ADDENDUM TO PREFERRED PROJECT REPORT

1. Introduction

Following the submission of the Preferred Project Report for Liverpool Hospital Redevelopment Stages 2.1C & D, Milestones 3 & 4 (New Cancer Bunkers and new Clinical Skills Training Centre) the Department of Planning (DoP), in a letter dated 3 February 2011, sought further information relating to:-

- Final Statement of Commitments;
- Further details of the traffic impact on the surrounding road network generated specifically by this Project Application, as well as details of carparking generated specifically by this Project Application; and
- Further details were also sought on how the carparking related to the Project Application will be provided for within the hospital campus.

This supplementary report addresses the specific issues identified in the DoP letter (refer **Attachment 1**) as follows:-

2. Final Statement of Commitments

The final Statement of Commitments has been prepared incorporating issues raised by the DoP following the initial assessment of the Preferred Project Report (refer **Attachment 2)**.

3. Hospital Campus Car Parking

The approved Concept Plan provides for a total of 2,400 car spaces. Detailed information relating to the pattern and distribution of the 2,400 car spaces formed part of the approved documentation submitted with Project Application 2 (Infrastructure and Ancillary Works). The data indicated the retention of 1,506 existing car spaces with a further 894 additional car spaces to be provided. 27 short stay car spaces were also identified but excluded from the total carpark count.

To-date the submitted project applications (1, 2 and 3) provide for a total of 2,353 car spaces. **Table 1** provides a detailed overview of the cumulative parking provision associated with submitted Project Applications.

TABLE 1

LIVERPOOL HOSPITAL
Cumulative Parking Supply

PARKING SPACES	EXISTING	PHASE 1				PHASE 2	TOTAL
		Project Application 1** Milestone 1 & 2, CSB / Existing CSB & Balance of Hospital	**Project Application 2 ^** Infrastructure and Ancillary Works incl Child Care Centre	**Project Application 3** IHRI Research Building	**Project Application 4 ^^** Milestones 3 & 4 incl Cancer Bunkers Expansion, IHRI Bunker and Skills Centre	**Future Project Application** Women & Childrens, Aged Care, Allied Health, Mental Health	
Existing Pre Development Supply	**1506**						**1506**
New Parking Spaces		146 New CSB Basement	785 New staff multi-deck 40 On grade west campus 339 On grade east campus	0	0	53 New W&C basement	
Total		**146**	**1164**	**0**	**0**	**53**	**1363**
Spaces deleted/displaced by		-22 At grade west campus	-40 On grade west campus -401 On grade east campus	0	-6 At grade west campus	0	
Total		**-22**	**-441**	**0**	**-6**	**0**	**-469**
Net Total Parking Spaces	**1506**	**124**	**723**	**0**	**-6**	**53**	**2400** *

Cumulative Total Parking Spaces	**1506**	**1630**	**2353**	**2353**	**2347**	**2400 ***

NOTES

* Concept Plan and Project Applications refer to final parking provision of 2400 spaces.

** Project Application 1 refers to 150 basement parking spaces in the new CSB. Actual spaces are 146.

^ Project Application 2:

- refers to the new multi-deck car park which was initially targeted to provide 800 spaces. The subsequent detailed documentation of the multi-deck car park provides for 785 spaces.
- refers to 2,363 spaces (including Project application 1 spaces) to be provided for as part of this project application. Actual spaces 2,353.
- includes reconstruction of 339 new on grade spaces in the east campus on the site of existing dilapidated on grade car parking.
- refers to 27 short stay spaces. These are drop off spaces and are not counted in the total 2400 spaces to be provided.

^^ Project application 4 refers to loss of 6 on grade spaces on west campus.

