



*Our ref: 19033*

3 April 2019

Secretary NSW  
Department of Planning & Environment  
DPO Box 39  
Sydney NSW 2000

Dear Sir/Madam,

**RE: Submission to the redevelopment of Greenwich Hospital as a continuing use as a hospital and new Seniors Living Development.**

Ingham Planning has been retained by Mrs Hilma Else of No. 55 Gore Street, Greenwich to review the above proposal for the Greenwich Hospital Redevelopment Concept Plan which proposes a 'campus style' redevelopment of the existing hospital site. The proposal is to redevelop the site with a new hospital building and several residential buildings which are proposed under the State Environmental Planning Policy (Housing for Seniors or People with a Disability) 2004 (SEPP Seniors Living). The proposed residential buildings which will be located at various locations on the site include 89 dwellings. 80 dwellings are proposed within two (2) apartment style buildings and nine (9) dwellings are proposed as villa style. The numbers of apartments are approximate numbers and could increase in any subsequent application. The details of the projected number of permanent residents is undisclosed in the proposal.

The subject site adjoins our client's property which has a common boundary with the south western corner of the hospital site. Our client's home which backs onto the hospital site is in the vicinity of the area where the 89 dwellings are proposed. Her home is one of the most highly affected homes by virtue of its proximity to the multi storey apartment blocks. The zoning of the subject site is Infrastructure SP2 Health Services Facility. Our client strongly objects to the proposal.

While our client respects the rights of Hammond Care (owner of the site) to develop their property for continuing use as a Health Services Facility for hospital use, she raises strong objections to the proposal, primarily due to the introduction of Seniors Living apartments onto the site, some

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of which are located close to her property. The introduction of 80 seniors living dwellings onto this site on the western side of the site plus nine (9) residential villas proposed on the eastern side of the site would result in a significant and irreversible visual and environmental change to the site.

The immediately adjoining residential sites are developed within a R2 low density residential zoning and contain only single detached residential dwellings. We note that following public consultation and community concern that the implementation of the Medium Density Housing Code has been deferred in the Lane Cove Local Government Area until 1 July 2019. We understand that while Council supports and encourages housing diversity, the provisions of the Code and Guide have not taken into account the Lane Cove Local Government Area local planning context with regards to multi-dwelling housing. Thus, the proposed residential apartments, at the height, bulk and scale proposed, would be well out of line with local densities and context

Further, the proposal would change the way in which the site will be used on a day to day basis and would also restrict any further development of this site for true hospital or other associated health care uses use in the future, in accordance with the zoning of the site. The proposed residential use of the land accounts for approximately 50% of the budget allocation and more than 50% of the proposed gross floor area and site cover. The proposal is for 150 beds within the hospital building. Based upon two (2) residents in each apartment or villa, the residential population is 196 residents. This also represents more than 50% of the site being used for residential uses. It is the proposed use of the land for this high percentage of non-health related uses that our client strongly objects to for the reasons as outlined in this letter. There is no nexus between the proposed residential use and the hospital use on the site. The proposed residential accommodation appears to be independent of the hospital use on this site.

From the outset, we would also wish to advise the Department that initial public consultation between the applicant's consultants and the immediate community indicated low scale residential use was proposed on the site with a maximum of two (2) to three (3) storey residential development being proposed. The proposal is far in excess of what was conveyed to the community which does not instill confidence within the surrounding community nor meet the underlying objectives of public consultation. Our client is also concerned with some procedure unfairness during the course of the public participation process (current exhibition period for public

comment) involving a meeting between the Lane Cove Council and representatives of HammonCare which took place on 1 April 2019. Residents were excluded from this meeting. We have attached a copy of our client's letter to the Mayor and Councilors, which was emailed to Council, for your information.

Overall, the proposal would fail to provide a good planning outcome for our client, the immediate community and the wider community on key aspects including but not restricted to –

- the failure to retain the land for health services which the site has been zoned for;
- loss of amenity to the surrounding residential community due to a combination of factors including reductions in aural and visual privacy to dwellings and outdoor spaces;
- visual intrusion into current outlooks from homes within this neighbourhood due to the height of the residential apartments which are proposed;
- removal of 50 % of trees on the site (131 trees are indicated for removal based upon the preliminary concept);
- consequential loss of a buffer zone which has existed between the hospital and adjacent residential properties since the hospital was first developed in the 1960's;
- irreversible loss of habitat which this area is renowned for;
- destruction of the heritage significance of the heritage item by development of the curtilage of the building by the construction of nine (9) villas style dwellings and associated landscaping and access, where no need has been demonstrated;
- increased traffic onto and off the site and the need to construct internal roadways which would not be required if the site was retained for its primary use under the zoning of health services facility use, and
- change to the existing character of this precinct and to the adjoining properties and to many of the surrounding properties.

