

Social Impact Assessment

Eurobodalla Regional Hospital – SSDA

Lot 2, DP 1281576, Braemar Drive, Moruya
Prepared for Health Infrastructure NSW



'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

This report supports a State Significant Development Application (SSDA) submitted to the Department of Planning and Environment (DPE) pursuant to Part 4 of the Environmental Planning and Assessment Act 1979 (EP&A Act), for the proposed development of a new hospital at Braemar Drive, Moruya.

This application is SSD by way of section 2.6 and schedule 1 under the *State Environmental Planning Policy (Planning Systems) 2021* on the basis that the development is for a new hospital with a capital investment value of more than \$30 million.

This report has been prepared having regard to the Secretary’s Environmental Assessment Requirements issued for the project by DPE.

This report addresses the requirement for a Social Impact Assessment (SIA) specified in the Department of Planning and Environment’s Secretary’s Environmental Assessment Requirements (SEARs) for the project – as set out in **Section 1.2** below. It follows the principles set out in the *Social Impact Assessment Guideline for State significant projects* (NSW DPE 2021, referred to as the SIA Guideline throughout this report).

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, population health 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 perspectives of relevance to the proposed development
- Predicted social impacts of the proposed development at this location, along with recommended mitigation and enhancement measures.
- A suggested social impact monitoring and measurement plan has also been provided – as per the NSW DPE SIA Guideline 2021.

1.2 Assessment scope and specification – SEARs

This report has been prepared having regard to the Secretary’s Environmental Assessment Requirements issued for the project by DPE. The SEARs outlines the following requirements (see **Table 1**).

Table 1 SEARs specifications and report references

SEARs	Where addressed in this report
• Provide a Social Impact Assessment prepared in accordance with the Social Impact Assessment Guidelines for State Significant Projects.	Chapter 8.0

1.3 Qualifications of Report Authors

The SIA Guideline requires authors are ‘suitably qualified persons’ who hold appropriate qualifications and have relevant experience in social science or related areas. The lead author’s qualifications, experience and demonstrated understanding of social impacts is outlined below.

Lead author’s name: Liesl Codrington, Director Social Strategy and Engagement, Ethos Urban

Date the SIA was completed: 31 May 2023



I confirm the SIA contains all relevant information, and understand my legal and ethical obligations, and that none of the information in the SIA is false or misleading.

Table 2 SIA Authors' Qualifications

Author	Expertise/Qualifications
Liesl Codrington Director, Social Strategy and Engagement	<i>BA, MEnvPI</i> Liesl has over 20 years' experience in social planning, social sustainability and stakeholder engagement in both the private and public sectors. Member of Planning Institute of Australia, Member of Property Council's ACT Social Sustainability Committee
Madeleine Beart Associate Director, Social Strategy and Engagement	<i>BArch, MUP</i> Madeleine has over 12 years' experience social planning, social sustainability and stakeholder engagement in both the private and public sectors. Member of Social Impact Measurement Network Australia (SIMNA). Committee Member – SIMNA Victorian Organising Committee Accredited Social Value Associate through Social Value International.
Chloe Brownson Urbanist, Social Strategy	<i>BComms (major in Social and Political Sciences)</i> Chloe has 2 years' experience in social research and analysis, on issues such as policy drivers for new development, identifying social sustainability outcomes and opportunities and social impacts of new infrastructure.

1.4 Proposed Development

This report accompanies a State Significant Development Application that seeks approval for the Eurobodalla Regional Hospital, including:

- Site establishment and preparation, including bulk earthworks, tree removal, environmental clearing and cut and fill.
- Construction and operation of a three-storey hospital with four wings, which includes the following departments:
 - Emergency Department (including flexible mental health beds).
 - Medical Imaging.
 - Operating Theatres.
 - Intensive Care Unit.
 - Pathology.
 - Pharmacy.
 - Medical and surgical in-patient units.
 - Rehabilitation and Palliative Care in-patient units.
 - Women's Health and Paediatrics.
 - Ambulatory Care for community outpatient services.
 - Administration including Education and Training.
 - Front of House including Retail.
 - Back of House including Mortuary.
- Internal road network and access from Princes Highway.
- Secondary road access (controlled access for Emergency vehicles only) from Caswell Street to north of the Project site.
- At grade car parking.
- Loading dock.
- Helipad.
- Ancillary landscaping including the Walawanni, Meeting Place and Healing Place.

For a detailed project description refer to the Environmental Impact Statement prepared by Ethos Urban.

2.0 Methodology

The assessment of social impacts in this report has been prepared in accordance with the SIA Guideline. 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.

This methodology is designed to ensure that the social environment of communities is considered as part of project decision-making. 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.

Ultimately, there can be two main types of social impacts (both positive and negative) that may arise as a result of the proposed development. First, direct impacts can be caused by the proposal 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.

2.1 Assessment Objectives

This SIA seeks to identify how people will be potentially impacted by the proposal, through:

- Identifying, analysing and assessing any likely social impacts, whether positive or negative, that people may experience at any stage of the proposal lifecycle, as a result of the proposal
- Investigating whether any group in the community may disproportionately benefit or experience negative impacts and proposing commensurate responses consistent with socially equitable outcomes
- Developing social impact mitigation and enhancement options for any identified significant social impacts.

2.2 Assessment Structure

The stages in the preparation of the SIA are shown in **Table 3**.

Table 3 Assessment Structure

Element	Location
Methodology	Section 2.0
Overview of site context and proposed development	Section 4.0
Review of relevant policy context at local, state and federal level	Section 6.0
Baseline analysis of the existing socio-economic environment, involving: • Study area definition • Demographic analysis, including current and forecast characteristics • Mapping of current social infrastructure local community rely on	Section 7.0
Analysis of findings of stakeholder and community consultation undertaken identify community and stakeholder values, concerns and aspirations	Section 8.0
Scoping of social impacts: • Scoping of potential impacts before, during and post-construction, with each of the directly affected communities and other stakeholders identified in relation to the way they may be affected. A SIA Scoping Checklist was prepared at the outset of this assessment, in line with the specifications of the SIA Guideline. • Summary of which impacts have been considered material for full assessment in this SIA.	Section 9.1
Identification of the social impacts of the proposal. The SIA ultimately appraises the significance of each identified impact based on its duration, extent and sensitivity of impact “receivers.” This results in a social significance rating for impacts and benefits.	Section 9.0
Identification of mitigation strategies to manage impacts and enhance benefits of the proposal.	Section 9.0
Concluding comments	Section 10.0

2.3 Social Factors for Assessment

The SIA Guideline classifies social impacts using a suite of social factors, which forms the core basis of this assessment:



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



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



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



Culture: both Aboriginal and non-Aboriginal - people's shared beliefs, customs, practices, obligations, values and stories, and connections to Country, land, waterways, places and buildings



Health and wellbeing: people's physical, mental, social and spiritual wellbeing – especially for people vulnerable to social exclusion or substantial change, psychological stress (from financial or other pressures), access to open space and effects on public health



Surroundings: access to and use of natural and built environment, including ecosystem services (shade, pollution control, erosion control), public safety and security, as well as aesthetic value and amenity



Livelihoods: including people's capacity to sustain themselves through employment or business



Decision-making systems: the extent to which people can have a say in decisions that affect their lives, and have access to complaint, remedy and grievance mechanisms.

2.4 Social Significance Rating Approach

The assessment includes an assessment of the **social significance** of each impact across the suite of factors, including the **likelihood** of each identified impact, along with the envisaged **duration, extent, and potential to mitigate/enhance**.

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 proposal 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.

Each impact has ultimately been assessed and assigned an overall **significance rating**, which 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 the identified impacts.

The social impact significance matrix specified in the SIA Guideline has been adapted for the purposes of undertaking this social and impact assessment.

Table 4 Defining magnitude levels for social impacts

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

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

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

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

Table 6 Social impact significance matrix

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

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

2.5 Information Sources

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

- ABS Census of Population and Housing (Australian Bureau of Statistics, 2016 and 2021)
- ABS Estimated Resident Population (ABS 2020)
- Building Momentum: State Infrastructure Strategy 2018-2038 (Infrastructure NSW, 2018)
- Community consultation undertaken by Health Infrastructure NSW over 2021 and 2022
- DPE Population Projections 2022
- Eurobodalla Community Strategic Plan (Eurobodalla Shire Council, 2017)

- Economic Development Strategy (Eurobodalla Shire Council, 2019)
- Eurobodalla Local Strategic Planning Statement (Eurobodalla Shire Council, 2020)
- NSW Aboriginal health Plan (NSW Health, 2013)
- NSW Health Strategic Priorities 2019-20 (NSW Health, 2019)
- NSW Rural Health Plan (NSW Health, 2014)
- NSW State Health Plan: Towards 2021 (NSW Health, 2017)
- Premier's Priorities (NSW Government, 2019)
- South East and Tableland Regional Plan 2036 (NSW Government 2017)
- Strategy 2026: Leading Rural Healthcare (SNSWLHD, 2021).

2.6 Assumptions

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.

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

4.0 Site Analysis

4.1 Site location and context

The new Eurobodalla Hospital development is located in Moruya on the Princes Highway to the south-east of the Moruya Town Centre, on vacant greenfield land. To the west of the site is Moruya TAFE, and to the north is a small residential subdivision called Mynora Estate. The majority of works will occur on this greenfield site, with some road works proposed in the adjoining Princes Highway road reserve. The site is legally described as Lot 2, DP 1281576.

A map of the site is shown at **Figure 1**.



Figure 1 Aerial image of the site. Some development may occur outside this boundary for ancillary works

Source: Nearmap, Ethos Urban

4.1.1 Topography and Vegetation

The proposed hospital site is a large vacant allotment. A large portion of the site is cleared with some existing natural vegetation on the sloping portion to the south-east of the site.

The topography of the site extends from the lowest point of approximately RL 1.5 at the north-west up to approximately RL 55 at the south-east of the site. Whilst the site is large, this constitutes a total change in level of more than 50 metres. The area identified as usable and appropriate for development is towards the north-east corner of the site.

A significant gully feature extends from east to west on the site and acts as a natural watercourse through the site. The high point is at the base of the south-east ridge at RL 19 and the gully extends west into a flood zone. The low point of the gully on the western boundary is approximately RL 2.0.

4.1.2 Flooding

The site is located largely outside of Moruya's known flood area, with only the western edge of the site identified on the Probable Maximum Flood (PMF) plan.

4.1.3 Bushfire

The site is mapped as bushfire prone land and is not sterilised by bushfire threat. However, the proposed development can comply with the relevant regulations and will be built in accordance with BAL 12.5. A Vegetation Management Plan (VMP) is recommended for ongoing management of the site asset protection zones.

4.2 Existing development

The proposed hospital site is a vacant allotment with some existing natural vegetation. The majority of works will occur on this greenfield site, with some road works proposed in the adjoining Albert Street road reserve.

4.3 Surrounding development

The site is located south-east of the Moruya Town Centre. Directly to the north of the site is a small residential subdivision called Mynora Estate. Moruya TAFE is located to the west.

5.0 Proposed Development

5.1 Description of proposed development

This report accompanies a State Significant Development Application that seeks approval for the Eurobodalla Regional Hospital, including:

- Site establishment and preparation, including bulk earthworks, tree removal, environmental clearing and cut and fill.
- Construction and operation of a three-storey hospital with four wings, which includes the following departments:
 - Emergency Department (including flexible mental health beds).
 - Medical Imaging.
 - Operating Theatres.
 - Intensive Care Unit.
 - Pathology.
 - Pharmacy.
 - Medical and surgical in-patient units.
 - Rehabilitation and Palliative Care in-patient units.
 - Women's Health and Paediatrics.
 - Ambulatory Care for community outpatient services.
 - Administration including Education and Training.
 - Front of House including Retail.
 - Back of House including Mortuary.
- Internal road network and access from Princes Highway.
- Secondary road access (controlled access for Emergency vehicles only) from Caswell Street to north of the Project site.
- At grade car parking.
- Loading dock.
- Helipad.
- Ancillary landscaping including the Walawanni, Meeting Place and Healing Place.

For a detailed project description refer to the Environmental Impact Statement prepared by Ethos Urban.

The proposed development is shown in **Figure 2** below.

- Minimise disruption and maintain business continuity.

The masterplan process undertaken, and subsequent design discussed in **Section 5.1** has been informed by this strategic need.

5.3 Connecting with Country

The Connecting with Country framework by the NSW Government Architect has been considered throughout the masterplan and concept design stages of the Eurobodalla Hospital Project. Consultation has been undertaken with members of the Eurobodalla and surrounding Aboriginal community, both as part of identification of a preferred site as well as through the development of the Master Plan and Concept Design. The consultation is intended to continue through the life of the project to ensure the facility, its staff and visitors are able to connect with and respond to Country, as well as to ensure the facility is appropriate to accommodate the needs of these communities.

The following approaches have been incorporated, or will continue to be incorporated into the design process to begin the processes of Connecting with Country:

- Identifying the Aboriginal knowledge holders and contributors early in the Project to have a comprehensive Aboriginal influence throughout the Project.
- Drawing upon available research to gain an understanding of local history and culture, which reveals traditional ways of recording knowledge and builds relationships with the Aboriginal community.
- Including appropriate space or facilities for cultural proceedings that the community may require.
- Creating an opportunity for education, increased cultural awareness and knowledge of Aboriginal culture.
- Building a database to identify people in the project that influence and guide the project and determine who, and how these people will benefit from the project.
- Create an ongoing line of communication for the project user group and design consultants to provide feedback on successful practice that can be carried into future projects.
- Incorporate traditional local land and water management techniques into design.
- Seek local Aboriginal-owned businesses to partner with throughout the project and after. This includes design consultancy, construction, material provision and potential future tenants.

5.4 Design Principles and Elements

The following section describes the design principles that have informed the proposed development.

Respect for:

- The history of the site by telling the story of the place
- The Aboriginal stories of the site and wider region
- The dignified and safe workplace
- The global markets, Eurobodalla, and neighbouring community
- The desires of the occupants within the precincts; and
- The human as the centre of the hospital.

Respond to:

- The natural context
- The challenges and opportunities of the site topography
- Opportunity of views and aspects
- The wider region developments of infrastructure and urban planning
- The functional and operational requirements
- Current and future demands to avoid duplicity
- Connected Care' model – ambulatory models and 'hospital avoidance' strategies
- Flexible community needs, industry and education drivers; and
- Cultural protocols and customs
- Child-friendly, ageing-friendly, disability-friendly.

Rejuvenate the:

- Healing environment by quality design and integration of landscape elements
- Quality of life for consumers, staff, students, and general public by evidenced-based, innovative and integrated model of care
- People's health and wellness through people-centred design and wellness-focused environment
- Physical environment through passive design strategies and indoor/outdoor spaces
- Health services by embracing digital opportunities
- Public spaces with art and community activities
- Precinct as a conduit or a destination with coherent planning; and
- Collaborative environment with activated edges as part of the local community.

6.0 Strategic Policy Review

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)
- Eurobodalla Community Strategic Plan (Eurobodalla Shire Council, 2017)
- Economic Development Strategy (Eurobodalla Shire Council, 2019)
- Eurobodalla Local Strategic Planning Statement (Eurobodalla Shire Council, 2020)
- NSW Aboriginal health Plan (NSW Health, 2013)
- NSW Health Strategic Priorities 2019-20 (NSW Health, 2019)
- NSW Rural Health Plan (NSW Health, 2014)
- NSW State Health Plan: Towards 2021 (NSW Health, 2017)
- Premier's Priorities (NSW Government)
- South East and Tableland Regional Plan 2036 (NSW Government 2017)
- Strategy 2026: Leading Rural Healthcare (SNSWLHD, 2021).

A summary of the key themes of these documents are identified in **Table 7** below.