The following points should be considered with respect to the parking allocation numbers provided in Table 1 and those which have been identified in the submitted and approved project applications:

- Following the approval of the Clinical Services Building and Refurbishment (Project Application 1) and Infrastructure and Ancillary Hospital Works (Project Application 2), there have been some minor variations to the approved parking provisions as a consequence of further detailed design. The final parking provision in terms of car spaces is set out in the table.
- The parking provision numbers in the Project Applications are net figures taking into account the loss and displacement of car spaces as a consequence of each phase of the redevelopment. Accordingly, the loss/displacement numbers are reflected in Table 1.
- Project Application 2 provided for the balance of parking required for Project Application 1 and addresses the provision of parking for the Ingham Health Research Institute (IHRI) Research Building (Project Application 3) and Milestones 3 & 4, Cancer Bunkers and Clinical Skills Training Centre (Project Application 4). Effectively, the completion of Project Application 2 carparking addresses the total carparking requirements for Phase 1 works (ie. Project Applications 1, 2, 3 and 4).
- The approved Concept Plan identified a future basement carpark as part of Phase 2, which includes the upgrading of Women's Health facilities together with substantial refurbishment in the north-west sector of the western campus of Liverpool Hospital. A project application has yet to be lodged for this component of the hospital. This project component will provide for the balance of car spaces (53) to meet the approved Concept Plan requirement for 2,400 car spaces.

4. Traffic / Parking Requirements related to Milestones 3 & 4 Project Application

The Project Application 4 for Liverpool Hospital Redevelopment Stages 2.1C & D (Milestones 3 & 4) involved limited upgrading of cancer services in the form of three new bunkers, together with the Clinical Skills Training Centre.

In terms of specific parking needs generated by the Milestones 3 & 4 Project Application, it is noted that the Clinical Skills Training Centre is designed to serve the training needs of hospital staff who have already been identified and included in the detailed parking provision set out above (refer Project Application 2.

The specific parking requirements associated with the three new cancer bunkers equates to 17 carpark spaces (9 public and 8 staff).

As can no doubt be appreciated, the traffic impact on the surrounding road network generated specifically from 8 additional staff and 9 carpark spaces for the public is minimal.

Since the Clinical Skills Training Centre specifically provides for the training of existing staff, there will be no further impacts on the existing road networks as a consequence of Project Application Milestones 3 & 4, given that staff traffic and parking requirements have already been factored into the approved Concept Plan.

In terms of providing carparking requirements for the specific needs of Milestones 3 & 4, the 17 spaces (9 public and 8 staff) will be met on-site. The construction of the three cancer bunkers is scheduled for completion by December 2011 and the parking requirements will be met within the approved 2,353 car spaces less the 6 existing spaces displaced by Project Application 4 (Milestones 3 & 4).

This timing broadly coincides with the anticipated construction of the multi-storey carpark, which has been designed to provide for a substantial portion of the additional car parking facilities on-site.

Transport and Traffic Planning Associates (TTPA) have been closely involved in the preparation of the initial Concept Plan Application as well as the subsequent Project Applications. In response to issues raised by RTA, TTPA do not consider that the Liverpool Hospital Stage 2 Redevelopment Traffic August 2006 report is out of date, nor do they see any need for a revised traffic report.

Their advice (refer Attachment 3) notes that the Concept Plan for the total development of the hospital was approved in 2007 on the basis of the 2006 report, and the data is still relevant. It is also noted that the cumulative traffic impact of the approved Concept Plan had been identified in the TTPA report (August 2006), which also took into account the traffic impacts for each of the elements that have been subject to a project application.

TTPA have advised that no traffic or parking components of the project applications are inconsistent with the Concept Plan data. TTPA also note that the only change to the traffic status quo set out in the Concept Plan relates to the northern access.

In light of the proposed changes to the northern access, TTPA undertook separate additional assessments in May 2010 taking into account traffic flows, modified traffic distribution, modified intersection design and the traffic generation associated with the TIDC commuter carpark.

The modified intersection with the Hume Highway was subsequently approved with the support of the RTA (refer to 5. Section 75W Amendment).

5. Section 75W Amendment

As noted in the Preferred Project report dated January 2011, a Section 75W amendment providing for a variation to the northern link road and access to the Hume Highway via Hart Street was approved by the Minister (12 January 2011). During the consultation process RTA was fully consulted and indicated their support.

