Social Impact Assessment

HammondCare Wahroonga Stage 2

4-12 Neringah Avenue South, Wahroonga NSW 2076 Prepared for HammondCare





'Gura Bulga'

Liz Belanjee Cameron

'Gura Bulga' – translates to Warm Green Country. Representing New South Wales.

By using the green and blue colours to represent NSW, this painting unites the contrasting landscapes. The use of green symbolises tranquillity and health. The colour cyan, a greenish-blue, sparks feelings of calmness and reminds us of the importance of nature, while various shades of blue hues denote emotions of new beginnings and growth. The use of emerald green in this image speaks of place as a fluid moving topography of rhythmical connection, echoed by densely layered patterning and symbolic shapes which project the hypnotic vibrations of the earth, waterways and skies.

Ethos Urban acknowledges the Traditional Custodians of Country throughout Australia and recognises their continuing connection to land, waters and culture.

We acknowledge the Gadigal people, of the Eora Nation, the Traditional Custodians of the land where this document was prepared, and all peoples and nations from lands affected.

We pay our respects to their Elders past, present and emerging.

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1.0 Introduction

1.1 Overview and project background

This Social Impact Assessment (SIA) is submitted to the Department of Planning and Environment (DPE) in support of a State Significant Development Application (SSDA-45121248) for the redevelopment of part of the site at 4-12 Neringah Avenue South, Wahroonga NSW for the purposes of delivering additional community health services, seniors housing, as well as upgraded palliative care facilities that will contribute to the broader operation of 'Neringah Hospital.' The extent of the site is shown below.



Figure 1 Outline of the site, with the portion of the site subject to the SCC shared red (R4 zone)

Source: Ethos Urban

Specifically, this SSDA seeks approval for the following:

- Site preparation works comprising:
 - Demolition of the existing Neringah Hospital building, kiosk, and existing at-grade carparks
 - Clearing of nominated vegetation on the proposed development areas
 - Bulk earthworks including basement excavation
 - Remediation works where necessary across the site.
- Construction and use of an integrated seniors housing and health services facility across two buildings ranging from 4-5 storeys, comprising:
 - 2 basement levels containing 130 car parking spaces and service dock
 - 12 residential aged care facility beds (extension to existing Stage 1 provision)
 - 18 palliative care hospice beds (Schedule 3 health services facility)
 - Community healthcare services, including outpatient palliative care, centre for positive aging and Hammond at Home
 - 57 seniors housing dwellings
 - On-site administration and ancillary operations spaces.
- Ground level and on-building landscaping works, including the provision of a through-site pedestrian link connecting Archdale Park and Balcombe Park

- Public domain works, specifically, regrading of part of the pedestrian walkway known as 'Archdale Walk' (Refer **Figure 17**) to provide accessible connection
- Extension and augmentation of infrastructure and services as required including new site signage.

This report has been prepared to respond to the Secretary's Environmental Assessment Requirements (SEARs) for SSD-45121248 that were issued on 24 June 2022. A table referencing responses has been provided below (Table 1).

1.2 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 addresses the requirement for a SIA specified in the DPE issued SEARs for the project – as set out in **Section 1.3** below. It follows the principles set out in the *Social Impact Assessment Guideline for State Significant Projects* (NSW DPE, 2021).

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.

1.3 Assessment scope and specification – SEARs

DPE issued SEARs to the applicant on 24 June 2022 for the preparation of an Environmental Impact Statement (EIS) for the proposed development. The SEARS outlines the following requirements (see **Table 1**). The SIA has been prepared accordingly.

Table 1 SEARs specifications and report references

SEAF	Rs	Relevant report section
21. Sc	ocial impacts	
1.	Provide a Social Impact Assessment prepared in accordance with the Social Impact Assessment Guidelines for State Significant Projects.	Section 7.0

1.4 Background

The site is located at 4-12 Neringah Ave South, Wahroonga NSW, and currently comprises a number of buildings including the heritage-listed Woonona Cottage (residential aged care facility), Neringah Hospital, Wahroonga Residential aged care building and a car park and kiosk. A map of the site is shown in **Figure 1.**

- Stage I of the development involving the Wahroonga Residential Aged Care Building has been completed.
- **Stage 2** works, the subject of this assessment, includes demolition of the existing 3-4 storey (due to topography of the site) hospital building in the eastern portion of the site, and construction of two buildings ranging from 4-5 storeys as an extension of Stage 1.

The works include a basement level car park, residential aged care, seniors living and community spaces, as well as palliative care. The project will have self-contained seniors living, associated community facilities, outdoor and landscaped spaces and upgrade access via Archdale Walk to comply with SEPP CI 25 'Location and Access to Facilities' or SEPP Housing 2021 (where applicable).

1.5 Qualifications of authors

The DPE SIA Guideline requires authors to hold appropriate qualifications. The team's expertise and qualifications are set out below.

Author	Expertise/Qualifications
Liesl Codrington Director, Social Strategy	Bachelor of Arts (Geography and Demography) Master of Environmental Planning MPIA, MIAP2 Practicing urban and social planning/policy across the private and public sectors since 2002
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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.

2.2 Social Impact Assessment

The assessment of social impacts in this report has been based on *Social Impact Assessment Guideline* (NSW DPE 2021), applicable to all State-significant projects and developments. As the proposed development classifies as State Significant Development, the DPE Guideline has been followed as the primary basis for assessment, for the purposes of this report.

As outlined in the *DPE Social Impact Assessment Guideline* (2021), 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 NSW DPIE 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.

2.3 Social factors for assessment

The NSW DPE SIA Guideline (2021) 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.

2.4 Assessment methodology

Stages in the preparation of this SIA 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 5.2**)
- Demographic analysis, including socio-economic characteristics of current communities and population forecast (see **Section 5.3**)
- Review of relevant background information, along with relevant local and state policy frameworks (see **Sections 4.0** and **Section 6.0**)
- Stakeholder and community engagement: Findings of stakeholder and community consultation undertaken by HammondCare have been reviewed to identify community and stakeholder aspirations and values. details the consultation that has been undertaken with various project stakeholders including local members of Parliament and Ku-ring-gai Council. The outcomes of the consultation process have been considered in the design of the project (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). The 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 risk rating for impacts, as per the social impact significance matrix shown in Section 8.0
- Identification of mitigation strategies to manage impacts and enhance benefits of the development (see
 Section 8.6)

2.5 Information sources and assumptions

Following are the key data sources and policy documents used to prepare this SIA:

- ABS Census of Population and Housing 2020 (Australian Bureau of Statistics, 2022)
- 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 (Ku-ring-gai Council, 2020)
- Community Strategic Plan (Ku-ring-gai Council, 2018)
- Ku-ring-gai Housing Strategy to 2036 (Ku-ring-gai Council, 2020).

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 to date accurately reflect community views.
- All potential social impacts to the local community and special interest groups that can reasonably be identified have been included in this report.

3.0 Site analysis

3.1 Site location and context

The site is situated on the lands of the Darramuragal people of the Darug Nation.

The site is situated at 4-12 Neringah Ave, Wahroonga NSW, and is irregular in shape with an area of approximately 10,770sqm, with a frontage of approximately 134m to Neringah Avenue South.

The site comprises four existing buildings used for palliative care facilities, residential aged care, administration and multi-purpose uses.

The site is located across three (3) adjoining lots along Neringah Avenue South including:

- Lot 52 DP 2666 no street address
- Lot 1 DP 960051 2 Neringah Avenue South, Wahroonga
- Lot 1 DP 1199937 4-10 Neringah Avenue South, Wahroonga

HammondCare owns and operates an existing seniors housing and health services facility across the three lots. The site has a cross fall of approximately 9m from the site's southern boundary to the northern boundary.

A site aerial is provided in Figure 2.



Figure 2 Aerial image of site in context with Sydney CBD

Source: HammondCare

3.2 Existing development

Four (4) existing buildings are located on the part of the site subject to this SIA, along the Neringah Avenue South frontage, including:

- A 4-storey health services facility known as 'Neringah Hospital' comprising palliative care facilities and administrative uses proposed for demolition (**Figure 3**)
- A small one storey multi-purpose building (Figure 4)
- A 4-storey residential aged care facility (RACF) 'Wahroonga Building' comprising 54 beds (**Figure 5**)

• A one storey local heritage item (Woonona Cottage) utilised for site administration uses (**Figure 6**)



Figure 3 Existing health services facility (Neringah Hospital)

Source: Ethos Urban



Figure 4 Multipurpose building on site

Source: Ethos Urban



Figure 5 Existing RACF on site

Source: Ethos Urban



Figure 6 Existing local heritage item on site, used for administrative purposes

Source: Ethos Urban

3.3 Surrounding development

The site is within a primarily residential area, and bound by residential flat buildings to the north and east, the Sydney Water Reservoir to the south, two storey townhouses to the north-west and a two-storey dwelling to the south-west of the site as shown in Figure 8 and Figure 9.

The site is also located approximately 400m from the Wahroonga local centre and Wahroonga Railway Station both are accessible via a through-site link (Archdale Walk) from Neringah Avenue South.

Abbotsleigh Junior School is to the north-west of the site, and Abbotsleigh School to the south beyond Wahroonga Reservoir and Pacific Highway.

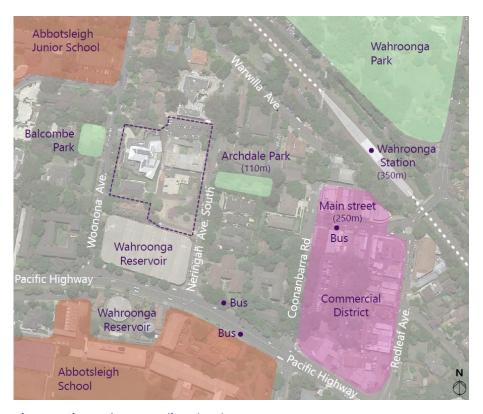


Figure 7 Site and surrounding development

Source: HammondCare



Figure 8 Existing a partments to the north

Source: Ethos Urban

Figure 9 Sydney Water Reservoir to the south

Source: Ethos Urban

3.4 Proposed development

The proposal seeks to expand the existing seniors housing and health services facilities across the site. The proposed development works for Stage 2 (this proposal) are limited to the eastern portion of the site occupied by the Neringah Hospital and car park.

A description of the proposed works is provided in **Section 1.1** above.

Selected images of the proposed development are below. Due to the slope of the site, the building's heights vary from 4-5 storeys.