Ingham Planning has inspected the subject site. We have undertaken a review of the principle documents which are available online, with reference to the following:

- Architectural plans prepared by Bickerstone Masters Architects;
- Statement of Environmental Effects (SEE) prepared by Barker Ryan Stuart (BRS);

- Arborist report prepared by Redgum;
- Landscaping plan (key concepts only) prepared by Complete Urban;
- Biodiversity report prepared by Keystone Ecological;
- Heritage Impact Report prepared by NBRs;
- Archaeological Assessment and Impact Statement prepared by GML, and
- Bushfire Hazard Assessment Building Code & Bushfire Hazard Solutions.

Following our review of the documentation we are of the view that **the proposal is unsatisfactory in its current form** and should not be supported by the Department for the following reasons:

- The use of the site for a significant number of residential dwellings (approximately 80 apartments within two (2) x six storey apartment blocks) and an additional nine (9) residential villas for Seniors Living is not compatible with the objectives of the zone, which is zoned for SP2 Infrastructure -Health Services Facility use. Despite the SEPP Seniors Living being permissible on hospital sites, the stated intent of the SEPP is "to make efficient use of existing infrastructure and services" however the sterilisation of this land for any future expansion of health services is not considered to be an efficient use of the land for the medium to long term. In short, there is an inability for any future expansion of hospital uses if this proposal is supported in its current form.
- The proposed use of residential accommodation on the subject site accounts for approximately 50% of the overall costs of the proposal and is disproportionate to what is envisaged by the aims and provisions of the Seniors Living SEPP in relation to accommodation on sites also used for hospital purposes. More than 50% of the gross floor area and site cover is proposed to be used for residential use. New internal roadways are also required to service the needs of the proposed residential uses which would not be required if the site was used for its intended purpose under the zoning.
- Given the significant change in the operation/land use of the site which is proposed by this application, we are of the opinion that the proposal should not be considered under the provisions of a SEPP Senior Living proposal. It would be more appropriate to consider a proposal of this nature under a planning proposal process to ensure that Ministerial direction, metropolitan and regional planning policies are considered.

- No justification has been presented within the proposal by the proponent as to why such a large area of the site should be allocated to residential use other than it fits the HammondCare model of care. While there is an understanding that there is a need for palliative care and other short-term accommodation requirements within hospital grounds, the need for residential accommodation to the extent which is proposed, including two (2), six (6) to seven (7) storey residential apartment blocks and nine (9) additional villas on this site has not been justified. On balance, when considering all criteria and factors, the proponent has not demonstrated to The Department nor the community that the residential accommodation would result in a good planning outcome.
- The proposal would result in an adverse outcome to the heritage item on the site.
- Excessive bulk and scale of the overall proposal and inability to intensify the existing buffer between the site and the surrounding residential dwellings due to Bushfire Planning requirements.
- Loss of views and outlook. We note that no consideration has been given to the outlook from the nearest dwellings into the subject site within the documentation.
- Loss of a significant number of local trees (131 trees proposed to be removed = 50%+ loss of all trees currently on the site). The trees to be removed include some significant individual trees.
- Consequential loss of habitat and impact upon local fauna which is considered to be a special quality of this area.
- It has not been demonstrated within the documentation that the proposal would safeguard the character of this neighbourhood. The local context of the site and the proposal, sitting within a low density neighbourhood, has not been adequately examined within the documentation to the extent that The Department could be satisfied that the proposal will be a good neighbourhood fit. There has been a failure to understand the defining characteristics of the immediate neighbourhood and how the proposed residential accommodation will positively contribute to, retain and reinforce this character. A review of the submitted documentation indicates that our client's site together with other properties along Gore Street have not been considered



within the assessment of key factors such as bulk, scale and massing of the proposed built forms. Details are provided within this documentation.

