ETHOS URBAN

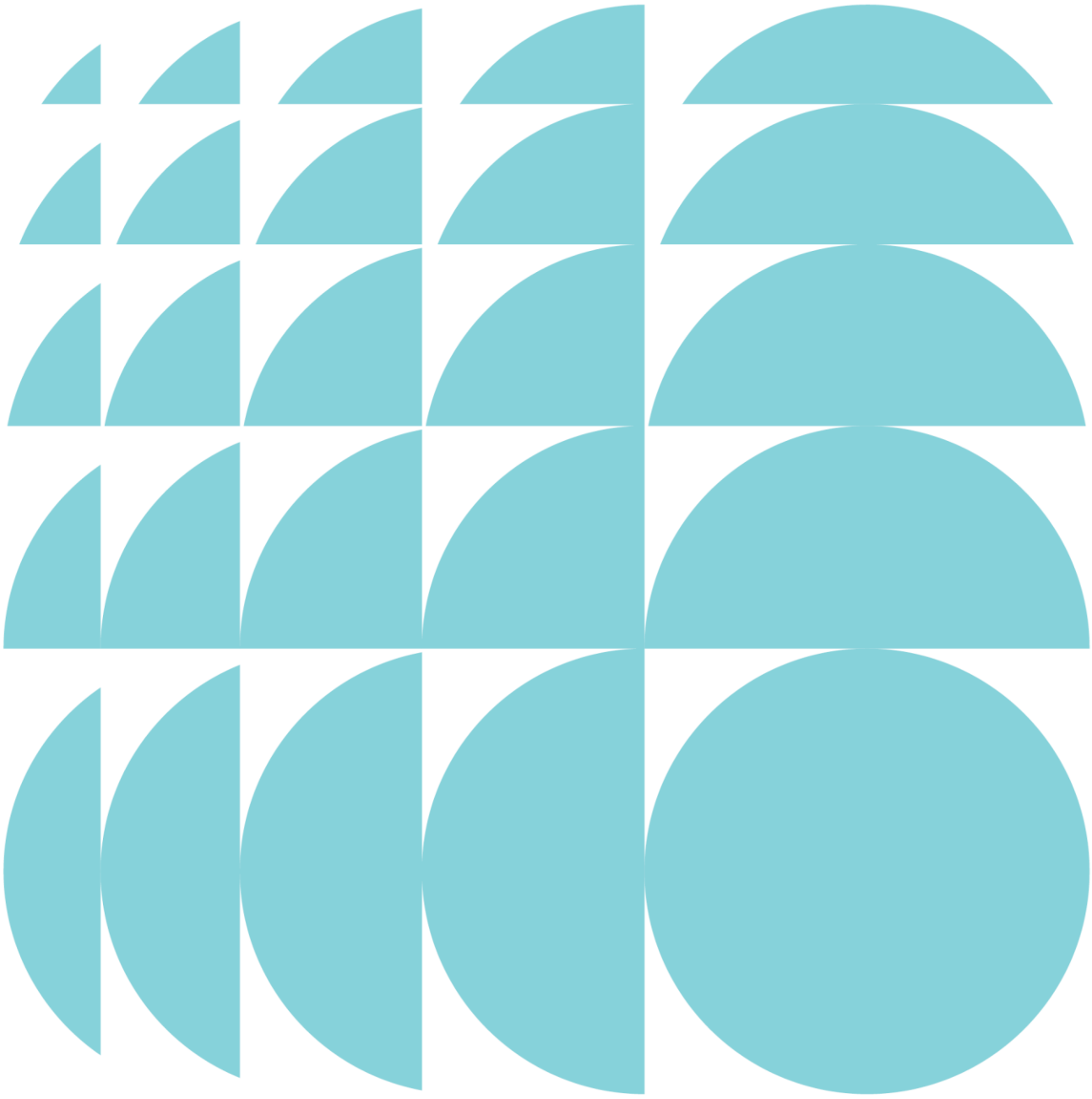
Social Impact Assessment

Greenwich Hospital Redevelopment

97-115 River Road, Greenwich

Prepared for HammondCare

10 May 2022 | 2190376



A note on COVID-19: *COVID-19 is an unprecedented global health crisis and economic event that is rapidly evolving. At the current time, the research and analysis of economic and population data – such as forecasts of population or employment growth and so on – reflects a return to ''business as usual" scenario, while also noting the potential impacts that may be associated with the COVID-19 virus, travel and border restrictions impacting on migration numbers, and the anticipated return to growth in economic or population indicators.*

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1.0 Introduction

1.1 Overview and project background

This Social Impact Assessment report supports a State Significant Development Application (SSDA) for the proposed Greenwich Hospital redevelopment (reference SSD13619238) at land identified as 97-115 River Road, Greenwich, NSW. The applicant is HammondCare, on behalf of NSW Health Infrastructure.

The proposal is for the detailed design and construction of the redevelopment of Greenwich Hospital into a new integrated health campus including a new hospital building, two assisted independent living buildings, following concept approval for the project (SSD 8699).

The detailed SSDA (SSD 13619238) seeks consent for the following:

- Demolition of the existing hospital building and associated facilities at the site
- Construction of a new hospital facility and integrated healthcare uses and services, including:
  - A new main hospital building up to RL 80.0
  - Two new seniors housing buildings, northern building up to RL 56.36, and southern building up to RL 60.65
  - A new 2-3 single storey respite care building up to RL 56.9
- Construction of associated site facilities and services, including pedestrian and vehicular access and basement parking
- Site landscaping and infrastructure works
- Preservation of Pallister House which will continue to host dementia care and administrative functions.

This report addresses the requirement for a Social Impact Assessment (SIA) specified in the Department of Planning, Industry and Environment's Secretary's Environmental Assessment Requirements (SEARs) for the project – as set out in **Section 1.2** below. It follows the principles set out in the *Social Impact Assessment Guideline for State Significant Projects* (SIA Guideline) released by NSW DPIE in July 2021.

1.2 Secretary's Environmental Assessment Requirements

The NSW Department of Planning, Industry and Environment (DPIE) issued Secretary's Environmental Assessment Requirements (SEARs) to the applicant on 24 February 2021 for the preparation of an Environmental Impact Statement (EIS) for the proposed development, in accordance with section 4.39 of the EP&A Act. The SEARS outlines the following requirements (see **Table 1**).

Table 1 SEARs specifications and report references

SEARs	Where addressed in this report
9. Social impacts	
• Provide a Social Impact Assessment prepared in accordance with the draft Social Impact Assessment Guideline 2020.	***Section 8.0***

1.3 Purpose and structure of this report

The purpose of this report is to analyse the potential social impacts that may arise from the development, having regard to social trends and issues affecting the local and broader surrounding areas.

This report includes the following components:

- Project summary and site context
- Baseline analysis of the designated area of social influence of the development, including current and forecast population profile, and existing social infrastructure networks
- Strategic policy context, including relevant state and local government drivers
- Social issues and trends relevant to the proposed development
- Community and stakeholder perspectives of relevance to the proposed development
- Predicted social impacts of the proposed development at this location, along with recommended mitigation and enhancement measures
- A suggested social impact monitoring and measurement plan has also been provided – as per the SIA Guideline.

2.0 Objectives and scope of the assessment

2.1 Assessment framework and methodology

Social Impact Assessment (SIA) involves the analysis of social changes and impacts on communities that are likely to occur as a result of a particular development, planning scheme, or government policy decision. The purpose of Social Impact Assessment is to assess the impacts of the development, both positive and negative, for all stages of the project lifecycle for key stakeholders and the broader affected community.

2.1.1 Social Impact Assessment

The assessment of social impacts in this report has been based on two guidelines:

- *Social Impact Assessment Guideline* (NSW DPIE 2021), applicable to all State-significant projects and developments, released by the NSW Department of Planning, Industry and Environment (DPIE) in July 2021.

As the proposed development classifies as State Significant Development, the Social Impact Assessment Guideline (SIA Guideline) has been followed as the primary basis for assessment, for the purposes of this report.

As outlined in the SIA Guideline, social impacts vary in their nature and can be positive or negative, tangible or intangible, physically observable, or psychological (fears and aspirations). Social impacts can be quantifiable, partly quantifiable or qualitative. They can also be experienced or perceived differently by different people and groups within a community, or over time.

The assessment involves a number of steps, including a baseline analysis of the existing socio-economic environment of a defined study area or areas; identifying list of stakeholders and considering their views; scoping of relevant issues; identification and assessment of potential impacts against the specified suite of factors set out in the SIA Guideline; determination of the significance of the impacts, and identification of measures to manage or mitigate the project's potential negative impacts and enhance potential benefits.

The methodology employed in preparing this SIA is designed to ensure that the social environment of communities potentially impacted by a project is properly accounted for and recorded, and anticipated impacts are adequately considered and assessed.

2.1.2 Social factors for assessment

The SIA Guideline classifies social impacts in the following way, which forms the core basis of this assessment:

- ***Way of life****: how people live, get around, work, play and interact with one another on a day-to-day basis*
- ***Community****: its composition, cohesion, character, how it functions, and sense of place*
- ***Accessibility****: how people access and use infrastructure, services and facilities*
- ***Culture****: people's shared beliefs, customs, values and stories, and connections to Country, land, water, places and buildings*
- ***Health and wellbeing****: people's physical, mental, social and spiritual wellbeing*
- ***Surroundings****: access to and use of natural and built environment, including ecosystem services, public safety and security, as well as aesthetic value and amenity*
- ***Livelihoods****: including impacts on employment or business, experience of personal breach or disadvantage, and the distributive equity of impacts and benefits*
- ***Decision-making systems****: the extent to which people are able to participate in decisions that affect their lives, procedural fairness, and the resources provided for this purpose.*

Each of these categories should be assessed based both on the tangible observable impacts, as well as considering fears and aspirations of communities impacted.

2.1.3 Assessment methodology

Stages in the preparation of this Social Impact Assessment are as follows:

- Baseline analysis of the existing socio-economic environment, involving:
  - Study area definition, including primary and secondary geographic areas likely to be impacted (see **Section 6.2** of this report)
  - Demographic analysis, including socio-economic characteristics of current communities and population forecast (see **Section 6.0**)
  - Review of relevant background information, along with relevant local and state policy frameworks (see **Sections 5.0** and **Section 6.0)**
- Stakeholder and community engagement: Findings of stakeholder and community consultation undertaken by TSA Mgmt on behalf of HammondCare have been reviewed to identify community and stakeholder aspirations and values. (see **Section 7.0**).
- Scoping of issues: Analysis of potential impacts during and post-construction, with each of the directly affected communities and other stakeholders identified in relation to the way they may be affected. Both positive and negative potential issues are identified. An SIA Scoping Checklist has been prepared at the outset of this assessment, in line with the specifications of the NSW DPIE *SIA Guideline* (2021). This is attached at **Appendix A**. This scoping process has underpinned the social impact assessment in **Section 8.0**.
- Identification of impacts as per the *SIA Guideline* parameters. The social impact assessment ultimately appraises the significance of each identified impact based on its duration, extent and sensitivity of impact "receivers." This results in a social significance rating matrix shown in **Section 8.0**.
- Identification of mitigation strategies to manage impacts and enhance benefits of the development.

2.1.4 Information sources and assumptions

Following are the key data sources and policy documents used to prepare this SIA (ordered by title):

- *ABS Census of Population and Housing 2016 (Australian Bureau of Statistics, 2016)*
- *Transport for NSW Population and Employment Projections 2020*
- *Better placed: An integrated design policy for the built environment of New South Wales*
- *Draft Greener Places Design Guide*
- *Future Transport Strategy 2056*
- *Lane Cove Council Local Strategic Planning Statement*
- *Lane Cove Development Control Plan 2010*
- *North District Plan*
- *NSW Infrastructure Strategy 2018-2038 (NSW Government, 2018)*
- *NSW State Priorities*
- *Social Impact Assessment Guideline for State Significant Projects (NSW DPIE, 2021)*
- *The Greater Sydney Region Plan – A metropolis of three cities*

Assumptions applied to complete this SIA include:

- The key findings of the background studies and technical reports are accurate.
- Socio-economic data for each study area accurately reflects the community demographic profile.
- Outcomes of the community consultation and engagement undertaken accurately reflect community views.
- All potential social impacts to the local community and special interest groups that can reasonable be identified have been included in this report.

3.0 The site and geographic context

3.1 Site context

The site is located in the suburb of Greenwich, within the Local Government Area (LGA) of Lane Cove Council. Surrounding land uses are predominantly of low density residential uses with significant vegetation. The site's location in the context of its surroundings is shown in **Figure 1** below.

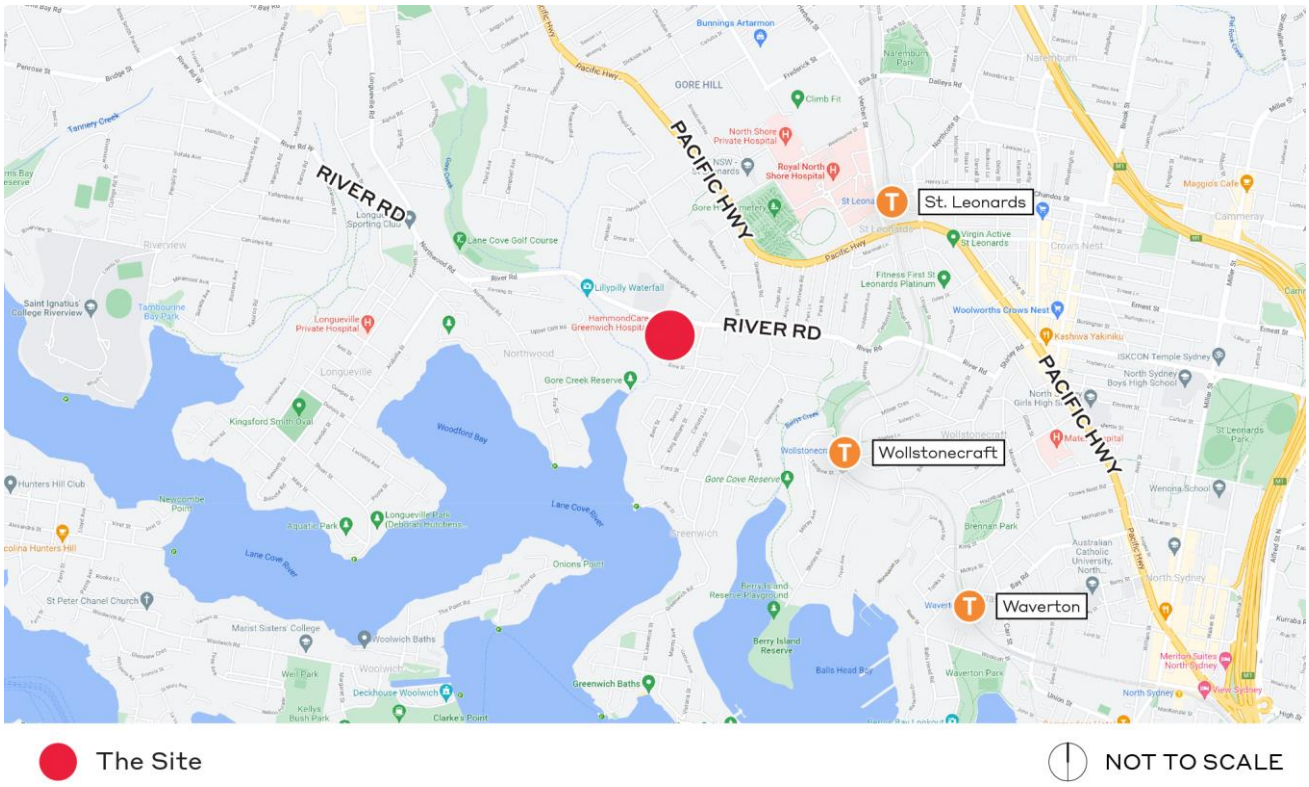

Figure 1 - Location of the site in its surrounding context

Source: Google Maps, edits by Ethos Urban

3.2 Site description

The site is known as 95-115 River Road, Greenwich. It comprises a total of two allotments, which are legally described as Lots 3 and 4 in DP584287, as shown in **Table 1** and **Figure 3** below. Lot 3 accommodates the existing Hospital building, and Lot 4 accommodates Pallister House (see **Section 3.3**). In total, the site is approximately 33,900m^2 in size and irregular in shape.