Figure 10 Proposed development photomontage

Source: BickertonMasters (October 2022)

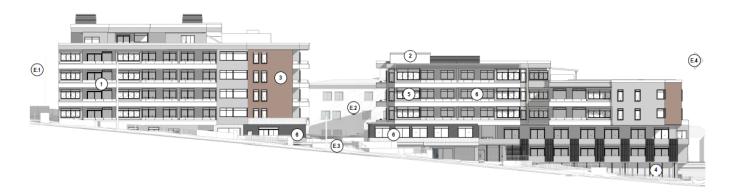


Figure 11 Proposed elevations

Source: BickertonMasters (October 2022)



Figure 12 Existing and demolition Site Plan

Source: Bickerton Masters (October 2022)

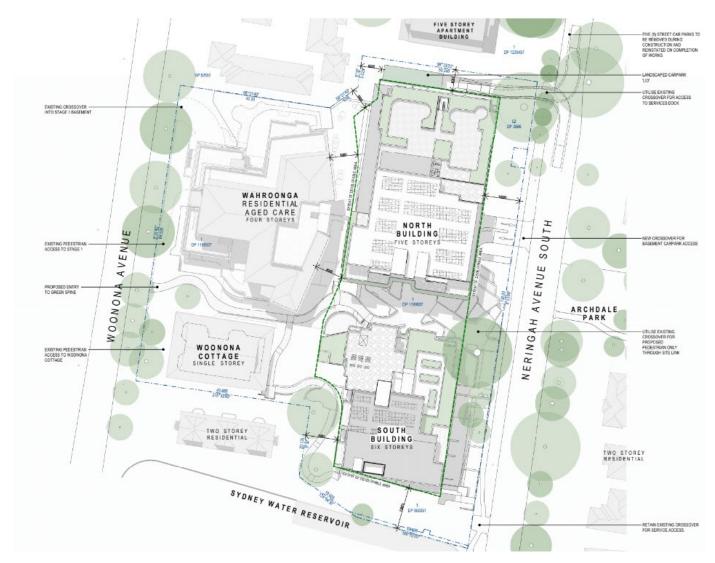


Figure 13 Proposed site plan

Source: Bickerton Masters (October 2022)

4.0 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 (Ku-ring-gai Council, 2020)
- Community Strategic Plan (Ku-ring-gai Council, 2018)
- Ku-ring-gai Housing Strategy to 2036 (Ku-ring-gai Council, 2020).

A summary of the key themes of these documents are identified in **Table 2** below. A comprehensive review of the documents is provided at **Appendix B**.

Table 2 Strategic policy review

Table 2 Strategic policy review					
Policy themes	Implications for Social Impact Assessment	Relevant documents			
Priorities for senior's housing	 It is a state priority to allow people to remain in their communities as they age, in environments which suit their needs and enable mobility. In order to achieve this, housing needs to be delivered in the right places, at the right time, be easily adaptable, resilient to change. The 2021 NSW Housing SEPP legislates that senior's housing should "have obvious and safe pedestrian links from the site that provide access to transport services or local facilities" (Division 6, 104). Council has identified that older residents are concerned about having to leave the LGA in order to find suitable accommodation as they age. It is vital that the needs of ageing communities are considered in the provision of housing. 	 NSW Housing Strategy (NSW DPE, 2021) NSW State Environmental Planning Policy (Housing) 2021 Ageing Well in NSW: Seniors Strategy (NSW Government, 2021) Ku-ring-gai Housing Strategy to 2036 (Ku-ring-gai Council, 2020) 			
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, p. 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 	Building Momentum: State Infrastructure Strategy 2018- 2038 (Infrastructure NSW, 2018)			

Policy themes	Implications for Social Impact Assessment	Relevant documents
	 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" (pg. 31). 	 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 Ku- ring-gai LGA	 The population of Ku-ring-gai LGA is projected to increase by 25% between 2016 and 2036. In 2036, it is expected that there will be 17,700 residents aged over 75. It is a local priority to align infrastructure planning and delivery with projected growth and change. A challenge identified by Council is "maintaining the wellbeing, social connections and independence of older people in the area so they can stay healthy for longer and support themselves in their own home" (Community Strategic Plan, p. 24). 	 Local Strategic Planning Statement (Ku- ring-gai Council, 2020) Community Strategic Plan (Ku-ring-gai 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).	Building Momentum: State Infrastructure Strategy 2018- 2038 (Infrastructure NSW, 2018)
	 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). 	 North District Plan (Greater Sydney Commission, 2018)

5.0 Local social context

5.1 Introduction

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.

5.2 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 (SAI or LGA boundaries) that best reflect the identified geographical areas.

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 within 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 SAI boundaries that the statistical data is available for.

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 Northern Sydney Local Health District.

A map illustrating these two areas is shown in Figure 14 below and Figure 18.

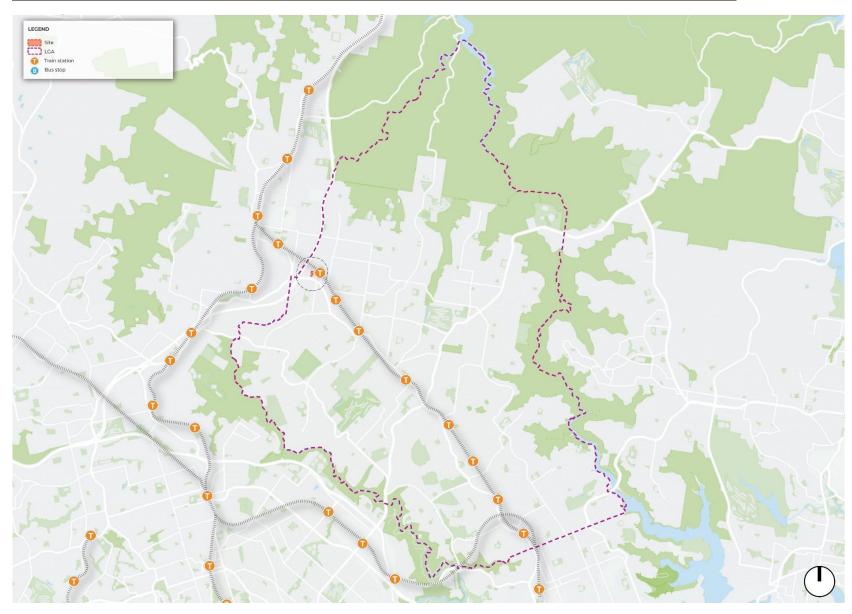


Figure 14 Map of study areas – site, 500m PSA and Ku-ring-gai LGA

5.3 Community profile

This section discusses the demographic characteristics of the existing community and forecast of resident population to 2041 within the identified study area to better understand the communities that may be impacted by the proposed development.

5.3.1 Current demographic characteristics

Based on the ABS Census of Population and Housing 2021, the key demographic characteristics of the population in the PSA and SSA are compared to Greater Sydney Benchmark. It is important to note that at the time of preparing this assessment, not all information from the ABS 2021 Census is yet available. Where required, relevant information will be supplemented from the 2016 Census. Key findings are highlighted below and detailed demographic tables are shown in **Appendix B.**

- The median household incomes in the PSA and SSA are higher than in Greater Sydney. The annual median household income is \$114,610 in the PSA, which varies by some +5.4% from the Greater Sydney average of \$108,750. The median household income in the SSA is highest among the three areas, averaging at \$131,850 per annum and varies by some +21.2% from the Greater Sydney benchmark.
- There is a high share of ageing residents (70 years and over) within the PSA, accounting for 20.1% of the total resident population. This share is greater in comparison to the share in the SSA and Greater Sydney, where, respectively, only 12.5% and 10.3% of the population are aged 70 years and over. The median ages in the PSA (41.6 years) and SSA (40.1 years) are also slightly higher compared to the median age across Greater Sydney (37.3 years).
- There is a high proportion of lone person households in the PSA. While couple family households are the most common type of household composition in the PSA (60.5%), lone person households represent 25.6% of the household population. This share is slightly higher relative to the Greater Sydney benchmark of 23.3 and to the share in SSA at 23.9%.
- Majority of dwellings in the PSA are flat, unit or apartments. Of total occupied private dwellings, 65.0% are flat, unit or apartments, 26.3% are separate apartments and 8.7% are semi-detached, row, terrace or townhouses. This composition of dwelling types in the PSA differs from that in the SSA and Greater Sydney, where separate houses are the most common dwelling type, followed by flat, unit or apartments.
- **PSA and SSA residents have high educational attainment.** In the PSA, 84.8% of the population aged 15 years and over completed Year 12 or equivalent, which is higher compared to the share in SSA at 82.5% and to the Greater Sydney Benchmark of 71.4%.
- Christianity is the most common religious affiliation among PSA residents. Of total PSA population, 53% reported an affiliation with Christianity, 37% reported no religious association, while the remaining reported affiliation with other Religions. This compares to the religious profile in the SSA and across Greater Sydney.

A review of key changes in the PSA and SSA demographic profile can be undertaken by investigating variations that have occurred between the 2016 and 2021 Census. Key findings include:

- Household incomes have continued to increase by +6% in the PSA, however at a slower rate than in the SSA at 16.0% and across Greater Sydney at +18.0%. In contrast, PSA individual incomes have grown by 29%, which is larger compared to the growth in SSA (21%) and Greater Sydney (23%).
- The age profile has become slightly older, with the median age increasing from 38.0 to 41.6 in the PSA and from 39.0 to 40.1 in the SSA. This is in line with Greater Sydney which also experienced an increase from a median age of 36.4 to 37.3.
- **Higher share of high-density dwellings**, increasing from 59.8% to 65.0% of total occupied dwellings in the PSA. By comparison, the share of high-density dwellings (i.e., flat, unit or apartment) in Greater Sydney increased by just +2.5% over the period.
- **Higher share of rented dwellings,** growing from 29.4% to 33.7% of total occupied private dwellings in the PSA. This growth is larger higher than in SSA and Greater Sydney, where rented dwellings increased by +1.1% only.
- Lower percentage of the population attend formal education in the PSA, declining from 29.9% in 2016 to 24.6% in 2021. This drop shows an opposite trend in the SSA and Greater Sydney, which both recorded an increase of +0.7% and +0.6% in the share of residents attending education, respectively. In the PSA, a significant

decrease in the share of population attending primary and secondary schools were observed, and a slight increase in the share of population attending tertiary or higher education.

It is our view that interpretation of small area data from the 2021 ABS Census – that is any geography smaller than a State - should have due consideration for potential outcomes arising from the COVID-19 pandemic. For example, at a small area level trend analysis relative to 2011 and 2016 Censuses should be treated with some degree of caution, as potential changes in demographics/behaviour may reflect temporary rather than structural changes as a result of COVID-19.

In summary, the Primary Study Area is characterised by an ageing and more affluent population, with high educational attainment. Residents typically live in high density dwellings and home ownership is high.

Current Community Snapshot (Primary Study Area)

Demographic trends and patterns provide an indication of the existing demographic profile and will inform future trends and needs.

Statistics are sourced from the Australian Bureau of Statistics. Census of Population and Housing, 2021, and Transport for New South Wales, Note: Figures may not add

up to 100%; residual is classified as "Others" and is usually not shown

Population

4,000

2022

Estimated resident

population in the PSA in

Indigenous persons

0.8%

overseas

were born overseas

Persons born

38.8%

of the PSA population

Population growth rate

0.7%

PSA resident population annual growth rate from 2022-2041

Median age

of the PSA population

Torres Strait Islander

identify as Aboriginal or

41.6 vears

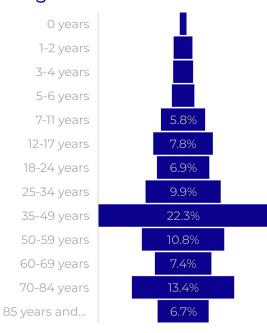
Greater Sydney's median age is 36 years

Median household income

\$108,750

Per household per annum

Age Structure



Average **Household Size**

Household Structure







26.5%







Household Type



8.7%



2.5

Persons per household

25.6%

Lone

person

households

34.0%

Couples with

children

Couples without children

11.3%

One parent families

2.4%

Group households 26.3%

Single house

Medium Density

65.0%

Higher Density

Ethos Urban | 2210216

23

5.3.2 Resident population projections

For the purposes of this analysis, population projections have been sourced with reference to Transport for NSW Population Projections and have been rebased to the latest ABS estimated resident population figure. Key findings are as follows:

- Population estimates show that there are 4,000 residents living within the PSA in 2022, an increase of +20 residents per year since 2016 at a rate of +0.4% per annum. In the SSA, the estimated resident population is 931,260 in 2022 and has grown at a rate of 0.8 % per annum since 2016 or an increase of +7,070 annually over the period.
- Population forecasts for the PSA show that there will be an estimated 4,580 residents in 2041, an increase of +580 residents over the projected period, representing a marginal change in the population for the next decade. This level of growth represents an average annual increase of +30 residents, at a rate of 0.7% per annum. This is lower compared to the forecast average population growth rate for Greater Sydney over same period of 1.5% per annum.
- SSA population is projected at 1,086,420 in 2041, an increase of +155,160 from 2022, growing by 0.8% annually or an addition of +8,170 residents per annum. The estimated annual growth rate of the SSA population compares to that of the PSA at 0.7% and significantly lower than the projected growth rate for Greater Sydney area at 1.5% per annum.

