URBIS

SUBMISSIONS REPORT

SSD - 10831778
Sydney Children's Hospital Stage 1/ Children's Comprehensive Cancer Centre

Prepared for
HEALTH ADMINISTRATION CORPORATION NEW SOUTH WALES
1 October 2021

URBIS STAFF RESPONSIBLE FOR THIS REPORT WERE:

Director	Peter Strudwick
Senior Consultant	Rosie Sutcliffe
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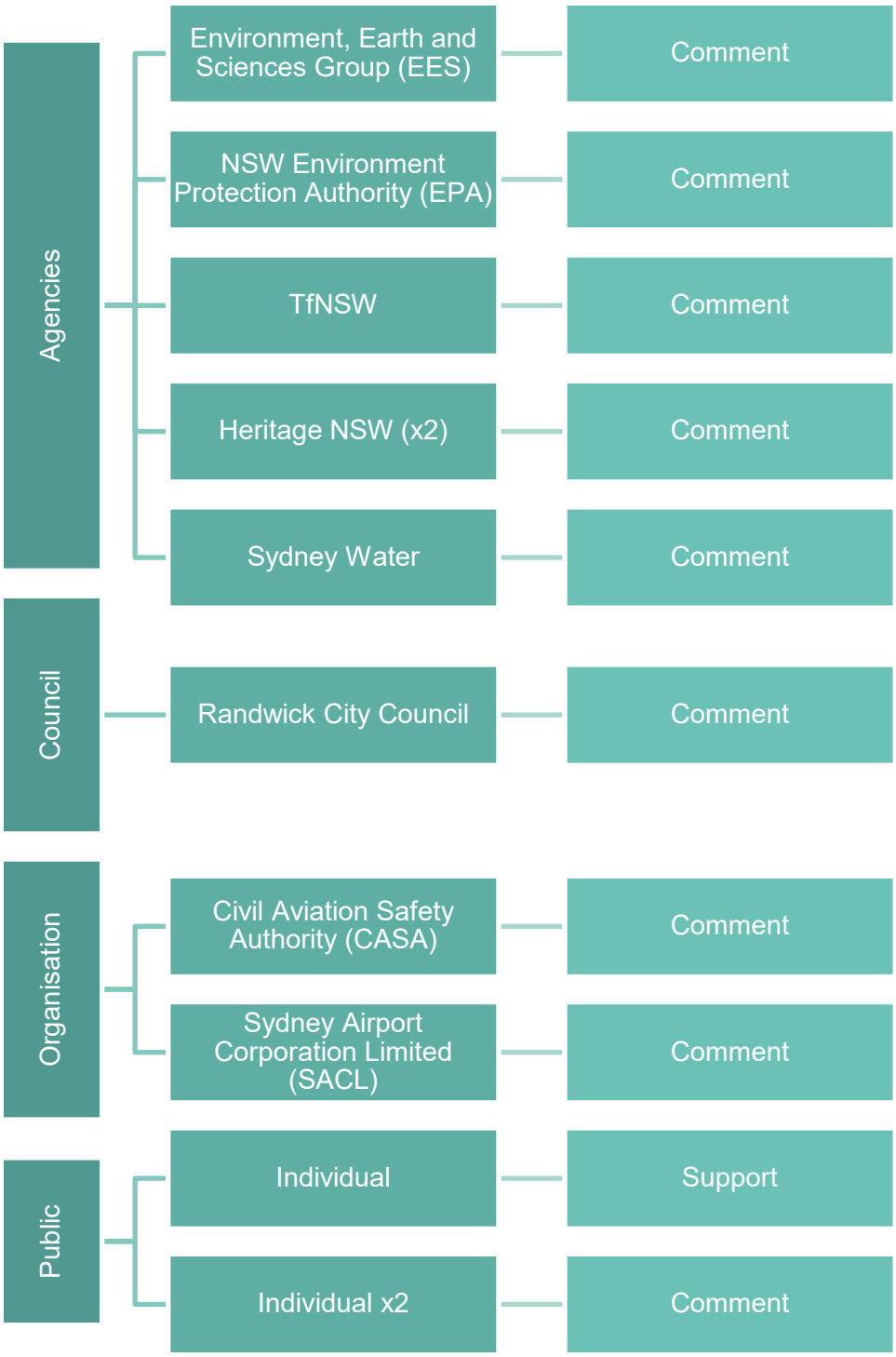
1. ANALYSIS OF SUBMISSIONS

