

Hornsby Ku-ring-gai Hospital State Significant Development Response to Submissions



Palmerston Road, Hornsby

Stage 1 Redevelopment

Submitted to Department of Planning & Infrastructure
On Behalf of NSW Health Infrastructure

April 2013 ■ 12290

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1.0 Introduction

An Environmental Impact Statement (EIS) in relation to the State Significant Development - Development Application (SSD DA) for the Redevelopment Stage 1 at Hornsby Ku-ring-gai Hospital was publicly exhibited for a period of 43 days between 17 January 2013 and 28 February 2013.

In total six (6) agency submissions were received, including from Hornsby Shire Council. It is noted that Council did not object to the proposal. Indeed, in providing suggested draft conditions Council was broadly supportive of the scheme, subject to resolution of various matters. Seven (7) public submissions were also received, including one submission from the local Resident Committee. It should also be noted that various public submissions recognised the need for the Hospital's redevelopment and that this project is in response to the overwhelming community demand. Indeed, the Stage 1 Redevelopment was a key election commitment from the local MP, who was subsequently elected.

The project is Stage 1 of the redevelopment program which seeks to replace major existing assets and infrastructure on the Hospital site that are in need of repair. The design development and planning of the building has been carefully considered to provide clinical and functional adjacency to surrounding hospital buildings. The design and the resulting footprint provides for clinical and operational efficiencies, without diminishing existing levels of services and without affecting existing buildings which are needed to continue to provide key services. The development in itself provides for only a minimal addition to existing clinic services and will largely act as a replacement facility for aged and out-of-date infrastructure. To this end, the development does not substantially create additional Hospital-related activity on the site.

In addition, the proposed Stage 1 site requires only minimal removal of vegetation and modification to the land form and utilises existing driveway access points for traffic. Overall, in consideration of the benefits of the scheme and the design of the redevelopment, its minimal impact (and complementary nature) on continuity of hospital services, and as well as minimal impact upon its neighbours on and off the Campus, this provides the Government and the community with the best value-for-money option.

The main issues identified in the submissions were car parking / traffic, built form and material selection, setbacks, landscaping and loading dock noise.

The proponent, NSW Health Infrastructure (HI), and its consultant team have reviewed and considered the Department of Planning and Infrastructure's (the Department) comments and the public and agency submissions and, in accordance with clause 85A(2) of the *Environmental Planning and Assessment Regulation 2000*, have responded to the issues raised. This Response to Submissions including a detailed Response to Submissions table (at **Appendix A**) sets out the proponent's response to the issues raised and provides revised (and now final) Mitigation Measures for which approval is sought.

In addition to the Response to Submissions, updated plans and relevant additional consultant reports or information are included within the Appendices. Further detail is provided within this report.

The main issues requiring further input and investigations were undertaken by the following consultants:

- Woodhead: built form, material selection and setback issues;
- TTW: traffic and parking issues;
- NDY: loading dock and plant noise; and

- Arcadia: landscaping.

This report should be read in conjunction with the EIS dated 10 December 2012 and will form part of the DA determination.

2.0 Key Issues and Proponent's Response

2.1 Car Parking

Department of Planning and Infrastructure Issue:

The EIS identifies that the 25 car parking spaces approved in the south-east corner of the hospital campus for the Mental Health Facility (MP08_0220) will be relocated elsewhere within the hospital campus, and that an additional 105 spaces will be provided through a combination of 82 spaces as part of the subject SSD application, and additional spaces being undertaken under the exempt development provisions of State Environmental Planning Policy (Infrastructure) 2007 (Infrastructure SEPP), principally at the area of the campus known as the 'Bullring'.

The EIS has not included any specific details of the additional spaces being undertaken under the Infrastructure SEPP that are intended to be used to meet the 23 spaces deficiency in the Stage 1 car park, or identified how the relocated 25 spaces provided for the Mental Health Facility (MP08-0220) will be accommodated on the campus.

