



Department of Planning
Department of Planning



**MAJOR PROJECT ASSESSEMENT:
Lismore Base Hospital Redevelopment
Stage Two
Integrated Cancer Care Centre
Major Project Application No. 07_0136**

Director-General's
Environmental Assessment Report
Section 75I of the *Environmental Planning and
Assessment Act, 1979*

September 2008

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1 EXECUTIVE SUMMARY

- 1.1 This is a report from the Director-General to the Minister in relation to Project MP 07_0136 at Lismore Base Hospital. The project is for the development of an Integrated Cancer Care Centre. This report is provided to the Minister for the purposes of determining the Project Application pursuant to 75J(2)(a) of the Act.
- 1.2 The Project proponent is the NSW Health Administration Corporation. The Lismore Base Hospital is operated by the North Coast Area Health Service.
- 1.3 The Lismore Base Hospital (LBH) Site is located at 60 Uralba Street, Lismore in the Lismore City Council Local Government Area, approximately 2 kilometres north east of the Lismore Central Business District. The development site is located in the northwest portion of the hospital allotment and comprises an area of approximately 2880m².
- 1.4 The Site is owned by the Health Administration Corporation and the development site is currently occupied by the existing Richmond Clinic building accommodating a mental health unit. The mental health clinic is to be relocated to a new facility on its completion.
- 1.5 The surrounding land use is characterised by low density residential development made up of one and two storey detached dwellings.
- 1.6 On 26 January 2006 the Minister for Planning approved Stage 1 of the LBH redevelopment for a new Psychiatric Unit. This project application indicated the redevelopment would consist of 3 stages.
- 1.7 The proposed development is for Stage 2 of the LBH redevelopment and consists of a new Integrated Cancer Care Centre (ICCC) including facilities for radiation oncology clinics, radiotherapy, orthovoltage and chemotherapy treatment, patient support, as well as staff support and office accommodation.
- 1.8 The estimated Capital Investment Value (CIV) of the development is **\$27 million**.
- 1.9 On 24 October 2007 the Director-General declared the project as a Major Project under Part 3A of the *Environmental Planning and Assessment Act 1979*.
- 1.10 The proposal was lodged in April 2008 and exhibited for 30 days from 30 April 2008 to 30 May 2008.
- 1.11 One submission was received from Lismore City Council. No submissions were received from the public.
- 1.12 Lismore City Council's issues related to contributions, provision of car parking and landscaping.
- 1.13 In September 2008 the proponent submitted a Preferred Project Report and revised Statement of Commitments. The Preferred Project Report proposed a number of minor modifications (primarily design changes to the roof line and facades, to improve appearance and solar efficiency, and some internal layout to improve efficiency of staff and patient flows) to the exhibited proposal and the revised Statement of Commitments addressed issues raised by the Council.
- 1.14 The Department is of the view that the site is suitable for the proposal and that the development is appropriate. The merits of the proposal have been assessed and resulting impacts have been satisfactorily addressed. Recommended conditions of approval ensure a satisfactory resolution to construction and site management issues as well as local contributions.
- 1.15 The Department recommends that the project be approved subject to conditions set out in **Appendix A**.

2 BACKGROUND

2.1 Site Location and Description

2.1.1 The site's local context can be seen in **Figure 1**, below (*Lismore Base Hospital is indicated by ■*):



Figure 1 – Locality Plan

- 2.1.2 The land is located at 60 Uralba Street Lismore and the land is legally described as part of Lot 267 DP 755718 (area 1.2 ha). The development site is located in the northwest portion of the allotment and comprises an area of approximately 2880m². The site is bound by Hunter Street to the west, Uralba Street to the south and residential development to the east and north (along Weaver Street, Fermoy Avenue and Little Uralba Street).
- 2.1.3 The land has a fall of approximately 7 metres from the southeast corner to the northwest.
- 2.1.4 Primary access to the hospital and emergency department is from Uralba Street with secondary access points via Hunter Street, Little Uralba and the extension to Laurel Avenue. Access to the development site is via Laurel Avenue, with rear lane access from Hunter Street.
- 2.1.5 A range of formal and informal car parking is available on the land and in Hunter Street, Uralba Street and Gaggin Lane. At the conclusion of the first redevelopment stage a total of 416 car parking spaces are to be available for the Hospital, as required by the Stage 1 development consent.
- 2.1.6 The land is zoned 5 Special Uses Hospital under the *Lismore Local Environmental Plan 2000*.