Table 7 Strategic policy review

Policy themes	Implications for Social Impact Assessment	Relevant documents
Improving health outcomes and access to health services in rural NSW	• Communities in rural NSW are more likely to suffer from higher levels of chronic illness and/or health risks than those in urban areas, with higher rates of preventable hospitalisations and difficulties accessing healthcare when needed. It is a priority of the NSW Rural Health Plan to strengthen current access to high-quality healthcare services for rural population and invest in new and updated infrastructure. NSW Health is committed to improving the health of rural communities, developing inclusive and innovative service models, and exploring opportunities to integrate health services with other sectors such as education. • In order to achieve the strategic vision of 'Strong Communities and Desirable Lifestyles', Council seeks to improve local access to health services in Eurobodalla Shire. • The SNSWLHD is home to a population faced with numerous challenges such high rates of developmental vulnerability among children, and high rates of chronic conditions among Aboriginal people. Its population is also ageing, and spread across a wide geographic area, meaning that many communities will struggle to access quality healthcare, while service and workforce capacities are stretched to the limit. It is a district priority to improve the capacity of health services in the SNSWLHD through innovative service models and strong partnerships with the broader health network. • The project will support following NSW Premiers Priorities: - "Improving service levels in hospitals", and - "Improving outpatient and community care".	• NSW Rural Health Plan (NSW Health, 2014) • Eurobodalla Community Strategic Plan (Eurobodalla Shire Council, 2017) • Eurobodalla Local Strategic Planning Statement (Eurobodalla Shire Council, 2020) • Strategy 2026: Leading Rural Healthcare (SNSWLHD, 2021) • NSW Premiers Priorities
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	• Building Momentum: State Infrastructure Strategy 2018-

Policy themes	Implications for Social Impact Assessment	Relevant documents
	service in order to meet the evolving healthcare needs of the state. - Approximately 40% of NSW Health's built infrastructure is over 50 years old, necessitating major investment into upgrades and new infrastructure to cope with increasing demand. Future investment will focus on infrastructure which will improve integration between hospital and primary care and prevent unnecessary hospital readmissions and Emergency Department attendances. - NSW Health identifies investment into health infrastructure as a key step toward a "21st century health system that will be sustainable, purposeful and, most importantly, deliver positive health outcomes for the people of NSW" (p. 31).	2038 (Infrastructure NSW, 2018) - NSW State Health Plan: Towards 2021 (NSW Health, 2017) - NSW Health Strategic Priorities 2019-20 (NSW Health, 2019)
Improving health outcomes for Aboriginal communities	- Eurobodalla Shire is home to a comparatively high Aboriginal population (5.6%) compared to broader NSW (2.9%). It is crucial that future development of health infrastructure incorporates culturally safe structures, policies, and processes to ensure Aboriginal communities can enjoy equal access to necessary medical services and procedures. - The SNSWLHD recognises the gap that exists between the life expectancies of Aboriginal and non-Aboriginal people in the district, and the prevalence of chronic conditions among Aboriginal communities. It is a district priority to "close the gap by focusing on Aboriginal health and wellness" (SNSWLHD Strategy, pg. 15), including the development of Aboriginal-focused services guided by consultation.	- Eurobodalla Local Strategic Planning Statement (Eurobodalla Shire Council, 2020) - NSW Aboriginal Health Plan (NSW Health, 2013) - Strategy 2026: Leading Rural Healthcare (SNSWLHD, 2021)
Supporting economic growth in Eurobodalla Shire	- Eurobodalla's economy is largely driven by the healthcare, agriculture, and construction industries, with the healthcare and social assistance sector contributing close to 15% of GRP and employing at least 2,543 people. Council aims to create more local employment opportunities by meeting the demands of this sector. - The South East and Tableland Regional Plan 2036 identifies that improvements to health and education facilities in the region will attract more clean, green and knowledge-based businesses and industries.	- Economic Development Strategy (Eurobodalla Shire Council, 2019) - South East and Tableland Regional Plan 2036 (NSW Government 2017)
Supporting population growth and change with investment in infrastructure	- Eurobodalla is a steadily growing region home to 39,369 people, forecasted to grow to 45,515 by 2036 with an annual growth rate of 0.9%. Eurobodalla's community is also ageing, with a median age of 54 and population of 34.1% aged over 65. It is a Council priority to align local infrastructure delivery with planned growth, particularly in areas expected to accommodate infill development and increased densities. - While the population of the SNSWLHD is not expected to increase dramatically (211,122 in 2021 to 211,484 in 2036), the geographic spread and remoteness of some communities mean that the burden of potentially avoidable deaths is higher. It is a district priority to "align infrastructure and service planning around the future care needs" (SNSWLHD Strategy, pg. 16).	- Eurobodalla Local Strategic Planning Statement (Eurobodalla Shire Council, 2020) - Strategy 2026: Leading Rural Healthcare (SNSWLHD, 2021)

7.0 Social Context

7.1 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.

Summary - Key Community Characteristics

A review of the demographic profile of the local area (sourced from the ABS Census of Population and Housing 2021), has highlighted the following key community characteristics:

- **Overall, the area is characterised by relatively older community that is less culturally diverse and has a notable share of Aboriginal and or Torres Strait Islander residents. While most households are family households, there is a strong share of lone persons:**
 - The Primary Study Area (PSA) had an estimated resident population of 842 in 2020, with approximately 232 living adjacent the subject site – and may experience various social impacts of the proposal the most.
 - Eurobodalla Shire that is the broader catchment for the proposed Hospital is estimated to be home to 38,890 residents.
 - The local population is generally older than the Regional NSW average and living on lower household incomes.
 - The population is largely born in Australia, and English speaking. However, the PSA includes an Aboriginal population of 9.4%, nearly double the Regional NSW average.
- **The study area population is declining, however there is a notable increase in elderly cohorts.**
 - Population forecasts show that over the next 15 years, the total resident population is estimated to decrease by 1,320, consistent with trends across regional areas of NSW in the longer term.
 - The decline is consistent amongst most age groups, however, population growth is still forecast for residents aged 75 years and over, which are estimated to increase by +2,330 residents by 2036. As a result, the 75+ age cohort will grow from 12% to 20% of the population by 2036, indicating need for health infrastructure investments in the area.
- The site is situated within a highly car dependent locality. A small number of community facilities are available within a 10-15 minute walking distance from the site, but a range of social infrastructure facilities are available within Moruya town centre, about 1km north-west from the site, and accessible via Princes Highway.
- The Southern New South Wales Local Health District SNSWLHD caters for a population of approximately 198,342. The district's **population has a greater risk of unhealthy lifestyle behaviours leading to chronic disease and illness**. Health trends within the district include high levels of overweightness or obesity, high levels of diabetes or high blood glucose, high rate of pregnant smokers, and mental illness. Eurobodalla LGA has one of the highest fall-related injury hospitalisation rates in SNSWLHD, and a higher rate of dementia hospitalisation than the state average.

7.2 Area of Social Influence

For the purposes of demographic analysis, study areas and a social locality 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 (SA1¹ or Local Government Area boundaries) that best reflect the identified geographical areas. The Social Locality has been developed through the social baseline research and community engagement findings.

¹ The ABS Statistical Areas Level 1 (SA1s) are designed to maximise the spatial detail available for Census data. Most SA1s have a population of between 200 to 800 persons with an average population of approximately 400 persons. This is to optimise the balance between spatial detail and the ability to cross classify Census variables without the resulting counts becoming too small for use. SA1s aim to separate out areas with different geographic characteristics within Suburb and Locality boundaries.

7.2.1 Primary Study Area (PSA)

For the purposes of demographic analysis, a Primary Study Area (PSA) has been defined to represent the local community within the immediate area of the site. This includes residents living within 400m of the Subject Site, that would typically experience localised social impacts the most, for example amenity impacts associated with construction activities. 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.

Due to the limitation of using Statistical Area One (SA1) boundaries defined by the ABS, SA1s that intersect with the 400m radius from the Subject Site have been included throughout this analysis. This is to ensure that all residents living within 400m are captured, however due to the sizes of the SA1s selected, this also includes some residents living beyond the 400m radius as shown in **Figure 3**. The data still provides a strong indication of the local resident profile and characteristic within PSA.

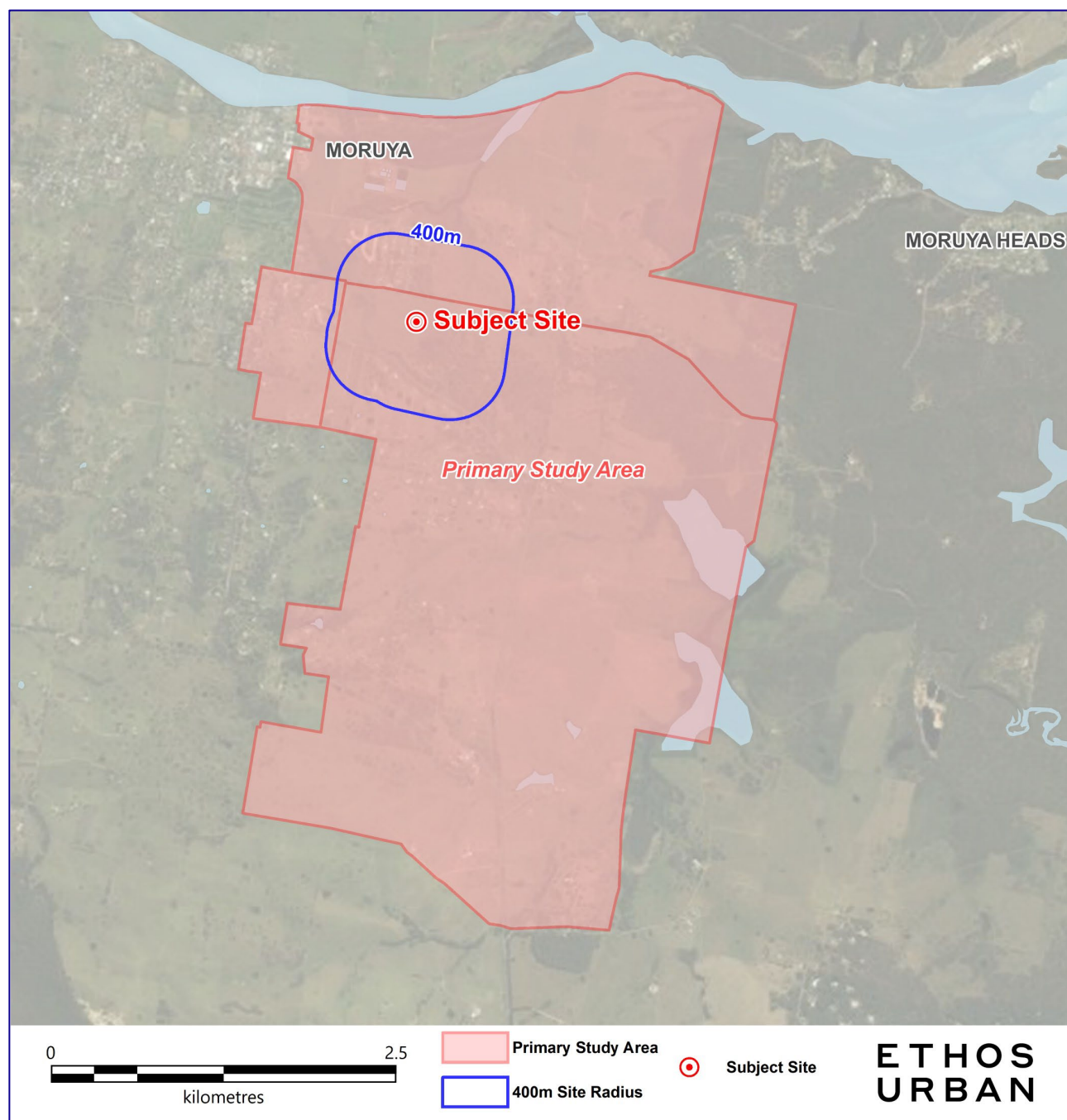


Figure 3 Primary Study Area

Source: MapInfo, Ethos Urban

7.2.2 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 community. This includes Moruya Town Centre, and the boundary is shown in **Figure 4** below.

Consideration has also been given to the social profile of residents living within Eurobodalla LGA more broadly, as the core catchment of the proposed hospital.

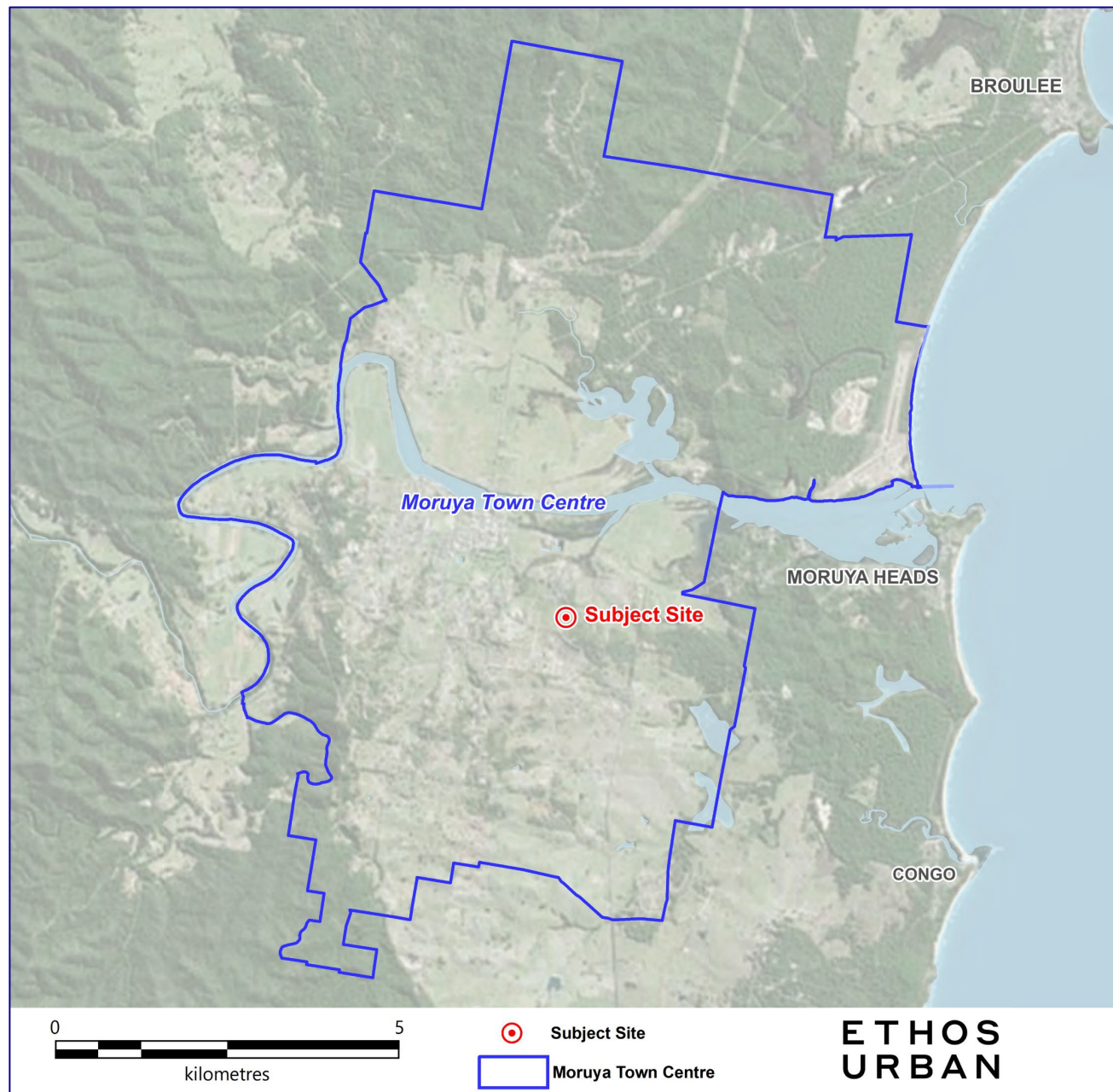


Figure 4 Moruya Town Centre (SSA)

Source: MapInfo, Ethos Urban

7.2.3 Social Locality

In order to further articulate the social landscape of the proposed development, a relevant social locality has been identified, to articulate affected groups and points of interest to the SIA.

Figure 5 displays the Social Locality of the site's immediate surroundings, with significant impacts expected to be experienced by receivers within approximately 400m of the site. The map also highlights residential properties to the north and south, as well rural landowners, which will be highly affected by the proposal due to their proximity. TAFE

NSW to the west has also been identified, due to the potential impact of the proposal on access to and from the campus.

The proposed Emergency Access Point for the hospital has been identified as a point of interest to the SIA, due to the likely interest in this project component arising from nearby residents.

Figure 6 displays the broader geographic context of the site, with reference to its location in Moruya and distance from the town centre. The existing hospitals in Bateman's Bay and Moruya have also been identified, due to the proposal meaning these services will ultimately close once the Eurobodalla Regional Hospital becomes operational. This will impact nearby residents and healthcare workers, resulting in them having to take new routes to seek healthcare or employment, while benefiting those living closer to Moruya.

The Moruya suburb and town centre have been specifically highlighted in this map due to the likely benefits of the proposal on the local community and economy. The new Eurobodalla Hospital will likely attract new residents, workers, and visitors to the locality due to new employment opportunities and high-quality healthcare services. This has the potential to transform community composition, the housing market, and the regular community functioning in Moruya.

