

25 November 2013

The Director General
Department of Planning and Infrastructure
GPO Box 39
SYDNEY NSW 2001

Attn: Megan Fu

Dear Ms Fu

SSD 13_5816 - Stage 3A Redevelopment of Lismore Base Hospital Response to Submissions

Health Infrastructure (HI) has reviewed the submissions received during the exhibition of the above application. In response to these submissions, HI has made some minor changes to the design of the proposal and has set out below our comments on the issues raised. The following revised drawings are also submitted in response to the submissions

Drawing #r	Title	Rev	Author
A4303	Elevation and RCP – Canopy	H	Woods Bagot
A1002	Site Plan	F	Woods Bagot
LAN-D-101	Entry Courtyard – Landscape Plan	G	360 Degrees
3A-C09	Signage and Linemarking Plan	B	Taylor Thomson Whiting
3A-C50	Service Yard Turning Path	B	Taylor Thomson Whiting
A2208	GA Level 08	K	Woods Bagot
A3002	Elevation North	K	Woods Bagot
A3003	Elevation – East and West	K	Woods Bagot

Submissions received

From	Issue	Response
Heritage Council of NSW	No objection to the proposal but recommends a condition regarding discovery of intact archaeological relics.	HI raises no objection to imposition of this standard condition recommended by the Heritage Council of NSW.
Office of Environment and Heritage	Aboriginal Heritage Consultation – process inconsistency	OEH submit that there is an inconsistency between the proposed consultation process and the requirements of the <i>OEH Aboriginal Consultation Requirements for Proponents 2010</i> . The attached letter from City Plan Heritage dated 20 November 2013 addresses this issue and outlines the process undertaken to date.

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Lismore City Council	Aesthetics	The comments raised by Lismore City Council are noted. However our architect has provided the following comment: <i>"The stage 3A redevelopment has created a holistic design response that is tailored to the users experience rather than based on a façade expression alone. The unification of design intent through key design elements will be the backbone for the new branding of the whole hospital experience. The stage 3A redevelopment is the first stage in a well-designed sequential redevelopment of the greater campus. The potential for future vertical expansion has been considered above this current proposed 3A building. That said, simplicity and unity are the design drivers behind the design response. The current campus has numerous building styles and material pallets, which will not be altered in the short term. The proposed stage 3A building is not a standalone iconic building, but rather the first stage in a progressive redevelopment that will continue for decades to come. Materiality is significant in the redevelopment time frame. The solid masonry base with modulated coloured light weight panels above provides a robust response to a very public facility."</i> With regard to the proposed canopy structure and Council's concerns about bulk and form, Woods Bagot note that: <i>"The focus is on the user and how the design is experienced both externally and internally. The canopy and fold down wall, with fluid apertures is iconic in nature. Functionally this canopy provides pedestrian weather protection, opening over planters to allow natural ventilation and day light. There are four skylights over the entry maintaining daylight penetration whilst providing the much needed cover in this area."</i> <i>The apertures are a key design element that repeats in the interior design and the way finding signage strategy. This unifying design element is the genesis of an iconic experience for the stage 3A redevelopment. The human scale of these cues is felt to be a more appropriate, innovative, contemporary design response."</i>
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		<i>The fold down wall provides a screen to the emergency waiting rooms and renal treatment rooms below.</i>" In consideration of Council's feedback, the extent of wall has been reduced and the penetrations enlarged, opening up the space and creating a visual connection between the road and the courtyard area." These amendments are shown on drawing A3003 Rev H - Elevation and RCP – Canopy prepared by Woods Bagot (attached).
	Main Entry – Extent of Public Open Space	In consideration of Council's comment regarding the extent of public open space in close proximity to the main entry, this area has been amended to incorporate more open space and additional seating. The amendments to this area are shown on the attached drawing LAN-D-101 Rev. G - Entry Courtyard Landscape Plan prepared by 360 Degrees (attached).
	Public drop off entry - Linemarking	Council has requested that the Uralba Street centre line marking shown on plan SKC071 be extended further to the west. HI has no objection to this proposal and has amended drawing 3A-C09 Rev. B Signage and Linemarking Plan accordingly.
	Parking availability – contribution to Council for Licence Plate Recognition technology.	Council has requested that consideration be given to providing funds to Council for the acquisition of Licence Plate Recognition technology to assist with parking enforcement in the Lismore area. The Lismore Base Hospital redevelopment project is being undertaken as a jointly funded health service infrastructure investment initiative under the Health and Hospitals Fund Program, with contributions from both the Australian Government and the NSW State Government. The purpose of the funding is to deliver improved health facilities in accordance with an agreed scope and it is not considered appropriate that health funding is reallocated away from health services to assist LCC with parking enforcement initiatives."
	Boundary Adjustments	Council has requested that the indicative proposed new boundary line be slightly adjusted. HI accepts this position and the new boundary alignment is reflected on the attached drawing A1002 Rev. F Site Plan.
	Multi-deck car park	Council notes that the success of the proposal for multi-deck car parking will be dependent upon its location and ability to reduce on-street parking. Lismore City Councils' support for the provision of a multi-deck car park is noted. A business case is currently being prepared by HI to confirm the