Accordingly, the Department requests clarification of car parking matters including a specific car parking breakdown addressing the following:

- *Original on-site car parking provision (total supply of on-site car parking before the development of the Mental Health Facility)*
- *Mental Health Facility car parking provision (total supply of on-site car parking when the Mental Health Facility is completed)*
- *Stage 1 redevelopment car parking provision (total supply of on-site car parking when Stage 1 is completed, including a breakdown of the car parking provided under the subject SSD application, and any additional car parking undertaken under the Infrastructure SEPP.*

Note: This must also identify where the 25 car parking spaces approved in the south-east corner of the hospital campus for the Mental Health Facility will be relocated, and under which approval. Also, on-street parking is not for the exclusive use of hospital staff or visitors and as such cannot be relied upon to meet on-site car parking.

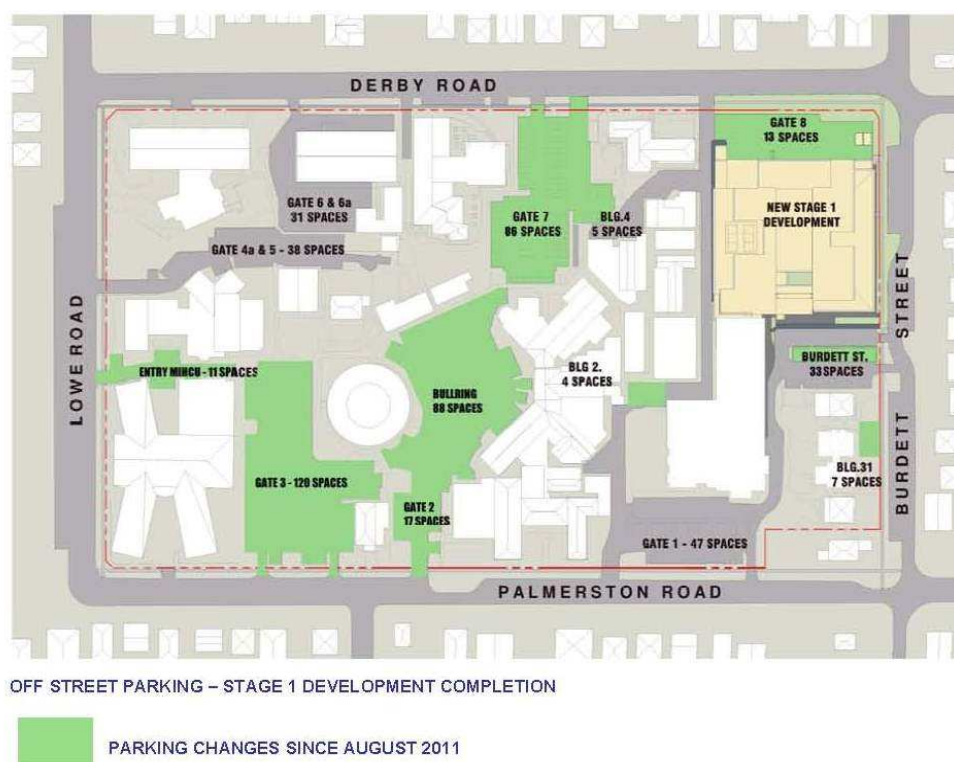
Additionally, following completion of the Stage 1 development, the total demand for car parking across the hospital campus will be 770 spaces, whilst the supply of on-site car parking would appear to be only 495 spaces. Further clarification on how the existing and future shortfall in car parking supply will be alleviated as part of the hospital's ongoing redevelopment, including as part of the Stage 1 works.

Parking Breakdown including pre- and post-Mental Health, Bullring (Exempt Development) and Stage 1 Completion

A Traffic and Parking letter has been prepared by TTW to address the issues raised in the submissions (see **Appendix C**). To address the above Department raised matter, a breakdown of the existing car parking, mental health parking and the Stage 1 car parking is provided in **Table 1** and as represented by **Figure 1**.