3 March 2011

ATTACHMENT 1

DEPARTMENT OF PLANNING LETTER (3 FEBRUARY 2011)

NSW GOVERNMENT | Planning

Contact: Ben Eveleigh
Phone: (02) 9228 6391
Fax: (02) 9228 6455
Email: ben.eveleigh@planning.nsw.gov.au

3 February 2011

Our ref.: MP10_0056

Robert Rust
NSW Health Infrastructure
c/o Capital Insight
Level 6, 2-4 Speed Street
LIVERPOOL NSW 2170

Dear Mr Rust

Subject: Adequacy of the Preferred Project Report for Liverpool Hospital Redevelopment Stages 2.1C & D (Milestones 3/4) (MP10_0056)

The Department has reviewed the supplementary information provided in the Preferred Project Report for the above project and considers that the following issues raised by agencies remain outstanding:

- The Preferred Project Report did not provide a Final Statement of Commitments. Please revise Preferred Project Report to include a Final Statement of Commitments;
- The Traffic Report provided in the EA is from the approved Liverpool Hospital Redevelopment Concept Plan (MP06_0116), which outlines the traffic impacts and parking requirements across the entire Liverpool Hospital Campus. The information contained in the Traffic Report and the Preferred Project Report does not sufficiently address the RTA's comments regarding the traffic impact and car parking demand. Please provide further details of the traffic impact on the surrounding road network generated specifically from this project application. Additionally, provide details of the car parking demand generated specifically by this Project Application; and
- Further, it is noted that car parking upgrades, including a multideck car park, were approved under the Concept Plan (MP06_0116) and subsequent Infrastructure & Ancillary Hospital Works Project Application (MP08_0062). However, as these works have not finished construction, provision and allocation of car parking across the campus is yet to be finalised. Please provide details of how the car parking demand generated specifically by this project application will be provided for within the hospital campus.

You are requested to submit a revised Preferred Project Report for the project that addresses the issues identified. This information will be required prior to the Department finalising its assessment of the application.

Your contact officer for this proposal, Ben Eveleigh, can be contacted on (02) 9228 6391 or via email at ben.eveleigh@planning.nsw.gov.au. Please mark all correspondence regarding the proposal to the attention of the contact officer.

Yours sincerely,

Daniel Cavallo
A/Director
Government Land and Social Projects

ATTACHMENT 2

FINAL STATEMENT OF COMMITMENTS

STATEMENT OF COMMITMENTS

1.1 GENERAL COMMITMENTS

- NSW Health 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 Premier's Memorandum No. 2003-2 *High Environmental Performance for Buildings* and the requirements of the *Environmental Performance Guide for Buildings (EPGB)*.
- The Proponent will obtain all necessary approvals required by State and Commonwealth legislation in undertaking this project.
- The Proponent will continue to liaise with the local community during the development process.
- The buildings will be set out by a registered surveyor to verify the correct position of each structure in relation to property boundaries and the approved alignment levels. The registered surveyor will provide evidence to Council that Structural works are in accordance with the approved Project Application.
- A separate application will be made to Council for approval under Section 68 of the *Local Government Act, 1993*, for the erection of hoardings or scaffolding in a public place.

1.2 EARLY WORKS AND DEMOLITION

- Early works, excavation and structural works proposed as part of the project will be undertaken in accordance with relevant guidelines and legislation.
- The Traffic and Pedestrian Management procedures will address the following matters:
  - Ingress and egress of vehicles to the site.
  - Loading and unloading, including construction zones.
  - Predicted traffic volumes, types and routes.
  - Pedestrian and traffic management methods.

  A copy of the plan will be provided to Liverpool City Council.
- 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*.

- Construction hours – The hours of construction, including the delivery of materials to and from the site, will be restricted as follows:
  - Between 6:00am and 6:00pm, Mondays to Fridays inclusive.
  - Between 6:00am and 3:00pm, Saturdays.

  - No work on Sundays and public holidays.

  Works may be undertaken outside these hours where:

  - The delivery of materials is required outside these hours by the Police or other authorities.
  - It is required in an emergency to avoid the loss of life, damage to property and/ or to prevent environmental harm.
  - The work is approved through the Construction Noise and Vibration Management Plan.
  - Residents likely to be affected by the works are notified of the timing and duration of these works at least 48 hours prior to the commencement of the works.