		preferred option for the provision of new car parking infrastructure. The outcomes of this process will be advised when complete.
	Construction car park	Council raises concerns regarding the potential exacerbation of on-street parking issues around the hospital during construction. HI is investigating opportunities as a part of its construction management plan for a temporary car park to be constructed for staff and construction workers. A site has been identified for the proposed temporary car park and negotiations with the property owner have commenced. Parking for construction workers will be located off the hospital site. As part of the site induction process, construction workers will be instructed not to park in Hunter and Uralba Streets.
Resident, 6 & 6A Fermoy Avenue	Concerns regarding 24 hour deliveries using Little Uralba Street and lighting and noise impacts from the existing Mental Health Facility.	The resident suggests his properties are negatively impacted by lighting, noise and 24 hour deliveries connected with the existing Mental Health Facility, which is not related to this application. Notwithstanding the above, the existing street lights in Little Uralba Street will be maintained and there will be no increase in service vehicles usage of Little Uralba Street as a result of this proposal. Further, there will be a slight reduction in waste trucks servicing the hospital via Little Uralba Street
	Requests that consideration be given to rezone the residential properties to allow for extension of the hospital.	The issue of rezoning of land adjacent to the hospital site is a strategic planning matter not directly related to this application.
Transport for NSW	Provision of disabled parking spaces and disabled access.	Transport for NSW notes that disabled parking spaces and access does not appear to have been provided. The proposed new works maintain the existing accessible car spaces and an additional accessible drop off space has been proposed in the new Public Drop Off Entry. The proposed new multi-storey car park to be built in the future (subject to a separate planning application) will provide additional accessible spaces to service the Hospital's needs."
	Details of service vehicle movements.	Transport for NSW notes that service vehicle movements do not appear to have been provided. This is not the case. Service vehicle movements are shown on TTW drawing 3A-C50 which was previously submitted. A copy of this drawing is attached for reference.

		No change is proposed to the current unloading operations and loading as part of these new works. The area assigned for truck movements at the rear of the stage 3A building is not to function as a day to day loading dock. Truck movements will be infrequent since the area is for maintenance vehicles. There will be a slight reduction in vehicle movements with the waste trucks no longer utilizing this area to collect waste materials.
	Regulatory signage	Transport for NSW states that the endorsement of Council's Traffic Advisory Committee should be sought prior to the installation of the required regulatory signage. HI confirms it will seek endorsement from the Council prior to installation of the signage.

Proposed Amendments

In addition to the design modifications set out in the responses above, the proposed roof has been amended to eliminate box gutters, significantly reducing the maintenance for the hospital. The main roof now falls to the north to ensure no box gutters behind parapets are required. Due to this change the parapet on the northern façade has been pulled down, as has the eastern façade. These changes are shown in red on the amended architectural plans attached:

Conclusion

The responses set out above address the issues raised in the submissions lodged during exhibition of the application. In summary, the design amendments responding to these issues are:

- The fold-down wall from the canopy has been amended in length to reduce its extent and scale.
- The penetrations in the fold-down wall have been enlarged to open up the space and create a visual connection between the road and the courtyard area.
- Amendments have been made to the entry plaza landscaping to enhance open space and provide additional seating for the public.
- The Uralba Street boundary has been adjusted to include the planter boxes within the Lismore Base Hospital site.
- The Uralba Street centre-line marking has been extended further to the west.

