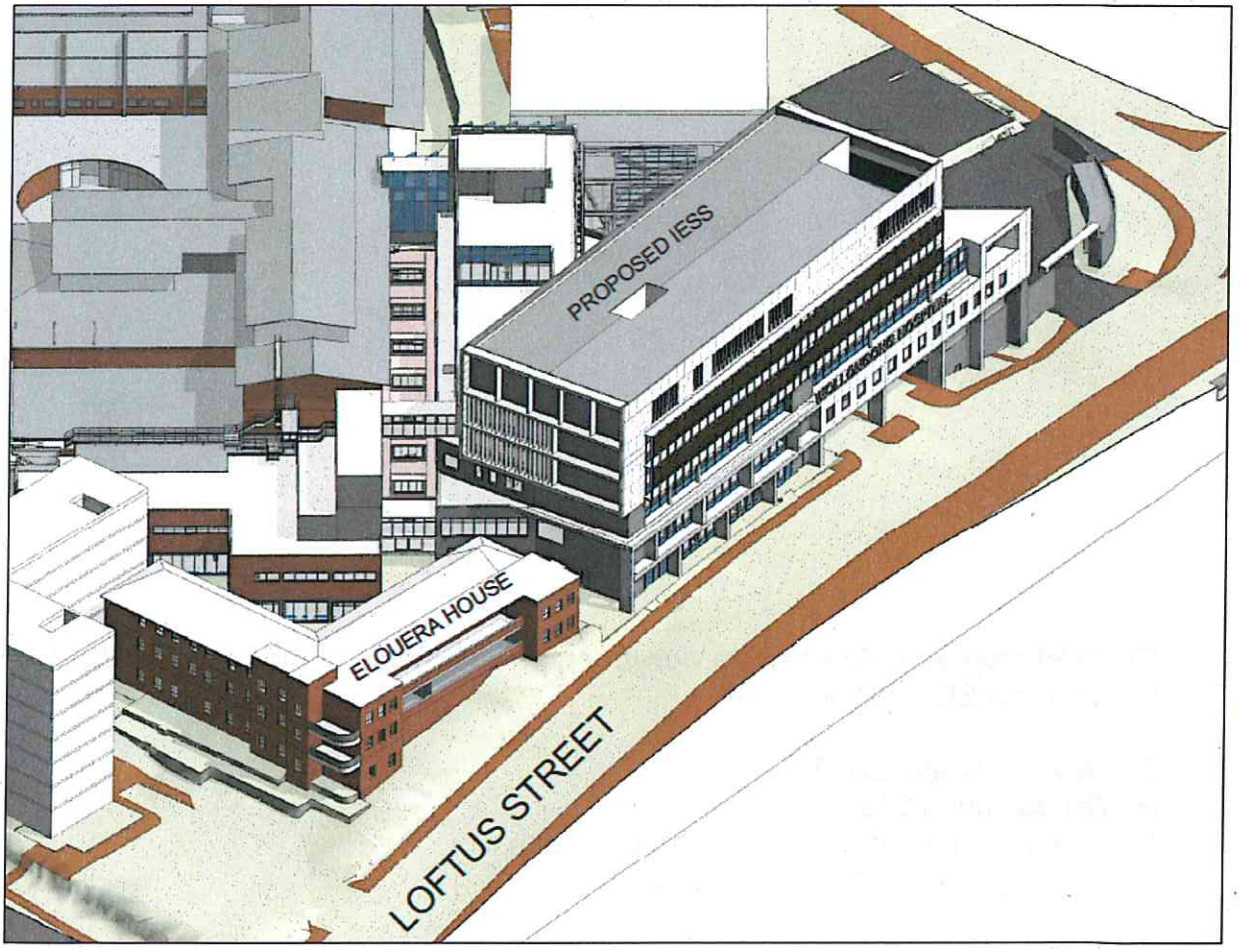
NSW GOVERNMENT | Planning & Infrastructure

MAJOR PROJECT ASSESSMENT: Wollongong Hospital Redevelopment, Crown Street, Wollongong (MP 10_0213)



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

June 2012

ABBREVIATIONS

CIV	Capital Investment Value
Department	Department of Planning & Infrastructure
DGRs	Director-General's Requirements
Director-General	Director-General of the Department of Planning & Infrastructure
EA	Environmental Assessment
EP&A Act	*Environmental Planning and Assessment Act 1979*
EP&A Regulation	Environmental Planning and Assessment Regulation 2000
EPI	Environmental Planning Instrument
MD SEPP	State Environmental Planning Policy (Major Development) 2005
Minister	Minister for Planning & Infrastructure
PAC	Planning Assessment Commission
Part 3A	Part 3A of the *Environmental Planning and Assessment Act 1979*
PPR	Preferred Project Report
Proponent	Health Infrastructure
RtS	Response to Submissions

Cover Photograph: Perspective view from the south-east of the new IESS/ACU building and ED additions

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Department of Planning & Infrastructure

EXECUTIVE SUMMARY

This report is an assessment of a project application lodged by Health Infrastructure seeking approval for the construction of a new six storey building, a part two part four storey addition to the existing hospital building and ancillary works, and operation of these facilities as part of the Wollongong Hospital pursuant to Part 3A of the *Environmental Planning and Assessment Act 1979* (EP&A Act). The proposal is located at the Wollongong Hospital campus, on the main block bound by Crown, Darling and Loftus Streets and New Dapto Road.

The project application seeks approval for the construction and fit-out of: a six storey building to accommodate the new Illawarra Elective Surgical Services facility and the new Ambulatory Care Unit; a part two part four storey addition to the existing hospital building for the expansion of the Emergency Department; and a single storey storage and services buildings within the existing loading dock. The proposal also includes partial demolition and modifications to Elouera House (a State Heritage Item), closure of the internal road and construction of a pedestrian path in lieu of the road, provision of a new drop off zone, and landscape and public domain works, including removal of 21 trees.

The project has a capital investment value (CIV) of $106.4 million and will generate 444 operational jobs and 180 construction jobs.

On 1 December 2010, the Director, Government Land and Social Projects, Major Projects Assessment, as delegate of the then Minister for Planning, formed an opinion that the project is a major project under clause 18 of Schedule 1 to the State Environmental Planning Policy (Major Development) 2005 (MD SEPP), as it is a development for the purpose of providing professional health care services with a CIV of more than $15 million. The proposal is a transitional Part 3A Major Project under the EP&A Act.

The site is zoned SP1 Special Activities Wollongong Hospital Precinct under Wollongong Local Environmental Plan 2009 and the proposal is permissible with consent.

The proposal was exhibited from 1 December 2011 to 31 January 2012. The department received submissions from Wollongong City Council, Roads and Maritime Services (RMS), the Office of Environment and Heritage and the Heritage Branch of the Office of Environment and Heritage (Heritage Branch). Four submissions were also received from the public. The key issues raised in the submissions were: impacts on locally listed heritage trees; lack of on-site car parking; impacts on the local street network given on-site parking shortfall; adequacy of justification for exemption from the payment of section 94A development contributions; adequacy of footpaths on the surrounding streets; adequacy of public transport; pedestrian accessibility and safety; and the impacts of the removal of the existing fig trees on the Grey-headed Flying-fox.

The department has assessed the merits of the proposal and has found the key issues associated with the project include: built form; transport and access; heritage; development contributions; and environmental and residential amenity. The department is satisfied that the impacts of the proposed development have been

addressed via the Environmental Assessment, Preferred Project Report and Statement of Commitments, and can be adequately managed through the recommended conditions.

The department considers the site to be suitable for the proposed development and that the application is in the public interest and is consistent with the objects of the EP&A Act (including ecologically sustainable development), NSW 2021, and the Illawarra Regional Strategy. The project will significantly boost the facilities and capacity of Wollongong Hospital, providing important health infrastructure and jobs for the region. Consequently, the department recommends that the project application for the construction of the new building and additions for the operation of the health facility be approved, subject to conditions.

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1. BACKGROUND

Health Infrastructure proposes to construct a new six storey building at Wollongong Hospital on the Loftus Street frontage to accommodate the Illawarra Elective Surgical Services (IESS) and Ambulatory Care Unit (ACU), expansion of the Emergency Department (ED) and additional loading dock facilities. The subject site is generally bounded by Crown, Darling and Loftus Streets, and New Dapto Road. The project location is shown in Figure 1.

Figure 1: Project location

1.1 Site Location and Description

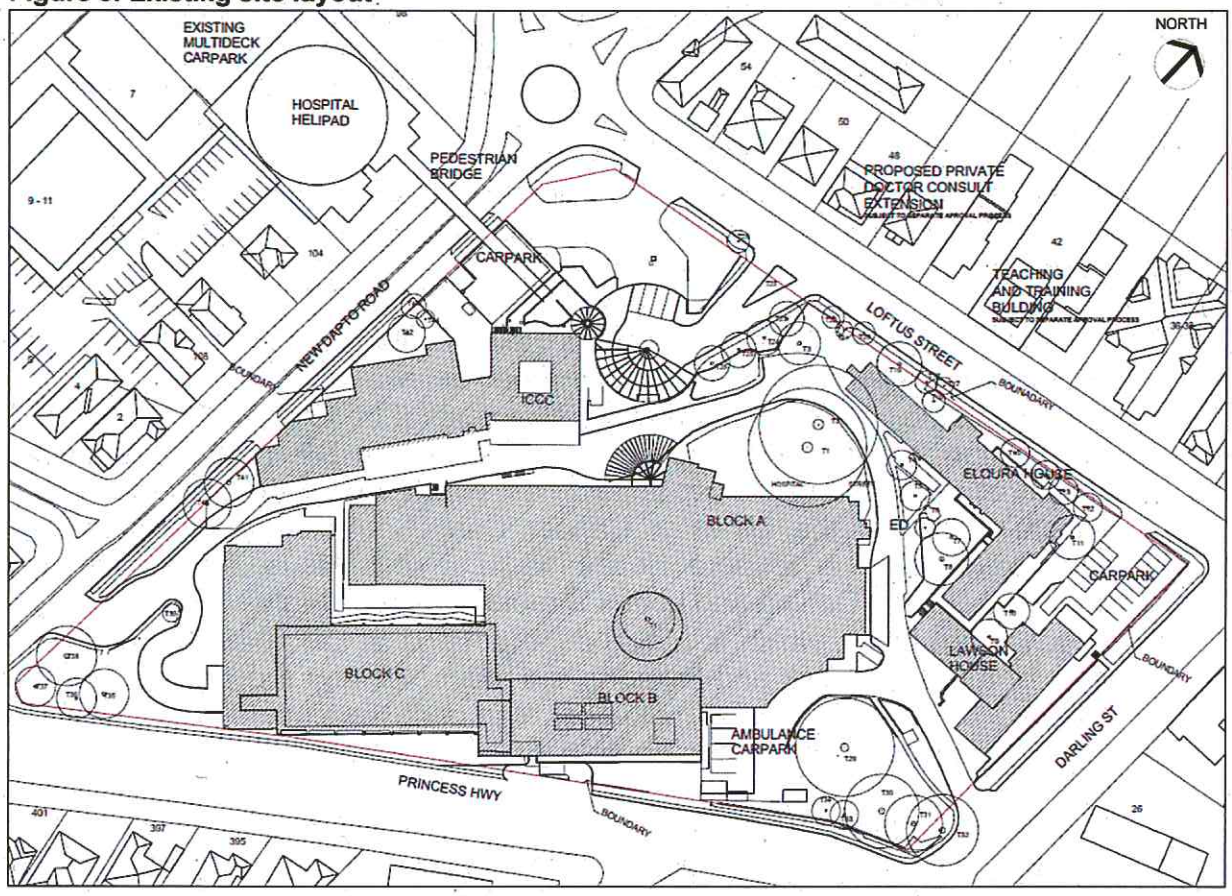
The hospital campus is located approximately 1 km to the west of Wollongong Central Business District. The hospital campus is owned by Health Administration Corporation.

