

HEALTH PROJECTS INTERNATIONAL

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18 April 2007

Office of Sustainable Development Assessment and Approvals – Strategic Assessment 23-33 Bridge Street, Sydney NSW 2000

Att Anthony Witherdin

By email

Re: Macquarie University Private Hospital Major Project Application MP 06-0172

In response to your letter received in our office on 28 March 2007, noting issues raised by the Department and others during the exhibition period, the following pages respond to matters raised by other agencies (in Attachment A) and the DoP (in Attachment B). We also note that comments from the Roads and Traffic Authority were received under a separate cover dated 27 March 2007. Our response has been added to the comments raised by other agencies (in Attachment A).

There appears to be some confusion regarding what is being sought and how it is being staged. We confirm that approval is being sought for -

- <u>Staged</u> construction of a 6 storey private hospital on Site 2 including associated site, landscaping and infrastructure works and a pedestrian bridge across Technology Place (connecting to Site 1);
- Amendments to the basement, internal layout and facade of the Site 1 building approved under LDA 676/2001; and
- Use of the Site 1 building as specialist consulting rooms and the like in conjunction of the private hospital.

Construction will be staged, with the initial stage of construction (referred to as Stage 1) to include: -

- Construction of a new 5 storey building above ground (Ground, Level 1-4), one level of basement car park (B1);
- 144 bed private hospital beds including associated support functions (including Radiotherapy bunkers located underground on Level B2
- Retail shops, a coffee shop, medical imaging services area and physiotherapy/hydrotherapy on ground level;
- Loading dock area for deliveries and ambulance access

Future expansion of the private hospital (Stage 2) at some time yet to be defined will include-

- the expansion of operating theatres on Level 1, which will occur over the current loading dock to the south west of the site
- Additional 5 patient bed bays to recovery on Level 1, east side
- An additional floor (level 5) comprising 64 private hospital beds

As is shown in our responses to the issues raised, is important for the Department to advise exactly where it is the current Project Application is deficient as we are not aware of any further documents that would be required.

A letter relating to Section 94 contributions will follow shortly.

Finally it is noted that Ryde Council has requested the opportunity to formulate conditions to be attached to the consent. We have not yet viewed any such conditions and request the opportunity to comment when they become available.

If you have any queries please don't hesitate to contact the undersigned on 9460 4199.

Regards

Anne Lamb for HPI

CC Carl Adams Dalcross Hospital Robert Kelly Macquarie University Adrian Briggs Macquarie University Jennifer Westacott KPMG Bernard Gallagher JBA Planning

Attachment A

The following authorities have considered the proposal and made the following comments on issues relating to the proposal -

Authorities Issue	Our response		
Ryde City Council			
State Environmental Planning Policy 11 – Traffic Generating Development.	No issues. Council assumes that the application has been forwarded to the Roads and Traffic Authority for comment.		
State Environmental Planning Policy 55 – Remediation of Land	Council has an expectation that appropriate validation will be provided during the required stages of the development.		
Draft State Environmental Planning Policy 66 – Integration of Land Use and Transport.	Council notes that the proposal will result in increased employment density on the site, however the area is currently wel served by public transport, and this will be further enhanced on completion of the Chatswood to Epping line.		
Ryde Planning Scheme Ordinance 1979 (Ryde PSO 1979)			
Clause 97 Height of buildings	Council identified that the height controls had been exceeded, and that the issues had been discussed during pre-lodgement meetings. Refer to page 6 of their report" Aspects of the proposal that were raised as part of the Council's pre lodgement advise which include: the protrusion of the basement carpark level giving rise to a breach to Councils height controls: the contextual relationship of the buildings to each other and the street and the alignment of the bridge connecting the two buildings, <u>appear</u> to have been successfully addressed by this proposal."		
Clause 98 Off Street parking	Council notes that the proposal exceeds the requirement by 4 carparking spaces, however they do not share the concerns of the DoP (attachment B) in regard to traffic - page 5 of their report" The report concludes that although the maximum parking provisions of the RPSO are <u>slightly</u> exceeded, it is likely that the unconstrained parking demand that is generated by the nature of the proposed development will result in substantial deficiency of car parking, thereby encouraging the use of public transport which is in keeping with ones of the objectives for the Macquarie Park Employment Area and the Metropolitan Strategy and is supported by the City of Ryde.		
City of Ryde DCP 2006	No issues		
Draft DCP No. 55 - Macquarie Park Corridor	No issues		
The Metropolitan Strategy	Council notes that the proposal is consistent with the directions of the Metropolitan Strategy.		

