

# **The Northwood Action Group Inc**

## **Building Our Community Spirit**

---

PO Box 665, LANE COVE NSW 1595

[northwood.action.group@hotmail.com](mailto:northwood.action.group@hotmail.com)

---

### **Subject: Objection to Redevelopment of Greenwich Hospital (Concept Proposal) SSD 17\_8699**

The Northwood Action Group Inc, (aka NAG) which has a membership of over 100 households from Northwood, wishes to respond to the Environmental Impact Statement for, and lodge an Objection Submission to, the above Redevelopment of Greenwich Hospital (Concept Proposal) SSD 17\_8699.

The Greenwich Hospital and its site has played a part in the lives of local residents over many years. Many of them have visited it, had direct involvement with it or had relatives or friends involved with it - including as patients, staff, and volunteers. They have, from ridges, roads, homes, bushland reserves, creek and river, walking tracks and recreation areas, across and along the peninsula and Gore Creek valley, viewed the buildings and surrounding site, watched the changing of built and natural features, and heard a band play in past times or its fire drill sounds, and at least one of them has attended Pallister House when it was operating as a school.

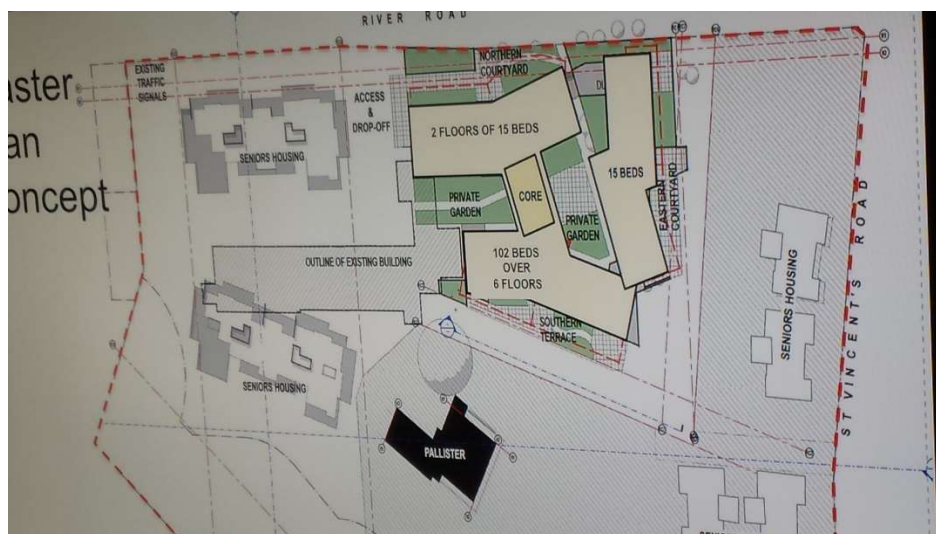
#### **A. Preamble –Objectionable aspects on Process leading up to and during Exhibition**

Firstly, some comments on the process during preparation of and during EIS exhibition.

Resident comment: Disappointment that the time frame for responses is so short.

- i) Initial Time period for consultation was objectionably too short.  
Although this period was later extended, the initial period given and advertised was the statutory minimum period of 28 days **plus one day**. Requests made to extend the period fell on deaf ears until 3 days before the submission deadline.  
The proposal documents are highly complex, and the affected community give their time voluntarily within their normal day-to-day lives to become advised of, discuss, consider and respond to the EIS exhibition.
- ii) Area of Notification was too limited  
The notification's geographical area was unrealistically small. It appears very close landowners, only, received some notification, about 18 months ago.
- iii) Northwood feels ignored by the EIS.  
A glance at photograph 4 on p 9 of EIS itself would show that many houses of Northwood, not far away, face the proposed site of two proposed seven storey buildings, and could be assumed to be significantly impacted by the EIS. Northwood Action Group Inc, listed on the Lane Cove Council website's Community Directory, received no notification about the EIS. The higher hospital, and ILU blocks, will impact far more residents than currently see it. On about 14 February, an unknown number of Northwood residents received, for the first time, written notification of the EIS.
- iv) Insufficient consultation, inadequate/ incorrect information during preparation of EIS  
At the Information Evening at Pallister House in November 2017, there was almost no information available about the Seniors Living buildings, especially the height, bulk and scale of the buildings. Accordingly, the impression given to some who attended was misleading, and they

went away with the wrong impression, which could be reasonably foreseen to possibly remain with them, to this day. Below is the site diagram which appeared briefly in sequence on the Info Eve slide-show on 2 November 2017 – note there are NO numbers of storeys NOR dwellings, shown on the Seniors Living.