***Permissibility of the proposed use of residential accommodation (Seniors Living) on the site and inability to meet the objectives of the SP2 Infrastructure – Health Services Facility zoning.***

We have reviewed the application to the Department for the SEARs and the Environmental Impact Statement (EIS). Under the provisions of the SEPP Seniors Living, residential accommodation for Seniors Living is not permissible on any sites with a SP2 Infrastructure zoning with the one exception of sites zoned as 'hospital' (Health Services Facility). The subject site is zoned as SP2 Infrastructure Health Services Facility. While the provisions of the SEPP Seniors Living permit the proposed use of residential accommodation, it is our strongly held opinion that the intention of the SP2 Infrastructure zone – Health Services Facility would be diluted to such an extent that the principal use of the site is no longer a hospital. The documentation indicates that the cost of the works is evenly split 50-50 across the \$141 million proposed development (\$72 million and \$69 million) across the two (2) proposed uses of hospital and residential accommodation. Further, the proposed floor space calculations indicate that more than 50% of the proposed GFA would be allocated to the residential accommodation component of the overall redevelopment of the site. In addition, the site cover of the proposed residential component of this development including internal roadways which are required to service the apartments is in excess of 50% of the site.

The objectives of the Infrastructure SP2 zone state:

***1 Objectives of zone***

- To provide for infrastructure and related uses.*
- To prevent development that is not compatible with or that may detract from the provision of infrastructure.*

On page 3 of the EIS we are advised that:

*"Hammond Care's objectives for the redevelopment of Greenwich Hospital into a campus style development include:*

- Delivering a campus of co-located sub-acute and seniors care / residential services with an integrated convergent model of care;*

- *Creating physical environments that are both prosthetic and therapeutic;*
- *Providing services on the site that can overlap, share spaces and resources; and*
- *Enabling the thoughtful and sensitive transition of residents, patients and clients to different services of need. "*

A 'hospital campus' is defined as being:

*'a discrete grouping of co located hospital facilities within a broader health service' whereas the proposal is to co-locate sub-acute and seniors care/residential services with hospital and residential uses.*

The extent of residential accommodation, at 50% of the allocated budget and more than 50% of the proposed GFA and site cover, does not meet the above definition of being co located hospital facilities as the residential component is separately defined.

The proponent's integrated convergent model of care also gives insight into the future use of the site which is outside the definition of 'hospital use' or a 'Health Care Facility', which is the current zoning. The main objectives of the overarching land use zoning, not dismissing that residential accommodation can be provided on this site under the Seniors Living SEPP, should be paramount in the consideration of this proposal. We have undertaken some investigation into what an integrated convergent model of care means for this site. Our understanding of integrated convergent models of care is that 'Converged care' or 'converged support' aims to solve an emerging social issue by bringing the social, housing and health needs of an individual together. The services provided become very similar or the same. Indeed, comment is made within the EIS to the proposal being "flexible in design" so they can be adaptive to a consolidated hospital campus. The EIS also draws a parallel between the proposed development and the campus living at another Hammond Care site at Miranda. A review of the Miranda development indicates a retirement village and not a 'campus style' hospital development. **This suggests that the lines between the two (2) proposed uses of a hospital and residential accommodation under this proposal are blurred. If approved in its current form, what would prevent the main hospital use, being converted, over time, into accommodation in the future and would this meet the objectives of the zone? By the proponent's own admission there is a need for flexibility in design so that buildings can be adapted within a consolidated hospital campus.**

***Inability of the proposal to meet the aims of the Seniors Living SEPP***

As discussed above, one issue which is of utmost importance to our client and to the surrounding community is the large proportion of residential accommodation which is proposed when compared with the hospital component (which is approximately 50-50 on budget and more than 50% on GFA and site cover). The large number of dwellings for seniors living self-care accommodation (approximately 89) necessitate the construction of several buildings around the site, some of these being buildings up to seven (7) storeys in height would be imposing on the site and are within proximity to our client's family home. The lower scale villas are proposed within the curtilage of a heritage item of State significance. These nine (9) villas are located within proximity to dwellings located in St Vincents Road. The overall number of dwellings, the location of the buildings on the site and their bulk, scale and form is not in line with the community expectations. There is no justification provided for the large number of independent dwellings proposed for the site. The residential use of a significant part of the site requires the development of a Heritage Site (of State significance) and consequential loss of natural habitat which also forms a buffer between the nearest residences and the main part of the hospital, as it has done for years.