Table 3 Population projections to 2041

Table 5.1 opalitation projections to 2041						
Population	2016	2022	2026	2031	2041	2022 to 2041
PSA	3,910	4,000	4,200	4,310	4,580	+580
SSA	888,830	931,260	974,040	1,016,710	1,086,420	+155,160
Rest of NSW	2,707,940	2,842,900	2,906,660	2,975,210	3,062,430	+219,530
Greater Sydney	5,024,920	5,316,100	5,695,810	6,153,290	7,015,030	+1,698,930
Annual Growth		2016-2022	2022-2026	2026-2031	2031-2041	2022 to 2041
PSA		+20	+50	+20	+30	+30
SSA		+7,070	+10,700	+8,530	+6,970	+8,170
Rest of NSW		+22,490	+15,940	+13,710	+8,720	+11,550
Greater Sydney		+48,530	+94,930	+91,500	+86,170	+89,420
Annual Growth Rate		2016-2022	2022-2026	2026-2031	2031-2041	2022 to 2041
PSA		0.4%	1.2%	0.5%	0.6%	0.7%
SSA		0.8%	1.1%	0.9%	0.7%	0.8%
Rest of NSW		0.8%	0.6%	0.5%	0.3%	0.4%
Greater Sydney		0.9%	1.7%	1.6%	1.3%	1.5%

Figure 12 and Figure 13 show the projected change in age profile of the resident population in the PSA and SSA, respectively, based on population projections between 2022 and 2041. Both SSA and PSA older populations (60 years and over) are projected to increase. In the SSA, in particular, the share of residents aged 85 years and over is projected to double in size over the projected period.

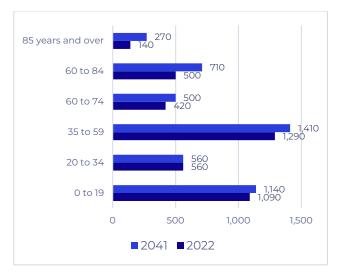


Figure 15 PSA population projection (2022 vs 2041 age profiles)

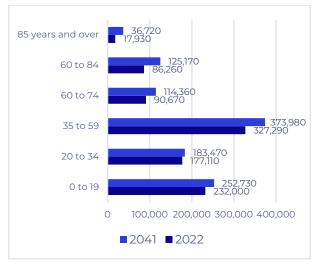


Figure 16 SSA population projection (2022 vs 2041 age profiles)

5.4 Health profile and social determinants of health

According to the World Health Organisation Europe¹, 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 Ku-ring-gai 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 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+
 - Culturally and linguistically diverse people

² <u>NSLHD_Clinical Services r1 DIGITAL.PDF (nsw.gov.au)</u>

Men who live alone.³

5.5 Local social infrastructure context

This section provides an overview of the local social infrastructure context surrounding the subject site, which may influence the sensitivity of social impacts. The following social infrastructure types have been identified within 400m of the site:

- **Education facilities**: There are three education facilities located within 400m of the site Abbotsleigh Junior School, Wahroonga Preparatory School, and Abbotsleigh School. Abbotsleigh Junior School is approximately 100-200m from the site
- **Childcare**: There are three childcare facilities located within 400m of the site Abbotsleigh Early Learning Centre, KU Wahroonga Preschool, and Kidspire Camp Wahroonga
- Community facilities: There is one community facility located within 400m of the site 1st Wahroonga Scout Hall
- **Health/aged care**: There are five health/aged care facilities located within 400m of the site –St Ermes Retirement Village, Redleaf Apartments, Thomas and Rosetta Agst Aged Care Facility, Dr Jonthan You, and Wahroonga GP Family Medical Practice
- Open space/recreation: There are six open spaces and recreation facilities located within 400m of the site –
 Balcombe Park, Archdale Park, Wahroonga Park, Sulman Park, McKenzie Park, and Abbotsleigh Aquatic
 Centre
- **Places of worship**: There are two places of worship located within 400m of the site St John's Uniting Church, Wahroonga Presbyterian Church and Abbotsleigh School Chapel.

A map of these facilities indicating the 400m radius is provided at Figure 18.

5.6 Transport and accessibility

The site is accessible to Wahroonga Railway Station (400m) through Archdale Walk, a through-site link on Kuring-gai Council-owned land. Wahroonga Station is serviced by the T9 Northern and TI North Shore & Western Lines, providing connections to the Sydney CBD, Richmond, Penrith, and Hornsby. The site is also accessible via bus stops on Pacific Highway, which are serviced by the following routes:

- N90 City Town Hall to Hornsby via Chatswood (Night Service)
- 3629 Abbotsleigh Junior School to Pennant Hills Station
- 8004 Wahroonga Station to Pennant Hills HS via Thornleigh
- 8021 Hornsby Station to Loreto Normanhurst School
- 9085 Warrawee PS to Westleigh via Hornsby
- 9014 Loreto Normanhurst to Wahroonga Station

The proposal includes re-grading of the western-extent of Archdale Walk to meet the required gradients for seniors housing. Archdale Walk is also shared with school students of Abbotsleigh.

A plan of the proposal in the context of Archdale Walk is shown below.

 $^{{\}small ^{3}}\,\underline{\text{Northern-Sydney-Regional-Plan-final.pdf}}\,(\text{sydneynorthhealthnetwork.org.au})$



Figure 17 Site and Archdale Walk through-site link

Source: Taylor Brammer Landscape Architects



Figure 18 Social infrastructure context and 400m PSA radius

Source: Ethos Urban

Local social issues and trends 6.0

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

6.1 Ageing in place and age-friendly communities

As reported by the Productivity Commission, in a research paper addressing the Housing Decisions of Older Australians older Australians prefer to age in place, with assistance for home care less costly than that of residential aged care. The quality and location of housing can influence the physical and psychological health and social engagement⁵ is therefore an important consideration in the allocation and development of new housing for an ageing population.

Many older individuals have formed attachments to their neighbourhoods or family homes, which provide a significant source of security and comfort. While it has been shown that housing and care needs change as a person ages, there is a significant period in the life of an older person where there is a need for comfortable living in a home where a person can be self-sufficient.

Many people will live in conventional housing for the majority of their life (up to the age of 90 years), with the capacity of a person to age in place determined by the appropriateness of the family home to their changing needs. The study found that many who move to age-specific accommodation do so much later in life.6

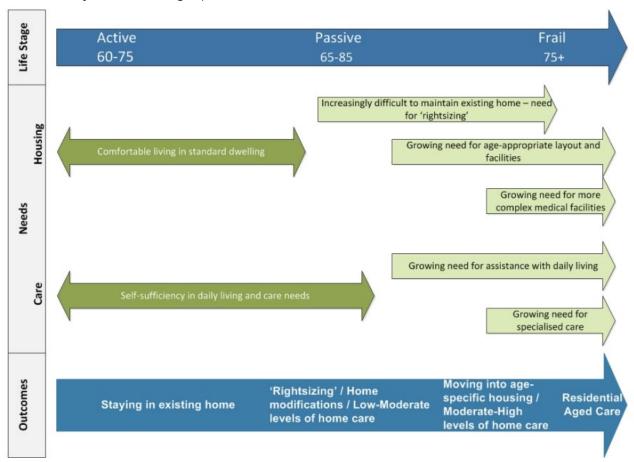


Figure 19 Housing and care needs

Source: Australian Productivity Commission. December 2015 Housing Decisions of Older Australians.

⁴ Commonwealth of Australia, Productivity Commission. 2015 Housing Decisions of Older Australians.

Commonwealth of Australia, Productivity Commission. 2015 Housing Decisions of Older Australians. P. 4.
 Commonwealth of Australia, Productivity Commission. 2015 Housing Decisions of Older Australians.

Ageing in place at home can be enabled through ensuring that dwellings meet universal design principles that minimise fall, trip and injury risks for older people and that dwellings can be easily and cost-effectively adapted as residents' needs change.

Research by the Australian Catholic University⁷ highlights the following important factors in ensuring that older people are able to move around their local area independently:

- High quality footpaths, which are both level and crack-free to minimise fall risks
- Connected pedestrian networks, e.g., footpaths at the end of no-through roads
- Slowing traffic in high pedestrian areas to improve safety
- Age-friendly street crossings that enable people who take longer to cross the road to do so safely
- Disabled access at public transport points
- Improving pedestrian amenity through creating rest spots and shade
- Improving perceptions of safety, e.g., by ensuring that footpaths are well-lit, and graffiti is promptly removed.

Retirement villages are designed to meet the needs of people aged 65 years and over, with independent living units a popular form of dwelling. However, figures show that the average age of a retirement living resident has increased to 81 years, with the average entry age being that of 75 years.8

Studies have found that residents within retirement villages often reflect the demographic of the surrounding area, with *income levels reflecting that of the average income level of older people in the immediate area.*⁹ The decision to move to a retirement village is identified as a lifestyle choice, where an individual or couple seek a sense of community in a safe and secure environment. Often the increased access to support services and maintenance of properties is an attractor. Community lifestyle and access to onsite facilities is attractive to people seeking to downsize or transition to a lower maintenance lifestyle.¹⁰

Highlighted within Ku-ring-gai Council's Community Strategic Plan, maintaining the wellbeing of older people in the LGA presents an ongoing challenge. There is a need to maintain the social connections and independence of older people in order to ensure they can continue to experience good health and support themselves. Council is committed to advocating for improved access to health care and other services for elderly people.

6.2 Specific needs of ageing communities

An ageing population is both a global mega trend and a local issue currently facing Ku-ring-gai LGA. This long-term shift in demographic will have vast implications for the design and planning of neighbourhoods, including the provision of key infrastructure. Research into the creation of age-friendly cities has outlined the following factors for consideration:

- Autonomy and independence:
 - Create walkable environments
 - Ensure access to transport
 - Enable ageing-in-place
 - Provide wayfinding and city information
- Health and wellbeing:
 - Ensure access to health services
 - Provide space for exercise and recreation
 - Make connections to nature
- Social connectedness:
 - Fight loneliness and isolation

 $^{^7\,}https://the conversation.com/eight-simple-changes-to-our-neighbourhoods-can-help-us-age-well-83962$

⁸ Property Council of Australia. 2018 2018 Retirement Census Confirms Vertical and Service Trends.

