

28 February 2025

SLR Ref No.: 630.30490.00000-RFI-Lingard-Feb.docx

Attention: Thomas Dales
Department of Planning, Housing and Infrastructure
Locked Bag 5022,
Parramatta NSW 2124

SLR Project No.: 630.30490.00000

**RE: Request for Further Information
Lingard Private Hospital Expansion (SSD-60316710)**

1.0 Introduction

This letter is submitted to the Department of Department of Planning, Housing and Infrastructure in response to the Request for Further Information (RFI) issued on 10 December 2024, relating to SSD-60316710 for the proposed expansion of the Lingard Private Hospital.

This letter aims to provide additional information in response to input provided by the Department of Department of Planning, Housing (DPHI) Letter dated 10 December 2024.

Other correspondence acknowledged by this response include:

- NSW Department of Climate Change, Energy, the Environment and Water (DCCEEW) – Letter dated 17 December 2024
- NSW State Emergency Service (SES) – Letter dated 9 December 2024
- City of Newcastle Council (Council) – Letter dated 18 December 2024

Amendments have been made to respond to the items raised by the agencies and Newcastle Council. Discussion of amended documentation has been provided at Section 2.

Section 3 provides responses to each of the items raised within received correspondence.

2.0 Amendments to Proposed Development

In response to the items raised by DPHI, DCCEEW BCD, SES and Council the following amendments have been made to the overall development:

- Amended Flood Emergency Response Plan (FERP) prepared by Northrop Engineers.

In response to the items raised the following enclosures have been provided:

- Appendix A – Shadow Diagrams
- Appendix B – Amended Cost Summary Report
- Appendix C – Amended Flood Emergency Response Plan (FERP)
- Appendix D – Northrop Engineers response to flood items

3.0 Response to Items

The matters from DPHI, DCCEEW and SES all relate to flood items, a response has been prepared by Northrop Engineers, refer to Appendix D.

Table 1 provides a response to the City of Newcastle submission.

Table 1 City of Newcastle

1. Newcastle Development Control Plan 2023

CN reviewed the Submissions Report (SR), amended architectural plans and supporting documentation against relevant provisions of the Newcastle Development Control Plan 2023 (NDCP 2023).

a. Part 9.0 - Building Envelope

CN's concerns remain regarding the non-compliant building setbacks for the Hopkins Street Precinct and Kingsland Street Precinct.

The SR states "increased setbacks and updates to the façade has been made to improve visual outcomes via articulation, improvement to material and colour palate." However, it is not clear where increased setbacks are incorporated.

In the Hopkins Street Precinct the low density scale of development across Tye Road, means compliance with the minimum 1.5m setback (Section E-12, Part 9.0 of the NDCP 2023) is important and recommended. The proposal's non-compliant setback to the eastern boundary and Tye Road of 1.38m is not supported.

The architectural plans indicate the built form is setback 1.63m to Lingard Street at Level 2. Amended plans for the Kingsland Precinct have not been submitted. CN has concerns for the proposal's non-compliance with the 3m setback for development above 10m.

CN recommends the development design for the Hopkins Street Precinct and Kingland Precinct be amended to ensure compliance with setbacks in Part 9.0 – Building Envelope of the NDCP 2023. This will ensure the bulk and scale of the development integrates with the surrounding residential area and mitigates adverse amenity impacts on adjoining properties, such as overshadowing and privacy.

b. Part 12.0 - Residential Amenity

CN's concerns regarding residential amenity remain. The amended architectural plans do not include hourly shadow diagrams or 3D shadow analysis to identify the habitable rooms and private open space of residential properties, as previously requested. The shadow impact to Mitchell Park has not been adequately addressed.

These shadow impacts result from the development's bulk and scale. CN recommends the design be amended to reduce the bulk and scale, and include larger setbacks, particularly at upper floor levels.

c. Part 13.0 - Public Domain Interface

An awning to the Hopkins Street Precinct is required. At a minimum, an awning to the Genea Clinic entry adjoining the foyer / reception space on Hopkins Street (shown on Dwg no. DA101) is recommended.