The site is bounded by River Road to the north, St Vincents Road to the east, and existing residential housing to the south and west, and is characterised by a sloped and varied topography. Site levels rise towards the centre from its southwestern and southeastern boundaries, with a steep fall at the southwestern end, towards Gore Creek Reserve (**Section 3.4**).

Table 2 -Site legal description

Lot no. (Figure 3)	Address	Title	Approx. area (m^2)
1	97-115 River Road	Lot 3 / DP584287	22,500m^2
2	95 River Road	Lot 4 / DP584287	11,400m^2

Figure 2 Site aerial and subject lots

Source: Nearmap, edits by Ethos Urban

3.3 Existing development

Existing development on the site comprises the current Greenwich Hospital complex. Existing buildings at the site range between 1-5 storeys in height and are interconnected through a series of internal corridors and external pathways. This includes the Main Hospital Building, which provides patient hospital beds, general healthcare, and palliative care services (**Figure 4**), the Riverglen building which provides mental health acute care services (**Figure 5**), and the Blue Gum Lodge (**Figure 6**), which is currently used for pain clinic healthcare services.

Near the southern end of the site, within Lot 4 in DP584287 is the State Heritage-listed 'Pallister House' building (SHR 00574). This two-storey Victorian house currently houses the hospital's dementia care, research facilities, and education facilities (**Figure 7**).

Significant existing vegetation is currently located on the site, especially concentrated at its eastern, western and southern boundaries. A number of hardstand parking areas are also integrated into the existing Greenwich Hosptital campus.

Figure 3 Main Hospital Building, viewed from the main River Road entrance

Source: Ethos Urban

Figure 4 Riverglen Building, viewed from the rear carpark

Source: Ethos Urban

Figure 5 Blue Gum Lodge, viewed from River Road

Source: Ethos Urban

Figure 6 Pallister House

Source: Ethos Urban

3.4 Surrounding development

Existing development surrounding the site comprises a predominantly low rise residential typology, which are generally separated from the Hospital building by on-site vegetation. The site's surrounding context are as follows:

- To the north of the site is River Road, across of which are low density detached dwellings (**Figure 8**), as well as the Greenwich Public School to the northwest (**Figure 9**);
- To the south of the site are low density detached dwellings along Gore Street (**Figure 10**). The Bob Campbell Oval public open space, which is part of Gore Creek Reserve (**Figure 11**), is located to the southwest.
- To the east of the site is a row of low density detached dwellings across St Vincents Road (**Figure 11**).
- To the west are additional detached residential dwellings (**Figure 12**).

Figure 7 Detached residential dwellings to the north

Source: Ethos Urban

Figure 8 Greenwich Public School to the northwest

Source: Ethos Urban

Figure 9 Residential dwellings to the south

Source: Ethos Urban

Figure 10 Bob Campbell Oval to the southwest

Source: Ethos Urban

Figure 11 Detached dwellings to the east

Source: Ethos Urban

Figure 12 Detached to the west, along River Road

Source: Ethos Urban

4.0 Proposed development

4.1 Description of proposed development

This application seeks approval for the detailed design and construction of the redevelopment of Greenwich Hospital, following concept approval for the project under SSD 8699. Specifically, consent is sought for the following:

- Demolition of the existing hospital building and associated facilities at the site;
- Construction of a new hospital facility and integrated healthcare uses and services, including:
  - A new main hospital building up to RL 80.0;
  - Two new seniors housing buildings, northern building up to RL 56.36, and southern building up to RL 60.65;
  - A new 2-3 single storey respite care building up to RL 56.9;
- Construction of associated site facilities and services, including pedestrian and vehicular access and basement parking;
- Site landscaping and infrastructure works; and
- Preservation of Pallister House which will continue to host dementia care and administrative functions.

Artist's impressions of the proposal are provided below. A detailed description of the proposal is provided in the below subsections.

4.2 Design elements

The following section identifies the principles that have informed the development of the design for the new Greenwich Hospital.

Development objectives

A number of overarching objectives have guided the built form and design of the proposed development. These are summarised as follows:

- Sense of place – a design that responds to the unique characteristics of the site and its surrounding context.
- Accessibility, inclusiveness and integration – a health campus that welcomes everyone, particularly people who may be frail, disabled and vulnerable, with people of all mobility levels able to move around the site.
- Built form and scale – a built form of an appropriate bulk and scale to complement the existing River Road landscape and preserve key site lines through the site.
- Promoting choice and familiarity – buildings, spaces and landscapes designed to provide a ranger of care, and empower individuals to have a sense of agency in how care is received and delivered.
- Sustainability, flexibility and adaptability – supporting positive social, environmental and economic outcomes through a resilient, adaptable and enduring built form.
- Healthy architecture and biophilic design – creating an environment which supports physical, mental and social wellbeing.

Connecting with Country: Aboriginal cultural heritage and living cultures

Key elements of the vision are considered to align with Connecting with Country principles. The development seeks to correlate with Country and health and wellbeing as being key for the site design principles, as well as the following:

- Direct access to external landscaped spaces for all patients, residents, visitors and broader community
- Inpatient and resident areas will have direct access to landscaped terrace or courtyard space
- Provision of a variety of internal areas connected to themed external spaces will have options for people to socialise

- Generous openings in the façade and skylights and lightwells to achieve natural light internally
- Eastern portion of the site, being undeveloped natural landscaping, has potential Aboriginal cultural significance. Walking tracks with interpretative stations will traverse this space with minimal disturbance, and provide acknowledgement of the cultural significance of the land to First Nations people
- Use of natural materials at lower levels is proposed, with landscaping to provide access to nature at Level 2 main entry, up through Levels 3 and 4 to the main social gathering space.

4.3 Construction staging

As shown in the Staging Plan at **Figure 14**, the proposed construction will enable the hospital to continue operating during the redevelopment process, and to ensure that the most critical infrastructure (i.e. the new main hospital building) is delivered first before the serviced seniors living and respite care buildings are put into operation, as those uses cannot function without the new hospital. A summary of the proposed staging is provided below:

- Stage 1: Early Works (infrastructure works)
- Stage 2: Hospital Building (demolition of eastern wing of existing hospital, demolition of Blue Gum lodge and construction of new hospital building
- Stage 3: Seniors Living South (demolition of remaining existing hospital building and Riverglen and construction of the southern Seniors Living building) and connected basement to seniors living north
- Stage 4: Remainder of Seniors Living North (construction of the remainder of the northern Seniors Living building)
- Stage 5: Respite (Construction of the respite care building).

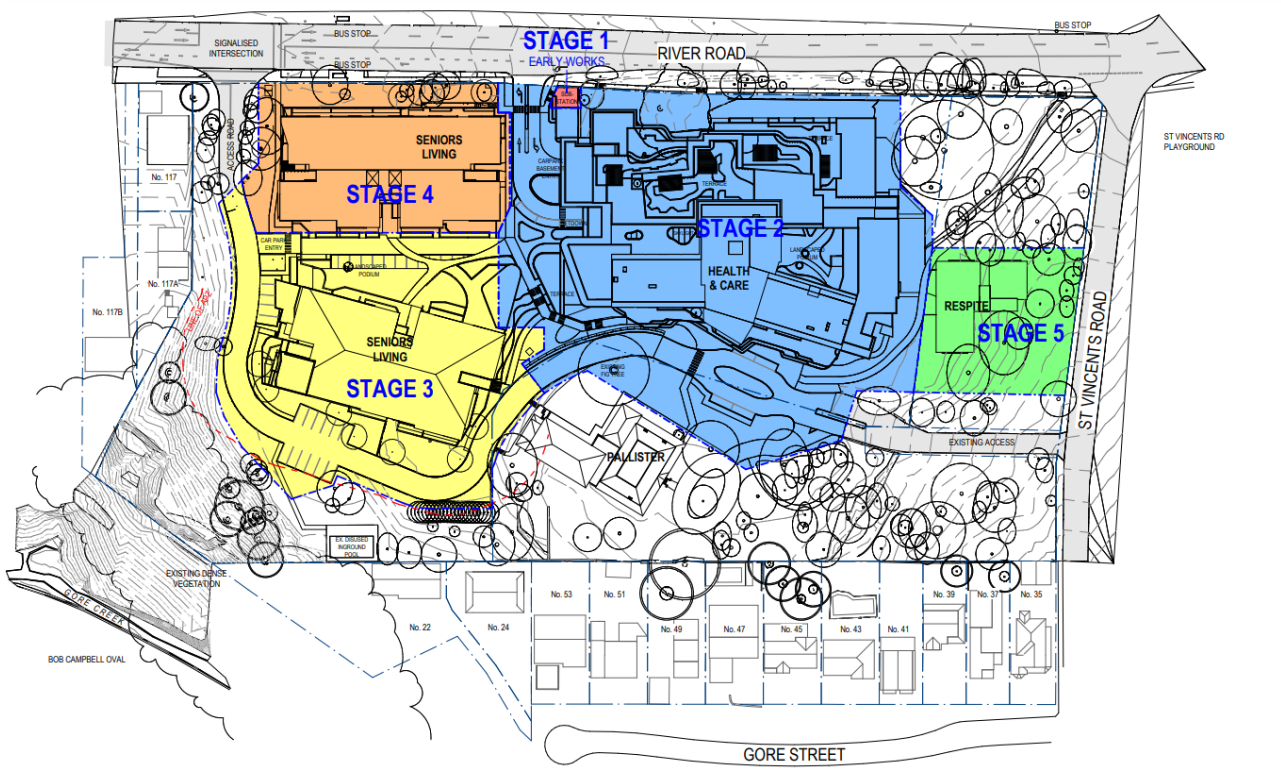

Figure 13 Staging plan

Source: BM Architecture

5.0 Local social context

This section provides an overview of the site and the existing social context surrounding the site. It analyses the existing social characteristics of the community within the identified study areas to better understand the potential characteristics and context of the existing community that may be impacted by the proposed development.

5.1 Study area definition: area of social influence

For the purposes of the Social Impact Assessment, study areas have been chosen taking into consideration the need to factor in both local social impacts and those likely to occur on a broader scale.

The study areas have been defined using ABS Statistical Area boundaries (SA1 or LGA boundaries) that best reflect the identified geographical areas, presented **in Figure 15** below.

Figure 14 Primary Study Area

Source: Mapinfo Pro, Ethos Urban

Primary Study Area (PSA)

For this assessment, a Primary Study Area (PSA) has been defined to represent the local community within the immediate area of the site. Whilst we typically consider the residents of the 400m of the subject site for the purposes of the PSA analysis, for this assessment the residents living within 500m of the subject site have been included due to the SA1 boundaries that the statistical data is available for. A map illustrating the approximate area is shown in **Figure 15** above.

There are likely to be localised social impacts relating to the immediate surrounds of the site, for example impacts associated with the demolition of the existing dwellings and construction of the new buildings (i.e. amenity values, access, noise, air quality etc). Longer term impacts such as increased activity in the area are also anticipated to occur within the close proximity to the proposed development, as well as likely changes to perceptions of safety or community sense of place.

Secondary Study Areas (SSA)

A Secondary Study Area (SSA) has also been considered necessary for the purposes of this study due to the broader impacts and benefits that the proposed development will likely have on the surrounding regional community. This includes residents living within the Lane Cove LGA, the core patient catchment for the hospital.

5.2 Strategic policy context

The following section identifies the key social drivers for this site, based on a review of the key state and local policies and strategies. The following key documents have been reviewed:

- *Building Momentum: State Infrastructure Strategy 2018-2038 (Infrastructure NSW, 2018)*
- *NSW State Health Plan: Towards 2021 (NSW Health, 2017)*
- *NSW Health Strategic Priorities 2019-20 (NSW Health, 2019)*
- *Greater Sydney Region Plan: A Metropolis of Three Cities (Greater Sydney Commission, 2018*
- *North District Plan (Greater Sydney Commission, 2018)*
- *Northern Sydney Local Health District Strategic Plan (NSLHD, 2017)*
- *Sydney North Health Network Strategic Plan (SNHN, 2018)*
- *Local Strategic Planning Statement (Lane Cove Council, 2020)*
- *Community Strategic Plan (Lane Cove Council, 2018).*

A summary of the key themes of these documents are identified in

Table 3 over page. A comprehensive review of the documents is provided at **Appendix B**.

Table 3 Strategic policy review

Policy themes	Implications for Social Impact Assessment	Relevant documents
Improving health outcomes and access to health services for the NSLHD and Sydney North Health Network (SNHN)	• It is a priority of the NSLHD to improve the health of their population by "delivering whole system, culturally appropriate responses to health outcome disparities", "developing strategies to respond to local health priorities", and "collaborating with the Sydney North Health Network to improve the coordination of care" (NSLHD Plan, pg. 16). • The Sydney North Health Network is committed to investment in primary care, ensuring that services are delivered in the right place, at the right time, building community support networks, and fostering positive health habits. It is a SNHN priority to improve the coordination and integration of health services in North Sydney.	• NSLHD Strategic Plan (NSLHD, 2017) • Sydney North Health Network Strategic Plan (SNHN, 2018)
The role of health infrastructure in supporting improved wellbeing	• It is a priority of NSW Health to "keep people healthy, out of hospital and connected to community-based care wherever possible" (p. 28). To meet evolving healthcare needs, NSW Health aims to invest in new healthcare facilities, establish healthcare precincts with public and private services, and redesign clinical service in order to meet the evolving healthcare needs of the state. • Approximately 40% of NSW Health's built infrastructure is over 50 years old, necessitating major investment into upgrades and new infrastructure to cope with increasing demand. Future investment will focus on infrastructure which will improve integration between hospital and primary care and prevent unnecessary hospital readmissions and Emergency Department attendances. • NSW Health identifies investment into health infrastructure as a key step toward a "21st century health system that will be sustainable, purposeful and, most importantly, deliver positive health outcomes for the people of NSW" (p. 31).	• Building Momentum: State Infrastructure Strategy 2018-2038 (Infrastructure NSW, 2018) • NSW State Health Plan: Towards 2021 (NSW Health, 2017) • NSW Health Strategic Priorities 2019-20 (NSW Health, 2019)
Supporting liveability, community health and wellbeing in Lane Cove LGA	• Lane Cove's population is expected to grow by 41% between 2016 and 2036. In order to facilitate liveability, Lane Cove Council is council is committed to delivering necessary services and social infrastructure in order to meet the needs of a growing and changing population. • Community health and wellbeing is a key objective of Lane Cove's Community Strategic Plan, with strategies including the development of interagency and community partnerships to deliver improved and targeted health services.	• Local Strategic Planning Statement (Lane Cove Council, 2020) • Community Strategic Plan (Lane Cove Council, 2018)
Delivering on the vision of a 30-minute city	• The Greater Sydney Commission's (GSC) Greater Sydney Region Plan outlines a vision of a "30-minute city", in which jobs, services and other quality public spaces are accessible within 30-minutes of people's homes.	• Greater Sydney Region Plan: A Metropolis of Three Cities (Greater Sydney Commission, 2018)
Supporting population growth and change with investment in infrastructure	• Over the next 20 years it is expected that demand for healthcare will grow by over 50% in NSW, compared to a population growth of 28%. This is largely due to the increase in 70–84-year-olds who are the predominant users of healthcare services. The state requires "disruptive innovation" in healthcare to cope with increasing demand and deliver long-term solutions for population health (State Infrastructure Strategy, p. 168). • The population of Sydney's Northern District is expected to grow to 1,082,900 by 2036 from 886,550 in 2016, with 65-84 year olds making up 47% of total growth. The GSC has stated that "integrated an targeted delivery of services and infrastructure is needed to support growth and respond to the different needs of population groups", including "accessible local health services and regional health infrastructure" (North District Plan, pg. 26)	• Building Momentum: State Infrastructure Strategy 2018-2038 (Infrastructure NSW, 2018) • North District Plan (Greater Sydney Commission, 2018)