Table 1 – Car Parking Provision On-site

	Gain	Loss	Total on Campus
Current			341 spaces
Following completion of Mental Health	50 spaces	-	391 spaces
Following completion of Bull Ring Car Park works (Exempt Development under Infrastructure SEPP)	62 spaces	-	453 spaces
Following completion of Stage 1 Development	82 spaces	35 spaces (10 spaces on Burdett Street Car Park) (25 spaces on the corner of Burdett St and Derby Road to be relocated to Bullring)	500 spaces
Total	+ 194	-35	+ 159 net gain



Original	341 spaces
Extra for MH	+ 50 spaces
	391 spaces
Stage 1	+ 109 spaces
Total for Site	500 spaces

Figure 1 - Car Parking Provision On-site

Table 1 demonstrates that the net gain of car parking spaces on Campus after the completion of all current known construction activities (estimated for completion in 2015) is 159 spaces, resulting in an overall number total of 500 car parking spaces on the Hospital campus.

At present the Campus accommodates 341 spaces. With 50 spaces added following the completion of the Mental Health this will rise to 391. Car parking provided at the Bullring Car Park by using Exempt Development provisions under the *State Environmental Planning Policy Infrastructure 2007* (ISEPP) has further increased this to 453 spaces on-Campus.

The Stage 1 Redevelopment will provide parking as required to meet demand. The demand outlined in the Traffic and Parking Report appended to the EIS is **100** spaces. The Stage 1 Redevelopment will provide a total of 109 spaces (9 spaces in surplus of the demand for 100 spaces) through a combination of the 62 spaces provided at the Bullring and a net gain of 47 in the footprint of the Stage 1 Redevelopment area. The overall net increase in parking on site which includes work undertaken separate to the Development Application is 159 spaces. This includes the 25 spaces for the Mental Health facility which have been relocated to the Bullring Car Park before Mental Health has completed construction.

Parking Supply on and off the HKH Campus

Traffic and Parking letter states that the provision of 300 spaces around the immediate perimeter (being the site's boundary at all four frontages) can be reasonably expected to be used for hospital activities and visitors. This is a typical scenario across NSW for hospital sites. Parking for residential properties will not be compromised as residents and their visitors will be able to park at their own street frontages.

Taking into consideration the 500 spaces on the HKH site, and the 300 spaces around the immediate perimeter of the hospital's four boundaries, the hospital's total supply of parking is 800 spaces. This achieves a surplus of 30 spaces on the total parking demand of 770 spaces, as determined by TTW in its Traffic and Parking Report appended to the EIS.

Future Parking Supply

It should be noted that any future redevelopment of the Hospital will be addressed as part of its parking strategy. The planning principles applied to the Stage 1 project is to de-clutter the site and build vertically. The rationalisation of the site will provide opportunities for additional on-grade car parking. Consideration of a possible multi-storey car park would depend on demand and planning requirements of Stage 2. Whilst the Campus's Master Plan has identified a location for a multi-deck car parking station, its viability would need to be substantiated in planning and dependent upon funding.

2.2 Building Setback

Department of Planning and Infrastructure Issue:

It is noted that the siting of the building within the hospital campus is driven by a number of factors, including: its connection with the Hornsby Obstetrics, Paediatric and Emergency Building (HOPE); creating minimal decanting and relocating of significant support services, and alignment with the hospital Masterplan. It is also noted that design changes have occurred to the building in response to community consultation prior to lodgement of the EIS, including increasing the boundary setbacks, relocating plant areas and stepping down the building to reduce the massing and bulk of the building when viewed from the south and east. It is also noted that some limited screening and planting has been

proposed within the setbacks in an effort to reduce potential visual impacts of the building on the adjoining low density residential areas.

However, the setback of the proposed building is only 2.7m from the southern boundary (Burdett Street), and the height of the building in this location is between 13 to 14 m above existing ground level, which is significantly higher than existing residential development opposite the site. Whilst the department acknowledges the design evolution and measures included to minimise visual impacts of the building (outlined above), the current southern setback of 2.7 m does not facilitate an adequate deep soil zone to allow vegetation of an appropriate size to exist and provide appropriate screening of a building of this scale. The department therefore requests that a greater setback be provided, along with an increased deep soil zone in collaboration with additional plantings of mature vegetation in this location. Further details of the type and arrangement of vegetation to be used in this location to provide appropriate screening of the Stage 1 building is to be detailed in a separate landscape plan.