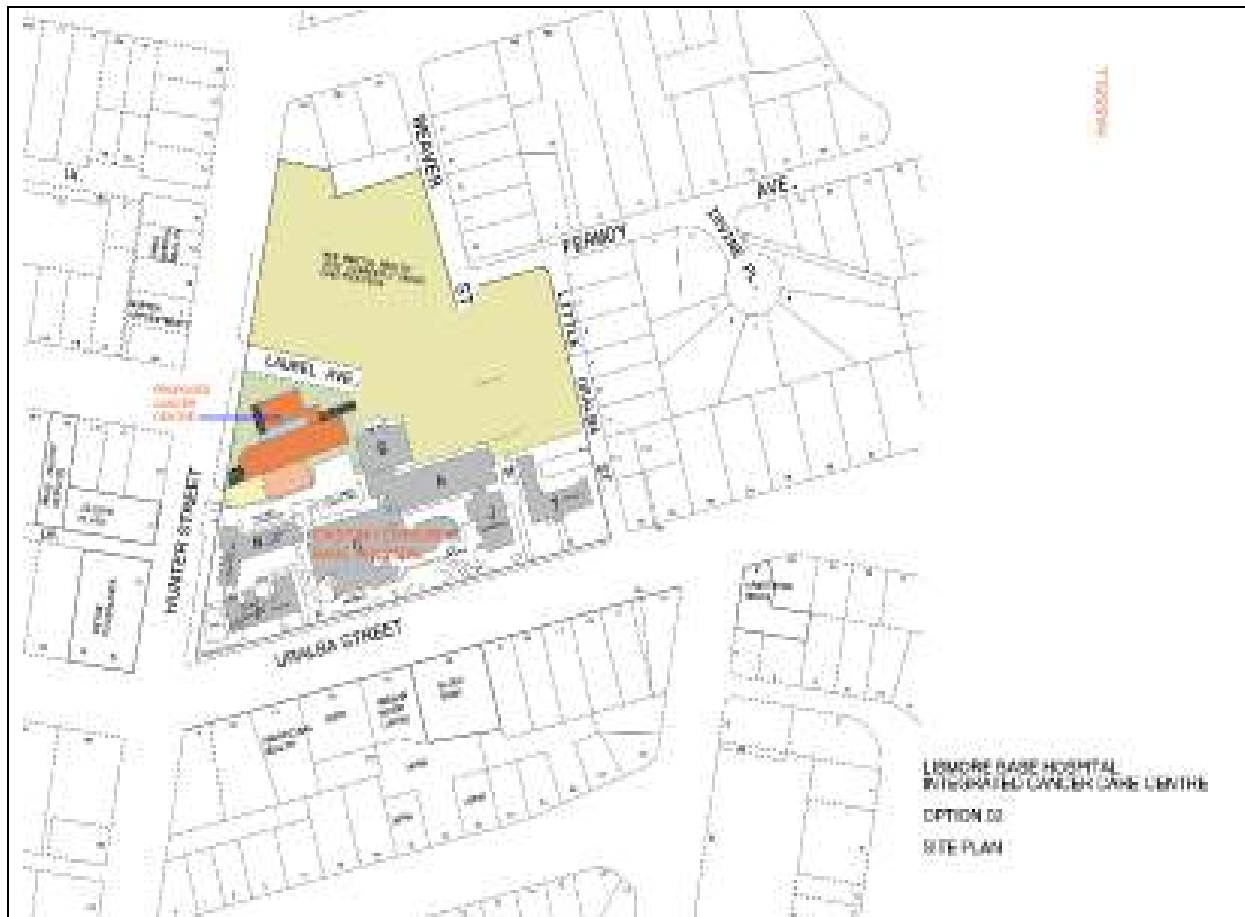


Figure 2 – Site Plan

2.2 Existing Development

- 2.2.1 The land is occupied by Lismore Base Hospital (LBH) a 210 bed referral hospital. It consists of 4 main buildings accommodating medical and surgical in-patient facilities, clinical services such as Operating theatres, Intensive Care Unit, Pathology, Imaging and Emergency departments, as well as support and administration facilities. Existing cancer facilities are limited to medical oncology providing consultation and chemotherapy treatment; the current facility is not purpose built and does not meet contemporary staff and patient needs.
- 2.2.2 The development site has been occupied by the Richmond Clinic building, a 3 storey brick building accommodating the mental health in-patient unit, pain management unit, and needle and syringe exchange programme unit. This building dated back to about 1948, although was substantially modified over time. Mental health services are to move to the completed Stage 1 of the hospital redevelopment. The Richmond Clinic building was recently demolished.

2.3 Surrounding Development

- 2.3.1 The site is located about two kilometres north-east of Lismore City Centre. The surrounding development is predominantly residential – low rise, detached housing.
- 2.3.2 Some healthcare facilities are accommodated in existing residential buildings along Hunter and Uralba Streets. Angled street parking is provided in Hunter Street and parallel and angled parking in Uralba Street.

3 PROPOSED DEVELOPMENT

3.1 Project Application

The proponent seeks project approval for the development of an Integrated Cancer Care Centre at Lismore Base Hospital, comprising:

- A two storey brick/glass/aluminium building to contain Radiation Oncology Clinics, Radiotherapy Treatment, Orthovoltage Treatment, Chemotherapy Treatment, Patient Support Facilities and Staff Support and Office Accommodation Facilities;
- Lower ground floor car parking;
- Top floor plant room;
- a link to the original hospital building (Block A); and
- associated landscaping and site works.

3.2 Public Notice of Application

The Project Application and Environmental Assessment were advertised and exhibited from 30 April 2008 to 30 May 2008.

3.3 Development Description

The proposal as advertised has been subject of some design amendments in the ensuing period. These amendments are described in the proponent's Preferred Project Report.

The proposal is described in summary in **Table 1** below describes the proposal as modified by the Preferred Project Report. **Figures 3 to 7** illustrate graphically components of the proposal.

Table 1: Development description

Aspect	Description
Development description	Building footprint approx 1740m ² Lower Ground Floor <ul style="list-style-type: none">▪ 21 car parking spaces; storage space; lift equipment; bicycle storage Ground Floor <ul style="list-style-type: none">▪ Reception; patient terrace; consultation/examination rooms; radiation treatment rooms; linear accelerator bunkers; orthovoltage treatment room; staff terrace; conference and training facilities; and café in foyer. First Floor <ul style="list-style-type: none">▪ Offices, Administration, treatment rooms, treatment bays.
Project staging	<ul style="list-style-type: none">▪ Construction in a single stage. Commencing following completion of Stage 1 and decanting of patients from the existing building to Stage 1.
Height	<ul style="list-style-type: none">▪ 15.7m (basement floor to maximum roof). Slope of site means effective height of building above ground is about 10m. Main bulk of building has height of 8m.
Building materials	<ul style="list-style-type: none">▪ Construction – concrete frame, metal deck roofing▪ Façade – masonry brickwork, lightweight cladding, glass and aluminium framing
Landscaping	<ul style="list-style-type: none">▪ Street frontages are to be landscaped (grassed and tree planting)▪ Landscaped internal courtyard▪ Stormwater to be directed to Council approved drainage system

Aspect	Description
	<ul style="list-style-type: none"> Vegetation – large street and avenue trees; medium feature trees and palms; screen planting in internal areas Building is oriented to maximise northern aspect, using natural light and ventilation as much as possible
Access and Car Parking	<ul style="list-style-type: none"> Vehicular and pedestrian access to the site is provided from Laurel Avenue off Hunter Street 4 rear lane car parking spaces 1 rear lane disabled car parking space 1 at-grade disabled car parking space Pedestrian links are provided from the eastern side of the building to the existing main hospital buildings Internal access is provided by lift and internal staircases. Construction vehicles will access via Hunter St and Laurel Ave

