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Council Reference: **DOCID**
Portal Reference: **PAE-104175206**
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25 February 2026

Dear Thomas,

Additional response – Modification of condition D28
Shoalhaven City council response to SSD 35999468 - Mod 5
Shoalhaven Memorial Hospital Redevelopment
Scenic Drive, Nowra

I refer to the subject section 4.55(1A) application and Council's letter dated 2 February 2026. Shoalhaven City Council (SCC) requested additional time to review and provide comment on the proposed modification to condition D28, which would read as follows:

> D28. The following public domain works are to be completed in accordance with condition B28 and in accordance with relevant Council Guidelines prior to the commencement of operation ***(or at another time agreed in writing by the Planning Secretary)***:
>
> ~~***a) construction of footpath Hyam Street (Osborne Street to Bridge Road) – south side.***~~
>
> ***a)*** construction of ~~***shared user***~~ ***foot***path North Street (West Street to Scenic Drive) – south side.
>
> ***b)*** construction of shared user path North Street (Scenic Drive to Shoalhaven Street) – north side.
>
> ***c)*** construction of footpath North Street (West Street to Shoalhaven Street) – south side.
>
> ***d)*** construction of ***connecting*** ~~***shared user***~~ ***foot***path ***as may be required*** Shoalhaven Street (~~***North Street***~~ ***from internal Blackbutt tree paving (south of Ambulance entry driveway*** to Scenic Drive) – west side.
>
> ***e)*** construction of footpath Shoalhaven Street (~~***Junction Street***~~ ***Westhaven Avenue*** to North Street) – west side.
>
> ***f)*** construction of raised threshold with pedestrian refuge North Street (immediately west of West Street).
>
> ***g)*** construction of raised pedestrian crossing Shoalhaven Street (frontage of development, location to suit new building).
>
> ***h)*** construction of a pedestrian refuge incorporated at the main entry driveway on North Street.

SCC staff met with Health Infrastructure (HI) in an online meeting on Monday 16 February and raised concerns with the proposed modification, primarily that insufficient information had been provided to justify the significant reduction in the delivery of public domain upgrades. The following matters were raised with HI in that meeting:

- HI have not made substantive efforts to engage SCC staff and progress the design and construction of the public domain upgrades since an onsite meeting was held in August 2025.
- In SCC's opinion the current condition goes some way to manage the externalised demand for car parking on on-street parking, and the significant modal shift toward active transport, identified in Health Infrastructure's Transport and Accessibility Impact Assessment submitted with the EIS. The condition was required to support the development.
- The additional demand for pedestrian and cycling infrastructure and parking caused by the hospital by 2031 is significant and extends beyond the immediate boundary of the site.
- HI previously agreed with, and took responsibility for, these impacts by consenting to the imposition of the condition. However, HI now believes that the condition is unreasonable.
- SCC does not believe that HI, in seeking to amend the condition, has demonstrated how it expects to manage the impacts it previously acknowledged were real and for which it is responsible.
- SCC is seeking to restart discussions with HI to try and resolve any constraints HI has identified and to ensure delivery of the upgrades as currently conditioned. SCC is willing to compromise previously held positions and support street tree removal, variations to the widths of shared paths to navigate constraints, and work to resolve any topographical challenges where necessary.
- SCC acknowledges the public domain upgrades will not occur prior to the operation of the hospital extension, either as currently conditioned or as proposed by HI. SCC would like input to ensure that an appropriate trigger is embedded to deliver the works in a timely manner.
- SCC requested a follow up meeting in one week to begin developing a timeline towards resolving the public domain design and delivery. HI will discuss internally and respond to SCC about whether they will agree to continue discussions. SCC has not yet heard back from HI.

HI is anticipating a significant modal shift to active transport, with a 10-fold increase in cycling between now and 2031 (from roughly 4 to 57 staff cycling). The staff survey shows that improved crossing and footpaths would be required to encourage them to walk and cycle to the site more. TfNSW in its submission to the EIS in 2022 stated that further discussions with Council should be undertaken to ensure that cycling infrastructure is in place on opening of the new facility

SCC staff estimate (using data from the TIA) that there will be a shortfall of up to 204 car spaces, including on-street within a 400m radius of the site, to meet demand at shift changeover times by 2031, even if the hospital is able to achieve the ambitious modal shift identified. The impacts of this will be compounded by the cumulative impacts of the Nowra Riverfront Precinct, announced following approval of the hospital.

Current condition (I) requires "construction of a pedestrian refuge incorporated at the main entry driveway on North Street". SCC would like this condition modified to read "construction of a pedestrian crossing on North Street immediately to the west of Shoalhaven Street (at the location of the redundant vehicle crossover)".

Finally, SCC staff acknowledge that it is now impossible for HI to deliver the required public domain upgrades prior to the opening of the new hospital building. So as not to delay the opening, but to ensure that the works are delivered as timely as possible, SCC would like to explore entering into a bond with HI. This will require detailed engineering drawings and an estimated cost of works, supported by a quantity surveyor's report, to be prepared and submitted to SCC as soon as practicable.

In summary, the proposed modification would result in a significant reduction in public domain upgrades previously acknowledged as required to meet the transport demands of the hospital.

There is no corresponding reduction in impact, nor has an alternative approach to meet these demands been proposed. As such, the proposed modification would have a significant adverse impact on access to the development and place an undue burden on existing local infrastructure. We encourage HI to accept SCC's offer to continue discussions and find a way to deliver the infrastructure previously agreed as necessary to facilitate the proposed hospital.

Kind regards

David Zabell
Lead – Development Services
City Development