Additional minor changes to the proposed building design have also been made to the roof with the deletion of box gutters and associated reduction in the parapet on the northern and eastern facades.

HI trusts that the above information assists in finalising your assessment of this application in the near future.

Yours sincerely



Sam Sangster
Chief Executive

ATTACHMENT 1
Amended architectural & landscape plans



LEGEND

	EXISTING
	NEW BOUNDARY
	EXISTING BOUNDARY
	EXTENT OF WORKS BOUNDARY

F	ISSUE FOR TENDER FOR DF&C
E	ISSUE FOR TENDER FOR DF&C
D	ISSUE FOR 50% CD COORDINATION
C	ISSUE FOR 30% CD COORDINATION
B	ISSUE FOR 100% DD
A	ISSUED FOR 100% DD

25/10/13	AJ
14/10/13	HA
01/10/13	AS
17/09/13	AS
15/08/13	AJ
31/07/13	TO
Date	App ⁿ



Health Infrastructure

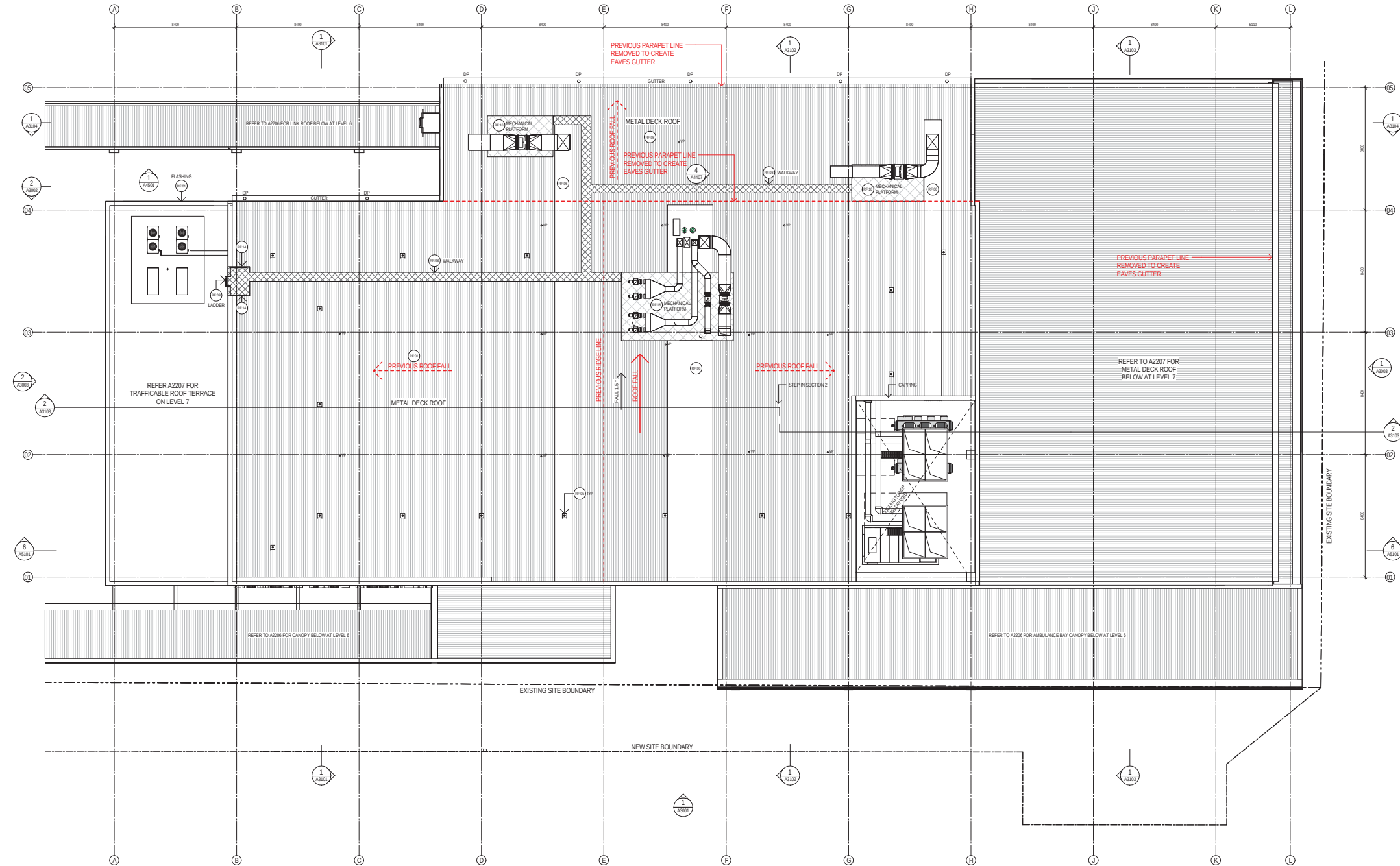
BASE HOSPITAL
DEVELOPMENT

Drawing title
SITE PLAN

Checked **AJ** Approved **HA** Scale **1:200**
 @ B1 sheet size
 50mm on original