The hospital campus site is formed by 16 allotments and can be distinguished as three separate blocks (see Figure 2) as outlined below.

- The main block, which comprises 14 allotments (Lot 13 in DP884182, Lots 58 to 69, Section 3 in DP1258 and Lot 95, Section 3 in DP 1258). The main block accommodates: the core hospital facilities, which are located in three large-scale clinical buildings; the Illawarra Cancer Care Centre; and the Nurses Home complex comprising Elouera House and Lawsons House. The main block is bound by Crown, Darling and Loftus Streets and New Dapto Road.
- The western block, which is a single lot (Lot 101 in DP 1043216) located to the west of the main block and linked to the main block by a pedestrian overbridge. Located on this block is a multi-deck car park, helicopter pad and additional health buildings. This block is bound by Urunga Parade, Dudley Street and New Dapto Road.
- The northern block, which is a relatively small lot (Lot 50, Section 3 in DP 1258) at 42 Loftus Street and is located immediately to the north of the subject development. Separate approval for a two storey teaching, training and accommodation unit has been issued for the site.

Figure 2: Aerial view of existing site layout

Figure 3: Existing site layout



The proposed works are confined to the main block of the hospital campus.

The topography of the main block varies and is characterised by a substantial rise at the centre of the site by up to 14 metres from the north-west and north-east of the site. The site of the proposed IESS/ACU building is located at the top of the hill. The IESS/ACU building site and ED expansion is currently occupied by the 1941 extension of Elouera House, vehicle entry, loading zone, landscaping including the two fig trees, gazebo, internal access road and car parking spaces.

1.2 Surrounding Development

Development surrounding the subject site consists of:

- low-scale residential interspersed with low-scale medical and allied uses to the north (see Figures 4 and 5)
- low-scale commercial and retail, low and medium-scale residential development interspersed with low-scale medical and allied uses to the east (see Figure 6)
- low and medium-scale residential interspersed with low-scale medical and allied uses to the south (see Figure 7)
- a multi-deck car park, helicopter pad, additional health buildings and low-scale residential uses to the west (see Figure 8 and 9).

Figure 4: Low-scale residential to the north (approved for eight storey mixed use)

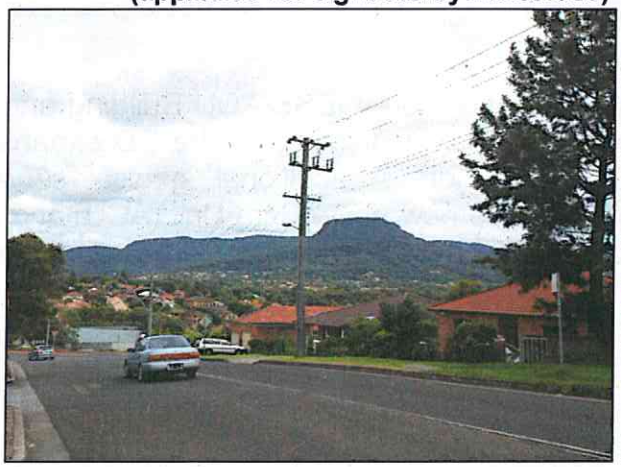


Figure 5: Low & medium-scale residential to the north

Figure 6: Commercial and residential to the east

Figure 7: Consulting rooms and residential to the south

Figure 8: Multi-storey car park and helipad to the west

Figure 9: Medical and allied uses to the and residential to the west

Recent approvals in the area also allow for a medium-scale private medical clinic (48 Loftus Street) to the north of the campus and a private hospital to the south-east of the site (360-364 Crown Street), which were approved as eight storey developments.

2. PROPOSED PROJECT

2.1. Project Description

The project comprises the construction of the six storey IESS/ACU Building and the part two and part four storey addition to the Block A building for the ED expansion. The new floor space will support the provision of additional surgical services, emergency services, intensive care areas, and the new Acute Care Unit (ACU) and new Central Sterilising Services Department (CSSD). These services would be supported by the following facilities:

- seven new operating theatres
- 66 new beds
- 72 new treatment bays
- 20 new consultation/examination rooms
- refurbishment works to existing Block A building to accommodate the relocation of 19 treatment bays and four beds
- refurbishment works to provide eight new treatment bays
- additional areas for reception, consultation, administrative and hotel services.

The following associated works are also proposed:

- partial demolition, including the removal of the 1941 western portion of Elouera House (a State Heritage Item) and reconstruction to its original 1937 form
- reconfiguration of the vehicular drop off point on Loftus Street, including provision of an additional five car spaces
- refurbishment works to the existing Block A clinical building, including provision of a new combined main entry
- additions to the loading dock zone
- provision of a new four vehicle drop off zone on New Dapto Road
- landscaping and public domain works
- part pedestrianisation of the existing, internal Hospital Road, including the removal of car spaces
- excavation works for the basement

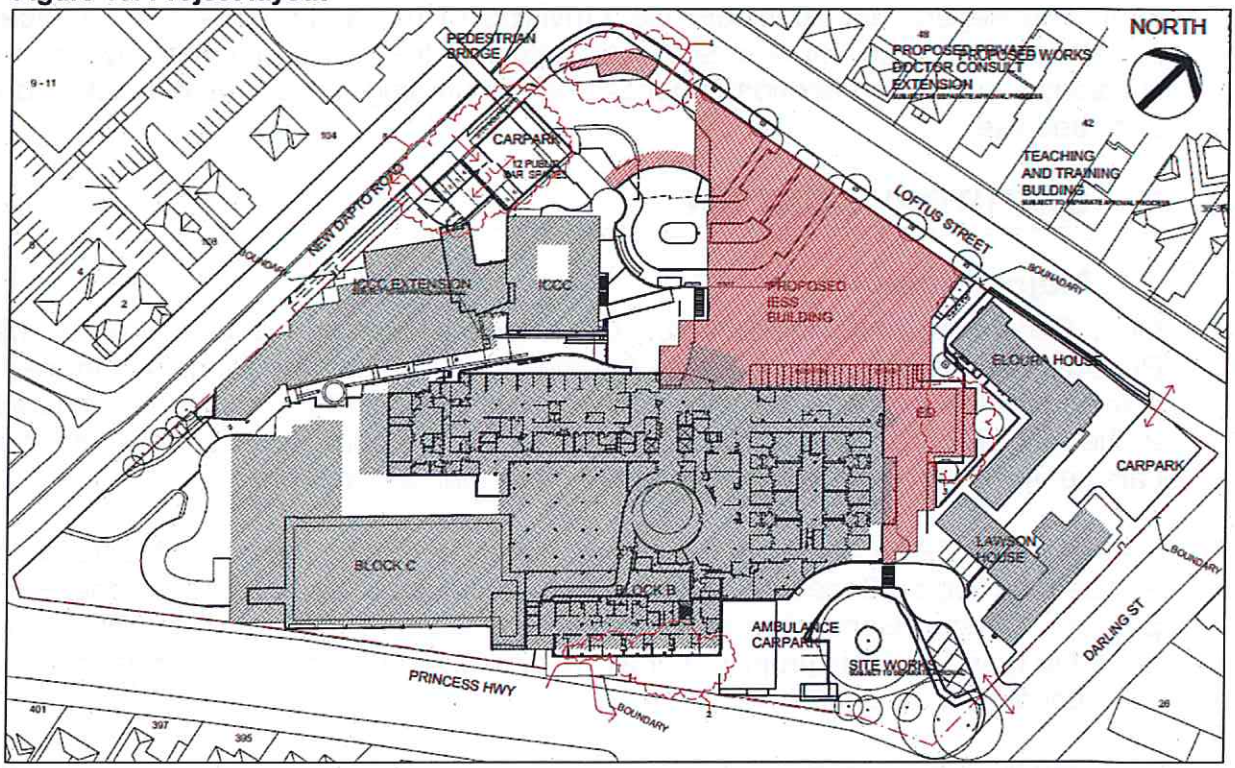
- utility works including new water main connections, relocation of a gas meter and new substations
- removal of 21 trees including two trees listed as Local Heritage Items in the Wollongong Local Environmental Plan 2009 (WLEP)
- sustainable transport, operational and waste procedures.

The key components of the project are listed in Table 1. The project layout is shown in Figure 10.