5.3 Community profile: demographic characteristics

An overview of the demographic profile of the PSA and local government area of Lane Cove residents is compared to the Greater Sydney benchmark and is based on 2016 ABS Census of Population and Housing data. Key findings are highlighted below:

- **Study Area residents have significantly higher household income**, with the annual median household income estimated at $166,270 in the primary study area, which is 80.3% higher than that of Greater Sydney. Annual household median income in the secondary study area is slightly lower at $122,210 but is still 32.5% higher compared to median income in Greater Sydney. Around half of the residents in the primary and secondary study areas earn $2,500 or more per week.
- **Primary study area has a relatively older population**, with the median age at 40 years compared to 36 in Greater Sydney. The PSA has a slightly higher share of elderly residents, where residents 70 years and over, account for more than 12.0% of the population, compared to Greater Sydney at just 9.0% of the population. Figures for the secondary study area are similar to that of Greater Sydney.
- **The majority of dwellings** in the PSA are owned, with 42.6% purchased outright and 31.3% are owned with a mortgage. This is compares to Greater Sydney where only 30.0% of dwellings owned outright. Within the PSA, the rate of dwellings that are rented is low, accounting for 24.3% of all dwelling tenure types, compared to rates within the SSA and in Greater Sydney at around 35.0% each.
- **There is high educational attainment among residents within the PSA**, with 68.9% of the population having non-school qualifications, and 23.4% of which have earned a postgraduate degree. As such, residents are highly educated, and likely working in skilled white-collar industries. In Greater Sydney, residents who have non-school qualification account for 52.7%,13.9% of which are postgraduate degree holders.
- **Couple families are the most common household composition type**, accounting for almost 70.0% of households. Within the primary study area, one parent family households are relatively low, comprising only 5.7% of total family households in comparison to 7.2% in the secondary study area and 11.1% in Greater Sydney. The share of lone person (20.0%) and group households (4.4%) is comparative to Greater Sydney.
- **Most occupied private dwellings in the primary study area are separate houses** at roughly 64.0% of total occupied dwellings. This is slightly higher compared to the rate in the secondary study area (42.6%) and in Greater Sydney (57.2%). Flats, units or apartments are the second most common dwelling type, accounting for 31.6% of dwellings in the primary study area, 51.8% in the secondary study area and 28.2% in Greater Sydney.
- **Residents in the study areas are predominately working in highly skilled occupations**, with 20.6% of residents in the PSA and 17.9% of residents in the SSA employed in the professional, scientific and technical industries. Of employed residents in the PSA, 17.6% are managers and 48% are professionals. These figures are almost twice the share in Greater Sydney, where 9.9% of residents are working in the professional, scientific and technical industries, 13.7% are managers and 26.3% are professionals. Figures 16 and 17 illustrates comparison of industry of employment and occupation of residents across the PSA, SSA and Greater Sydney.

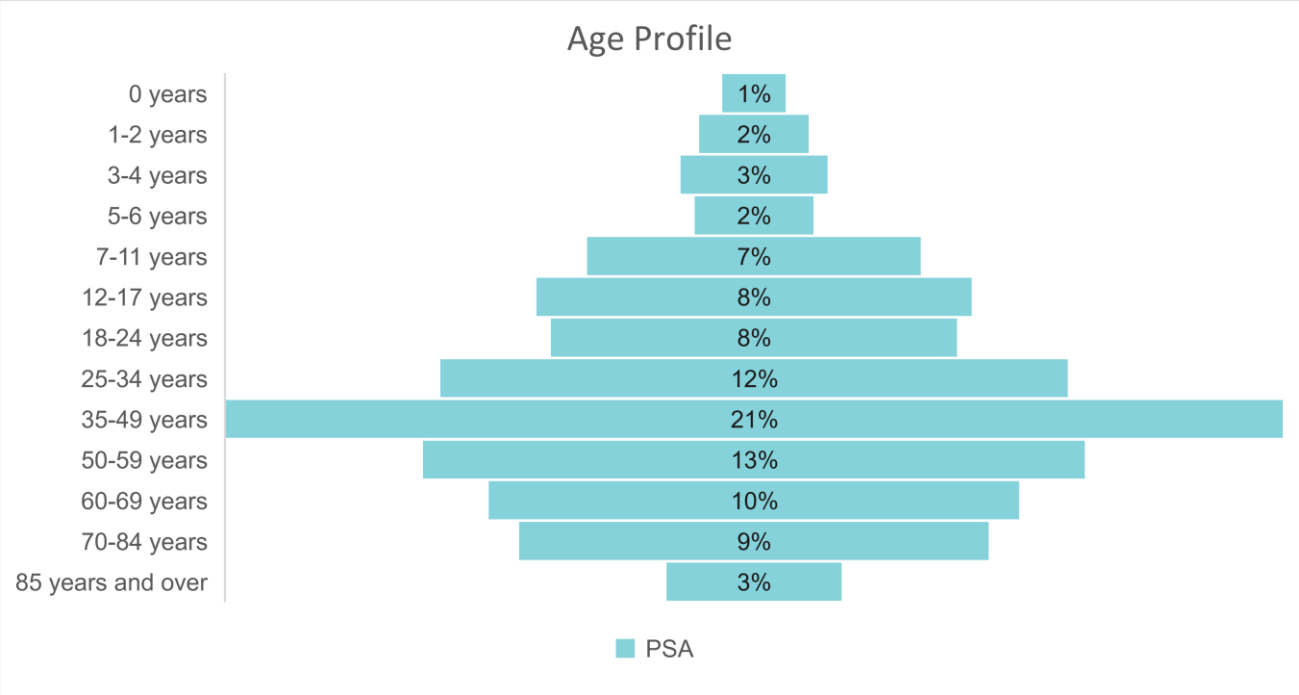

Figure 15 Age profile

Source: ABS 2016 Census of Population and Housing

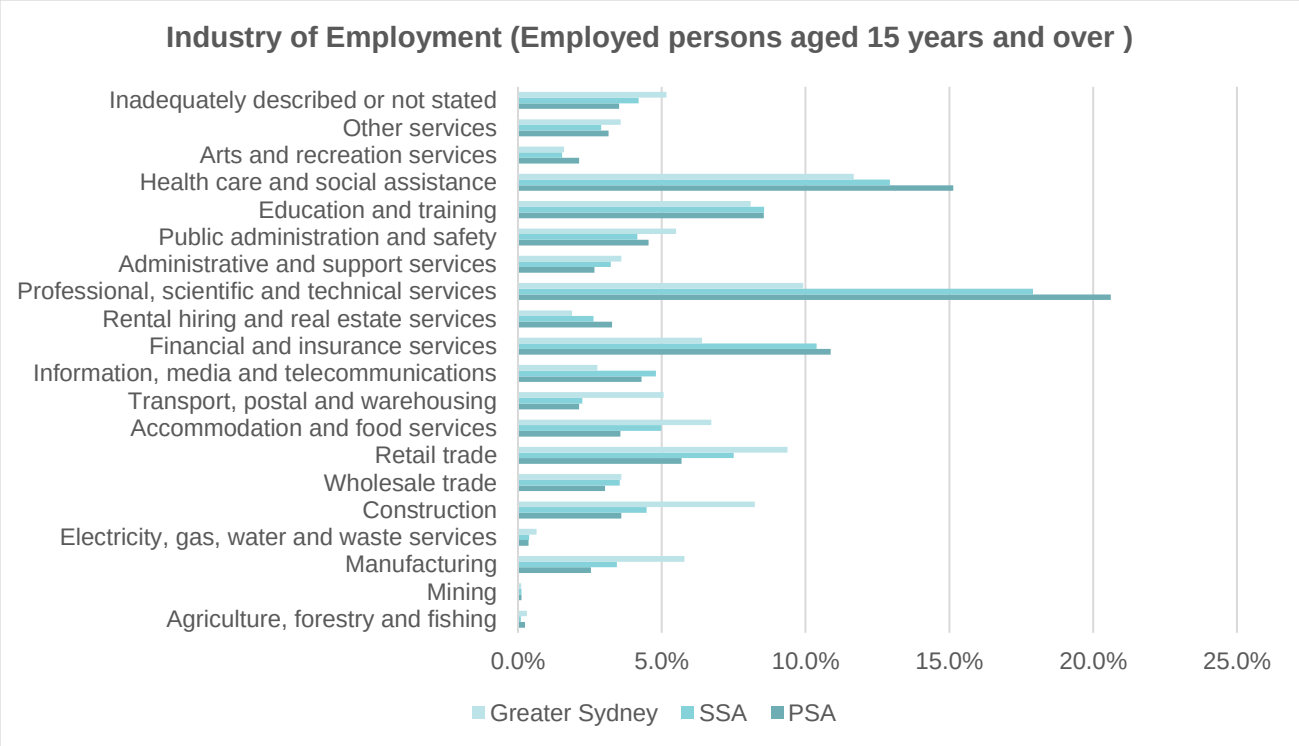

Figure 16 Industry of Employment in PSA, SSA and Greater Sydney

Source: ABS Census of Population and Housing (2016)

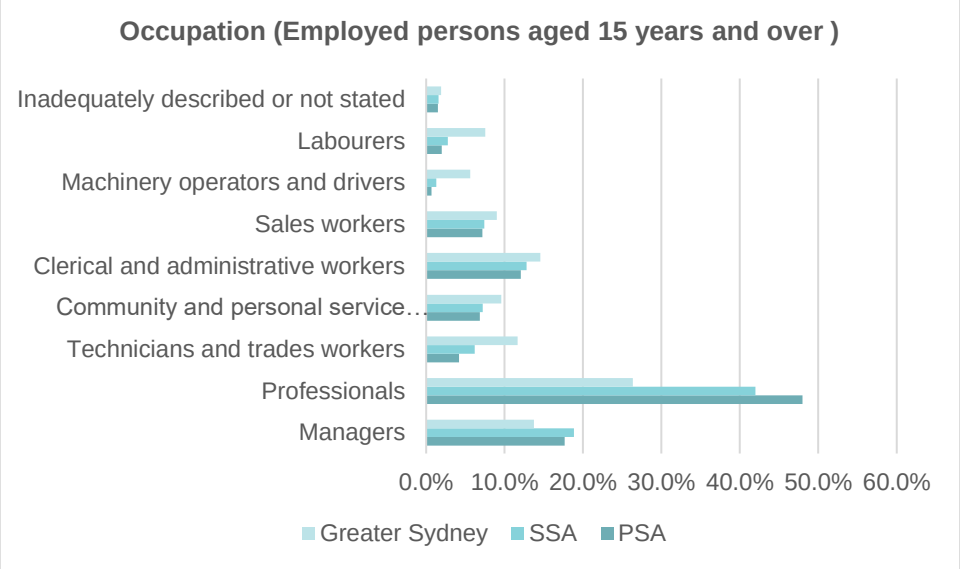

Figure 17 Occupation in PSA, SSA and Greater Sydney

Source: ABS Census of Population and Housing (2016)

Population estimates and forecasts

Population estimates and forecasts have been prepared for the PSA, SSA and the Greater Sydney area taking into considerations forecasts prepared by Transport for NSW, DPIE and ABS 2020 population estimates.

Population estimates show that in 2022 the PSA had an estimated resident population of 5100. Projections indicate that the resident population of PSA is forecast to increase to 5170 in 2036, increasing at an average annual rate of 0.1% over the period, which is lower than the Greater Sydney forecast average of 1.5% each year. Overall, the PSA population is expected to grow by only +70 by 2036, compared to +2,050 in the SSA (Lane Cove LGA), and +1,338,620 across the Greater Sydney area.

Population estimates are shown below in

Table 4.

Table 4 Population forecast, Greater Sydney age profile 2022-2036

Population	2016	2022	2026	2031	2036	2022 to 2036
Primary Study Area	4,820	5,100	5,250	5,230	5,170	+70
Secondary Study Area	38,150	42,310	43,970	44,330	44,360	+2,050
Greater Sydney	5,024,920	5,584,500	5,992,660	6,463,600	6,923,120	+1,338,620
Annual Growth						
Primary Study Area		+50	+40	+0	-10	+10
Secondary Study Area		+690	+420	+70	+10	+150
Greater Sydney		+93,260	+102,040	+94,190	+91,900	+95,620
Annual Growth Rate						
Primary Study Area		0.9%	0.7%	-0.1%	-0.2%	0.1%
Secondary Study Area		1.7%	1.0%	0.2%	0.0%	0.3%
Greater Sydney		1.8%	1.8%	1.5%	1.4%	1.5%

5.4 Health profile and social determinants of health

According to the World Health Organisations Europe[1], a person's health is closely linked to the conditions in which they live, work, grow and play – known as the "social determinants of health". Socioeconomic position, educational attainment, lifestyle behaviours can affect the health of individuals and communities. Health issues such as multiple morbidities and long-term conditions have found to be more prevalent in disadvantaged areas. Although there is no single definition of the social determinants of health, there are common usages across government and non-government organisations. Other commonly accepted social determinants of health include housing and the living environment, health services and disability.

The following section provides a brief snapshot of the health and wellbeing of the population of the Northern Sydney Local Health District (NSLHD), where the site is located.

Local health profile

The Northern Sydney Local Health District (NSLHD) serves 943,908 people that live in the district, representing 11.7% of the total population of NSW which includes residents in the Lane Cove LGA. The following health trends can be identified within the District:

- NSLHD residents generally experience better health than the rest of NSW, with the nation's highest life expectancy, lower premature mortality, and highest infant and maternal health scores,
- Risk factors such as smoking, lack of physical activity, smoking, fruit and vegetable intake, and obesity are less prevalent in the District than in NSW as a whole, with only risky drinking comparing with the state average,
- While immunisation rates equal the state average, the District is falling behind on immunisation rates for children aged five years. Immunisation rates among Aboriginal people are higher than the District as a whole,
- NSLHD residents fall below the national average for breast and bowel cancer screening, but above the national average for cervical cancer screening[2].

Analysis by the Northern Sydney Primary Health Network (NSPHN) and the NSLHD also points to a number of mental health issues afflicting the population of the broader North Sydney Region:

- As of 2019, approximately 40% of the North Sydney Region suffer from some degree of mental health issues, with 3.1% suffering from severe mental health issues. 8.9% of the region have reported high or very high psychological distress, and 16.6% of those aged over 18 engage in high risk drinking. Further, 2,474 per 100,000 hospitalisations can be attributed to mental health, higher than the NSW rate (1,909 per 100,000).
- There is a higher rate of hospitalisations for intentional self-harm among those aged 15-24 (241 per 100,000), as well as females (112 per 100,000), and Aboriginal people (411 per 100,000).
- People most as risk of poorer health in the North Sydney Region include:
  - Complex and severe alcohol and other drugs users,
  - People with serious physical and mental health co-morbidities,
  - Those experiencing social isolation or homelessness,
  - Children, young people, adolescents, and their families,
  - Older people,
  - Women, particularly those aged 39-65,
  - Aboriginal and Torres Strait Islander People,
  - LGBTIQ+, and
  - Culturally and linguistically diverse people,

[2] NSLHD_Clinical Services r1 DIGITAL.PDF (nsw.gov.au)

- Men who live alone.[3]

5.5 Local social infrastructure context

A review of the existing local social infrastructure has been undertaken to inform the Social Impact Assessment and establish a baseline for the assessment of existing facilities. An overview of the local social infrastructure context is provided below, identifying key social infrastructure within a local 400m catchment of the site. A map illustrating the approximate area is shown in **Figure 16** over page.