**WOODS
BAGOT** AUSTRALIA
ASIA
MIDDLE EAST
EUROPE
NORTH AMERICA

Project number	Drawing number	Revision
120179	A1002	F
Status		
TENDER - DF&C		

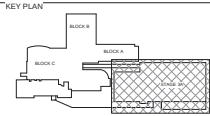


NOTE: REFER TO ALL SERVICES DRAWINGS FOR FULL EXTENT OF ROOF PENETRATIONS.

WOODS BAGOT

Notes:
CONTRACTOR MUST VERIFY ALL DIMENSIONS ON SITE BEFORE COMMENCING WORK OR PREPARING WORKSHOP DRAWINGS. DO NOT SCALE DRAWING.

Date: 20/11/13 3:28:19 PM
C:\Users\A\Documents\Projects\GA\GA-LEVEL 08\GA-LEVEL 08.dwg



LEGEND	NEW PARTITION WALL	WINDOW
2 HOUR FIRE WALL	NEW CONCRETE WALL	FALL ARREST STATIC LINE SYSTEM INDICATIVE ONLY
SMOKE WALL	NEW BRICK WALL	LADDER CONNECTION BRACKET INDICATIVE ONLY
SPRINKLERED WALL	NEW BLOCKWORK WALL	ROOF ACCESS LADDER INDICATIVE ONLY
ALTERNATIVE SOLUTION - REFER PER	EXISTING WALL	FALL ARREST ANCHOR POINTS INDICATIVE ONLY
JOINERY	EXISTING BDG	FALL ARREST ANCHOR POINT - CONCRETE MOUNTED INDICATIVE ONLY
DOOR NUMBER	ASSEMBLY CODE REFER TO SCHEDULES	