The Stage 1 footprint has been located to provide for optimal functional adjacency and connectivity to the HOPE building and to minimise disruption to ongoing hospital-related activities and to provide for the best continuity of services to the community. Its location also allows for only minimal removal of vegetation and takes advantage of existing driveway crossings. Furthermore, and most importantly, the floor plate is designed to deliver optimal functional and efficient health services. There is no flexibility for the building to be moved further north, or for its footprint to be reduced in size to gain a greater setback area along Burdett Street on the southern boundary.

If a dysfunctional footprint size were to be implemented and if no GFA were to be lost, it would result in a taller building (albeit without its desired functional connectivity). **Figure 2** over illustrates that if the building were to be setback 8m to align with the existing childcare centres to the west of the site, the building would obstruct the access laneway to existing hospital facilities and would abut against a number of existing functioning buildings.

By moving the whole building footprint to the north it would require the demolition of substantial occupied amenities to allow construction of Stage 1. These include, environmental services (approximately 375m²) and maintenance workshop (approximately 500m²), and the three-storey Pathology/ Mortuary Building (approximately 860m²) which would impede the function of these hospital uses and require demolition.

Notwithstanding the above, modifications have been made within the setback between the building and Burdett Street to provide capacity for further mature and buffering landscaping. This has been accommodated by narrowing the concrete maintenance path to the building edge. A landscape plan and report prepared by Arcadia has been provided at **Appendix D**. The plan shows the retention of the trees which currently grow in the Council verge with the addition of *Tristanopsis Laurina* (Water Gum) within the setback to supplement the existing screening. The trees will grow to a height of approximately 6 metres (or 2 storeys) and will be planted at regular intervals of 5 metre spacing. This additional planting will offer a year-round buffer to the building's built form as well as functioning as visual relief to the building façade along Burdett Street.

Further to the above, Woodhead has also provided a section sketch that illustrates a person's sightline to the building from Burdett Street. At a height of 1.5 metres, a typical person standing on the opposite side of Burdett Street looking at the Stage 1 Development would not have a sense of the proposed building being dominating or 'overlooming' given its massing, setback and width of the Burdett Street road reservation. The building is appropriately scaled for its context (see **Figure 3** over).