Attachment A cont

Authorities Issue	Our response		
NSW Health	We note that NSW Health have no issues other than the process for licensing of the facility which is a matter with which Dalcross is already proceeding.		
Sydney Water	No issues have been raised other than the statutory requirement s of a Section 73 applications.		
Road and Traffic Authority (RTA)	 The RTA makes the following recommendations - To meet the objectives of State Government Policy (SEPP 66) , copies of Macquarie University Public Transport Guide should be distributed to all staff and students. Secure bicycle parking and end trip facilities provided on site. Notes that the proposed parking exceeds the requirements of LEP 137. Requests that the DoP is mindfull of the need to lim or restrict parking to an amount equal or below that of Ryde Councils DCP 29A. This issue is discussed in more detail in the response to the DoP issue (d) contained in the response to Attachment B 		
Sydney Region East			
1. Macquarie University Concept Plan	We are not clear about the issue referred to here, however the Macquarie University Part 3A Concept Plan has not yet been lodged with the Department and it will not be lodged prior to the determination of the Project Application for the private hospital. When this Plan is lodged it will refer to the relevant approvals on both Site 1 and Site 2. The Macquarie University Part 3A Concept Plan will replace the non-statutory Macquarie University Campus Development Plan 2004; therefore, this document is not required to be updated. Furthermore, Macquarie University is a party to the joint venture, does not object to the project and it is consistent with the		
2. Planning controls	The Department has raised the following issues, which we believe have been addressed - a) Permissibility: ' <i>consulting rooms</i> ' are a permissible use under the relevant zoning. b) FSR: there is no change to the approved FSR of Site 1. The Department has the appropriate plans and information to assess the relatively minor changes to the approved Site 1 building, all of which have been included in the EAR. c) Car parking – Site 1's parking is already approved – no change. Site 2's parking is addressed elsewhere		
3. Impact upon Macquarie University Research Park (MURP)	The proposed hospital on Site 2 and medical consulting rooms within part of the approved Site 1 building are located within the area of the campus known as the Macquarie University Research Park. The Department's concerns in relation to this point are unclear. The 'special designation' of the Macquarie University Research Park has been somewhat superseded by the gazettal of LEP 137 which permits a broad range of business / commercial uses on the eastern part of the campus and the vast majority of the Macquarie Park Corridor. Similarly, it is the intention of the State Significant Site Study and proposed SEPP amendment to increase the amount of research and business / commercial uses across the campus. As discussed within the EA Report submitted with the Project Application, there are significant synergies between the proposed hospital, the medical consulting rooms, and the existing university research and teaching functions. The use is appropriate within the context of the Macquarie University Campus and within the broader Macquarie Park Corridor.		