Slideshow 2 /11/17

Some who asked were referred to a separate room for ILU enquiries, and were told that the Seniors Living blocks were 2 to 3 stories high. One resident, having later looked at the on-line SEARs diagrams, made an email enquiry re heights, to HammondCare. A reply letter advised:

*"In relation to your specific SEARS enquiries, please see below*

- *The 70 Seniors Living Units on the West side of the site are proposed to be up to 7 stories high. Please note that the height will not exceed the heights of existing buildings on site."*

In 2018, the resident sought a clarification on heights of existing buildings on site, from HammondCare's Design Manager and their General Manager Health & Hospitals, via email to each, as extracted following:

*"Visual impact:*

*Could you please advise what is the RL of the Ridgeline of the tallest building on the site (probably the apricot brick main building)? You have said no building will exceed the heights of the existing buildings on site - but the heights are not on the survey in Sears."*

No reply was received from either HammondCare's Design Manager nor General Manager Health & Hospitals. It is noted that the EIS-exhibited site survey is dated, Date of Survey: 4/2/09, so ridge heights were on it. It is suggested that the above process shows inconsistency with the SEARs letter, Appendix A, as extracted here:

"

29 NOV 2017

Dear Mr McPhail

**Reissued SEARs for the Redevelopment of Greenwich Hospital (Concept Proposal)  
97-115 River Road, Greenwich (SSD 8699)**

.....[text ] .....

I wish to emphasise the importance of effective and genuine community consultation and the need for proposals to proactively respond to community's concerns. Accordingly, a comprehensive, detailed and genuine community consultation and engagement process must be undertaken during preparation of the EIS.

.....[text ] .....

Karen Harragon

Director

**Social and Other Infrastructure Assessments**

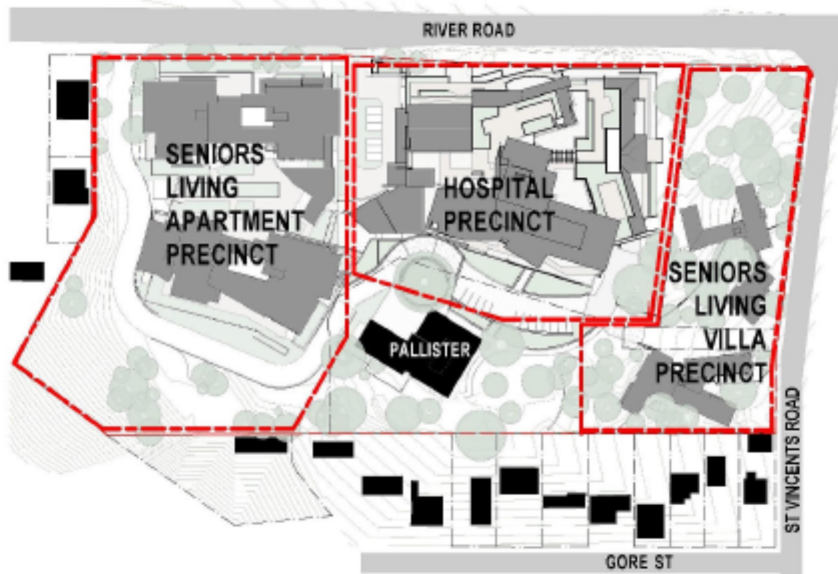
as delegate for the Secretary

”

## B. Reasons for Objection

1. Permanent loss of land zoned SP2 Infrastructure, for Health Services Facilities, Lane Cove LEP 2009  
This land has special purpose zoning benefits by virtue of its zoning use. Once this land zoning is over-ridden/ignored and used for privately-occupied residential apartments, whether under a loan licence agreement or other title type, or within any further subdivision, the land is permanently unavailable for the purpose for which it is intended, Health Services Facilities.
2. This land needs to remain zoned, and used for, provision of Health Services Facilities as defined.  
Land zoned SP2 will be needed here for genuine Health Services Facilities in the very near future. NSW already has severe overcrowding in hospitals. Regular news reports cover risks to patient health and life due to the overcrowding. With huge planned population increases nearby in the next 15 years (Crows Nest/ St Leonards and St Leonards South Precinct), more genuine health services facilities must expand.
3. Its Predominantly a multi-dwelling housing development, not a Hospital  
Over 50% of the proposed FSR, well over 50% of the land area, and about 50% of costs (especially once 'Excluded' items which are necessary to establish and operate the project are included), has been allocated to private independent apartment/villa developments. The land area allocated to Seniors Living Apartment and Villas can clearly be seen in the extract below, Appendix C, Architectural Design Statement, p1. - it is clear that Seniors Living dwellings, carpark and associated soft and hard landscape and service areas occupy over 50% of the buildable land.