- Public ways will at all time to be kept clear of any materials, vehicles, refuse, skips or the like.
- A sign will be erected in a prominent position on the site prior to the commencement of works in accordance with NSW Health policy.
- In the event of any damage being caused to any existing kerb, guttering, stormwater pit, footpath trees and/ or footpath during building operation, the applicant will repair or reimburse Council for the full costs of repairing and making good.
- Public reserves, public roadway or private property (other than subject site) will not be used for storage or disposal of building materials or waste or excavated materials.
- Demolition will be undertaken in accordance with the requirements of *Australian Standard AS2601 – 2001*:
  - The Demolition of Structures which is incorporated into the Occupational Health and Safety Act 2000 administered by WorkCover NSW.
- A licensed asbestos contractor will be engaged to monitor demolition of buildings containing asbestos or other contaminants.
- Following removal of all asbestos from the site final clearance certificates will be obtained.

1.3 URBAN FORM AND DESIGN

- Ensuring the compatibility of the proposals with the existing bulk and scale of the surrounding development and the controls set out in the *Liverpool City Council DCP 2008*.
- Minimising impacts on the existing landmark buildings, topography, streetscape and view corridors in the locality.
- Establish urban form and design proposals that minimise the overshadowing of existing private land.
- Provide measures to maximise active street frontages and improve street address.

1.4 TRANSPORT, TRAFFIC AND ACCESS

- The transport, traffic and access proposals will support the strategic transport policy objectives contained in the *Metropolitan Strategy, SEPP 11, LLEP 2008* and *DCP 2008*.
- Promote alternate forms of transport including increased use of rail, bus, transitway services as well as car pooling and promoting cycling.
- Access and Safety Protocols will be included in a CEMP to maintain access and use of the site during the redevelopment of the Hospital site to ensure the safety of staff, visitors and patients.
- The design of facilities will permit effective, appropriate and safe use by all people, including those with disabilities and will be in accordance with:
  - NSW Health Facility Guidelines, including Part B – Design for Access, Mobility, OH&S and Security
  - DDS32 Improved Access for Health Care Facilities
  - AS 1428
  - The Building Code of Australia
- Construction traffic requirements will be included in the CEMP.

1.5 HERITAGE

- In the event that any historical or Aboriginal relics are uncovered during excavations, all excavation and disturbance to the area will stop immediately and the Department of the Environment will be informed in accordance with Section 91 of the *National Parks and Wildlife Act 1974*.

1.6 SERVICES

- 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.
- The diversion of the existing services will be carried out in consultation with the Council and/or the relevant agency and in accordance with the necessary requirements.
- The proponent will ventilate all buildings in accordance with relevant codes.
- All cooling towers and cooling and warm water systems will be operated and maintained in accordance with *AS 3666:1995 (or AS 3666:2000)*, the *Public Health Act 1991* and *Public Health (Microbial Control) Regulation 2000*.

1.7 ACOUSTICS AND VIBRATION

- Prior to the commencement of any works on the main works on the site, Noise and Vibration Management Procedures will be prepared as part of the CEMP which will address the following matters:
  - All work, including demolition, excavation and building work will comply with Australian Standard AS 2436: 1981 Guide to Noise Control on construction, Maintenance and Demolition Sites.
  - A suitably qualified acoustic consultant will be utilised to ensure that building isolation and internal noise requirements are met.
  - Identification of the specific activities that will be carried out and associated noise sources.
  - Identification of all potentially affected sensitive receivers including residences, schools and properties containing noise sensitive equipment (including the Hospital itself).
  - Noise and vibration monitoring, reporting and response procedures
  - Assessment of potential noise and vibration from the proposed construction activities including noise from construction vehicles and any traffic diversions.
  - Description of specific mitigation treatments, management methods and procedures that will be implemented to control noise and vibration during construction .
  - Review the visual impact of any noise mitigation measures proposed as part of the development to assess the adequacy and potential additional architectural treatments required in the Hospital locality.
  - Justification of any proposed activities outside the construction hours specified in the conditions of this consent.
  - Construction timetabling to minimise noise impacts including time and duration restrictions, respite periods and frequency.
  - Procedures for notifying residents of construction activities that are likely to affect their amenity through noise and vibration contingency plans to be implemented in the event of non-compliances and/or noise complaints.
- Noise and Vibration management will be in accordance with the CEMP.
- Careful consideration of glazing, wall construction and openings will be undertaken during the detailed design phase so that an acceptable acoustic environment is achieved.
- Detailed design for noise and vibration mitigation will consider:
  - Architectural acoustics and building envelope design.
  - Design of specialised acoustic spaces such as auditoria and conference rooms
  - Internal space planning.
  - Sound isolation from external sources.
  - Mechanical services/plant noise and vibration prediction and design of mitigation measures.
  - Control of reverberant noise build-up and specification of materials.
  - Speech privacy and intelligibility.