Response: The proposed building setbacks have been carefully considered in response to site constraints, existing conditions, and the functional requirements of the hospital. While the proposal includes minor non-compliances with the setback requirements outlined in Part 9.0 of the NDCP 2023, these are justified by design improvements that enhance the overall visual and amenity outcomes.



The setbacks, while slightly reduced in some areas, are offset by architectural treatments that improve articulation, materiality, and façade design, ensuring a high-quality built form that mitigates potential bulk and scale impacts. The design has also been developed to balance the operational needs of the hospital while maintaining an appropriate relationship with the surrounding residential areas.

In the Hopkins Street Precinct, the proposed 1.38m setback, while marginally below the 1.5m requirement, is considered acceptable given the improvements to visual outcomes and articulation. Similarly, for the Lingard Precinct, the 1.63m setback at Level 2 and the approach to upper levels have been designed to appropriately manage transitions in scale and maintain a reasonable relationship with adjacent properties.

It is considered the proposal achieves an appropriate built form outcome for a hospital use in a residential area through architectural design and treatments. The design ensures integration with the surrounding context while balancing the functional and operational requirements of the hospital.

Additional shadow diagrams have been provided at Appendix A. The overshadowing of Mitchell Park is minimal, occurring only at 9 AM during winter. The affected area consists of large trees and on-street parking that would naturally be in shadow. The proposal ensures ample daylight reaches the trees and surrounding area at all other times.

The amended shadow diagrams include percentage calculations for the surrounding residential dwellings and confirm compliance. The most significant impact is on 11 Merewether Street in the afternoon; however, the existing shadow diagrams show that this is also the present state, refer to Figure 1 & 2 below. In the previous iteration of plans the second level wall was also setback further from this boundary.

The proposal does affect the adjoining Hopkins Street dwellings at 3 PM; however, there is no impact during the morning hours. The proposed setbacks are consistent with the existing dwelling setbacks in the area. While there is some overshadowing in the afternoon, the dwellings receive sufficient sunlight in the morning,

Figure 1 – Existing Shadow (3pm)

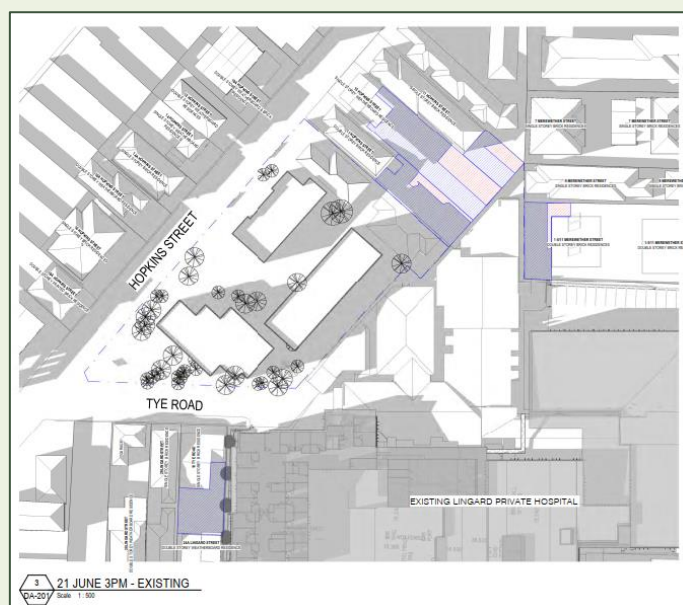
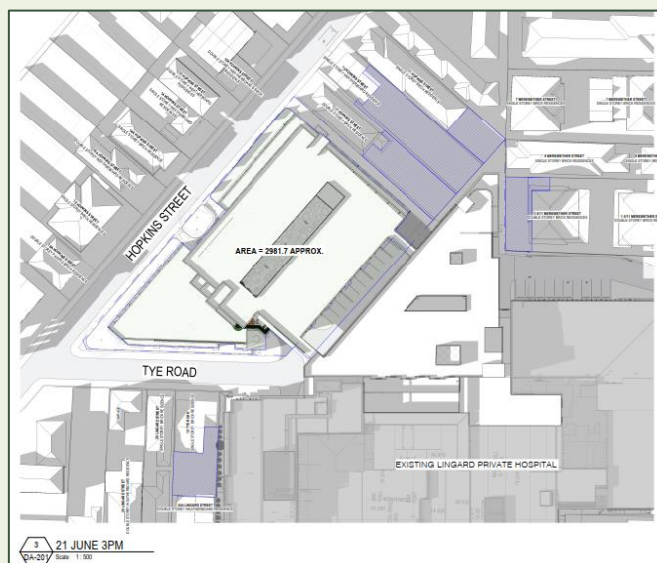