The EIS was placed on public exhibition between 19 May 2021 – 15 June 2021. During this period, government agencies, Council, key infrastructure stakeholders and the community were invited to make written submissions on the project to NSW DPIE. As outlined in the summary below, a total of eight (8) submission were received from agencies, Council and organisations during the public exhibition of the proposal. One additional submission was received from Heritage NSW (Aboriginal Cultural Heritage) after the exhibition period. None objected to the proposal, with all these submissions providing comments for consideration seeking clarification about specific aspects of the proposal rather than requesting significant or fundamental changes. There were three submissions from individual members of the public. One supported the proposal and two provided comments.



The following items raised in the submissions were identified as requiring a detailed response from the proponent:

- Design response to flooding mitigation strategy
- Response to State Design Review Panel Comments and achievement of Design excellence
- Landscaping design - canopy cover and deep soil provision
- Pedestrian connectivity
- Traffic, parking and vehicular access

For each submission that has been received, **Section 5** provides a description of the matters raised in the submission, a summary of the response, and a reference to where these issues have been addressed in the detailed documentation as required. The identified issues have been discussed further in **Section 7,** which provides additional justification where warranted.

2. INTRODUCTION

This Submissions Report has been prepared by Urbis on behalf of Health Administration Corporation (**HAC, the Applicant**) in respect of State Significant Development (**SSD**) application (SSD-10831778). This report addresses the matters raised by public agencies and public submissions during the public exhibition of the Environmental Impact Statement (**EIS**) for the development of Sydney Children's Hospital Stage 1 and Children's Comprehensive Cancer Centre (**SCH1/CCCC, the Project**) at Randwick Hospitals Campus (**RHC**).

The EIS was on public exhibition between 19 May 2021 – 15 June 2021. During this period, eight (8) submissions were received. One (1) additional submission was received after the exhibition period. These included submissions from:

- Environment, Ecology and Science (**EES**)
- NSW Environment Protection Agency (**NSW EPA**)
- Transport for NSW (**TfNSW**)
- Heritage NSW
- Heritage NSW – Aboriginal Cultural Heritage division
- Sydney Water Corporation (**SWC**)
- Civil Aviation Safety Authority (**CASA**)
- Sydney Airport Corporation Limited (**SACL**)
- Randwick City Council (**Council**);

During exhibition, there were three (3) public submissions received.

The Department of Planning, Industry and Environment (**DPIE**) provided a request for a response to the submissions and a key issues letter at the end of the exhibition period.

This Submissions Report has been prepared with reference to clause 85A of Division 6 of *the Environmental Planning and Assessment Regulations 2000* (**EP&A Regulations**) which states as follows:

(1) The Planning Secretary is to provide to an applicant for State significant development the submissions, or a summary of the submissions, received in relation to the application during the submission period.

(2) The Planning Secretary may, by notice in writing, require the applicant to provide a written response to such issues raised in those submissions as the Planning Secretary considers necessary.

This Submissions Report has been prepared with reference to the '*Preparing a Submissions Report'* Guideline July 2021 prepared by the NSW Department of Planning, Industry and Environment (**DPIE**) Accordingly, this Submissions Report provides:

- **Section 1** - An analysis of submission received.
- **Section 3** Identification of the actions taken since the public exhibition period, including any amendments made to the project.
- **Section 5 -** A comprehensive response to the issues raised in the submissions.
- **Section 7** – A response to draft conditions of consent
- **Section 6** - An updated project evaluation and conclusion.