⁹ Commonwealth of Australia, Productivity Commission. 2015 *Housing Decisions of Older Australians. P.98.*

 $^{^{\}rm 10}$ NSW Government, 2017. Inquiry into the NSW retirement village sector.

- Promote inclusion and civic participation
- Create intergenerational spaces
- Provide options for older people to stay in their communities
- · Security and resilience:
 - Prepare for extreme climates
 - Design safe streets and public spaces
 - Promote dementia safety.¹¹

These factors should be considered within the design of spaces which cater to an ageing demographic. In order to ensure the mobility and independence of elderly people, features of the public domain (including sidewalks, pavements, seating areas etc.) should be designed with minimal obstructions, allowing for smooth level surfaces, tapered curbs, and sufficient width to accommodate wheelchairs.

6.3 Catering for diversity in aged care

Ku-ring-gai LGA is home to a diverse population, both in terms of age, and cultural and linguistic background. Council's Community Strategic Plan notes that approximately 39% of the population was born overseas in 2016, with more than 25% from non-English speaking countries, and about 28% speaking a language other than English at home. The dominant languages spoken in Ku-ring-gai other than English are Cantonese, Mandarin, and Korean.

The Australian Government's Aged Care Diversity Framework (2017) has established a need to provide aged care services which are "appropriate, accessible and sensitive to the individual needs of all older Australians". CALD (Culturally and Linguistically Diverse) older people face numerous barriers to accessing health and aged care in Australia, including:

- Cultural barriers differing attitudes to caring and family responsibilities, English proficiency or lack thereof, perceptions of gender roles, mistrust of authority etc.
- Structural barriers difficulty in accessing information, lack of general knowledge about available services etc.
- Service barriers lack of cultural competency of staff, culturally inappropriate services, racism and/or discrimination

Actions to support CALD older people within aged care include providing information, services, and activities in a number of different languages and formats, employing bilingual and bicultural staff, providing opportunity for CALD consumers and their families/carers to provide feedback, and reflecting on the cultural diversity of governance structures. Ku-ring-gai's diverse and ageing population will make this a key issue for consideration during the development of health and aged care infrastructure.

^{11 &}lt;u>CitiesAlive_designing_for_ageing_communities.pdf</u>

 $^{^{12}}$ <u>Aged Care Diversity Framework action plans | Australian Government Department of Health and Aged Care Diversity Framework action plans | Australian Government Department of Health and Aged Care Diversity Framework action plans | Australian Government Department of Health and Aged Care Diversity Framework action plans | Australian Government Department of Health and Aged Care Diversity Framework action plans | Australian Government Department of Health and Aged Care Diversity Framework action plans | Australian Government Department Operation | Australian Government | Australian Government Operation | Australian Government | Australian G</u>

¹³ Australian Government 2019, 'Actions to Support Older CALD People: a Guide for Aged Care Providers'.

7.0 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.

This section is informed by:

• Consultation report (HammondCare, November 2022)

Key findings:

- Feedback received has been generally positive. There was a consistent acknowledgement of the need
 for local, integrated health and aged care services which are provided in accordance with
 contemporary practices. The proposal did not receive opposition.
- Several community members expressed an interest in accessing services provided at the Wahroonga Health Campus once completed, praising the ability for local residents to have a choice to age in their own community rather than being forced to move away to access appropriate health and aged care services
- While the project announcement and engagement process did not generate overwhelming interest from the local community, local intelligence indicates that a reasonable level of development has recently been undertaken in the area neighbouring HammondCare's Wahroonga site.
- It was suggested that the context of the site, being in a location which already features several multistorey buildings and is bordered by a passenger railway line, the Pacific Motorway and Pacific Highway, meant it was likely the community is accepting of development in the area and therefore the project was not likely to face significant opposition
- Key issues raised during consultation included parking, traffic mgmt. and safety, and construction timing.

7.1 Engagement to inform this SSDA

This section outlines the process and outcomes of community and stakeholder engagement undertaken to inform and guide this SSDA.

7.1.1 Engagement strategy

The key objectives of the engagement process were to:

- Identify key stakeholders for Wahroonga Stage 2
- Create awareness of the proposal and establish a line of communication between HammondCare and the community
- Gather early feedback from the local community and stakeholders to identify opportunities and areas of interest as the project progresses.

7.1.2 Key engagement activities

The following key engagement tools and activities were established to support a multi-channelled approach to communications, to ensure consistent and proactive engagement.

- **Project Newsletter** (August 2022) distributed to relevant community members including Neringah Hospital staff/volunteers, and families of residents living in the aged care facility. 708 properties (including 91 businesses) were notified.
- Media release distributed on 25 August 2022, to announce the project and promote info sessions.

- **Community information sessions** held online x2 (Tuesday 30 August 2022 and Thursday 1 September 2022) outlining the timeline, information on HammondCare, the vision and proposal in detail. Approximately 5 community members and stakeholders attended.
- **Drop-in information session** held on site at Woonona Cottage (Saturday 3 September 2022). Approximately 10 community members attended.
- Website (<u>www.hammond.com/au/wahroonga</u>) with project information and updates
- Email address <u>AskNeringah@hammond.com.au</u>
- Phone number 1300 426 666

7.1.3 Stakeholder briefings

The HammondCare project team also sought to undertake individual stakeholder briefings with the local Members of Parliament, Ku-ring-gai Council and several local interest groups. The purpose of these briefings was to introduce the project vision and benefits, while gauging early sentiment, issues and opportunities.

- Briefing to Ku-ring-gai Council planning executive on the SSDA on Wednesday 10 August
- Drop-in session for HammondCare staff and volunteers on Wednesday 10 August
- Federal Member for Bradfield, the Hon. Paul Fletcher MP on 16 September 2022
- Abbotsleigh Junior School and Early Learning Centre on 28 September 2022
- State Member for Ku-ring-gai, the Hon. Alister Henskens MP on 21 October 2022
- Post Office Australia Post Manager of Retail Network Planning on 8 November 2022.

Briefings were also offered to the following groups but not accepted at this time:

- Ku-ring-gai Council General Manager
- Palliative Care Australia
- Northern Sydney Local Health District
- Dementia Australia
- Aged and Community Care Providers Association (ACCPA)
- Abbotsleigh Senior School
- Friends of Ku-ring-gai Environment (FOKE)
- Ku-ring-gai Chamber of Commerce
- Ku-ring-gai Historical Society.

7.1.4 Community engagement outcomes

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

Key topics raised in the community info sessions included:

- Construction impacts, specifically impacts on neighbours (dust, noise, truck movements, proposed timing).
- Traffic management during construction and more generally
- General questions about the new service provision including the composition of Seniors Living Dwellings and Residential Aged Care beds
- Will a traffic study be undertaken? Specifically, how will traffic be managed on Neringah Avenue South? Residents cited anecdotal evidence of congestion and lack of visibility when entering their properties, and queries about how the project may/may not contribute to this.
- Will the current services provided at Neringah Hospital continue?
- Queries around building height (particularly the north building which is closest to residences).
- Will patients and staff need to be relocated during construction?
- Trees and sight lines.

7.1.5 Stakeholder feedback

This section of the report provides a summary of all stakeholder briefings held during the preparation of the EIS as part of the SSD DA.

Briefing to Federal Member for Bradfield

A briefing was provided to Federal Member for Bradfield, the Hon. Paul Fletcher MP on 16 September 2022. The main points of interest which were discussed included:

- Engagement process undertaken (and methods of engagement) to seek early community feedback
- · The provision of off-street parking places under the proposal, including for hospital visitors
- State and Federal Government funding sources for the Neringah Hospital and residential aged care services
- The proposed height and form of the new Wahroonga Stage 2 hospital buildings
- The number of new residential aged care places
- The timeline for the development.

Briefing to Abbotsleigh Junior School

A briefing was provided to the Head of Abbotsleigh Junior School, Sally Ruston and Director of the Abbotsleigh Early Learning Centre, Shelley Hancock on 28 September 2022 to discuss the Wahroonga Stage 2 project.

The main points of interest which were discussed included:

- Traffic and congestion in surrounding streets, both during construction and once the development is complete. Abbotsleigh representatives explained that students are on campus between 7am and 6.30pm (with peak drop-off and pick-up periods from 7.30 8.45am, 2.30 3.45pm and 4.30 4.45pm respectively). HammondCare was pleased to confirm any increase in traffic for the new Wahroonga Health Campus would be negligible, given the site is currently operational.
- Support for the pedestrian through-link feature, particularly for students of the Junior School campus who walk to the Senior School campus. Students use a route which takes them through the Neringah site to Archdale Park, south on Coonanbarra Street to the Pacific Highway overpass.
- A request was made for HammondCare to lobby the Council to establish a Wombat Crossing on Neringah Avenue South between HammondCare's proposed through-link and the existing Archdale Walk (through Archdale Park) to improve pedestrian safety. The highly utilised on-street parking reduces visibility in the area.
- Construction impacts and a desire to be kept informed as the project progresses for any potential impacts on the school's activity/access.
- Strong interest in establishing opportunities for ongoing student involvement at, and support for, the Wahroonga Health Campus. Past initiatives have included choir performances. Representatives referred to the positive impact of the ABC television program *Old People's Home for Four Year Olds* and felt there is an opportunity to foster the relationship between Abbotsleigh and HammondCare.
- The provision of on-site basement parking was well received.
- Abbotsleigh has recently undergone a lengthy construction program (approximately 2 years) with further work planned in future.

Briefing to State Member for Ku-ring-gai

A briefing was provided to the State Member for Ku-ring-gai, the Hon. Alister Henskens MP on 21 October 2022. **The main points of interest which were discussed included:**

- General support for the integrated health campus proposal as it would help meet the growing needs of the ageing population of the Ku-ring-gai electorate/ Upper North Shore more broadly.
- The view that HammondCare's investment into the site would 're-invigorate' what is currently an older hospital building.
- Concern regarding existing traffic issues in the streets surrounding the site.
- Support for HammondCare's foresight to include provision of basement carparking on site for visitors and staff.

- Local resident advocacy for the removal of a section of street parking on Neringah Avenue South (this was also raised separately with HammondCare by community members), to improve traffic flow, safety, and visibility from vehicles exiting a residential apartment property located at 16-18 Neringah Avenue South.
- The Member shared local intelligence on the context of the site, being in a neighbourhood surrounded by the passenger railway line and the Pacific Highway and Motorway, and did not believe there would be significant resident concerns.
- Enquiry about workforce issues at HammondCare and in the aged care sector more broadly.

7.2 Summary of key themes

Themes have been identified through review of commentary received during the online information sessions and during one-on-one stakeholder briefings. The key themes were identified as being most frequently referenced by community members and interested stakeholders:

Theme	Comments	Project response
Parking	 Onstreet parking highly utilised in the streets surrounding the site Area is popular for commuter carparking due to proximity to Wahroonga Train Station Traffic is very heavy during peak times 100 onsite parking bays is supported Apartment block on Neringah Avenue requested removal of spaces close to the driveway (due to visibility impacts) 	- Provision of onsite parking was praised
Traffic mgmt. and safety	 Congestion during construction and operation raised Safety being primary concern Level of onstreet parking can reduce visibility for both vehicular traffic and pedestrians 	 Construction of 2 new buildings will result in concentrated traffic along Neringah Ave South HammondCare have committed to keeping local residents informed as the project progresses Negligible traffic impacts as the proposal will replace existing facility Addition of basement parking will likely reduce onstreet demand for parking
Construction impacts and timeline	 Noise dust and truck movements during construction raised as a concern Strong interest in understanding the timeline for completion 	 HammondCare is aware of the sensitive operating requirements at Wahroonga and assured residents of its commitment to working with the site team to ensure every effort is made to minimise any impact on neighbouring properties and the community – from preliminary site investigations through to construction completion A Noise and Vibration Management Plan will be submitted with the EIS to demonstrate the measures to be implemented to mitigate noise, dust and vibration impact
The following	issues were raised, but not as prevalently as the al	bove.
Service provision	 Specifically how services will be delivered during construction + operation Interest in accessing the Seniors Living offering once project is completed 	- Information provided.