Figure 2 – Proposed Shadow (3pm)



An awning is not included on the Genea Clinic as part of the design approach to ensure the building maintains a refined and minimal visual presence that is more compatible with the surrounding low-density residential area. Introducing an awning would create a more commercial or retail-oriented streetscape, which is not in keeping with the residential character of the precinct and would hinder quality landscape outcomes and tree retention

Instead, the design prioritises a softer transition by using appropriate setbacks, landscaping, and façade articulation to minimise bulk and scale. These elements help the building integrate with its surroundings without introducing unnecessary structural additions that could detract from the residential context and narrow street. The absence of an awning also reduces visual clutter and maintains a more cohesive streetscape, ensuring the development remains sensitive to its setting.

Environmental Planning and Assessment Act 1979 (EP&A Act) establishes the framework for State Significant Development (SSD), with Section 4.15(2) explicitly stating that Development Control Plans (DCPs) do not apply to SSD projects. Notwithstanding this, the proposed design has been carefully developed to address the challenges of integrating a hospital facility within a residential area, ensuring an appropriate balance between functionality, local amenity and the surrounding context.

2. Height Non-Compliance

The amended clause 4.6 variation request states the building height non-compliance comprises acoustic barrier, stair lid on the western boundary and the stair lid and lift overrun on the eastern boundary. These components result in a 11.6% variation to the 10m maximum building height development standard.

The non-compliant height coupled with reduced setbacks on the eastern boundary of the Hopkins Precinct, exacerbate the amenity impacts. CN recommends the design is amended to reduce the bulk and ensure upper floor levels comply with the setback requirements and maximum building height development standard. CN recommends the applicant is required to submit additional shadow diagrams at hour intervals between 9am and 3pm during the June 21 winter solstice.

Response: The proposed minor height variation is necessary to accommodate essential building elements, including the acoustic barrier, stair lids, and lift overrun, all of which are integral to the functionality and accessibility of the development in a confined space. The additional height does



not contribute to any unreasonable amenity impacts on neighbouring properties, as these elements are localised and do not significantly increase the building's perceived bulk or scale.

The acoustic barrier is a critical component for mitigating noise impacts, ensuring a higher level of residential amenity within the development and for surrounding properties. The stair lids and lift overrun are fundamental for safe and compliant access, particularly for emergency egress and accessibility provisions. These elements are minor and do not add to the overall massing of the building in a way that would materially impact neighbouring amenity.

Furthermore, the non-compliance occurs at discrete points, setback from the site boundaries and does not extend across the entire building form, the negligible shadow impacts are shown on the Shadow Diagrams. The maximum variation represents an 11.6% increase beyond the 10m height standard, for a small area of the roof to accommodate the stair lid which, is minor in the context of the overall development. The height exceedance for the terrace and plant screening is less, at approximately 4%. Given that these components are functional necessities rather than habitable spaces and occupy a small percentage of the roof area their impact on overshadowing and visual bulk is negligible.

The reduced setbacks on the eastern boundary have been designed in response to site constraints and urban design principles, ensuring an efficient use of space while maintaining appropriate separations to mitigate any perceived impacts. Existing shadow diagrams demonstrate that overshadowing remains within acceptable limits, and additional diagrams at hourly intervals will likely reinforce this conclusion.

Overall, the proposed height variation does not result in any unreasonable adverse impacts on neighbouring properties in terms of bulk, scale, overshadowing, or privacy. The minor exceedance is justified by the functional necessity of the affected building elements and their limited contribution to the overall form, ensuring a well-balanced outcome that meets the intent of the planning controls while supporting high-quality urban design. Additional shadow diagrams are provided at Appendix A.