The following categories of social infrastructure relevant to the project are identified as being within walking distance of the site:

- **Medical centres/GPs:** There are three medical centres/GPs located within 400m of the site: Greenwich Village Medical Practice, North Shore Medical Group, and Synergy Medical Practice.
- **Aged care facilities:** There is one aged care facility located within 400m of the site: Glenwood Aged Care Home.
- **Libraries:** There is one library located within 400m of the site: Greenwich Library.
- **Open space:** There are three open spaces located within 400m of the site: Henningham Playground, St Vincents Playground, and Gore Creek Reserve.
- **Places of worship:** There are two places of worship located within 400m of the site: Greenwich Presbyterian Church, and The Church of Jesus Christ of Latter Day Saints.
- **Educational facilities:** There are two educational facilities located within 400m of the site: Greenwich Public School, and Greenwich Public School (K-2 Campus).
- **Childcare:** There is one childcare facility located within 400m of the site: KU Greenwich Community Preschool.
- **Sport/recreational facilities:** There is one sports field located within 400m of the site: Bob Campbell Oval.

5.6 Transport and accessibility

The Greenwich Hospital site is well served by public transport. The 261 bus service along River Road provides frequent service between Chatswood and the Sydney CBD via the site, Lane Cove and North Sydney. The 265 bus along St Vincents and Kingslangley Road also provides access to Lane Cove and North Sydney.

The site is approximately 950m to the southwest of St Leonards railway station, and 800m to the northwest of Wollstonecraft station. River Road is a major road that provides access to the Pacific Highway, including the centres of St Leonards and North Sydney.

The site can be reached by several bus stops on River Road. The following bus routes service the location:

[3] Northern-Sydney-Regional-Plan-final.pdf (sydneynorthhealthnetwork.org.au)

Figure 18 Social infrastructure context

Source: Ethos Urban

5.7 Local social issues and trends

The following section provides an overview of the local social issues and trends relevant to the proposed development.

Growing complexity of population health characteristics

According to the Australian Institute of Health and Welfare, Australian's have higher life expectancies than ever before, yet approximately half of the population lives with at least one chronic health condition:

> *"Chronic conditions are an ongoing cause of substantial ill health, disability and premature death, making them an important global, national and individual health concern… Many people with chronic conditions do not have a single, predominant condition, but rather they experience multimorbidity—the presence of 2 or more chronic conditions in a person at the same time. People living with multimorbidity often have complex health needs and report poorer overall quality of life… This places a heavy demand on Australia's health care system and requires substantial economic investment.[4]"*

The prevalence of complex diseases is also increasing, this includes diseases which are multifactorial and can be attributed to multiple environmental or socioeconomic characteristics. Complex diseases or illnesses can also arise through the interaction of multiple genes with external factors. As Australia's demography and disease patterns change, the population ages and the burden of chronic illness grows, the healthcare system will inevitably come under increasing pressure[5].

There is a need to transform the Australian healthcare system in order to provide better care for chronic and complex health conditions, as well as better end-of-life care. The Australian Government intends to reform the national health system by increasing funding in all states and territories from $100 billion between 2015-2020 to an estimated $131 billion between 2021-2025. This will fund specialist hospital services, including cancer treatment, rural health, hospital infrastructure, drug and alcohol treatment, preventative, primary and chronic disease management, and mental health, in order to reduce pressure on hospitals and reduce avoidable hospitalisations.

Demand for additional health facilities in the NSLHD

The site is located within the Northern Sydney Local Health District, which is one of 19 Local Health Districts and Speciality Health Networks in NSW. The NSLHD manages nine hospitals including Hornsby Ku-ring-gai Hospital, Macquarie Hospital, Manly Adolescent and Young Adult Hospice, Northern Beaches Hospital, Royal North Shore Hospital, Ryde Hospital, as well as several Community Health Centres.

There is a growing strain on healthcare services within the District, specifically in the Ryde Hunters Hill sector, due to:

- **A growing and ageing population** – "The Ryde Hunters Hill sector stands out as the area with highest overall population growth, greatest housing change, a high proportion of older residents, the greatest proportion of residents from non-English speaking backgrounds, a lower socioeconomic profile than the rest of NSLHD, more public housing and greatest support needs in terms of people requiring assistance and people with disability. Ryde Hunters Hill can also look forward to continued population growth at faster than the rate for the rest of NSLHD for most age groups but particularly for 0-17 year olds. While the health status of NSLHD residents is high, areas for attention include immunisation for children aged five years and cancer screening",
- **Demand for preventative and equitable healthcare** – "While NSLHD residents have the highest average life expectancy and good health outcomes there are vulnerable communities that need special attention and tailored approaches if they are to achieve similar or equitable health outcomes. An increasing number of older people are experiencing chronic health conditions, comorbidities and frailty; at the other end of the age spectrum, a focus on care for the younger population will have lasting impacts on demand for health care later in life",
- **Growing rate of emergency department presentations** – "At the current rate of growth of 3.2 per cent per annum (which is more than twice the underlying rate of population growth), by 2022 emergency department

[4] https://www.aihw.gov.au/reports/australias-health/chronic-conditions-and-multimorbidity
[5] https://www.mja.com.au/journal/2007/187/9/challenges-health-and-health-care-australia

activity across NSLHD will have increased by the equivalent of another Ryde Hospital emergency department and RNS Hospital will have exceeded 100,000 presentations per annum",

- **High concentration of private health cover** – "NSLHD residents have a very high level of private health insurance and the highest concentration of private hospital beds in NSW… NSLHD is subject to the health of the private health care market with any changes potentially resulting in rapid shifts of activity into the public system and placing pressure on both infrastructure and costs. Services most likely to be affected by significant changes in the private health care market include elective surgery, maternity, renal dialysis, rehabilitation and mental health".

To meet these growing health needs, NSLHD requires additional infrastructure and funding for capital developments in order to ensure population health into the future, and to counteract health inequities.[6]

Improving patient and staff wellbeing through the design of health infrastructure

As the knowledge and technology regarding healthcare continues to transform at a rapid pace, it is important that healthcare facilities continue to be resilient to this progression. Healthcare facilities, especially hospitals, occupy an integral position in the health and welfare systems of cities and regions, as well as overall population health and wellbeing.

A number of scholars have outlined the effect of the built environment on patient and staff wellbeing in hospitals (Brambilla, Rebecchi, & Capolongo 2019; Ulrich et al. 2008), in particular, the design of audio and visual environments, safety enhancement, wayfinding systems, patient rooms, family support spaces and staff support spaces. It can be evidenced that the design of these aspects of hospitals can positively or negatively affect the outcomes of patients, families, physicians, staff, as well as the hospital organisation.

The audio and visual environment of hospitals, consisting of noise, lighting, the orientation of windows, and the presence of gardens, art, or other aesthetic components, is considered to be impactful of patient and staff's mental wellbeing, along with visitor satisfaction. Nejati (et al. 2016) found that the "restorative qualities of indoor break spaces increase progressively with higher levels of access to nature, daylight, and outdoor environments", signalling a correlation between direct access to nature and stress relief in staff. Design features which improve connection to nature could include indoor plants, nature-related artwork, access to communal gardens, and windows or balconies with nature in view.

Enhancing the restorative qualities of staff break spaces also has potential carry-over effects to patients, by allowing staff to provide better care to patients (Nejati et al. 2016). Ulrich (2002) finds further evidence for the incorporation of gardens within hospitals, evidencing that garden scenes have been able to alleviate patient anxieties within as little as 5 minutes, heighten patient and family satisfaction with the health provider, increase staff satisfaction within the workplace, and foster improvement of clinical outcomes, for example, "reducing pain medication intake and shortening hospital stays".

In relation to the environments of patients in their rooms, Schreuder, Lebesque, & Bottenheft (2016) have identified privacy, autonomy, and spatial, sensory, and social comfort as factors in determining the wellbeing of patients. A lack of privacy, both visual and auditory, is connected to feelings of discomfort and dissatisfaction among patients, while "the possibility to control the environment such as opening a window, adjusting lighting and temperature settings, closing the door, and shutting lines of sight" have been shown to decrease patient dependence on staff and decrease feelings of stress or depression. Design features which allow for greater patient control over their healing environments are thus interconnected with positive wellbeing.

The layout of patients' rooms has also been found to affect patient satisfaction, specifically regarding quality of sleep and one's sense of privacy. Moving patients from a multi-bed style room to private sleeping quarters revealed a significant improvement in their quality of sleep as the impact of environmental stimuli on sleep quality was mitigated (Pyrke et al. 2017). Other than minimizing the impact of noise, light, and other environmental stimuli, the design of hospitals to feature private rooms offers a greater sense of privacy for patients and their families. Allowing patients to have a greater sense of privacy, especially to rest and/or spend time with family or other visitors, is also likely to "produce more favourable physical and psychological conditions for restorative sleep".

6 NSLHD 2019, 'Clinical Services Plan', NSLHD_Clinical Services r1 DIGITAL.PDF (nsw.gov.au).

6.0 Community and stakeholder perspectives

The following section provides an overview of the community and stakeholder consultation undertaken to inform the proposed development, including engagement activities and outcomes. The purpose of this section is to highlight user values and aspirations relevant to the proposed development.

6.1 Community engagement approach

To inform the preparation of this SSDA, TSA Mgmt on behalf of HammondCare have undertaken targeted consultation with a range of stakeholders, to identify community and stakeholder aspirations for the project.

The following outlines the process and outcomes of community and stakeholder engagement undertaken by TSA Mgmt to inform and guide this SSDA, as per the *Engagement Outcomes Report* (TSA Advisory, May 2022)

Project newsletter

A two-page A4 project newsletter was distributed to 1,836 residents and key stakeholders on 17 March 2022. The newsletter provided a general project update and welcomed further input and engagement on the latest design through invitation to attend an online information session.

Media release and website

A media release was published in March 2022 to announce the latest design changes and promote online information sessions.

The latest round of engagement and information sessions were promoted on the HammondCare website's dedicated Greenwich Hospital and associated Greenwich Redevelopment webpages.

A dedicated information line and email address was also provided to the public.

Online information sessions

Online engagement was considered the preferred option given the current status of COVID-19 and health advice at the time. This was supported by community members who expressed a preference to avoid in-person gatherings. Two online information sessions were held on Monday 28 March from 6 to 7pm and Thursday 31 March 2022 from 12 to 1pm and hosted using the Microsoft Teams platform.

The sessions involved a formal presentation by members of the HammondCare project team covering the project timeline and history, services to be provided at the new campus, proposed construction timeframe and next steps and further opportunity for community input. The sessions were attended by approximately 25 community members and interested stakeholders.

Follow up meetings were arranged with those community members who wished to discuss their questions further as a result of attending an information session, and for neighbours of the Greenwich site, how the project would relate with their property.

It was noted in the presentations that further detail of the Greenwich Health Campus will be made available in the coming months and via lodgement of the project's Environmental Impact Statement (EIS) with the NSW Department of Planning and that the community will be invited to make formal submissions as part of the public exhibition process.

Individual neighbour meetings

Representatives of the HammondCare project team undertook a series of meetings and interactions with site neighbours, including (but not limited to):

- Meeting with neighbours to the southern boundary of Greenwich to discuss:
  - Stormwater and overland flow – noting the neighbouring properties sit lower than the Greenwich site and stormwater flows down the vegetated and rocky embankment on the southern boundary of the site onto their properties.
  - HammondCare confirmed the requirement to complete appropriate stormwater design and management through the planning and construction pathways.
  - Further, agreement was made for HammondCare to investigate a permanent structure, such as a small berm (or equivalent landscaping feature) to the south-eastern boundary within the landscaping response to assist in the capture and redirection of stormwater away from the neighbouring properties. This design feature is not required as part of the planning but would be included by HammondCare as an act of goodwill.
  - Confirmation that HammondCare would undertake to plant screening vegetation along the southern boundary prior to construction work commencing.

6.2 Community engagement outcomes

This section summarises the feedback received from the community and various stakeholders.

Community feedback

Key topics raised during the online engagement sessions included:

- Building height
- Overviewing / privacy and how HammondCare will address
- Protection of bushland and trees
- Landscaping outcomes more generally
- Future of Pallister House
- Construction timeframes, staging, work hours and impact on neighbours
- Traffic management during construction and more generally
- Serviced Senior Living units – who can access, what are they designed for (e.g. reassurances that they will not be ‘lifestyle villas’)
- Drainage / stormwater.

Key themes raised by community members and interested community stakeholders across the whole engagement process were:

- Preservation of bushland and tree canopy
- Building height and mass
- Traffic management and safety
- Overviewing
- Water run-off/drainage
- Construction impacts – timeline, hours, staging
- Service provision and access by lower income earners
- Indigenous input and site history
- Further information on the process; ongoing engagement and opportunities for input.

Stakeholder/ agency feedback

Individual stakeholder briefings were held by various agencies including Lane Cove Council, Lane Cove North Residents Associations, HammondCare Hospital Staff and Volunteers, Lane Cove Council elected members, Greenwich Community Association, Greenwich Public School and Greenwich Public School Parent's and Citizens Association Incorporated.

6.3 Summary of feedback and HammondCare responses

Preservation of bushland and tree canopy

main topic of interest both with local community members and other stakeholders is maintaining the integrity of the untouched bushland and tree canopy which is unique to the Greenwich Hospital site. There was generally support for HammondCare's landscape response and effort to maintain the site's extensive tree canopy. The community was particularly receptive that the significant tree located on River Road, tree 167 would be maintained. This was an update from the Concept Plan approved in November 2020 which originally planned on removing this tree, however the Serviced Seniors Living building has been redesigned to ensure this tree can remain. Positive comments were received in response to how the design has placed a greater emphasis on commitment to green space and enhancing the landscape.

In response, a Bushland Management Plan and a Construction Management Plan has been prepared which cover measures to protect the bushland and trees, including during construction. Significant and large trees are proposed for retention including in the SW corner.

Building height and mass

The proposed height of the Health and Serviced Seniors Living buildings received significant interest through previous engagement. Community members were interested in seeing how the designs had changed and noted the building height reduction.

The revised Concept Proposal reduces the bulk and scale of the Serviced Seniors Living buildings by up to 2 floors at the western end.

Traffic management and safety

Raised a number of times, in regards to pedestrian movement (particularly along River Road), vehicular access through the site and how this relates to neighbouring streets.

The proposal includes 329 parking spaces and main site access remaining off River Road. A detailed traffic study was commissioned as part of the proposal.

Overviewing/ privacy

Neighbours closest to the Greenwich Hospital site frequently raised the issue of potential overviewing from the new Health and Serviced Seniors Living buildings. Neighbours to the rear of the site requested information on screening and the visual scale of the Health Building, once constructed.

The Seniors Living buildings will face the south and north predominantly, with the incorporation of green planters and landscaping to mitigate privacy.

Stormwater and drainage

The community queried how the underground carpark would interfere with groundwater flow uphill, which is used for the trees in the SW border of the property. Drainage queries and harvesting of stormwater were queried. Run-off and in particular to Gore Creek was raised as a query.

A Stormwater Management Plan has been prepared with the EIS and new works will ensure no drainage impacts to the existing overland flow.