Theme	Comments	Project response
Opportunity	 Leveraging the project to achieve greater pedestrian safety and linkage with the local Wahroonga community 	- Information provided.
Water run- off/drainage	 Specifically at the northern end of the site, which shares a boundary with a residential apartment property 	 Expected this would form part of the detailed design phase as the plans progress, and be in a Stormwater Management Plan.
Building height and mass	 Expected building heights and elevation, specifically at the northern end of the site 	- Information provided.

Source: TSA Management

7.3 Next steps

HammondCare will continue to communicate with the community and interested stakeholders as the project develops, providing opportunities for formal and informal feedback.

- Letterbox and emailed project updates Community members and interested stakeholders are encouraged to register for project updates via the HammondCare website. Project newsletters will be letterboxed to site neighbours to share updates on project milestones, and an email will also be sent to stakeholders who have registered for project updates.
- **Dedicated project contact details** Feedback and queries can be raised with the project team anytime via the AskWahroonga@hammond.com.au email address or via the phone line.
- Website the project website will continue to be updated as more information becomes available.

7.4 Outcomes of broader LGA-wide consultation undertaken by Ku-ring-gai Council

In order to inform the *Community Strategic Plan* (2018), Ku-ring-gai Council undertook a series of engagement activities with local residents, including community planning workshops, high school student workshops, business forums, a senior's survey, and an online community feedback portal. The following community feedback relevant to the proposed development has been identified:

• Providing for the needs of a growing ageing population:

- Need to address multifaceted needs of an ageing population e.g., to maintain health and fitness, independence, socialising in the community and staying in home for as long as possible
- Provided services that are sensitive to different age groups: 55-65 years and 65-75 years (relatively more active and more mobile), 75-85 years and 85 years and older (less active and less mobile)
- More retirement housing options.

Loss of community connectedness:

- Recognition that influx of flat redevelopment, demolition of housing, new residents, changing character of areas and movement of older residents out of areas has impacted on community connections
- Helping new residents understand community values around preserving and enhancing the environment.

Provide for health and wellbeing:

- Address mental health
- Improve visual security
- Improved amenities in parks and recreational areas
- Recognise impacts of ageing population on health services and their accessibility.

• Need for greater housing choice:

- Ageing population need housing choice for downsizing
- More housing availability to live and work in the area
- Housing mix plan needed and known by stakeholders
- Housing diversity must cater for increasing population but must maintain the positive environment re: green corridor, bushland, nature etc.

- Medium size housing needed to fill between apartments and large homes
- Build more villas and low density rather than 5 storeys or more.

Negative impacts of new development, especially on adjacent low residential areas:

- How is Council planning to cope with the "slum apartments" being built extensively? These places will deteriorate rapidly and may place a drain on council resources
- Concerned about over development of the area as there has been increased number of units/apartments built over the last years
- Don't allow more construction of units/townhouses in quiet residential areas which are currently low density
- Do not overdevelop the area.

• Better design of new developments:

- Continued focus on quality design
- Poorly designed and layouts of flats developments
- Insist on quality design for new developments
- Keep the level of apartment blocks below the treescape
- Better design of apartments to require solar and passive cooling such as caves
- Buildings/apartments need to be aesthetically in keeping with our beautiful area not concrete blocks
- Better parking to provide outdoor space in the apartment blocks.

7.5 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.

8.0 Social Impact Assessment

8.1 Overview

Having analysed the current social baseline for the development, this SIA sets out an assessment of social impacts arising from the Project and recommended responses, including measures to enhance social benefits and mitigate potentially negative impacts.

The SIA assesses impacts across the suite of factors set out through the selected SIA Framework. The assessment has been based on the information available to date, and primarily represents a desktop study, and review and analysis of publicly available documents relevant to the precinct, as well as information provided by Ku-ring-gai Council.

The 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 Project Site and social context.

This assessment also includes recommended responses to identified impacts, including both mitigation measures for potentially negative impacts and actions to enhance benefits.

8.2 Assessment framework and approach

This SIA has been prepared based on the Social Impact Assessment Guideline for State Significant Projects (NSW DPIE 2021), as required by the 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.

8.2.1 Ku-ring-gai Council - Social Impact Assessment Policy (2015)

The Assessment has also considered the Ku-ring-gai Council's *Social Impact Assessment* Policy (2015). The purpose of the Policy is to ensure that social impacts are effectively assessed as part of Council decision-making.

According to the policy: "Social impacts must be measured from an existing baseline of social conditions, established by quantitative and qualitative data. Impact measurements include:

- Positive (desirable),
- Negative (adverse),
- Scale (size) e.g., 5 or 1000 jobs,
- Time duration e.g., short, or long-term,
- Intensity or severity,
- Cumulative effects of impacts,
- Social equity or distribution of impacts across different groups e.g., vulnerable groups such as the underprivileged, aged, youth, unemployed, minority groups,
- Meaning, perceptions of social significance of proposed changes".

These criteria will all be addressed via the assessment outline over the following sections and align well with the expectations of the DPE SIA Guidelines.

8.3 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 Secondary Study Area (SSA) which is likely to experience the resulting benefits from the operational phase of the project. These study areas are shown in **Chapter 5.2.**

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

- Patients, workers, and visitors of the existing site
- Neighbouring residents
- Neighbouring businesses and services
- Local area workers
- Visitors to the locality
- Visitors from the broader Secondary Study Area and across Sydney
- Temporary construction workers in the area.

8.4 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 NSW 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 project.

8.4.1 Social elements of value to people

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
- **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
- Accessibility: how people access and use infrastructure, services and facilities (private, public, or not-for-profit)
- Community: its composition, cohesion, character, how it functions, resilience, and people's sense of place
- **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
- **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

The evaluation includes a risk assessment of the degree of significance of risk, including the envisaged magnitude (duration, extent, and potential to mitigate/enhance), and likelihood, and potential to mitigate/enhance 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 4 Defining severity/sensitivity levels for social impacts

Severity 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 5 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 6 Social impact significance matrix

Likelihood	Severity/Sensitivity				
	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

8.5 Impact assessment and responses by social factor

This section presents discussion on the potential social impacts of the project.

8.5.1 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 on the site, which may result in disruption and associated inconvenience for existing residents, visitors, and staff, surrounding residents, workers, and businesses. The impacts may disproportionality impact the following groups:
 - Elderly residents of the site, particularly those experiencing chronic illness
 - School students (using Neringah Avenue to Wahroonga Station through to Archdale Walk).
 - People with existing respiratory issues.
- Disruption to users of the area related to establishment of the construction site and movement of construction vehicles that may result in changes to preferred way of life routines (e.g., preferred choice of transport modes, time, and length of commute). These impacts are likely to be felt particularly by local workers, residents, and visitors, as well as Abbotsleigh School staff and students.
- Negative impacts to way of life associated with construction staging, relocation of palliative care patients, and decanting of staff and aged-care residents. This may result in disruption to usual care routines and quality of care, leading to discomfort and inconvenience.

During operation:

- Positive way of life impacts for residents, staff and visitors of the site associated with improved quality and
 capacity of aged care facilities and enhanced layout of the site, which would result in greater convenience
 and more enjoyment of daily living routines. The proposed redevelopment will deliver a state-of-the-art
 aged care facility, including an enhanced diversity of indoor and outdoor spaces for programming and
 socialising, spaces for residents to connect with each other and visitors.
- Positive impacts to way of life associated with the delivery of senior's living. This will result in improved living routines for ageing community members who do not yet require full time care but will benefit from access to HammondCare's services and facilities.
- Improvements to way of life associated with alignment with NSW Government objectives for 'ageing in place'. The proposed development will deliver a high-quality local aged care facility which addresses a diverse range of needs and enables residents to remain connected to their community. This will assist in maintaining usual living routines.
- Positive way of life impacts to residents, staff and visitors of the site associated with the delivery of
 communal facilities. Communal space allows for increased social interaction and recreation opportunities,
 which is important for ageing communities. Staff and visitors will also enjoy the amenity of these spaces,
 enhancing their daily routines.
- Positive way of life impacts associated with the delivery of upgraded landscaping, open space and through
 site links, allowing for increased casual social interaction and active living. The impacts will also be positive
 for students and staff of the Abbotsleigh Junior School Campus who walk to the Senior School campus.
 Students use a route that takes them through the Neringah Site to Archdale Park, south on Coonanbarra
 Street to the Pacific Hwy Overpass.

Responses / mitigation measures

During planning and development:

- Proactive community engagement during development phase to reduce concerns and promote benefits of the new facility.
- Consultation with patients and workers within the precinct regarding what amenities they would like
 access to on the site.
- Consultation with staff and students of Abbotsleigh Junior School to ensure they are kept informed of the construction timing and anticipated works. It is noted that a briefing was provided to Abbotsleigh Junior

Potential impacts

School on 28 September 2022 (see **Section 7.0**). It was raised that traffic and congestion may be an issue during construction particularly in peak hours.

During construction:

- Use of standard construction management mitigation measures, e.g., implementation of environmental and construction management plans.
- Timely community consultation and engagement will ensure that all stakeholders are made aware of the timing and likely impact of the construction period.
- Ensure effective relocation strategies are in place for existing residents to ensure a smooth transition from current hospital arrangements to the new development.

During operation:

- Development of an operational plan of management to monitor the impact of the hospital operations on staff and other stakeholders.
- Consult with residents, staff and visitors of the facility to determine appropriate programming for communal facilities on site, catering to different cultural needs and preferences.

Summary:

Overall impact

Potential for disruption to daily routines of residents, workers, patients, visitors, and users of surrounding roads during the construction phase of the proposal. Onsite parking and traffic mitigation measures result in a likely negligible way of life impact once operational in terms of traffic.

Overall, improved facilities at the site including palliative care, increased residential aged care, and seniors housing, will contribute to a significant social benefit once operational.

Social impact ratings associated with changes to **way of life** are considered High with following overall ratings:

- Construction: High (Likely Major) Negative
- Operation: High (Likely Major) Positive

Duration	Operational benefits are long term, construction impacts are temporary
Severity/ sensitivity	High sensitivity due to presence of elderly people and those potentially experiencing chronic illness and/or disability.
Extent	Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living 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.