3. Voluntary Planning Agreement

The proposed development plans and supporting technical studies do not reflect the full extent of the agreed works in the voluntary planning agreement (VPA). CN requires clarification on how and when the proponent plans to deliver the works with the application for Lingard Precinct.

This includes details of the nature and extent, timing, manner of delivery and indicative value of the contribution and works listed in Schedule 1 of the VPA.

The items listed in the VPA schedule to be completed prior to the issue of any Occupation Certificate for the development of the Lingard Precinct include:

- Item No. 2 Works - Tye Road Streetscape
- Item No. 3 Works - Merewether Street Streetscape
- Item No. 4 Works - Lingard Street Streetscape
- Item No. 5 Works - Union Street Footpath
- Item No. 6 Works - Public Park

The proposed improvements to road works, pedestrian walkways, public domain and open space areas will benefit staff, patients and visitors to the Lingard Hospital precinct. CN received correspondence from the applicant on 16 October 2024 to discuss Item No.6 Works - Public Park. Works identified in the VPA for this item include the installation of park furniture, signage and lighting up to a maximum value of \$50,000 at Townson Oval. CN provided a landscape concept for the works to the applicant.

However, CN has not received further correspondence for other items on the VPA schedule. Alignment of active transport connections, intersection upgrades and other street and streetscape elements around Lingard Hospital is essential to maintaining a continuous and connected network.



A coordinated approach to deliver the VPA schedule is required to mitigate connectivity issues and conflicts between planning and delivery of active transport connections and intersection upgrades. For example, CN does not support the pedestrian crossing on Merewether Street shown in Appendix C Amended Landscape Report without planning for intersection works.

CN is committed to working with the applicant to ensure consistency between the works committed to in the VPA and the SSD. CN requests a meeting to discuss the VPA schedule and to understand the timing for when CN will receive concept designs for the works associated with Lingard Hospital for comment and approval.

Response: The intersection upgrades noted above are under Item 1 Schedule 1 of the VPA and are detailed as a monetary contribution to be paid prior to the issue of an OC.

Item 2 is for the Tye Road streetscape works, which have been detailed in the previously provided architectural plans, landscape plans and civil plans. These will be detailed further at CC stage and are required for the hospital to function and be operational, notwithstanding the VPA. These works are also required to be completed prior to the issued of an OC on the Lingard Precinct.

Items 3 – 5 including Merewether, Lingard and Union Street works. Predominantly footpaths, street reconstruction and streetscape elements, all to be completed prior to the issue of an OC for the Lingard Precinct. These works are included where required under the DA and will be detailed further once consent is received and construction documents can be prepared. HealtheCare are committed to working with Council to achieve the desired outcomes under the VPA for the overall benefit of the hospital and surrounding community. As the items above require detailed design it is pertinent to obtain approval prior to preparing detailed documentation for review and approval by Council.

A plan is being prepared for Item 4 and will be with Council for approval in the coming days.

4. Development Contribution

CN reviewed the cost summary report to determine the section 7.12 development contributions. The cost report required under s208 of the Environmental Planning and Assessment Regulation 2021 should include GST. The report excludes GST.

Response: A cost summary report including GST is provided at Appendix B.

5. Stormwater Management

The submitted responses and revised civil and stormwater plans generally address CN's previous comments. Conditions can be provided once other engineering matters have been adequately addressed.

Response: Noted, no further action required.

6. Vehicular Access, Driveway Design and Crossing Location

a. Tye Road and Merewether Street Impact Assessment

Tye Road will be extended as a through link to Merewether Street. The Submissions Report states it will remain private property. CN's concerns for Tye Road and Merewether Street impacts remain and the following matters are to be addressed:

- *Concerns the swept path analysis for the Heavy Rigid Vehicle (HRV) waste and oxygen supply vehicles indicates exits only onto Merewether Street and the location of the oxygen supply enclosure at the south-western end of Tye Road in the Hopkins Precinct.*
- *Clarity on how HRV waste and oxygen supply trucks will enter the site through local streets and how these vehicles will pass the proposed private section of the Tye Road extension.*
- *How deliveries will be managed without blocking through traffic for Tye Road.*
- *Demonstrate how safe two-way traffic movement for a combination of cars, HRV waste and oxygen supply vehicles can be accommodated.*



Response: Given the constraints of the existing hospital site, access options are inherently limited. However, the proposed through road represents a significant improvement over the current delivery arrangements by streamlining vehicle movements and reducing potential conflicts.