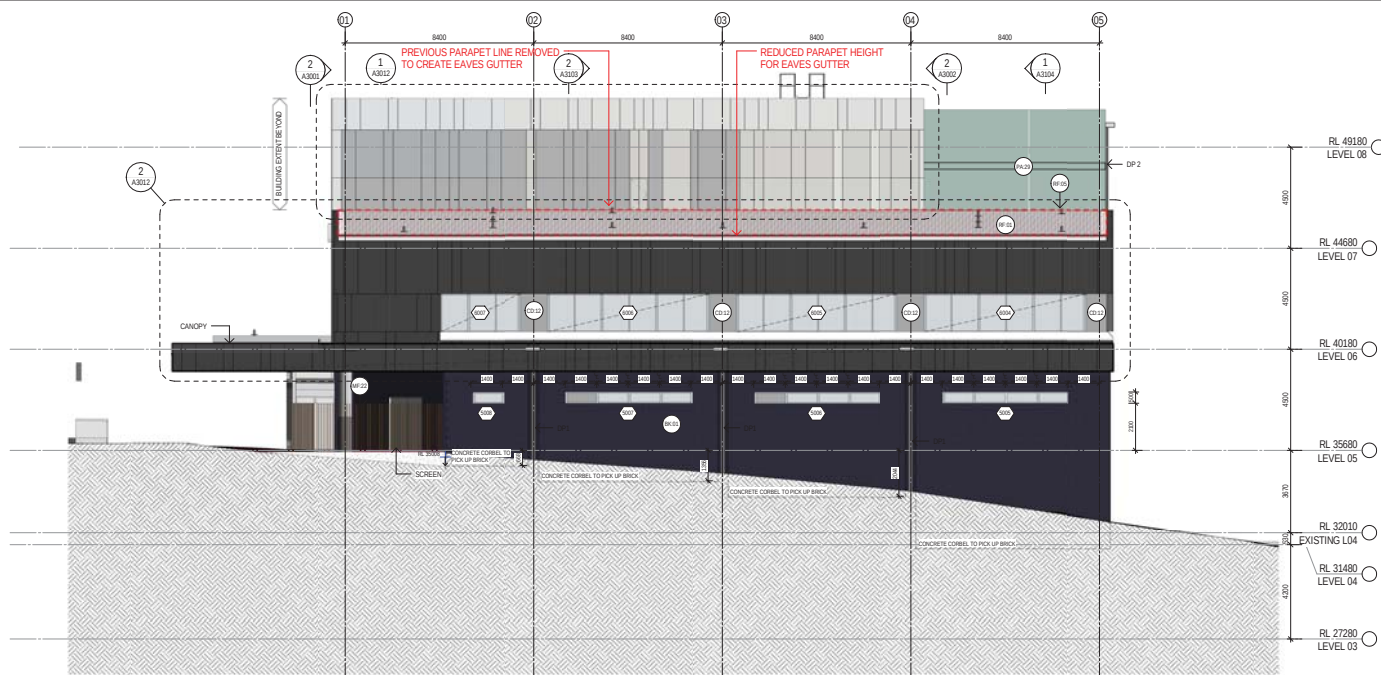
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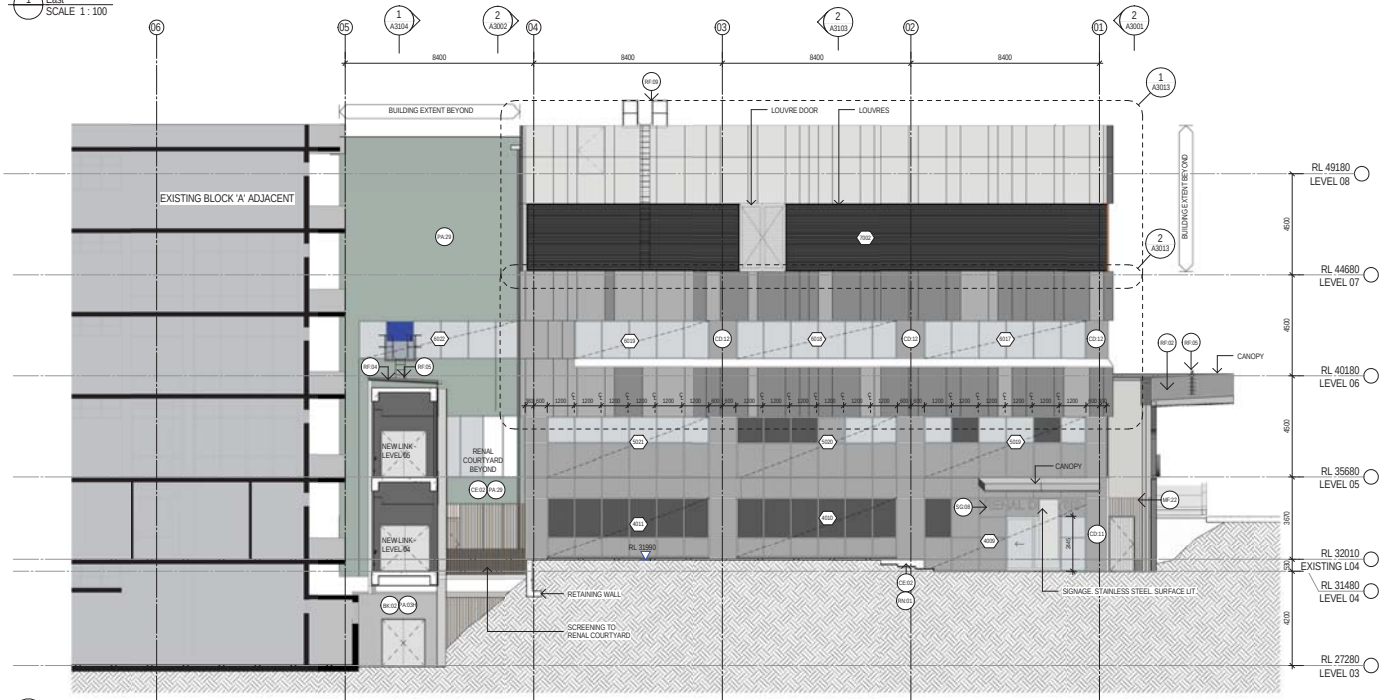
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Checked: AJ HA
Approved: AJ HA
Scale: 1:100
Sheet size: B1
50mm on original