The stated aims of the Seniors Living SEPP are to:

- '(1) This Policy aims to encourage the provision of housing (including residential care facilities) that will:
- (a) increase the supply and diversity of residences that meet the needs of seniors or people with a disability, and*
  - (b) make efficient use of existing infrastructure and services, and*
  - (c) be of good design.*
- (2) These aims will be achieved by:
- (a) setting aside local planning controls that would prevent the development of housing for seniors or people with a disability that meets the development criteria and standards specified in this Policy, and*
  - (b) setting out design principles that should be followed to achieve built form that responds to the characteristics of its site and form, and*
  - (c) ensuring that applicants provide support services for seniors or people with a disability'*



We consider that the proposal in its current form is inconsistent with the aims of the policy because of the extent of the residential accommodation which is proposed, which will be making use of the existing infrastructure and services but in doing so will sterilise the site for any future expansion of Health Services Facilities. In the long term therefore, it is not an efficient use of services and conflicts with the objectives of the overarching zoning of the land. The proposed loss of natural habitat around the site which has been a feature of the site, and the use of the land which is part of the heritage item has not been adequately demonstrated other than a desire to provide a campus style hospital development which incorporates residential accommodation. The proposal will not respond to the characteristics of the site if the proposal is supported in its current layout and form.

### ***SEARs Requirements***

Following our review of the documents which form part of the application, we are of the view that insufficient information is provided in the application to allow the Department to make an informed view of the impacts of this proposal.

### **Built Form and Urban Design (SEAR 3)**

- Provide a building envelope study to justify the proposed built form
- Establish appropriate design guidelines and development parameters within the context of the locality, including but not limited to site layout, gross floor area, building footprints, height, massing of building envelopes, open space, landscaping and tree planting; and
- Provide a visual impact assessment that identifies any potential impacts on the surrounding built environment

We were unable to find a thorough site analysis, as required by the SEARs. The existing site plan did not show the adjoining properties. The Site Plan and Site Analysis Plan show adjacent houses from a survey but with no street name. Our client's site was notated with others as "adjacent houses from survey (generally below site level)". While views from the site were indicated, no views from our client's site into the hospital were indicated. In fact, due to our client's site being at a much lower level, the proposed six (6) to seven (7) storey buildings at a higher level will be more imposing than if at the same level. Residential properties in St Vincents Road and their entrance points have not been shown. The height and finer details of the nearest residences have not been shown. Details such as levels of the land, vegetation on the

adjoining sites, windows and balconies, use of the land and views to the site are minimum requirements. Sections do not show the height and location of the nearest residences. This detail will give a more precise comparison between the massing, height, bulk and scale of what is proposed, in relation to the nearest dwellings, than what is currently provided in the documentation. The impact upon our client's site and other residential properties has been given scant reference within the suite of documentation.

The massing diagrams and building envelopes give little idea to neighbours or the community of the proposed massing of the development from the closest residential neighbours. In fact, the massing model 'elevated view from the south of the site' is a 'birds eye view' rather than indicating the massing of the proposal from the southern neighbours' perspective. The neighbours to the south are the most affected surrounding properties as they are located very close to the southern boundary of the site and our client's home has views towards the hospital and the adjacent carparking areas where the six (6) to seven (7) storey buildings are proposed. Without massing modelling and verified perspectives being provided showing how the proposed development will appear from the south, looking towards the hospital, neither the residents nor the officers of the Department can gain an idea of the visual impact of the residential component of the proposal. Given that perspectives have been provided from the River Road entry point, it would be reasonable that such details were provided to the most sensitive land users surrounding the site.

In compliance with the SEARs, we were unable to find any documentation which justified the proposed building envelopes (height, scale, massing) as required by Point 1 of the SEAR 3. The proximity of our client's site and other single detached dwellings to the subject site cannot be ignored at this initial phase of assessment. Further discussion on the retention of the neighbourhood character is provided below.

Point 2 of SEAR 3 requires that the proponent "establish appropriate design guidelines and development parameters within the context of the locality". The context of the site within the locality has not been determined. There is no documentation within the plan set which indicates that a site analysis was done adequately enough to identify the particular sensitivities of this site and of the surrounding sites. There is no drawing which describes the context of the site and what conclusions were drawn from this analysis. The proposed building envelopes (point 1) must be justified. We would imagine that this is can only be achieved if the context

of the site and its surroundings is correctly established. The EIS makes the following comments to the site context:

### **'3.2 Surrounding Development**

*The locality surrounding Greenwich Hospital is predominately characterised by residential developments, the main variation to this is Greenwich Public School to the north of the site and Gore Hill Creek and Reserve to the south west, which includes a playground and Bob Campbell Oval zoned for public recreation purposes. Refer to Figure 2 for an aerial photograph of the locality.'*

It is our opinion that the site and surrounding development is characterised not by 'residential developments' but by single detached dwellings set in landscaped settings. Urban bushland is a strong feature of this area. The context of the site and reference to any immediately adjoining properties, including our client's site, has not been adequately considered within the description of the surrounding development.