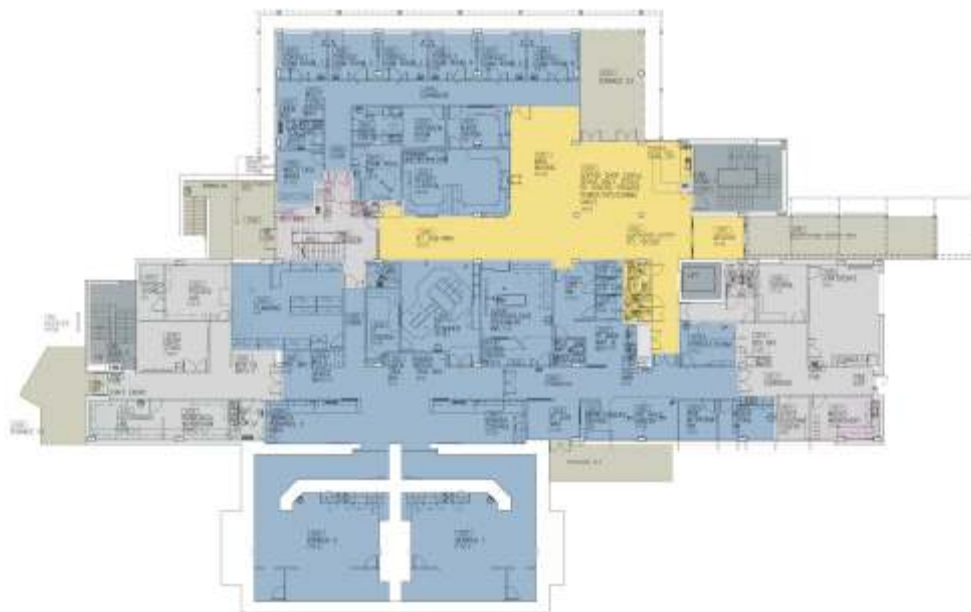


Figure 3 – Ground Floor Plan

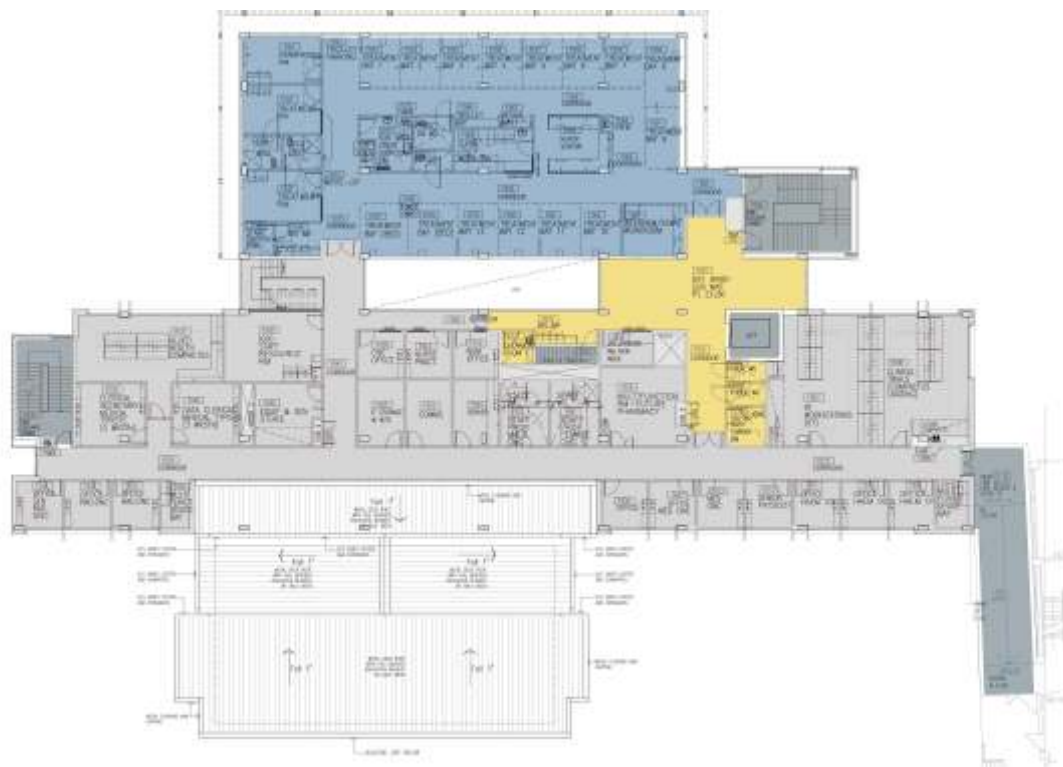


Figure 4 – First Floor Plan

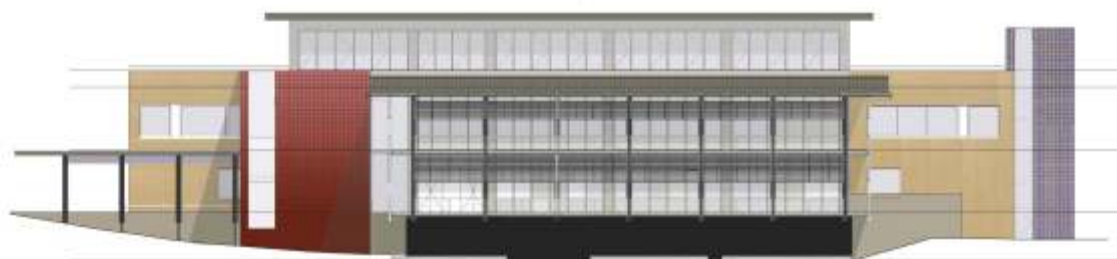


Figure 5 – Northern elevation



Figure 6 – Aerial view looking from north west



Figure 7 – Aerial view looking from north east

3.4 Integrated Cancer Care Centre

The current cancer care centre at LBH was constructed in 1933, being modified in 1978 and 1984. The centre does not offer a complete range of services and its facilities do not meet contemporary requirements.

Population within the Hospital's catchment is increasing, although the demographic is aging. This is expected to place greater pressures upon health services and cancer treatment in particular. Lack of radiotherapy treatment at Lismore has resulted in patients having to go elsewhere in NSW or Queensland to receive treatment, or decline treatment due to the inconvenience or cost.

The proposed Centre is to offer radiation treatment therapy at Lismore combined with existing oncology treatment and radiation oncology consultation in an integrated and purpose built facility which in turn would be integrated with the pathology, emergency, diagnostic, pharmacy etc services of the Lismore Base Hospital.

From a medical and health services perspective the new Cancer Centre will, amongst other things, reduce costs to the North Coast Area Health Service, add greater self-sufficiency to services in the region, reduce travel and accommodation costs to patients, reduce waiting times for treatments and diagnosis and reduce travel times and increase access to carers and families of patients.

The design for the Centre is based on a two storey building, with Ground Floor containing main entry/reception, consultation clinics and radiotherapy facilities, clinical support facilities and staff conference and meeting areas.

Potentially a café may be located in the entry zone. The First Floor is to accommodate medical oncology treatment areas and support facilities, staff office accommodation and a link to existing hospital buildings. Parking places are provided on the Lower Ground Floor.

A central two storey atrium is designed to allow a high degree of natural light and the majority of patient and staff areas face north to benefit from natural light.

The natural slope of the site from the south-east downwards to the north-west permits the building to be 'set into' the slope, allowing car parking and the radiation treatment bunkers to be effectively placed underground or into the slope; this in turn has the effect of reducing the overall physical scale of the building.

The Preferred Project Report includes some redesign of the originally submitted proposal. The redesign does not substantially alter the original overall design parameters of the project or the general layout; however, the redesign substantially improves the aesthetics and environmental efficiency of the building.