The proposed amendments and justification for the proposal is outlined in the specialist documentation provided as follows:

- Submissions Register prepared by Urbis - **0**
- Updated Mitigation Measures prepared by Urbis - **Appendix B**
- Amended Architectural Plans prepared by Billard Leece Partnership (BLP) **- Appendix C**

- Addendum Architectural Design Report prepared by BLP - **Appendix D**
  - Inclusive of solar access analysis
  - updated photomontages illustrating design refinements
- Amended Landscaping Plans prepared by Aspect - **Appendix E**
- Public Domain and Landscape Response to Submission report prepared by Aspect - **Appendix F**
- Addendum Landscape Design Report prepared by Aspect - **Appendix G**
- Flooding assessment prepared by Meinhardt Bonacci - **Appendix H**
- Traffic and Transport Assessment Response to Submissions prepared by Arup - **Appendix I**
- Proposed Basement Excavation and Light Rail statement prepared by Meinhardt Bonacci - **Appendix J**
- Response to the draft conditions provided by TfNSW has also been provided - **Appendix K**
- Department of Infrastructure, Transport, Regional Development and Communication – approval of intrusion into controlled airspace – **Appendix L**

The specialist consultants have assessed the design refinements and recommended mitigation measures to ensure the proposal will have no unreasonable or significant traffic, transport, environmental and built form impacts on adjoining or surrounding properties or the public domain. This documentation confirms that there are no significant adverse impacts associated with the project.

Accordingly, the content contained in this Submissions Report and the original EIS demonstrates that the proposal responds appropriately to its surrounding context and site constraints. It delivers an aesthetically pleasing and functionally successful health facility with limited environmental impacts and should be approved subject to appropriate conditions.

3. ACTIONS TAKEN SINCE EXHIBITION

An overview of the actions taken since the public exhibition of the project are outlined in Table 1.

Table 1 Summary of actions taken since exhibition

Action	Description
Project refinements	Since lodgement and public exhibition of the SSDA, the proponent has further refined the design of the proposed development and made some minor amendments to the built form, landscaping and access to the facility. These primarily arise in response to the comments received from the SDRP and close out unresolved items from the design review process. Additional updates have been made as a result of ongoing design development and refinement of the scheme. The design amendments are illustrated in the amended Architectural Drawings (**Appendix C**) and Addendum Architectural Design Report (**Appendix D**) prepared by BLP.
Further engagement	**Stakeholder Consultation** In addition to the statutory public exhibition period, there has been additional engagement with the stakeholders regarding the proposed development. An overview of the recent and ongoing engagement activities and outcomes is provided below: It is noted that engagement with SCHN consumers and staff, CCI, South Eastern Sydney Local Health District (SESLHD) and UNSW will be ongoing throughout the assessment and detailed design stage of the project.
	SDRP The proponent team met with the SDRP on 2 June 2021 to discuss the proposed development. This was the fifth meeting with the SDRP and it took place following the lodgement of the EIS. The DRP provided feedback on the presentation suggesting that the architectural expression of the building with multiple colours, façade and blade patterning should be simplified and opportunities should be explored to incorporate colours in the ground plane to activate this space. Details of the resolution of these items are outlined in the Amended Architectural Design Report (**Appendix D**) and in **Section 5**.
	University of New South Wales The proponent has continued to consult with the adjacent landholder UNSW due to both the physical proximity of the site and the functional synergies between the institutions. Meetings with UNSW have occurred weekly from 23 July 2021 – 10 September 2021. Key matters of discussion included the opportunity to improve pedestrian connectivity within the precinct master plan, the Green Travel Plan, vehicular traffic (during both construction and operation of the facility), and the design of the airbridge connection between the UNSW HTH and SCH1/CCCC building. The UNSW and Health Infrastructure teams have agreed to develop a cantilevered, neutral and uniform design for the bridge link between the HTH and SCH1/CCCC sites. The teams will continue to develop and document the design of the links in collaboration with each other to ensure a uniform aesthetic is delivered.