The architect's design statement in relation to context is as follows:

#### *"Context*

*Around the site there are significant variations in the topography, vegetation, streetscape, architectural and heritage context.*

*The design principles are set out in a table to illustrate different parameters and priorities for the different precincts in the redevelopment."*

Within the design principles, the following comments are made in respect to the General / Locality - proposed Seniors Living Precinct:

*"The Seniors Living Apartment Precinct is on the western side of the site in the area currently occupied by the main hospital buildings and carpark. It is bounded by River Road on the north and the main site access road on the west."*

No reference is made to our client's site or any of the Gore Street properties which directly adjoin the subject site within the above commentary which describes the locality. The closest built form to our client's site is the southernmost apartment building and the elevated internal roadway **(the top of the elevated roadway being higher than our clients roof as shown on Cross Section 'C')**. Our client's ground floor living room and one bedroom are significantly overlooked by this

part of the hospital site and the inclusion of a 2 metre high roadway would be an intolerable intrusion into her privacy and amenity.

The following comments within the design statement to the architectural context of the site - Seniors Apartment Precinct, make no reference to the immediately adjoining properties in Gore Street, including our client's site:

*"Architectural Context*

*The Seniors Living Apartment Precinct is to the rear (west) of Pallister and the site is at a much lower level. The apartments and Pallister House would be seen together when viewed from the neighbourhood to the south west of the site. Houses immediately adjacent to the west of the site are separated by the current hospital entry road which is to remain in a similar location. Houses in River Road to the west of the site area not highly visible and are screened by dense trees and solid fences. "*

The following comments within the design statement to the scale, massing and form of the site - Seniors Apartment Precinct, make reference to the need to reduce bulk and scale to the long range view of the site but with no reference to the immediately adjoining properties in Gore Street, including our client's site, although these sites share a common boundary:

*"The southern apartment building, particularly when viewed from the south, is to be treated in a way that reduces its apparent scale and visibility when viewed from Lane Cove River."*

The commentary within the design statement notes that smaller scaled buildings are more appropriate in the context of the surrounding residential development although this relates only to the St Vincents Road properties (separated from the site by the road and front setbacks) and not to the Gore Street properties.

*"Throughout the site, building masses are to be broken down into forms that reflect their architectural context and relate strongly to their topography. Smaller and varied forms that relate more strongly to the scale and pattern of surrounding residential development are to be used around the periphery of the site and where the buildings meet the ground."*

The above commentary is repeated within the EIS with reference to Figure 32, which *"includes a section of the proposed development to show how*

*the development decreases in scale towards the outside of the site to reduce potential for impacts on adjoining properties".* Figure 32 shows the residential properties which are situated on the opposite side of St Vincents Road and not the Gore Street residences which adjoin the site. If residential dwellings on the opposite side of St Vincents Road are recognised as constraints to the height of the villas, the same must be afforded to the immediately adjoining residential properties in Gore Street. In short, the scale, massing, bulk and height of the apartment buildings in relation to our client's home and her neighbours' homes is excessive and this relationship has not been adequately explored within the documentation. In fact, with regard to height and massing, the documentation is silent of any comments regarding our client's site:

*"Height and Massing*

*The proposed development is of an appropriate height and massing to achieve maximum service potential, whilst protecting and enhancing the amenity of the area. The proposal has been designed to step back from River Road to reduce the scale of the development from the streetscape. Internal access roads provide generous landscape setbacks to the west of the site and terraced open space areas and vegetation create a visual buffer. "*

The heights of the buildings within the documentation are given in reduced levels (RLs) and not in overall heights. The overall RL of the hospital building is RL80 while the RL of the residential apartments is RL65 (a difference of 15 metres in relation to the datum point). It is clearly acknowledged within the documentation that the residential apartments and Pallister are at a lower level on the site than the hospital building. Our client's site and other neighbouring homes are at a lower level again however little concern has been shown in the design to reduce the visual impact of the six storey apartments to the detached dwellings which lie directly to the south of the site with common boundaries. No RLs are shown on the profile of any of the single detached residential dwellings.