8.5.2 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

Potential impacts

During construction:

- Potential negative impacts for residents, workers, and visitors in the area, associated with construction dust, noise and vibration. In particular, there may be impacts on the health and wellbeing of more sensitive users of the area, e.g., existing residents of the aged care facility, and surrounding residents, workers and visitors that may have existing respiratory conditions, or are sensitive to noise or vibration.
- Negative impacts to health and wellbeing associated with construction activities and subsequent relocation
 of palliative care staff and patients. Many current residents of the site will be experiencing cognitive decline
 (including dementia) and disability and thus are highly sensitive to changes in routine and setting.
 Disruption to daily living routines has the potential to have significant impacts to wellbeing for these
 residents.
- Potential impacts for pedestrian safety, associated with construction activities and vehicle movements. Due to temporary hoarding, 'it is likely the TfNSW accredited Traffic Controllers will be required to monitor and assist pedestrians with appropriate access around the site' (McLaren 2022).
- Potential impacts to health and wellbeing associated with changes to access to/amenity of community gathering spaces in the area (e.g., open spaces) due to the establishment of a construction site. This may impact on opportunities for social interaction and access to spaces which provide positive health benefits.

During operation:

- Improved health outcomes associated with increased access to high quality health and aged care in Kuring-gai, including care for older people with complex needs, including dementia. The proposed development will provide residents with access to allied health professionals and support, as well as healthy active living facilities.
- Improvements to wellbeing associated with opportunities for residents to maintain their independence as they age. A sense of independence is key to residents' ongoing wellbeing as they age. In addition, new private and semi-private spaces will enable residents to retain a sense of privacy and have access to their own space in a communal setting.
- Positive impacts to health and wellbeing associated with the delivery of communal facilities, open space, and through site links. This will enhance the walkability of the site, catalysing casual social interaction and encouraging an active, healthy lifestyle.
- Positive impacts to health and wellbeing associated with the delivery of senior's living. This will result in improved health and wellbeing for ageing community members who do not yet require full time care but will benefit from access to HammondCare's services and facilities.
- Improved health outcomes associated with quality of housing and facility design within the site. Many residents of the facility are likely to be frail, and all facilities within the development have been universally designed to reduce risks of fall, trip, and injury, while encouraging residents to remain independent.
- Positive impacts to health and wellbeing associated with alignment with NSW Government objectives for
 'ageing in place'. The proposed development will deliver a high-quality local aged care facility which
 addresses a diverse range of needs and enables residents to remain connected to their community. This is
 likely to influence the health and wellbeing of residents to a high degree.
- Improved wellbeing outcomes associated with enhanced pedestrian connections within the site and between surrounding streets to ensure that residents are able to easily access surrounding facilities and other parts of the proposed development.

Responses / mitigation measures

During construction:

• It is noted that the palliative services will move offsite during construction for several years. Impacts will be minimised accordingly however it is recommended this is undertaken in conjunction with a comprehensive transition plan.

Potential impacts

- 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.
- Prepare a Construction Traffic Management Plan as recommended in the Traffic and Parking Impact Assessment to detail impacts on pedestrian and bicycle networks
- Timely community consultation and engagement will 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 be provided.
- Consultation with patients and staff to identify opportunities for the development to support their wellbeing (e.g., what non-clinical amenities they would like access to on the site.)
- Sustainability measures to be considered through the design and management of the village.

During operation:

- Staging and communication strategies will facilitate a smooth transition from old to new facilities with no disruptions to care.
- Development of an operational plan of management to monitor the impact of the expanded hospital operations on staff and other stakeholders.
- Opportunities to enhance physical activity and promotion of healthy lifestyles should be adopted.

Summary:

Overall impact

Potential wellbeing impacts associated with aspects of construction activity (e.g., sensitivity to noise and vibration), which may reduce opportunities for or discourage physical activity.

Overall improved amenity and provision of the new facilities would have a significant positive benefit to health and wellbeing, once the site is operational. The redevelopment of the site, if impacts associated with construction are well mitigated, will ensure positive health and wellbeing outcomes for the community.

Social impact ratings associated with the change to Health and Wellbeing are considered **High** with following overall ratings:

- Construction: High (Likely Major) negative
- Operation: High (Likely Major) positive

Duration	Operational benefits are long term, construction impacts are temporary.
Severity/ sensitivity	High sensitivity due to presence of elderly people and those potentially experiencing chronic illness and/or disability.
Extent	Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living 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.

8.5.3 Accessibility- how people access and use infrastructure, services and facilities (private, public or not-for-profit)

Potential impacts

This section reviews access to social and other public infrastructure, and consideration of the proposal including the Traffic and Parking Impact Assessment (McLaren, 1 November 2022) has been reviewed in relation to accessibility.

During construction:

- Temporary negative impacts to accessibility associated with the noise, dust and vibration caused by the establishment of the construction site and construction activity across the site, which may result in impacts to access to and use of social infrastructure and recreational destinations in this area.
- Potential impacts to accessibility due to increased traffic movements and congestion along key roads in the
 locality due to construction activities and vehicle movements in the area. This can potentially impact access
 to and use of social infrastructure, businesses, or other amenity in the area. It is noted in the 'Traffic and
 Parking Impact Assessment' (McLaren, 2022) that: "Temporary loss of parking would occur along Neringah
 Avenue South due to the implementation of a Works Zone but there will be no major detours for
 pedestrians or cyclists'.
- A Construction Traffic Management Plan (CTMP) has been prepared within the Traffic and Parking Impact
 Assessment (McLaren, 1 November 2022) which highlights that the construction staff may park on-street,
 until such time as the proposed basement car parking area is available. However it also notes 'it is highly
 unlikely that heavy construction traffic in conjunction with staff traffic will exceed the assessed 27 peak hour
 movements'.
- Negative impacts to accessibility associated with relocation of palliative care residents and staff during construction activities. This may decrease accessibility to regular care services for residents of the site, and their visitors. Due to the characteristics of residents (elderly and potentially suffering chronic illness), they have an increased vulnerability to this disruption.

During operation:

- Potential minor negative impacts to internal movements, as well as surrounding road, pedestrian and cycle impacts as a result of increased vehicle movements may arise. The traffic generation of the proposed development has been estimated to be some (additional) 28 trips and the impacts of the traffic generation have been modelled using SIDRA INTERSECTION 9.0 (pg. 24) "indicating that there will be no detrimental impact to the performance of the intersections or on residential amenity surrounding the site as a result of the generated traffic."
- The Traffic and Parking Impact Assessment (McLaren, 1 November 2022) also notes the following key points:
 - A pedestrian refuge is subject to approval by Council's Local Traffic Committee, and is not considered mandatory. An alternative is to replicate the 'no stopping' signage along the pedestrian link along the site frontage, similar to the existing design shown in front of the Archdale Walk pram ramp.
 - Sight lines to the proposed driveway locations are potentially restricted due to the presence of shrubs within Council verge these trees may need to be removed/relocated.
- Potential positive impacts because of the provision of additional onsite parking, located undercover on lower ground, to cater for the growing number of residents and staff. The provision of 33-80 car parking spaces is required as per Council's DCP. Adequate onsite parking is proposed (130 car parking bays).
- Positive accessibility impacts associated with the increased provision of more diverse and appropriate
 housing and aged care services to support the Ku-ring-gai LGA, leading to opportunities for residents of the
 proposed development to age in place in Wahroonga. This is increasingly relevant for a region experiencing
 growth in retiree and elderly residents. Due to the range of housing options and levels of care available,
 there would be opportunities for residents of the proposed development to remain at this location as they
 age and their care needs increase, resulting in minimal disruption to the lives of residents and their families
 and friends.
- Future residents of the site would also be able to access improved communal facilities on site, resulting in improved enjoyment of and participation in programs and activities by a broader range of community members on site.
- Positive improvements to accessibility as a result of the accessible walkway upgrades to Archdale Walk that connects the public footpath of Woonona Avenue through to Archdale Park, that leads to the Wahroonga

Potential impacts

shopping village. This enables better access to social infrastructure for residents, visitors and staff at the facility.

Responses / mitigation measures

During construction:

- Prepare a Construction Traffic Management Plan to reduce the potential for accessibility impacts during
 construction such as predicted construction vehicle movements, routes, access and parking
 arrangements, coordination with other construction occurring in the area and how impacts on existing
 traffic, pedestrian and bicycle networks would be managed and mitigated.
- Timely community consultation and engagement will ensure that all stakeholders are made aware of the timing and likely impact of the construction period

During operation:

- Staging and communication strategies will facilitate a smooth transition from old to new facilities with no disruptions to care.
- Implementation of a communication strategy for patients and staff currently based in the existing facilities, to clearly communicate the timing and opening of the new facilities and help patients find the new site.
- Ensure pedestrian connections within the site are accessible to people experiencing reduced mobility (e.g., ensuring surrounding walking paths are level and well-maintained, and that there are frequent resting places).
- Implement recommendations in various technical reports including transport and noise. The Traffic and Parking Report (McLaren, 2022) notes that there will be no detrimental impact to the performance of the intersections or on residential amenity surrounding the site as a result of the generated traffic, however it recommends the following:
 - The site lines at the proposed 2-way driveway location are potentially restricted due to the presence of shrubs within the Council verge adjacent to the driveway. Removal of these shrubs would improve the accessibility to the site.
 - Ensure safety for pedestrians through the provision of a pedestrian refuge or alternative solution, to provide connection to the Archdale Walk on the eastern side of Neringah Avenue South, though this is subject to approval by Council's Local Traffic Committee.

Summary:

Overall impact

Temporary accessibility impacts in relation to construction may occur but can be appropriately mitigated. Potential additional traffic and accessibility impacts due to the increased capacity on site would be permanent.

Social impact ratings associated with changes to **accessibility** are considered to be **Medium** with following overall ratings:

- Construction: Medium (possible, moderate) impact negative
- Operation: Medium (likely, minor) impact positive and negative

Duration	Operational benefits are long term, construction impacts are temporary
Severity/ sensitivity	High sensitivity due to presence of elderly people and those potentially experiencing chronic illness and/or disability.
Extent	Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living 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.

8.5.4 Community- its composition, cohesion, character, how it functions, resilience, and people's sense of place

Potential impacts

During construction:

- The construction period may temporarily disrupt or change the existing local community surrounding the site. There may be impacts to sense of place with changes to the streetscape due to construction activities which has the potential to impact community connection to and sense of place.
- Potential impacts to social fabric of the area associated with changed access to community gathering places and social infrastructure, that may impact the networks of local communities.
- Potential negative impacts to community associated with changes to sense of place and loss of connection
 to place due to redevelopment of the existing building/s and wider changes to the streetscape. This may
 disproportionately affect former employees and surrounding residents of the site. The proposal includes
 removal of the existing 'Neringah' building, fronting Neringah Avenue South. However, it was not part of the
 original design for the site and the demolition will not involve the removal of any original or significant fabric
 (Heritage Impact Statement, NBRS Architecture 2021).

During operation:

- The development will result in a permanent increase in housing diversity in the area, and an increase the number of older persons (residents), staff and visitors to the Wahroonga suburb. Potentially the size of the community and composition will be impacted. However, it is noted there is already a residential aged care facility at the site, so the proposal will not have a significant impact on the overall community profile of Wahroonga.
- Positive impacts to community associated with the delivery of a contemporary, high-quality aged care facility offering differing levels of service. This will allow for new opportunities for social connection and cohesion across residents at different stages of life and care, potentially generating community support networks.
- Enhanced community interactions at the site associated with the delivery of communal floorspace, which may result in improved community cohesion. Improved permeability and integration with the surrounding Wahroonga community at various scales will allow for greater exchange between residents, visitors, and the general public.
- Potential negative impacts to community associated with changes to sense of place and loss of connection to place due to the demolition of the existing building and wider changes to the streetscape. This may disproportionately affect former employees, visitors, and surrounding residents of the site.