***Below Extract: App. C, Architectural Design Statement, p1- a multi-dwelling housing development***



4. The Seniors Living Apartments and Villas are not incidental nor ancillary to Health Care Facilities, nor are they a Hospital.

For self-contained apartments and villas to validly fall within the provisions of Seniors Housing SEPP 2004, as Seniors Housing, by operation of cl 10 c), under the Building Code of Australia they are either class 1a (a single dwelling, whether detached or attached), or class 2 (a building containing 2 or more sole-occupancy units each being a separate dwelling) or a combination of these; but “does not include a hospital” under cl. 10 – see below. Nor are they medical centres, nor health, medical or related research facilities as required by State and Regional Development SEPP

**“10 Seniors housing**

*In this Policy, **seniors housing** is residential accommodation that is, or is intended to be, used permanently for seniors or people with a disability consisting of:*

- (a) a residential care facility, or
  - (b) a hostel, or
  - (c) a group of self-contained dwellings, or
  - (d) a combination of these,
- but does not include a hospital.*

**Note.**

*The concept of seniors housing is intended to be a shorthand phrase encompassing both housing for seniors and for people with a disability. This Policy deals with both kinds of housing.*

*Accommodation provided by seniors housing does not have to be limited to seniors or people with a disability. Clause 18 provides that seniors housing may be used for the accommodation of the following:*

- (a) seniors or people who have a disability,
- (b) people who live within the same household with seniors or people who have a disability,
- (c) staff employed to assist in the administration of and provision of services to housing provided under this Policy.

*Relevant classifications in the Building Code of Australia for the different types of residential accommodation are as follows:*

- (a) Class 3, 9a or 9c in relation to residential care facilities,
- (b) Class 1b or 3 in relation to hostels,
- (c) Class 1a or 2 in relation to self contained dwellings.”

The EIS p48 statement has intentionally misled, and redefined the development by calling it a “hospital campus”, and intentionally confused the general public with words such as “associated”, “integral” “ancillary”, when referring to the Seniors Living components, such as p 19 it states that the seniors is “ancillary” to the hospital. EIS Page 48:-

The proposed development is predominantly a hospital campus with a main hospital facility that includes inpatient hospital beds, palliative care beds, residential care beds and outpatient services. The associated seniors living units are an integral part of the hospital campus and the HammondCare ‘continuum of care’ model. All the hospital facilities will share common services and facilities. The hospital campus meets the Capital Investment Value (CIV) threshold of \$30 Million for the specific ‘hospital’ precinct and is therefore classified as a State Significant project, under clause 14 of Schedule 1 along with the supporting and associated development.

Seniors Living can go on any stand-alone land which meets the criteria in NSW, and can be undertaken independently of any health-related facility. They do not need hospital zoning in order to operate. You do not need to be in a Seniors Living development associated with a hospital to “age in place”. To live in one, you can be in good health, over 55, and can live there with household members and children of any age. In fact, they are often marketed to such people.

5. Character of Multi-dwellings is inconsistent with LEP and desired character and feel of all surrounding residential zones (which are all R2).

At 18 February meeting of Lane Cove Council, it was resolved unanimously to amend the Lane Cove LEP 2009 to Prohibit ‘multi-dwelling housing’ in the R2 Low Density Residential Zone. This was as a result of a recent LCC survey for R2 amendments to LEP which rejected multi-dwelling (terrace) type of building form in the R2 residential zone.

While a Site Compatibility Certificate (SCC) has not been applied for, perhaps due to the finding of loopholes in legislation, the Homepage of the NSW Government’s SCC webpage states that:

*“The [Seniors Housing SEPP](#) aims to facilitate development of housing for seniors and people with a disability in a way that balances the growing demand for accommodation with maintaining the character and feel of local neighbourhoods. Subject to certain criteria, an SCC allows a development*

*application for seniors housing to be considered on land if the proposed development is compatible with the surrounding land uses "*

This proposal is not compatible with the surrounding land uses.

6. This proposal circumvents the surrounding community's expressed recent LCC R2 survey's desire against multi-dwelling housing (terraces), by attaching the multi-dwelling housing to the hospital redevelopment and piggy-back riding on a 'legitimate'?? over \$30 million SSD proposal.

Under Schedule 1 of the State and Regional Development SEPP clause 14 brings in Hospitals, medical centres and health research facilities, if such development has a capital investment value of more than \$30 million for any of the following purposes:

- (a) hospitals,
- (b) medical centres,
- (c) health, medical or related research facilities (which may also be associated with the facilities or research activities of a NSW local health district board, a University or an independent medical research institute).