The road has been designed to ensure all delivery vehicles exit via Merewether Street, effectively mitigating any conflicts at the western entrance of Tye Road. While Tye Road remains a two-way street, this is primarily to maintain access to Hopkins Street for the 4 existing residential dwellings with direct access to Tye Road. All other traffic associated with the hospital will be directed to exit via Merewether Street to ensure an efficient traffic flow.

To further support operational efficiency, the proposal includes three designated loading bays, allowing service and delivery vehicles to remain off the through road. Gas deliveries will be minimal, quick, and scheduled during off-peak hours to minimise any potential disruptions. The delivery vehicle will not obstruct the road, ensuring other vehicles can pass freely and can use the theatre loading bay as well.

- **Swept Path Analysis & Access onto Merewether Street:** The current design accommodates Heavy Rigid Vehicles (HRV) such as waste and oxygen supply trucks exiting onto Merewether Street. The oxygen supply enclosure at the south-western end of Tye Road within the Hopkins Precinct has been strategically positioned for operational efficiency while ensuring minimal disruption to traffic flow.
- **Access for HRV Waste & Oxygen Supply Trucks:** As outlined in the traffic response within the previous RFI response HRV access from Hopkins Street does require additional manoeuvring space, however this is consistent with the existing situation. It is considered that the widening of Tye Road and the ability to exit in a forward direction via Merewether Street, as opposed to reversing out and exiting via Hopkins Street is a vast improvement on the efficiency and safety of the current situation.
- **Delivery Management & Traffic Flow:** Deliveries will be scheduled and managed to prevent any obstruction to through traffic on Tye Road. Designated delivery zones and timed access controls will be implemented to avoid congestion.
- **Safe Two-Way Traffic Movements:** The road design has accounted for safe two-way traffic movement, including provisions for both standard vehicles and HRVs. Adequate turning radii, lane widths, and passing opportunities have been integrated into the design to ensure smooth vehicle circulation.

The Submissions Report states CN's concerns about the width of Tye Road and associated impacts on Hopkins Street are a separate matter CN is to resolve as part of an application under Section 138 of the Roads Act 1993. CN maintains, Hopkins Street and Tye Road are key functional road connections for the development, and it must demonstrate that the serviceability requirements of Tye Road are not undermined or compromised.

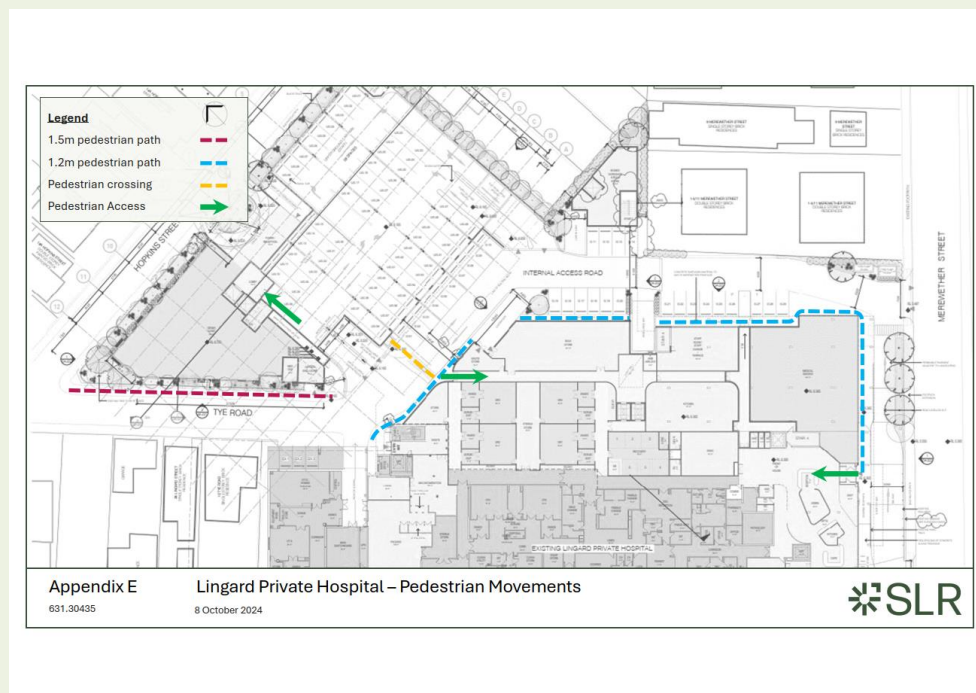
CN recommends the applicant is required to demonstrate:

- *The Tye Road extension provides legal vehicular and pedestrian access rights over the private section of the road and ensures 24/7 access to the public under Part E, Section E12 of the NDCP 2023 and AS1742.10.*
- *The provision of safe, connected pedestrian movements and footway access between Tye Road to Merewether Street via the Lingard Street Precinct under Part E, Section E12 of the NDCP 2023.*
- *Provision for a turning head at the southern limit of the public road component for instances where the private component of Tye Road is closed under BAU conditions by the operator.*
- *Driveways on Merewether Street upgraded to provide continuous footpath treatments similar to Cooper Street, Newcastle West or Steel Lane off Hunter Street.*



Response: The proposal does not propose any traffic restriction measures, such as gates across the Tye Road access, there will be no instances where the road is closed off or requirements for this under business-as-usual operation.

Appendix E of the previous traffic response showed the pedestrian movements from Tye Road to Merewether Street, extract below. There will be no times under normal operation when this access is unavailable.



The north side of Merewether Street has a continuous footpath and part of the works required under the VPA include a continuous footpath along the south portion of Merewether Street, to Mitchell Street.

b. Parking Demand - Bicycle and Motorcycle

CN's concerns regarding bicycle and motorcycle parking remain. The bicycle and motorbike parking numbers do not align with Sections E12 and C1 of the NDCP 2023 and end user facilities must be appropriately designed for the development to support the number of staff.

Response: The proposal provides space for 20 secured bikes and 14 external spaces for visitors. The proposal includes end of trip facilities adjacent to the secure storage area, in the basement level of the carpark. There is also a staff change area in the Lingard Precinct that is yet to be detailed but will also include lockers and change facilities. The bicycle parking exceeds that required under the DCP (1 per 10 staff = 15).

The proposal allows for 8 dedicated motorcycle parking spaces within the three precincts, while this is less than the DCP requirement of 15 (1 space per 10 parks = 151/10) the proposal exceeds the carparking requirements which can also accommodate motorcycles.

c. On-Street Parking Impacts

No further information is required in relation to the proposed on-street car parking provision. If required, CN can provide recommended conditions of consent to manage this along Tye Road and Merewether Street frontage.

Response: Noted, no further response required.



d. Traffic Generation, Safety and Planning Proposal VPA works

As mentioned above in item 3, CN has concerns about road upgrade works under the VPA.

The Submissions Report does not address how they will be incorporated into the proposal.

CN requests a joint meeting is held with CN, SLR and the DPHI to discuss this matter. SLR stated the objectives of the planning proposal and the subsequent VPA between the owners/applicants and CN are separate matters. However, the public domain and traffic works required by the VPA are specific to the precinct needs of the Hospital and are required to form part of the Lingard Hospital expansion.

These upgrades are essential for managing conflicts between various road users, including pedestrians, cyclists, and vehicles, and must be integrated into the design and execution of the proposal. CN recommends the applicant is required to submit appropriate plans and documentation demonstrating how the proposal aligns with the schedule of works identified in the VPA. Some works will require the prior approval of the Newcastle Traffic Committee.

CN requests a meeting to discuss the VPA schedule and to understand the timing for when CN will receive concept designs for the works associated with Lingard Hospital for comment and approval.

Response: Healthcare (HeC) and its representatives would be happy to meet with Council to discuss this matter.

e. Kiosk Substation - (Appendix V)

The Submissions Report states the kiosk substation is no longer required as part of this development. CN is concerned that such critical infrastructure has not been properly considered, planned for, or embedded in the building and landscape design. Further information is required to confirm how the development will operate without a kiosk substation. Alternatively, evidence of consultation with Ausgrid, under State Environmental Planning Policy (Transport and Infrastructure) 2021, can demonstrate it is not required.