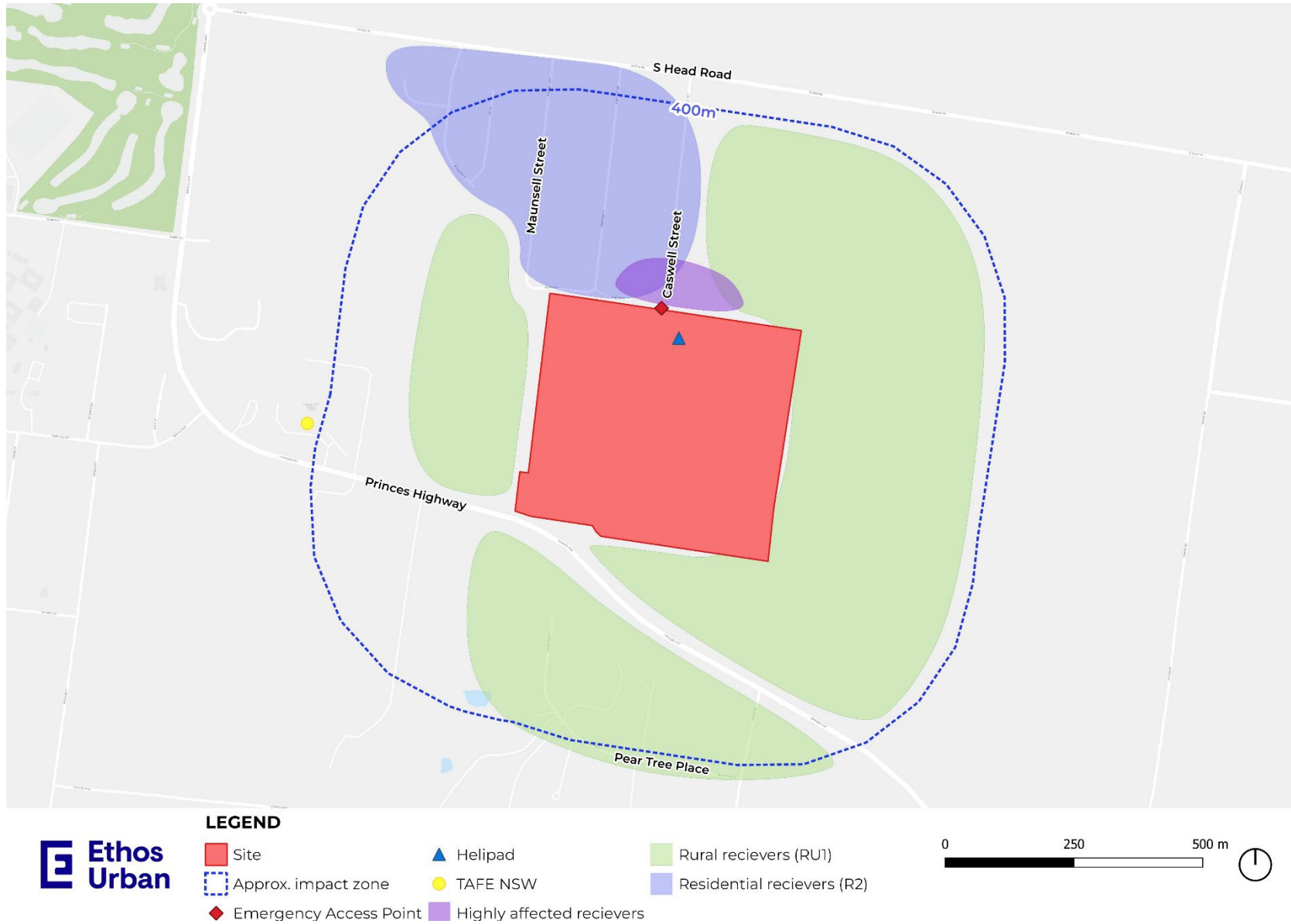
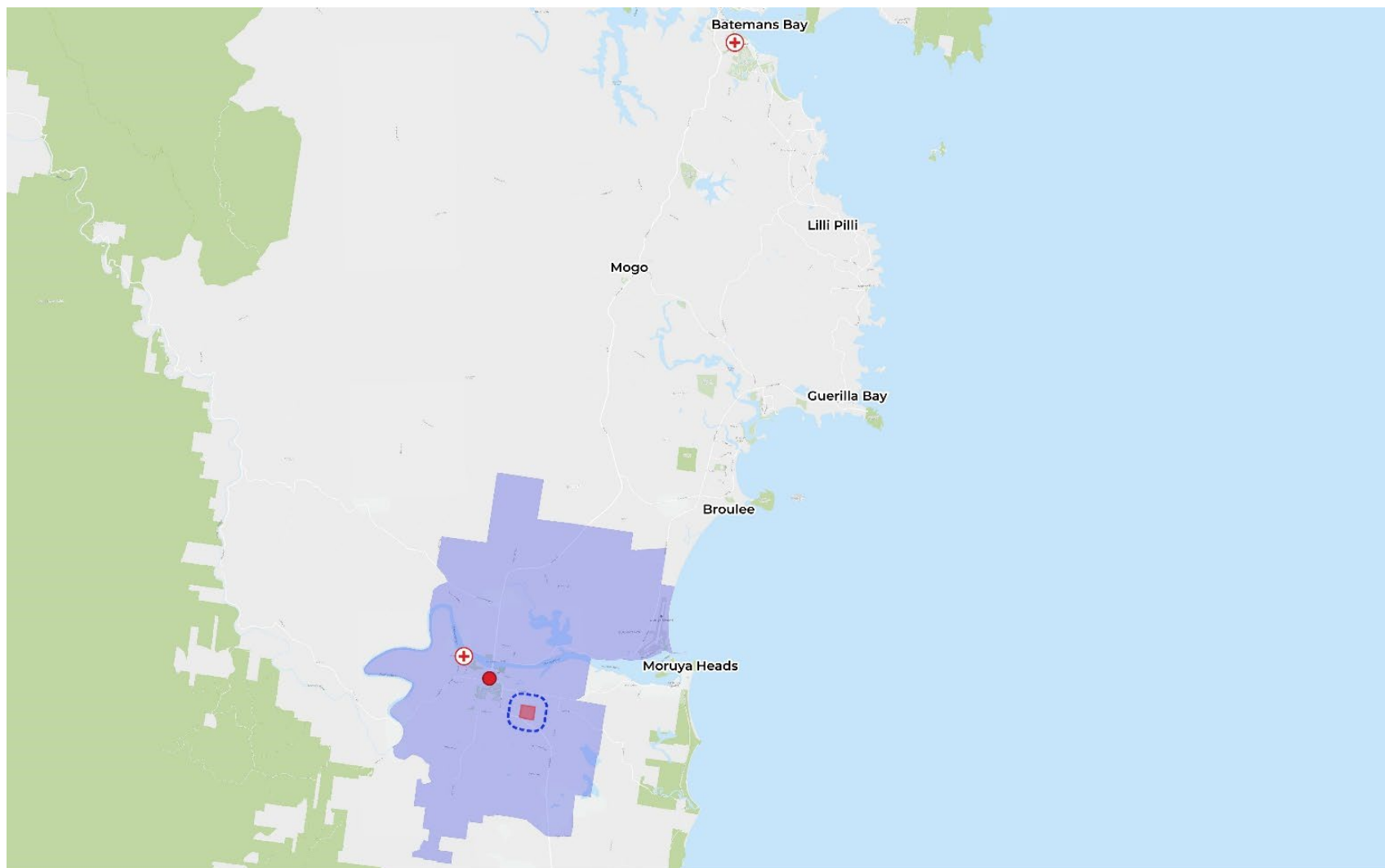


Figure 5 Primary Social Locality – Eurobodalla Regional Hospital SIA

Source: QGIS, Ethos Urban



LEGEND

400m zone

Existing Hospitals

Site

Moruya Town Centre

Moruya suburb



Figure 6 Secondary Social Locality - broader context

Source: QGIS, Ethos Urban

7.3 Community Profile: Demographic Characteristics

An overview of the demographic and social economic profile of PSA and SSA residents is compared to the Regional NSW (i.e., NSW excl. Greater Sydney) benchmark in **Appendix B** and is based on 2021 ABS Census of Population and Housing data and latest 2021 Estimated Resident Population (ERP) figures. It is important to note that at this time, not all information from the ABS 2021 Census is yet available. Where required, relevant information will be supplemented from the 2016 Census. Key findings of the community profile data include:

- **There were 282 residents within the PSA in 2021.** 4302 residents lived in the Moruya Town Centre overall, and 40,593 across Eurobodalla Shire overall.
- **An older age profile** of 46.9 in the PSA, and 51.0 in the SSA, and 53.9 in Eurobodalla Shire on the average. This is significantly higher than the Regional NSW median of 42.4. This higher median age is driven upward by the high proportion of residents aged 60 years and over at 37.9% in the PSA and 39.4% in the SSA. By comparison, just 29% of residents in Regional NSW are aged 60 years and over. This is significant in considering demand for health services in the Study Areas, where elderly residents will typically require greater and more frequent health care due to the higher prevalence of chronic illness and disease associated with ageing.
- **Residents are mostly Australian born (94.9%),** and 98.4% of households speak English only at home in the PSA.
- **High share of Aboriginal and or Torres Strait Islander residents.** In the PSA, some 12.2% of residents identify as being of Aboriginal and or Torres Strait Islander descent. This compares to 7.3% in the SSA, and 7% in Regional NSW.
- **9.8% of Moruya area residents require assistance with daily activities,** that is somewhat higher than the 8.4% requiring assistance across Eurobodalla Shire, or 7.3% across the Regional NSW.
- **Lower median annual household income** in the PSA of \$55,960, some 25.7% lower than the Regional NSW median. The Eurobodalla Shire average was \$60,890, 19.1% below the Regional NSW.
- **Predominately family households,** where 71.6% of occupied dwellings in the PSA are family households. This compares to 66.8% in the SSA, and 68.8% in Regional NSW. Possibly reflecting the older age profile of the area, only 18.6% of all families in the PSA were couple families with children, well below the 26.6% across Regional NSW.
- **Separate houses are the predominate dwelling type,** accounting for 100% of dwellings in the PSA, and 90% in the SSA. Regional NSW contains a slightly lower share of separate houses (82.9%).
- **High rates of home ownership,** where 48.2% of PSA dwellings are owned outright, and 30% are owned on a mortgage. 19.1% dwellings are rented. 7.2% of all housing in the PSA is state housing territory or housing group housing, compared to 3.9% across Regional NSW.
- **Low rates of residents attending education,** where just 17.7% of PSA and 15.9% of SSA residents are attending formal education. This compares to the Regional NSW benchmark of 21.9% of resident attending formal education and is again likely to reflect the older age profile of the study area population.

A note on the COVID-19 Pandemic:

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.

7.4 Population Forecast

Population estimates and forecasts have been prepared for Eurobodalla LGA with reference to the DPE official Population Projections 2022. The estimates presented in Table 8 show that in 2022, Eurobodalla LGA has an ERP of 39,497. Population forecasts show that the total resident population will grow by 5,905 to reach 45,402 in 2041.

A breakdown of population projections by age shows a declining population in the 5-14 years, 15-24 years, and 55-64 years age cohorts. However, population growth is still forecast for residents aged 65 years and over, which are estimated to increase by +5,000 residents by 2041, highlighting an ageing population within the Eurobodalla Shire LGA.

An ageing population is significant in the context of health services, with Australia's ageing population boosting demand for health services over recent years, noting older people require more specialist and frequent medical services compared to younger cohorts. This is primarily due elderly persons greater susceptibility to chronic diseases or disorders.

As such, the above noted increase in persons aged 65 and over will place increased pressure on the health system in the Eurobodalla LGA, and accordingly increase demand for services, which will be supported by the proposed Eurobodalla Hospital.

Population estimates for Eurobodalla LGA are shown below in **Table 8**.

Table 8 Population Forecasts - Eurobodalla Shire LGA (2022-2041)

Population Summary	2016	2022	2031	2041	Change (2022-2041)
0-4 years	1,660	1,641	1,643	1,666	25
5-14 years	3,980	4,008	3,967	3,958	-50
15-19 years	1,870	1,902	1,797	1,778	-124
20-24 years	1,400	1,385	1,236	1,144	-241
25-34 years	2,870	2,733	2,713	2,890	157
35-44 years	3,530	3,365	3,789	3,781	416
45-54 years	4,730	4,649	4,601	5,075	426
55-64 years	6,770	6,781	6,623	6,611	-170
65-74 years	6,510	7,431	8,475	8,502	1,071
75-84 years	3,270	4,056	4,858	6,220	2,164
85 years and over	1,330	1,429	2,007	3,194	1,765
Total persons	37,920	39,497	42,687	45,402	5,905

Source: DPE Population Projections 2022

7.5 Health Profile

The following section provides a brief snapshot of the health and wellbeing of the population of the Southern New South Wales Local Health District (SNSWLHD), where the site is located.

7.5.1 Social Determinants of Health

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.

The SNSWLHD's regional and rural location elevates its population's risk of developing illness or disease as a result of socioeconomic factors:

“People living in rural, regional and remote NSW are affected by a range of factors which impact on their health outcomes. While there have been major improvements in healthcare, people living in rural NSW still experience a range of poor health outcomes, impacted by issues such as geographic isolation, socioeconomic disadvantage, drought and climate change, and a greater exposure to risk of injury.

The 2010 NSW Population Health Survey found that people living in rural NSW reported higher levels of chronic illness and health risk factors than those in urban areas. Despite this, there was no difference between the two groups in the percentage of people visiting a GP in the preceding two weeks. Those in rural areas were more likely to have accessed community healthcare services and visited an emergency department in the previous year. In addition, people in rural NSW were more likely to report experiencing difficulties accessing healthcare when they needed it.”²

7.5.2 Local Health Profile

The SNSWLHD caters for a population of approximately 198,342. The district's status as socially disadvantaged means that its population has a greater risk of unhealthy lifestyle behaviours (e.g., smoking, alcohol consumption, lack of exercise, and poor diet) leading to chronic disease and illness. Other health trends within the district include:

- High levels of being overweight or obese (69.7% of adults and 27.6% of children)
- High levels of diabetes or high blood glucose (11.6% of adults)

² NSW Rural Health Plan: Towards 2021

- High rate of pregnant smokers (14.1% compared to NSW average of 5.8%)
- Higher rates of mental illness, hospitalisation for mental distress and self-harm than the state average, with those aged 15-24 most at risk
- Prostate and breast cancers are the most commonly occurring cancers, with lung cancer causing the most deaths
- Eurobodalla LGA has one of the highest fall-related injury hospitalisation rates in SNSWLHD, and a higher rate of dementia hospitalisation than the state average.

7.6 Local Social Infrastructure Context

A review of the existing local social infrastructure has been undertaken to inform the Social Impact Assessment and establish a baseline for the assessment of existing facilities. An overview of the local social infrastructure context is provided below, identifying key social infrastructure within a local 800m catchment of the site (a distance equivalent to a 10-15 minute walk). Whilst a small number of community facilities are within the walking distance of the site, further social infrastructure is available within Moruya town centre, located approximately 1km northwest of the site, and have also been included in the overview.

A map illustrating the approximate area is shown in **Figure 7** over page.

The following categories of social infrastructure relevant to the project have been identified:

- **Health/aged care facilities:** There are three health facilities located approximately 1km northwest of the site in Moruya town centre – Moruya Medical Centre, Queen Street Medical Centre Moruya, and Moruya General Practice & Skin Cancer Clinic. The existing Moruya Hospital site is located within north-western part of the town, just outside the area pictured on Figure 6.
- **Community facilities:** There are no community facilities located within walking distance of the site. There are three community facilities located approximately 1km northwest of the site in Moruya town centre – Moruya Library, RSL Memorial Hall, and Dr Mackay Community Centre.
- **Open space:** There is one open space located within walking distance of the site – Moruya Showground. There is another open space located approximately 1km northwest of the site – Moruya Riverside Park.
- **Places of worship:** There are two places of worship located within walking distance of the site – Moruya Christian Family Church, and Baptist Church. There are four more places of worship located approximately 1km northwest of the site – Sacred Heart Parish, Uniting Church in Australia, Anglican Church of Australia, and Revival Fellowship THE Moruya.
- **Educational facilities:** There is one educational facility located within walking distance of the site – TAFE NSW. There are two other educational facilities located outside the 800m catchment – Moruya High School, and Moruya Public School.
- **Recreational facilities:** There are no recreational facilities located within walking distance of the site, but there are two recreational facilities located approximately 1km northwest of the site – Moruya Bowling & Recreational Club, and Gundry Oval.
- **Childcare facilities:** There is one childcare facility located within walking distance of the site – Moruya Early Learning Centre. There are three more childcare facilities located outside the 800m catchment – Milestones Early Learning Moruya, Moruya After School and Vacation Care Centre, and Moruya Preschool Kindergarten.

