

NSW Planning & Environment
Teresa Gizzi, Planner
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25 September 2018

Dear Sir,

Submission Regarding Bowral and District Hospital Redevelopment SSD 17 8980,

On behalf of Public Health First (PHF), a community based group seeking an adequate Bowral & District Hospital (B&DH) I am submitting this document for your consideration. It is in regard to the Environmental Impact Study (EIS) currently on exhibition.

We strongly believe the EIS is deficient, misleading and contains many omissions and factual errors.

We seek to have these corrected in order that the local community fully understand the proposed upgrade

And we seek that the issue of parking during the 18-24 month construction phase be addressed urgently because it will seriously disadvantage the surrounding community and anyone coming to the hospital by car.

1. Public Health First.

PHF was established in response to surprise announcements surrounding the \$50M budgeted for a partial upgrade of B&DH. Specifically the proposed public private partnership (PPP).

When the PPP was dropped, PHF lobbied strongly for additional funds to fully upgrade B&DH. More recently \$15M was added to the original \$50M budgeted. This is still well short of what is required to bring B&DH to a level where the predicted local health hospital requirements (that meets the projected forecasts made by South Western Sydney Local Health District (SWDLHD) for the hospital through to 2022, 2026 and 2031.) can be met.

2. The redevelopment project. (Partial upgrade)

Quoted from the SSD webpage:

“ Redevelopment of Bowral and District Hospital comprising:

- Construction of a four storey (including plant level) building to provide clinical services including medical, mental health, maternity, paediatric and perioperative wards, and new emergency department

- Car parking, reconfiguration of public and ambulance entry and integration of pedestrian links to existing building and services
- Associated landscaping, signage, infrastructure and service works.”

Also as stated in the EIS “The Strategic & Healthcare Services Plan identifies the redevelopment of B&DH as the 4th highest priority for the LHD with the rationale being because of the imminent need to address the poor quality of aging building fabric there and the need to provide additional medical and surgical beds in the hospital and expand ambulatory care and ED capacity.

3. The EIS

The EIS contains many errors and has many omissions. It doesn’t reference appropriate sections of the current Clinical Services Plan, shows no reference to the additional \$15M added to the \$50M budgeted, uses old traffic data and contains conflicting street parking mapping. It makes no reference to a phase 2 of the hospital upgrade referred to several times by the Health Minister, Health Infrastructures (HI).

The document is complex, lacks consistency, contains frequent duplication and selectively references from conflicting and dated sources.

From our review, the EIS is a poorly presented document which fails to meet Director General Requirements for such documents.

4. Critical Issues

We have identified many deficiencies in the document itself plus a number of key issues that the EIS fails to address. A selective, but certainly not complete, summary of some of the deficiencies in the proposal is as follows:

- Car parking arrangement during construction phase:

Bowral, as well as Moss Vale has a problem with insufficient town parking. In relation to this EIS, parking is a major problem for those working at, attending and visiting patients at the hospital. There is competition between visitors, staff attending the private and public hospital, with the overflow parking requirements being met by the use of busy public street parking.

This is documented in council’s (several year old) parking study contained in the EIS.

During the 18-24 month construction phase there will be very significant disruption for current users of existing parking and a huge impact of a wide range of vehicles of construction workers and concrete delivery trucks etc. It is proposed in the EIS that existing street parking be used to handle this increase, which in the congested street surrounding the hospital would be laughable if it weren’t so serious.

We understand the options discussed with council to increase available parking in streets adjacent to the hospital are not being taken up by Health Infrastructure.

The parking requirements to upgrade the hospital should not be borne by the local residents.

- Dated, invalid or incorrectly sourced reference data

SWSLHD & HI forecast in April, 2017 the extension of the hospital to meet future needs as cited in the CSP.

As advised phase 1 was to be implemented with the budgeted \$50M. With the recent increase of budget to \$65M, which incorporates the ED, this leaves a latter stage as not yet defined to be funded to fulfil the promise to the community.

This stage was to address the increase in population and community needs. Based upon the lack of response to our queries, absence of hard data in various NSW Government documentation it appears on the surface that the NSW Gov. has no plans or at this time no intention of continuing the redevelopment of Bowral & District Hospital.

PHF does not accept that changing method of care is an acceptable justification or excuse why the hospital is not being developed. Care and delivery of care have not have advanced so dramatically in several years that the hospital role has been redefined to such an extent that 94 beds is adequate to meet the previously estimate of 136 beds.

If this were true, bed numbers in other hospitals would be falling by a similar rate.

- Lack of community consultation

The EIS set of documents is not only complex but physically large, and written in language employing in-house terminology and jargon. It is not a document that is designed to be read and understood by the public.

PHF was reassured by the Health Minister and Project Manager that there would be proper and effective consultation subsequent to the SSD being approved. The community “consultation” currently undertaken has been very selective and ineffective in terms of the community. We have found the general public have almost no knowledge that the EIS is available for review and even if they did, it is such a cumbersome document in terms of language, duplication and inconsistencies it is a close to impossible for a general member of to delve into the detail. And the devil is in that detail.

- Community concerns have not been addressed.

There are two hard copies of the EIS held at Council in 2 very thick black folders that cannot be removed from the service counter area. It's physically impractical to unbundle the documents for cross references.

Inadequate effort has gone into preparing these documents for public review. Very poor.

Community concerns haven't been identified or recognised, never mind been addressed.

5. We respectfully request that the NSW Government:

- Immediately fund parking upgrades or/and rights for work vehicles associated with the hospital upgrade be arranged with the local council.
- If this is not done, there will be a huge backlash from local residents and hospital staff and visitors as construction work increased.
- Commitment to the next hospital upgrade stage. It's close to election time and the public hospital upgrade is a local issue, and one that will only become more vocal over time.
- Arrange effective, not token community consultation.

Should you wish further detail, PHF would be pleased to meet and discuss any aspects with you when convenient.

Regards,
Edna Carmichael
Public Health First

(Spokesperson)