Attachment B

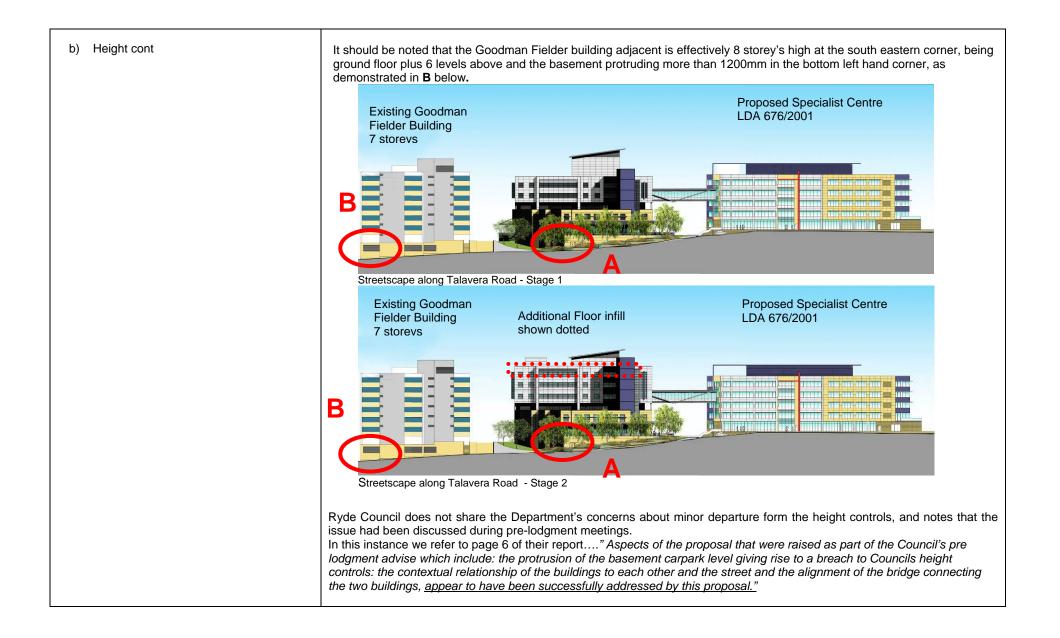
Authorities Issue	Our response			
Department of Planning issues				
(a) Scope of proposal				
Section 6.1 of the project application (pg 40) indicates the proposal will be constructed in two stages, and outlines the potential scope of Stage 2 being expansion of operating theatres on Level 1, five (5) additional bed bays, and an additional storey comprising 64 beds. Clarification is sought as to whether the submitted documentation (including architectural plans and elevations and supporting appendices) relates to the entire proposal or only to Stage 1.	 The department apparently seeks clarification as to whether the documentation currently in the Environmental Assessment Report (EAR) relates to the entire proposal or only to Stage 1. We confirm that Project Approval is sought under Part 3A of the EP&A Act 1979 for the following elements of the development: maintaining existing development rights on Site 1 (LDA 676/2001) which has attained physical commencement and has paid a Section 94 contribution to Ryde Council Declaration that Site 1 can now be considered as Part 3A application. Demolition of all buildings and structures on Site 2; <u>Staged</u> construction of a 6 storey private hospital on Site 1 including associated site, landscaping and infrastructure works and a pedetrian bridge across Technology Place (connecting to Site 1); Amendments to the basement, internal layout and facade of the Site 1 building approved under LDA 676/2001; and Use of the Site 1 building as specialist consulting rooms and the like in conjunction of the private hospital. The initial stage of construction (referred to as Stage 1) will include: - Construction of a new 5 storey building above ground and one level of basement car park; 144 bed private hospital beds including associated support functions Retail shops, a coffee shop, medical imaging services area and physiotherapy/hydrotherapy on ground level; Loading dock area for deliveries and ambulance access Future expansion of the private hospital (Stage 2) at some time yet to be defined will include- the expansion of operating theatres on Level 1, which will occur over the current loading dock to the south west of the site Additional foor comprising 64 private hospital beds The documentation provided in the EAR, including drawings (in both A3 and B1 size), reports etc covers the entire project and requires no further augmentation or supporting appendices. See al			