7.7 Transport and Accessibility

The site is situated within a highly car dependent locality. The site is walkable from two bus stops on Princes Highway which are serviced by the following route:

- MCS Canberra to South Coast.

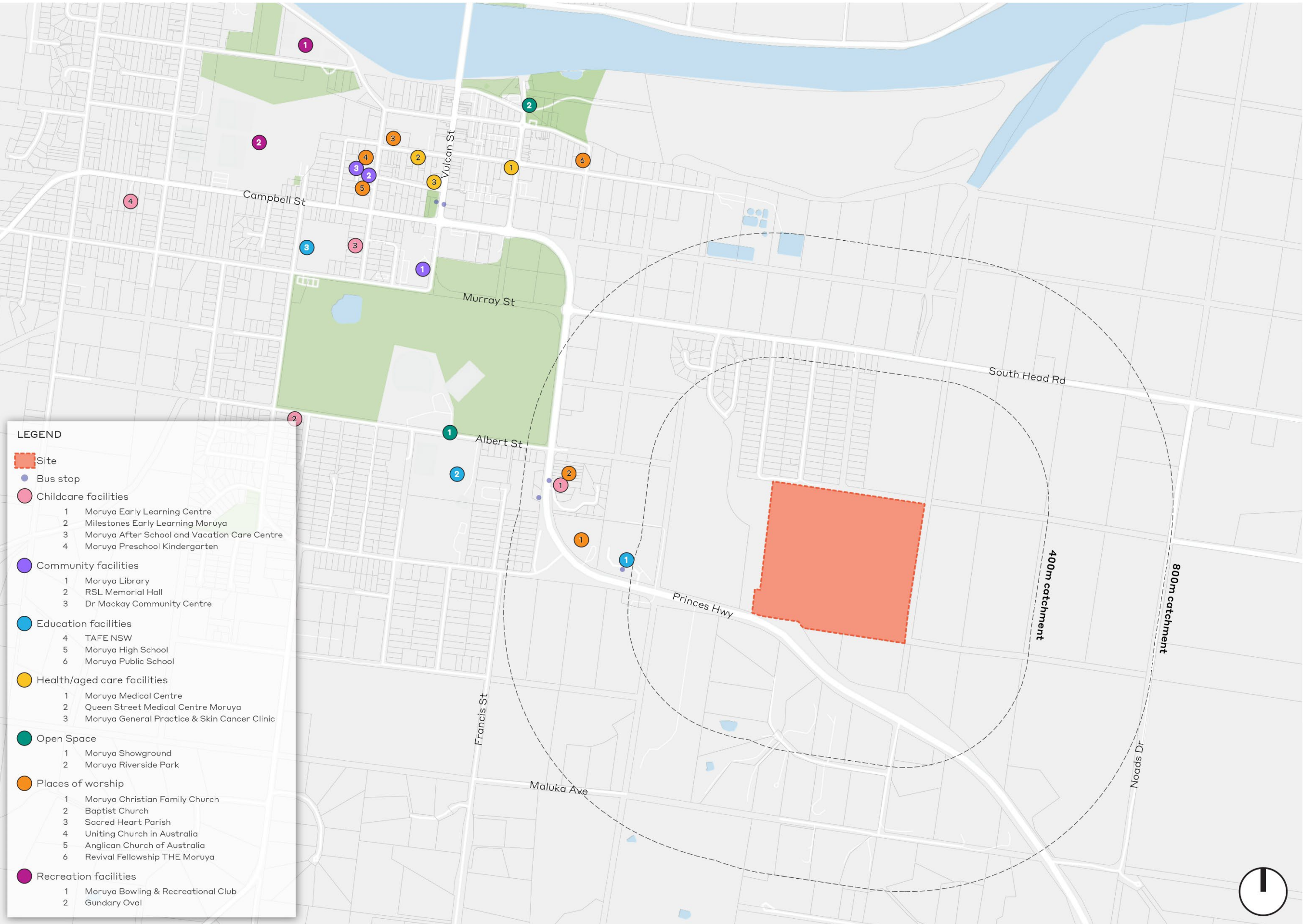


Figure 7 Social infrastructure context

Source: Ethos Urban

7.8 Social Issues and Trends

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

7.8.1 Growing complexity of population health characteristics

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

“Chronic conditions are an ongoing cause of substantial ill health, disability and premature death, making them an important global, national and individual health concern... Many people with chronic conditions do not have a single, predominant condition, but rather they experience multimorbidity—the presence of 2 or more chronic conditions in a person at the same time. People living with multimorbidity often have complex health needs and report poorer overall quality of life... This places a heavy demand on Australia's health care system and requires substantial economic investment.”³

The prevalence of complex diseases is also increasing, this includes diseases which are multifactorial and can be attributed to multiple environmental or socioeconomic characteristics. Complex diseases or illnesses can also arise through the interaction of multiple genes with external factors. As Australia's demography and disease patterns change, the population ages and the burden of chronic illness grows, the healthcare system will inevitably come under increasing pressure.⁴

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

7.8.2 Health and wellbeing of Aboriginal communities

Eurobodalla Shire is home to a comparatively high Aboriginal population (5.6%), with 9.4% of the PSA residents identifying as Aboriginal or Torres Strait Islanders. Australia's Aboriginal and Torres Strait Islander population often suffers from poorer health than the non-Aboriginal population, as the latest data from the Australian Institute of Health and Welfare identified that Aboriginal and Torres Strait Islander Australians experience disease at a rate 2.3% higher than non-Aboriginal and Torres Strait Islander Australians, with 67% having reported at least 1 existing long-term health condition.⁵

This is often due to social and cultural determinants of health such as intergenerational trauma, “resulting from the ongoing and cumulative effects of colonisation, loss of land, language, and culture, the erosion of cultural and spiritual identity, forced removal of children, and racism and discrimination”.⁶ Services and facilities which specifically provide support to Aboriginal and Torres Strait Islander Australians are crucial in order to effect change. It has been identified that Aboriginal medical services are necessary in addressing the cumulative impacts of continued discrimination on Aboriginal health by providing the appropriate level of culturally sensitive care, and community-empowering health education services.⁷

It is a national Government priority to improve the health of Aboriginal and Torres Strait Islander people, and to work in partnership with them to develop and implement strategies to facilitate better health and wellbeing. In alignment with the National Agreement on Closing the Gap, the Australian Government supports the delivery of high-quality health services which are culturally appropriate⁸ and designed to alleviate barriers to accessing healthcare for Aboriginal and Torres Strait Islander Australians.

³ <https://www.aihw.gov.au/reports/australias-health/chronic-conditions-and-multimorbidity>

⁴ <https://www.mja.com.au/journal/2007/187/9/challenges-health-and-health-care-australia>

⁵ <https://www.aihw.gov.au/reports/australias-health/indigenous-health-and-wellbeing>

⁶ Australians Together 2020, 'Indigenous disadvantage in Australia', australianstogether.org.au/discover/the-wound/indigenous-disadvantage-in-australia/

⁷ Baba, J. Brolan, C. & Hill, P. 2014, 'Aboriginal medical services cure more than illness...', equityhealthj.biomedcentral.com/articles/10.1186/1475-9276-13-56

⁸ <https://www.health.gov.au/health-topics/aboriginal-and-torres-strait-islander-health/how-we-support-health>

7.8.3 Regional, rural, and remote health

It is widely documented that populations living in regional, rural, and remote locations in Australia often suffer from poorer health due to their geographic isolation, which creates barriers to accessing high-quality healthcare. The Australian Institute of Health and Welfare (AIHW) has recorded that people living in these locations suffer from “higher rates of hospitalisations, mortality, injury, and poorer access to, and use of, primary health care services, compared with those living in metropolitan areas”. This is due to numerous factors, such as:

“Challenges in accessing health care or health professionals, such as specialists, social determinants such as income, education and employment opportunities, higher rates of risky behaviours such as tobacco smoking and alcohol use, higher rates of occupational and physical risk, for example from farming or mining work and transport-related accidents.”⁹

The COVID-19 pandemic has further exacerbated this disparity, as lower vaccination rates significantly increase the risk of infection in rural communities. Health infrastructure and services in these locations are already operating on a limited capacity compared to metropolitan areas, meaning that they have limited resources to cope with an outbreak, particularly when patients require intensive care:

“Covid-19 has the potential to lead to those very high levels of acute and complex care. Unfortunately, the other side to that is that they can appear in high numbers. Those two factors combined, health services can get overwhelmed, but rural and remote areas are that much more at risk, and essentially don’t have the same degree of depth as metropolitan services.”¹⁰

Increasing the quantity and capacity of rural healthcare services will continue to be a pressing issue in light of the COVID-19 pandemic.

7.8.4 The effect of COVID-19 on global health systems

In 2021, the World Health Organization (WHO) reported there was an excess mortality of approximately 3.3 million due to COVID-19 when combining deaths which were directly and indirectly attributable to COVID-19. This number captures deaths which can be attributed to the overall conditions caused by the pandemic, including inadequate or under-resourced healthcare and information systems, and disruption of regular healthcare delivery and vaccinations.¹¹

In Australia, academics have seen the pandemic as an opportunity to transform the national healthcare system, and have identified the following issues with the current system: “disconnected and competing health systems; for example, the arbitrary split between the funding of general practice and hospitals, and the lack of a coordinated response to the aged care sector; the weighting of services toward acute illness rather than prevention or wellness promotion”; and, “the monumental wastage and inefficiency of utilising health care resources in the Australian health care system”.

Health specialists say that the Australian health model must evolve into an integrated and coherent system which is both sustainable and equitable. This will involve the implementation of strong early intervention and detection measures which take into account socioeconomic and geographic risk factors¹², as well as investment in infrastructure and service capacity. There is a need for stronger connection between general practice and public hospitals which can be fuelled by appropriate funding. Further, funding should increase to allow sufficient capacity and growth in public hospitals where needed in order to reduce overcrowding, waiting times, and avoidable complications.¹³

⁹ AIHW 2019, Rural & Remote Health, <https://www.aihw.gov.au/reports/rural-health/rural-remote-health/contents/rural-health>

¹⁰ May, N. 2021, ‘Australian health experts worried as rural Covid vaccination rates lag metro areas’, <https://www.theguardian.com/australia-news/2021/sep/18/australian-health-experts-worried-as-rural-covid-vaccination-rates-lag-metro-areas>

¹¹ WHO 2021, ‘The impact of COVID-19 on global health goals’, <https://www.who.int/news-room/spotlight/the-impact-of-covid-19-on-global-health-goals>

¹² Blecher, G., Blashki, G. & Judkins, S. 2020, ‘Crisis as an opportunity: how COVID-19 can reshape the Australian health system’, <https://www.mja.com.au/journal/2020/213/5/crisis-opportunity-how-covid-19-can-reshape-australian-health-system>

¹³ Australian Medical Association 2021, ‘Vision for Australia’s Health’, <https://ama.com.au/sites/default/files/2021-06/ama-vision-for-aus-health.pdf>

8.0 Community and Stakeholder Perspectives

The following section provides an overview of the community and stakeholder consultation undertaken to inform the SIA and 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. Further detail is provided in this report: *Eurobodalla Hospital Consultation Outcomes Report*.

8.1 Engagement to inform the SIA

In order to inform the project's understanding of likely social impacts, develop mitigation approaches together with impacted people and guide this SIA, Health Infrastructure NSW, with support from Ethos Urban, conducted engagement with stakeholders who may be more significantly affected by the proposal over the development process, and with broader community, from 2022 to 2023.

8.1.1 Highly impacted groups

A small number of landholders located directly to the north and west of the project site highlighted concerns about potential impacts and were the core focus of this ongoing engagement over 2022 and 2023. These stakeholders include the residential neighbours and landowners surrounding the site, as pictured in the Social Locality Map in **Figure 5**. These stakeholders were targeted as part of the engagement program as they are likely to experience localised impacts associated with the proposal, such as changes in environmental amenity due to construction activity, and then ongoing impacts from ambulance/helicopter noise during operation.

Among these neighbouring residents and landowners, the following key issues were raised:

- Location of the Helipad
- Location of the Emergency Access Point
- Parking (during both construction and once the hospital is operational).

The following table outlines the engagement activities carried out with regard to these impacts, and the project responses provided by HI.

Table 9 Engagement with neighbouring residents and landowners

Activity	Issues/topics raised	Project response
February 2022 – on site meet and greet Attendees: 45	The primary theme was a perceived loss of the quiet neighbourhood and existing local character. In particular, participants were concerned about the Helipad, Emergency Access Point. Another issue raised concerned parking on surrounding streets during construction and operation – it was thought that contractors may use residential streets for parking.	HI noted these concerns and advised that they would provide further detail.
May 2022 – in-person meeting at Moruya Golf Club Attendees: 20	HI presented several options for selection of the Helipad location and discussed criteria for selection. This was in direct response to community concerns and aimed to provide rationale behind the site selection process, and reassurance that amenity impacts on residents were being taken into account. Attendees were not satisfied with the explanations provided for the choices for the Helipad and Emergency Access point. They requested further information on how often these components would be used, as well as further in-person consultation activities.	HI agreed to return to the community with more information on this topic when available.
June 2022 – 2x in-person meetings at Moruya Golf Club	HI presented several diagrams in relation to site selection for the Helipad. The aviation consultant talked through technical details in relation to this matter, and an Air Ambulance offer explained	HI agreed to follow up on information related to the down draft from Helicopters, and confirmed that there

Activity	Issues/topics raised	Project response
Attendees: 27	how, and in what circumstances, the Helipad will be used. Attendees requested data on the likely frequency of usage of the Helipad. There was also discussion around the down draft from Helicopters, and the location and access restrictions of the Emergency Access Point. Parking was raised again as an issue. Attendees queried if carer and staff accommodation would be provided on site, and if so, the number of units available. The meeting also included attendees from Rotary with a specific interest in fundraising to support carers accommodation.	would be no contractor parking on residential streets.
August 2022 – face-to-face meetings with residential neighbours Attendees: 3 (1 couple and 1 single person, separate meetings)	HI met with 2 neighbours who are likely to experience the most significant amenity impacts as a result of the Helipad and Emergency Access point. The discussion confirmed the location of key assets such as the helipad and emergency access and basis for the decision. Discussion also mentioned possible mitigation measures that could be employed for impacted neighbours to alleviate impacts. Attendees generally accepted the information provided and appreciated the offer to meet in person. One neighbour was still not completely satisfied with the outcome.	The neighbours declined mitigation options which were offered to them, including possible soundproofing and vegetation screening. However, they were grateful that HI had taken the time to meet with them and provide clarity. Note that concern around the Emergency Access Point still remains.
August 2022 – letterbox drop update	Neighbours and landowners were notified via letterbox of updates to the location of the Emergency Access Point and Helipad. They were also invited to attend another drop-in session on site.	Nil.
September 2022 – on site meeting Attendees: 8 across 2 sessions	This session served to capture any additional issues that may not have been addressed in previous engagement. There were very few attendees and no major issues raised. Attendees had general queries about project timing and status, as well as the location of key assets.	Queries were adequately responded to based on available project information. Project update sheets from August 2022 were also handed out.
February 2023 – notice to neighbours	HI notified nearby neighbours about archaeological work occurring on site.	Nil.

The project team has taken steps to collaborate with affected residents and landowners on project solutions and mitigation measures. A strong commitment to ongoing engagement and regular projects updates has resulted in waning community interest in participation in further engagement activities over time, as stakeholders have been provided with adequate information to satisfy their concerns.

8.1.2 Wider community members

To inform the SIA, a community survey was also conducted over April and May 2022, which had 44 respondents. This survey was promoted through the project e-newsletter and a letterbox drop to nearby residents. Their feedback is summarised below.

Community members thought the benefits of the project would be:

- Improved access to critical care – 98%
- Modern, purpose-built facilities tailored to the needs of the local community – 93%

- Improved amenity for staff, patients and carers – 91%.
- Access to employment opportunities – 73%
- Access to apprenticeships, traineeships and other training opportunities – 57%
- Opportunities to showcase local arts – 23%
- Connection with Country and opportunities to share aboriginal culture – 23%
- Opportunities to showcase the region (people and communities) – 14%.

Community members thought the impacts of the project might be:

- Construction traffic on Princes Highway – 98%
- Construction traffic on local/residential roads – 64%
- Parking in local streets when the hospital opens – 55%
- Location of helipad – 41%
- Removal of trees and plants – 41%
- Location of secondary access road (for by emergency vehicles use only when Princes Highway is blocked) – 32%
- Dust, noise and vibration – 32%
- Parking in local streets during construction – 41%
- Noise from emergency vehicles when the hospital opens – 20%
- Excellent location will have minimal impact – 2%.