WOODS BAGOT
AUSTRALIA
ASIA
EUROPE
NORTH AMERICA
Project number: 120179
Drawing number: A2208
Revision: K
CONSTRUCTION DOCUMENTATION

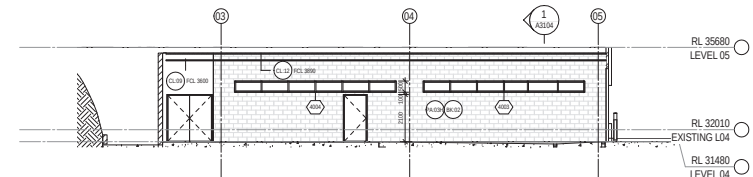




1 East
SCALE 1:100

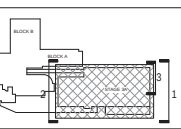


2 West
SCALE 1:100



3 East Level 4 Mortuary Driveway
SCALE 1:100

WOODS BAGOT
Notes:
CONTRACTOR MUST
VERIFY ALL DIMENSIONS
ON SITE BEFORE
COMMENCING WORK OR
PREPARING WORKSHOP
DRAWINGS. DO NOT
SCALE DRAWING.
Date:
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LEGEND
COLOUR BACK GLASS
FILM TO GLASS RE-08
REFER TO RELEVANT SCHEDULE
REFER TO WINDOW MATRIX