Action	Description
	Randwick Council A meeting was held between the applicant and representatives of Randwick Council (Council) on 23 August 2021. Matters discussed included the width of High Street footpath, landscaping design - canopy cover and deep soil provision, traffic, parking and vehicular access and opportunities for improvements to pedestrian connectivity. Council requested that consideration be given to the potential to provide a wider footpath to the High Street frontage. This has been explored by the design team however additional width cannot be accommodated. The proposed High Street footpath design consisting of a 2.5m wide pavement and landscaping buffer of 1-1.2m responds to a number of physical and engineering constraints within the footprint of the project. Significantly, it incorporates the existing built stormwater infrastructure including raised pits along the High Street frontage of the site that are required to accommodate significant flood events. The current design provides a landscape buffer ensuring physical separation between pedestrians on the footpath and the stormwater infrastructure to reduce the risk of conflict. The overall landscape design provides for compliant grading whilst incorporating a flood mitigation wall. An increase the footpath width as requested by Council would result in a sub-optimal design solution due to significant changes in height between the existing footpath and the proposed plaza. The proposed footpath design for High Street is also consistent with the proposed solution for the adjacent UNSW HTH building and other sections of High Street in the immediate vicinity. Other recommendations of Council concerning bicycle connections and pedestrian connectivity will be considered in detailed design, design finalisation, commissioning, and operational stages
Further assessment	**Flood Assessment** Meinhardt Bonacci (MB) has provided a design for a permanent independent flooding barrier to be provided to High Street to prevent floodwater ingress from High Street. The proposed permanent flood barrier will be integrated within the landscaping for the hospital building. MB has assessed the efficacy of the proposed permanent flood barrier and confirmed that it will meet the requirements set out in the EES submission. The additional reporting prepared by MB is included at **Appendix G.**
	Traffic Arup has prepared an Addendum Transport and Parking Impact Assessment to address comments from TfNSW, Council and DPIE. The additional assessment includes: ▪ Details on the measures including associated technologies (implementation of dynamic wayfinding systems) that would be used to demonstrate the suggested parking utilisation can be achieved; ▪ A Stage 2 (Concept Plan) Road Safety Audit for the proposed vehicle and pedestrian access arrangement to the subject site;

Action	Description
	▪ Updated swept paths to address the largest design vehicles accessing the site and the carpark; and ▪ A queuing analysis of the entry / drop off loop road. Refer to the report at **Appendix I** and **Table 2** for further discussion of these results.
	<u>Overshadowing analysis</u> BLP has undertaken additional overshadowing analysis incorporating impacts from the proposed HTH building to determine the amount of solar access provided to the children's play area and the plaza. The solar access analysis is included within the architectural plan set at **Appendix C.** This analysis included hour by hour solar access studies as requested by DPIE. At the winter solstice there is no solar access to the children's playground due to the combined shadows cast by the SCH1/CCCC building and the HTH building. This is unavoidable due to the site orientation. The children's playground is located to the south of the development to enable the required functional layout of the hospital. The location provides a secluded retreat-like space for children, families and carers staying at or attending the hospital away from roads or large numbers of pedestrians. There are however multiple alternative informal and formal outdoor play areas available within the development – at the ground plane, and on a number of the terraces throughout the building. The landscaping at the interface with High Street will provide informal creative play opportunities for children with generous solar access. The northern parents' terrace on Level 01 will also receive sun all day at the winter solstice. Partial sunlight will be provided to the central plaza space between 11am -2pm. As with the children's playground, the location of the central plaza has been influenced by the layout of the hospital building. The current siting provides the opportunity to create a larger shared space between the SCH1/CCCC building and the HTH.