Local knowledge that community members thought the project team should know included:

- Make sure public transport and community transport feeds into accessing the hospital across all times of the day, as not everyone has a car.
- Need an efficient building that provides timely and safe care, with no need to transfer patients from Emergency department to the wards through lobby areas due to local drug and alcohol and acute mental health issues. Public areas of hospital need to be able to be secured as often very limited security staff.
- Please consider, if not already done, planning for the likely impact on ED [emergency department] workloads of accident casualties from riders using the extensive new mountain bike trails being developed.
- Community is still affected by bushfires and this hospital needs to be as bushfire safe as possible.
- Don't rely on local accommodation for construction workers – need to provide accommodation for workforce.
- Many people in area are concerned about eating and living for health and sustainability. Alternative health should be a consideration.
- Local ageing population, with one of the highest rates of over 55s in the country.
- Large Aboriginal population and Aboriginal services should have designated space on ground floor with access to outside space.
- Mental health issues need to be better catered for.

8.2 Engagement to Inform this SSDA

The following section outlines the process and outcomes of community and stakeholder engagement undertaken to inform and guide this SSDA. Ongoing consultation has been undertaken the following stakeholders over 2021 and 2022, in order to inform the project design:

- Government Architect NSW (GANSW)
- Eurobodalla Shire Council
- Transport for NSW (TfNSW)
- Local Aboriginal community including Cobowra Local Aboriginal Land Council
- Hospital user groups and
- The local community.

Refer to the Consultation Outcomes Report for further detail on the program of consultation with stakeholders and community and the outcomes of the consultation.

Many community members expressed support for the concept for a purpose-built hospital facility in Moruya that provided a higher standard of care and access to many different specialists. Community members highlighted the ageing population in the area really needing a Health Service such as this.

A minority of community members who previously accessed health care in Batemans Bay Hospital regarded the choice of Moruya as both less convenient for them, and a potential health risk should they have to travel from Batemans Bay to Moruya in the event of an emergency.

Local community members, including Aboriginal people, local residents, and hospital staff members, highlighted the following ideas of importance/concerns regarding the project:

- Concerns about location of the helipad – potential to cause noise and disruption impacts to residents
- Importance of connecting to Country and cultural considerations in the design and operation
- Concerns about length of construction period and what will happen to decommissioned sites
- Concern about integration with the planned Moruya bypass project
- Whether some types of care were missing from the Hospital.

8.2.1 Adapting the project based on feedback

Health Infrastructure regarded integration of stakeholder and community feedback as a critical component to developing an appropriate hospital to meet the needs of Eurobodalla Shire. The list below summarises some of the major adaptations HI made to the designs over time to integrate this feedback:

- Protection of three zones of the site:
 - Highest point on the site for cultural significance
 - Spring forest (South-east corner of the site) for cultural significance, biodiversity protection and also bushfire protection measures
 - PMF for natural flooding protection and the natural water spring.
- The design has incorporated Connecting with Country initiatives including:
 - Bush tucker gardens;
 - Landscape design nominates local species such as Yaala (red gum) and Elder (Banksia) to enhance Country;
 - A habitat on the site which will support and encourage the presence of local significant Aboriginal totem Umbarra (a local Black Duck)
 - Hospital building siting to avoid the highest point of the site. It has also been positioned to frame views for connections to Yuin nations culturally significant sites i.e. Gulaga and Deua Mountains
 - A meeting place adjacent the main entry called the Walawaani to create a connection to a local cultural practice. It means 'we hope you have a safe journey home' in the local Dhurga language
 - Provision of outdoor cooking spaces to contribute to Aboriginal cultural gatherings and community learnings
 - Dhurga language, agreed with local community will be used to inform signage and wayfinding solutions across the site and new facility to enhance learning and awareness of local Aboriginal language
 - Dedicated external areas to celebrate life (Birthing on Country) through to death (Mourning on Country) will be provided for local Aboriginal families to gather in a natural setting.
- Departmental adjacencies including inter-departmental relationships between maternity, operating and critical care. The birthing areas of the hospital have been located on the lower ground floor to enable direct access to the outside gardens.
- Provision of worker accommodation on site for construction workers:
 - The construction contractor (Multiplex) has included a plan to provide accommodation on site for construction workers within their tender submission. They will seek to work with local Aboriginal people, the salvage contractors, HI, and the SNSWLHD to carry out their accommodation strategy.
 - A staged approach will accommodate for 684 workers in total.

8.3 Outcomes of broader LGA-wide consultation undertaken by Eurobodalla Shire Council

In development of Eurobodalla's *Community Strategic Plan* (2020), several community consultation activities were undertaken by Council in order to understand community sentiments about the future of their LGA. This consultation resulted in the identification of the following priorities:

- Liveability – “having a pride of place, ease of access and feeling of safety and security”,
- Sustainability – “showing an appreciation of natural surroundings”,
- Productivity – “working towards facilitating positive investment and employment opportunities and strengthening tourism development”,
- Collaboration – “demonstrating engaged, informed and involved community members”.

Eurobodalla's natural environment was identified to be one of the community's most valued assets:

“Our natural surrounds are integral to Eurobodalla's character and contribute significantly to our lifestyle and economy. Approximately 64% of residents consider the beaches, waterways and nature to be Eurobodalla's most valuable aspects, and it is the most significant attractor for people visiting the region. Sites such as shell middens, scar trees, totems and stories are evidence of the long connection the Yuin people have with this land”.

Maintaining Eurobodalla's natural environment and supporting Aboriginal connection to Country will be critical in maintaining community satisfaction during development.

8.4 Data considerations for this assessment

We note that the community and stakeholder perspectives are primarily based on engagement activities that require an active interest to participate. This may lead to over-representation of the voices of certain community or stakeholder groups (e.g., older people are more likely to have time and interest to participate in community meetings) and underrepresentation of others. Hence, engagement findings may not represent the diversity of view across the community. The ongoing disruptions to public life as a result of the COVID-19 pandemic may have also hindered participation in face-to-face engagement activities, particularly in vulnerable groups who may be wary of contracting COVID-19.

However, the Proponent, supported by Ethos Urban attempted to engage with a broad array of stakeholders and community members as part of the development process over a long period time. We believe the outcomes represent an adequate range of community views to inform the Social Impact Assessment.

9.0 Social Impact Assessment

This chapter contains the Social Impact Assessment, as aligned with the Methodology outlined in **Section 2.0** on page 7. The assessment has been based on the information available to date, and is primarily a desktop study, informed by a review and analysis of available documents relevant to the proposal.

9.1 Scoping

A scoping study was completed as part of stage 1 of the SIA. The scoping stage identified the following key social factors as material to the assessment of social impacts of the proposal:

- Way of life
- Health and wellbeing
- Accessibility
- Community
- Culture
- Surroundings
- 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. The scoping study is attached in the **Appendix A**.

The following key impacts were identified in the scoping phase for further investigation in the SIA:

- **Inconvenience and disruption to daily routines associated with dust, noise, and vibration during construction.** This may affect way of life for local residents, workers, visitors, and students at Moruya TAFE.
- **Potential disruption to care, confusion and frustration during the process of moving into the new hospital.** This will affect patients and workers at Batemans Bay and Moruya Hospitals.
- **Improved Connection to Country associated with inclusion of Aboriginal design elements,** developed through early consultation with local Aboriginal groups. This will affect the experience of and connection to culture for local Aboriginal and non-Aboriginal communities.
- **Increased access to high-quality healthcare services in Moruya and SNSWLHD.** This will impact the health and wellbeing of, and accessibility for, people living and working across Eurobodalla Shire and beyond.
- **Long-term amenity impacts to nearby residents,** associated with noise generated by ambulances and helipad. This is likely to decrease enjoyment of surroundings for residents located in close proximity.

9.2 Area of Social Influence and Key Affected Communities

This assessment covers both the Primary Social Locality (included in **Figure 8** below) and Primary Study Area, which are expected to experience social impacts associated with the temporary construction activities and some of the future operational impacts and benefits. The broader social localities of Moruya town and Eurobodalla Shire that are likely to experience the resulting benefits from the operational phase of the project. (These study areas are further described in **Chapter 7.2**).

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

- Hospital communities (staff, volunteers, suppliers etc)
- Patients of the health facilities, their carers, and visitors
- Neighbouring residents
- Neighbouring businesses and workers
- Students, staff, parents and visitors of Moruya TAFE
- Visitors to other organisations and businesses in the area
- Users of Princes Highway and Braemar Drive
- Temporary construction workers in the area.

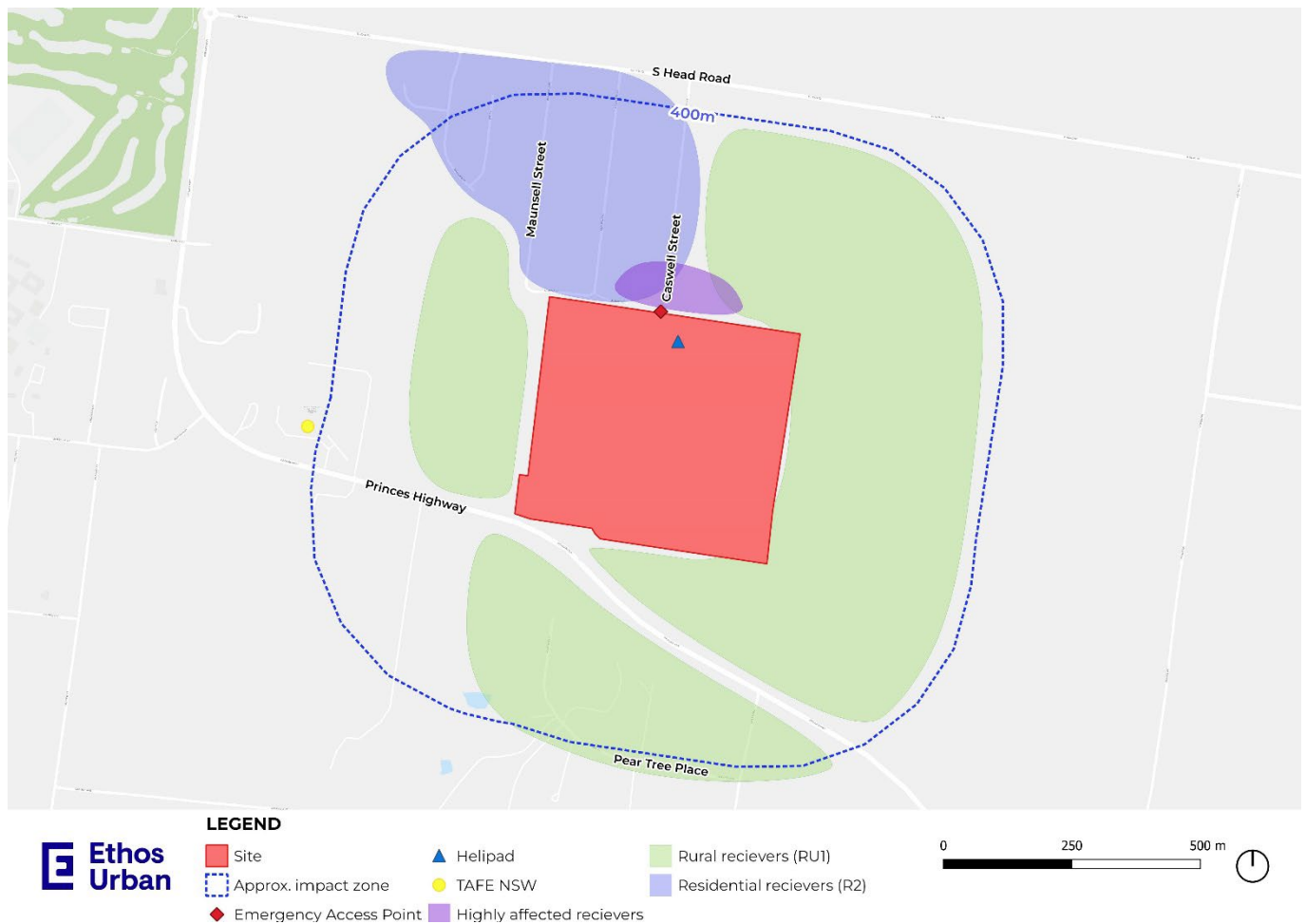


Figure 8 Primary social locality

Source: QGIS, Ethos Urban

9.3 Impact Assessment

This section presents the social impact assessment, which includes:

- Assessment of the social impacts to highly impacted adjacent residents (as identified in the social locality map – ‘highly affected receivers’ - shown above)
- Discussion of the different impacts against the social factors
- A summary of all potential, material impacts is provided in **Section 9.5** on page 50.

9.3.1 Highly impacted adjacent residents

As shown in the social locality map – highlighted in purple – a small number of residents are expected to be more highly impacted by the proposal. A small number of landholders located directly to the north and west of the project site highlighted concerns about potential impacts during engagement. These residents are more likely to experience localised impacts associated with the proposal, such as changes in environmental amenity due to construction activity, and then ongoing impacts from ambulance and helicopter noise during operation.

Among these neighbouring residents and landowners, the following key issues were raised:

- Location of the Helipad
- Location of the Emergency Access Point
- Parking (during both construction and once the hospital is operational).

Table 10 summarises the impacts likely to be experienced by these adjacent residential receivers and adjacent landowners.

Table 10 Likely social impacts - highly impacted adjacent residents

Social impact	Impact dimensions	Impact rating	Mitigation approach	Significance of residual impact
Changes to surroundings and amenity during construction, such as increased noise, dust, vibration, traffic, and worker presence. Exceedances to noise criteria are expected for residential receivers to the north during standard hours, at all stages of construction. It is also anticipated that vibration will be perceivable by humans (Noise and Vibration Assessment, Arup, 2023). It is noted that Moruya's population is older, which may mean they will be more highly impacted by changes to their environment.	Construction, temporary	Likely, Moderate = High (negative)	A comprehensive Construction Noise and Vibration Management Plan will be prepared prior to the commencement of construction works and will consider proposed plant, equipment and construction methodology. The Construction Management Plan will include a compliant handling procedure for identifying and responding to community issues related to construction impacts.	This impact is unavoidable due to the requirements of construction. However, it will be a temporary impact only. With mitigation, this impact is likely to be experienced as a Medium (negative) impact.
Reduced enjoyment of surroundings associated with operational noise – ambulance use of Emergency Access Point being located on Caswell Street, loading dock activities etc. Minor exceedances to noise criteria are expected during use of the loading dock. However, this would only occur during the daytime (Noise and Vibration Assessment, Arup, 2023). It is noted that Moruya's population is older, which may mean they will be more highly impacted by changes to their environment.	Operation, long-term	Possible, Moderate = Medium (negative)	An Operational Plan of Management will be developed and implemented. It will mandate data collection (e.g., user surveys) to enable ongoing monitoring of the performance of the proposed facilities over time.	This impact is unavoidable due to the importance of this project component to hospital operations, and to deliver broader benefits possible for Eurobodalla Shire residents who may need emergency transportation to hospital. Affected receivers may experience poorer health and wellbeing, and a lower enjoyment of their local area. Over time, it is possible that the experience of this impact will lessen as receivers become accustomed to hospital activity.
Reduced enjoyment of surroundings associated with potential noise and down draft from helicopters using the hospital's Helipad. Use of the Helipad is expected to exceed noise criteria and presents a low-moderate risk for sleep disturbance. Impact of helipad use will be short lived and will last for a total elapsed time of approximately 6 minutes per movement (EIS, Ethos Urban, 2023). Adjacent residents flagged concerns about the helipad operation and how this would impact upon them throughout community engagement. It is noted that Moruya's population is older, which may mean they will be more highly impacted by changes to their environment.	Operation, long-term	Likely, Moderate = High (negative)	Continued community consultation to understand and evaluate the extent of helicopter noise impacts once the hospital is operational.	This impact on a small number of residents is unavoidable due to the importance of this project component to hospital operations, and to deliver broader benefits possible for Eurobodalla Shire residents who may need emergency transportation to hospital. Affected receivers may experience poorer health and wellbeing, and a lower environmental amenity. Over time, it is possible that the experience of this impact will lessen as receivers become accustomed to hospital activity.

9.3.2 Assessment against Social Factors

Way of Life



How people live, get around, work, play and interact with one another each day

Potential impacts

During development:

- Local residents, workers and visitors in the Moruya locality as well the hospital communities impacted may have fears, such as threat or expectation of change, associated with the proposed development e.g., concerns that everyday life is going to change due to this development - its construction impacts, or the hospitals operation - in a negative manner.
Equally, some residents, workers, and visitors in the locality may be excited by the possibility of employment opportunity, and improved healthcare for their community, family, or themselves.