Table 1: Key project components

Aspect	Description
Height	IESS/ACU building – 26.525 metres ED additions – 16.82 metres
Site Area	29,193 sqm
GFA (proposed)	13,963 sqm
GFA (site total)	71,296 sqm
Bicycle parking spaces	100
IESS/ACU building	66 beds, 62 treatment bays, 20 consultation/examination rooms
ED Additions	10 treatment bays
Refurbishment works to Block A building	Relocation of 19 treatment bays and four beds Provision of eight new treatment bays adjoining ED additions
Loading dock	Storage facilities, offices and an enlarged dock area
CIV	$106.4 million
Jobs	444 operational and 180 construction

Figure 10: Project layout



2.2. Project Need and Justification

The department considers that the proposed facilities would support the delivery of public health services and responds to State strategic health delivery plans, which identify the need to provide additional surgical services in the Illawarra region. The delivery of the additional facilities and services is consistent with the Illawarra Regional Strategy, which identifies Wollongong as a regional city which is responsible for providing higher order health services. The Illawarra Regional Strategy also identifies the health care sector as a key employment generator and Wollongong Hospital is expected to grow to meet the changing needs of the region, including becoming a teaching hospital. The expansion of the services at the hospital would assist in continuing to provide increased employment as well as enhancing existing teaching services. The further consolidation of health services at the hospital campus is consistent with the WLEP, which seeks to establish the Wollongong Hospital precinct.

The proposal would also support key priorities in NSW 2021, the State's 10 year plan, to increase investment in infrastructure and making more beds available to provide access to world class healthcare. The purpose built facility will enhance the surgery services at the hospital by separating elective and emergency surgery facilities and provide ambulatory care services, which are not currently provided at Wollongong Hospital. The emergency services expansion will allow the hospital to cater for the current and projected demand for emergency services.

The proposal would support the orderly and economic use of the land on the site by utilising a partially vacant parcel of land that provides connectivity with the main hospital buildings. The proposal's location within the hospital would also improve and better define access points into the hospital campus. The proposal would also support the reconfiguration of the State heritage listed Elouera House to its original form. The department considers the provision of the additional health services a sustainable outcome for the site that satisfies the public interest by providing substantial social and economic benefits whilst utilising a previously developed and disturbed site.

3. STATUTORY CONTEXT

3.1. Major Project

On 1 December 2010, the Director, Government Land and Social Projects, Major Projects Assessment, as delegate for the then Minister for Planning, formed an opinion that the project is a major project under clause 18 (Hospitals) of Schedule 1 to the MD SEPP as it would be development for the purpose of professional health care services with a capital investment of more than $15 million.

Part 3A of the EP&A Act, as in force immediately before its repeal on 1 October 2011 and as modified by Schedule 6A to the Act, continues to apply to transitional Part 3A projects. Director-General's environmental assessment requirements (DGRs) were issued in respect of this project prior to 1 October 2011, and the project is therefore a transitional Part 3A project.

Consequently, this report has been prepared in accordance with the requirements of Part 3A and associated regulations, and the Minister (or his delegate) may approve or disapprove of the carrying out of the project under section 75J of the Act.

3.2. Delegated Authority

The Minister has delegated his functions to determine Part 3A applications to the department where:

- the council has not made an objection, and
- there are less than 25 public submissions objecting to the proposal, and
- a political disclosure statement has not been made in relation to the application.

Four submissions were received from the public and council has not made an objection to the proposal. There has also been no political donation disclosure made for this application or for any previous related applications, and no disclosures made by any persons who have lodged a submission on this application.

Accordingly the application is able to be determined by the Deputy Director General, Development Assessment and Systems Performance under delegation.

3.3. Permissibility

The site is zoned SP1 Special Activities – Wollongong Hospital Precinct under *Wollongong Local Environmental Plan 2009* (WLEP). Hospitals are permissible in the zone with development consent.

3.4. Environmental Planning Instruments

Under sections 75I(2)(d) and 75I(2)(e) of the EP&A Act, the Director-General's report for a project is required to include a copy of, or reference to, the provisions of any State Environmental Planning Policy (SEPP) that substantially governs the carrying out of the project, and the provisions of any environmental planning instruments (EPI) that would (except for the application of Part 3A) substantially govern the carrying out of the project and that have been taken into consideration in the assessment of the project. The department's consideration of relevant SEPPs and EPIs is provided in Appendix D and include:

- State Environmental Planning Policy (Major Development) 2005
- State Environmental Planning Policy (Infrastructure) 2007
- State Environmental Planning Policy No. 55 - Remediation of Land
- Wollongong Local Environmental Plan 2009.

3.5. Objects of the EP&A Act

Decisions made under the EP&A Act must have regard to the objects of the Act, as set out in Section 5 of the Act. The relevant objects are:

(a) to encourage:

- *(i) the proper management, development and conservation of natural and artificial resources, including agricultural land, natural areas, forests, minerals, water, cities, towns and villages for the purpose of promoting the social and economic welfare of the community and a better environment,*
- *(ii) the promotion and co-ordination of the orderly and economic use and development of land,*
- *(iii) the protection, provision and co-ordination of communication and utility services,*
- *(iv) the provision of land for public purposes,*
- *(v) the provision and co-ordination of community services and facilities, and*

(vi) the protection of the environment, including the protection and conservation of native animals and plants, including threatened species, populations and ecological communities, and their habitats, and
(vii) ecologically sustainable development, and
(viii) the provision and maintenance of affordable housing, and

(b) to promote the sharing of the responsibility for environmental planning between the different levels of government in the State, and
(c) to provide increased opportunity for public involvement and participation in environmental planning and assessment.

The department has considered the objects of the EP&A Act and considers that the application is consistent with the relevant objects. The assessment of the application in relation to these relevant objects is provided in Section 3.6 and Section 5 of this report.

3.6. Ecologically Sustainable Development

The EP&A Act adopts the definition of Ecologically Sustainable Development (ESD) found in the *Protection of the Environment Administration Act 1991*. Section 6(2) of that Act states that ESD requires the effective integration of economic and environmental considerations in decision-making processes and that ESD can be achieved through the implementation of:

(a) the precautionary principle,
(b) inter-generational equity,
(c) conservation of biological diversity and ecological integrity,
(d) improved valuation, pricing and incentive mechanisms.

The proposal is located within an urban footprint on a previously developed and disturbed site and would not result in the loss of any threatened or vulnerable species, populations, communities or significant habitats. The site will not be impacted by changes in sea level rising resulting from climate change. The proponent has incorporated ecologically sustainable design initiatives in this proposal and aims to achieve the energy efficient standards in the Building Code of Australia, which sets sustainability requirements for NSW government buildings.

The following sustainable design initiatives have been incorporated in the design and construction process:

- target a 4 star Green Star rating with a Green Star accredited professional appointed to ensure ESD measures are incorporated in the design phase
- maximise natural light penetration
- transport management strategy to promote sustainable transport options
- optimised HVAC design to reduce greenhouse gas emissions
- provision of lighting zoning and energy efficient lighting
- installation of sub-meters to monitor energy and water consumption
- encourage use of recycled materials
- thermal insulation to external walls that avoid ozone-depleting substances
- heat recoverable air conditioning handling units which reduce dependence on outdoor condensers and energy consumption
- use of concrete to reduce embodied energy and resource depletion.

The department recommends that the project should target the measures required for a 4 star Green Star rating and has included a recommended condition to this effect. On the basis of this assessment, the department is satisfied that the proposal encourages ESD, in accordance with the objects of the EP&A Act.

3.7. Statement of Compliance

In accordance with section 75I of the EP&A Act, the department is satisfied that the Director-General's environmental assessment requirements have been complied with.

4. CONSULTATION AND SUBMISSIONS

4.1. Exhibition

Under section 75H(3) of the EP&A Act, the Director-General is required to make the environmental assessment (EA) of an application publicly available for at least 30 days. After accepting the EA, the department publicly exhibited it from 1 December 2011 to 31 January 2012 (62 days) on the department's website, and at the department's Information Centre and at Wollongong City Council's offices. The department also advertised the public exhibition in the Sydney Morning Herald, The Daily Telegraph and Wollongong Advertiser on 30 November 2011. Adjoining landholders and relevant State and local government authorities were also notified in writing.

The department received eight submissions during the exhibition of the EA - four submissions from public authorities and four submissions from the general public (see Appendix B).

A summary of the issues raised in submissions is provided below.

4.2. Public Authority Submissions

A total of four submissions were received from public authorities.

Wollongong City Council (council) supports the project in principle however recommended changes to address impacts on the locality and provided the following comments:

- the lack of on-site car parking and removal of heritage listed trees are not consistent with the objectives of WLEP
- a request for an exemption regarding section 94A contribution requirements has not been made and can only be considered if the car parking shortfall has been addressed
- the application needs to demonstrate that the proposal will be energy efficient
- the private vehicle mode share assumption appears lower than other hospitals
- anomalies occur in the SIDRA traffic impact assessment and the SIDRA assessment should be further analysed with further consideration of driver characteristics and signal phasing
- the use of on street parking as part of the parking provisions of the hospital is not supported as: on street parking in the vicinity is at practical capacity; on street car parking is not for the exclusive use of the hospital; the local street network lacks adequate footpaths; congestion and impacts on Crown Street as a result of circling vehicles; and does not provide easy access for visitors

- as a consequence of this proposal, the hospital campus is deficient in car parking by 779 spaces, however, given the transport management measures proposed council would be receptive to a 5-10% reduction of this requirement
- any future application to expand the existing multi-storey car park should be linked with this application and construction works should coincide with works for the subject application
- bus services do not provide a means of convenient travel given the 30 minute to an hour frequency during the week and one to two hour frequency on weekends
- the pedestrian route to the railway station is not user friendly given the grade, varying degree of weather protection and heavily utilised vehicle crossovers thereby reducing the viability of rail as an alternative mode of transport
- the drop off zone along Crown Street shall be removed due to safety concerns as the other drop-off locations within the hospital campus provide adequate facilities
- the location of the main entrance off Loftus Street should be reconsidered or traffic calming devices shall be installed to prevent right hand turns from Loftus Street given the safety concerns resulting from poor sight lines resulting from the crest in the road. At a minimum the no right turn ban should remain and be reinforced
- pedestrian priority should be provided at the main Loftus Street entry as the design currently reflects vehicle priority
- the Heritage Council's comments for the State heritage listed items should be sought
- the two locally listed fig trees proposed to be removed are considered to be of very high significance and should be retained and further clarification regarding the health of the trees is required
- commemoration of the history of the site should be considered
- the site has potential for archaeology relating to the colonial period of Wollongong's history and the Heritage Council should be consulted in regards to the potential for relics
- the site has potential Aboriginal cultural significance given its vantage point and further consideration of the potential significance should be considered
- an assessment of significant effect of the project on the Grey-headed Flying-fox or its habitat should be provided given the removal of the fig trees and the recorded presence of the Grey-headed Flying-fox in fig trees in West Wollongong
- a safety audit report should be undertaken for the proposal.