Authorities Issue)	Our response		
Department of Planning issues				
(a) Scope of p	proposal (cont)	The proposed development	will comprise the following facilities in Stage 1:	
		Building Level Basement B1 Basement B2 Ground Floor	Car park for 238 cars and Ambulance Bay Radiotherapy Unit – 2 bunkers, amenities, 4 patient holding bays Northern Entrance Reception, Administration, Admissions Coffee Shop Retail Medical records Medical Imaging Loading dock and carpark accessed from Innovation Drive Kitchen and staff dining Stores	
1		Level 1	Public amenities Operating Suite, 10 theatres, 17 recovery bays Day Surgery stage 2 recovery, 24 cubicles Staff Lounge 10 Intensive Care beds 10 Cardiac Care beds Associated services	
		Level 2	Plant Central Sterile Unit Future procedure (shell only)	
		Level 3 Level 4 Level 5 Level 6	2 Wards, 31 beds (total 62 beds) 2 Wards, 31 beds (total 62 beds) Future Wards (shell only) Plant Room/Lift Motor Room	
		Total beds: 144 Refer to also Section 6.3 –	Construction Staging (EAR page 43)	

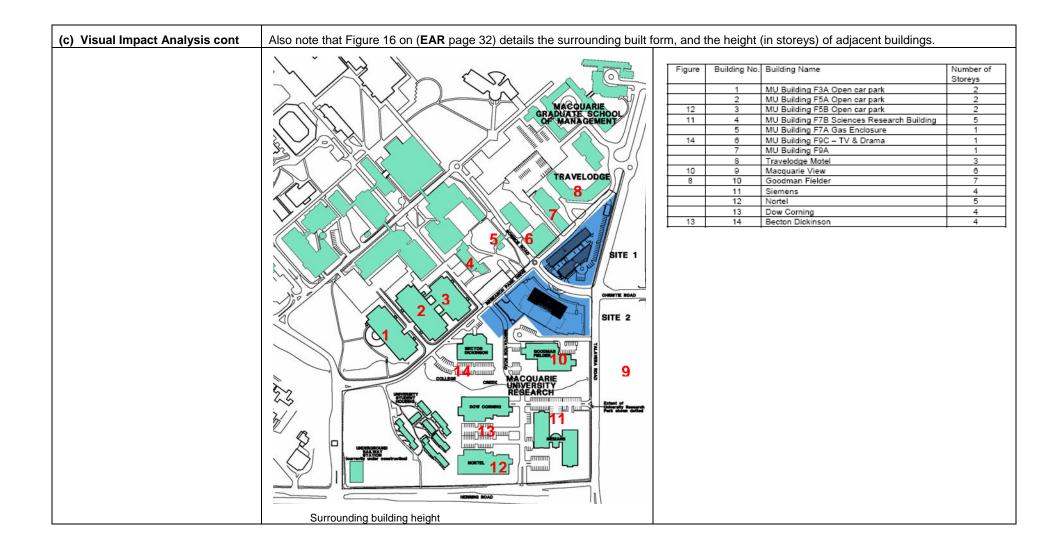
Autho	ority	Our response				
Depa	rtment of Planning issues					
(a)	Scope of proposal (cont)	In Stage 2, the proposed de	evelopment will be expanded to accommodate the following facilities:			
• •	,	Building Level				
		Basement B1	Car park unchanged			
		Basement B2	Radiotherapy Unit unchanged			
		Ground Floor	Unchanged			
		Level 1	Additional 4 theatres,			
			Additional 5 cubicles for Day Surgery Stage 2 recovery,			
		Level 2	Plant (unchanged)			
			Central Sterile Unit (unchanged)			
			Fitout of procedure shell comprising chemotherapy, day surgical procedures and angiography			
		Level 3	2 Wards (total 62 beds unchanged)			
		Level 4	2 Wards (total 62 beds unchanged)			
		Level 5	Fitout 2 Wards, 31 beds (total 62 beds)			
		Level 6	Plant Room/Lift Motor Room (unchanged)			
		Total new beds: 64				
		Final bed number at completion of Stage 2 = 208				
		Refer to also Section 6.3 -	Construction Staging (EAR page 44)			

