek to retain as many trees as possible within the site.
- C. All trees on the site within the vicinity of areas of works that are to be retained will be suitably protected by way of tree guards, barriers or other measures as necessary to protect root system, trunk and branches during construction and demolition.
- D. Where mature trees are removed, consideration will be given to replacement with mature specimens.
- E. The Fairy Sparkle Garden currently accommodated at the Orange Base Hospital site will be relocated to the Bloomfield Campus.
- F. The new access road will be screened by vegetation to minimise its visual impact on the site.

4.5 European Heritage

- A. **All heritage aspects of the works will be supervised by an appropriately qualified heritage consultant to ensure that the impact on the significant fabric is minimised and appropriate mitigation measures are taken.**
- B. Detailed archival recording (including measured drawings, photographic and video recording) of buildings and structures to be demolished, and surrounding landscape, will be carried out *prior to demolition*. These archival records will be compiled with historic records, including copies of original plans, subsequent plans, historic photographs etc. A set of these documents will be stored on site, as well as off-site locations as required.
- C. **Prior to occupation, an interpretation strategy and plan will be prepared in accordance with the Heritage Office's guidelines. This will include a strategy for moveable heritage items and be supported by an oral history programme, to convey the heritage significance of the site to users of the site.**
- D. All works which affect the existing built fabric of heritage buildings and structures within the site will be carried out in accordance with the Burra Charter.
- E. Significant original fabric from buildings and structures to be demolished, including joinery, will be salvaged for reuse in works to other heritage buildings on the site or retained for future reuse.
- F. The original painted glass panels from Ward 20 will be retained and reused within the new hospital development in conjunction with detailed interpretation about this building.
- G. Maintenance and repair work to buildings and structures of heritage significance will be undertaken in accordance with the policies in the Conservation Management Plan prepared by the Government Architects Office Heritage Section (July 2006).
- H. A Heritage Architect will be engaged to provide advice in relation to further detailed design and construction involved in the project.
- I. The original fabric of existing buildings to be refurbished (including joinery, fireplaces and fittings) will be retained where possible.

- J. Detailed recording (including measured drawings and photographic recording) of the existing configuration of buildings to be refurbished as part of the project will be carried out *prior to the commencement of works*.
- K. Where possible, new internal subdividing walls to be introduced to heritage buildings will be reversible and evidence of walls removed as part of the project will be retained through the use of nib walls and similar devices.
- L. Building work to heritage buildings will be undertaken by qualified and experienced contractors with an understanding of the principles of heritage conservation.
- M. Advice will be sought from the NSW Heritage Council's Fire, Access and Services Advisory Panel regarding changes to services or fire safety upgrades within heritage buildings as appropriate.

4.6 Aboriginal Heritage

- A. Liaison with the Orange Local Aboriginal Land Council will be maintained to resolve potential issues in relation to the management of Aboriginal cultural heritage that may arise during the during the development process.
- B. The Orange Local Aboriginal Land Council will be invited to participate in any additional archaeological investigations conducted *prior to development being carried out at the site*.
- C. **An archaeological monitoring and recording program will be undertaken during the works. If any unexpected archaeological relics are discovered during the construction, the work should be stopped and the Heritage Office, Department of Planning should be notified immediately.**
- D. An archaeological test excavation will be undertaken within the moderate and high archaeological potential zones indicated in the Aboriginal Heritage Impact Assessment (attached at **Appendix 4**) *prior to development commencing at the site*. A suitably qualified archaeologist will be commissioned to prepare a research design and excavation methodology to guide these excavations.
- E. If human burials are found during archaeological excavation, or at any time during the development process, excavation work will cease immediately. The NSW Police Service and DEC will be notified and advice sought before recommencement of work on the site.

4.7 Access for People with Disabilities

- A. The design of the facilities will permit effective, appropriate, safe and dignified use by all people, including those with disabilities and will be in accordance with:
 - NSW Health Facility Guidelines, in particular *Part B – Design for Access, Mobility, OH&S and Security*.
 - DDS32 Improved Access for Health Care Facilities.
 - The Building Code of Australia.

4.8 Construction Management

- A. *Prior to the commencement of construction*, a Construction Environmental Management Plan will be prepared. This plan will include:
 - Development of a site specific soil erosion and sediment control plan;
 - Details of construction hours;
 - Air quality/dust control procedures;
 - Noise management procedures;

- Waste Management Plan;
 - Flora and Fauna Protection Plan;
 - Community Safety Plan;
 - Arrangements for pedestrian and vehicular access during construction;
 - Storage and handling of materials procedures;
 - Environmental Training and Awareness;
 - Contact and complaints handling procedures; and
 - Emergency preparedness and response.
- B. *Prior to the commencement of works at the site* all asbestos based and other hazardous materials that will be disturbed during refurbishment works will be removed. Removal of asbestos based materials will be undertaken in accordance with the regulations and requirements of the NSW Government and the WorkSafe Australia Asbestos Code of Practice and Guidance Notes.
- C. *Prior to the commencement of works to the Canobolas Clinic* further investigation to determine the extent of contamination in the vicinity of this building will be carried out. Appropriate measures to remediate the site will be undertaken as required.
- D. Measures to control soil erosion during construction will be introduced in accordance with currently accepted principles, as described in *Managing Urban Stormwater* (EPA NSW) and *Soil Erosion and Sediment Control* (The Institute of Engineers, Australia).
- E. Access to existing facilities within the site, including the Riverside Centre and recreational facilities leased by the Ex-Servicemen's Club will be maintained during construction.