Council also provided recommended conditions of approval for the project which are generally consistent with the department's standard conditions, including requiring the proposal to satisfy recommendations in the technical reports submitted with the EA. Council also recommended the following site specific conditions in relation to the proposal if approved in its current form:

- payment of the section 94A levy of one per cent of the capital investment value prior to occupation
- provision of new bus shelters along Crown Street to be designed in accordance with RMS and council's *Wollongong CBD Bus Interchange Passenger Infrastructure Upgrade* project
- developing a heritage interpretation plan to address the history of the site and the history of the hospital
- archival recording of the two large fig trees and Nurses Home prior to removal.

Roads and Maritime Services (RMS) does not fully support the project in its exhibited form, providing the following comments:

- the project generates additional demand for car parking, however does not provide any additional car parking spaces, which will place a strong emphasis on alternative means of transport including walking, cycling, public transport or a combination of these modes
- the pedestrian link between the hospital campus and the Railway station has been documented as having a high incidence of crashes as well as other pedestrian areas in the vicinity of the campus and therefore adequate pedestrian facilities need to be addressed as part of the application
- whilst supportive of a reduction in the reliance on private vehicles, the pedestrian network does not adequately cater for pedestrians
- the pedestrian network and directional signage requires improvement, including directing pedestrians to the main Loftus Street entry and converting Hospital Road as the main pedestrian access
- the reliance of on-street car parking within a 15 minute walking radius is not appropriate given the grades of the surrounding streets as the hospital campus is located at the top of a hill which promotes circuitous travel patterns and congestion
- additional car parking should be provided with this application and not a future application
- reinforce Loftus Street vehicle entry and close Crown Street entry to limit conflict points along Crown Street and to restrict pedestrian entry as it fosters mid block crossings which is not a safe crossing point
- the traffic can be accommodated on surrounding roads.

Office of Environment and Heritage (OEH) does not object to the project and provided the following comments:

- the proposed development would not require an Environment Protection Licence
- the construction management plan and sub-plans should be completed prior to commencement of construction activities and appropriate procedures to review and improve should be incorporated into the plans
- a community consultation plan should be prepared and include procedures for consulting, and notifying adjoining residents about construction activities, staging, and complaints systems
- construction hours should be consistent with the interim construction noise guideline's recommended hours unless a suitable justification to work outside these hours is provided
- the acoustic assessment provides relevant construction noise and vibration criteria, however, does not assess whether the project would comply with the criteria
- the acoustic assessment does not address the excavation activities and potential necessity for mitigation measures
- the construction noise and vibration management plan should identify significantly noisy activities and identify appropriate mitigation measures prior to commencement of construction
- dust mitigation measures need to be addressed during construction
- the proponent should ensure the proposal does not cause or permit offensive odours
- the clean stormwater drainage system must be maintained and diverted away from contaminated/polluted areas
- reuse of captured stormwater should be considered

- waste must be classified
- recycling or reuse of waste where safe and practicable should be maximised
- the statement of commitments should be adopted as conditions of approval.

Heritage Branch, Office of Environment and Heritage as delegate of the NSW Heritage Council (Heritage Branch) does not object to the project and provided the following comments:

- notes that while retention of the 1941 extension of the state listed Elouera House is desirable, acknowledges the arguments for demolition
- supports the continued use of the Elouera House as a residence for hospital staff
- considers the refurbishment to its original configuration and retention of the earliest parts of the Elouera House as a positive element of the development
- whilst retention of the two locally listed Morton Bay Fig trees is desirable, notes that the trees do not contribute to the heritage significance of the state listed Elouera House and one of the two trees has a safe useful life expectancy below five years whilst the other is recommended for review in three to five years.

4.3. Public Submissions

A total of four submissions were received from the public. Of the four public submissions, one objected to the project, two supported the project and one did not object but raised concerns. The key issues raised in public submissions are reliance on on-street car parking, lack of on-site car parking and inadequate footpaths on the surrounding streets given the high reliance on on-street car parking.

The department has considered the issues raised in submissions in its assessment of the project.

4.4. Preferred Project Report

The proponent provided a Preferred Project Report (PPR), including a response to the issues raised in submissions (see Appendix C). The PPR included the following changes to the project:

- revised loading dock layout, which reverts the access arrangements back to current arrangements
- greater articulation of the northern façade of the IESS/ACU building
- revisions to the internal pedestrian and vehicle circulation plan, including redirecting access to the south-east of the campus through the emergency unit instead of around the emergency unit
- the addition of a new vehicle drop off zone on New Dapto Road for ICCC patients and reconfiguration of the ICCC car park to provide six drop off spaces (four new spaces)
- extension of the ED additions works further east and internal reconfiguration and fit-out works to facilitate the relocation of the psychiatric emergency care centre and provision of a new courtyard
- revision to construction hours
- provision of traffic calming devices along Loftus Street
- an additional commitment to provide a pedestrian signage strategy.

The proponent has also provided additional advice being agreement to payment of a s94A contributions, should an on-site car park not be progressed – see discussion in Section 5.5.

5. ASSESSMENT

The department considers the key environmental issues for the project to be:

- built form and urban design
- transport and access
- heritage
- environmental and residential amenity
- development contributions.

5.1. Built form and urban design

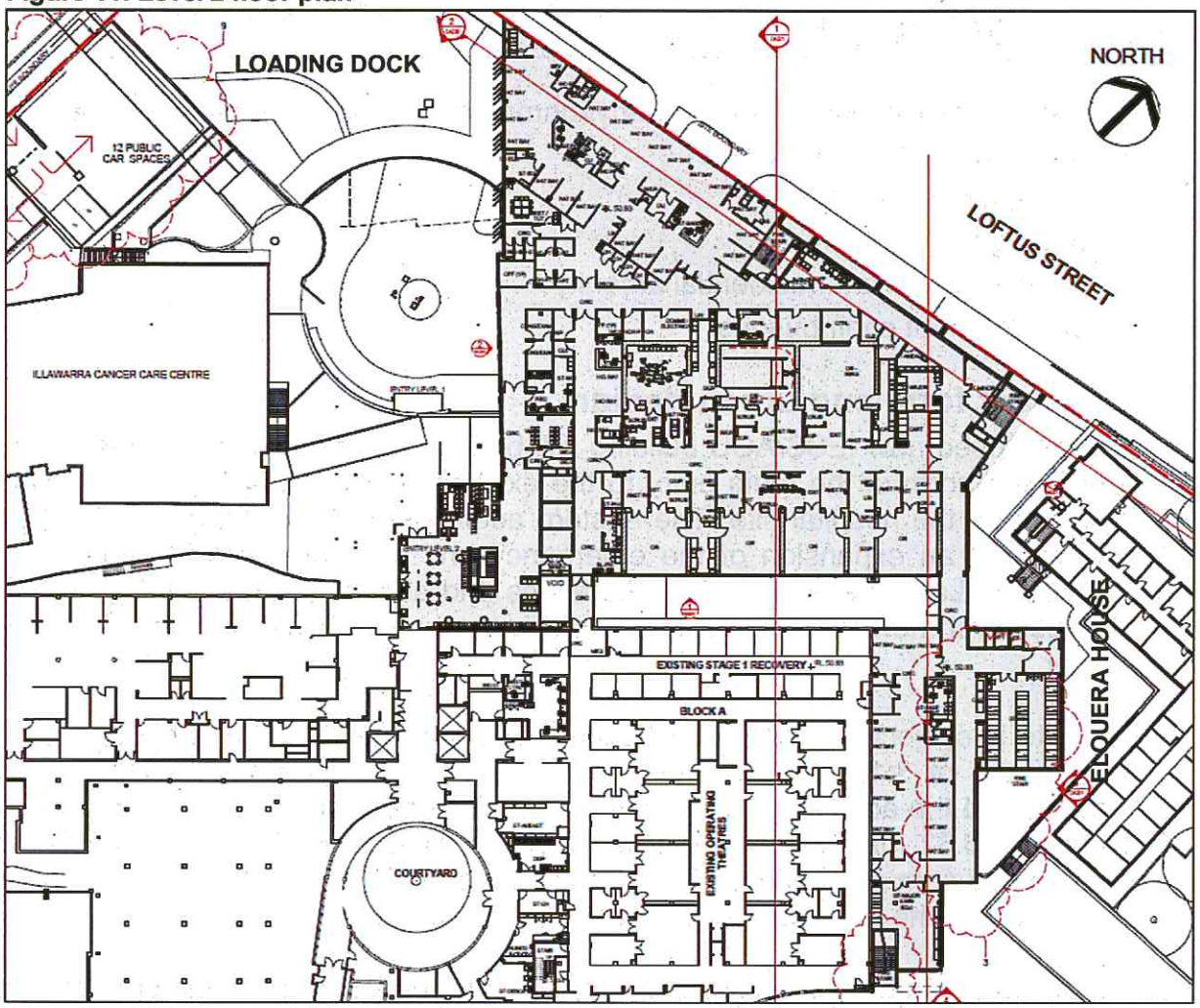
The proposed new IESS/ACU building will be located on the Loftus Street boundary and to the north of the main entry to the existing Block A building, which is located centrally on the hospital site. The eastern additions to the existing Block A building will support an expansion of the emergency unit and will extend towards Elouera House and Lawsons House. The alterations and additions to the loading bay would also establish new building structures along the Loftus Street and New Dapto Road corner.

The site is subject to a 60 metre height limit under the WLEP and a maximum floor space ratio of 3:1. The proposed new IESS/ACU building at six storeys (26.525 metres) and the addition to the emergency unit being a part two and part four storey addition (16.82 metres) comply with the height limit in WLEP. The proposal has a total 13,963 sqm of additional GFA, bringing the total FSR on the site to 2.5:1, which complies with the total permissible FSR for the site of 3:1.