Construction impacts – timeline, hours, staging

Queried as to when demolition would start, and if the impacts would be mitigated in terms of traffic and noise. Construction hours and timeline.

Timing is dependant on approvals however likely to occur early/mid 2023 and staging as follows:

- Stage 1: Early works 6 months
- Stage 2: Health building 20 months
- Stage 3: Seniors Living South 14 months
- Stage 4: Seniors Living North 12 months
- Stage 5: Respite 8 months

Noise and vibration mgmt. plan and sediment/erosion control plan have been submitted with the EIS.

Further information requests

A number of community members enquired about the process, when further information (e.g. detailed plans) would become available and when they would have an opportunity to provide formal responses to the detailed design.

Public exhibition of the SSD will occur and formal submissions can be made. Project updates will continue separately by HammondCare.

Service provision

What is the model for Serviced Seniors Living? Are all over 55 (years of age) Seniors Living units serviced?

The units are only for 75 years and older and with chronic health needs.

6.3.1 Outcomes of broader LGA-wide consultation undertaken by Lane Cove Council

The following section sets out LGA-wide consultations which may provide insights for the project, from a broader community perspective.

Liveable Lane Cove Community Strategic Plan (Lane Cove Council, 2018)

In preparation of the Community Strategic Plan, Lane Cove Council undertook consultation with approximately 10% of households in Lane Cove, utilising website exhibitions, surveys, local business forums, focus groups, public stalls, and other methods of engagement. The community identified several issues affecting the LGA, including higher density living, availability and maintenance of recreational and open space, traffic and parking, and the need to account for cultural diversity in service provision. Council's engagement activities have informed the following objectives and strategies for Lane Cove:

- Objective 2: To identify ways to enhance the community's health and wellbeing

  Provide input into plans to address gaps in health and community services and lobby for increased government services and support

- Objective 3: To ensure that Lane Cove offers quality services and facilities that are accessible, relevant, affordable and well used/ To integrate services and achieve seamless service provision by government and community agencies.
- Objective 7: To encourage high quality planning, building and urban design outcomes that preserve, strengthen and enhance the existing diverse character areas of Lane Cove.
- Objective 9: To ensure assets and infrastructure cater for increased population growth, are well maintained and support sustainable living across all demographics.
- Objective 11: To ensure that long and short term community needs for adequate and accessible on and off street parking are met.
- Objective 12: To ensure traffic volumes and speeds accord with local conditions and road type/ To alleviate road congestion and improve traffic flow and safety.

Ensure application of appropriate traffic management measures to ensure the safety and amenity of local streets and improve traffic flow and high volume areas.

Community Wellbeing Survey (Lane Cove Council, 2019)

In 2019, Lane Cove Council conducted their third Community Wellbeing Survey which indicated that their Wellbeing Index rating was at 74.8. This is a high score, with anything above 60 indicating that the majority of respondents feel positive about their community, and personal wellbeing. Council sent out the survey to 3,000 randomly selected residents and received 507 responses.

6.4 Data considerations for this assessment

We note that the community and stakeholder perspectives are primarily based on engagement activities that require an active interest to participate. This may lead to over-representation of the voices of certain community or stakeholder groups (e.g. older women are more likely to have time and interest to participate in community meetings) and underrepresentation of others, and may hence be biased to an extent.

However, the Council and HammondCare approaches appear well considered and engagement activities broad enough to gauge and represent a range of community views to adequately inform the Social Impact Assessment.

7.0 Social Impact Assessment

7.1 Assessment framework and scope

As the proposed development classifies as a State Significant Development, this SIA has been prepared based on the *SIA Guideline* (NSW DPIE 2021), as per the Secretary's Environmental Assessment Requirements (SEARs).

This assessment considers the potential impact on the community and social environment should the social impacts envisaged occur, compared to the baseline scenario of the existing use of the site and social context.

The purpose of this social impact analysis is to:

- Identify, analyse and assess any likely social impacts, whether positive or negative, that people may experience at any stage of the project lifecycle, as a result of the project
- Investigate whether any group in the community may disproportionately benefit or experience negative impacts and proposes commensurate responses consistent with socially equitable outcomes
- Develop social impact mitigation and enhancement options for any identified significant social impacts.

Ultimately, there can be two main types of social impacts that may arise as a result of the proposed development. First, direct impacts can be caused by the project which may cause changes to the existing community, as measured using social indicators, such as population, health and employment. Secondly, indirect impacts that are generally less tangible and more commonly related to matters such as community values, identity and sense of place. Both physically observable as well as psychological impacts need to be considered.

This study identifies the following key social factors relevant to the assessment of social impacts of the project - way of life, health and wellbeing, accessibility, community, culture, surroundings, and livelihoods. Impacts on decision-making systems were identified as negligible as part of the SIA Scoping stage and have therefore not been assessed in detail in this report.

7.2 Key affected communities

This assessment covers both the Primary Study Area (PSA), which is expected to experience social impacts associated with the temporary construction activities and some of the future operational impacts, as well as the broader social localities (Secondary Study Area/SSA) that are likely to experience the resulting benefits from the operational phase of the project. These study areas are shown in **Section 6.0.**

Key communities to experience social impacts and/ or benefits of the project can be grouped as follows:

- Hospital communities (staff, volunteers, suppliers etc)
- Patients attending the health facilities within the hospital precinct, their carers and visitors
- Neighbouring residents, including aged care living residents
- Neighbouring businesses
- Local area workers
- Visitors to other institutions and businesses within walking distance of the area
- Temporary construction workers in the area.

7.3 Impact assessment factors and responses

The following section sets out the assessment of social impacts arising from the proposed development and recommended responses, including measures to enhance social benefits and mitigate potentially negative impacts, across the suite of factors set out in the DPIE SIA Guideline. The assessment has been based on the information available to date, and is primarily a desktop study, informed by a review and analysis of publicly available documents relevant to the precinct.

Assessment factors

The SIA Guideline classifies social impacts in the following way, which forms the core basis of this assessment:

- ***Way of life****: how people live, get around, work, play and interact with one another each day;*
- ***Community****: its composition, cohesion, character, how it functions, resilience, and people's sense of place;*
- ***Accessibility****: how people access and use infrastructure, services and facilities (private, public, or not-for-profit);*
- ***Culture****: both Aboriginal and non-Aboriginal – people's shared beliefs, customs, practices, obligations, values and stories, and connections to Country, land, waterways, places and buildings;*
- ***Health and wellbeing****: people's physical, mental, social and spiritual wellbeing – especially for people vulnerable to social exclusion or substantial change, psychological stress (from financial or other pressures), access to open space and effects on public health.*
- ***Surroundings****: access to and use of natural and built environment, including ecosystem services (Shade, pollution control, erosion control), public safety and security, as well as aesthetic value and amenity.*
- ***Livelihoods****: including people's capacity to sustain themselves through employment or business.*
- ***Decision-making systems****: the extent to which people can have a say in decisions that affect their lives, and have access to complaint, remedy and grievance mechanisms.*

The evaluation includes a risk assessment of the degree of significance of risk, including the envisaged magnitude (duration, extent, severity/ sensitivity), likelihood, and potential to mitigate/enhance and likelihood of each identified impact. The social impact significance matrix provided within the SIA Guidelines Technical Supplement (see **Table 7***)* has been adapted for the purposes of undertaking this social and impact assessment.

Each impact has been assessed and assigned an overall risk that considers both the likelihood of the impact occurring and the consequences should the impact occur. The assessment also sets out recommended mitigation, management and monitoring measures for each identified matter.

Magnitude of impact generally considers the following dimensions:

- Extent – *Who specifically is expected to be affected (directly, indirectly, and/or cumulatively), including any vulnerable people? Which location(s) and people are affected? (e.g. near neighbours, local, regional, future generations).*
- Duration – *When is the social impact expected to occur? Will it be time-limited (e.g. over particular project phases) or permanent?*
- Severity or scale – *What is the likely scale or degree of change? (e.g. mild, moderate, severe)*
- Intensity or importance – *How sensitive/vulnerable (or how adaptable/resilient) are affected people to the impact, or (for positive impacts) how important is it to them? This might depend on the value they attach to the matter; whether it is rare/unique or replaceable; the extent to which it is tied to their identity; and their capacity to cope with or adapt to change.*
- Level of concern/interest – *How concerned/interested are people? Sometimes, concerns may be disproportionate to findings from technical assessments of likelihood, duration and/or intensity.*

Table 5 Defining magnitude levels for social impacts

Magnitude level	Meaning
Transformational	• Substantial change experienced in community wellbeing, livelihood, infrastructure, services, health, and/or heritage values; • permanent displacement or addition of at least 20% of a community.
Major	• Substantial deterioration/improvement to something that people value highly, either lasting for an indefinite time, or affecting many people in a widespread area.
Moderate	• Noticeable deterioration/ improvement to something that people value highly, either lasting for an extensive time, or affecting a group of people.
Minor	• Mild deterioration/ improvement, • for a reasonably short time, for a small number of people who are generally adaptable and not vulnerable.
Minimal	• Little noticeable change experienced by people in the locality.

Table 6 Defining likelihood levels of social impacts

Likelihood level	Meaning
Almost certain	Definite or almost definitely expected (e.g. has happened on similar projects)
Likely	High probability
Possible	Medium probability
Unlikely	Low probability
Very unlikely	Improbable or remote probability

Table 7 Social impact significance matrix

Likelihood	Magnitude				
	Minimal	**Minor**	**Moderate**	**Major**	**Transformational**
Very unlikely	Low	Low	Low	Medium	Medium
Unlikely	Low	Low	Medium	Medium	High
Possible	Low	Medium	Medium	High	High
Likely	Low	Medium	High	High	Very high
Almost certain	Low	Medium	High	Very high	Very high

Source: NSW DPIE, 2021, Technical Supplement - Social Impact Assessment Guideline for State Significant Projects.

7.4 Impact assessment factors and responses

Way of life – how people live, get around, work, play and interact with one another each day

Potential impacts

During construction:

- Temporary negative impacts to way of life associated with the noise, dust and vibration caused by the construction activity at the site, which may result in disruption for the Greenwich Hospital community, patients, visitors, and local residents, as well as other workers and visitors in the immediate vicinity. The impacts may disproportionally impact following groups:
  - Workers at Greenwich Hospital due to construction taking place in "live" hospital environment. There may be impacts to the usual working environment and routine of the staff of the hospital and surrounding buildings (e.g. noise or vibration may be disrupting activities in the existing facilities).
  - Visitors to the hospital, including patients and their carers who may be experiencing illness or distress. They may be more sensitive to way of life impacts associated with the construction phase as a result.
  - Residents living along Gore Street, close to the construction site, may be disrupted by construction noise, vibration and dust. It is noted there are various aged care facilities near the site, and that these residents may be more sensitive to various social and wellbeing impacts.
  - Note that detailed assessments have been provided with the EIS in relation to traffic management, including during construction.
- Potential way of life impacts for the hospital community well as surrounding residents, associated with traffic changes during construction at the site, including:
  - Disruption and changes to way of life associated with increased traffic, reduced onsite parking, pressure on parking from construction workers accessing site, truck movements associated with the construction activity on the site, which may result in increased inconvenience or road safety issues in the area.
- Potential way of life impacts associated with changes to daily work and care environments of the Greenwich Hospital, leading to inconvenience, disruption, and/or changes to routines. A Staging Plan has been prepared to guide the development and minimise disruptions to way of life, particularly for patients and hospital workers.
- Potential way of life impacts associated with changes to wayfinding through Greenwich Hospital Campus and surrounding roads due to the establishment of the construction site, which may result in inconvenience and disruption to staff, patients and visitors moving around the precinct. This may be disproportionally felt by patients and their carers accessing hospital services, who may not be familiar with the neighbourhood or may be experiencing illness or disability, or limited mobility.

During operation:

- Improvements to way of life and daily routines for staff and visitors of Greenwich Hospital associated with delivery of an integrated, contemporary healthcare campus with specialised care services for seniors and people with complex health needs, to meet the growing community demand in the North Sydney Local Health District (NSLHD). The existing Greenwich Hospital is a dated 1960s facility which is no longer fit for purpose, and the proposal addresses an identified need for more outpatient support services in line with the 'HammondCare at Home' model, and specific design requirements for dementia care, including a shift to smaller households with direct access to secure external terraces. Potential improved quality of care, improved capacity of services, staff and visitor satisfaction is anticipated.
- Delivery of new parking facilities is likely to improve way of life in regard to enhanced convenience and access to the site and improved traffic flow – 329 parking spaces proposed.
- Delivery of staff amenities and other clinical and non-clinical support spaces is likely to improve way of life with enhanced comfort and convenience, staff and visitor satisfaction. The main community spaces, including a dining room/multi-purpose room and café, are located in the health building adjacent to the Seniors Living building, where the buildings interface with the central landscape. There are multiple access points to these facilities, including an accessible covered walkway.
- Delivery of the new aged care facilities are likely to have improved wayfinding, traffic movement, and parking capacity benefits for the Greenwich Hospital community and surrounding residents.

Potential impacts
Responses / mitigation measures

During construction:

- The staging plan and mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with noise and vibration and visual amenity during the construction phase.
- Implement measures in the Construction Traffic Management Plan including designated construction worker access, to avoid patient and hospital worker disruptions, as well as a full time traffic controller to prevent congestion on St Vincent's Road.
- Develop a Communications and Engagement strategy, to communicate with surrounding residents, workers, patients and carers, students and visitors to ensure that all stakeholders are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided, during construction.

During operation:

- Consider opportunities to enhance pedestrian connections to the surrounding neighbourhood (e.g., ensure adequate wayfinding and pedestrian connections to bus stops along River Road, ensuring surrounding walking/cycle paths are level and well-maintained, safe, and well-sign posted).
- Ensure pedestrian connections between the site and surrounding health facilities are accessible to people experiencing reduced mobility (e.g., ensuring surrounding walking paths are level and well-maintained, there are frequent resting places).
- Develop an operational Plan of Management to monitor the impact of the expanded hospital operations on staff and other stakeholders, including Greenwich Public School opposite the site on the northern side of River Road and nearby residents.
- Explore opportunities to support and promote active transport and sustainable travel to the new facility.
- Ensure any food and beverage services on the site provide fresh, healthy and affordable food options, considering sustainable procurement opportunities for third party vendor management contracts (food and beverage, and maintenance and gardening).

Summary:	
Overall impact	Overall improved access to high quality health care facilities at the Greenwich Hospital would have a significant positive benefit to way of life. The redevelopment of the site, if impacts associated with construction are well mitigated, will ensure positive social outcomes for the community. Long term positive impacts associated with improved hospital facility and capacity are expected to be almost certain. The hospital has operated since 1966 and the proposal will replace outdated health and hospital facilities. Negative social impacts associated with way of life are medium during construction, but low during operation: • **Construction: Medium (likely minor) - Negative** • **Operation: High (likely moderate) – Positive**
Likelihood	Short term construction impacts with longer term positive impacts associated with improved contemporary health care facilities on this site.
Duration	Operational benefits are long term
Consequence	The consequence of change as a result of construction to way of life would be low – negative. As a result of operation is moderate – positive.