Several photo montages and computer rendered images have been prepared by Bickerton Masters Architecture and are included in Figures 34 – 38 however none of these images relate to views from the south towards the site.

Further to the above, the EIS states that *"The visual impacts of properties directly adjoining the site or across roads, will not be significantly*



*impacted as they do not have significant views of the site at present."* We refute this statement as our client's ground floor living room looks directly out at the existing hospital (at a slight angle to the West) and the dining and study areas on the 1st floor are overlooked by it as well as by Pallister House. Therefore, the southernmost Apartment block on the SW side of the site will have a highly significant and deleterious effect on the amenity enjoyed within her home. In addition, the noise, lights and constant activity, both associated with this apartment block and the new, 2 metre high road, will further diminish the present calm and peaceful amenity of her home.

#### **Amenity (SEAR 4)**

*Assess amenity impacts on the surrounding locality, including view impacts, overshadowing and acoustic impacts*

We note that there are inconsistencies within the overshadowing diagrams. There is no reference to our client's site (No. 55 Gore) within the Table 43 of the EIS.

#### **Staging (SEAR 5)**

There is confusion within the staging plan as to what is to be undertaken in Stage 3 of the project in terms of '1 & 2 storey accommodation'.

#### **Neighbourhood amenity and streetscape**

In accordance with the Design Principles (Division 2) of the Seniors Living SEPP any future development of Seniors Living accommodation must comply with the following provisions of the SEPP:

- (a) recognise the desirable elements of the location's current character (or, in the case of precincts undergoing a transition, where described in local planning controls, the desired future character) so that new buildings contribute to the quality and identity of the area, and*
- (b) retain, complement and sensitively harmonise with any heritage conservation areas in the vicinity and any relevant heritage items that are identified in a local environmental plan, and*
- (c) maintain reasonable neighbourhood amenity and appropriate residential character by:*
  - (i) providing building setbacks to reduce bulk and overshadowing, and*
  - (ii) using building form and siting that relates to the site's land form, and*

- (iii) adopting building heights at the street frontage that are compatible in scale with adjacent development, and*
- (iv) considering, where buildings are located on the boundary, the impact of the boundary walls on neighbours, and*
- (d) be designed so that the front building of the development is set back in sympathy with, but not necessarily the same as, the existing building line, and*
- (e) embody planting that is in sympathy with, but not necessarily the same as, other planting in the streetscape, and*
- (f) retain, wherever reasonable, major existing trees, and*
- (g) be designed so that no building is constructed in a riparian zone.*

We do not agree that justification has been provided within the application to date to satisfy the above. Of note, the desirable elements of the neighbourhood have not been expressed adequately within the documentation. The approach into this neighbourhood reveals a dominance of single detached dwellings within landscaped settings and a dominance of urban bushland. The natural landscaped areas on the eastern side of the hospital grounds provide a significant buffer between the built development located on the hospital site and low density development of the eastern side of St Vincents Street. This setting continues into the hospital site and provides spatial separation around the Heritage Item, which also includes the curtilage of the building.

The need to erect nine (9) villas within the Heritage Lot and consequential loss of bushland have not been justified. There is also an ongoing need to reduce fire loads in this area due to the construction of accommodation. It is proposed within this application that 50 percent of the trees on the site would require removal. If approved in its current form and layout, fine detailing of footprints, services and drainage may necessitate the removal of further vegetation. The documentation states that the bushland in the south western corner of the site will largely be retained. The proposed works within the riparian zone are not clearly identified. A clear plan which overlays the riparian zone onto the proposed works plan should be provided.

Many of the requirements relate to front building lines and building heights at the front boundary which are comparable to adjacent development. In this case, clear and concise information should be provided in relation to the adjoining residential development along the southern boundary and in relation to our client's home, which is located at the closest point to the proposed six (6) storey apartment buildings. It is entirely appropriate to provide this information for comparison of height and bulk with the closest built forms. This was the intent of this clause of the SEPP. In fact, if cross section 'C' is

reviewed by the Department, the unidentified building shown on the left hand side of the drawing appears to be our client's home. The scale of the proposed apartments to the smaller building is overwhelming. The proposed apartment building, which is located towards the south western corner of the site, is closer to our client's home than the existing hospital building which is already an overwhelming building in terms of its bulk, height and scale to the properties to the rear. Including the elevated internal roadway, the proposed apartment building has the same setback to the southern boundary as Pallister.