Seniors Living is **not** part of the Regional and State Development SEPP. Despite this, this proposal for The applicant has chosen to slip Seniors Living in under the State and Regional Development SEPP, where it should not be.

A resident's comment: The increase in height will look greater because of proximity

## 7. Objections to Adverse Impacts on Amenity

### 8.1 Adverse Visual impact

These Seniors Independent Living blocks, and the new higher hospital, will dominate the skyline of Northwood, Gore Ck Bushland Reserve and Bob Campbell Oval. Despite efforts in the EIS to claim or suggest otherwise, the two x 7 storey western multi-dwelling blocks of 55+ Independent Living Unit Apartments will have a huge and adverse visual impact on surrounding areas. The EIS has not met SEARs 3 Built Form and Urban Design request to

- Provide a visual impact assessment that identifies any potential impacts on the surrounding built environment.

nor has it met the SEARs 4, "to assess amenity impacts on the surrounding locality, including view impacts..... "

The 9 storey Hospital building will also have an adverse visual impact – while further away from Northwood, it is higher, and it will be seen from Northwood, many areas in Greenwich, Lane Cove and beyond, such as from Wollstonecraft, and by drivers on River Road.

The EIS has confused a Visual Impact Assessment with a view loss analysis, wheeling out the time-worn Tenacity Consulting v Warringah Council, and citing lack of "iconic" views from those properties who will receive an adverse visual impact, to "prove" that in the EIS they have considered view impact. All they have done, is to mount a questionable, poor, defensive argument about iconic view loss, and select two treed-foreground locations for non-representative photomontages which are nevertheless positioned prominently at an early page point in various documents, such as App. B drawings.

Moreover, some people think they will not see the development, because they have no conception of how high the proposal will be, within their prospect (outlook) , nor how long and large the buildings are, and that they will rise above and beyond where they can currently see any hospital buildings. They do not realise that once it the proposal rises over the trees, and once many screening trees are gone, their prospect will be very different.



The EIS has not helped at all in this regard.

Northwood's highest RL is around RL 52, and many houses sit below that, at around RL 40, and lower. Viewed from certain public and private areas of Northwood, at RL40, with the aid of tangent calculations, and using 'distance tool' on Sixmaps, it can be confirmed that the roof (RL164.60) of a significant high landmark in the skyline 1320 m away – the new Tower at 1 Marshal Ave St Leonards – will be completely obscured by the new Seniors Living envelope's RL heights, only 250m away [see Appendix 4: pdf of Sixmaps with 1320+6+249m relevant distances measured]. Residents and owners in Fleming Street, Private Road, Upper Cliff Road, & Cliff Road, Northwood are particularly impacted. The development will be higher up in their skyline, and extend along a much wider area of sky, than 'the Bee'- Tower at 1 Marshall Ave, and the cranes building St Leonards' towers which are a much greater distance away. These Seniors Independent Living blocks, and the new higher hospital, will dominate the skyline of Northwood, Gore Ck Bushland Reserve and Bob Campbell Oval. The attached Appendix diagram, View Locations Markup on Aerial View Locality, uses yellow arrows to each indicate an area from where the current hospital is seen, and needless to say from where the new development will be seen in a much greater bulk, height and scale. The yellow arrow view areas will become more numerous following redevelopment because of the much greater building height and spread, and proposal tree loss, which will create building visibility where now none is perceived, across a large area.

#### 8.2 Privacy loss, vehicle headlights, artificial light spill and noise impacts

The raised new internal road, the podium at RL44 and the 6 stories of apartments in two blocks will increase noise and lighting impacts, and present massive walls of windows and balconies (mostly full width of each apartment) – facing, and close to, parts of Northwood.

Privacy loss. Residents have raised privacy concerns about this privacy intrusion by many eyes, and by lights. It is observed that current floodlighting at the western side of the 5 storey main building intrudes into homes during the dark of night. Many lights and external lights will add to light spill, as will vehicle headlights and necessary outdoor and safety lighting.

The acoustic report has not considered Northwood at all in its assumption of noise-affected properties. Noise travels across the valley easily, impact noise is especially noticeable at quieter times, or when the wind assists travel of sound waves. Residents with direct line of sight have complained of loud noises from hospital operations at times, and in particular being woken in the wee hours by garbage truck skip collection processes. The acoustic report completely fails to mention this noisy operation, or in the alternative, dismisses it with the EPA quote that one or two incidents per night are "unlikely to affect health and wellbeing". The places where the noise monitors have been placed are low down in troughs in the ground terrain and behind trees, so are not regarded as appropriate monitors of typical noise because of the screening effect on sound waves. High walls, of hard surfaces, are noise reflective surfaces, will increase noise generation and reverberation.