Potential impacts	
Severity/ sensitivity	High sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	The impact is likely to be experienced differently by individuals and groups. Local residents, workers and visitors may be impacted, likely through traffic and construction impacts. These impacts may disrupt daily routines, amenity and access of surrounding residents.
Potential to mitigate/ enhance	The potential to mitigate impacts is high, as construction management and effective engagement can be utilised to address and manage any concerns that stakeholders may have. Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. Ongoing contact and engagement will be crucial to ensure stakeholders are informed about all changes that may impact them throughout the project. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

Health and wellbeing – including physical, mental, social and spiritual – and especially for vulnerable people; access to open space and effects on public health

Potential impacts

During construction:

- Potential negative impacts to wellbeing of residents, hospital staff, and other workers at Greenwich Hospital, as well as residents and visitors in the area, associated with construction dust, noise and vibration. Many visitors to the hospital (i.e. hospital patients and their carers) are likely to be experiencing illness, disability or distress, and may be therefore disproportionally impacted by construction impacts (e.g. visitors with existing respiratory conditions).
- Potential temporary changes/disruption to the accessibility of the health infrastructure at this site due to construction taking place in "live" hospital environment. There may be changes to work and care environments, which should be further detailed in the Staging Plan.
- Decanting of staff and patients to accommodate demolition and construction activities may result in changes to/potential disruption to accessibility of health infrastructure, including disrupted access to surrounding health infrastructure.

During operation:

- Positive impacts associated with improved access to health facilities on this site, and in particular, the niche aspect of this proposal which will be an integrated Serviced Seniors Living and in-house health care and opportunities to ‘age in place’ or live in communities with access to specialised health services. The proposed project will deliver new in-patient beds, consulting rooms, respite and ancillary elements (café etc) as well as the supported Seniors Living complex in the 2 blocks on the western part of the site. The high-quality health services within the Northern Sydney Local Health District (NSLHD) will have positive impacts to physical and mental health for patients/visitors, to Lane Cove LGA residents, and the broader NSLHD.
- Positive health and wellbeing benefits associated with the delivery of new high quality staff amenities, and other clinical and non-clinical support spaces leading to more opportunities for social interaction, staff, patients and carers with the improved amenity of the hospital environment.
- Cumulative benefits during operation as a result of the delivery of assisted independent living buildings and respite care building, which will improve the accessibility of high-quality aged care services and subsequently an improved way of life for independent living residents. The facilities will be designed to achieve flexibility between serviced Seniors Living, Residential Care and Inpatient Hospital Services, to meet changing community needs over time.

Responses / mitigation measures

During construction:

Potential impacts

- Mitigation measures set out in the Construction Management Plan (CMP) should be implemented to reduce the impacts associated with noise and vibration and visual amenity during the construction phase.
- Implement the Staging Plan developed for the proposed development to minimise disruption to the hospital activities.
- Implement mitigation measures included in technical reports prepared to support this SSDA, including Acoustic Assessment Report and Traffic Report.
- Develop a communications and engagement strategy to communicate with surrounding residents, workers, patients, carers, visitors, and other stakeholders to ensure that all stakeholders are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Implement a Transition Plan to assess impacts from the current working environment to the future working environment delivered by the proposed development.
- Consider opportunities to enhance accessible pedestrian connections to neighbouring green and recreational spaces that are within walking distance to support health and wellbeing.
- Explore opportunities to incorporate staff and consumer feedback and priorities into the design of the project's non-clinical spaces and landscaped areas.
- Consider further opportunities to enhance staff and patient access to green space and fresh air to improve health and wellbeing of precinct consumers and staff.

Summary:	
Overall impact	Overall, the new facilities at the Greenwich Hospital site would have a significant positive benefit to health and wellbeing of residents, patients, and the community. The redevelopment of the site, if impacts associated with construction are well mitigated, will ensure positive health and wellbeing outcomes for the community. Negative social impacts associated with health and wellbeing are medium during construction, but low during operation: • **Construction: Medium (possible moderate) - Negative** • **Operation: Very high (almost certain major) - Positive**
Likelihood	Impacts of the proposed development during construction are likely. Positive impacts of the proposed development are highly likely during operation, both locally and to a district/ regional extent.
Duration	Operational benefits are long term
Consequence	The consequences of negative impacts during construction will be moderate. The operational benefits will be significant.
Severity/ sensitivity	High sensitivity to impacts due to construction taking place in "live" hospital environment and presence of people (visitors and patients) likely to be experiencing illness, disability, and/or distress.
Extent	The proposal is likely to have significant positive contributions to health and wellbeing for the surrounding community and the region in the long term. However, construction impacts would likely impact residents and workers in the Primary Study Area. Access to improved health care facilities and associated amenity would impact the resident community and the hospital staff living across the broader SSA and beyond.
Potential to mitigate/ enhance	The potential to mitigate impacts is high, as construction management and effective engagement can be utilised to address and manage any concerns that stakeholders may have. Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. Ongoing contact and engagement will be crucial to ensure stakeholders are informed about all changes that may impact them throughout the project.

Potential impacts	
	During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design. The project will deliver significant health and wellbeing benefits for the local community and district and regional communities.

Accessibility – access to and use of infrastructure, services and facilities

Potential impacts

The proposed development may have the following potential social impacts with relation to accessibility, including how people access and use infrastructure, services and facilities.

During construction:

- Potential negative impacts as a result of changes to wayfinding within the Greenwich Hospital campus buildings, and potentially impacts to access to public transport, which may result in potential increased disruption and inconvenience. Key considerations include:
  - Establishment of hoarding and changes to the streetscape associated with the construction phase may affect wayfinding and access for health care workers, hospital users and visitors.
  - Reduced or temporarily relocated car parking, truck movements associated with the construction activity, which may impact accessibility across the site.

  It is noted the project team has engaged with the relevant user groups and stakeholders and the project works have been carefully staged to minimise disruption. For example, works have been planned to take place in specific sequences to retain current number of operating theatres at any one time.
- Some hospital consumers (including patients, their families, visitors and volunteers) are likely to experience illness, disability or distress, and may therefore disproportionally impacted by accessibility issues.
- Potential reduced accessibility and inconvenience associated with construction-related traffic flows, increased traffic, reduced parking, truck movements on the streets surrounding the site. Parking for hospital staff and visitors will be reduced in Stage 1 and 2 however, this will be offset by the temporary transfer of hospital elements (e.g. Hydrotherapy) and the reduction of some elements (Preliminary CTMP, April 2022).

During operation:

- Increased patient and staff capacity on the site, including emergency vehicles, may increase the number of traffic movements. Potential changes to parking and public transport availability may have implications for accessibility in terms of potential increased travel times, inconvenience, and frustration for the Greenwich Hospital Campus staff, patients, carers and visitors.
- Improved accessibility of health services and facilities for assisted independent living buildings and respite care buildings. The site has three vehicular entry/exit points at interfaces with River Rd and St Vincent's Rd and each of these accommodates separate pedestrian access points. There is an additional pedestrian access point at the corner of River Rd and St Vincent's Rd which traces the original Bridle path.
- The delivery of new parking facilities will improve access to health and aged care facilities with double the number of existing car parking bays proposed – following the completion of Stage 1 and 2, there will be some 200 parking spaces available for the new Hospital (Preliminary CTMP, April 2022). The proposal will potentially improve traffic flow, for staff, patients, carers, visitors and the NSLHD community. A variety of pedestrian paths through the site are proposed, as well as an extension of the bicycle route along River Road/Penrose Street westwards from Longueville Road, past the site to Greenwich Road, with connection to the north, south and east.
- Markers in the landscape will guide visitors and residents around the site, while fulfilling a multi-purpose role. The markers will also work as informal seating, circuit and distance markers to assist navigation.

Responses / mitigation measures

During construction:

Potential impacts

- Mitigation measures set out in the Preliminary Construction Management Plan (Ref 20352) will be implemented to reduce the impacts associated with accessibility during the construction phase. This includes minimising access movement of heavy vehicles during school arrival/departure times, and the delivery/dispatch of heavy plant to occur outside of normal commuter peak times. Limited on-site parking will be provided for construction workers.
- Implement the Staging Plan developed for the project to minimise disruption to the access and impact to hospital activities.
- Develop a communications and engagement strategy for the Project ensuring that all stakeholders (including surrounding residents, workers, patients, carers, visitors, and other stakeholders) are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Internal and external wayfinding strategies will be implemented ensure that the hospital site and surroundings are legible and walkable for users of the site during both construction and operation.
- Encourage use of pedestrian connections to bus stops and public transport routes (e.g on River Road)
- Implement Green Travel Plan to ensure sustainable and active transport options are adopted.
- Ensure pedestrian connections between the site and surrounding health facilities are accessible to people experiencing reduced mobility (e.g. ensuring surrounding walking paths are level and well-maintained, there are frequent resting places).
- Consider opportunities to enhance pedestrian connections between the site and surrounding current and future facilities to encourage active transport and to promote physical activities.
- Continue to collaborate with Lane Cove Council, Ambulance NSW, and TfNSW to identify opportunities to enhance positive benefits to accessibility.

Summary:	
Overall impact	Overall improved access to high quality health facilities at the site would have a significant positive benefit to accessibility. Negative social impacts associated with accessibility are medium during construction, but low during operation: • **Construction: Medium (possible moderate) - Negative** • **Operation: High (likely major) - Positive**
Likelihood	Positive impacts of the proposed development are highly likely.
Duration	Operational benefits are long term.
Consequence	The consequence of impacts during the construction phase are considered moderate. Upon completion the consequence of the development is considered minimal.
Severity/ sensitivity	Moderate to high sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	Construction impacts to access would likely primarily impact workers, patients, visitors and residents in the PSA. The proposal is likely to have significant positive contributions in terms of access to high quality social infrastructure for the surrounding community and the region in the long term.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. It is important to ensure regular communication and engagement with stakeholders to manage the community awareness and understanding of the Project during the construction and operation phase. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

Livelihoods: including impacts on employment or business, experience of personal breach or disadvantage, and the distribution equity of impacts and benefits

Potential impacts

During construction:

- Increased access to employment opportunities within the construction sector during the construction phase. While these jobs will be temporary, project based work is typical to the sector.
- Potential improved viability of businesses in the area associated with trade from increased number of workers (construction) in the vicinity (for example, cafes, services and shops in the local area).

During operation:

- Positive benefits to livelihoods with the provision of employment opportunities as a result of the expanded capacity of the hospital, generating an additional 174 FTE operational jobs.
- Potential improved viability of other businesses in the area associated with concentration of employment uses and increased number of visitors to the area.

Responses / mitigation measures

During construction:

- Positive social impacts and community acceptance of the project can be amplified and have flow-on benefits in other aspects of contractor life by using social employment and procurement practices and hiring locally. Explore opportunities to engage, train and employ local residents, and utilise the skills and services of local businesses during construction.
- Develop a communications and engagement strategy to communicate with surrounding residents, workers, patients and carers and visitors to ensure that all stakeholders are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Explore opportunities for socially sustainable procurement methods which prioritise employment of local residents in Lane Cove LGA. The inclusion of social clauses into tenders and contracts can also assist with advancing government objectives.

Summary:

Overall impact	Provision of new contemporary health care facilities at this location would have a significant positive benefit to livelihoods, subject to the needs and cultural sensitives of a diversity of future patients and visitors is taken into account and well-executed in the design. The operation of the facilities will provide employment opportunities (174 FTE roles) both indirect and direct. Negative social impacts associated with livelihoods are low during construction and operation. • **Construction: Medium (possible moderate) - Positive** • **Operation: Medium (likely minor) – Positive**
Likelihood	Positive impacts of the proposed development are highly likely.
Duration	Operational benefits are long term, construction impacts are temporary.
Consequence	Moderate consequence during construction
Severity/ sensitivity	Moderate sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress
Extent	Construction impacts would likely mostly impact the construction sector and provide jobs within the PSA. Whilst it is a vision of both state and local governments to provide employment opportunities closer to home, the number of jobs provided within the new health care facilities and supporting businesses would likely impact workers further across the SSA.

Potential impacts	
Potential to mitigate/ enhance	Benefits to livelihoods can be amplified by exploring opportunities to employ local residents during the construction and operational phases.

Community, including its composition, cohesion, character, how it functions, and sense of place

Potential impacts

During construction:

- The construction period may disrupt the existing local community surrounding the site, including:
  - Impacts to composition:
    - Changes to the composition of the local community may be experienced during construction, with an increased number of construction workers in the local area, based on the number of construction jobs and length of construction required to deliver the building.
    - The increased number of construction workers in the area may lead to perceptions of 'strangers' and decreased safety. This could be mitigated by hiring construction workers locally.
  - Potential impacts to how the community functions associated with the establishment of a major construction site which may impact wayfinding, appearance of the site, and living routines for staff, patients, visitors, volunteers, local residents and businesses in the area.

During operation:

- Potential changes to the community composition of Greenwich Hospital associated with the increased capacity of the hospital, which would increase the number of staff, patients, visitors and volunteers accessing the site, leading to changes in the composition of the community of the site. However, the expansion is consistent with the NSLHD strategic drivers. This impact can be interpreted as positive or negative, depending on the perspective of the community member.
- Potential changes to the community profile associated with delivery of new employment opportunities and expansion of the workforce at this site – increased number of staff, residents, visitors as a result of the delivery of assisted independent living buildings and respite care building. This impact can be interpreted as positive or negative, depending on the perspective of the community member.
- Potential benefits to community cohesion and functioning for the staff, patients and visitors of Greenwich Hospital Campus with the delivery of staff amenities and other clinical and non-clinical support spaces. Positive aspects of the proposal including relocating parking underground and new landscaped areas are seen to improve community connections and character.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with disruption to the Greenwich Hospital and surrounding residents.
- Positive social impacts and community acceptance of the project can be amplified by employing local residents.
- Develop a communications and engagement strategy to communicate with surrounding residents, workers, patients and carers and visitors to ensure that all stakeholders are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Collaborate with Council and other community stakeholders to maximise benefits of shared and/or public uses of the site.
- Explore opportunities to include high quality internal and external gathering spaces, breakout spaces and other design elements to support worker wellbeing within the proposed development.

Potential impacts	
Summary:	
Overall impact	Overall improved high quality health care facilities at Greenwich Hospital would have a significant positive benefit to community. The refurbishment and expansion of the site, if impacts associated with construction are well mitigated, will ensure positive social outcomes for the broader community. Any negative social impacts on the community composition and cohesion are medium during construction, but low during operation: • **Construction: Medium (possible minor) - Negative** • **Operation: Low (unlikely minimal) – Negative or Positive, depending on the perspective of the residents of the SSA.**
Likelihood	Short term construction impacts with longer term positive impacts associated with improved health care facilities and public space at this site.
Duration	Operational benefits are long term.
Severity/ sensitivity	High sensitivity to impacts, as changes to the site would impact visitors to the hospital who may be experiencing illness, disability or distress.
Extent	Construction impacts would likely impact worker profile in the PSA. Operational phase may benefit the broader local community within the PSA.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

Culture: shared beliefs, customs, values and stories, and connections to land, places, buildings

Potential impacts

During construction:

- Potential negative changes to the community's connection to place associated with the construction period, which would result in changes to the appearance and functionality of the site and may disrupt place narratives associated with the site.
- Potential negative impacts to sense of place associated with Aboriginal cultural heritage in relation to the eastern portion of the site. As identified through the Aboriginal consultation phase as an area of potential Aboriginal cultural heritage due to lack of disturbance. It is noted that the proposed buildings are predominantly located outside of this area, in the centre and western portions of the site (with the exception of walking tracks and some encroachment of the respite building).

During operation:

- Potential permanent negative impacts to connections to place associated with demolition of existing non-significant hospital buildings and construction of new facilities at Greenwich Hospital site. Though not proposed to be demolished, works to the State-listed heritage item Pallisters House c.1892, are proposed. However, it is recognised that new, positive connections to place will be formed over time over the operation of the new facility.
- Positive benefits to connection to place associated with the delivery of improved clinical and non-clinical spaces of a high technical and architectural quality. The following key design objectives have been developed to respect, distill and enhance the sense of place:
  - Prioritisation of landscape on the site (preservation of existing trees and creation of densely vegetated podiums to create an Urban Tree Canopy).
  - Preserving Pallister House and being respectful of the heritage curtilage – the removal of large amounts of bitumen car parking and replacement with high quality landscape spaces together with the opening up of vistas to Pallister House will enhance its setting.