Response: Originally it was thought the sites would remain as separate Lots, however they will now be consolidated as part of the consent. As the sites will be consolidated this enables the hospital to use the existing Chamber Substation which contains two 1500kVa (nominally 4200Amps) substations.

The existing hospital currently uses less than 2200Amps leaving 1900Amps for the new development.

Assessment by electrical engineers (Marline) proposed maximum demand was below the 1900Amps available and therefore there is confidence that there is sufficient capacity in the existing Chamber Substation.

7. Staging

CNs concerns raised in the previous submission regarding staging remain.

The staging does not indicate when the VPA public domain works will be constructed. As stated under Section 3 and 6d. above, CN requests a meeting to discuss the VPA schedule and to understand the timing of works associated with Lingard Hospital including when CN is to consider the concept designs for comment and approval.

Response: HeC would be happy to meet with Council to discuss these items, noting the VPA states where these items are to occur prior to issuing an occupation certificate.

8. Heritage

CN recommends a Heritage Interpretation Plan (HIP) be conditioned on any determination issued. The condition is to require the HIP be prepared and provided to CN's heritage officer for consideration and endorsement before the issue of any construction certificate. The condition is to state the plan be prepared by an experienced heritage interpretation practitioner and under the Heritage Council's "Interpreting Heritage Places and Items Guidelines" (2005). The plan must



interpret the former uses and history of the site in a way that is engaging, informative and readily accessible to most visitors.

Response: Given that the site is not designated as having local or State heritage significance or items, nor is it located within a heritage conservation area, the proposed requirement appears to be excessive. The design has thoughtfully incorporated European heritage in a meaningful way, while Aboriginal heritage will be respectfully acknowledged throughout the project as part of the Designing for Country process.

9. Waste Management

CNs concerns regarding access arrangements for service vehicles to enter and leave the site in a forward direction, and at a time that does not impact the amenity of adjoining residents, have not been addressed. This concern remains outstanding.

Response: The design ensures that service vehicles can enter and exit the site in a forward direction, improving safety and efficiency. Under the current arrangement, waste collection vehicles must reverse approximately 70 meters out of Tye Road onto Hopkins Street, passing residential dwellings to collect waste at the end of Tye Road. The proposal introduces dedicated waste storage areas near loading bays, allowing service vehicles to enter via Tye Road and exit via Merewether Street. The through road design is considered a significant improvement, benefiting both neighbouring residents and users of the surrounding public roads by reducing traffic conflicts and enhancing overall accessibility.

10. Social Impact Assessment

CN recommends the applicant is required to address relevant provisions of the NDCP 2023, including but not limited to Section C7 - Safety and Security and Section C8 Social Impact.

a. C7 Safety and Security

SLR's Crime Risk Assessment (CRA) for Crime Prevention through Environmental Design (CPTED) does not address the application amendments.

The CRA scope includes CPTED measures in a general way rather than specific treatments for the proposed development. Therefore, it is difficult to assess the proposal for any possible deficiencies in information against C7 of the NDCP 2023. As part of the amendments, treatments for high risk areas such as basement car parks, after hours areas, courtyards, staff rooms, ATMs, bicycle end of trip facilities are to be incorporated and an updated CPTED report is required.

Response: Hospitals inherently incorporate comprehensive safety and security measures as part of their design and operational framework. These include controlled access points, CCTV surveillance, well-lit public areas, emergency response protocols, and staff presence in critical areas to ensure a secure environment for patients, staff, and visitors. Additionally, high-risk areas such as basement car parks, after-hours zones, courtyards, staff rooms, and bicycle end-of-trip facilities are carefully designed to prioritise visibility, access control, and safety.

The CPTED prepared for the project applies Crime Prevention through Environmental Design (CPTED) principles comprehensively. The approach taken is appropriate for a development of this nature.

b. C8 Social Impact:

The Social Impact Assessment (SIA) and later documentation do not provide evidence of the impact of the loss of affordable housing resulting from the proposal. This is required, and the SIA is to be amended to address the proposal's impact on the loss of affordable housing in the locality.