Responses / mitigation measures

During construction:

• Timely community consultation and engagement will 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 be provided.

During operation:

- Staging and communication strategies will facilitate a smooth transition from old to new facilities with no disruptions to care.
- Ensure all spaces are inclusive, accessible, and welcoming for all community members. There should be user group involvement in the design of relevant spaces.
- Explore opportunities for uses to form partnerships, knowledge sharing and contribute towards
 collaboration and innovation within the precinct and support the economic performance of the wider area.
 It was raised in consultation with Abbotsleigh Junior School that an intergenerational care model could be
 explored. Further partnerships with the school should be pursued once operational.
- Ensure the design includes indoor and outdoor gathering spaces that are welcoming and accessible to all community members.

Summary:

Overall impact

Potential changes to community character and sense of place and belonging associated with changes to streetscape and construction activity, and disruption and/or change to the access of some existing community infrastructure (e.g., Abbotsleigh School).

Potential impacts	
	The proposal has the potential to contribute to positive social outcomes for the community if impacts associated with operation and construction of the site are well mitigated. Social impact ratings associated with the change to community are considered Medium to High with following overall ratings: Construction: Medium (Possible moderate) impact - negative Operation: High (likely, moderate) impact - both positive and negative
Duration	Potential negative impacts will occur during the construction phase due to disruptions. Most potential positive impacts to community are long term
Severity/ sensitivity	High sensitivity due to presence of elderly people and those potentially experiencing chronic illness and/or disability.
Extent	Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living 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.

8.5.5 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

Potential impacts

During construction:

- Temporary changes to appearance, sense of place, and uses of the site due to the construction period has the potential to change connection to place for local residents, workers, and visitors. There is a locally listed heritage item on site 'Woonona House'. In addition, the site is within proximity to a number of other listed items including Sydney Water Reservoir (1635 Pacific Hwy), Warrina Dwelling House (8 Woonona Avenue) and The Briars Dwelling House (8 and 14 Woonona Avenue).
- Potential impacts to local Aboriginal cultural heritage during construction, to potential archaeological
 finds. However, the Aboriginal Cultural Heritage Assessment Report (Artefact, 2022) notes: 'no sites listed
 on the Aboriginal Heritage Information Management System (AHIMS) discovered in the study area, and
 no previously unrecorded Aboriginal sites or objects were identified within the study area during survey'.
 Further 'the study area was assessed as having nil to low potential to retain intact archaeological
 deposits that may contain Aboriginal objects' (pg 39).

During operation:

- Potential impacts on heritage items in the vicinity of the site as a result of the new buildings, however the Heritage Impact Statement (NBRS, 2022) notes 'overall, the proposal will not dominate the heritage items in the vicinity'. (pg.42)
- Potential impacts on the Aboriginal cultural connection to Country as a result of incorporating spaces for gathering as per Government Architect NSW 'Designing with Country' principles in exploring how the overlap of nature, people and design assists a project.
- Increased activation of the site due to notable increased capacity and re-design. This has the potential to facilitate new places narratives and improved connection to place.
- Changes to sense of place associated with the delivery of a contemporary, high-quality health and aged
 care facility, with associated communal space and through site links. This may lead to new opportunities for
 gathering and the creation of new place narratives.

Responses / mitigation measures

During construction:

- Timely community consultation and engagement will 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 be provided. Ongoing consultation with Registered Aboriginal Parties (RAPs) as recommended in the ACHAR (Artefact, 2022).
- Ensure the unexpected finds procedure outlines steps required in unanticipated Aboriginal objects or human skeletal remains are identified and should be included as part of the Construction Environment Management Plan (CEMP).
- Implement mitigation strategies recommended in various technical reports including Arborist Report (for tree protection during construction), Heritage Impact Statement, and ACHAR

During operation:

- Ensure final design seeks to 'avoid disruption to cultural and spiritual connection to country and promote delivery of care within landscape' (HammondCare SDRP Presentation July 2022)
- Maintain existing views to and from the heritage items in the vicinity, and ensure the bulk, scale and built form, and character of the proposal will not have an impact on the legibility of the current and former uses of the Woonona Cottage on site.
- Implement recommendations in Heritage Impact Statement including retention of the use, setting, and external and internal heritage fabric associated with Woonona Cottage (Heritage Impact Statement, NBRS Consulting 2021).
- Ensure all spaces are inclusive, accessible, and welcoming for all community members. There should be user group involvement in the design of relevant spaces.

Potential impacts

• Continue to undertake collaborative engagement with the Neringah Hospital community, local Aboriginal communities, and residents and workers in the surrounding community to identify opportunities to enhance positive benefits to culture through the project.

Summary:

Overall impact

Potential changes to connection to place due to the change of the appearance of the site, including temporary changes during construction. It is noted there is a heritage item on site, however, 'the use, setting, and external and internal heritage fabric associated with Woonona Cottage will be retained unaltered'.

Mitigation methods are recommended to ensure protection of this heritage item is maintained during construction. Positive permanent outcomes in terms of connection to place would include the delivery of a high quality seniors facility and palliative care facility that would contribute to new place narratives for users of the Wahroonga Hospital.

Social impact rating associated with the change to **culture** is considered medium with following overall ratings:

- Construction: Medium (possible, moderate) negative
- Operation: Medium (possible, moderate) both positive and negative

Duration Potential negative impacts will occur during the construction phase due to disruptions. Most potential positive impacts to culture are long term Severity/ High sensitivity due to presence of elderly people and those potentially experiencing sensitivity chronic illness and/or disability. Extent Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living across the SSA and beyond. Potential to Construction impacts would need to be proactively mitigated due to the sensitivity of mitigate/enhance 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.

8.5.6 Surroundings – amenity (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)

Potential impacts

During construction:

- Construction and associated works will likely lead to increased noise, dust, and vibration impacts to the local area, including residents of surrounding low to medium density residential development, during the construction period. This is likely to negatively impact on the amenity and enjoyment of surroundings of residents, staff, and visitors of the existing facility, as well as surrounding residents.
- Impacts on amenity of the area associated with vibration, dust, noise, and truck movements associated with construction activity. This will likely reduce amenity and opportunities for enjoyment of surroundings for people that typically utilise surrounding infrastructure.
- Likely negative social impacts of increased traffic in the local area during the construction phase, including increased noise and vibration, pressure on parking and potential increased risks to pedestrian safety. This is particularly relevant as the site is located in a low to medium density residential neighbourhood.
- Potential negative impacts associated with changes to sightlines. The establishment of a construction site is likely to change sightlines surrounding the site, and as a result, may impact on perceptions of safety.

During operation:

- Potential negative impacts associated with significant changes to the bulk and height of buildings on the site. This is likely to appear in contrast to the existing character of the neighbourhood which is predominately low to medium density residential. Surrounding residents may have an adverse reaction to this change.
- Improved amenity and enjoyment of surroundings associated with the delivery of a contemporary, high-quality aged care facility and associated communal floorspace. The facility will deliver positive design outcomes which in turn improve the amenity of living and working spaces residents and staff. Visitors of the facility will also benefit from this outcome.
- Potential for increased traffic movements and traffic or pedestrian congestion in the streets surrounding the site associated with workers, visitors, delivery, and other services accessing the buildings. This may decrease amenity for surrounding residents.

Responses / mitigation measures

During construction:

- Timely community consultation and engagement will 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 be provided.
- Implement recommendations in Construction Management Plan to minimise impacts on surroundings (hoardings, traffic etc)

During operation:

- Consultation with patients and staff to identify opportunities for the development to support their wellbeing (e.g., what non-clinical amenities they would like access to on the site.)
- Ensure high quality development outcomes are achieved in terms of landscaping, materials and views
- Implement recommendations in Traffic and Parking Impact Assessment and Green Travel Plan to minimise traffic movements and encourage alternative transport options.

Summary:

Overall impact

Social impact rating associated with the change to surroundings is considered high with following overall ratings:

- Construction: High (likely, moderate) impact negative
- Operation: High (likely moderate) both positive and negative

Duration

Potential negative impacts will occur during the construction phase due to disruptions. Most potential positive impacts to surroundings are long term

Potential impacts	
Severity/ sensitivity	High sensitivity due to presence of elderly people and those potentially experiencing chronic illness and/or disability.
Extent	Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living 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.

8.5.7 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:

- Potential positive impacts for livelihoods from the establishment of the construction site and corresponding increase in construction workers include:
 - Increased access to employment opportunities within the construction, manufacturing, and goods and services sectors during the construction phase, with 89 FTE construction-related jobs generated by the development. While some of 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 construction workers (for example for cafes and shops in the locality).
- Positive economic impacts associated with increased presence of construction workers in the locality. This will likely result in increased patronage for local businesses (if workers come from outside locality).

During operation:

- Positive impacts to livelihoods associated with the delivery of the proposed development. The development, including residential aged care facilities, communal floorspace, will increase the quantity and diversity of local employment opportunities the project has the potential to accommodate up to 55 additional full-time jobs.
- Increased activation of the site due to high quality design, which has the potential to increase patronage for other local businesses in the area.
- Potential positive impacts on livelihoods associated with permanent changes to streetscape and provision of amenity. This may have positive impacts on the value of property surrounding the site.

Responses / mitigation measures

During construction:

- Timely community consultation and engagement will 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 be provided.
- Explore opportunities to engage local businesses for various stages of the construction if possible. Local businesses can be encouraged to promote their services for construction if applicable.

During operation:

• Seek opportunities to implement social and local procurement and employment practices during the construction and operational phases of the development (e.g., include and employ local residents, trainees, vulnerable backgrounds, underrepresented groups).

Summary:

Overall impact The proposed development is unlikely to have significant impacts on the quantity and or diversity of local employment opportunities, temporarily or permanently. Social impact ratings associated with the change to livelihoods are considered low - positive and negative impact - with the following overall ratings: · Construction: Low (unlikely minor) impact - positive or negative, dependant on receiver · Operation: Low (unlikely minor) impact - positive or negative, dependant on receiver **Duration** Potential negative impacts will occur during the construction phase due to disruptions. Most potential positive impacts to livelihoods are long term Severity/ High sensitivity due to presence of elderly people and those potentially experiencing chronic sensitivity illness and/or disability. Extent Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health and aged care facilities would impact residents of and workers living 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.

8.6 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 Wahroonga hospital operational activities to function throughout construction where possible. It is noted that the palliative services will move offsite during construction for several years. Impacts will be minimised accordingly however it is recommended this is undertaken in conjunction with a comprehensive transition plan.
- Implement mitigation methods recommended within technical reports including Noise and Vibration Assessment, Construction Management Plan and Construction Traffic Management Plan. Development of a Construction Management Plan should include a 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. This should include Abbotsleigh Junior School, as a nearby sensitive receiver.

During operation

- Ensure high quality design in relation to the landscape setting, amount of vegetation and shade, condition of facilities, as well as the following:
 - Enhance pedestrian connections between the site and surrounding facilities to encourage active transport and promote physical activities (e.g., wayfinding, adequate shade, public art), integrating universal design principles.
 - Activate publicly accessible space delivered on the site in ways that are welcoming to all community members and can encourage casual social interaction between residents, workers and visitors to the site.
 - Develop and implement internal and external wayfinding strategies to ensure that the site is legible and walkable for users of the site.
- Continued consultation with relevant stakeholders, as identified by HammondCare, to identify emerging social issues and trends. Ensure any communications and engagement reaches all audiences in the area.
- Development and implementation of an Operational Plan of Management that mandates data collection (e.g. user surveys) to enable ongoing monitoring of the performance of the proposed facilities over time. Provide clear mechanisms to manage complaints and enquiries regarding the construction, and then operation.
- Ongoing monitoring of the site'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, 5-year intervals.