The redevelopment of this site to include construction closer to the southern boundary is unacceptable to our client as it will overwhelm her property. While south facing, views are obtained to the south and therefore it would be a reasonable expectation that balconies would be provided on the southern side of the building in the south western corner of the site (adjacent to our client's home). Given the proximity of the closest residential apartments to the southern boundary there would be a consequential loss of aural and visual privacy to our client. This loss of amenity would be due to the large number of residential apartments which are proposed on this site within large apartment buildings. This is unacceptable given the context of the site abutting a low density residential neighbourhood.

### ***Heritage***

The heritage item is the entire lot Lot 4, DP 584287 which contains Pallister House and its curtilage. The proposed villas are entirely within the curtilage of the building. There is no demonstrated need to develop the heritage item (Former Gentleman's Mansion and its curtilage) and this is not fully detailed within the EIS or Heritage Impact Assessment. The description of the physical site includes pathways and walls within the bushland which surrounds the building. Some of these walls are evident at the rear of properties in Gore Street (but on the subject site) and appear to be within the area of the development site for the Seniors Living Villas. As the applicant has not demonstrated a necessity to provide these villas as a crucial element of the development, we would advise that the Department delete any development of the Heritage Item lot. It is apparent over the years through subdivision that the curtilage of the former mansion has diminished. Although the Heritage report argues that this will not happen as no subdivision is proposed, it nevertheless diminishes the spaciousness around the building which contributes to its sense of grandeur within the Hospital grounds. The Heritage Item is not just the built environment but the garden areas too.

### ***Bulk, Scale, Massing***

As discussed, the height, bulk and scale of the proposed apartment blocks on the western side of the site is commensurate with the multi storey health services building (main hospital building) and has had little regard to the immediately surrounding R2 lands. The relevant clause within the Seniors Living SEPP which is applied in the case of residential sites where residential flat buildings are not permitted is Clause 40(4) which requires that buildings be a maximum of 8 metres in height. This does not technically apply to the subject site as it is not a residential zone. However, the intent of the clause is to ensure that the visual outcome of new buildings is satisfactory in relation to lower density residential zones where residential flat buildings are not permitted. Little discussion is provided within the EIS as to the relationship between the proposed buildings and the surrounding low density residential dwellings. While the clause may not technically apply, the intent of this clause should be considered given the unusual circumstances of this site, and not ignored. The note within the clause states that the purpose of the paragraph is to avoid an abrupt change in the scale of the development in the streetscape. Given that the closest residential neighbours in a R2 zone are located to the rear of the site, the intent of this standard should not be ignored by the Department. If any housing were to be considered, then the height and massing should be of a more residential scale as reflected in clause 40(4).

### ***Loss of Natural Landscape and Vegetation***

An aerial view of the site indicates that the existing natural landscape on the subject site, which also includes natural sandstone outcrops and manmade walls within the bushland setting, forms a buffer between the hospital and the nearest residences. The proposal is to remove more than 50% of the vegetation on the site and this is described in the arborist report prepared by Redgum. 104 trees are to be retained and 131 trees are to be removed. It appears that the requirements of fire safety will require understories to be limited to reduce fuel loads. Given the proximity of our client's home to the proposed multi storey apartments it is unlikely that any form of vegetation would be sufficient to screen her home from the new development. No views from the rear of the closest residential properties have been incorporated into the documentation for an appreciation of how the bulk and scale of the proposal will sit from the closest residential sites. At present, when viewed

from the rear of our clients' site, the Pallister heritage building is a dominating building due to the difference in the levels of the land. Our client's site is set at a lower level than the heritage building. The proposed residential apartments are located to the west of Pallister and are much larger buildings. There is also an elevated internal access road which would run between the apartments and our client's site. The loss of vegetation from the site and the inability to increase plantings around the site due to fuel loads would allow a clear view of the proposed apartments and roadway from our client's home and obviously a similar clear view into our client's home from the apartment and roadway users.

### ***Traffic Generation***

It is apparent from site inspections to the hospital grounds that there is traffic using the internal road system as an alternative to using St Vincents Road and River Road intersection. Although the proposal utilises two (2) road systems, the proximity of the roads to each other suggests that they could easily be converted into one road system in the future. This concern needs to be addressed within the application. The use of the site as a 'campus style' development with both hospital and other health services uses plus independent residential living would see a fundamental change in traffic on the site with traffic being generated from the site at all hours due to the movements of the residents and visitors. While it may be possible to restrict traffic movements into and around the site of a large infrastructure facility, it is not possible to do the same in regard to private residents and their visitors and deliveries. This is of great concern to our client, who fears that the volume, nature, noise, lights and general activity of the traffic associated with the use of this road will become an insufferable intrusion into her life and ruin the existing quiet amenity which she sought when buying her home.