AREA OF FACADE REDUCED
FOR EAVES GUTTER

WOODS BAGOT
120179
A3003
K

WOODS BAGOT
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WOODS BAGOT
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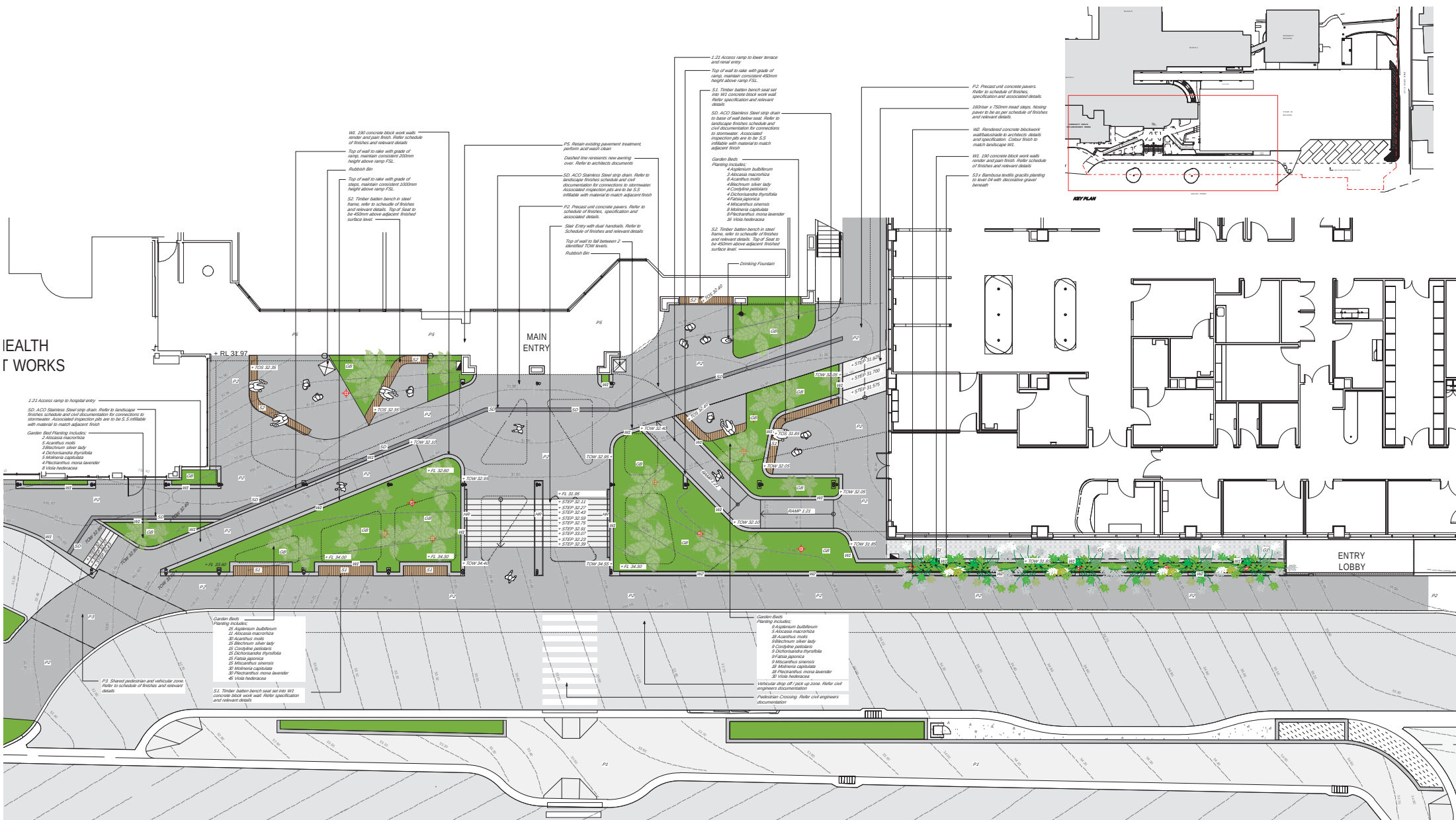
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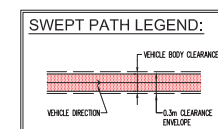
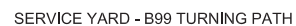
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ATTACHMENT 2

Signage, Line-marking and Service Yard Turning Path Plans



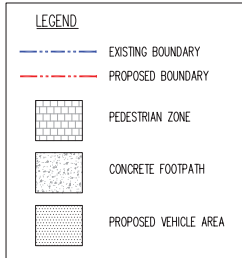
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Sheet Subject	STAGE 3A SERVICE YARD TURNING PATH
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Scale: B1	Drawn	Authorised
1:200	WW	SB
Job No	Drawing No	Revision
121204	3A-C50	B
Plot File Created: Nov 15, 2013 - 4:42pm		



	Clay
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Sheet Subject
**STAGE 3A
SIGNAGE & LINEMARKING PLAN**

Scale: B1	Drawn	Authorized
1:250	WW	SB
Job No	Drawing No	Revision
121204	3A-C09	B

