Blacktown City Council

Our ref MC-25-00007
(C25/69554)

9 December 2025

NSW Department of Planning, Housing and Infrastructure
Locked Bag 5022
PARRAMATTA NSW 2124

Recipient: patrick.nash@planning.nsw.gov.au

Attention: Patrick Nash

Dear Mr Nash,

New Rouse Hill Hospital – request for advice on Environmental Impact Statement (EIS)

Thank you for your correspondence dated 11 November 2025 requesting our advice on the EIS for the above project.

We continue to express strong support for the new hospital and have no in-principle objection to the material submitted in the EIS.

However, we would like to raise a number of issues which we are sure can be addressed through either amended plans, additional detail or conditions of consent to be included in any consent to this State Significant Development:

City Transport

1. It is noted that the traffic modelling for the intersection of Windsor Road and Commercial Road has been undertaken as a signalised T-intersection. In the Cudgegong Station Precinct Plan this intersection has a fourth leg which is to the west of Windsor Road. This means that Commercial Road is expected to be extended in a westly direction into the Blacktown LGA.
2. The impact of the traffic generated by the hospital will also affect the intersection of Schofields Road/Windsor Road, especially the left turn out of Schofields Road onto Windsor Road to get to the hospital. This must be evaluated to determine if this single lane is adequate or has to be upgraded to 2 left turn lanes to cater for the demand to get to the hospital.
3. Based on the above, traffic modelling needs to be revised to take into consideration:
    - the Windsor Road and Commercial Road intersection as a 4-way signalised intersection and an increased demand on the left turn out of Schofields Road to the hospital
    - the impact of traffic generated by the proposal within the Blacktown LGA must be assessed, especially from Schofields Road.

Landscape Architect

1. Provide sufficient on-site car parking

   The proposed location of the carpark is approximately 150 metres from the future local road within the BCC LGA in the Tallawong precinct. To minimise the likelihood of people parking on nearby local streets and walking across Windsor Road to access the hospital (which would place additional parking pressure on the surrounding neighbourhood), our team recommends that the proposal incorporate sufficient on-site parking for both staff and visitors, as well as bus stops within the site.

2. Provide shared path and street trees along Commercial Road

   There is an existing signalised pedestrian crossing at the corner of Windsor and Commercial Roads, which pedestrians and cyclists are likely to use to cross Windsor Road. Windsor Road is an arterial road and includes a shared path that connects north to Rouse Road and south to Schofields Road. We recommend that the proposed path along Commercial Road be a minimum 2.5 metres wide shared path, complemented by street tree planting to mitigate urban heat impacts.

3. Secure bike parking and Green Travel Plan.

   There is insufficient information on hospital population and bike-parking demand. In this regard, there is no clear indication of the expected number of staff, patients, and visitors. Without this information, it is difficult to assess whether the proposed bike-parking provision is adequate. As currently proposed, 10 secure bike-parking spaces is unlikely to meet the needs of a facility of this scale.

4. Inadequate total bike-parking provision

   The proposal includes 10 secure spaces within the end-of-trip facility and 20 external public bike-parking spaces. For a public hospital of this size and significance, 30 spaces in total appears substantially inadequate and not aligned with contemporary active-transport or sustainability objectives.

5. Concerns about location and visibility of external bike-parking spaces

   The landscape plans indicate the location of 20 external bike-parking spaces. However, only 16 appear to be shown. Additionally, the proposed locations seem to be tucked behind buildings or screened by vegetation, offering little passive surveillance and presenting security risks.

   External bike parking should be placed in highly visible, well-lit areas with CCTV coverage to ensure safety and encourage use.

6. Absence of a wayfinding strategy

   It is unclear whether a comprehensive wayfinding strategy has been developed. This is a critical requirement for any hospital environment. The challenges currently experienced at the new Nepean Hospital demonstrate the consequences of inadequate wayfinding. Visitors and families often struggle to navigate the facility, particularly at night when access points change and many doors are closed. A robust, clear, and intuitive wayfinding system should be an essential component of this design.

   As part of the wayfinding strategy, details should include directional details starting from transport hubs and the shopping centre, to better support access for visitors.

7. Tree canopy

   Tree canopy coverage is very low (9.56% - 11.51%) - it must be increased to meet at least the bare minimum of 15% which is what the NSW Government Architect's Office has determined a target for 'CBD' scenarios.