- Sound system and audio-visual design.

1.8 VEGETATION

- The proponent will seek to retain as many trees as possible on the perimeter of the site.
- All trees on the site that are to be retained will be suitably protected by way of tree guards, barriers or other measures as necessary prior to the commencement of works on the site. These are to be provided to protect root system, trunk and branches during construction and demolition. Stockpiling or storage or mixing of materials, washing of equipment, vehicle parking, disposal of liquids, machinery repairs and refuelling, disposal of materials such as cement slurry, siting of offices or sheds will not occur within the protective fencing.
- There will be no soil level changes under the canopy of trees to be retained.
- Any branch or root pruning required will be carried out by a qualified arborist.

1.9 DRAINAGE AND STORMWATER MANAGEMENT

- 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*.
- Existing in-ground stormwater drainage will be diverted in consultation with Liverpool Council.
- Measures to control soil erosion during demolition will be introduced in accordance with current accepted principles, as described in *Managing Urban Stormwater* (EPA NSW) and *Soil Erosion and Sediment Control* (The Institute of Engineers, Australia).
- Habitable Floor Levels to be no lower than the PMF (i.e. 10.9 AHD)
- Suitable water quality devices to treat the early flows at stormwater outlet points with larger flows allowed to bypass will be installed.
- Drainage outlets are to incorporate erosion and sediment control where required and ongoing maintenance of all adopted WSUD systems will be required on a regular ongoing basis.
- Any onsite stormwater system will connect into council's existing trunk stormwater lines and/or be discharged directly to the Georges River.
- Stormwater runoff for minor events will be handled by pit and pipe systems with larger flows also utilising overland flow paths such as roadways and footpaths.

1.10 OPERATIONAL POLICY

- Prior to the opening of the new Hospital facilities existing operating policies and procedures will be reviewed and updated as necessary for the impact of the new development prior to occupation of the proposed Hospital buildings. These will include:

- Measures to ensure protection of flora and fauna and minimisation of anti-social behaviour
- Visitor safety.
- Site security.
- Noise management.
- Traffic and pedestrian management.
- Storage of materials.
- Emergency and evacuation procedures.
- Fire safety.
- Waste management and ESD initiatives.
- Lighting.
- Signage.

- At the completion of works, a Final Fire Safety Certificate is to be issued by the owner detailing each essential fire safety measure provided in the building. A copy of such certificate is to be forwarded to the Fire Commissioner and a further copy is to be prominently displayed in the building.
- Each year, the owner of the building will furnish to Council an annual fire safety statement for the building. The annual fire safety statement is to address each essential fire safety measure in the building.
- All loading and unloading activities in connection with the use will be carried out wholly within the property.
- All parking spaces, loading and unloading areas, vehicle manoeuvring and driveway areas will be left free of goods and be available at all times.
- The design and construction of the premises will comply with Australian Standard AS 1940–2004 'The storage and handling of flammable and combustible liquids' and the WorkCover 'Code of Practice for the storage and handling of Dangerous Goods'.