9.0 Concluding comments

An assessment of the social impact categories, as defined within the *Social Impact Assessment Guideline* (DPE, 2021) has been undertaken with regards to the proposed HammondCare Wahroonga Seniors Living/Aged Care Development, at 4-12 Neringah Avenue, South, Wahroonga NSW.

The proposal seeks to transform Neringah Hospital to an integrated, contemporary health campus, providing specialist care services including:

- Palliative care inpatient and community
- Residential aged care
- Seniors Living
- GP and outpatient clinics
- 24/7 onsite care
- Centre for Positive Aging
- HammondCare at home (provision of community care services)

The proposed design is intended to deliver a range of benefits to the community, both on-site and to the surrounding local community. This includes through planned delivery of new open space, as well as enhanced housing diversity and to meet a need for increased supply of seniors housing in the local area.

Consideration to the issues identified through the baseline analysis and during community engagement undertaken by TSA Management has been undertaken. Each category of impact is appraised with a significance of the impact based on the likelihood, consequence and social risk rating.

Overall, the level of impacts from the development range from **Low** to **High**, with no major significant negative impacts identified that cannot be effectively mitigated.

On balance, the range of positive and negative social impacts have been assessed, and temporary impacts to way of life, health and wellbeing, environment and amenity (associated with construction activity) as long as they are effectively mitigated, will not outweigh the permanent positive social outcomes in terms of health and wellbeing, way of life and accessibility.

The proposal has the potential to result in the following significant positive social impacts:

- The provision of a more diverse range of appropriate seniors housing and aged care services to support residents of the Ku-ring-gai LGA. As a result there will be increased opportunities for local residents to remain living in the area as they age, consistent with broader 'age in place' strategic objectives.
- Potential for the improved layout of the site, with the through-site link connecting to Archdale Walk, to assist in encouraging clear delineation of spaces, pathways and access points, creating safer streets for local residents to move throughout, contributing to opportunities of increased health and wellbeing outcomes.
- Potential to enhance social connectedness with the community in the surrounding neighbourhood through the enhanced permeability of the site to its surrounds. Improved access to Wahroonga Rail Station and Town Centre is likely to arise.
- Increased opportunities for social interaction through the provision of updated and well-designed spaces for informal gatherings, in a safe and aesthetically pleasing environment. The redesign will support enhanced community identity and connectedness.
- Improved mental health and wellbeing for residents arising from the development, related to improved opportunities for social connections, reducing levels of isolation and loneliness.

Key negative social impacts identified with the proposal relate to:

Short term noise, dust and vibration impacts, and traffic impacts for residents living within and around the area
during construction. It is important that these construction impacts are appropriately managed through a
Construction Management Plan (and Construction Traffic Management Plan) as well as through ongoing
community engagement with existing residents and stakeholders to give opportunities for feedback and discuss
concerns with relevant staff contacts, should issues arise. It is also recommended that construction updates are
provided to residents regarding construction plans, timeframes and activity stages.

- A Communications and Engagement Strategy should be prepared to assist with a good level of communication for nearby affected stakeholders.
- Consultation outlined concerns with potential traffic safety impacts as a result of highly utilised onstreet parking, which reduces visibility in the area. Consideration of improving safety outcomes during the design phases should be further explored for example a Wombat Crossing on Neringah Avenue (raised by Abbotsleigh School
- Opportunities to improve social outcomes include local events and activities to be introduced to encourage social
 connections and build positive relationships between residents and surrounding community and exploring
 opportunities with local community groups, and Aboriginal organisations, to preserve and maintain local
 connections to cultural heritage. Consultation revealed strong interest for ongoing student involvement at and
 support for, the Wahroonga Health Campus (e.g. choir performances + intergenerational care programs).

Overall the proposal has received general support for the integrated health campus proposal. It would help meet the growing needs of the ageing population of the Ku-ring-gai electorate/ Upper North Shore more broadly, and subject to incorporation of recommended mitigation measures, will not have significant social impacts on the surrounding residents, visitors, students and staff of the PSA and SSA.

Appendix A Community Profile

Category	PSA	SSA	Greater Sydney
Income			
Median individual income (annual)	\$55,020	\$58,720	\$45,930
Variation from Greater Sydney median	19.8%	27.8%	n.a.
Median household income (annual)	\$114,610	\$131,850	\$108,750
Variation from Greater Sydney median	5.4%	21.2%	n.a.
Individual income			
No income	11.2%	10.4%	11.2%
Low	24.8%	23.3%	28.7%
Medium	38.9%	39.5%	43.1%
High	25.2%	26.8%	17.0%
Household income			
No income	2.1%	1.8%	2.1%
Low	9.2%	8.4%	11.3%
Medium	33.3%	28.0%	34.3%
High	55.3%	61.8%	52.3%
Age Structure			
O years	0.9%	1.0%	1.2%
I-2 years	2.5%	2.0%	2.4%
3-4 years	2.6%	2.2%	2.4%
5-6 years	3.0%	2.4%	2.5%
7-11 years	5.8%	6.4%	6.3%
12-17 years	7.8%	7.6%	7.1%
18-24 years	6.9%	7.6%	8.8%
25-34 years	9.9%	12.3%	15.6%
35-49 years	22.3%	22.4%	21.7%
50-59 years	10.8%	13.3%	12.0%
60-69 years	7.4%	10.2%	9.7%
70-84 years	13.4%	9.9%	8.4%
85 years and over	6.7%	2.6%	1.9%
Males	45.4%	48.5%	49.4%
Females	54.6%	51.5%	50.6%
Median Age (years)	41.6	40.1	37.3
Country of Birth			
Australia	61.2%	62.0%	61.1%
Aboriginal and Torres Strait Islanders	0.8%	0.4%	1.8%
Other Major English Speaking Countries	9.9%	11.4%	7.1%
Other Overseas Born	28.9%	26.6%	31.8%
% speak English only at home	65.8%	69.7%	61.0%
Household Composition			
Couple family with no children	26.5%	26.5%	24.5%
<u>Couple family with children</u>	<u>34.0%</u>	<u>37.2%</u>	<u>36.1%</u>
Couple family - Total	60.5%	63.7%	60.5%
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One parent family	11.3%	8.6%	11.0%

Family Households - Total	72.0%	73.1%	72.6%
Lone person household	25.6%	23.9%	23.3%
Group Household	2.4%	3.0%	4.1%
Dwelling Structure (Occupied Private Dwellings)			
Separate house	26.3%	51.2%	56.1%
Semi-detached, row or terrace house, townhouse etc.	8.7%	9.2%	12.8%
Flat, unit or apartment	65.0%	39.4%	30.7%
Other dwelling	0.0%	0.3%	0.4%
Occupancy rate	92.3%	91.7%	91.8%
Average household size	2.5	2.6	2.7
Tenure Type (Occupied Private Dwellings)			
Owned outright	30.7%	33.3%	28.3%
Owned with a mortgage	30.1%	33.0%	34.0%
Rented	<u>33.7%</u>	<u>31.7%</u>	<u>36.1%</u>
State or territory housing authority	0.0%	1.0%	3.3%
Housing co-operative/community/church group	0.5%	0.7%	0.8%
Other	33.2%	30.0%	32.0%
Other tenure type	5.5%	2.0%	1.6%
Attending Education (% of those attending)			
Pre-school	9.4%	8.2%	8.0%
Infants/Primary Total	<u>31.8%</u>	<u>31.5%</u>	<u>31.4%</u>
Government	18.9%	22.7%	21.5%
Catholic	3.9%	4.3%	5.9%
Other	9.0%	4.4%	3.9%
Secondary Total	<u>26.5%</u>	<u>26.8%</u>	<u>24.9%</u>
Government	7.1%	12.6%	13.6%
Catholic	3.5%	6.0%	6.3%
Other	16.0%	8.2%	5.0%
Technical or Further Educational Institution	7.3%	8.1%	10.2%
University or other Tertiary Institution	22.3%	22.4%	21.4%
Other type of educational institution	2.6%	3.1%	4.2%
% of total population attending education	24.6%	26.7%	25.8%
Highest Level of Education Completed (% of population			
aged 15 years and over)	0.4.004	22.50	
Year 12 or equivalent	84.8%	82.5%	71.4%
Year 9-11 or equivalent	14.0%	15.5%	23.5%
Year 8 or below	0.9%	1.4%	3.5%
Did not go to school	0.3%	0.6%	1.6%
Need for Assistance			
With Need for Assistance	7.8%	4.1%	5.5%
No Need for Assistance	92.2%	95.9%	94.5%
<u>Top 10 Countries of Birth</u>	<u>PSA</u> Australia	<u>SSA</u>	<u>Greater</u> <u>Sydney</u> Australia
1	(61.2%)	Australia (62.0%)	(61.1%)
2	China (9.3%)	China (6.9%)	China (4.9%)
3	England (4.3%)	England (5.6%)	India (3.8%)
4	India (3.8%)	India (2.7%)	England (3.1%)
5	Korea South (2.3%)	New Zealand (1.9%)	Vietnam (1.9%)

6	New Zealand (1.9%)	South Africa (1.6%)	Philippines (1.9%) New
7	South Africa (1.8%)	Korea South (1.6%)	Zealand (1.7%)
8	Philippines (1.4%)	Philippines (1.2%)	Lebanon (1.2%)
9	Iran (1.2%)	Malaysia (1.0%)	Nepal (1.2%)
10	Malaysia (1.0%)	United States of America (0.9%)	Iraq (1.1%)
Top 10 Languages Spoken at home (other than English)	<u>PSA</u>	<u>SSA</u>	<u>Greater</u> Sydney
1	Mandarin		Mandarin
	(10.9%) Cantonese	Mandarin (7.9%)	(5.3%) Arabic
2	(4.7%)	Cantonese (4.0%)	(4.4%)
3	Korean (3.0%)	Korean (1.8%)	Cantonese (2.9%)
4	(3.070)	Notean (1.0%)	Vietnamese
4	Hindi (2.1%)	Spanish (1.1%)	(2.3%)
5	Persian (1.5%)	Hindi (1.1%)	Hindi (1.5%)
6	Spanish		
	(1.1%)	Italian (1.0%)	Greek (1.5%) Spanish
7	Tamil (1.0%)	Persian (0.9%)	(1.3%)
8	Japanese	Jamanasa (0.00/)	Namel: (1.20/)
	(0.9%) Vietnamese	Japanese (0.8%)	Nepali (1.2%) Korean
9	(0.7%)	Portuguese (0.7%)	(1.2%)
10	Afrikaans (0.6%)	Arabic (0.6%)	Italian (1.0%)
Religion	(0.070)	Arabic (0.070)	realian (1.070)
Buddhism	3%	3%	4%
Christianity	53%	48%	49%
Hinduism	5%	3%	5%
Islam	1%	1%	7%
Judaism	0%	1%	1%
Other Religions	1%	1%	1%
No religious association	37%	43%	33%
Provided Unpaid Childcare			
Females	29%	30%	29%
Males	29%	27%	24%

Note: interpretation of small area data from the 2021 ABS Census should consider potential outcomes from the COVID-19 pandemic.