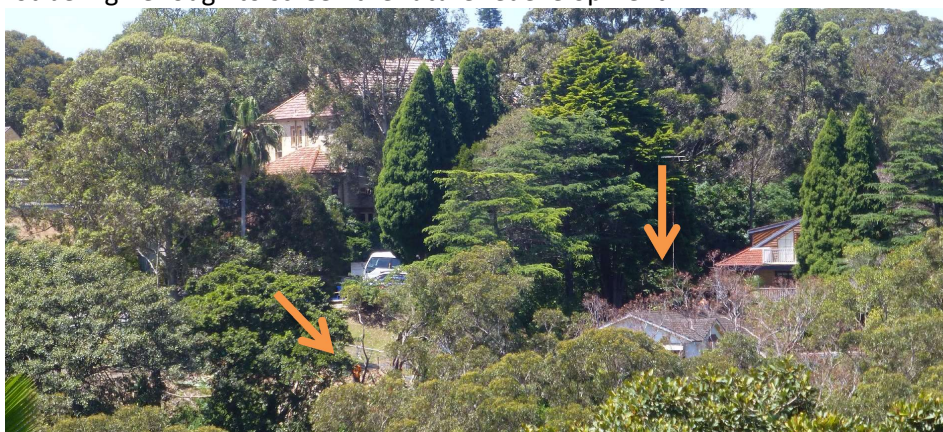
Internal ring road: The proposed development will be ringed by a "new internal road" which will be a major through-traffic circulation route, given that its intersection with River Road is signalized, and that it services over 66.7 % of the on-site car parking provision, as well as the loading dock, and, 8m wide, is needed for fire-fighting and evacuation purposes. Serving the new SLU carpark at RL 39.3 (refer App F, p1, QS Slattery's CIV Cost Plan) with short or no ramp transition space, in order for cars to access the carpark will require elevation of the road by 2 – 3 m on the western section from its current top of bank RL 36.64 adjoining Lot 51 DP805250 (labelled 117A on detail survey) and from current edge of bitumen carpark at RL 37.5]. Further east, at position of cross section C, Dwg S.04/A which passes close to west end of house on lot 2, DP514294, (24 Gore St, mislabeled on survey as 22) the road rises and is shown at RL42.5 which is 1.5 to 2 m above the existing bitumen road and nearby levels. This raised road "hides" the seventh storey, which is the carpark, but is above the existing ground level for much of its area, so it is a seventh storey.

Comments by residents of four properties in Cliff Rd:- Everyone was sad at the loss of so many trees.

### 8.3 Negative impact of Loss of Trees on & off the site, compounding effect of Reserve tree death

On-site removal & unintended future loss: Not only will many trees be removed from the site, some are the trees on the west and south perimeter which, significantly, currently help to obscure the visual and noise impact when viewed/heard from Northwood. Other trees are of high significance in the heritage curtilage of Pallister House. Along the street verge and footpath of River Road, tree loss will also occur from construction disturbance or forced path improvement as Council will come under pressure to improve the pathway. These verge trees and other trees have been heavily relied on in the 'visual images' presented by the proponent, sometimes having the viewer impersonate an ant, by viewing from impossibly low down on or below the roadway or ground, distorting to make the near trees appear taller and the new buildings beyond, less tall. Trees will no longer do the 'softening' the proponent claims, nor what they may do for residents, once the full height of the proposal, relative to the existing trees, is constructed. Unintended tree loss also will accompany construction as, with the best will in the world of the arborist's detail for tree protection zones around retained trees, some trees for retention will not make it: mistakes, carelessness, neglect, ignorance and willful negligence all happen, despite few cases making it to the Land and Environment Court due to the high probative bar. The lower carpark RL43.5 will involve excavation of over 7 m into the drip line of Fig Tree 102, which appears so prominently on the drawings. With its trunk centrepont located only 6 m or less away from the over-excavation necessary to enable basement construction, the survival of Fig Tree 102 will indeed be wondrous to behold.

Currently none of the existing trees come near the top of the new proposal, nor are they likely to grow to such heights. Nor will any planted trees ever come near these heights, in our lifetime. Indeed, the EIS has highlighted the river views obtained over the top of trees. Some trees which are being removed form an important part of an attractive visual setting and framing of Pallister House, when viewed from Northwood, such as the significant stand of 19 Bhutan Cypress. Still other trees for removal (and including these 19) will have helped in privacy, and to screen/reduce noise picked up by the acoustic noise monitors – but their loss will not be recognized in the questionable results of the acoustic assessment. In photo below, a tall gum, to left, stand of 19 cypress, are for **removal**. Off-site tree death: In addition, recently more and more mature trees of residents' and Reserve's trees are dying due to climatic conditions outside our control – drought periods, disturbance, excess runoff, lack of fire, changed water patterns, upset in nutrient supply, artificial lighting, and the like. Residents who now have trees (both their own, the Hospital site trees, and the Reserve trees) screening some of the hospital could, after redevelopment, or even before, find those trees gradually die, or suddenly fall after a climate event, or are vandalized. Even now, those trees may not be high enough to screen the future redevelopment.