The redesign improves waiting areas for patients and the public, internal movement systems and operational relationships and layout of first floor patient treatment area. The redesign provides a public terrace on the north-eastern corner of the building and a staff terrace on the western side, and three additional lower ground floor car parking spaces are provided.

The most marked change to the project is the treatment of the building facades. The original design had a 'parapet' based roof form and the volume of the building form was right-angular. The redesign places angular roof forms with deep roof overhangs, instead of the parapet form. Increased use of glass on the north, east and west facades improves natural light, and roof overhangs and sun shading louvres reduce solar impact whilst providing strong horizontal elements which create much more interest in the building's appearance. Whilst the redesign increases the height of the original building design, this does not detrimentally affect the visual or shadowing impacts nor the fact that the site continues to be visually dominated by the older multi-storeyed hospital buildings.

3.5 Lismore Base Hospital Redevelopment Strategy

The Lismore Base Hospital has identified three stages in the upgrading of its facilities –

Stage 1 – the development of a new 48 bed Mental Health unit (which is currently under construction) towards the north of the hospital grounds.

Stage 2 – involves the moving of patients and services from the existing mental health facility to the new unit, then demolition of that facility and construction of an Integrated Cancer Care Centre (i.e. the current proposal).

Stage 3 – following the movement of cancer care services from their current location Building P (see Site Plan Figure 2) to the new Cancer Care Centre and removal of activities from Building N, Buildings P and N are to be demolished to make way for a new facility to contain an expanded Emergency Department, ambulance services, expanded operating suite, intensive care unit and high dependency unit, clinical support services and 60 new beds.

The overall redevelopment strategy has been designed to ensure no dislocation or interruption of current services though the upgrading process.

4 STATUTORY CONTEXT

This section identifies the statutory context and requirements for considering the proposal,

4.1 The Environmental Planning and Assessment Act 1979

Part 3A of the Environmental Planning and Assessment Act 1979 (the Act) commenced operation on 1 August 2005. Part 3A consolidates the assessment and approval regime of all Major Projects previously considered under Part 4 (Development Assessment) or Part 5 (Environmental Assessment) of the Act.

Under the provisions of Section 75B of the Act development may be declared to be a Major Project by virtue of a State Environmental Planning Policy or by order of the Minister published in the Government Gazette.

4.2 State Environmental Planning Policy (Major Projects) 2005

State Environmental Planning Policy (Major Projects) 2005 (Major Projects SEPP) outlines the types of development declared a project for the purposes of Part 3A of the Act. For the purposes of the Major Projects SEPP certain forms of development may be considered a Major Project if the Minister (or his delegate) forms the opinion that the development meets criteria within it.

On 24 August 2007, the Director General as delegate of the Minister formed the opinion that the proposed Cancer Care Centre at Lismore Base Hospital is development of a kind that is described in Group 7, Clause 18 (Hospitals) of Schedule 1 of the Major Projects SEPP and is a project to which Part 3A applies.

4.3 State Environmental Planning Policy No 55

SEPP 55 requires consideration as to whether land proposed for development or rezoning is contaminated. It also requires the consent authority to be satisfied that any remediation required will take place before any proposed development. This issue is discussed in Appendix D.

4.3 Permissibility

The subject site is zoned 5 Special Uses by the Lismore Local Environmental Plan 2000. Hospitals are permissible in this zone.

4.4 Consideration

Appendix D sets out the relevant consideration of legislation (including other Acts) and environmental planning instruments as required under Part 3A of the Act.

5 CONSULTATION AND ISSUES RAISED

5.1 Public Exhibition

Section 75H(3) of the Act requires that once the Environmental Assessment ("EA") has been accepted by the Director General, the Director General must, in accordance with any guidelines published in the Gazette, make the EA publicly available for at least 30 days.

A "test of adequacy" was undertaken by the Department on an EA submitted on 11 February 2008 and determined that the matters contained in the Environmental Assessment Requirements (EARs) were not adequately addressed in the EA, namely detailed architectural drawings of the proposed building. The proponent was requested to address the outstanding issues. An amended EA was submitted on 1 April 2008 and a subsequent test of adequacy determined that the EA addressed all issues raised in the EARs.

The public exhibition and consultation process is summarised as follows:

- public exhibition was conducted from 30 April 2008 until 30 May 2008.
- copies of the EA were available for inspection at Lismore City Council offices and the Department of Planning's offices in Sydney during the exhibition period.
- details of the application were published in the Sydney Morning Herald and the Lismore Morning Star, and were made available on the Department of Planning's website.
- 75 landowners in the vicinity of the site were notified and invited to make submissions.

In response, the Department received one (1) written submission – from the Lismore City Council. A copy of the Council's submission was forwarded to the proponent at the conclusion of the exhibition period. The proponent was invited to respond to the submission and prepare a Preferred Project Report.

A Preferred Project Report and a revised Statement of Commitments was submitted on behalf of the proponent on 4 September 2008.

5.2 Issues Raised in Submissions

Only one submission was received in respect of the EA for the proposed Integrated Cancer Care Centre; this was from Lismore City Council. The issues raised in the Council's submission are summarised below:

- The staged redevelopment of LBH is fully supported
- The redevelopment should address parking and traffic congestion issues
- An existing underground storage tank adjacent to the site should be removed if no longer required
- There appear anomalies in the current provision of on-site car parking
- Proponent should demonstrate how the required additional 41 car parking spaces are to be provided
- The development will increase traffic generation by 250 movements per day and should be liable for Council's roads contribution fund (under s94)
- Council's landscaping guidelines should be used, as proposed street tree species are unsuitable
- Council seeks water and sewerage headworks costs contribution (under s64 Local Govt Act)

- Council wishes to be advised of the entity responsible for construction and post-construction management of the site
- Council seeks a range of conditions to be attached to the development consent –
 - A Construction Traffic Management Plan for Council approval
 - Lodgement of bond against damage to Council infrastructure during construction
 - Council approval required for any closure to any footpath or kerbside car parking during construction
 - All loading and unloading to be on-site
 - 41 car parking spaces to be provided
 - Stormwater controls to be approved by Council
 - An Environmental Management Plan to be approved by Council
 - Restriction of construction hours
 - A Construction Acoustic Report to be approved by Council
 - Outdoor lighting to meet Australian Standard
 - Water supply connections to meet Australian Standard
 - Waste Management Plan to be approved by Council
 - Site to be equipped with hazardous clean-up equipment
 - Waste material only to be disposed of at properly licensed waste management facilities
 - Trade Waste discharge application to be made to Council

6 ASSESSMENT

6.1 Director General's Environmental Assessment Requirements (DGEARs)

Section 75F of the Act provides that the Director General is to prepare Environmental Assessment Requirements for each project (DGEAR's). The EA outlines the matters that the Director General considers should be considered as part of the assessment process.