As the height of the proposed building could potentially impact on the operation of the helipad to the west of the site, the department consulted with Airservices Australia which advised that the proposal would not interfere with any approach/departure procedures or the performance of any related navigation systems. However, Airservices Australia indicated that they would like to assess the impacts of any proposed construction cranes. The department has therefore included in the recommended conditions advice that crane permits would need to be obtained from the relevant aviation authority.

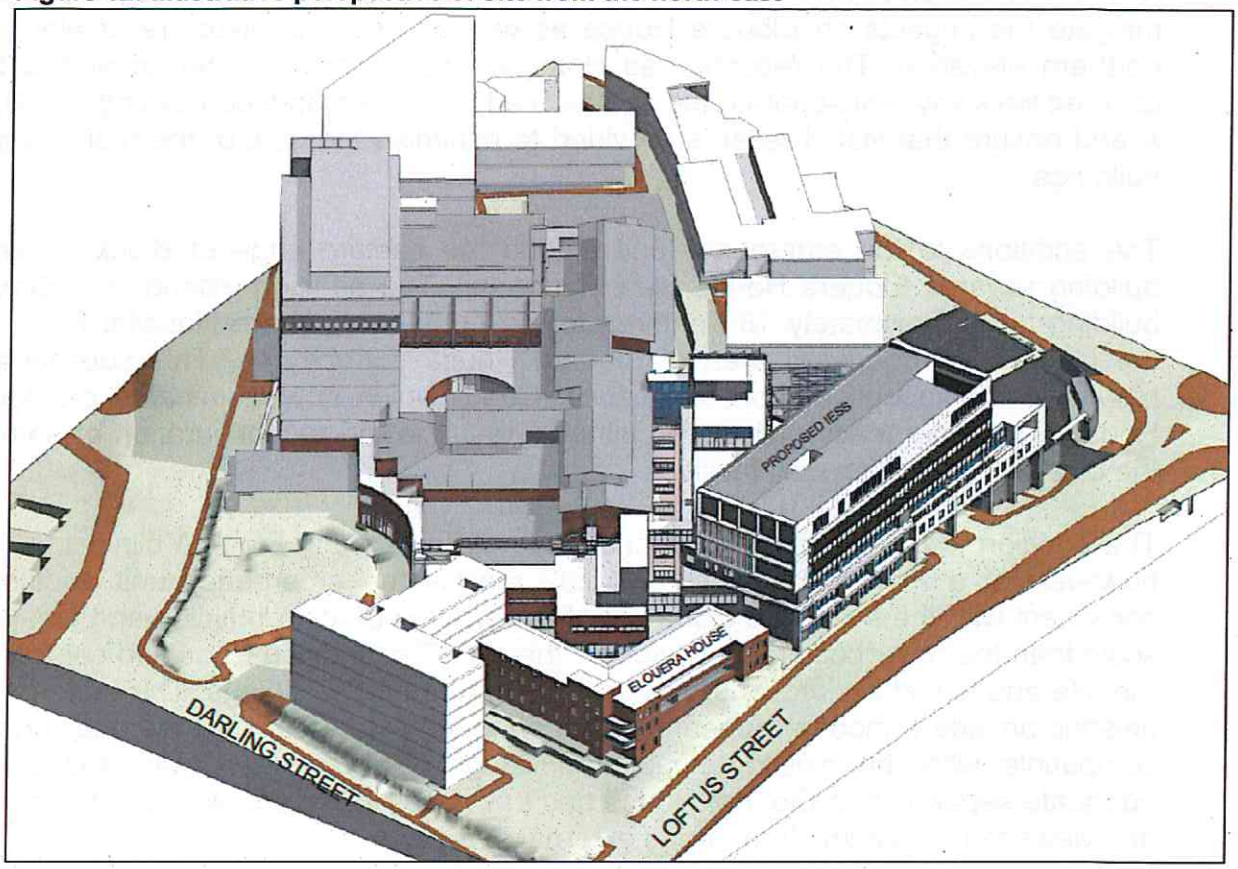
The proposed IESS and ACU building consists of an irregular shaped building that occupies the majority of the land between Loftus Street, the loading dock, ICCC and the reconfigured Elouera House (demolition of the 1941 extension and restoration to its original 1937 form) (see Figure 11). The IESS/ACU building will front Loftus Street and provide a more defined edge to the site as well as deliver a new main entry for the hospital. The proposed building will extend above the new main vehicle entry, including an additional awning to improve pedestrian amenity at the main entrance and drop off zone. The new main entry would provide access to the IESS/ACU building and Block A. The new IESS/ACU building would also be supported by linkages on all hospital floors.

Figure 11: Level 2 floor plan



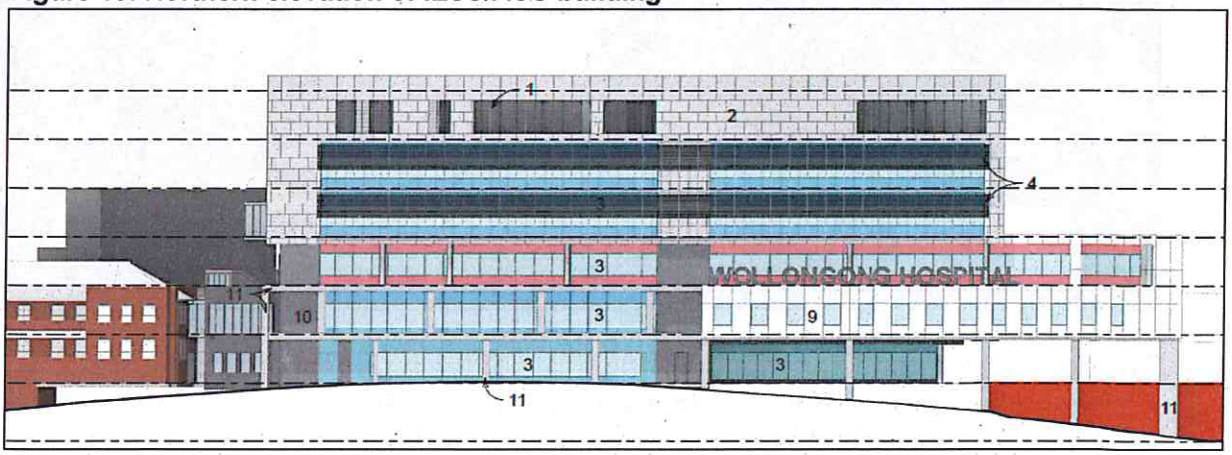
The design of the new building is generally consistent with the modern design of the main hospital buildings located along the southern portion of the site. These buildings have large building footprints and dominant massing along Crown Street. The proposal provides a more prominent address to Loftus Street with a northern elevation that extends approximately 64 metres along the boundary of the site and reinforces the desired future character of the health precinct along Loftus Street (see Figure 12). The proposal would provide a stronger presence on Loftus Street and promote and highlight the new entrance as the main entry to the hospital. The proposal would complement the already approved eight storey mixed use facility located on the northern side of Loftus Street directly opposite the main entrance.

Figure 12: Illustrative perspective of site from the north-east



The proposal would be visually prominent due to its elevated position on the campus. However, as the development would be substantially lower than the highest buildings on the site, the proposed IESS/ACU building would only have a strong visual impact to the north and the west as existing hospital buildings would screen the proposal from other directions. The dominance of the Loftus Street elevation will be minimised through modulation of the façade. This façade also incorporates a varied design response with vertical aluminium blades, composite aluminium panels and horizontal aluminium louvres on the upper levels and the use of precast concrete panels and aluminium framed windows on the lower levels (see Figure 13). The western elevation is separated into two wings above the third floor, which minimises the bulk and scale of the building.

Figure 13: Northern elevation of IESS/ACU building



A clear separation between the new building and the reconfigured Elouera House will mitigate the impacts on Elouera House as well as ensuring visual relief along the northern elevation. The reconfigured Hospital Road, which will be converted to a covered walkway, will separate the southern edge of the proposed building and Block A and ensure that visual relief is provided to minimise the bulk of the main hospital buildings.

The additions to the emergency unit extend the eastern edge of Block A clinical building towards Elouera House (see Figure 11). The addition extends the Block A building by approximately 18.5 metres to the north-east, where Hospital Road and the landscaped courtyard area of Elouera House currently lie. This subsequently results in the reconfiguration of Hospital Road, which now terminates at Elouera House. The emergency unit works will also result in the reconfiguration of some of the existing emergency unit facilities.

The addition will increase the bulk and scale of the existing Block A clinical building however, at a maximum height of 16.82 metres the emergency unit addition is consistent with the scale and character of the existing Block A building and smaller in scale than the other hospital buildings on the site. The addition is located centrally on the site and would be largely screened by other hospital buildings. The material and finishes provide a modern appearance (see Figure 14) and ensure the additions are compatible with the existing hospital buildings. The additions will also provide adequate separation to Elouera House and Lawsons House and would not impact on any views to these items from areas external to the site.

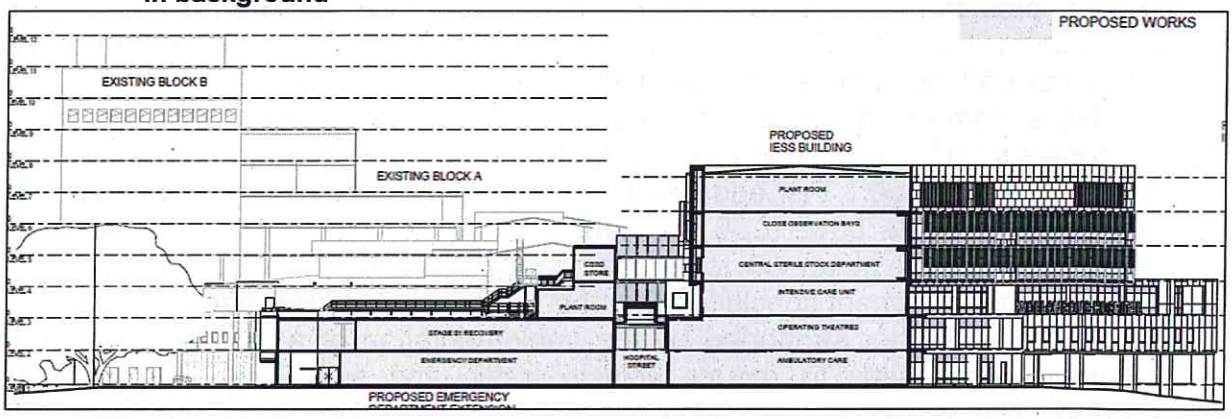
Figure 14: Illustrative perspective of the Loftus Street facade

The department considers the bulk and scale of the proposal appropriate as:

- it complies with the development standards in WLEP
- the proposal is well below the height of existing buildings located at the campus (see Figure 15)

- the proposal is consistent with the character and scale of the existing hospital buildings and would be generally consistent with the height of the approved mixed used facility located on the northern side of Loftus Street and is therefore appropriate in the context of the site and the envisaged character of the surrounding area
- the massing would be minimised through treatments including building separations, setbacks, articulation, modulation, and varied materials and finishes
- the proposal provides an improved presentation to Loftus Street, a clear defined entrance to the hospital and a stronger edge to the hospital campus
- the proposal would provide an appropriate interface with the approved eight storey development on the opposing side of Loftus Street
- the proposal would have minimal amenity impacts on the residential uses to the north
- the proposal responds to the regional objectives of consolidating and expanding health infrastructure for the Illawarra region in the Wollongong Health precinct and provides an appropriate built form to promote the further expansion of the precinct around the Wollongong Hospital.