(a) Scope of proposal (cont)	The following sections in the	e Project	Application provide the documentation requested for each stage of the project –
Should the recently exhibited documentation relate only to Stage 1, and you are seeking approval for both stages, you should augment	Section 11.4 - Plans, se Drawing No	ctions a Issue No	nd elevations of Stage 1 (EAR page 83) Title
the environmental assessment, plans /	MQ-A-LOC 3		Location Plan
elevations and supporting appendices to address the Stage 2 works (as relevant).	MQ-A-SITE 4	1	Site Plan
address the Stage 2 works (as relevant).	MQB1-A-P-B1 7	7	Basement 1
	MQB1-A-P-B2 MQB1-A-P-G MQB1-A-P-1 MQB1-A-P-2 MQB1-A-P-3 MQB1-A-P-4 MQB1-A-P-5 MQB1-A-P-6 MQB1-A-P-R	6 6 7 6 5 7 1 1	Basement 2 Ground Level 1 Level 2 Level 3 Level 4 Level 5 Level 6 Roof
	MQB1-A-E1	8	Elevations
	MQB1-A-E2	8	Elevations
	MQB1-A-S1 MQB1-A-S2	7 7	Sections Sections
		-	for Stage 1(EAR page 84)
	Section 11.6 - Plans, sec Drawing No	Issue	d elevations of Stage 2 (EAR page 85) Title
	MQB2-A-P-G	No 1	Ground
	MQB2-A-P-G MQB2-A-P-1	1	Level 1
	MQB2-A-P-2	1	Level 2
	MQB2-A-P-5	1	Level 5
	MQB2-A-P-6	1	Level 6
	MQB2-A-P-R	1	Roof Plan
	MQB2-A-E1	1	Elevations
	MQB2-A-E2	1	Elevations
	MQB2-A-S1 MQB2-A-S2	1 1	Sections Sections
	INIQBZ-A-SZ	I	Sections
	Section 11.7 - Shadow D	Diagrams	for Stage 2 (EAR page 86)

b) Height The Department understands that there is currently a six storey height limit applicable to the site. Section 6.1 of the environmental assessment seems to suggest that Stage 1 will comprise 5 storeys, whilst Stage 2 may include an additional storey.	As shown in the response to item a) we believe that the extent of the building in terms of staging is unambiguous, and is comprehensively described in the EAR and supporting documentation.
Page 61 indicates the proposal exceeds the height controls; however it is unclear whether this non-compliance relates to Stage 1 or Stage 2 and as such clarification is requested. Justification for any height departure should be provided as well as documentation that demonstrates there are no suitable complying alternatives.	The department apparently seeks justification for the departure from the height limit of six storeys on this area of the Macquarie University precinct as defined in Ryde Council Draft DCP 55. This issue is discussed at some length in the current Project Application – refer to Sections 8.3.5 Streetscape (page 64) and 8.3.7 Maximum Height Control. (EAR pages 68 & 69) Briefly, due to the topography of the site, which falls sharply along Talavera Road (5 metres in level along the eastern boundary), the proposed building will protrude more than 1200mm above the natural ground level, for a small portion along Talavera Road by a length of approximately 4000mm at the south eastern corner and 5000mm along the south western boundary with Goodman Fielder, effectively making the building 7 storey's high. The extent is highlighted in A below. This will occur upon completion of Stage 1 of the project, as the lift and plant rooms are being constructed to the height required to serve the project at its ultimate potential (i.e. at the completion of Stage 2).



(c) Visual Impact Analysis	
The Department requests a plan be produced to show existing reduced levels (RLs) (AHD) for topography and ground levels, future ground level RLs and maximum future RLs of proposed development envelopes, and number of storeys (including floor to ceiling heights) for the entire development (i.e.: Stages 1 and 2). All additional plans should be produced at an appropriate scale (A1 size or similar) and encompass the surrounding area in order to show the context of the site in the immediate locality. The plans will ensure that the Department can carry out an accurate assessment of the proposal.	The department has requested additional information pertaining to the context of the building. This information is comprehensively addressed within the current Project Application. If these are not adequate in the Department's opinion, we would request that specific issues are identified.Once again we confirm that that the application refers to a staged construction of the <u>entire</u> Hospital, with Stage 1 being undertaken in the first instance and Stage 2 at some later date, yet to be defined.We refer to the following sections and the information contained within - Volume 1 Section 11.1Site Survey (showing existing levels and topography) (EAR Page 80) Stage I documentation including elevations and sections showing levels (RL's) of the proposed building and buildings both existing and yet to be constructed adjacent. The floor to floor height is easily calculated from this information, however should the Department require it we will reissue the drawings, with this information including elevations and sections showing levels of proposed building and buildings, both existing and yet to be constructed adjacent. The floor to floor height is easily calculated from this information including elevations and sections showing levels of proposed building and buildings, both existing and yet to be constructed adjacent. The floor to floor height is easily calculated from this information including elevations and sections showing levels of proposed building and buildings, both existing and yet to be constructed adjacent. The floor to floor height is easily calculated from this information. (EAR Page 83)
	The above documents have been submitted in A4, A3 and B1 size.