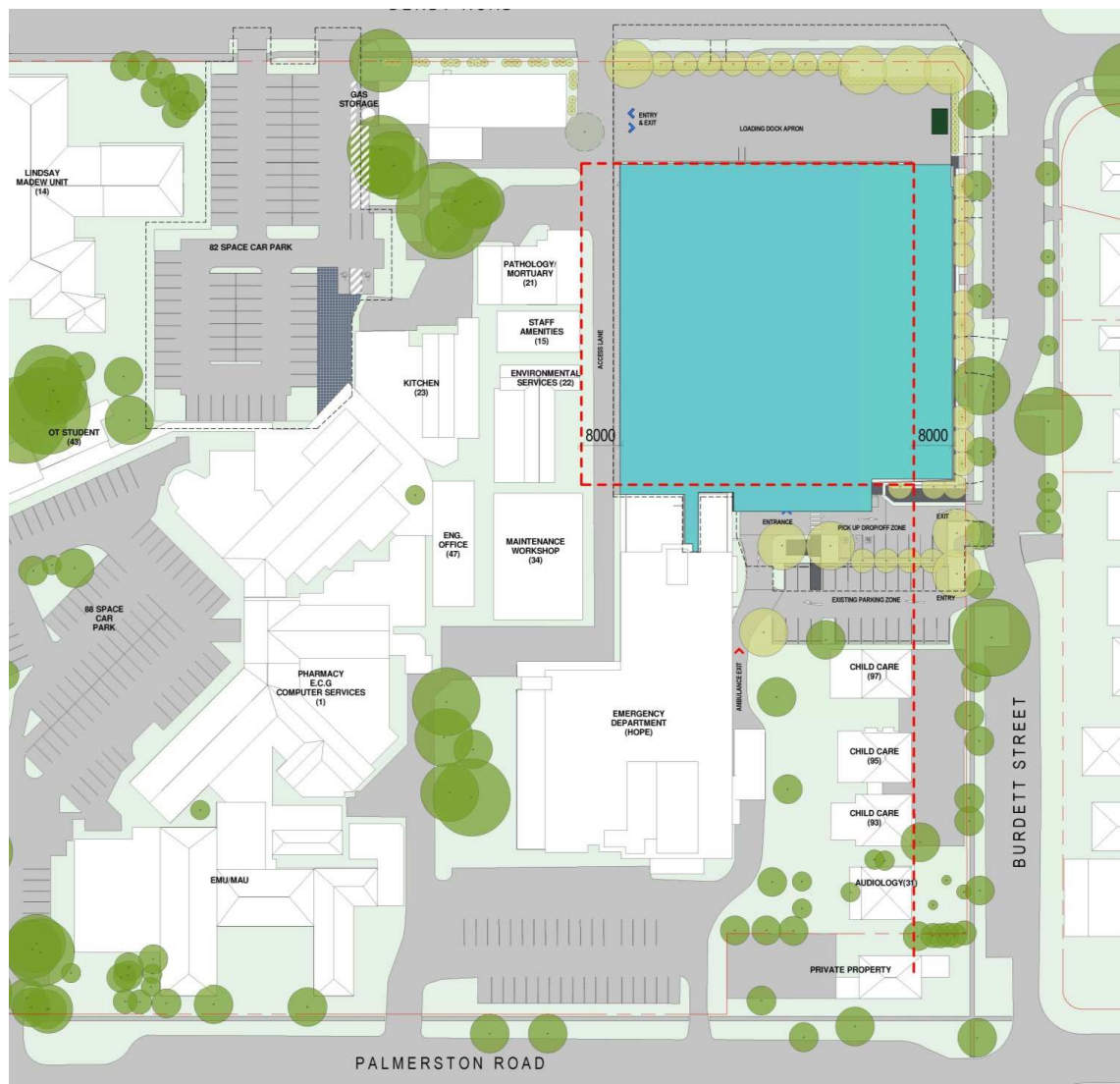


Figure 2 – Building Setback

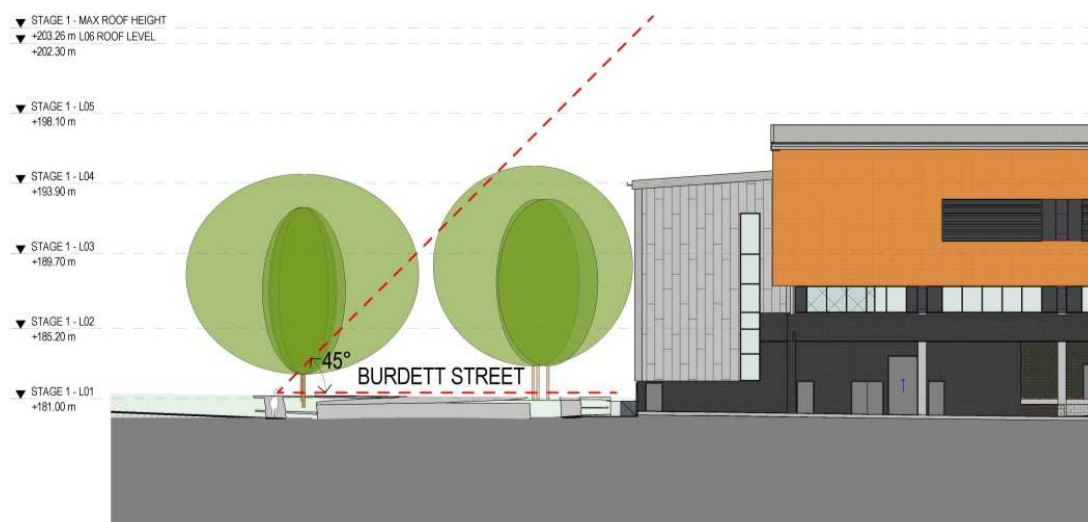


Figure 3 – Section of person looking at Stage 1 Redevelopment from Burdett Street.