4.9 Ecological Sustainable Development

- A. The proponent is committed to the principles of sustainability as defined in the Environmental Planning and Assessment Act 1979. The construction and operation of the hospital will be undertaken in accordance with the Premier's Memorandum No. 2003-2 High Environmental Performance for Buildings and the requirements of the Environmental Performance Guide for Buildings (EPGB).
- B. The engineering services and building passive design will complement each other in design and operation to jointly achieve the functional outcomes for the building, including providing an energy-efficient, healthy, thermally comfortable and acoustically acceptable indoor environment.
- C. Water conservation and water cycle management will be considered in the design (e.g. rainwater reuse, stormwater management, water recycling).
- D. Only environmentally sound materials (with minimal impact on the environment, minimised use of non-renewable resources, non-hazardous substances, minimised impact on indoor air quality and high recycled/recyclable content) will be used wherever possible.

4.10 Operation

- A. An operational environmental management plan will be prepared *prior to the opening of the hospital to the public*. The plan will address, but will not be limited to, the following matters:
- Measures to ensure protection of heritage buildings and assets;
 - Protection of flora and fauna and minimisation of anti-social behaviour;

- Visitor safety;
 - Site security;
 - Noise management ***including noise from emergency helicopter movements;***
 - Traffic and pedestrian management;
 - Storage of materials;
 - Emergency and evacuation procedures;
 - Fire safety;
 - Waste management and ESD initiatives;
 - Lighting; and
 - Signage.
- B. Appropriate measures will be introduced to prevent golf balls from entering the Health Campus grounds from the adjoining golf course to the north.
- C. A Waste Management Plan describing the procedures for the disposal of all waste generated by the Health Campus will be prepared, *prior to occupation*.

4.11 Access and Movement

- A. *Prior to construction*, an Access and Safety Plan will be prepared to maintain access and use of the site (including access to existing facilities not associated with the Health Campus development including recreational facilities) during the redevelopment programme to ensure the safety of existing users of the site.
- B. The provision of a minimum of 931 parking spaces on the subject land in a manner that is in accordance with *Australian Standard AS2890.1 – 1993 Car Parking* requirements.
- C. The erection of signs that clearly indicate to the drivers of vehicles, both on and off the subject land, the driveway by which they are to enter or leave the subject land.
- D. **Lighting of the accesses, internal roads, pedestrian area and the median will conform to the appropriate level of Australian Standard AS1158.**
- E. **Signposting of the access should conform to Australian Standards AS1742.**
- F. **Parking on all internal roads within the site except the short term parking proposed within the Porte Cochere will be banned.**
- G. ***Prior to occupation*, a wayfinding signage plan will be developed for the site.**
- H. **A marked pedestrian crossing will be installed south of the bus bay and across the Porte Cochere.**
- I. The construction of a new access to the site off Forest Road:
- The entry will be controlled by a priority controlled intersection.
 - A left turn deceleration lane for traffic travelling southbound on Forest Road will be provided into the site.
 - A protected right turn bay on Forest Road will be provided for northbound traffic.
 - A protected right turn acceleration lane for traffic turning right out of the access will be provided.

4. CONCLUSION

This report, together with the Environmental Assessment which accompanied the Major Project Application represent the Preferred Project for the redevelopment of Orange Hospital Campus at Bloomfield.

The proposed development involves the construction of a new general hospital and tertiary mental health facility on the site of the existing Bloomfield Hospital. It represents an appropriate use of the site, and will continue the strong historical association of the site and its buildings with the provision of health care. The development is strongly in the public interest and will provide substantial benefits to the local community.

An assessment of the impacts of the proposal indicates that the project and the principles guiding the future redevelopment of the site will, on balance, result in positive social, environmental and economic outcomes. The proposal involves the consolidation of the hospital's space requirements onto a single site that is responsive to the needs of a modern day health service. The functional requirements of the hospital have been carefully balanced against the needs to safeguard the historic and environmental integrity of the site and its buildings.

The proposed development will impact on the character of the Bloomfield Hospital site, including its heritage significance, and will change the way the local community currently access health services. The proposal will however, provide significant benefits in health service delivery in the region and the State and will enable the NSW Department of Health to provide new state of the art health facilities that respond to the changing needs of the community in a cost efficient and equitable manner. For this reason the implementation of the Orange Health Campus project is consistent with the public interest.

The Minister is requested to consider the application favourably.

Appendix 1 Proposed Plan of Subdivision