*High-viz vest worker cuts hospital trees at bottom of hospital's grass clearing area, while dying trees can be seen above roof of 24 Gore St, to the lower right side of above photo.*

A Resident comment: I used to attend school in Pallister House

#### 8.4 Loss of Heritage value of Pallister House and curtilage, impact on external views of Pallister

Pallister House and its historic landscape precinct land is important to the surrounding community. Tree loss and building on the curtilage will cause a reduction in its historic value. While the documents are careful to “show” that views from the House are maintained above the proposed villas, they do not mention views towards Pallister House and curtilage that other around currently enjoy. Such views are widely available across the valley from Northwood, including from heritage-listed 1888 Blackett’s Northwood House in Private Road, and also from parts of Greenwich, and from within hospital’s current landscaped grounds. There is a loss of value due to damage to the setting of Pallister House, the tree loss, and the building and new work, and detention tank on Lot 4. The underground carpark excavation undermines the root system of the Fig Tree 102, and approaches dangerously close to Pallister House itself. This basement carpark outline is dotted on Landscape drawing LP 001, Zone B, but the over- excavation needed to build drainage, waterproofing and thick retaining walls will expand the footprint.

Misleading Error: In drawings’ depiction of Height of Pallister House and Fig Tree 102: the drawings are in error in the drawn height. Pallister’s slate rooftop is RL59.98, forming a top-ridge-rectangle around a sunken inner roof (evidenced on any aerial view), and the attached brick building to the west has a ridge of RL60.65, by survey. Elevation/section Drawings, however, show the Pallister rooftop about 2.15m higher than is its maximum height, obtained by the survey, while the RL60.65 ridgeline to the west is accurately depicted, in its correct height, but is shown lower than the “wrongly inflated” height of Pallister House. Meanwhile top of Fig Tree 102, is depicted having top at RL 72.5, which is 3.3 m higher than it is by Survey [which shows it growing from RL49.17 level, and being 20 m high,  $(49.17 + 20 = 69.17)$ ], or 4.3 m higher than it is if the Arborist’s height of 19 m is used.

The question arises, how did these errors in depiction occur, and why, and have they fed into the preparation of montage images, and into other conclusions drawn about the proposal?

The answer to the latter must be Yes, as certainly most viewers of the drawings would have accepted the Fig Tree 102 height at what (and where) it is shown, and the Pallister House rooftop as being realistically depicted on say Dwg S.04, but it misleads with a false impression of new building height relative to Pallister and the Fig 102, which are given inflated, incorrect prominence.

#### 8.4 Bushfire Prone land: Danger to persons, subject site, nearby sites, public assets & infrastructure

The south –western Seniors block is on bushfire prone land , yet RFS says it "can" be assessed as the bushland having 0 degrees slope – but note, here the site survey is inaccurate – see comments under E2 zone section, below. Perhaps they were influenced by the non-for-profit hospital approach?

But "can " it be assessed another way? Why not have it assessed using the slope shown on bushland below an adjacent, accurately-surveyed, property at lot 2, DP514294 with which the hospital shares a common boundary? Section C on the latter survey, at the intersection point of the two properties (ie, the very same land) shows its 40m wide section with 43.57% slope. The QS cost report has not priced in the extra-over for Bushfire zone construction to the southern apartment block, despite the advice in the Bushfire Report that it should be included.

#### 8.5 Adverse impact on Traffic in River Rd, Parking and local road network due to site intensification.

The Traffic and Parking Impact Assessment Report contains serious deficiencies and cannot be accepted as a document which justifies, p14, that “the subject site is suitable for the proposed intensification of use in relation to the impact of traffic, vehicle access, parking and safety considerations.”

The Traffic and Parking Impact Assessment concludes that the subject site is suitable for the proposed intensification of use of the site in relation to the impact of traffic, vehicle access, parking and safety



Some of its conclusions are couched in a word-semantic manner to hide deficiencies, which could have been explored more thoroughly. Eg p5:

Taking into account the estimated traffic generation from the proposed development, existing traffic flow conditions and speed environment along River Road, it is considered that the expected increase in traffic generated would have a minimal impact on the safety and operating efficiency to the road frontage.