During construction:

- Inconvenience and disruption to daily routines associated with increased dust, noise, and vibration generated by construction activities. This may impact on the amenity of local residents, workers, and visitors in the immediate vicinity, and may lead to altered daily routines travel routes to avoid construction activities – for example, residents in the Mynora Estate, north of the site, may have to limit time spent in their outdoor areas. These amenity impacts may also disproportionately impact teaching and study routines at the nearby Moruya TAFE and Moruya Early Learning Centre on neighbouring sites.

The Noise and Vibration Impact Assessment prepared for the proposal (Arup, 2022) indicates that construction noise is predicted to exceed 'noise affected' levels during standard hours at all stages of construction, with high impact during Piling, Site Establishment, and Bulk Earthworks stages. This may impact on daily living routines and sleep patterns of surrounding residents. It has been determined that vibration impacts will be insignificant.

- Potential negative impacts associated with increased traffic movements and possible changes to parking arrangements in the Moruya locality, associated with construction truck movements and contractor parking. This may result in inconvenience, disruption, changes to daily living routines, and increased travel times for local residents and visitors to the area. This would impact users of neighbouring streets and users Braemar Drive and Princes Highway.

The Traffic and Transport Impact Assessment prepared for the proposal (Bitzios Consulting, 2022) indicates that the surrounding road network is sufficient to accommodate anticipated traffic movements and parking demand associated with the proposed development, pending the construction of a single lane roundabout on Princes Highway. However, existing bus routes will need to be altered to service the site.

- There is potential for cumulative impacts to way of life due to other construction projects in the Moruya locality, most notably the proposal to deliver a Moruya bypass as part of the Princes Highway Upgrade program delivered by Transport for NSW. As of 2021, environmental studies for the preferred strategic corridor option of the Moruya bypass were being undertaken, but there is not yet a confirmed timeline for delivery. Should this project move into construction while the health service was under construction, this would represent a negative cumulative impact on way of life.
- An increased presence of construction workers (337 FTE) may also result in negative impacts on the supply of rental accommodation in the locality – which may impact on residents in the SSA's ability to find appropriate and affordable rental housing. The construction workforce may possess higher incomes than the local population with whom they are competing for accommodation. Without mitigation, more disadvantaged members of the SSA may experience additional pressures in finding stable and secure housing.

During operation:

- Benefits in the form of improvements to clinical care and working environments associated with the delivery of new health infrastructure and services. This will likely result in enhanced convenience for local healthcare staff and patients, improved quality of life, and staff and patient satisfaction. The addition of a variety of specialists to an ageing population will make a notable impact on health service provision.
- Potential negative impacts associated with the consolidation of multiple health facilities and services into one location may include:
 - Potential disruption to care, and confusion and frustration for hospital staff, patients, and visitors during the process of health infrastructure relocation activities.
 - Increased travel times for staff and patients from the location of existing facilities and services outside Moruya.

- Potential negative impacts in the form of inconvenience to residents of Batemans Bay who previously had relied on the ease of accessing Batemans Bay Hospital. These residents will now have to travel the additional 20 minutes to access the Eurobodalla Regional Hospital.

However, it may also result in decreased travel times for patients, carers, staff, and suppliers residing in and around the Moruya locality.

- Positive way of life impacts associated with the delivery of retail amenity on the site, resulting in increased convenience for hospital staff, patients, carers, and visitors.
- Potential negative impact to way of life for surrounding residents due to the proposed helipad and associated flight path of helicopters to and from the hospital. While flight paths have been designed in consideration of adjacent residential areas, it is noted that acoustic impact is unavoidable. This may impact on daily living routines and sleep patterns of surrounding residents. (Aviation Report, AviPro, 2022).

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.

During construction:

- Use of standard construction management mitigation measures, e.g., implementation of environmental 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.
- Coordinate works to take place during school holidays or other times that would help reduce impact on neighbouring TAFE and early learning centre.
- Develop a staging and communication strategy to facilitate a smooth transition from old to new facilities with no disruptions to care.
- Should the Moruya bypass project move into construction while the Hospital is being built, additional measures would be required to mitigate negative, cumulative impacts. This would include coordination of disruption periods, provision of alternate routes for vehicles and public transport, a coordinated communication program to make it easier for residents to plan around works.
- Develop and implement a construction workforce accommodation plan in order to mitigate potential impacts on the supply and affordability of rental accommodation in the SSA.

During operation:

- Development of an operational plan of management to monitor the impact of the hospital operations on staff and other stakeholders.

Summary

Impact Significance Rating	Social impact ratings associated with changes to way of life are considered to be ranging from low to high (negative) during construction, and high (positive) during operation, with the exception of those highly impacted residents discussed in the previous section.
Duration	Potential negative impacts will occur during the construction phase due to disruptions. Most potential changes to way of life social could be perceived as positive.
Severity/ sensitivity	Sensitivity is considered to moderate to high due to the principal user groups being health patients, who experience varying and for some severe, medical concerns.
Extent	Eurobodalla Shire LGA
Potential to mitigate/ enhance	High – construction impacts can be managed through environmental management plans. Infrastructure enhancements and employment opportunities will positively benefit the community in the long term.

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:

- Negative impacts to the health and wellbeing of local residents, workers, and visitors in the immediate vicinity of the construction site associated with dust, noise, and vibration generated by construction activities. This will disproportionately affect those with existing respiratory conditions, as well as work and study environments at the Moruya TAFE and Moruya Early Learning Centre.

The Noise and Vibration Impact Assessment prepared for the proposal (Arup, 2022) indicates that construction noise is predicted to exceed 'noise affected' levels during standard hours at all stages of construction, with high impact during Piling, Site Establishment, and Bulk Earthworks stages. This may impact on the health and wellbeing of surrounding residents. It has been determined that vibration impacts will be insignificant.

- Potential cumulative impacts to health and wellbeing due to other construction projects in the Moruya locality (Moruya Bypass), experienced as 'construction fatigue' – extended sense of disruption. Consultation with TfNSW indicates that Moruya Bypass will likely be constructed after the hospital is operational.

During operation:

- Potential disruption to the provision of healthcare services associated with relocation activities. This may result in confusion and frustration for the hospital communities (staff, patients, carers, visitors, volunteers etc) during the process of moving into the new facility.

- Improved access to healthcare within, and improved health outcomes for the Eurobodalla Shire community associated with the delivery of the new, high-quality health infrastructure and services on the site.

Specifically, the new hospital includes the following departments:

- Emergency Department (including flexible mental health beds)
- Medical Imaging
- Operating Theatres
- Intensive Care Unit
- Pathology
- Pharmacy
- Medical and surgical in-patient units
- Rehabilitation and Palliative Care in-patient units
- Women's Health and Paediatrics
- Ambulatory Care for community outpatient services
- Administration including Education and Training
- Front of House including Retail
- Back of House including Mortuary.

The new facility will lead to improvements to clinical working and care environments, and increased efficiencies due to the co-location of services. This is a key driver and benefit of the project, noting that the local population is generally older than the Regional NSW average, living on lower household incomes, and a relatively high proportion of Aboriginal people live in the Moruya locality, generating increased demand for various health care services in the Eurobodalla LGA.

- High quality non-clinical environment within the hospital is likely to support staff and patient satisfaction and enhance the quality of life of local health care staff and patients. The facility will offer a sustainable, patient and community focused service that enhances the health care offering in the SSA and minimises impacts on the environment.
- There will be positive impacts to health and wellbeing associated with the delivery of a facility that minimises impacts on the environment, through minimising Greenhouse Gas Emissions, Sustainable Water use and recycling, climate resilient design, and the use of recycled materials when possible.
- There are likely to be positive impacts to health and wellbeing associated with public and active transport access to the site. This will result increased opportunities to access the site by active transport routes, which would support physical activity, and the physical and mental wellbeing of staff, patients, and visitors to the site. The facility will include end-of-trip facilities for active transport mode users and secure bicycle parking, and connection to public transport routes into the town centre.
- There may be potential negative wellbeing impacts associated with 24/7 hospital operation and activation of the site, including the noise generated by ambulances, hospital activities and helipad operation. Noise may impact the health and wellbeing of local residents, workers, and visitors in the Moruya locality. This may disproportionately impact teaching and study routines at the nearby Moruya TAFE and Moruya Early Learning Centre on neighbouring sites.
- A small number of residents Eurobodalla Shire may experience negative health and/or wellbeing impacts due to the decommissioning of the existing hospitals at Moruya and Batemans Bay once Eurobodalla Health Service is operational, if they lived very close to the older hospitals. Though they can expect a higher, more

modern level of care at the new hospital, a significant change in proximity to a hospital may have health impacts for a very small proportion.

- The use of Country centred design as a guiding principle and consultation with Aboriginal and Torres Strait Islander stakeholders may result in a health service that better meets the needs of Aboriginal people.
- For those residents living very close to the proposed helipad, there may be negative wellbeing impacts resulting from the helipad's operation. While flight paths have been designed in consideration of adjacent residential areas, it is noted that acoustic impact is unavoidable (Aviation Report, AviPro, 2022). For the wider community across the LGA, there will be benefits from the provision of helicopter access to the hospital, which will connect remote residents with emergency care in life threatening situations.

Responses / mitigation measures

During construction:

- Use of standard construction management mitigation measures, e.g., implementation of 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. Opportunities for feedback and to ask questions should be provided.
- Coordinate works to take place during school holidays or other times that would help reduce impact on neighbouring TAFE and early learning centre.
- 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.)

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.
- Implement procedures to manage the arrival and departure of helicopters in order to minimise impact on surrounding residents (Aviation Report, AviPro, 2022).

Summary

Overall Social Impact Significance Rating	Social impact ratings associated with the change to health and wellbeing of local community is considered to range from medium to high (negative) during construction, and very high (positive) during its operational phase by delivering significant social benefit through the provision of a modern hospital service to a rural community at significant health disadvantage.
Duration	Construction impacts are temporary and limited to 2.5 years. Operational benefits are long term.
Sensitivity	Sensitivity are considered to be moderate-high in relation to the Project – there are sensitive receivers in the broader SSA due various forms of disadvantage in the population, especially an ageing population.
Extent	Impacts are predicted to be felt by residents in the PSA during construction, though the PSA contains only limited number of residences to be impacted by construction. The broader SSA will benefit from the very high positive impact once operational.
Potential to mitigate/ enhance	High potential to mitigate any negative social impacts and enhance positive contributions, through provision of onsite infrastructure/amenities for staff and implementation of Construction Management Plans and Operational Management Plans.

Accessibility



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

Potential Impacts

During construction:

- Negative impacts associated with increased traffic and truck movements, and potential changes to parking in the Moruya locality (e.g., contractor parking). This may result in increased travel times, inconvenience, and frustration for residents, workers, and visitors to the Moruya locality, and users of Albert Street and Princes Highway.

The Traffic and Transport Impact Assessment prepared for the proposal (Bitzios Consulting, 2022) indicates that the surrounding road network is sufficient to accommodate anticipated traffic movements and parking demand associated with the proposed development, pending the construction of a single lane roundabout on Princes Highway. However, existing bus routes will need to be altered to service the site.

- Traffic impacts associated with construction of an access point to Princes Highway. This will may result in increased travel times, inconvenience, and frustration for users of Princes Highway.
- An increased presence of construction workers may also result in increased demand on rental accommodation and temporary accommodation (tourist accommodation, Airbnbs) in the locality, and impact the affordability of available rental accommodation to existing residents of Moruya.

During operation:

- Improved accessibility of high-quality health care services in Eurobodalla Shire associated with the delivery of new, high-quality health infrastructure and services. This is a key driver and benefit of the project, noting that the local population is generally older than the Regional NSW average, living on lower household incomes, and a relatively high proportion of Aboriginal people live in the Moruya locality, generating increased demand for various health care services in the Eurobodalla LGA.
- Consolidation of multiple health facilities and services into one location will likely result in increased travel times and may reduce access for staff and patients currently located elsewhere in the LGA. However, it may also result in decreased travel times for patients, carers, staff, and suppliers residing in and around the Moruya locality.
- Positive impacts associated with the delivery of new health infrastructure and services to contemporary accessibility standards. This will result in increased convenience, and staff, patient, and visitor satisfaction.
- There will be benefit from improved access to emergency care for rural residents of the SSA - The provision of a helipad will enable helicopter emergency transportation for residents across the LGA and further afield. Rural people typically have poorer access to the health care they need compared to urban dwellers. This addition has the real potential to save many lives. The Aviation report (AviPro, 2022) does not indicate any adverse impacts on accessibility in relation to the helipad.
- The site is situated at a car dependent location, adjacent a highway. Potential accessibility impacts are associated with increased traffic movements accessing the new health infrastructure and services on previously vacant land. This may result in increased travel times, inconvenience, and frustration for residents, workers, and visitors to the Moruya locality, and users of Albert Street and Princes Highway.
Some of the traffic impacts may be mitigated by improved public and active transport access to the site. The Traffic and Transport Impact Assessment prepared for the proposal (Bitzios Consulting, 2022) indicates that existing bus routes will need to be altered to service the site.
- The Hospital has the potential to draw new residents to the area, either as part of the Hospital workforce, or more generally, with a desire to live nearby to a high-quality, modern hospital. This in turn could increase housing and rental prices in and near Moruya, negatively impacting on housing affordability.

Responses / mitigation measures

During construction:

- Use of standard construction management mitigation measures, e.g., preparation and implementation of construction traffic management plan
- Timely community consultation and engagement will ensure that all stakeholders are made aware of the timing and likely impact of the construction period.
- Collaboration with local council and TfNSW to coordinate construction works and mitigate impacts – e.g., plan roadworks during seasons where impacted roads are less trafficked.
- Development and implement a Workforce Accommodation Strategy – to cover both the construction and operational periods, to minimise impacts on local housing market in Moruya resulting from influx of workers.

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.
 - Develop a wayfinding strategy to and from, and within the hospital in order to increase accessibility for staff, patients, and visitors.
 - Ensure pedestrian connections within the site and inside the health facilities 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).
-

- Plan for additional public transport routes or stops to service the hospital and provision of bicycle parking, pedestrian and cycle paths, and end of trip facilities to enable opportunities to access the site by public and active transport modes.
- Development and implement a Workforce Accommodation Strategy – to cover both the construction and operational periods, to minimise impacts on local housing market in Moruya resulting from influx of workers.

Summary

Overall Social Impact Significance Rating	Social impact ratings associated with changes related to access and use of infrastructure are considered Medium to High (negative) during construction and medium to High (positive) during operation.
Duration	Most potential negative impacts will occur during the construction phase. Most potential positive social benefits will occur during the operational phase.
Sensitivity	Sensitivity is considered to be medium, given the presence of an older population in Moruya and Eurobodalla Shire.
Extent	Impacts would extend to users of the local road network from the PSA, Moruya and beyond
Potential to mitigate/ enhance	Construction impacts can be managed through environmental management and construction traffic management

Community



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

Potential impacts

During construction:

- Temporary changes to the size and composition of the local community due to a significant number (337 direct construction FTE jobs) of construction workers in the area, in comparison to the relatively small population currently residing within Moruya. These workers are likely to need accommodation, which could add pressure to the local housing market. Presence of perceived 'strangers' in the area may lead to potential impacts on perceptions of safety, and the safety of the community.
- Changes to the appearance of the site associated with the establishment of a construction site may disrupt the local communities' sense of place. Whilst the site is vacant, some people may have memories associated with the site, the appearance of which will be significantly altered.
- There may also be potential impacts to sense of place associated with Aboriginal heritage. According to the Aboriginal Cultural Heritage Assessment (Comber Consultants, 2022), the site fulfils the criteria for social, historic, scientific, and aesthetic value. Changes to the site associated with construction may have a detrimental impact on site aspects which create Aboriginal cultural value.

During operation:

- Delivery of new health infrastructure and services on the site will lead to increased numbers of staff, visitors, and patients in the locality. This may lead to changes in the community size and composition, on account of an estimated 202 direct operational jobs.
- Positive impacts associated with the co-location of health services on the site. This will provide opportunities for healthcare and other staff on site to create new professional and personal connections, with potential positive benefits for hospital community cohesion. This may further lead to improved care for the patients of the hospital.
However, this may also lead to the loss of existing networks from the current location of health facilities.
- Potential positive impacts associated with design elements which may provide opportunities for patients, staff, and visitors to socially connect. These include team lounges, staff break-out areas, and visitor areas with modular furniture for flexibility, comfort, and inclusivity (Design Report, Conrad Gargett, 2022).

Responses / mitigation measures

During construction:

- Develop and implement a Construction Workforce Accommodation Plan to consider and address how the workforce will be accommodated.
- 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.