On 30 October 2007, DGEAR's were issued for the project application (refer to **Appendix E**). The Department was satisfied that the Project Application addressed these requirements.

6.2 Director General's Environmental Assessment Report

The purpose of this submission is for the Director General to provide a report to the Minister for the purposes of deciding whether or not to grant project application approval pursuant to Section 75J of the Act. Section 75I(2) sets out the required content of the Director General's report to the Minister. Each of the criteria set out therein are addressed as outlined in **Table 2** below.

Table 2: Compliance with Section 75I(2) of the Environmental Planning and Assessment Act, 1979 and Clause 8B of the Environmental Planning and Assessment Regulations 2000

Section 75I(2) criteria	Response
(a) a copy of the proponent's environmental assessment and any preferred project report;	The proponent's EA is included at Appendix F. A Preferred Project Report has been submitted (see Appendix B), a revised Statement of Commitments (see pages 15-17 Appendix B) and a response to issues is set out at pages 9-14 Appendix B.
(b) any advice provided by public authorities on the project;	All advice provided by public authorities on the project for the Minister's consideration is set out at Appendix C.
(c) a copy of any report of a panel constituted under Section 75G in respect of the project;	No independent hearing and assessment panel was undertaken in respect of this project.
(d) a copy of or reference to the provisions of any State Environmental Planning Policy (SEPP) that substantially govern the carrying out of the project;	A brief assessment of each relevant State Environmental Planning Policy (together with other relevant statutory matters) which substantially govern the carrying out of the project is set out in Appendix D.
(e) except in the case of a critical infrastructure project – a copy of or reference to the provisions of any environmental planning instrument that would (but for this Part) substantially govern the carrying out of the project and that have been taken into consideration in the environmental assessment of the project under this Division; and	An assessment of the development relative to the prevailing EPI is provided in Appendix D.
(f) any environmental assessment undertaken by the Director General or other matter the Director General considers appropriate.	The environmental assessment of the project is this report in its entirety. All environmental impacts associated with this proposal have been assessed within this report.
(g) a statement relating to compliance with the environmental assessment requirements under this Division with respect to the project.	The EA and subsequent submissions by the proponent forms the basis for consideration of the environmental impacts associated with the development. The Department is satisfied the EA requirements issued by the Director General on 30 October 2007 have been addressed in the EA.

Clause 8B of the Regulation sets out the matters which the Director General must present in his report for environmental assessment and Ministerial consideration. It states that the Director General's report is to include an assessment of the environmental impact of the project, any aspect of the public interest that the Director General considers relevant to the project, the suitability of the site for the project and copies of public submissions received by the Director General. These issues are discussed below.

6.3 Summary of Significant Issues

The **suitability of the site** can be justified, as outlined below:

- the proposal is permissible as Zone 5 Special Uses under the Lismore Local Environmental Plan 2000;
- the proposal will utilise a site already used for hospital purposes;
- the site is physically capable of sustainably accommodating the proposed development;
- the proposed building will be of a lesser scale and more efficient than the building it replaces;
- the proposal will not increase (and more likely decrease) impact on the locality;
- the proposal will continue the modernisation, integration and expansion of services at the Lismore Base Hospital;
- consolidation of services at the Hospital lowers costs through direct physical linkages with other clinical services at the Hospital; and
- the proposal will introduce new services to the Hospital, better meet community needs and save considerable costs to the community in accessing cancer treatment.

The **public interest** can be satisfied on the basis that:

- the Integrated Cancer Care Centre provides a facility which addresses increasing demand for its services, arising from population increases and demographic changes;
- the Centre represents a significant investment (about \$27 million) in the infrastructure of both Lismore and the Northern Rivers region;
- new services are provided in a state-of-the-art facility, with minimal environmental impact;
- the ICCC reduces costs and dislocation to the community, which currently must travel elsewhere for treatment;
- Lismore community health costs should be reduced through the consolidation of clinical services, which provide greater convenience and efficiencies; and
- more convenient access to cancer diagnostic and treatment services should facilitate greater awareness of cancer issues, leading to earlier diagnosis and treatment and consequent improvement in health outcomes.

Ecologically Sustainable Development Principles

There are five accepted Ecologically Sustainable Development (ESD) principles:

- (a) decision-making processes should effectively integrate both long-term and short-term economic, environmental, social and equitable considerations (the integration principle);
- (b) if there are threats of serious or irreversible environmental damage, lack of full scientific certainty should not be used as a reason for postponing measures to prevent environmental degradation (the precautionary principle);

- (c) the principle of inter-generational equity - that the present generation should ensure that the health, diversity and productivity of the environment is maintained or enhanced for the benefit of future generations (the inter-generational principle);
- (d) the conservation of biological diversity and ecological integrity should be a fundamental consideration in decision-making (the biodiversity principle); and
- (e) improved valuation, pricing and incentive mechanisms should be promoted (the valuation principle).

The Department has considered the proposed development in relation to the ESD principles and has made the following conclusions:

- **Integration Principle** – The social and economic benefits of the proposal are clear. The Integrated Cancer Care Centre will provide a new facility which would introduce new health services and enhance some current services. It reduces costs and inconvenience to patients and serves an area broader than Lismore itself
- **Precautionary Principle** – The development is considered to pose no threats of serious or irreversible environmental damage; on the contrary, it is considered to improve current environmental conditions through more efficient design.
- **Inter-Generational Principle** – The proposed development occurs in an area which has already been substantially altered by previous development and poses no questions regarding maintenance of environmental quality.
- **Biodiversity Principle** – Due to the already developed state of the site, the development poses no threat in terms of biological diversity or ecological integrity. The more modern and efficient building design should improve local environmental conditions and be less demanding on energy and utility services.
- **Valuation Principle** – The provision of new and necessary services to the local and regional community should provide more effective meeting of needs with regard to cancer diagnosis and treatment. Improved diagnostic and treatment services should provide benefits which flow through to improved community health, savings to patient cost and convenience and reduction of long-term illness and health costs.

Consideration of this proposal has not given rise to many areas of concern. The proposal is quite straightforward and the Project Application, Environmental Assessment and Preferred Project Report address most areas of potential concern in its design and Statement of Commitments.

The Lismore City Council stated it “fully supports” the proposal, however, raised some qualifications, which are discussed below. The proposal constitutes a substantial investment in expanding and improving the health infrastructure of the North Coast Region and Lismore in particular.