(d) Car Parking

As with the height issue, the Department is unclear how future stages may satisfy car parking requirements. This is of particular concern as the submitted traffic study suggests the proposal's car parking demand is currently in the order of 589 car parking spaces (for both stages), some 350+ spaces more than what is currently proposed. At the same time, it is implied that 238 spaces would be an appropriate car parking provision for the private hospital. Given Council's car parking requirements are development standards, this issue needs to be substantially clarified. Whilst it appears as though the proposal could comply with Council's car parking requirement (at a rate 1 space per 80m² of GFA), the Department is concerned that the car parking demand suggested by your traffic study will either not be catered for, or alternatively to provide car parking in accordance with demand the proposal will need to significantly exceed Council's LEP controls for car parking.

If applying the RTA's *Guide to Traffic Generating Developments*, the car parking demand for a proposal of this magnitude (208 beds in total) would be much lesser (218 spaces). The Department therefore requests you clarify the means by which car parking demand has been generated. The department again apparently seeks clarification on the following -

1. Whether the submitted documentation and therefore carparking provisions relates to the entire proposal or only to Stage 1

The question was referred to the Traffic Engineer, TEF Consulting, whose comments are attached in full, however the excerpt below confirms that the carparking calculations relate to both stages of the construction.

- Although the development is staged in terms of order of construction, the traffic report did
 not consider stages other than mentioning them and specifically noting facilities belonging
 to Stage 2 in all calculations. The reason for this approach was that due to the design
 constraints (provision of a car park in the basement with little opportunity for further
 expansion) it was considered prudent to assess the parking requirements of the ultimate
 development.
- Therefore, as far as parking calculations are concerned, there are no "currently proposed" parking provision and "future" parking provision. The proposal is for the total development on two adjacent sites with combined parking of 470 spaces which is designed to cater for both Stages of construction after completion.

2. Whether the parking numbers proposed are adequate.

Site 1, the Specialist Centre, has an approved DA (LDA 676/2001). At the time of approval (1 November 2001) off street parking was calculated at 1 space/46m2 of floor area resulting in 242 spaces.

Site 2, the Hospital proposes 228 spaces calculated to comply with the current Ryde LEP 137 which limits the amount of off street parking to 1 space/80m2 of floor area.

We also note that this is the view shared by both the RTA and by Council, in their recent submissions. Specifically, Ryde Council notes that the proposal exceeds the requirement by 4 carparking spaces, however they do not share the concerns of the DoP (attachment B) in regard to traffic - page 5 of their report...." The report concludes that although the maximum parking provisions of the RPSO are <u>slightly</u> exceeded, it is likely that the unconstrained parking demand that is generated by the nature of the proposed development will result in substantial deficiency of car parking, thereby encouraging the use of public transport which is in keeping with ones of the objectives for the Macquarie Park Employment Area and the Metropolitan Strategy and is supported by the City of Ryde.



2 April 2007

Mr Michael File Director Strategic Assessments Office of Strategic Sites and Urban Renewal NSW Department of Planning GPO Box 39 Sydney NSW 2001

Attention: Mr Anthony Witherdin

Dear Sir,

Macquarie University Private Hospital

I refer to your letter (Ref. No. MP 06-0172, undated) regarding the above development proposal and addressed to Ms Anne Lamb of Health Projects International (HPI). I have been requested by HPI to address the issues raised in the above mentioned letter with regard to traffic and parking. These issues are detailed in paragraph (d) Car Parking. To this end please find below my response to the issues raised.