Figure 15: Section through IESS/ACU building and ED addition with existing hospital buildings in background



5.2. Transport and access

5.2.1 Car parking

The campus currently provides 756 car spaces, including spaces provided in the ICCC expansion works, which were undertaken in accordance with Part 5 of the EP&A Act and are currently under construction. Car parking demand at the hospital, based on the Wollongong Development Control Plan 2009 car parking rates for hospitals, would be approximately 1240 car spaces based on the existing staff numbers and hospital beds. Therefore, the hospital already relies heavily on existing on-street car parking.

The proponent's traffic assessment calculated parking demand as a consequence of the proposed works to be 310 additional car spaces. The calculation, however, also includes demand generated by the recently approved ICCC works. The department has recalculated the demand generated solely as a result of the subject application, in accordance with the rates in council's DCP, and considers the proposal would generate a demand for 289 car parking spaces (see Table 2). The RMS Guide to Traffic Generating Development does not provide a rate for car parking for public hospitals.

Table 2: Car parking requirements

Facilities / Staff	Council's car parking requirements	
66 beds	1 visitor space per 2 beds	33
67 medical practitioners (15% of FTE staff)	1 space per medical practitioners	67
377 medical practitioners (85% of FTE staff)	1 space per 2 employees	189
Total		**289**

* The proponent has indicated that 15 per cent of the staff would be medical practitioners

The proposal does not include any additional on-site car parking and therefore the demand generated by this proposal would also seek to rely on existing on-street car parking and the existing multi-storey car park.

The conversion of the existing internal road (known as Hospital Road) to a pedestrian walkway results in the loss of 16 parking spaces. The subject proposal provides an additional five short-term car spaces at the Loftus Street entrance and an additional four short-term car spaces at the new ICCC drop off zone. Therefore, the proposal would result in a total loss of seven car spaces and a deficiency of 296 parking spaces across the site.

The proponent's traffic assessment indicated that in addition to the car parking spaces provided on site, a further 792 on-street car parking spaces would be available for hospital users within a 10 minute walk of the site. Therefore, a total of 1,541 car parking spaces are potentially available for staff and visitors, which would meet the demand generated by the hospital in its entirety (1529 spaces). The proponent's traffic assessment considered that car parking in the surrounding streets was able to support the additional demand generated by the proposal as the surrounding streets have a 60 per cent occupancy rate, whilst those within a five minute walk were at an 80 to 90 per cent occupancy rate during peak hospital periods. The proponent concluded that the site is supported by adequate car parking, which will be further supported by the implementation of a transport management strategy, which aims to reduce vehicle traffic and subsequent demand for car parking. The proponent has also indicated that the Health Infrastructure master planning of the hospital has identified the potential future expansion of the multi-storey car park to address the ongoing demand generated by the hospital facilities for car parking.

Council raised concerns regarding the additional demand generated and the lack of on-site car parking. Council considered that the proposal should only be supported if adequate on-site car parking is incorporated into the proposal and delivered with the proposal and not at an undetermined future date.

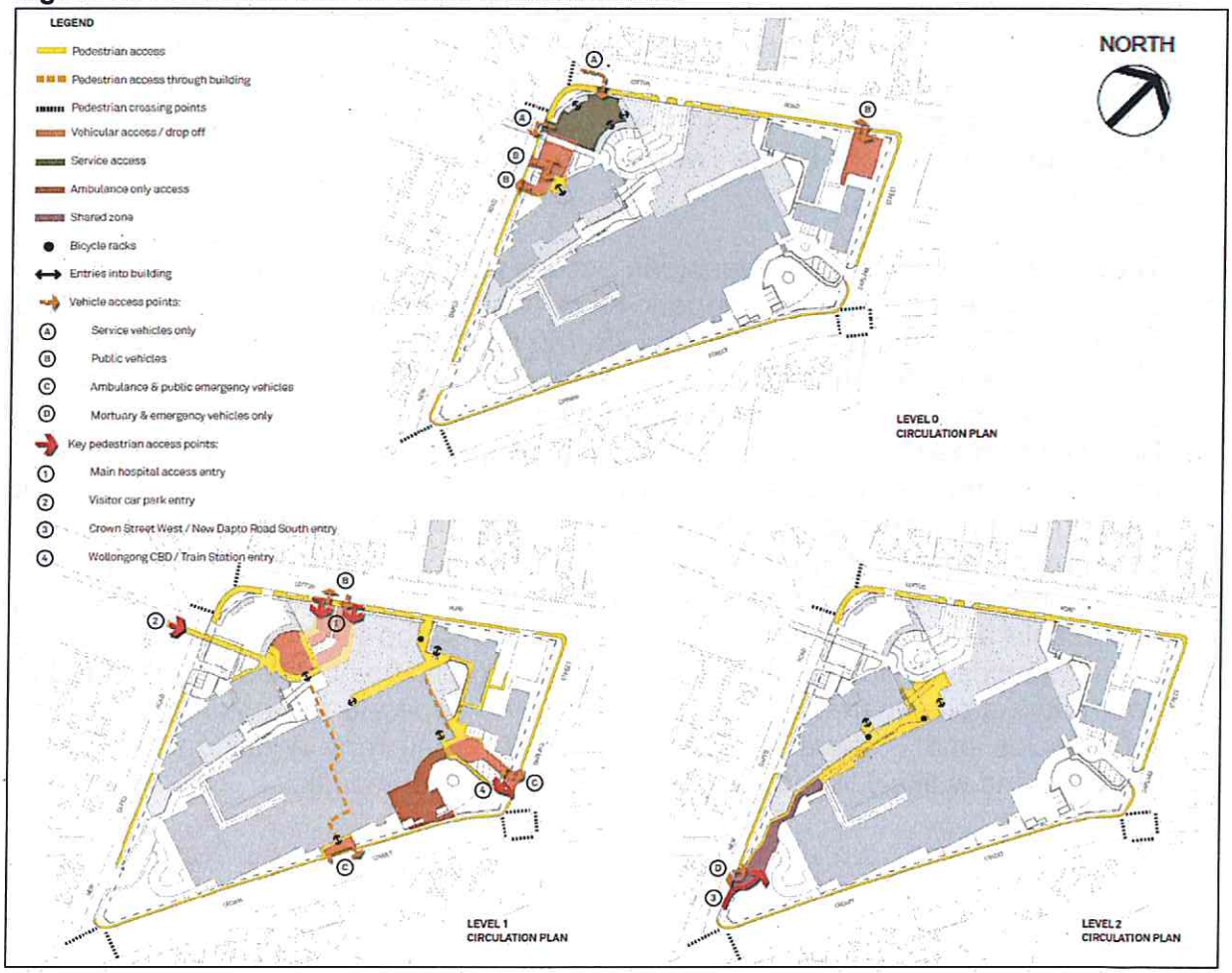
The department notes that council's DCP does allow for variance to the car parking requirements where it can be justified based on the amount of public car spaces in the locality, or the proximity to public transport nodes, or opportunity for cross utilisation with another use or an empirical assessment of car parking. Whilst the site is located in close proximity to public transport nodes, the existing high occupancy of the on-street car parking in the vicinity of the hospital highlights the existing shortfall in car parking provided on the site. As the proposal seeks to rely solely on on-street car parking, the department does not consider the variation to the car parking requirements acceptable as the on-street car parking spaces are already heavily used by staff and visitors and are not provided for the exclusive use of the hospital.

Accordingly, the department considers it appropriate that the proponent provide dedicated car parking to minimise the impacts on the surrounding local streets. The proponent has indicated that it is intending to develop a new multi-storey car park on the site. The NSW Government recently announced that the funding for additional car parking has been secured and that approximately 600 spaces will be provided in time for the operation of the new elective surgical services. Any car park would be subject to a separate approval and the department has therefore recommended the imposition of a condition that requires the proponent to demonstrate that works have commenced for the construction of a minimum of an additional 296 car parking spaces for the hospital or demonstrate that development contributions have been paid (discussed further in Section 5.4).

5.2.2 Vehicular and pedestrian access

The site currently provides a number of vehicle and pedestrian access points (see Figure 16). The main drop-off zone and entrance is located at Loftus Street. The proposal seeks to reconfigure this access point and relocate it marginally to the east. The reconfigured access would operate as the main drop-off zone and entrance to the main clinical buildings, as well as providing direct access to the proposed IESS/ACU building. The reconfigured drop-off zone provides a revised car park layout, including five new spaces, which will partially offset the loss of spaces on Hospital Road. Council identified the need to prioritise pedestrian access at the main entrance to minimise the potential for pedestrian and vehicle conflict. The proponent has indicated this will be done by way of additional directional signage for the site. The department considers the new layout acceptable.