The Lismore City Council in response to the public exhibition of the Environmental Assessment report drew attention to a number of issues which it would wish resolved in the decision making process for this development, however, these issues are considered neither major nor potentially fatal to the success of the project application (see Appendix C).

In any event, the proponent has undertaken revisions to the proposal and clarification of issues in its Preferred Project Report and revised Statement of Commitments – these are discussed below.

The issues raised by the Council are:

Car Parking

The Council pointed out that the local area near the Hospital suffers from car parking congestion. The car parking requirements under Council's DCP and the car parking provided for Stages 1 and 2 are summarised in the following Table 3 below.

Table 3: Car parking assessment

	Stage 1	Stage 2	Total
DCP No. 18	404	41	445
Existing (Stage 1)	426*	-	426
Proposed (Stage 1 and 2)	422	27	449

** Note: The conditions of the Stage 1 approval specify that 416 parking spaces be provided.*

As demonstrated above, there will be a numerical parking shortfall of 14 spaces for Stage 2. However, Stage 1 will continue to provide a surplus of 18 car parking spaces compared to Council's DCP rates. Stages 1 and 2 combined will provide four more car parking spaces than is required under Council's DCP. Therefore, the proposed car parking provision arrangements are considered to be satisfactory.

A condition is included in the recommendation requiring a minimum of 445 parking spaces for the hospital.

Tree Planting

The Lismore City Council expressed concern that the tree species identified as "large street trees" in the Landscape Concept plan (LSK LBH 001) are unsuitable for planting close to buildings in an urban area and are too large when fully grown. The Council has suggested "small to medium" trees adaptable to clay soils be chosen from the list in the Council's Landscaping Guidelines.

In the Preferred Project Report a revised Landscape Planting Arrangement Plan (PSA 7638 L-200) has been provided and the proponent will provide landscaping in accordance with the revised plans and the Council's preferred species list (as provided in the revised Statement of Commitments).

Section 94 contributions for roads

The Council has in place a Section 94 contributions plan for funding of expansion and upgrading of the Lismore City wide road network, in light of overall predicted growth. The Council states that the plan is "based on a user pays scenario where a development pays for the increase in demand generated by the increase in traffic associated with its development". Overall the Council's contributions plan seeks to raise \$30,802,000 towards road works. The Council has sought that its Section 94 plan be applied to the proposed development, which would result in a payment of \$81,069 based on an estimated contribution of the development as a proportion of total predicted traffic increases across Lismore (a calculation which does not account for the public benefits of the development or distinguish this form of development from any other form of land use).

Planning practice, and in particular Planning Circular D6 which relates to Crown Development Applications, draws a distinction between normal commercial development and Crown activities where community benefits and services are provided. Practice has been to exempt Crown developments, which provide essential community services, from local road related Section 94 contributions in recognition of the community benefit provision and to ensure that taxpayer funds are effectively directed towards those community services and benefits. As noted earlier, considerable benefits will flow to the local community through the local provision of modern cancer

diagnostic and treatment services, some of which people would have to travel interstate to receive (or decline treatment due to inconvenience and cost).

In the current proposal there will be some minor increase in local traffic due to the traffic generating effect of the new Integrated Cancer Care Centre. On the other hand there are substantial community benefits arising from the services to be provided by the facility. The Council's own studies predict that the overall contribution to local traffic increases of hospitals and universities in Lismore is 1%. Compared to residential development's contribution of 60%, hospitals' contribution is minor and the impact of the Integrated Cancer Care Centre would be negligible in this context.

Following discussions between the proponent and the Council the proponent offered a discretionary payment of \$21,000 to the Council to be put towards local traffic impacts, however, this payment is non-precedental and not in accordance with the Council's Section 94 plan (Lismore Contributions Plan). This offer is contained within the Response and Outcomes to Issues Raised in Submission contained within the Preferred Project Report.

In determining the Project Application the Minister (under section 94B(2)) can have regard for but is not bound by the Council's local contribution plan. Under the Council's Contributions Plan, hospitals and universities are said to account for 1% of predicted traffic growth; 1% of overall roads contributions would be \$308,020. The sum being sought by the Council from the Integrated Cancer Care Centre represents 26% of the total from this sector, which given its relatively modest sale does not appear reasonable.

In light of planning practice for Crown developments, the substantial benefit flowing to the local community from the proposed development and the minor traffic implications of the proposal, it is considered that the proponent's offer of a payment is most reasonable and an appropriate outcome.

Section 64 contributions for water and sewerage headworks

Contributions towards the costs of expanding water and sewerage headworks, arising from increased demands of a development, can be collected under Section 64 of the Local Government Act. Levies related to water and sewerage headworks are determined under Section 305 of the Water Management Act.

The Council has sought a condition of development consent which seeks to require the proponent to comply with the provisions of the Water Management Act and provide a water and sewerage headworks levy to a specified amount.

There is a question of the appropriateness of a condition of development consent which seeks to require compliance with an obligation imposed under a separate statutory process (i.e. Local Government Act and Water Management Act), and in effect make a determination under that separate process.

Notwithstanding this, following discussions between the proponent and the Council, the quantum of contributions towards water and sewerage headworks was agreed at \$13,818 (as calculated by the Council). The parties have sought the development consent to give effect to the agreed quantum of the contributions. The proponent's Preferred Project Report notes that this payment should be regarded as non-precedental. This is considered to be a reasonable outcome.

Contamination

Council requested the removal of an underground storage tank adjacent to the site, if it was no longer required. However, the proponent has advised that the tank remains in use.

A detailed discussion on contamination is included in **Appendix D**. In summary, the Preliminary Environmental Site Assessment report concluded that the site contains levels of contaminants below adopted criteria and that no stains, spills, odours or leaks were observed on the site. Higher levels of contaminants, albeit below adopted criteria levels, were observed in fill materials on the site.

The proponent's report recommends the following:

- A contamination management plan may be required for construction works;
- Further assessment (sampling and analysis) be carried out on fill materials prior to construction; and
- Construction works should be guided by a plan which enables identification, management and disposal of contaminated soils, if encountered.

The Department is generally satisfied with the proponent's approach to this issue and has recommended the construction management plan provides for management of any contaminated soil.

7 CONCLUSION

The Department has reviewed the Environmental Assessment (March 2008) and Preferred Project Report and Statement of Commitments (August 2008) prepared by Hassell Pty Ltd for the NSW Health Administration Corporation which seek project approval for the development of an Integrated Cancer Care Centre at Lismore Base Hospital.