### ***Summary***



Our client recognises the ongoing use of the site for a health services facility in line with the zoning of the site. However, the current proposal which intends that more than half of the site is developed as residential accommodation is unacceptable and would result in a poor planning outcome for both the immediate neighbours and the community and it is on this basis that our client strongly objects to this proposal. The proposal is technically permissible under the provisions of the Seniors Living SEPP due to the SP2 Health Services zoning of the site. However, the proportion of residential accommodation to health service facility use dilutes the principle use of the site and flexibility within the design may result in more of the site being allocated, over time, to residential use than to health services use. We understand that the intent of the provisions of the Seniors Living SEPP do not seek to restrict the future use of the site for continuing infrastructure for health services.

Given the number of buildings which are proposed on the site to be used as residential accommodation, including 80 self-contained apartments within two (2), six (6) to seven (7) storey buildings there is a lack of detail as to how these buildings satisfactorily respond to the adjoining R2 lands. The requirements of many clauses in the Seniors Living SEPP which relate to height, bulk and scale in the streetscape and to adjacent development have been ignored as they are not technically applicable to this site, however the intent of these clauses should be examined with a view to much lower buildings which will harmonise with the surrounding low density residential homes. While some clauses are not technically applicable, it is the character test which must be satisfied and in this case the application fails to satisfy the provision for the proposal to be of good design as prescribed in the Aims of the Policy (clause 2) and embodied within the Design Requirements as set out in Part 3 of the AHSEPP.

The sensitivities of the site and its nearest neighbours have not been examined in enough detail to draw any conclusions. The context of the site has not been determined. This has resulted in a design being put forward for endorsement by The Department which would produce poor outcomes to the community.

The nine (9) villas on the eastern side of Pallister are within the Heritage Item and would result in the loss of mature trees, vegetation, habitat with access maintained off St Vincents Road. The current buffer between the site and the nearest homes which has been afforded to the residents since the hospital was developed in the 1960s would be lost to provide accommodation within a sensitive part of the site at a gain of nine (9) villas. No detailed justification has been provided as to why this area of the site should be developed.

Indeed, no justification or nexus has been provided within the reporting as to the demonstrated need for residential accommodation for independent living within a hospital site.

The two (2) multi storey apartment buildings are proposed for independent seniors living and which are to the north of our client's site do not require to be in such close proximity to health care services. No demonstrated case has been put forward as to why such a large number of apartments for independent living must be located on this site other than it fits within a model of care which has been adopted by the proponents. The massing, scale and height of these buildings and associated infrastructure such as the elevated roadway is unacceptable in such close proximity to single detached dwellings within a low density zone which abut the site. The topography of the land, the inadequate spatial separation between the proposed multi storey buildings and the existing low density residential, the loss of trees and an ongoing requirement to enforce bush fire planning controls within the only buffer between the two forms of residential development would result in a poor design outcome for our client, her neighbours and the wider community.

Further to the above, nowhere in the documentation is there any demonstrated need for independent seniors living accommodation within this locality. No account has been taken of the already approved 92 bed Residential Aged Care Facility at 33 Greenwich Road in relation to supply of seniors housing and its impact. Nor the existence of the Glenwood Nursing Home on Greenwich Road. There are other sites within the municipality that can be explored for the provision of seniors housing which would not interfere with the provision of essential hospital services on this site in the future.

The proposed redevelopment of this site with such a large proportion of the site allocated to residential use would result in a poor planning outcome for the site which contains a heritage item of State significance, or the local or wider community for the reasons outlined in this correspondence. Given the significant change in the operation/land use of the site which is proposed by this application, we are of the opinion that the proposal should not be considered under the provisions of a SEPP Senior Living proposal. It would be more appropriate to consider a proposal of this nature under a planning proposal process to ensure that Ministerial direction, metropolitan and regional planning policies are considered.

We trust that the above will assist the Department in its assessment of the application and this submission should be considered prior to and following a full site inspection by the assessing officer and appreciation of the layout of



our clients' site. Should you require access to our client's home, please contact me directly on 0405750875.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Leonie Derwent', with a stylized flourish at the end.

**Leonie Derwent, Senior Planner**  
**INGHAM PLANNING**