Figure 16: Pedestrian and Vehicular Circulation Plan



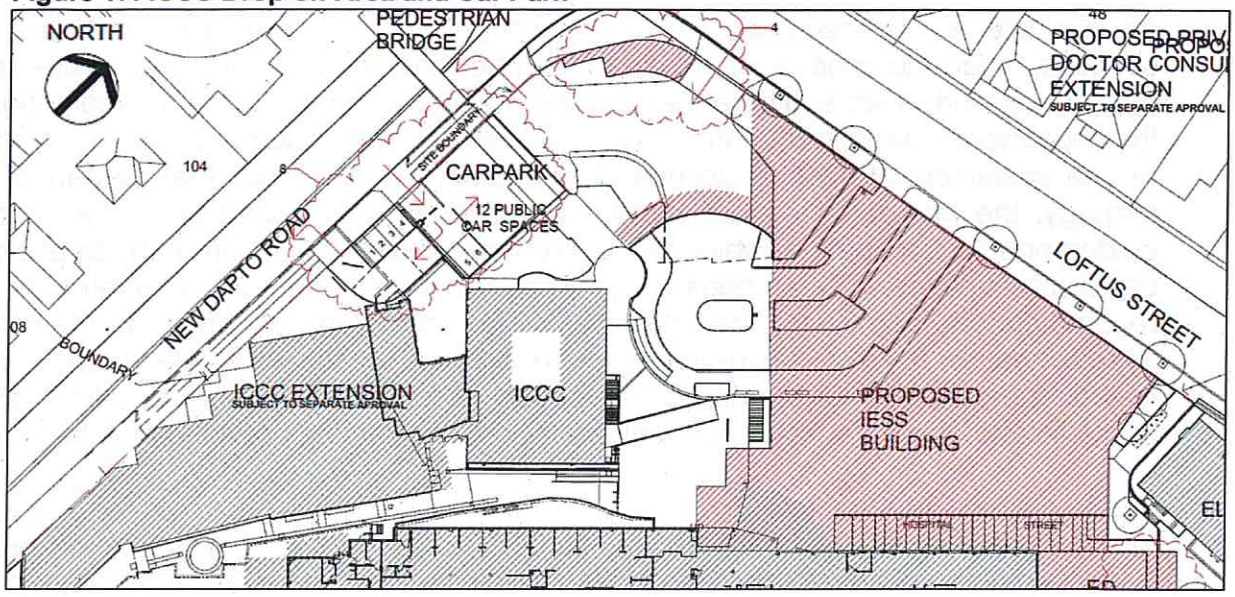
The main entry off Loftus Street is located immediately below the crest of a hill, which impedes sight lines for vehicles attempting to make a right hand turn to enter the site approaching from the west. A right hand turn ban is currently in operation to manage this risk. Council has requested that traffic calming measures be provided to allow for the removal of the right hand turn ban or that the ban remain and improved measures to discourage right hand turns be provided.

The proponent seeks to remove this ban and acknowledges that the signage is currently ineffective as a deterrent. The proponent proposes to install road cushions as an alternative to reduce the speed of vehicles travelling east along Loftus Street. Council raised concerns regarding the design of the proposed road cushions and impact on traffic flow and recommended the traffic calming devices be designed in consultation with residents and endorsed by council's traffic committee. The department considers that improving access to the main entrance to the hospital, whilst minimising the risk of an incident is appropriate. Accordingly, the department recommends that the detailed design of the traffic calming device be undertaken in consultation with council's traffic engineers and the affected residents on Loftus Street and submitted to council's traffic committee for endorsement and implemented prior to the operation of the new facilities.

The proposal also seeks to convert the remaining part of the internal Hospital Road into a pedestrian pathway. The reconfiguration is required to complement the conversion of the western end of Hospital Road into a shared pedestrian and vehicle pathway as part of the ICCC expansion works undertaken under Part 5 of the EP&A Act. This will improve pedestrian safety and access and is supported by RMS and council. The separation between Elouera House and the IESS/ACU building would also support a new pedestrian pathway from Loftus Street to the reconfigured pedestrian pathway. The department considers the pedestrianisation of Hospital Road appropriate given the western portion has already been approved for conversion.

The remaining vehicle and pedestrian access points will be largely unaffected by this proposal except the ICCC car park entry, which will be developed into a drop-off zone for ICCC patients. This will include the reconfiguration of the entry to the ICCC car park as an entry only vehicle cross-over and the provision of an additional vehicle cross-over for vehicles exiting the drop off zone and the car park further south along New Dapto Road (see Figure 17). Council raised no issue with the additional vehicle cross-over and the proponent has argued that it would provide a formal resolution to the current practice of drop-offs occurring in the driveway of the ICCC car park. The department considers that provision of a dedicated six vehicle drop-off zone, comprising four new spaces and two that previously formed part of the car park, acceptable as it would provide improved access to the ICCC and partially off-set the loss of spaces on Hospital Road. The vehicle egress point would be relocated further south and is considered acceptable as it would separate the entry and egress point for vehicles and is therefore not expected to create any additional adverse traffic impacts, and is likely to reduce vehicle and pedestrian conflict.

Figure 17: ICCC Drop-off Area and Car Park



RMS and council sought to have the existing Crown Street pedestrian entry and vehicular drop-off zone closed as it creates a mid-block pedestrian desire line across Crown Street away from safe crossing points provided at existing intersection traffic signals.

The proponent has argued that it is required as a secondary entry and incidents involving pedestrians illegally crossing Crown Street (as highlighted by RMS) that were occurring were not directly related to this hospital entry as the incidents were occurring between Staff Street and 100 metres east of Darling Street (i.e. to the east of the Crown Street entrance). Furthermore, the proponent intends to prepare and implement a directional signage plan to ensure that staff and visitors are aware of the main access points and routes within the campus and direct pedestrians to the main pedestrian access points. The department considers that this would be an appropriate solution given the improved pedestrian circulation plan.

The department considers that the hospital entrance on Crown Street is not necessarily the sole reason for pedestrians illegally crossing the road, rather other factors, including the location of an existing bus stop in front of the hospital on Crown Street, may also contribute. Due to the hospital's operational requirements and the fact that the hospital entrance is not necessarily directly responsible for the incidents, it would be inappropriate to require removal of this entrance and force pedestrians to alternate entrances on other streets.

5.2.3 Public transport

The site is adequately supported by public transport options with the Wollongong Train Station located approximately 600 metres from the hospital and bus stops located along Crown Street. The train services are frequent and whilst the grade of the path to the station may render the access unsuitable for some patients, the path would still be adequate for staff and visitors. The site is also supported by bus services that arrive at the campus at approximately 30 minute to hourly intervals during peak periods. The free shuttle bus service that operates in Wollongong's City Centre also provides connections to the Wollongong Train Station, the University, TAFE and beaches and arrives at 10 minute intervals during peak periods and 20 minute intervals during off-peak periods.

As the site is accessible by public transport, including commuter rail and bus services, alternate modes of transport to and from the hospital are available to employees and visitors. Therefore, the department supports the implementation of the proponent's proposed communications strategy, which seeks to encourage staff to use sustainable transport options. The department considers that as part of this strategy, the proponent should prepare a workplace travel plan and travel access guides prior to occupation, which would promote greater utilisation of these alternate transport options. The department has included these requirements as recommended conditions of approval. The recommendations in the traffic assessment in the EA are required to be adopted in the work place travel plan, including providing public transport fare subsidies to staff to encourage greater share of public and active transport to offset the lack of car parking provided on site.

5.2.4 Traffic impacts

The proposal would generate an additional 375 vehicles during the peak periods based on the additional beds and associated visitors and staff. The proponent's traffic analysis concludes that the additional traffic generated would result in a maximum of 170 vehicle movements on any one of the major routes, which would not exceed the capacity of the road network. Therefore, the proposal would have acceptable impacts on traffic efficiency and the operation of the surrounding intersections would not be adversely impacted.

The traffic assessment demonstrates that the level of service (LOS) for the surrounding intersections, including Crown Street/Darling Street, Loftus Street/New Dapto Road, Crown Street/New Dapto Road and Loftus Street/Darling Street intersections would remain at similar levels of service (see Table 3), inclusive of cumulative impacts from the other approved medical related development within the vicinity of the site.

Table 3: Intersection Operations

Intersection	Existing Level of Service		Projected Level of Service inc. traffic generated by the proposal and other approved development	
	AM	PM	AM	PM
Crown Street/Darling Street	A	A	A	C
Loftus Street/New Dapto Road	A	A	A	A
Crown Street/New Dapto Road	A	A	A	A
Loftus Street/Darling Street	A	A	A	A

The Darling and Crown Street intersection would experience a reduction in traffic efficiency, however, this is largely as a result of the cumulative traffic generation of future traffic growth, the surrounding development and the hospital. This intersection would experience a change in the Level of Service from A to C, which is still considered a satisfactory level of service according to the RMS Guide to Traffic Generating Development. Minimal increases in average delays and queuing would also occur. Accordingly, the development and the cumulative impacts of the surrounding approved development can be accommodated on the local road network and would maintain good to satisfactory levels of operation. The RMS considered that the proposal would not adversely impact the surrounding road network or the operation of intersections, and indicated that the traffic generated would be acceptable, subject to modified signal timings. Accordingly, the department considers the traffic generation acceptable as traffic efficiency can be maintained.

5.3. Heritage

Located on the subject site is the state heritage listed item, the 'Nurses Home', which comprises Elouera House and Lawsons House. This item is also listed on the Department of Health's s170 register as well as being locally listed in the WLEP. Also located on the subject site are two local heritage listed items being two fig trees to the south of Elouera House. Elouera House was constructed in 1937 with a 1941 addition. The proposal incorporates partial demolition, primarily of the 1941 addition, and reconstruction of the western elevation of Elouera House to its original 1937 form. The proposal also seeks to remove the two fig trees.

The proponent has argued that the impact of the proposal on the significance of the Nurses Home would not be unreasonable as the most significant component of the Elouera House would be retained and enhanced and the removal of the 1941 addition is an acceptable trade off given it is the least historically and aesthetically significant element of the listed item. The proposal would reconstruct Elouera House to its original configuration and the proponent has committed to developing the detailed design of the reconstruction with a specialist heritage consultant, salvaging the fabric from the partial demolition for restoration works.

The proposed IESS/ACU building would obstruct views to Elouera House from the west, however, the building will be setback from the Loftus Street boundary by 1.5 metres to align with the setback of Elouera House from Loftus Street, and views from Darling Street and from the east along Loftus Street will remain unobstructed. The proposal also incorporates further setbacks on the upper levels that sit above the height of Elouera House (from level 3) to ensure the development is sympathetic to Elouera House by minimising the visual dominance of the new building and optimising views to the item. The mitigation measures incorporated into the design of the IESS/ACU building and the other mitigation measures that the proponent has committed to in the restoration of Elouera House will minimise the level of impact on the significance of the item.