Potential impacts

  - Responding to the Aboriginal cultural heritage of the site and committing to the preservation areas of significance.
  - Removal of outdated building stock and creating a campus which sits as a backdrop to the natural and heritage characteristics of the site.

- Positive benefits to culture associated with incorporating Aboriginal design elements within the proposed development, which would assist in maintaining connection to Aboriginal culture and heritage.
- Increased activation of the site due to the increased capacity and re-design will result in new place narratives, improved connection to place.

Responses / mitigation measures

During construction:

- Ensure wayfinding and signage will be complimentary to the precinct theme and be multi-functional as recommended in the landscaping report. Other recommendations which will assist in preserving culture and sense of place include: the timber gateway to the Bridlepath entry at the corner of River Road and St Vincent's Rd should be reinstated as a pedestrian entry. The gateway will be reinterpreted to suit the future needs to the entry. Heritage and site interpretation will be integrated or associated with this structure. (*Landscape EIS Report, April 2022, Taylor Brammer Landscape Architects Pty Ltd*).
- Identify opportunities for public art on hoardings or other placemaking opportunities in consultation with Lane Cove Council to reduce visual impact of construction activity and catalyse improved connection to place at the site.
- Preservation of the area of moderate archaeological potential within the vegetated bushland, towards the eastern boundary of the site, as per the methodology and research design for sub-surface archaeological testing. Findings of the testing undertaken under the methodology should be incorporated into the interpretation plan and the ACHMP and be used to inform the mitigation measures during construction and ongoing management of the Aboriginal Cultural Heritage at the site.
- Implement recommendations as per Aboriginal Cultural Heritage Assessment Report which includes avoiding disturbing the sandstone shelters and rock overhangs.

During operation:

- Positive social impacts and community acceptance of the proposal can be amplified by employing local residents during the construction and operational phases of the development.
- Implement recommendations as per the Aboriginal heritage impacts draft report which include:
  - Incorporate recommendations from the ACHAR into the ACHMP being prepared for the site;
  - Incorporate recommendations from the ACHAR into the interpretation plan being prepared for the site.
  - Input should be sought from the RAPs regarding the appropriate interpretation of cultural values to be included within the interpretation plan;
  - Where possible consideration should be given to opportunities for Aboriginal owned organisations or individuals creating content for any interpretive material and provided ongoing maintenance services – for example, art work from local Aboriginal artists or maintenance of bush tucker gardens etc.
- Implement recommendations as per the Schedule of Conservation Works for the heritage-listed Pallisters House.

Summary:

Overall impact	Provision of high-quality contemporary health care facilities at this location would have a positive benefit to culture subject to cultural needs of the worker, patient and carer community being taken into account and executed in the hospital design and operation. Negative social impacts associated with culture are low during construction and operation: • **Construction: Low (unlikely minor) - Negative** • **Operation: Low (unlikely minimal) - Negative**

Potential impacts	
Likelihood	Positive impacts of the proposed development are likely, and negative impacts are minor during construction.
Duration	Operational benefits are long term, construction impacts are temporary.
Severity/ sensitivity	High sensitivity to impacts, as changes to the site would impact visitors to the hospital who may be experiencing illness, disability or distress.
Extent	Construction impacts would likely impact stakeholders within the PSA. Operational benefits have the potential to enhance connection to culture for visitors, staff and patients from across the SSA and beyond.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

Surroundings – amenity (access to and use of natural and built environment, including ecosystem services, public safety and security as well as aesthetic value and amenity

Potential impacts

During construction:

- Negative impacts on the amenity of the area associated with dust, noise, and vibration due to construction activity. It is noted that the construction is taking place in a "live" hospital environment and patients and visitors are considered as sensitive receivers. The patients and carers visiting the facilities may be experiencing disabilities, illness and/or distress that may be particularly sensitive to construction-related disruption.
- Temporary negative changes to the streetscape and appearance of the site associated with construction activity. The establishment of hoarding and changes to the streetscape associated with the construction phase may have an adverse effect on:
  - Visual and aesthetic value of the area associated with changes to views in the area associated with construction activity, particularly for local residents, workers and visitors to the area.
  - Perceptions of night-time safety in the area – for the health-care staff working night-time shifts in the hospital as well as patients and carers needing to access the site (e.g. for emergencies) during the night.
- Potential changes to wayfinding around and inside the hospital which may cause inconvenience and disruption to patients, visitors and staff working on this site.

During operation:

- Positive permanent changes to the surroundings and appearance of the site associated with the delivery of the new buildings and landscaping component of the project. The proposal includes retention of various trees and amenity spaces as well as a change from an informal parking area to high quality landscape area. It is noted that a number of trees are to be retained and new trees are to provided, as per the conditions of the concept approval. Greater landscape connectivity and usage will be created through the removal of carparking at grade – carparking will be moved into the basement of the proposed buildings, eliminating the current barrier to greater landscape diversity and usage (Landscape EIS Report, April 2022, Taylor Brammer Landscape Architects Pty Ltd).
- Positive impacts to surrounding associated with the inclusion of a high proportion of landscaped terraces and roofs, along with 60% landscaped area, complements and preserves the dense urban canopy. Vehicular movements and basement access has been diverted under the building as much as possible to return the landscape back to the site. A View Impact Analysis has been undertaken by Clouston Associates to assess the visual impact from key public and private vantage points, including from Northwood which is located across the valley to the west. The VIA concludes that the visual impacts of the proposal are considered to be acceptable.

Potential impacts

- Potential improved perceptions of safety associated with increased activation of the site associated with an increased number of patients and workers on the site, accessing the site and other services in the area. This may be valuable for hospital staff who may be working shift hours and need to access and move around the site during late night hours.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan and Arborist Report will be implemented to reduce the impacts associated with visual amenity and tree protection during the construction phase.
- Implement a Communications and Consultation Plan for the Project ensuring that all stakeholders (incl. surrounding residents, workers, patients, carers, visitors, and other stakeholders) are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Implement recommendations of various technical reports into final design including lighting, landscaping and visual impact assessment, to ensure the retention of the landscape setting achieves a high quality design outcome in terms of amenity.
- Explore opportunities to incorporate staff and consumer feedback and priorities into the design of the projects non-clinical spaces and landscaping.
- Encourage use of pedestrian connections between the site and surrounding current and future facilities to encourage active transport and improve perceptions of safety in the areas surrounding the development (e.g. wayfinding, lighting, adequate shade, public art).
- Develop an operational plan of management to monitor the impact of the expanded hospital operations on surrounding residents and other users.

Summary:

Overall impact	Provision of high-quality health facilities at this location would have a significant positive benefit to surroundings. Negative social impacts associated with surroundings are medium during construction, but low during operation: • **Construction: Medium (likely minor) - Negative** • **Operation: Low (unlikely minimal) – Positive**
Likelihood	Positive impacts of the proposed development are highly likely, if strategic and design briefs are executed well, and negative impacts are mitigated during construction (e.g. staging plan to minimise disruption).
Duration	Operational benefits are long term, construction impacts are temporary.
Severity/ sensitivity	Moderate to high sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	Construction impacts would likely impact workers, patients, carers, residents and visitors in the PSA, improved surroundings and amenity would affect users of the site and workers and visitors from the broader SSA to the site.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

7.5 Monitoring and management framework

To monitor and measure the ongoing impact of the proposed development on relevant stakeholders and the surrounding community, the following framework is recommended:

During construction

- Undertake the development in stages as outlined in the documentation, to permit the existing Hospital activities to continue to function throughout the construction process.
- Development of a Construction Management Plan that includes complaints handling procedure for identifying and responding to community issues related to construction impacts.
- Ongoing consultation to ensure that key stakeholders are advised and consulted about major changes and disruptions, and the process for providing feedback and further consultation during the Project.

During operation

- Ongoing consultation with relevant stakeholders, as identified by HammondCare, to identify emerging social issues and trends, relevant to the hospital's operation, as they arise.
- Development and implementation of an Operational Plan of Management that mandates data collection (e.g. complaints register, user surveys) to enable ongoing monitoring of the performance of the proposed facilities over time.
- Ongoing monitoring of the Hospital's performance across a range of metrics, including patient and visitor feedback, community engagement, and community benefits. This could be achieved through the development of a framework of outcomes and KPIs with measurement approaches, such as school community and broader community surveys undertaken at, for example, five-year intervals.

8.0 Summary of social impacts: concluding comments

An assessment of the social impact categories, as defined within the *Social Impact Assessment Guideline* (DPIE, 2021) has been undertaken with consideration to the issues identified through the baseline analysis. Each category of impact outlined in the SIA Guideline is appraised with a significance of the impact based on the likelihood and magnitude of the change experienced by the community.

Overall, the level of impacts associated with the proposed development have been assessed to range from being Low to Very High, with no major significant negative impacts identified in relation to the proposal.

Key negative impacts identified with the proposed development at Greenwich Hospital relate to:

- Temporary impacts on the surroundings and amenity of the PSA associated with the proposed construction phase and potential associated traffic impacts, dust, noise, and/or vibration, with the proposed development to occur in a 'live' hospital environment. Patients and carers visiting the current facilities may be experiencing illness, disabilities and/or distress, and may be particularly sensitive to construction-related disruption. Temporary negative impacts to way of life associated with changes to wayfinding and pedestrian and vehicle access routes associated with construction activities may also be experienced. To minimise disruption, implementation of the Staging Plan is recommended. In addition, the impacts should be managed through a Construction Management Plan, and more broadly, compliance with relevant legislation and regulation.
- Due to the proposed increased capacity of the hospital, additional onsite carparking, and various changes to the accessibility of the site, there may be impacts to the Greenwich Hospital visitors, patients, residents and hospital workers. However, appropriate recommendations outlined in the Traffic Report, including wayfinding signage, would mitigate these social impacts accordingly.
- Potential minor changes to connection to place and heritage associated with the proposed minor works to Pallister House, which may have connections and place narratives for workers, patients and their families, that may be disrupted by construction activities.
- Consultation with Greenwich Hospital staff and stakeholders has highlighted that the majority of issues have been addressed through the revised Concept Plans, in relation to trees, privacy, and scale of the building.

The most significant social benefits of the proposal relate to:

- **Improved health and wellbeing of staff and patients** of Greenwich Hospital and the broader SSA, associated with the provision of the new hospital built to contemporary health standards and integrated aged care facilities including Seniors Living and additional beds to service the broader Health District.
- **Improvements to way of life,** daily routines, and health and wellbeing are associated with the delivery of the improved capacity of health facilities on the site and the integrated, contemporary healthcare campus the project aims to achieve - specialised care services and a continuum of care to age in place are proposed. The proposal is consistent with the strategic framework associated with an aging population in NSW and a growing and ageing population in the Lane Cove LGA.
- **Improvements to livelihoods** associated with increased employment opportunities, including during the construction phase and operational phase. Benefits to the growing community and other businesses in Lane Cove are therefore also likely.

Overall, the development will support various community priorities identified in local strategic documents, such as improved community health, improved landscaping, amenity and streetscape improvements, and improved access to health services. The development also has the potential to support community accessibility and inclusiveness with the inclusion of various landscaped activity areas, to facilitate social interactions and connections.

This assessment considers the overall level of the long-term social impact of the proposed development to be Very High and Positive. Any potential negative impacts can be mitigated through the implementation of a robust Construction Management Plan, Staging Plan, and ongoing consultation with the local community and relevant stakeholders.

Appendix A. Community Profile

Category	PSA	SSA	Greater Sydney
Income	-	-	-
Median individual income (annual)	$66,350	$59,830	$37,460
Variation from Greater Sydney median	77.1%	59.7%	na
% of persons (15 years or older) earning $1,000pw or more	58.3%	55.3%	37.3%
Median household income (annual)	$166,270	$122,210	$92,200
Variation from Greater Sydney median	80.3%	32.5%	na
% of Households earning $2,500pw or more	57.5%	46.8%	31.8%
Individual income			
No income	9.9%	10.3%	12.3%
Low	21.2%	22.1%	34.2%
Medium	37.7%	42.0%	41.9%
High	31.1%	25.7%	11.6%
Household income			
No income	1.0%	1.3%	2.0%
Low	5.9%	8.4%	14.1%
Medium	23.3%	29.7%	39.6%
High	69.8%	60.6%	44.3%
Age Structure	-	-	-
0 years	1.2%	1.4%	1.2%
1-2 years	2.1%	2.7%	2.6%
3-4 years	2.9%	2.8%	2.6%
5-6 years	2.3%	2.4%	2.6%
7-11 years	6.5%	6.0%	6.2%
12-17 years	8.5%	6.9%	6.9%
18-24 years	7.9%	7.5%	9.6%
25-34 years	12.2%	17.5%	16.2%
35-49 years	20.6%	23.4%	21.3%
50-59 years	12.9%	11.8%	12.3%
60-69 years	10.3%	8.9%	9.4%
70-84 years	9.1%	6.9%	7.1%
85 years and over	3.4%	2.0%	1.9%
Males	48.8%	49.2%	49.3%
Females	51.6%	50.8%	50.7%
Total persons	4,940	36,050	4,823,900
Median Age (years)	40.0	36.0	36.0
Country of Birth			
Australia	70.0%	63.4%	61.9%
Aboriginal and Torres Strait Islanders	*0.1%*	*0.3%*	*1.4%*
Other Major English Speaking Countries	13.1%	11.4%	7.6%
Other Overseas Born	16.9%	25.2%	30.5%
% speak English only at home	*83.9%*	*72.4%*	*62.5%*
Previous Address	-	-	-
Same address as 1 year ago	85.8%	79.6%	83.9%
Different address 1 year ago	14.2%	20.3%	16.0%
Same address as 5 year ago	57.2%	50.0%	56.6%
Different address 5 year ago	42.8%	49.6%	42.9%
Household Composition	-	-	-
Couple family with no children	29.6%	27.0%	23.8%

Couple family with children	39.6%	35.0%	37.5%
Couple family - Total	69.1%	62.0%	61.3%
One parent family	5.7%	7.2%	11.1%
Other families	0.8%	1.3%	1.3%
Family Households - Total	75.6%	70.4%	73.7%
Lone person household	20.0%	25.2%	21.7%
Group Household	4.4%	4.4%	4.6%
Dwelling Structure (Occupied Private Dwellings)	-	-	-
Separate house	64.3%	42.6%	57.2%
Semi-detached, row or terrace house, townhouse etc.	4.0%	5.5%	14.0%
Flat, unit or apartment	31.6%	51.8%	28.2%
Other dwelling	0.0%	0.1%	0.5%
Occupancy rate	*92.5%*	*91.2%*	*92.3%*
Average household size	2.7	2.5	2.8
Tenure Type (Occupied Private Dwellings)	-	-	-
Owned outright	42.6%	30.4%	30.0%
Owned with a mortgage	31.3%	33.4%	34.2%
Rented	24.3%	35.5%	35.1%
State or territory housing authority	0.0%	1.2%	4.2%
Housing co-operative/community/church group	0.4%	0.6%	0.5%
Other tenure type	1.8%	0.7%	0.7%
Attending Education (% of those attending)	-	-	-
Pre-school	7.5%	7.9%	6.9%
Infants/Primary Total	31.9%	30.4%	32.2%
Government	69.4%	66.2%	68.4%
Catholic	14.1%	20.9%	19.7%
Other	16.5%	12.9%	11.9%
Secondary Total	29.9%	26.5%	25.0%
Government	16.0%	24.6%	54.8%
Catholic	40.6%	43.3%	26.4%
Other	43.4%	32.1%	18.9%
Technical or Further Educational Institution	4.7%	6.0%	7.6%
University or other Tertiary Institution	24.6%	25.7%	24.2%
Other type of educational institution	1.4%	3.5%	4.0%
% of total population attending education	*26.0%*	*25.6%*	*25.2%*
Highest Level of Education Completed (% of population aged 15 years and over)	-	-	-
Year 12 or equivalent	86.9%	86.2%	67.5%
Year 9-11 or equivalent	11.7%	12.3%	26.7%
Year 8 or below	1.0%	1.1%	4.4%
Did not go to school	0.5%	0.3%	1.5%
Highest Level of Non-School Qualification	-	-	-
Postgraduate degree	23.4%	21.8%	13.9%
Graduate diploma or certificate	4.6%	4.9%	3.4%
Bachelor degree	50.1%	47.1%	36.4%
Advanced diploma or diploma	12.2%	13.7%	17.7%
Certificate	9.6%	12.4%	28.6%
% of persons with non-school qualifications (persons 15 years and above) - excludes not-stated and inadequately described	68.9%	67.9%	52.7%
Employment Status	-	-	-
Unemployed/ looking for work	4.3%	4.4%	6.0%