It appears from the text of Issue (d) that there is some confusion with regard to the development proposal in terms of staging and in terms of parking provision. I would like to clarify these aspects of the proposed development as follows.

- Although the development is staged in terms of order of construction, the traffic report did not consider stages other than mentioning them and specifically noting facilities belonging to Stage 2 in all calculations. The reason for this approach was that due to the design constraints (provision of a car park in the basement with little opportunity for further expansion) it was considered prudent to assess the parking requirements of the ultimate development.
- Therefore, as far as parking calculations are concerned, there are no "currently proposed" parking provision and "future" parking provision. The proposal is for the total development on two adjacent sites with combined parking of 470 spaces which is designed to cater for both Stages of construction after completion.
- The development will comprise a private hospital on one site and a medical teaching facility with medical consulting rooms on the second site. Details of the proposed facilities with detailed breakdown of staff and visitor numbers by proposed services were provided in the TEF traffic and parking report.
- In order to provide a more accurate assessment of parking demand, calculations were carried out using three approaches. Firstly, requirements of LEP 137 were considered. Secondly, requirements of DCP 29A were used; and, finally, assessment was carried out based on studies at similar facilities. The resulting parking requirements are summarised in Table 1.1, reproduced below from the TEF report.

Parking demand/provision based on	No. of spaces
LEP No. 137	228
DCP 29A	515
Similar developments	589

Table 1.1 Parking provision requirements

* - this DCP has been overtaken by LEP 137

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Traffic & Parking Studies and Management

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Intersection and Network Modelling

Environmental impact assessment of roads, traffic and transport operations

Road and Traffic Noise

Road Safety Studies

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Car Park Design

Intersection Design

Traffic Accident Investigation

Traffic Accident Reconstruction

Research and development

Expert Witnesses



- The report argued that provisions of LEP 137 should not apply for the proposed development, the reason being that very parking provision rates of the LEP 137 were designed to restrict the car use by employees and visitors of commercial developments in the Macquarie Park Corridor (MPC). This, in turn, was done with an aim to limit the future trip generation to/from MPC during the commuter peak hours. The present proposal is for a medical facility which differs from the commercial development in two important aspects. Firstly, it peak traffic generation periods are outside the typical commuter peak periods due to the different times of staff shifts. Secondly, the proposed medical facility caters for the ill and infirm who in most cases cannot use public transport. Also, there is a security issue with nurses who start and finish their shifts early in the morning or late at night and require secure parking within the facility as opposed to having to walk from the train station or a bus stop. It must be noted that, also due to early and late starting/finishing shift times hospital staff are limited in their choice of convenient public transport services.
- Parking requirements contained in DCP 29A, resulting in 515 parking spaces, are considered to be more applicable for the proposed development for the reasons stated above, although this document was superseded by LEP 137.
- The calculations of the likely unconstrained parking demand based on the studies in similar developments indicated the peak demand of 589 cars. It must be noted that this is indeed unconstrained demand, that is when parking is provided in full. Also, this demand would occur during the nursing shift changeover and will be less before and after this period. It is noted that the underlying studies which formed a basis for LEP 137 requirements predicted a shift in travel modes from car use to public transport, bicycles and walking in the order of 15% to 17% in the near future. Such a shift would result in a reduction of car parking demand by the proposed development to 500 cars.
- The reduced parking provision of 470 spaces aims to further scale down the car use by staff of the proposed facility, particularly of those who work 9 to 5 shifts. This was done to address the current policy of reducing the car use for typical office workers in MPC. The nursing shifts as well as patients will be sufficiently catered for by the proposed parking.

I trust that the above provides necessary clarification of the approach taken for calculation of the required parking provision. Please do not hesitate to contact the undersigned should you have any questions.

Yours sincere quina Oleg I.

Director