Summary

Overall Social Impact Significance Rating	Social impact ratings associated with the change to the size and composition of the local community is considered medium (negative during construction) and medium (negative or positive, depending on receiver). While the change would be perceived either negative or positive depending on particular receiver, the change would involve a significant social benefit with the contribution to significant employment opportunities and significant positive health impacts, if the change is well mitigated and communicated.
Duration	Changes to the local community would be permanent.
Sensitivity	There is moderate to high sensitivity to the impact, given some disadvantage present in the community – ageing population. Some members of the community will be sensitive to changes to their community, while others will welcome the opportunities that come with the project.
Extent	Moruya and to a lesser extent, Eurobodalla Shire LGA
Potential to mitigate/ enhance	Implement a social procurement strategy to try and source local goods and employment. Ensure effective communications channels are available to residents to voice concerns, and information on the progress of the development is shared.

Culture



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:

- Establishment of a construction site will change the appearance of the site and may disrupt the past and present local communities' sense of place. Whilst the site is vacant, some people may have memories associated with the site, the appearance of which will be significantly altered.
- There may also be potential impacts to sense of place associated with Aboriginal heritage. According to the Aboriginal Cultural Heritage Assessment (Comber Consultants, 2022), the site fulfils the criteria for social, historic, scientific, and aesthetic value. Changes to the site associated with construction may have a detrimental impact on site aspects which create Aboriginal cultural value.
- Three scar trees have been identified within the landscape adjacent to the site. All three trees will be protected during construction and conserved to ensure their connection to culture is not lost.

During operation:

- Delivery of a contemporary hospital building will dramatically change the appearance of the site and may disrupt the local communities' sense of place. Whilst the site is vacant, some people may have memories associated with the site, the appearance of which will be significantly altered. However, it is noted that the architecture is considerate of the landscape, and may contribute to new place narratives and connection to place.
- Similarly, increased activation of the site may contribute to those new place narratives, and there is potential for improved connection to place, through use of architectural design that uses 'the layering of local Aboriginal cultural knowledge into public, accessible gathering space allows the whole community to

experience the hospital in an environment which supports and validates all facets of the Eurobodalla community' (Design Report).

- There may be potential impacts to Aboriginal connection to Country. It is noted that the project team has undertaken ongoing Aboriginal consultation to inform the proposed development, focussed on the development of Aboriginal design narratives and design principles.
- The following elements have been incorporated into the design to enable connecting to Country, based on guidance from Aboriginal stakeholders: 'Walawaani' welcome sign at entry, Totem poles along road, local Aboriginal artists to create artworks/murals, a central meeting place south of carpark, medicinal plants providing spiritual energy onto hospital, endemic vegetation within the landscape, bush Tucker planting, a healing garden.

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:

- Ensure all spaces are inclusive, accessible, and welcoming for all community members. There should be user group involvement in the design of relevant spaces.
- Continued consultation with Aboriginal stakeholders.

Summary

Overall Social Impact Significance Rating	Social impact rating associated with the change to the local culture is considered Medium to High (negative) during construction, and minor (negative) during operation in terms of changes to Country. However, positive impacts will result in operation from a hospital design that considers Connection to Country.
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Duration	Permanent impact
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Sensitivity	The change from the existing state will be substantial, however significant Aboriginal heritage (four scar trees) will be protected. Over time, new positive cultural impacts may develop due to the health service's integration of Country-centred design.
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Extent	Moruya, Eurobodalla Shire LGA and lands of the Yuin people (spans between Ulladulla to Eden north-south)
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Potential to mitigate/ enhance	Low - ongoing communication with existing residents, the community and stakeholders to minimise disturbance during the transition period. Appropriate measures need to be implemented, in order to mitigate potential impacts on Aboriginal and Non-Aboriginal heritage potential on this site.
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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

Potential impacts

During construction:

- Amenity and visual impacts associated with changes to streetscape due to the establishment of a construction site. While the site is currently vacant, it is located on a major road.
- Negative impacts resulting in changes to sightlines and site composition, with presence of construction equipment and waste may adversely impact on perceptions of safety in the vicinity. This will impact residents and businesses within the PSA only, as the site is currently vacant land.
- Reduced amenity and enjoyment of surroundings associated with dust, noise, vibration generated by construction activities, and truck movements to and from the construction site. This will disproportionately affect neighbouring residences, as well as work and study environments at the Moruya TAFE and Moruya Early Learning Centre (e.g., reducing the ability of the students and staff to utilise outside areas for lunch breaks and play)

The Noise and Vibration Impact Assessment prepared for the proposal (Arup, 2022) indicates that construction noise is predicted to exceed 'noise affected' levels during standard hours at all stages of construction, with high impact during Piling, Site Establishment, and Bulk Earthworks stages. This may impact on the amenity of surrounding residents. It has been determined that vibration impacts will be insignificant.

- The Traffic and Transport Impact Assessment prepared for the proposal (Bitzios Consulting, 2022) indicates that the surrounding road network is sufficient to accommodate anticipated traffic movements and parking demand associated with the proposed development, pending the construction of a single lane roundabout on Princes Highway. This should alleviate amenity impacts related to traffic.

During operation:

- There are likely to be a negative impact from the intensified built environment and changes to streetscape due to delivery of new health infrastructure on vacant land. For some people, particularly in the PSA, this may be a negative impact. For people in the SSA, this may be perceived positively given the architectural design of the new Health Service and the lack of knowledge of the previous state of the site.
- There will be intensified usage of the area due to the change resulting in negative impacts – including more people (workers, patients) and increased traffic (staff, visitors, Ambulances). This will have unavoidable, moderate impacts to the amenity, based on comparison to the empty landscape as it stands now.
- There will be positive impacts associated with the quality of architectural and landscape design on the site, resulting in improved amenity in the area, and the use of Country-centred design as one of the guiding design principles.

It is noted that Eurobodalla's natural environment has been identified to be one of the community's most valued assets in the local strategic documents. Highlighting natural environment and supporting Aboriginal connection to Country in the design will be important to gain community acceptance and satisfaction with the development.

- Likely benefits will include improved perceptions of safety in the vicinity associated with increased activation of the site, once operational.

Responses / mitigation measures

- 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.)

Summary

Overall Social Impact Significance Rating	Overall Medium to High significance (negative) amenity impacts are generally associated with the physical construction of the site. They can be appropriately mitigated through environmental and construction management plans, noting that a small number of residents live in the PSA. Amenity impacts during operation are considered medium (negative) due to permanent changes to the landscape, in a location adjacent a key road in this locality. Adjacent residents will be more highly impacted (addressed in previous section). However operational phase also includes positive impacts, such as delivery of an architecturally-designed building with additional landscaping.
Duration	Construction impacts are temporary. Changes to the surroundings are permanent.
Sensitivity	Moderate due to the limited numbers of residential properties in the PSA. However, a small number of adjacent residents will be more highly impacted, and have additional sensitivities (such as older age).
Extent	Impacts are likely to be experienced predominantly by local residents and workers (at TAFE NSW)
Potential to mitigate/ enhance	High potential to mitigate negative social impacts during construction through Construction Management Plans and the design of the development. Changes to the surroundings and amenity during operation are unavoidable.



Livelihoods, including people's capacity to sustain themselves through employment or business

Potential impacts

During construction:

- It is expected the project will deliver increased employment opportunities in the construction and related sectors associated with the establishment of a construction site. The project is estimated to generate 374 jobs (FTE direct and indirect jobs) during the construction phase, as calculated by the Capital Investment Value (Genus Advisory, 2022).
- 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:

- It is expected there will be positive impacts associated with the delivery of new health infrastructure and services through creating new employment opportunities. The Capital Investment Value (Genus Advisory, 2022) stated that 225 jobs (FTE direct and indirect jobs) will be created once operational. This will likely result in increased employment opportunities within the healthcare and other sectors associated with the hospital (e.g., retail, cleaning, and maintenance).
- Positive economic impacts associated with increased activity in the vicinity due to additional workers and patients in Moruya. This will likely result in increased patronage for local businesses, supporting the economic viability of the locality.

Responses / mitigation measures

- 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 (e.g., partnership with Moruya TAFE), vulnerable backgrounds, underrepresented groups).
- Develop and implement a construction workforce accommodation plan in order to mitigate potential impacts on the supply and affordability of rental accommodation in the locality.

Summary

Overall Social Impact Significance Rating	The proposed development will have high positive benefits in respect to livelihoods, associated with the delivery of new employment opportunities during construction and operation.
Duration	Operational benefits are long term, construction impacts are temporary.
Sensitivity	Low sensitivity
Extent	Construction phase is likely to draw workers from Eurobodalla Shire LGAs and beyond, operational phase is likely to benefit workers within Eurobodalla Shire LGA.
Potential to mitigate/ enhance	High potential to enhance positive impact - benefits to the local community are likely if local and social procurement and staffing principles are applied.

9.4 Monitoring and Management

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

- Development of a Construction Management Plan that includes complaints handling procedure for identifying and responding to community issues related to construction impacts.
- Development and implementation of a Communications and Consultation Plan that detail the processes and communication strategies to ensure that key stakeholders are advised and consulted about major changes and disruptions, and the process for providing feedback and further consultation during the Project.

During operation

- Continued consultation with relevant stakeholders, as identified by Health Infrastructure, to identify emerging social issues and trends.
- 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.
- Continued community consultation to understand and evaluate the extent of helicopter noise impacts once the hospital is operational.

9.5 Summary of Social Impacts

The following section summarises the 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 SIA Guideline.

Table 11 Social Impact Assessment

Social Impact	Period	Duration	Extent	Likelihood	Magnitude	Social Significance Rating	Experience	Mitigation/enhancement measure	Residual impact rating
Way of life									
Fears/expectation of change to way of life	Development	Temporary – 2-3 years	Eurobodalla Shire LGA	Possible	Moderate	Medium	Negative	- 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.	High potential to mitigate impacts through careful, considered, and proactive engagement and communications throughout the process, therefore residual impact rating is expected to be low, and decrease over time.
Inconvenience and disruption, including noise, traffic, dust, vibration	Construction	Temporary – 3 years	PSA	Possible	Moderate	Medium	Negative	Use of standard construction management mitigation measures, e.g., implementation of environmental management plans.	Mitigation measures can quite effectively minimise likely impacts of construction activities.
Changes to supply of rental accommodation	Construction	Ongoing	Eurobodalla Shire LGA	Possible	Moderate	Medium	Negative	Develop and implement a construction workforce accommodation plan in order to mitigate potential impacts on the supply and affordability of rental accommodation in the SSA.	High potential to mitigate through development of a strategic plan to accommodate additional workers in the locality, therefore likelihood of residual impact is considered low
Improvements to clinical care, amenity and working environments	Operation	Ongoing	The site	Likely	Moderate	High	Positive	N/A	Positive impacts to endure
Potential disruption to medical care, resulting confusion and frustration as services transfer to new hospital	Construction & earl Operation	Temporary – 2-3 years	Eurobodalla Shire LGA	Possible	Moderate	Medium	Negative	Development of an operational plan of management to monitor the impact of the hospital operations on staff and other stakeholders.	High potential to mitigate through the implementation of a comprehensive operational management plan, and appropriate patient communications
Operation of helipad and associated helicopter noise	Operation	Ongoing	PSA	Likely	Moderate	High	Negative	Development of an operational plan of management to monitor the impact of the hospital operations on staff and other stakeholders.	Potential to mitigate identified, however, significant impacts will likely remain
Health and Wellbeing									
Temporary decreased health and wellbeing due to noise, dust and vibration from construction	Construction	Temporary – 2-3 years	PSA	Likely	Moderate	High	Negative	Use of standard construction management mitigation measures, e.g., implementation of environmental management plans.	Mitigation measures can quite effectively minimise likely impacts of construction activities; therefore, likelihood of notable residual impact is low
Improved access to healthcare, clinical care and working environments	Operation	Ongoing	Eurobodalla Shire LGA	Almost Certain	Moderate	High	Positive	No mitigation necessary	Positive impacts to endure
24/7 hospital operation and activation of the site in contrast to previous vacant site	Operation	Ongoing	PSA	Possible	Moderate	Medium	Negative	Development of an operational plan of management to monitor the impact of the	High potential to mitigate through the implementation of a comprehensive operational management plan, and likelihood

Social Impact	Period	Duration	Extent	Likelihood	Magnitude	Social Significance Rating	Experience	Mitigation/enhancement measure	Residual impact rating
								hospital operations on staff and other stakeholders.	that the perception of the impact will decrease over time (3+ years)
Operation of helipad and associated helicopter noise	Operation	Ongoing	PSA – residents immediately adjacent to helipad and flight path	Likely	Moderate	High	Negative	Implement procedures to manage the arrival and departure of helicopters in order to minimise impact on surrounding residents (Aviation Report, AviPro, 2022).	Potential to mitigate identified, however, significant impacts will likely remain for residents immediately adjacent to helipad
Accessibility									
Increased traffic and truck movements, changes to parking	Construction	Temporary – 2-3 years	PSA	Possible	Minor	Medium	Negative	Use of standard construction management mitigation measures, e.g., implementation of environmental management plans.	Mitigation measures can quite effectively minimise likely impacts of construction activities – there will be some residual impact, but it can likely be tolerated for the temporary period
Improved accessibility to high-quality healthcare	Operation	Ongoing	Eurobodalla Shire LGA	Likely	Moderate	High	Positive	- Develop a wayfinding strategy to and from, and within the hospital in order to increase accessibility for staff, patients, and visitors. - Ensure pedestrian connections within the site and inside the health facilities 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). - Plan for additional public transport routes or stops to service the hospital and provision of bicycle parking, pedestrian and cycle paths, and end of trip facilities to enable opportunities to access the site by public and active transport modes.	High potential to enhance positive impacts through social enhancement measures with ongoing benefit to a wide community
Impact on housing availability – rental and tourist accommodation during construction from the construction workforce. And possibility to impact upon both rental and housing affordability when hospital is operational.	Construction and operation	Temporary	Moruya	Possible	Minor	Medium	Negative	- Implement Workforce Accommodation Plan in order to mitigate potential impacts on the supply and affordability of rental accommodation in the locality – to consider both construction and operational periods. - To respond during operation, the proponent should work with local council and housing sector stakeholders to develop an appropriate housing response.	High potential to mitigate the worst impacts during construction phase with a considered workforce accommodation strategy.
Community									
Changes to size and composition of community	Construction and Operation	Ongoing	Moruya	Possible	Minor	Medium	Negative or Positive, depending on perception of receiver	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	Potential to mitigate identified, with a medium significance of remaining impact inherent to changes to community composition. It's noted that some community members would welcome this change (e.g., business owners). Perception of

Social Impact	Period	Duration	Extent	Likelihood	Magnitude	Social Significance Rating	Experience	Mitigation/enhancement measure	Residual impact rating
								to ask questions should be provided.	the impact is likely to diminish over time, as people become accustomed to the new community.
Opportunities for new social networks and connections	Operation	Ongoing	The site and Moruya	Possible	Minor	Medium	Positive	Ensure all spaces are inclusive, accessible, and welcoming for all community members. There should be user group involvement in the design of relevant spaces.	High potential to enhance positive impacts through social enhancement measures and patient centred care, with ongoing benefit to a wide community
Culture									
Changes to appearance of site and sense of place, Aboriginal and non-Aboriginal	Construction	Temporary – 3 years	PSA	Possible	Moderate	Medium	Negative	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	Moderate potential to mitigate through architectural design, however, some impacts may remain and will depend on individual receivers. Perception of impact is likely to diminish over time as a new sense of place, enhanced by Country centred design, develops.
Opportunities for new place narratives and connection to Country	Operation	Ongoing	The site	Likely	Minor	Medium	Positive	- Ensure all spaces are inclusive, accessible, and welcoming for all community members. There should be user group involvement in the design of relevant spaces. - Continued consultation with Aboriginal stakeholders.	High potential to enhance positive impacts through social enhancement measures with ongoing benefit to a wide community.
Surroundings									
Decreased amenity due to construction noise, traffic, dust, vibration	Construction	Temporary – 3 years	PSA	Possible	Moderate	Medium	Negative	- 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.)	Mitigation measures can quite effectively minimise likely impacts of construction activities. It's likely some negative impact will still be experienced, but this impact can be tolerated for a temporary period.
Changes to site appearance, intensification of built environment	Operation	Ongoing	PSA	Possible	Minor	Medium	Negative or Positive, depending on perception of receiver	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.	Moderate potential to mitigate through architectural design, however, some impacts may remain and will depend on individual receivers and their perceptions of local amenity. Perceived impact is likely to diminish over time (3-5 years) as people become accustomed to new appearance.