Following public exhibition only one submission was received, this being from the Lismore City Council; the lack of submissions relating to the proposal is indicative of the general acceptability of the proposal and its environmental impact. A copy of the Council's submission was referred to the proponent. The Department has considered the proponent's response to the submission and the Preferred Project Report, which made a number of minor amendments to the initial proposal and amended the original Statement of Commitments. Notably the Preferred Project Report recognises and addresses the substance of the Council's concerns.

The Department has considered the project application in accordance with Section 75I(2) of the Act.

In this regard, the Department is satisfied that the potential environmental impacts of the proposal are acceptable and can be appropriately managed by conditions of consent and implementation of the measures detailed in the proponent's Environmental Assessment report and Preferred Project Report (including revised Statement of Commitments).

All relevant environmental issues associated with the proposal have been assessed. The development is considered to offer a substantial public benefit to Lismore and the Northern Region of NSW. The development is considered to result in a general improvement to the amenity of its locality, being of lesser scale than the building it replaces while being more environmentally efficient and aesthetically sound. The development is not expected to give rise to any detrimental impact on its locality.

The Department is of the view that the proponent has satisfactorily mitigated potential environmental impacts associated with the proposal. The recommended conditions (at **Appendix A**) seek to make clear and explicit obligations to encourage minimisation of any adverse construction or operational impacts of the proposal.

Peter Staveley, Consultant

Simon Bennett
Team Leader, Social Infrastructure

Michael File
Director, Strategic Assessments

Jason Perica
Executive Director, Strategic Sites and Urban Renewal

APPENDIX A. CONDITIONS OF APPROVAL

APPENDIX B. PREFERRED PROJECT REPORT

APPENDIX C. COPIES OF SUBMISSIONS FROM PUBLIC AUTHORITIES & SUMMARY OF PUBLIC SUBMISSIONS

Only one submission was received in respect of the EA for the proposed Integrated Cancer Care Centre; this was from Lismore City Council. The issues raised in the Council's submission are summarised below:

- The staged redevelopment of LBH is fully supported
- The redevelopment should address parking and traffic congestion issues
- An existing underground storage tank adjacent to the site should be removed if no longer required
- There appear anomalies in the current provision of on-site car parking
- Proponent should demonstrate how the required 41 car parking spaces are to be provided
- The development will increase traffic generation by 250 movements per day and should be liable for Council's roads contribution fund (under s94)
- Council's landscaping guidelines should be used, as proposed street tree species are unsuitable
- Council seeks water and sewerage headworks costs contribution (under s64 Local Govt Act)
- Council wishes to be advised of the entity responsible for construction and post-construction management of the site
- Council seeks a range of conditions to be attached to the development consent –
 - A Construction Traffic Management Plan for Council approval
 - Lodgement of bond against damage to Council infrastructure during construction
 - Council approval required for any closure to any footpath or kerbside car parking during construction
 - All loading and unloading to be on-site
 - 41 car parking spaces to be provided
 - Stormwater controls to be approved by Council
 - An Environmental Management Plan to be approved by Council
 - Restriction of construction hours
 - A Construction Acoustic Report to be approved by Council
 - Outdoor lighting to meet Australian Standard
 - Water supply connections to meet Australian Standard
 - Waste Management Plan to be approved by Council
 - Site to be equipped with hazardous clean-up equipment

- Waste material only to be disposed of at properly licensed waste management facilities
- Trade Waste discharge application to be made to Council

APPENDIX D. ENVIRONMENTAL PLANNING INSTRUMENTS CONSIDERATION

ENVIRONMENTAL PLANNING AND ASSESSMENT ACT 1979

Part 3A of the Environmental Planning and Assessment Act 1979 (the Act)

The Director General as delegate of the Minister has formed the opinion that the development to which this application relates is a project for the purposes of Part 3A of the Act. Accordingly, the project application to which this Environmental Assessment report relates has been lodged pursuant to Section 75E of the Act, for approval to carry out a project as defined in Part 3A of the Act.

STATE ENVIRONMENTAL PLANNING POLICIES

State Environmental Planning Policy (Major Projects) 2005 (Major Projects SEPP)

The Major Projects SEPP outlines the types of development declared a project for the purposes of Part 3A of the Act.

For the purposes of the Major Projects SEPP certain forms of development may be considered a Major Project if the Minister (or his delegate) forms the opinion that the development meets criteria within it.

On 24 September 2007, the Director General formed the opinion that the project is a development which meets the criteria of Clause 18, Group 7 of Schedule 1 of the SEPP, which refers to Hospitals.

The opinion was formed on the basis that the development for the purposes of a hospital with a Capital Investment Value (CIV) of approximately \$20 million (as advised at the time), exceeds the \$15 million threshold identified in the SEPP. Accordingly, the Minister is the approval authority.

State Environmental Planning Policy (Infrastructure) 2007

The overall objectives of this SEPP are aimed at improving the delivery of infrastructure through providing greater certainty in process and consideration of infrastructure proposals or proposals affecting infrastructure.

The Infrastructure SEPP aims to ensure that the RTA is made aware of and is given an opportunity to make representations in respect of traffic generating development. The SEPP sets out the types of development which must be referred to it. This affects the current proposal insofar as the SEPP (Schedule 3) requires referral of any proposal regarding a hospital with over 200 beds; Lismore Base Hospital has 210 beds.

The development proposal was referred to the RTA which advised that a traffic study should be prepared and that impacts of the proposal would be confined primarily to the local road network. A traffic study has been prepared as part of the Environmental Assessment.

State Environmental Planning Policy No. 55 (Remediation of Land) (SEPP 55)

SEPP 55 aims to promote the remediation of contaminated land for the purpose of reducing the risk of harm to human health or any other aspect of the environment by specifying that certain considerations be made by the consent authority when determining development applications in general, and where relevant, land has been appropriately remediated.

Coffey Geotechnics Pty Limited prepared a preliminary investigation of the land on behalf of the proponent in accordance with relevant EPA guidelines and NSW statutory requirements (i.e. SEPP 55). The Preliminary Environmental Site Assessment comprised a review of the site's history (including review of previous geotechnical investigations), site inspection, soil sampling, geotechnical and environmental analysis.

The report concludes that:

- The current site contains levels of contaminants below adopted criteria and that no stains, spills, odours or leaks were observed on the site. Higher levels of contaminants, albeit below adopted criteria levels, were observed in fill materials on the site.

The following is recommended in the Preliminary Contaminated Site Assessment:

- A contamination management plan may be required for construction works;
- Further assessment (sampling and analysis) be carried out on fill materials prior to construction; and
- Construction works should be guided by a plan which enables identification, management and disposal of contaminated soils, if encountered.

The report also drew attention to an underground fuel storage tank adjacent to the site and recommended a contamination assessment and integrity assessment be carried out on this. The Department understands the tank is not to be removed at present and is not part of the proposed works.