Labour force participation rate	67.7%	72.2%	65.6%
Need for Assistance			
With Need for Assistance	4.8%	3.4%	4.9%
No Need for Assistance	91.9%	92.3%	88.7%
Need not stated	3.3%	4.3%	6.4%

Top 10 Countries of Birth	**PSA**	**SSA**	**Greater Sydney**
1	Australia (70.0%)	Australia (63.4%)	Australia (61.9%)
2	England (6.1%)	England (5.1%)	China (5.0%)
3	New Zealand (2.6%)	China (4.3%)	England (3.4%)
4	India (2.3%)	India (2.4%)	India (2.9%)
5	China (2.0%)	New Zealand (2.3%)	New Zealand (1.9%)
6	United States of America (1.7%)	Malaysia (1.4%)	Vietnam (1.8%)
7	Malaysia (1.2%)	Hong Kong (1.4%)	Philippines (1.7%)
8	South Africa (1.1%)	South Africa (1.3%)	Lebanon (1.2%)
9	Hong Kong (1.1%)	Philippines (1.1%)	Korea South (1.1%)
10	Japan (0.7%)	Iran (1.1%)	Hong Kong (0.9%)

Top 10 Languages Spoken at Home	**PSA**	**SSA**	**Greater Sydney**
1	English (83.9%)	English (72.4%)	English (62.5%)
2	Mandarin (2.6%)	Mandarin (5.0%)	Mandarin (5.1%)
3	Cantonese (2.1%)	Cantonese (3.3%)	Arabic (4.3%)
4	French (0.9%)	Indo Aryan - other (1.3%)	Cantonese (3.1%)
5	Spanish (0.9%)	Spanish (1.3%)	Vietnamese (2.2%)
6	Hindi (0.7%)	Persian (1.2%)	Greek (1.7%)
7	Italian (0.7%)	Japanese (1.2%)	Hindi (1.4%)
8	Japanese (0.7%)	Hindi (1.0%)	Italian (1.4%)
9	Indo Aryan - other (0.6%)	Korean (0.9%)	Indo Aryan - other (1.3%)
10	Polish (0.6%)	Italian (0.9%)	Korean (1.3%)

Appendix B. SIA Scoping Checklist

See attached document.

Way of life: how people live, get around, work, play and interact with one another on a day-to-day basis | **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Way of life	Construction	**Demolition activities resulting in dust, vibration, noise**	Inconvenience, disruption, changes to daily living routines	Construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses and workers	Yes	Standard	Review of technical reports	
Way of life	Construction	**Changes to work and care environments**	Inconvenience, disruption	Construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses and workers	Yes	Detailed	Stakeholder interview with Health Infrastructure to understand transition plan.	Prepare transition plan to minimise impact to Hospital operations.
Way of life	Construction	**Changes to wayfinding**	Inconvenience, disruption, changes to daily living routines, increased travel times	Traffic impact assessment; construction management plan	Greenwich Hopsital Campus, potentially surrouning roads	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses and workers	Yes	Standard	Review of technical reports	Collaborate with Lane Cove Council, TfNSW, Ambulance NSW etc to minimise cumulative impacts.
Way of life	Construction	**Traffic, congestion, changes to parking**	Inconvenience, disruption, changes to daily living routines, increased travel times	Traffic impact assessment	Greenwich Hopsital Campus, potentially surrouning roads	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses and workers	Yes	Standard	Review of technical reports	
Way of life	Construction	**Decanting/relocation of staff and patients to accommodate demolition and construction activities**	Inconvenience, disruption, changes to daily living routines	Construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses and workers	Yes	Standard	Review of technical reports	
Way of life	Operation	**Improvements to working and care environments**	Enhanced convenience, potential improved quality of care, improved capacity of services, staff and visitor satisfaction	No	Greenwich Hospital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors	Yes	Detailed	Review of architectural plans, case study research, com engagement outcomes	
Way of life	Operation	**Delivery of new parking facilities**	Enhanced convenience and access to site, potentially improved traffic flow	Traffic impact assessment	Greenwich Hospital Campus	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors	*Unknown*	Standard	Review of technical reports	
Way of life	Operation	**Delivery of staff amenities and other clinical and non-clinical support spaces**	Potentially enhanced comfort and convenience, staff and visitor satisfaction	No	Within 400m of the construction site	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors	*Unknown*	Detailed	Review of architectural plans, case study research	
Way of life	Operation	**Delivery of new aged care facilities**	Improved wayfinding, traffic movement, and parking capacity	Traffic impact assessment	St George Hospital Campus	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors	Yes	Standard	Review of technical reports	

Health and wellbeing: people's physical, mental, social and spiritual wellbeing					Characteristics									
Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Health and wellbeing	Construction	**Dust, vibration, noise**	Impacts to wellbeing, e.g. visitors with existing respiratory conditions, noise disturbing resting patients	Construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local workers	Yes	Standard	Review of technical reports	
Health and wellbeing	Construction	**Changes to work and care environments**	Changes to/ potential disruption to accessibility of health infrastructure, including potential disrupted access to surrounding health infrastructure	Construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local workers	Yes	Detailed	Stakeholder interview with Health Infrastructure to understand transition plan.	
Health and wellbeing	Construction	**Decanting of staff and patients to accommodate demolition and construction activities**	Changes to/ potential disruption to accessibility of health infrastructure, including potential disrupted access to surrounding health infrastructure	No	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local workers	Yes	Standard		
Health and wellbeing	Operation	**Increased capacity and quality of health infrastructure at this site**	Improved accessibility of high quality health services within the NSLHD, positive impacts to physical and mental health for patients/ visitors	No	Lane Cove LGA, NSLHD	Long term	High	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, NSLHD community	Yes	Standard	Review of business case/demand analysis prepared for this project.	
Health and wellbeing	Operation	**Delivery of staff amenities and other clinical and non-clinical support spaces**	Potential improved staff wellbeing, due to more opportunities for social interaction, staff, patient and carers; increased amenity of the environment	No	The site	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors	Unknown	Detailed	Review of architectural plans, case study research	
Health and wellbeing	Operation	**Delivery of assisted independednt living buildings and repsite care building**	Improved accessibility of high quality aged care services, improved way of life for independent living residents	No	The site	Cumulative	High	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, NSLHD community	Yes	Detailed	Stakeholder interview with Health Infrastructure to understand cumulative impact.	

Accessibility: how people access and use infrastructure, services and facilities | **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Accessibility	Construction	**Establishment of construction site**	Changes to wayfinding within Greenwich Hospital Campus, within existing buildings, potentially access to public transport - resulting in potential increased disruption and inconvenience	Traffic impact assessment; construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses	Yes	Detailed	Review of technical reports; Stakeholder interview with Health Infrastructure to discuss minimising impacts to visitors to the site	Prepare transition plan to minimise impact to Hospital operations.
Accessibility	Construction	**Increased traffic and truck movements, potential changes to parking**	Potential increased travel times, inconvenience, frustration	Traffic impact assessment; construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses	Yes	Standard	Review of technical reports	
Accessibility	Operation	**Increased capacity and quality of health infrastructure at this site**	Improved accessibility of high quality health services in a location close to public transport	No	Lane Cove LGA, NSLHD	Long term	High	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, NSLHD community	Yes	Standard	Review of business case/demand analysis prepared for this project.	Well planned integration and connectivity between the buildings on this site
Accessibility	Operation	**Delivery of assisted independedntliving buildings and repsite care building**	Improved accessibility of high quality aged care services	No	Lane Cove LGA, NSLHD	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, NSLHD community	Yes	Standard	Review of technical reports	
Accessibility	Operation	**Delivery of new parking facilities**	Improved access to health and aged care facilities, potentially improved traffic flow	Traffic impact assessment	Greenwich Hospital Campus	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, NSLHD community	*Unknown*	Standard	Review of technical reports	
Accessibility	Operation	**Increased traffic and movements and potential changes to parking and public transport availability, related to increased patient and staff capacity on this site, including emergency vehicles**	Potential increased travel times, inconvenience, frustration	Traffic impact assessment	Greenwich Hospital Campus	Long term	Low	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, NSLHD community	Yes	Standard	Review of technical reports	

Community: its composition, cohesion, character, how it functions, and sense of place **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Community	Construction	**Increased numbers of construction workers in the area**	Changes to composition of the community, however it is noted that there is already a high proportion of visitors to the site	No	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Detailed		
Community	Construction	**Establishment of construction site**	Changes to wayfinding, appearance of the site, may disrupt daily living routines and staff, patient and local communities	Traffic and transport assessment	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Standard	Review of technical reports	
Community	Operation	**Increased capacity of the Hospital**	Increased numbers of staff, visitors and patients in the vicinity - leading to changes to the composition of the precinct. However it is noted that the expansion is in line with NSLHD strategic drivers	No	Greenwich Hopsital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Detailed	Review of demand analysis / business case for the upgrade of the hospital, if available.	
Community	Operation	**Delivery of assisted independednt living buildings and repsite care building**	Increased numbers of staff, residents, visitors leading to changes to community composition	No	Greenwich Hopsital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability					
Community	Operation	**Increased employment opportunities at the site**	Increased numbers of staff, leading to changes to community composition	No	Greenwich Hopsital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff	Yes	Standard	Review of demand analysis / business case for the upgrade of the hospital, if available.	
Community	Operation	**Delivery of staff amenities and other clinical and non-clinical support spaces**	Increased opportunities for social interaction, networking, with potential positive benefits for the hospital community cohesion	No	Greenwich Hopsital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors	*Unknown*	Detailed	Review of architectural plans, case study research	

Culture: people's shared beliefs, customs, values and stories, and connections to Country, land, water, places and buildings **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Culture	Construction	**Changes to appearance of site, access to sites of significance (including Aboriginal sites)**	Changes to connection to place and buildings	Architectural plans; heritage impact assessment	Within 400m of the construction site	Short term - construction	Low	*Unknown*	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	*Unknown*	Standard	Review of technical reports, outcomes of community engagement	
Culture	Operation	**Delivery of improved architectural design**	Improved sense of place	Architectural and design plans	Greenwich Hospital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	*Unknown*	Detailed	Review of architectural and design plans	
Culture	Operation	**Aboriginal and Torres Strait Islander cultural elements in design**	Maintained connection to culture and heritage. Noted that Aboriginal and Torrest Strait Islander people are hospitalised at higher proportions than other members of the community, and therefore may be over-represented in the site.	Aboriginal Cultural Heritage Assessment	Greenwich Hospital Campus	Long term	Moderate	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	*Unknown*	Standard	Review of technical reports, review of community engagement undertaken with Aboriginal and Torres Strait Islander stakeholders	Incorporate recommendations of community engagement in project design.
Culture	Operation	**Increased activation of the site due to increased capacity and re-design**	New place narratives, improved connection to place	No	Greenwich Hospital Campus	Long term	Moderate		High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Detailed		Explore opportunities for early engagement with community

Surroundings: access to and use of natural and built environment, including ecosystem services, public safety and security, **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Surroundings	Construction	**Changes to the streetscape due to establishment of construction site**	Amenity impacts, visual impacts	Architectural and design plans	Within 400m of the construction site	Short term - construction	Low	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses	*Unknown*	Standard	Review of technical reports	
Surroundings	Construction	**Changes to sightlines**	Potential impacts to perceptions of safety	No	Within 400m of the construction site	Short term - construction	Low	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	*Unknown*	Standard	Review of technical reports	
Surroundings	Construction	**Dust, vibration, noise, truck movements**	Reduced amenity and enjoyment of surroundings	Construction management plan	Within 400m of the construction site	Short term - construction	Moderate - due to construction taking place in "live" hospital environment	Negative	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents, local businesses	Yes	Standard	Review of technical reports	
Surroundings	Operation	**Changes to the streetscape through new build at the site**	Improved amenity and design	Architectural and design plans	The site	Long term	Low	*Unknown*	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Standard	Review of technical reports, architectural plans	
Surroundings	Operation	**Enhanced quality of architectural design on the site**	Improved amenity and design	Architectural and design plans	The site	Long term	Moderate	*Unknown*	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Standard	Review of technical reports, architectural plans	
Surroundings	Operation	**Increased activation of the site due to increased capacity and re-design**	Improved perceptions of safety	No	Greenwich Hopsital Campus	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff, patients, carers, visitors, surrounding residents	Yes	Standard	Review of technical reports	

Livelihoods: including impacts on employment or business, experience of personal breach or disadvantage, and the distribu **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*
Livelihoods	Construction	**Establishment of construction site, generating approximately 380 jobs**	Increased employment opportunities	No	Within 400m of the construction site	Short term - construction	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Contractors	Yes	Standard		
Livelihoods	Construction	**Increased construction workers in the vicinity**	Increased patronage for local businesses	No	Within 400m of the construction site	Short term - construction	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Local businesses	Yes	Standard		
Livelihoods	Operation	**Delivery of assisted independednt living buildings and repsite care building**	Increased employment opportunities	Np	Lane Cove LGA, NSLHD	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff	Yes	Standard		
Livelihoods	Operation	**Expanded capacity of the Hospital - generating additional 146 perioperative services FTE by 2026**	Increased employment opportunities	No	Lane Cove LGA, NSLHD	Long term	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Staff	Yes	Standard		
Livelihoods	Operation	**Increased activity (workers and visitors) in the vicinity**	Increased patronage for local businesses, including at night, supporting viability of businesses in the area	No	Greenwich Hospital Campus	Short term - construction	Low	Positive	High due to presence of elderly people & those experiencing illness, distress, disability	Local businesses	Yes	Standard		

Decision-making systems: the extent to which people are able to participate in decisions that affect their lives, procedural fa **Characteristics**

Social factor	*Phase of development*	***Project elements that may have impacts (e.g. drilling, delivery of new amenity/ housing etc, road upgrades, etc)***	*Potential impacts*	*Assessed in other reports?*	*Extent (geographic area of influence)*	*Duration (time period)*	*Severity/ scale (low/moderate/high) (e.g. based on how many people impacted)*	*Experience (positive/ negative)*	*Sensitivity (People affected vulnerable or more sensitive to change? (E.g. children, older people, low SES, disabilities etc)) (low/ mod./ high)*	*Stakeholders affected*	*Level of significance (Yes/No/Unkn)*	*Level of assessment required (Detailed/ Standard/ Desktop integration/ No further as.ment)*	*SIA Methods to assess (above standard assessment process recommended in SIA Guideline)*	*Project refinement recommendations*

Impacts of the proposed project on decision-making systems are deemed negligible and not further assessed