1.11 WASTE MANAGEMENT

- Prior to the opening of the new Hospital facilities existing waste management policies and procedures will be reviewed and updated as necessary for the impact of the new development prior to occupation of the proposed Hospital buildings. This will include consideration of waste management practices that comply with all relevant legislation relating to waste and resource recovery, environmental protection, and occupational health and safety, including:
  - NSW Government Waste Reduction and Purchasing Policy.
  - NSW DOH Infection Control Policy (02/45).
  - NSW DOH Waste Management Guidelines for Health Care Facilities, August, 1998.
  - ISO 14001:1996.
  - ISO 9001:2000.
  - Relevant Council and EPA requirements.

1.12 GEOTECHNICAL AND CONTAMINATION

- NSW Health will undertake demolition in accordance with the requirements *of Australian Standard AS2601- 2001: The Demolition of Structures* which is incorporated into the *Occupational Health and Safety Act 2000* administered by WorkCover NSW.

- Management of hazardous building materials will be contained in a CMP prepared prior to demolition commencing.
- Monitor demolition works at the site and provide final clearance certificates and further investigation is undertaken in areas where soil is to be exposed or disturbed.
- Normal good engineering site management practice including control of run-off and dust suppression is recommended during earthworks and construction
- Existing Fill
  - Confirm actual fill conditions in locations where new buildings/structures are proposed and seek further geotechnical advice.
  - Undertake sub-grade preparation for external pavements.
- Clayey subsoil
  - Provide good and effective site drainage both during construction and for long-term site maintenance. The earthworks will be carefully planned and scheduled to maintain good crossfalls during construction.
- Excavation
  - Establish test pits to confirm the footing details and foundation materials of all adjoining buildings/ structures.
  - Excavation of the shale bedrock be carried out using the bucket and ripping type of a large excavator. Use hydraulic rock hammers due to noise nuisance and the potential for ground borne vibration damage to nearby buildings/structures should be avoided.
- Demolition
  - Depending on the details and extent of demolition, vibration monitors will be installed as necessary on nearby buildings to assess vibration levels.
- Sub-grade preparation
  - Stockpiling excavated top soil for re-use in landscaping
  - Use of engineered fill as appropriate
  - Avoiding vibratory compaction.
  - Inspections of compacted areas by qualified engineers.
- Engineered fill
  - Use of appropriate fill type
  - Compaction in layers approximately 200m thick
  - Carry out density tests

- Inspection by qualified engineers.

- New footings
  - Footings for large buildings and bridges are to be uniformly supported on piles founded in shale bedrock using the 'limit state design' as detailed in the paper by Pells, Mostyn and Walker (1998).

- Slab on-grade.
  - Slabs on-grade are to be constructed independent of building footings and walls.

- Soil aggression
  - Reference to be made to Cement and Concrete Association of Australia's Technical Note TN57 and Section 6 of AS2159-1995 for appropriate precautions for footing design in moderate to high acidic subsoil conditions.

ATTACHMENT 3

TRANSPORT AND TRAFFIC PLANNING ASSOCIATES LETTER (2 MARCH 2011)

TRANSPORT AND TRAFFIC PLANNING ASSOCIATES

A division of Monvale Pty Ltd ACN 060 653 125
ABN 44 060 653 125

2 March 2011
Ref 10229

Health Infrastructure
c/- Capital Insight Pty Ltd
Level 6 2-4 Speed Street
LIVERPOOL 2170

Dear Sir

Liverpool Hospital Redevelopment
Stages 2.1C & D (Milestones 3/4/
Including IHRI Bunker and Skills Centre) MP10_0056.

I refer to the letter from Sydney Regional Development Advisory Committee Letter dated 23 December 2010 in regard to the Project Application for New Clinical Skills Training Centre and Alterations and Additions to Existing Cancer Therapy Centre Liverpool. I advise the following:

Transport and Traffic Planning Associates (TTPA) does not consider that the Liverpool Hospital Stage 2 Redevelopment 2006 Traffic Report is out of date and does not see a requirement for a revised traffic report as:

* the Concept Plan for development was approved in 2007 on the basis of the 2006 Report and this represents the 'status quo' time wise for the approval