Should there be a net loss, a condition on any determination is to be imposed for the provision of comparable affordable rental housing, or a cash contribution, value in kind or similar. CN recommends the applicant is required to provide further information responding to the potential negative impacts.



Response: The expansion of the hospital presents significant benefits to the community, particularly in improving healthcare access, economic growth, and long-term well-being. While we acknowledge the concern regarding the loss of affordable housing, it is essential to consider the broader social and economic advantages associated with this proposal.

Key benefits of hospital expansion:

- **Enhanced Healthcare Services:** The expanded health facility will provide improved medical services, reduce wait times, and increase capacity to accommodate a growing population. This is particularly critical in addressing urgent and specialised healthcare needs.
- **Strategic Urban Development & Accessibility:** Expanding an existing hospital in a well-connected urban area makes far more sense than constructing a new facility in a different location. The current site already benefits from established infrastructure, public transportation links, and proximity to the communities that rely on its services. Building a new hospital elsewhere would likely result in accessibility challenges for residents, increased costs, and a longer timeline for delivering critical healthcare improvements.
- **Job Creation and Economic Growth:** The hospital expansion will generate employment opportunities during both construction and operation phases. This includes jobs in healthcare, administration, and support services, which contribute to economic stability in the region.
- **Long-Term Community Health Benefits:** Increased access to healthcare improves overall community well-being, leading to reduced emergency cases, better preventative care, and improved life expectancy. A stronger healthcare system benefits all residents, including vulnerable populations.
- **Infrastructure and Urban Development Improvements:** The expansion often leads to broader urban enhancements, including better public transportation, improved road networks, and additional community amenities.

To reiterate, while the loss of lower-cost housing may present a minor impact to the community, repurposing the site for health services is considered a reasonable trade-off and provides extensive community benefit. The units proposed for demolition are Strata-titled, therefore under Part 3, Clause 46(2)(a) of the SEPP (Housing) 2021, the provision does not apply.

11. Flood Management

The amended Flood Risk Assessment Report prepared by Northrop Consulting Engineers provides comparison maps indicating the flood level increases by approximately 70mm along the eastern side of Lingard Street between Merewether Street to Hopkins Street (including sections of Hopkins Street to Tye Street) during the 1% AEP flood events.

CN's survey data (dated 2009 following the Pasha Bulker flood event) for some properties along Lingard Street indicate lower building floor levels than those in the amended Flood Risk Assessment Report.

Further investigation is required to determine the impacts and risks associated with the flood level increase on the existing properties and the flood mitigation measures proposed to manage flood risks. A further survey of the existing properties on the east side of Lingard Street is required to confirm the building floor levels.

Response: Refer to Appendix C & D for a detailed response on the flood items and the updated FERP.



4.0 Conclusion

The proposed development represents an exciting opportunity to upgrade the existing Lingard Hospital to meet the growing demand for health services in the Newcastle region and beyond. All health services facilities are experiencing increasing pressures associated with population increase and pressure on existing services, the site is well located to assist with achieving additional capacity to address this ongoing pressure.

The development will see improvements to specialised services offered at the hospital along with an increase in hospital ward capacity alleviating pressure on the existing hospital facilities and to meet future needs of the community. It seeks to balance the needs of the hospital with the constraints of the site through specific design solutions and mitigation measures.

Potential impacts of the redevelopment of the hospital have been carefully considered in the evolution of the design. The development generally complies with all applicable planning controls and instruments with appropriate justification where non-compliances are proposed. It achieves the desired planning outcomes for the locality as established in NLEP 2012. The built form is considered contextually appropriate and well suited to the site and consistent with the desired future character of the locality.

Given its overall consistency with planning controls and the absence of any significant adverse environmental impacts, the project is considered to be in the public interest and worthy of being granted development consent subject to appropriate conditions.

Sincerely,

SLR Consulting Australia



Clare Brennock

Principal Planner & NSW Team Lead

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Appendix A – Shadow Diagrams

Appendix B – Amended Cost Summary Report

Appendix C – Amended FERF

Appendix D – Northrop Engineers Flood Response