4. DESIGN REFINEMENTS

In response to feedback from SDRP Session 5, the submissions received, and consultation with HI some design refinements are proposed to the development as lodged.

The refinements relate primarily to the façade and the external interface of the development with the ground plane and neighbouring development. They also aim to provide improved pedestrian connectivity through the site to articulate linkages through the master planned precinct. An overview of the refinements is provided here. The Addendum Architectural Design Report prepared by BLP at **Appendix D** describes them in detail.

The changes comprise:

- **Simplification of the façade and form** - the number of different façade types has been minimised for clarity and construction efficiencies. Simplification of the façade reinforce the design concepts; break down the building scale; and maximises the play of light and shade. Refer **Figure 1** Refined scheme – High Street view
- that illustrates the façade design and colouration shown in the SSDA submission and compares this with the current refined scheme at **Figure 2.**
- **Rationalisation of colour** – the proposed colour palette has been refined and simplified. The façade will predominantly be a neutral base emulating sandstone with the sunshades providing warmer golden hues and tonal variation to the base building colour. To enhance public engagement, brighter and more intense colours will be located closer to the ground plane to demarcate entrances, and on levels 6-8 within the western courtyard. The concentration of colours in these locations echoes the landscape inspiration of lush undergrowth and green canopy.
- **Sunshade refinement** – additional modelling has been undertaken by ESD Consultants Steensen Varming, to ensure that the location, orientation and design of the sunshades maximise the thermal comfort levels of internal spaces. The sunshades have been integrated with the façade treatment; and colour palette strategy. Sunshades located along the folded metal façade have an angular profile, designed to appear to fold out from the rippling façade; the flat colour block glass façades have simpler rectilinear profiled sunshades.
- **Green spaces** - publicly accessible green spaces across the building have been integrated and enhanced. The proposal includes facade planting between levels 5 and 8 to create a green outlook from within the building and when viewed from the public plaza. The western façade has also been modified to be more open with a reduced and tapered soffit, and the introduction of clear glass balustrades and planting to the perimeter. Levels 6-8 consists of a series of terraces with planting to the perimeter, and vertical wires to allow the 'greening' of the façade overtime.
- **Ground Plane integration** - architectural elements have been further integrated and unified via a consistent design approach to the treatment of canopies, bridge links and soffits. Glazing has been used to increase transparency of the building at ground level, refer to **Figure 4** which shows the treatment to the central courtyard.
- **Ceiling heights -** Internal treatments have been used to increase the perception of internal volume to mitigate lower ceiling heights at ground level. The main north- south circulation corridor has a sloped ceiling to maximise height and sense of space. Soffits at ground level and upper levels to external terraces taper to meet façade edge, to increase the perceived height and openness of these areas.
- **Emergency Department Entry Level -** the entrance to and interior of this space has been reviewed and colour block glass panels and timber soffits provided to add warmth to this location- refer to **Figure 3.**
- **Pedestrian Connectivity** Aspect has reviewed the landscape design and a 5m wide pedestrian connection has been created to the south of the SCH1/CCCC building. The planting around the path has been shaped to ensure sight lines from the existing Ainsworth Building to the HTH will be clear and open. This new east -west connection provides a DDA-compliant path that is also separated from vehicular movements.

Figure 1 Refined scheme – High Street view

Source: BLP

Figure 2 SSDA scheme – design superseded - High Street view

Source: BLP

Figure 3 Emergency Department

Source: BLP

Figure 4 Central courtyard - ground plane integration

Source: BLP

5. RESPONSE TO SUBMISSIONS

The following **Table 2** provides a summary of all submissions received from agencies and authorities and provides a respective response.