ATTACHMENT 3
Heritage Advice

21 November 2013

Director General
Major project Assessment
GPO Box 39
SYDNEY NSW 2001

Attention: Ms Megan Fu

Dear Megan,

**RE: RESPONSE TO OEH COMMENTS ON ABORIGINAL CULTURAL HERITAGE
ASSESSMENT - LISMORE BASE HOSPITAL REDEVELOPMENT (SSD 13_5816)**

This letter has been prepared in response to the comments received from the Office of Environment & Heritage (OEH) dated 21 October 2013. OEH noted that the Aboriginal cultural heritage assessment included in the Environmental Impact Statement (EIS) on the proposed redevelopment of Lismore Base Hospital is inconsistent with the Director General's Requirement 18 and that this inconsistency be addressed. The subject comment reads as:-

In relation to Aboriginal cultural heritage, OEH notes that the site has been assessed and that measures are included to protect heritage values where they may occur. However, the Director General's Requirement 18 issued by the Department of Planning and Infrastructure states that the assessment of Aboriginal cultural heritage must be conducted in accordance with the OEH Aboriginal Consultation Requirements for Proponents 2010. The documentation provided for review includes a consultation process that is inconsistent with those requirements and OEH recommends that this inconsistency be addressed.

OEH was contacted to clarify the aspects of their comment and a general advice was obtained in establishing a response to the comments of the OEH.

The Aboriginal cultural heritage assessment was part of the overall Heritage Assessment & Impact Statement for the Lismore Base Hospital site prepared by City Plan Heritage and included built heritage, historic archaeology and Aboriginal cultural heritage assessments as well as the likely impact of the proposed redevelopment on any identified heritage and cultural values of the site.

The assessment of the Aboriginal cultural heritage has been made in accordance with the Director General's Requirement 18 and followed the guidelines of the Due Diligence Code of Practice for the Protection of Aboriginal Objects in New South Wales (2010) in order to identify whether or not Aboriginal objects are, or are likely to be, present in an area; and to determine whether or not their activities are likely to harm Aboriginal objects (if present).

The assessment included a detailed analysis of the land in terms of its regional indigenous context incorporating a research of AHIMS Database and other readily available Aboriginal studies within the region, landscape context, topography, existing or historic waterways in the area, flora and fauna, and geology. The assessment concluded that there were no previous Aboriginal sites or places recorded within the site or the wider area. The site does not have any special or significant historical landscape qualities that would warrant further research into the area. In particular, the examination of the environmental contexts indicated that the effects of clearing and development throughout the Lismore Base Hospital site is likely to mean that Aboriginal objects if found will not be *in situ* nor will they be associated with significant archaeological deposits.

Although section 5 of the Due Diligence Code of Practice states that consultation with the Aboriginal community is not a formal requirement, Health Infrastructure has consulted with the local Aboriginal community regarding the Stage 3a works and will continue to do so through the regular Aboriginal Advisory Focus Group meetings. To date, the following consultation has been held and is continuing in the form of presentations and briefings at the Aboriginal Advisory Focus Group meetings:

Aboriginal Community presentation 09/04/2013
Aboriginal Community presentation 31/07/2013

Aboriginal Advisory Focus Group – Meets Monthly. Meetings to date:

- 18/06/2013
- 31/07/2013
- September Meeting Cancelled – No attendees
- October Meeting Cancelled – No Attendees
- 20/11/2013

No issues have been raised at the Aboriginal Community presentations that were held at the time of preparation of the Heritage Assessment report (July 2013). Subsequently, the findings of the Aboriginal due diligence assessment and the NSW Health Infrastructure's consultation have been cross referenced with the flow chart for the Generic Due Diligence Process. It was confirmed that no AHIP application is necessary and therefore recommendations were made to proceed with caution and measures were provided in the event of any Aboriginal objects are found.

Based on the process followed it is believed that the Aboriginal cultural heritage assessment submitted as part of the EIS for the Lismore Base Hospital redevelopment is consistent with the Director General's Requirement 18.

I trust the above response is satisfactory in relation to the comments of the OEH. Should you require further information or clarification please do not hesitate to contact the undersigned on 8270-3508 or kerimed@cityplan.com.au.

Yours sincerely,



Kerime Danis
 Director