* the cumulative traffic impact of the Liverpool Hospital Stage 2 Redevelopment Concept Plan has been accounted for in the TTPA report of August 2006 which was prepared for the Concept Plan Application. The traffic impact for each of the Project Application elements which are included in the Concept Plan were accounted for in the TTPA report

* TTPA have undertaken a detail review of each of the Project Applications to date in relation to what was proposed in the Concept Plan and have no reason to believe that any traffic or parking related aspect of the applications is inconsistent with that of the Concept Plan. As such the traffic impact of each of these and that part of the redevelopment encompassed by Stages 2.1C & D is accounted for in the 2006 traffic study

Suite 502 Level 5 282 Victoria Avenue PO Box 1160 Chatswood NSW 2067 ph (02) 9411 5660 Fax (02) 9904 6622
Email ttpa@ttpa.com.au

* the only element of the Concept Plan approval which represents a change to the traffic 'status quo' is that of the proposed northern access. In this respect TTPA undertook a separate substantial additional assessment in May 2010 taking into account updated peak traffic flows, revised traffic distribution, changed access intersection (location/arrangement) the traffic generation of the TIDC commuter carpark. That detailed assessment was submitted to and subsequent acceptance by the RTA.

Irrespective of the 'status quo' issue the other developments referred to in the RTA letter are quite minor. In fact TTPA undertook the traffic assessment for the proposed South West Private Hospital expansion and the additional traffic generation in peak periods is less than 40 vtph thus resulting in no or negligible loss in affected intersections quality of service.

Total parking requirement for the campus for the Stage 2 redevelopment based on the TTPA traffic report is for an increase in parking on site from 1506 spaces pre redevelopment to 2,400, an increase of some 894 spaces. We understand that the Department of Planning has requested a break down of parking requirement by Project Application. Based on hospital activity and staffing projections the parking demands by Project Applications is in accordance with the following tables:

Parking Requirement/Demand By Project Application

	PA 1 New CSB/Existing CSB	PA 2 Infrastructure Works incl Child care Centre	PA 3 IHRI (Note)	PA 4 Milestone 3/4 Cancer Refurb, Bunkers, Skills Centre	Phase 2 Incl W&C, Aged Care, PA to be made	Total Incremental Parking
Public	144	0	0	9	51	204
Staff	443	5	95	9	138	690
Total	587	5	95	18	189	894

Note: The parking demand figure for Project Application 3, the IHRI, was calculated by a separate traffic consultant and the basis for that calculation is presented in the traffic report submitted with that Project Application.

Cumulative Parking Requirement / Demand By Project Application

	Pre Redevelopment	PA 1 New CSB/Existing CSB	PA 2 Infrastructure Works incl Child care Centre	PA 3 IHRI	PA 4 Milestone 3/4 Cancer Refurb, Bunkers, Skills Centre	Phase 2 Incl W&C, Aged Care, PA to be made
Public	276	420	420	420	429	480
Staff	1230	1673	1677	1772	1781	1920
Total	1506	2093	2098	2193	2210	2400

The above tables illustrates that the parking demand and traffic impact of Project Application 4, the Stages 2.1C & D (Milestones 3/4) is minor. The parking requirement is estimated at 18 car park spaces with 9 for public and 9 for staff. The resultant traffic impact on the road network will is also only be very minor and will account for only for

a few car movements in the peak period. As noted above this parking requirement and traffic impact has been taken into account in the TTPA report for the Concept Plan.

As outlined in the foregoing TTPA has been engaged in ongoing consultation with the RTA in regard to the 75W application with updated traffic counts in particular for the revised access roadway from the Hume Highway. We note the Hume Highway intersection and the northern link road has now been approved. As such we advise:

* The latest layout of the Hume Highway Mannix Parade/Remembrance Avenue has been provided to and discussed with and approved by the RTA;

* RTA requirements for traffic counts in 2010 and SIDRA model details have been provided to the RTA; and

* the 2010 assessment undertaken by TTPA (and provided to the RTA) also assessed the other access points on the road system (eg Hume Highway/Bigge Street) and concluded that there would be no unsatisfactory traffic implications or service levels.

Yours faithfully

Ross Nettle
Director
Transport and Traffic Planning Associates