8. Integration

   Ground plane and pedestrian networks need better integration with future planned street networks and open/green spaces. The design reports suggest this will occur, but the drawing set does not show any evidence of these features in the design layouts.

Biodiversity

1. It is unclear why the BDAR by EcoLogical dated 27 October 2025 assesses only a subset of the proposal's impact area. The statement that the remainder of the construction footprint "*was previously assessed through a separate BDAR, which formed part of a Review of Environmental Factors (REF) for early works associated with this project (ELA 2025)*" is unclear and the details of the previous REF and BDAR were not provided with this application making it difficult to make an assessment. Have impacts been offset previously and should they be added to these and calculated as total impacts? Why has the total impact area not been added and cumulative impacts calculated? Why does the current BDAR not address cumulative impacts as is required under legislation?

2. It is unclear why the Mitigation Measures document by Architectus dated 22 October 2025 does not contain the biodiversity mitigation measures recommended in the BDAR such as timing of works, light shielding, installation of artificial habitat, pre-clearance fauna surveys and staged clearing protocols, making provision for ecological restoration and ongoing maintenance of retained onsite native vegetation.

3. A Project Arborist experienced in tree protection on construction sites should be engaged prior to the commencement of any works on site. The Project Arborist should monitor and report regularly to the Principal Certifying Authority (PCA) and the Applicant on the condition and protection of the retained trees during the works. The Project Arborist should supervise and monitor any excavation, machine trenching or compacted fill placement within the Notional Root Zone (NRZ) of retained trees throughout construction.

4. Tree Protection Fencing should be installed as shown on the Tree Location & Protection Plan Specification held at Appendix 2 and in accordance with Section 4.3 of AS4970-2025 and Appendix 6. Elsewhere, existing boundary site fencing has been determined as suitable to restrict and isolate the Tree Protection Zones (TPZs) of trees nominated for retention. Any additional Tree Protection should be installed under direction from the Project Arborist and in accordance with Section 4 of AS4970-2025 and Appendix 6. Tree protection should not be removed or altered without prior approval of the Project Arborist.

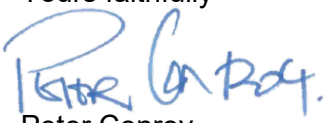
Social planner

1. This station will service staff and visitors and should provide access that focuses on safe and direct travel. Lighting upgrades at Randwick Health District provide an example of lighting upgrades that improve perceptions of safety, particularly for women and shift workers. It is recommended that the new hospital include lighting designed in line with best practice guides such as TfNSW Great Places Toolkit, which includes warm coloured lighting promoting feelings of safety as opposed to the proposed white light. A revised lighting approach will ensure that the site is accessible to all pedestrians day and night, year round.
2. The development should be supported by improved public transport services, particularly overnight and during off peak times to support shift staff. The site is not benefited by close proximity to high quality 24/7 transport options like an inner city area resulting in private car centric behaviour. To support staff, NSW Health is committed to supporting mode shifts to encourage more active transport. This shift relies upon quality public transport to ensure its uptake. The large scale investment and anticipated size of the hospital presents a sufficient need for an increase in 'off peak' services, encouraging the modal shift detailed in transport reports.
3. The design statement has included details of site facilities and amenities that will enhance services to staff, patients and visitors. These details include cafes, reflection gardens and end of trip facilities, many in line with feedback recorded to date. It is recommended that as the SSDA progresses these details are added to architectural designs as early as possible to ensure delivery. It is also recommended that the café design allow for a flexible service solution that permits staff access across extended hours. This will allow for café operation to serve shift staff without being opened externally, minimising operational requirements and reducing any security or surveillance risk.
4. Further to the CPTED recommendations, the pedestrian paths from ‘The Fiddler’ towards the hospital should be designed in a way to divert patrons from traversing through pedestrian paths in close proximity to the hospital, without reducing the safety of these pedestrians. The alternative route will discourage potentially intoxicated pedestrians from loitering or disturbing as they pass through, signage and way finding details will also encourage positive interactions.

Including these recommendations will support the future operation of the hospital and greatly improve the experiences of staff, public and patients.

If you would like to discuss this matter further, please contact Alan Middlemiss, our Coordinator Development Assessment, on 9839 6146.

Yours faithfully



Peter Conroy
Director City Planning & Development