Figure 3 also illustrates that taking into consideration the general principle of the building envelope sightline, what is reinforced is the containment of the building wholly within the sightline. This achieves a satisfactory level of pedestrian amenity without creating a development that is overbearing and bulky at street level. It also demonstrates that the scale and mass of the development is not out of character with the existing area and is suitable to the context of the Hospital site, and the surrounding residential area.

2.3 Plan Errors

Department of Planning and Infrastructure Issue:

A number of printing errors have been identified on the elevations and context analysis plans submitted with the EIS. The department requests revised versions of these plans with legible figures and annotations.

All plans have been reprinted and are attached to this Report at **Appendix B**.

2.4 SEPP 33

Department of Planning and Infrastructure Issue:

The EIS identifies that the general procedures for handling and storing biomedical, infectious or toxic operational waste and the storage of any hazardous materials will be in accordance with Hornsby Ku-ring-gai Hospital Waste Management and Resource Recovery Plan and State Environmental Planning Policy No. 33 Hazardous and Offensive Development (SEPP 33), where relevant.

The EIS has not provided any further information on the above potentially hazardous activities, and no specific mitigation measures have been included in Section 8.0 of the EIS regarding the management of hazardous materials and waste. Accordingly, the department requests that the applicant provide a formal address to SEPP 33, inclusive of a Preliminary Hazard Assessment (PHA), and that any recommendations of the PHA be incorporated in a revised list of mitigation measures.

The Stage 1 Redevelopment will not result in any new or additional handling or storage of dangerous materials on the HKH site. Separate to the scope of the Stage 1 works (replacement of aged infrastructure), an existing medical gas storage building is located on the Campus near the subject site. The Stage 1 development will connect to the building for the use of medical gases. For the Department's information, the following gases and quantities are stored on the HKH site:

- 16 x medical oxygen G size (at 1.35m in height and approx. 70kg each);
- 3 x nitrous oxide F9 packs (at 1.9m in height in a pack of 3 at variable weights);
- 2 x medical air MAN15 packs (at 2m in height in a pack of 5 at 1437kg each); and
- 2 x tool air MAN15 packs (at 2m in height in a pack of 5 at 1437kg each).

The above tanks are Classed as 2.2 Dangerous Goods which are defined as non-flammable, non-toxic gases and are not considered to be potentially hazardous with respect to off-site risk. Therefore these types of gases and quantities do not trigger the General Screening Threshold Quantities under SEPP 33.

Accordingly, as the Stage 1 Redevelopment scope does not include any medical gas augmentation or storage, there are no dangerous materials or hazardous

activities in connection with the proposal. In addition, the gases in themselves are not hazardous materials and would not trigger the SEPP 33 General Screening Threshold Quantities in any case. Accordingly, a Preliminary Hazardous Assessment (PHA) is not required under Clause 12 of the SEPP. No additional Mitigation Measures are required and the proposed works will not result in any additional risk to the HKH and wider community.

2.5 Design Amendments to the Proposal

It is proposed to make minor amendments to the Stage 1 Redevelopment as the design development has progressed since lodgement in December 2012. The design development has addressed issues regarding vehicular access and drop off evolving from the need to meet OH&M and safety, Fire Strategy and DDA compliance.

The amendments include the following:

- New vehicular drop-off and extension to the entrance canopy and reconfiguration of car parking;
- Additional louvres to stair cores; and
- Increased height of the plant roof by 200mm.

These revised plans are included for consideration and approval at **Appendix B**.

New Vehicular Drop-off, Canopy Extension and Reconfiguration of Car Parking

It is proposed to redesign a new vehicular drop-off from the car park located off Burdett Street. The redesign will now allow ambulances and cars to drop patients at the main entry of the building, where the canopy has been extended. This will provide shelter from adverse weather for unwell patients. The previous design did not allow for this arrangement and patients would have been left to negotiate steps or an uncovered external ramp down to the main entrance.

Additional benefits of this redesign include level access for wheelchairs from the lower level of the car park from two disabled parking spaces. See Plan Number WH.AR.1221 for detail.

Additional Louvres to Stair Cores

Additional louvres are now proposed to the building's elevations in order to naturally ventilate the stair cores located on the four corners of the building and allow for greater through flow of air. This further contributes to the project's ESD credentials and lessens the need for powered ventilation / air-conditioning.