Is it saying, the peak hour traffic is slow, and will still be slow? Is it only addressing this canny summary to the “road frontage”?

It has not attempted to assess impact of nearby approved or under-assessment developments, such as huge St Leonards South Precinct, or 266 Longueville Rd Lane Cove, approved 92-bed DA at corner of River and Greenwich Roads. It fails to mention % increase in service vehicles, and only touches on waste services, which have tricky circulation requirements and big noise impacts.

67% of the internal parking by area (in QS Cost Report) is accessed from the New Internal Road. There is no driving connection between the areas accessed via the latter road, and the drop-off zone and 33% of internal carpark by area, - accessed via the central/eastern access road. The latter access will be left-in left-out, with consequent impact on rat-runs for changing direction, through surrounding streets of Northwood, Longueville, Greenwich and Lane Cove. There will be additional delay getting out onto River Rd/Northwood Rd from Longueville /Northwood.

And what will ambulances do? Will they turn left, too?

Peak hour traffic is already at a crawl in the peak periods, and there will be more frequent Hospital light signal cycles. All day long. As vehicles wait to turn in, we are left with a one-lane road in front, for eastbound vehicles. There is already this one-lane situation at Greenwich Road signals, so this will be another. St Vincent's Rd intersection is also problematic, and it's likely the 50% north etc assumptions made will not happen, because it is too dangerous.

This will put more traffic onto the west exit, cause more or longer signal cycles to occur, and put other traffic into the Greenwich rat-run. Traffic not wanting to wait inside or on River Rd for the signalized intersection will use St Vincents Road, increasing traffic there, causing other rat-runs.

Parking inadequacy. These are luxury 2 bed + units for 55+ people and any member of their household. Given the lack of transport accessibility, the surrounding hilly terrain, and the likelihood of residents of working age or in active retirement to have a car, the parking is stated as being at one space per unit, but as occupancy by 2 -4 persons is quite likely, parking is very inadequate. Indeed, Dwg SL.01/A shows that up to 32 of the basement car spaces under Independent Seniors blocks may be allocated to visitors and staff. How many spaces will there be left for residents?

The report says it increases parking spaces, above requirement, but still uses the traffic generation rates for less car spaces – this is not consistent, and traffic generation will be greater, increasing traffic volume on River Road and surrounding local networks.

And what if Parking estimates are inadequate? It has not accounted for the extra congestion and parking demand for Kingslingley Rd's Greenwich Public School expansion underway opposite, of 18 new classrooms and an expanded hall, to cater for a 43% increase in staff and a 25% increase in student numbers – but no increase in parking provision. Nor has it considered the additional congestion and on-street parking demand generated at Greenwich shops by the current addition of 8 additional classrooms, for similarly-increased student and staff numbers, and 150 after-school care places

In a Council report of survey and study into parking in a nearby area, including St Vincents Road (north), “OSBORNE PARK AND GORE HILL PARKING & TRAFFIC STUDY”, it was found that parking was at average 80% occupancy, and restrictions were introduced. This report can provide valuable instruction to this Traffic report, note that it found that “ Majority of the residents park on-street, although they have off-street parking facilities.”

The Report states, p14 , that there is a connection between the central and ring systems.

To facilitate eastbound traffic, the internal road system will enable traffic from all access points to the site to offer the option to exit via the signalised access. This will allow any exiting vehicle to be able to conduct a controlled right turn into River Road.

However a study of parking and internal road layouts on architectural drawings S.H01/A and S.H02/A reveals that the internal road system is not interconnected. The central entrance is self-contained, no-thro-traffic, and the lower ground carpark accessed from it is not connected to the upper ground carpark.

Excavation to construct the lower carpark will be dangerously close to both Pallister House, and the Fig Tree 102. What happens if the area of excavated has to be reduced? Less parking?

Cycling. It is suggested that this transport mode could be used by staff. The reality is, the so-called cycle route along River Road is narrow, steep, slippery, and quite dangerous. Even skilled cyclists hesitate to use it.

A Resident comment: Impact on amenity of Gore Creek Reserve will be huge - height and extent of buildings, and loss of trees

#### 8.6 Environmental damage to E2 zoned Bushland Reserve, habitats and waterways, and community assets including Gore Creek Oval and Playground

This proposal perches 7 storeys of private apartments, and a road, at the top edge of a beautiful bushland valley, above highly sensitive E2 zoned bushland reserves, the subject site's own bushland, a community recreation area, water catchment areas, Gore Creek and the Lane Cove River. The resultant short and long-term damage to these areas will remove the legacy of this valley and its bushland for future generations. Community assets of Bob Campbell Oval, Gore Creek and Bushland Reserve and walking tracks will be severely impacted, visually, environmentally, noise, bulk and scale, excessive or altered stormwater runoff and more.