Social Impact	Period	Duration	Extent	Likelihood	Magnitude	Social Significance Rating	Experience	Mitigation/enhancement measure	Residual impact rating
							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.)		
Country-centric design, highlighting the natural environment	Operation	Ongoing	PSA	Possible	Minor	Medium	Positive	N/A	Positive impacts to endure
Livelihoods									
Increased employment opportunities	Construction and Operation	Ongoing	Moruya	Likely	Moderate	High	Positive	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 (e.g. partnership with Moruya TAFE), vulnerable backgrounds, underrepresented groups).	High potential to enhance positive benefits by employing social procurement, targeted at groups with high need and challenges. This impact will be most prominent during construction, and lessen during operation.
Increased patronage for local businesses	Construction and Operation	Ongoing	Moruya	Likely	Moderate	High	Positive	N/A	Positive impacts to remain – will be most prominent during construction, and lessen but still endure over operation.

10.0 Concluding Comments

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

Key Findings

Overall, the proposal will support key priorities identified in local strategic documents, such as improved, integrated and accessible community health and wellbeing for rural and Aboriginal communities.

This assessment considers the overall level of the long-term social impact of the proposed development to be very high and positive. The majority of potential negative impacts can be mitigated through implementation of a robust Construction Management Plan and ongoing consultation with the local community and relevant stakeholders.

However, it is noted a very small number of adjacent landholders to Eurobodalla Regional Hospital may experience negative, ongoing impacts to way of life, their surroundings and health and wellbeing as a result of helicopter and emergency vehicle access on the northern portion of project site.

Key negative impacts identified with the proposed development relate to:

- Inconvenience and disruption to daily routines associated with increased dust, noise, and vibration generated by construction activities.
- Negative impacts associated with increased traffic and truck movements, and potential changes to parking in the Moruya locality during construction.
- Negative impacts to the health and wellbeing of local residents, workers, and visitors in the immediate vicinity of the construction site associated with dust, noise, and vibration generated by construction activities.
- Negative impact from the intensified built environment and changes to streetscape due to delivery of new health infrastructure on vacant land for cumulative impacts to way of life due to other construction projects in the Moruya locality, most notably the proposal to deliver a Moruya bypass as part of the Princes Highway Upgrade program delivered by Transport for NSW. Though, at this stage construction of the Project is not expected to cross over directly with the bypass construction – however, the ongoing delivery of major projects in the area is expected to have a consultative impact on the amenity of the surroundings.
- Potential for negative impacts to way of life and livelihoods during construction from the temporary construction workforce of 256 FTE, which may result in negative impacts on the supply of rental accommodation in the locality – impacting on residents in the SSA's ability to find appropriate and affordable rental housing, with the potential for the workforce to drive up rental prices. The development and implementation of a construction workforce accommodation plan can go a long way to mitigating the potential for negative impact in this regard.
- Possible negative impacts to cultural identity for Aboriginal and Torres Strait Islander people from the loss of the land, which holds some cultural significance. While this impact cannot be mitigated, it is recognised that the Project can also contribute to benefits for Aboriginal and Torres Strait Islander people once operational.
- Potential negative wellbeing impacts associated with 24/7 hospital operation and activation of the site, including the noise generated by ambulances, hospital activities and helipad operation for residents adjacent to the hospital.

The most significant social benefits of the proposal relate to:

- Improved access to healthcare within, and improved health outcomes for the Eurobodalla Shire community associated with the delivery of the new, high-quality health infrastructure and services on the site. The new facility will lead to improvements to clinical working and care environments, and increased efficiencies due to the co-location of services. This is a key driver and benefit of the project, noting that the local population is generally older than the Regional NSW average, living on lower household incomes, and a relatively high proportion of Aboriginal

people live in the Moruya locality, generating increased demand for various health care services in the Eurobodalla LGA.

- Benefit from improved access to emergency care for rural residents of the SSA. The provision of a helipad will enable helicopter emergency transportation for residents across the LGA and further afield. Rural people typically have poorer access to the health care they need compared to urban dwellers, and the addition of this form of access has the potential to save rural lives.
- Livelihood benefits from temporary jobs during construction for 337 FTE construction workers, and then ongoing employment in the Health Service for up to 202 FTE.

Ongoing management of Impacts

- It is critical to continue to engage with highly impacted residents – those living adjacent to the Hospital – to track their experience during construction, and then during operation (from emergency vehicle and helicopter access).

Appendix A SIA scoping summary

The following impacts were identified during the scoping phase, and have been organised by impact category:

Category	Impact
Way of Life	Threat or expectation of change to way of life – concerns that everyday life is going to change due to this development and construction impacts, and then the hospital operation. Equally, some people may be excited by possibilities of employment opportunities or improved health care for their community, family or themselves.
	Inconvenience and disruption to daily routines associated with amenity impacts in the locality (e.g., potential impacts on neighbouring residents daily routines using their homes and outdoor areas), and detours or desire to avoid construction activities. Noise impacting teaching and study environment and routines at Moruya TAFE or Moruya Early learning centre on neighbouring sites.
	Potential disruption to care; confusion and frustration during the process of moving into the new facilities.
	Improvements to clinical working and care environments. Enhanced convenience for local health care staff and patients, potential improved quality of life, staff and patient satisfaction.
Health and Wellbeing	Impacts to wellbeing of local residents living adjacent the site during construction, with higher risk for people with existing respiratory conditions; noise impacting teaching and study environment at Moruya TAFE or Moruya Early learning centre on neighbouring sites.
	Improved accessibility of high-quality health services within Eurobodalla Shire, and the SNSWLHD more broadly. Improvements to clinical working and care environments. Co-location of services improving efficiencies and the level of care.
	Noise generated by ambulances, hospital activities and helipad operation can impact health and wellbeing of local residents living adjacent the site. Noise can also impact on teaching and study environment at Moruya TAFE or Moruya Early Learning Centre adjacent the site.
Accessibility	Potential increased travel times, inconvenience, and frustration due to increased traffic and truck movements, potential changes to parking in Moruya locality.
	Improved accessibility of high-quality health services.
	Increased travel times for staff and patients from the location of the current existing services; Decreased travel times for patients, carers, staff and suppliers living or located in Moruya or surrounds.
Community	Temporary changes to the size and composition of the community. Presence of perceived 'strangers' in the area, which may lead to potential impacts on perceptions of safety and the safety of the community.
	Changes to appearance of the site, may disrupt sense of place of the local communities. Whilst the site is vacant, some people may have memories associated with the site, the appearance of which will be significantly altered. Potential impacts to sense of place associated with Aboriginal heritage.
	Opportunities for healthcare and other staff on site to create new professional and personal connections and networks, with potential positive benefits for the hospital community cohesion. This may further lead in improved care for the patients of the hospital. (This may however lead to loss of existing networks in the current location of the facilities).
Culture	Changes to connection to place - noting existing site is vacant rural greenfield land. Whilst the site is vacant, some people may have memories associated with the site, the appearance of which will be significantly altered. Potential impacts to sense of place associated with Aboriginal heritage.
	Potential impacts to Aboriginal connection to Country. It is noted that the project team has undertaken early Aboriginal consultation to inform the project. The site has been chosen and will be developed in further consultation with Aboriginal stakeholders.
Surroundings	Amenity impacts, visual impacts – noting current site is vacant greenfield land, however at a visible location adjacent a key road.

Category	Impact
	Reduced amenity and enjoyment of surroundings (e.g., neighbouring residents being able to enjoy time in their yards, students and staff of Moruya TAFE being able to utilise outside areas for lunch break.
Livelihoods	Increased employment opportunities in the construction and related sectors. Increased employment opportunities within health care sector and other non-clinical services associated with or located within the hospital (e.g. retail, cleaning and maintenance).

Appendix B Community Profile

Category	PSA	SSA	Eurobodalla Shire	Rest of NSW
Income				
Median individual income (annual)	\$31,720	\$31,180	\$32,210	\$37,560
Variation from Rest of NSW median	-15.5%	-17.0%	-14.2%	n.a.
Median household income (annual)	\$55,960	\$59,720	\$60,890	\$75,280
Variation from Rest of NSW median	-25.7%	-20.7%	-19.1%	n.a.
Individual income				
No income	9.1%	6.8%	6.5%	7.5%
Low	44.0%	47.1%	45.7%	38.5%
Medium	41.1%	41.2%	41.7%	44.1%
High	5.7%	4.9%	6.0%	9.9%
Household income				
No income	4.0%	1.6%	1.8%	1.6%
Low	26.7%	24.0%	21.7%	18.0%
Medium	48.5%	48.5%	51.3%	43.9%
High	20.8%	25.9%	25.3%	36.5%
Age Structure				
0 years	1.4%	0.3%	0.8%	1.0%
1-2 years	1.4%	1.3%	1.6%	2.2%
3-4 years	1.4%	1.7%	1.7%	2.2%
5-6 years	4.2%	1.9%	1.8%	2.4%
7-11 years	3.8%	4.6%	4.8%	6.2%
12-17 years	5.2%	6.2%	6.3%	7.4%
18-24 years	8.7%	5.5%	4.9%	7.5%
25-34 years	9.1%	8.3%	7.8%	11.5%
35-49 years	13.9%	15.2%	14.2%	17.5%
50-59 years	12.9%	15.6%	13.9%	12.9%
60-69 years	20.2%	19.2%	19.5%	13.4%
70-84 years	16.7%	16.7%	19.1%	12.9%
85 years and over	1.0%	3.5%	3.7%	2.7%
Males	53.7%	50.9%	49.0%	49.2%

Category	PSA	SSA	Eurobodalla Shire	Rest of NSW
Females	46.3%	49.1%	51.0%	50.8%
Median Age (years)	46.9	51.0	53.9	42.4
Country of Birth				
Australia	94.9%	90.3%	85.0%	88.5%
Aboriginal and Torres Strait Islanders	12.2%	7.3%	6.5%	7.0%
Other Major English Speaking Countries	3.0%	6.1%	8.7%	5.4%
Other Overseas Born	2.1%	3.6%	6.3%	6.1%
% speak English only at home	98.4%	97.8%	95.5%	93.5%
Previous Address				
Same address as 1 year ago	0.0%	0.0%	0.0%	0.0%
Different address 1 year ago	0.0%	0.0%	0.0%	0.0%
Same address as 5 year ago	0.0%	0.0%	0.0%	0.0%
Different address 5 year ago	0.0%	0.0%	0.0%	0.0%
Household Composition				
Couple family with no children	36.3%	35.1%	37.4%	29.7%
Couple family with children	<u>18.6%</u>	<u>19.7%</u>	<u>18.3%</u>	<u>26.6%</u>
Couple family - Total	54.9%	54.8%	55.7%	56.3%
One parent family	13.7%	11.1%	10.1%	11.7%
Other families	2.9%	0.9%	0.8%	0.8%
Family Households - Total	71.6%	66.8%	66.5%	68.8%
Lone person household	25.5%	30.9%	30.9%	28.0%
Group Household	2.9%	2.3%	2.5%	3.2%
Dwelling Structure (Occupied Private Dwellings)				
Separate house	100.0%	90.0%	83.8%	82.9%
Semi-detached, row or terrace house, townhouse etc.	0.0%	7.0%	8.3%	9.9%
Flat, unit or apartment	0.0%	0.9%	5.9%	6.2%
Other dwelling	0.0%	2.0%	1.9%	1.0%
Occupancy rate	96.3%	90.4%	72.7%	88.8%
Average household size	2.4	2.3	2.2	2.4
Tenure Type (Occupied Private Dwellings)				
Owned outright	48.2%	49.5%	50.5%	38.9%
Owned with a mortgage	30.0%	27.7%	24.4%	32.0%
Rented	<u>19.1%</u>	<u>21.2%</u>	<u>22.7%</u>	<u>26.9%</u>

Category	PSA	SSA	Eurobodalla Shire	Rest of NSW
State or territory housing authority	2.7%	4.1%	2.1%	2.9%
Housing co-operative/community/church group	4.5%	1.3%	1.0%	1.0%
Other	11.8%	15.8%	19.6%	22.9%
Other tenure type	2.7%	1.6%	2.5%	2.2%
<u>Attending Education (% of those attending)</u>				
Pre-school	20.0%	9.6%	8.5%	9.4%
<u>Infants/Primary Total</u>	<u>48.0%</u>	<u>39.0%</u>	<u>37.3%</u>	<u>35.8%</u>
Government	34.0%	27.0%	26.5%	24.8%
Catholic	6.0%	10.7%	7.7%	7.4%
Other	8.0%	1.3%	3.0%	3.5%
<u>Secondary Total</u>	<u>10.0%</u>	<u>29.8%</u>	<u>30.7%</u>	<u>27.6%</u>
Government	10.0%	21.1%	19.3%	17.2%
Catholic	0.0%	6.1%	7.0%	6.4%
Other	0.0%	2.6%	4.5%	4.0%
Technical or Further Educational Institution	12.0%	11.8%	12.2%	11.2%
University or other Tertiary Institution	10.0%	8.2%	8.9%	13.8%
Other type of educational institution	0.0%	1.5%	2.5%	2.2%
% of total population attending education	17.7%	15.9%	16.2%	21.9%
<u>Highest Level of Education Completed (% of population aged 15 years and over)</u>				
Year 12 or equivalent	35.6%	43.3%	46.5%	48.4%
Year 9-11 or equivalent	54.6%	49.7%	48.5%	46.5%
Year 8 or below	9.8%	6.5%	4.7%	4.7%
Did not go to school	0.0%	0.6%	0.3%	0.4%
<u>Need for Assistance</u>				
With Need for Assistance	8.3%	9.8%	8.4%	7.3%
No Need for Assistance	91.7%	90.2%	91.6%	92.7%
<u>Top 10 Countries of Birth</u>	<u>PSA</u>	<u>SSA</u>	<u>Eurobodalla</u>	<u>Rest of NSW</u>
1	Australia (94.9%)	Australia (90.3%)	Australia (85.0%)	Australia (88.5%)
2	England (3.0%)	England (4.4%)	England (5.2%)	England (3.0%)
3	Canada (0.0%)	New Zealand (0.9%)	New Zealand (1.5%)	New Zealand (1.2%)
4	Ireland (0.0%)	India (0.6%)	Germany (0.8%)	India (0.8%)
5	New Zealand (0.0%)	Vietnam (0.5%)	Scotland (0.6%)	Philippines (0.5%)

Category	PSA	SSA	Eurobodalla Shire	Rest of NSW
6	South Africa (0.0%)	Scotland (0.4%)	Netherlands (0.5%)	Germany (0.3%)
7	United States of America (0.0%)	Germany (0.3%)	India (0.4%)	South Africa (0.3%)
8	Scotland (0.0%)	Netherlands (0.3%)	United States of America (0.4%)	Scotland (0.3%)
9	Wales (0.0%)	Ireland (0.2%)	South Africa (0.4%)	China (0.3%)
10	Afghanistan (0.0%)	United States of America (0.2%)	Philippines (0.4%)	United States of America (0.3%)
Top 10 Languages Spoken at home (other than English)	PSA	SSA	Eurobodalla	Rest of NSW
1	Malayalam (1.6%)	Vietnamese (0.5%)	German (0.3%)	Mandarin (0.4%)
2	Afrikaans (0.0%)	Spanish (0.4%)	Italian (0.3%)	Italian (0.4%)
3	Arabic (0.0%)	Malayalam (0.3%)	Croatian (0.3%)	Punjabi (0.3%)
4	Australian Indigenous (0.0%)	German (0.2%)	Spanish (0.2%)	Macedonian (0.3%)
5	Cantonese (0.0%)	Italian (0.2%)	Australian Indigenous (0.2%)	Spanish (0.3%)
6	Mandarin (0.0%)	Gujrati (0.1%)	Greek (0.2%)	Arabic (0.3%)
7	Chinese - other (0.0%)	French (0.1%)	French (0.2%)	Nepali (0.2%)
8	Croatian (0.0%)	Hindi (0.1%)	Malayalam (0.2%)	German (0.2%)
9	French (0.0%)	Afrikaans (0.0%)	Mandarin (0.2%)	Malayalam (0.2%)
10	German (0.0%)	Arabic (0.0%)	Vietnamese (0.2%)	Tagalog (0.2%)
Religion				
Buddhism	0%	0%	1%	1%
Christianity	53%	54%	51%	56%
Hinduism	0%	0%	0%	1%
Islam	0%	0%	0%	1%
Judaism	0%	0%	0%	0%
Other Religions	0%	0%	0%	1%
No religious association	47%	45%	47%	41%
Provided Unpaid Childcare				
Females	28%	25%	24%	31%
Males	17%	20%	18%	24%

Source: ABS Census of Population and Housing 2021

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