In addition, the louvres will provide a visual break-up of the large areas of cladding on the elevations of the building and therefore improve the quality of the overall design, and provide a more environmentally friendly and sustainable design.

Increased height of the Plant Roof

The level to the roof line of the Level 5 Plant Room has been raised by 200mm to meet the need for greater acoustic insulation with respect to break-out noise that may affect the nearby residents. This minor amendment will not affect the overshadowing studies on Derby Road already carried out. The maximum roof height (highest point) has been raised from RL203.26 to RL203.46. This will not significantly increase the building bulk or scale when viewed from ground level.

Further, the shadow plans provided as part of the plan set at **Appendix B** indicate that the design development of the building results in minimal overshadowing impact for the front yard of dwellings along Derby Road and Burdett Street, and does not impact upon the 3 hours of daylight in mid-winter.

3.0 Final Mitigation Measures

This chapter of the Report provides the original Mitigation Measures that were provided within Section 8 of the EIS and any updated Mitigation Measures as a result of the public exhibition and submissions. Proposed deletion to the original Mitigation Measures are shown as ~~bold strike through~~. Any amendments or additions are shown as ***bold italic***.

Table 2 – Revised Mitigation Measures

Mitigation Measures

Traffic and Access

- Traffic, access, servicing and layout arrangements are to be in accordance with the Traffic Report by TTW (November 2012) ***and the Traffic and Parking addendum letter by TTW (March 2013)***.
- A construction Traffic Management Plan is to be prepared prior to construction in accordance with the principles provided within the Traffic Report prepared by TTW (November 2012).

Geotechnical and Contamination

- Detailed design is to incorporate the recommendations of the Preliminary Environmental Site Assessment (prepared by Aargus Engineering dated November 2011 and September 2012).
- Detailed design is to incorporate the recommendations of the Geotechnical Investigation Report (prepared by Aargus Engineering dated November 2011 and September 2012).

Operational Management

- Detailed design must incorporate the noise attenuation measures outlined in the ***revised*** Acoustic Report prepared by Norman Disney & Young (~~November 2012~~ ***6 March 2013***).
- The Stage 1 works and detail design must incorporate the Environmental Sustainable Design Principles.
- The principles of Crime Prevention Through Environmental Design is to be employed through the detailed design and operation of the development.

Flora and Fauna

- Tree protection measures will be incorporated as will other measures to minimise any mobilisation of soils and sedimentation of the downslope riparian zone.

Building Code of Australia (BCA)

- The recommendations of the BCA compliance statement (dated November 2012) is to be employed before detailed design and the release of a Construction Certificate.

Stormwater

- Recommendations outlined in the Civil Engineering and Integrated Water Management Plan prepared by TTW Consulting Engineers (dated November 2012) are to be employed within the detailed design and ongoing operation.

4.0 Conclusion

This report and appendices for the Response to Submissions has addressed the issues raised within each submission during the public exhibition process as well as the Department's key issues. This Report and the proposed amendments to the DA should be read in conjunction with the Environmental Impact Statement which demonstrates that the proposed development will be appropriately mitigated and designed to have minimal adverse environmental impacts.

The project is by its nature a major asset and infrastructure replacement project and based on its location and design provides Government with the best value-for-money option as it allows the hospital to continue to provide services to the community during construction, will best link-in with existing buildings and infrastructure once completed and will result in only minimal impact upon the Campus and its neighbours. It is also in response to the overwhelming community demand for improved hospital facilities and was also a key election commitment from the Local MP, who was subsequently elected.

As a result of the Stage 1 Redevelopment, there will be no substantive disruptions to operations and only marginal increases on demand, as it replaces existing ageing infrastructure and assets and uses existing site traffic access points entering and exiting the site. The design in its current configuration cannot be altered as it would significantly compromise the functional clinical efficiencies, and the interfaces with existing services, resulting in the health service not being able to provide contemporary health services to the community.

In light of the benefits of the proposed development and the absence of any adverse environmental impacts, we have no hesitation in recommending this Stage 1 Redevelopment for approval.