This is taking private gain by robbing from the public, in the false guise of a hospital. Lane Cove prides itself on its bushland, and yet its bushland is under constant attack from developments such as these, and other natural and man-made forces, such as construction, and landscaping practices. Currently, there is a sub-contracted team of four, as well as 6 volunteer individuals from Northwood and 11 from Greenwich who work to preserve the Reserve. As mentioned above, tree death is occurring on an increasing scale. In times of intense rainfall, water runoff is high, and the playground below, and Oval itself, was underwater last November. Council has to spend ratepayers' funds to install gross pollutant traps upstream, repair damage to playground and stone walls of the creek during flooding, repair the Oval surface, and chainsaw to remove trees which fall over across these public areas. Rubbish and chemicals, too, arrive from surrounding developments.

Sunlight loss to Bushland due to solid building shadows will have an adverse impact. The survey for the site is incomplete and does not actually survey the area of the western site, below the lower carpark metal fence, down to its own south-western boundary which contains no spot levels, and beyond, right down to the bank of Gore Creek below. It is humbly marked in small words on p4 of the Survey: "this area not surveyed". The contours have been interpolated in this bush area, humbly marked in Survey details' Note 5 as being "indicative only". It does not show the rock formations, the trees, nor accurate contours. Shadows cast by buildings will therefore be incorrect. Moreover, shadows through trees are not solid, and sunlight which will penetrate into the bushland currently, will not do so in future. The site western boundary has not been marked on the land itself, and most report writers really have little idea of what lies beneath the tree canopy. A view of the impact of the development, on Gore Creek oval, ignored in the EIS, has had to be prepared by a member of the public, and is attached in the Appendix.

The survey "not surveyed" section has been repeated throughout the plans, causing inaccuracies such as the likely improbability of carrying out the Landscape precinct proposal for the area below current south-west carpark and in what is there now

#### **Zone C - Riparian Embankment and Road Verge**

- A possible gabion retaining system to reduce gradients
- Planting with low volatility species - rainforest community re-establishment
- Maintenance / walking access tracks and rest places

The Landscape Zone C proposal should not be carried out in any case as it would remove further screening trees, rock formations and the like, about which the arborist and landscaper have not shown (or seem to even have) information, and Zone C proposed works cause severe flow-on environmental damage as outlined elsewhere.

Resident comment: It is a gross over-development of the site.

Queries about the appropriateness of the luxury villas for seniors

#### **C. Unsuitability of the site for the Proposed development – other reasons**

- Intensity of “humans on site” has increased by about 350%-400% based on a conservative estimate of patients, residents, visitors, volunteers, staff, deliverers, service and tradespeople.
- The redevelopment of the hospital, medical and genuine ancillary services has been confined to less than 50% of the land area, by the desire to fit Seniors Living on the same site. The confinement creates a higher building than if the hospital did not have to fit into a confined space. It also means loss of significant mature landscaped areas.
- Footpath gradients, widths, and steps make this area unsuitable for Seniors criteria in the SEPP. The nearest bank and shops, at Greenwich are south-easterly, 1000 metres walk away. The east-heading footpath on the near (south) side of River Road, on leaving through the central entry roadway, has 3 + 9 steps up, then about 8 steps down, with tree roots causing cracking in the pathway and steps itself. It is not suitable for wheelchair use. To the west, there is no footpath at all, beyond the signalized western internal roadway on the south side, and a footpath very narrow in parts, with water runoff from the adjacent vertical cliff, which makes it prone to rock and tree falls after rain. The footpath on the further (north) side, heading east, has very steep gradients in parts over considerable distances. The other routes to the Greenwich shops have even steeper sections.
- Public transport is poor, and is by bus only. 261 Buses at the River Rd bus stop opposite, do not run on Sundays. Their evening hours are limited, and service during the non-peak hour day is one per hour. The closest train station served by the bus is at North Sydney.
- The only crossing of the major arterial state River Road between Greenwich Road and Kenneth Street, a distance of 1.6km, is at the hospital/public school signalized intersection.
- Safety of infant’s school children who cross at the signalized “walk” crossing, and also walk in formation down St Vincents Road for school and recreation activities.
- Inappropriate siting due to bushfire prone land.  
Further examination would likely add to this list.

#### **Conclusion**

In summary, despite the facility of Greenwich Hospital itself having been regarded fondly by the community for 50 years, the SSD proposal is objected to by NAG for reasons as given.

Yours faithfully,

**Executive and Committee,**

**On behalf of Northwood Action Group Inc.**

See also attached appendix 1,2,3&-4