The Department is generally satisfied with the proponent's approach to this issue and has recommended the construction management plan provides for management of any contaminated soil.

OTHER ENVIRONMENTAL PLANNING INSTRUMENTS (EPI'S)

Section 75R(3) of the Act provides that EPI's (other than State Environmental Planning Policies) do not apply to or in respect of an approved project. Notwithstanding this, the Department notes that the proposed development is permissible under the provisions of the Lismore Local Environmental Plan 2000 (as Zone 5 Special Uses)

ENVIRONMENTAL PROTECTION AND BIODIVERSITY CONSERVATION ACT 1999 (EPBC Act)

The EPBC Act is Commonwealth legislation requiring referencing and approval procedures for actions having potential impact on matters of national environmental significance. Identified matters of national environmental significance are: World Heritage properties; National Heritage places; Ramsar wetlands of international significance; nationally listed threatened species and ecological communities; listed migratory species; Commonwealth marine areas; and nuclear actions.

The proposed development does not impinge upon matters of national environmental significance.

APPENDIX E. DIRECTOR GENERAL'S ENVIRONMENTAL ASSESSMENT REQUIREMENTS

Director-General's Requirements

Section 75F of the *Environmental Planning and Assessment Act 1979*

Application number	MP 07_0136
Project	Construction of a new 2 storey purpose built Cancer Care Centre providing cancer care services including radiotherapy and chemotherapy.
Location	Lismore Base Hospital, Hunter Street & Uralba Street, Lismore
Proponent	NSW Health
Date issued	
Expiry date	2 years from date of issue
General requirements	<p>The Environmental Assessment (EA) must include:</p> <ol style="list-style-type: none"> 1. An executive summary; 2. An outline of the scope of the project including: <ul style="list-style-type: none"> • any development options; • justification for the project taking into consideration any environmental impacts of the project, the suitability of the site and whether the project is in the public interest; and • outline of the staged implementation of the project if applicable; 3. A thorough site analysis including constraints mapping and description of the existing environment; 4. Consideration of any relevant statutory and non-statutory provisions and identification of any non-compliances with such provisions, in particular relevant provisions arising from environmental planning instruments, Regional Strategies (including draft Regional Strategies) and Development Control Plans; 5. An assessment of the key issues specified below (PART A – Key Issues) and a table outlining how these key issues have been addressed. 6. Consideration of impacts, if any, on matters of national environmental significance under the Commonwealth <i>Environment Protection and Biodiversity Conservation Act 1999</i>; 7. An assessment of the potential impacts of the project and a draft Statement of Commitments, outlining environmental management, mitigation and monitoring measures to be implemented to minimise any potential impacts of the project; 8. A signed statement from the author of the Environmental Assessment certifying that the information contained in the report is neither false nor misleading; and 9. A Quantity Surveyor's Certificate of Cost to verify the capital investment value of the project.
Key issues	<p>PART A - Key Issues</p> <p>The EA must address the following key issues:</p>

	<p>Traffic Impacts (Construction and Operational) Prepare a traffic impact study in accordance with the RTA's Guide to Traffic Generating Developments which addresses the following matters:</p> <ul style="list-style-type: none"> • any changes to traffic generation resulting from the project/construction and any required road / intersection upgrades; • existing traffic conditions, road network and road capacity; • access to and within the site including emergency access; • proposed loading dock(s) and car parking arrangements; and • service vehicle movement, clearance, separation and delivery times. <p>Environmental Amenity The project must achieve a high level of environmental amenity. In particular the EA is to address the following issues:</p> <ul style="list-style-type: none"> • <i>Solar access</i>: Shadow diagrams are to be submitted demonstrating impacts of the proposal on both public and private open space areas and internal living areas within the development and on adjoining properties. • <i>View Loss</i>: Ensure the design maintains an equitable share of existing private and public scenic views. <p>Design Quality</p> <ul style="list-style-type: none"> • Address the height, bulk and scale of the proposed development within the context of the locality. • Address the design quality with specific consideration of the façade, massing, setbacks, and proportions to openings, building articulation, and amenity (including amenity impacts for adjoining and surrounding development). <p>Drainage/Flooding The EA shall address;</p> <ul style="list-style-type: none"> • Drainage issues associated with the development/site, including: on-site detention of stormwater, drainage infrastructure and incorporation of Water Sensitive Urban Design measures. • Potential flooding issues associated with the proposal in accordance with Lismore City Council's DCP 7 (Flood Prone Lands) and other relevant guidelines. <p>Infrastructure requirements/Utilities</p> <ul style="list-style-type: none"> • Address infrastructure requirements and staging and monitoring of infrastructure works. • In consultation with relevant agencies, address the existing capacity and requirements of the development for water, electricity, waste disposal, telecommunications and gas. <p>Heritage The Environmental Assessment must provide the following:</p> <ul style="list-style-type: none"> • an appropriate level of heritage assessment in relation to the demolition works, including the preparation of a report prepared in accordance with the NSW Heritage Office's <i>Statement of Heritage Impacts 2002</i>; • an appropriate level of archaeological and aboriginal assessment in consultation with the NSW Heritage Office, to determine the likely impact upon archaeological and aboriginal material on the site <p>Landscaping Provide a Landscape Plan illustrating:</p>
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	<ul style="list-style-type: none"> • Treatment of the communal/public open space areas on the site; • Screen planting along the common boundaries with adjoining properties; and • Tree protection measures both on and off the site. <p>Acoustics & Noise The EA shall address noise impacts associated the facility including construction and ongoing operational noise (assessed against NSW DEC (EPA) guidelines).</p> <p>Ecologically Sustainable Development (ESD) The EA shall detail how the development will incorporate ESD principles in the design, construction and ongoing operation phases.</p> <p>Waste Management The EA should address waste management issues including trade waste in accordance with Lismore City Council's DCP No. 47 (Waste Minimisation) and other relevant guidelines.</p> <p>Contamination The EA is to demonstrate compliance that the site is suitable for the preposed use in accordance with SEPP 55.</p> <p>Consultation Undertake an appropriate and justified level of consultation with the following agencies during the preparation of the EA:</p> <p><u>Agencies or other authorities:</u></p> <ul style="list-style-type: none"> • Lismore City Council; • Roads and Traffic Authority, NSW; • Heritage Office of NSW; and • Any other State Agencies where relevant; <p><u>Public:</u></p> <ul style="list-style-type: none"> • Document all community consultation undertaken to date or discuss the proposed strategy for community consultation. <p>The consultation process and the issues raised should be described in the EA.</p>
Deemed refusal period	60 days

APPENDIX F. ENVIRONMENTAL ASSESSMENT REPORT