The Heritage Branch of the OEH reviewed the application and raised no objection as the reconstruction of the building to its original built form and continued use as accommodation for hospital staff are considered positive attributes of the proposal. The Heritage Branch did recommend that if any heritage items or relics are found during excavation that works cease and that the Heritage Branch be notified. The department has reflected this requirement in the recommended conditions.

The proponent, whilst acknowledging the local landscape significance of the fig trees, has argued that that the fig trees do not contribute to the significance of the Nurses Home and notes that one of the trees is decaying. Accordingly, due to the limited land for development on the main site and the operational requirements of the hospital, including large floor plates and connectivity with existing facilities, the proponent has indicated that an alternative solution (which included the retention of the trees) could not be found.

The department has considered the proponent's argument and the Heritage Branch's comments and accepts that the proposal would have an acceptable level of impact on the State listed item as:

- the most valuable elements would be protected and the removal is limited to moderately significant components

- the removal of the 1941 extension of Elouera House would result in the reconfiguration of Elouera House to its 1937 building form
- the public benefits of providing the hospital outweigh the public benefit of retaining the 1941 extension
- the proposal seeks to maintain the original use of the heritage item, which was for staffing accommodation purposes
- the proponent has incorporated a range of mitigation measures to minimise any impacts.

The department also accepts that the loss of the two fig trees is required to allow the required expansion of Wollongong Hospital, which provides greater public benefit than the retention of the trees. The department has recommended conditions requiring archival recording of the fig trees and the preparation of a heritage interpretation plan to document the history of the site, including providing site interpretation measures.

Council identified impacts on Aboriginal cultural heritage as a potential issue given the limited disturbance of the site in the vicinity of the fig trees and the site's vantage point. The OEH's Heritage Branch raised no issue with potential Aboriginal heritage or archaeology. The proponent has indicated that there are no known Aboriginal recorded sites on the hospital campus. The department considers that whilst excavation works would be undertaken, the site has been previously disturbed and includes fill of up to one metre across parts of the site. The department accepts that there is minimal likelihood of there being any relics on the site due to previous disturbance and use. Accordingly, the department considers the proposal would not have adverse impacts on Aboriginal cultural heritage. In addition, the proponent has committed to notifying OEH and adopting appropriate procedures if any relics or items are found. The department has included in the recommended instrument of approval advice regarding notification and documentation requirements in the *National Parks and Wildlife Act 1974*.

5.4. Development Contributions

Council's Section 94A contributions plan applies to all future development and requires a levy of one per cent of the cost of the development for local infrastructure works. Council's plan allows for exemptions to be applied to an application on behalf of the NSW Government for public infrastructure, including hospitals. The proponent considers that as the proposal provides a community benefit that the full exemption should be applied to the project. The proposal meets this criterion and therefore an exemption can be applied.

Council however has indicated that they would only support the exemption if the proposal provides on-site car parking to meet the car parking demand generated by the hospital, as the demand would otherwise be met through parking on the local street network. Council is responsible for maintaining the local streets. Council has stated that as the proposal fails to provide car parking, the required community benefits to qualify for an exemption from the levy have not been met. Council has included a recommended condition that requires payment of the levy, which is equivalent to $1,064,000. The proponent has indicated that the Health Infrastructure master plan for the site incorporates a future multi-storey car park on the western block adjoining the existing multi-storey car park. A State-wide review of car parking at public hospitals, *'Hospital Car Park Initiative'*, has recently been completed. The

review sought to facilitate the expansion of car parking at key hospital sites. The NSW Government has recently announced that Wollongong Hospital has been selected as a key site and that funding for the delivery of approximately 600 car spaces for Wollongong Hospital has been secured. These additional spaces would address the demand generated by this proposal, however, would still be subject to further approval.

The Minister for Planning and Infrastructure is able to vary the development contributions required after due consideration of the relevant contributions plan pursuant to section 94B of the EP&A Act. The department has considered the contributions plan and considers that the proponent meets the relevant criteria and therefore supports the proponent's request to waive the section 94A development contributions, provided the proponent is able to deliver the required car parking for the site.

Furthermore, the department has considered the principles of circular D6 which outlines when contributions should be applied to Crown development under Part 4 and considers the same principles are applicable for major projects and therefore only stormwater drainage works and local road works should be funded through payment of contributions or works in kind. As the proponent has committed to providing the necessary stormwater works, no development contribution would be required in this respect. In regards to contributions for local street works, council's contributions plan makes no provisions for works on the streets in the vicinity of the development and therefore there would be no relevant contributions. However, if the car parking is not provided in accordance with the Health Infrastructure's master plan for the site, the department considers that development contributions for local street works would be appropriate as the car parking demand would be supported by on-street car parking.

Accordingly, the department has included a recommended condition that requires the proponent to demonstrate that works on a car park with a minimum 296 car spaces is commenced prior to operation of the new hospital facilities, or development contributions be paid to council or works-in-kind be undertaken to the equivalent of $1,064,000 for the upgrade of local streets and the pathways within the vicinity of the hospital. The proponent has agreed to this condition.

5.5. Environmental and residential amenity

5.5.1 Operational noise impacts

The proponent has prepared an Acoustic Report that concludes that during operation there would be no adverse noise impacts over established criteria on the noise sensitive receivers in the vicinity of the site (residential development to the north and surrounding hospital buildings) if the recommended acoustic treatments are incorporated into the design of the plant area and the generator set.

The Acoustic Report recommended the following measures be considered in the detailed design of the plant and generator set to mitigate the noise impacts:

- acoustically designed rooms for the plant and generator set, which include lining and are fully sealed
- acoustic door for the generator set room
- cladding, silencers and mufflers
- barriers
- isolation mounts.

The department accepts that further detailed design and selection of the generator is required prior to establishing the final mitigation measures required to manage noise levels. Accordingly, the department recommends that a condition be imposed that requires the proponent submit to the department a further acoustic assessment by a qualified acoustic engineer that confirms the detailed design has incorporated the recommendations of the Acoustic Report and is capable of mitigating noise impacts from the plant and generator prior to certification of building works to ensure that they meet the recommended criteria. The proponent will need to demonstrate that the proposal is capable of meeting the project specific noise levels recommended in the Acoustic Report, based on Industrial Noise Policy guidelines for residential and hospital areas. The maximum noise levels identified for these receivers are:

- 46dB $L_{Aeq\ (15min)}$ during the daytime, 46dB $L_{Aeq\ (15min)}$ during the evening and 39dB $L_{Aeq\ (15min)}$ during the night time for residential
- 35dB $L_{Aeq\ (15min)}$ during the noisiest one hour period for hospital wards (internal) and 50dB $L_{Aeq\ (15min)}$ during the noisiest one hour period for hospital wards (external).

The proponent will also need to demonstrate that prior to occupation of the building that the operation of the generator would not result in noise levels above those recommended in the Acoustic Report, identified above.

The Acoustic Report also considered potential noise impacts from traffic generated by the proposal. The assessment concluded that no adverse noise impacts would result as noise impacts are expected to be below the maximum 2dB above existing conditions recommended in OEH's NSW Road Noise Policy.

5.5.2 Construction Noise Impacts

The proponent has identified the relevant noise management levels for the noise sensitive receivers (residential development, hospital buildings) during construction, in accordance with OEH's Interim Construction Noise Guidelines. The proponent has committed to preparing a noise and vibration management plan. The proponent has also indicated that due to the construction noise and vibration impacts on existing hospital services, construction over the weekend period is required to minimise impacts on existing hospital operations. This includes construction on Sundays.

The department does not support construction works being undertaken on Sundays given the proximity of the site to sensitive residential receivers. The department however considers longer hours on Saturday acceptable to facilitate reduced impacts on the operation of the hospital. The department recommends that construction hours of 8 am to 5 pm be supported on Saturdays. This extends construction hours from 4 pm to 5 pm in comparison to council's standard construction hours. The condition also allows for further one-off extension of hours (e.g. for concrete pours), with approval of the Director-General, if justified.

The department has recommended conditions to ensure that adequate measures are incorporated into the noise and vibration management plan to ensure the identified construction noise levels in the acoustic assessment are adhered, which should be prepared by a suitably qualified acoustic engineer.

5.5.3 Overshadowing impacts

The proposal would have minimal overshadowing impacts as the overshadowing from the building primarily falls on adjoining hospital buildings to the east, west and the south of the proposal. The Nurses Home would be partially overshadowed, however will still receive adequate levels of solar access.

6. CONCLUSION

The department has reviewed the environmental assessment and considered advice from public authorities in accordance with section 75I(2) of the EP&A Act. All the relevant environmental issues associated with the proposal have been extensively assessed.

The construction and operation of the additional health facilities as part of Wollongong Hospital would provide a significant contribution to the ongoing development and consolidation of the health precinct around the Wollongong Hospital. The development is consistent with the NSW 2021, which seeks to ensure access to world class health services and infrastructure are provided, and the strategic objectives for the area, as outlined in the Illawarra Regional Strategy.

The proponent has adequately addressed the Director General's Environmental Assessment Requirements and satisfactorily mitigated the potential environmental impacts associated with the proposal. The recommended conditions, implementation of the measures detailed in the proponent's EA and appendices, PPR and appendices, and Statement of Commitments seek to maintain the amenity of the local area, and adequately mitigate the environmental impacts of the proposal.

The department considers the site to be suitable for the proposed development and that the application is in the public interest. Consequently, the department recommends that project application be approved, subject to conditions.

7. RECOMMENDATION

It is recommended that the Deputy Director-General, Development Assessment and Systems Performance, as delegate of the Minister for Planning and Infrastructure:

a) **Consider** the findings and recommendations of this report;
b) **Approve** the Major Project Application (MP 10_0213), subject to conditions, under section 75J(1) of the EP&A Act, having considered all relevant matters in accordance with (a) above; and
c) **Sign** the attached Instrument of Approval (Appendix E).

6/6/12

Director
Metropolitan and Regional Projects North

6.6.12

Executive Director
Major Projects Assessment

8/6/12

Deputy Director-General
Development Assessment and Systems Performance