Table 2 Response to agency and authority submissions

Issue	Referral comment	Response to submission	Reference to information
Department of Planning, Industry and Environment			
1. Design Excellence and Façade Design	The Department notes the advice of the State Design Review Panel (SDRP) in relation to the proposed façade design, that the multiple colours, façade and blade patterning is overly complex, and that further development of the façade materiality is also required in order to achieve the desired character referencing sand dunes and sea cliffs. The current design is therefore not considered to reflect design excellence. The Department recommends a detailed review of the façade design having regard to comments from SDRP (Session 5).	BLP has simplified the façade form and rationalised the colours and patterning to address the SDRP comments from Session 5. The façade employs repetitive folded panels to reinforce and simplify the built form. These are used to create a 'ripple like' effect across the lower levels of the building. A change in the panel scale and fold direction is employed at the upper sculptured form. As the sun moves across the surface of the building the panel folds will create a shifting shadow play throughout the day. A monochrome colour palette is employed for the metal folded panels, referencing the sand dunes and sandstone sea cliffs, as well as allowing the new SCH1/ CCCC to sit contextually within the surrounding building context. Intense colour has been limited to Levels 0-1 and the facades of Levels 6-8 which wrap around the western courtyard. The colour selection references the endemic landscape and will reinforce the wetland characteristics of a lush undergrowth and the upper tree canopies. The process of final	**Appendix C and Appendix D**

Issue	Referral comment	Response to submission	Reference to information
		colour selection provides an opportunity for connection to Country.	
	Provide consideration and response to other GANSW comments from SDRP (Session 5).	Section 7.0 of the Addendum Architectural Design report provides a comprehensive response to the GANSW comments from SDRP Session 5.	**Appendix D, Section 7.0**
	Provide further consideration of the design of sun shading devices having regard to façade orientation - refer to SDRP (Session 5) and Council advice.	Sun shading has been designed to optimise performance. The location, orientation and design of the sunshades aims to maximise the thermal comfort levels of internal spaces. The shape and configuration has been refined to maximise the play of light and shade. The sunshades will appear to' fold out' of the building panels and breakdown the scale of the built form (on the eastern facade); and add textural accent to areas where the form changes (the upper levels of the northern and southern facades).	**Appendix C**
2. Traffic and Access	Provide swept path diagrams and analysis for the largest proposed vehicle types at each vehicle entrance and loading bay area. Where necessary, revise the design to ensure swept paths are appropriate.	Arup has prepared swept path diagrams and analysis. These swept paths indicate that the Project's design satisfactorily accommodates access for the largest vehicle types.	**Appendix I**
	Provide sections for all vehicle access ramps (including the enclosed Hospital Road) demonstrating adequate clearances are provided the largest proposed vehicles in accordance with AS 2890.	Arup has provided sections demonstrating adequate clearance for the largest proposed vehicle. Where potential conflict points have been identified, these will be resolved through design development through co-ordination with relevant services and adjustment to structural elements.	

Issue	Referral comment	Response to submission	Reference to information
	Provide specific details of the proposed dynamic wayfinding system to be implemented in the main carpark and confirmation if, and how, these measures will be delivered to support the proposed development.	The traffic and transport response to submissions assessment includes details of parking guidance system (PGS) case studies that assist drivers to find empty car spaces and to efficiently locate their car when returning to the carpark. This analysis justifies the expected efficiency of the dynamic wayfinding system and the potential improvement to car park utilisation.	
3. Botany Street Drop off	Give further consideration to the design of the emergency department drop-off area to ensure clear, direct and intuitive access to the emergency department reception. Provide further details, including plans and elevations, detailing treatment of the area and images to demonstrate the amenity of the space.	Site constraints and functional consideration require the emergency department to be located on level B1. BLP have prepared updated 3D renders demonstrating clear access and amenity to the emergency department reception – refer to the amended architectural plans at **Appendix C.** The entry to the Emergency Department is characterised by coloured glass panels to provide interest and warmth to the façade in this location. The design of the entry canopy shares a similar structural expression and material treatment to that of the High Street entry canopy thus providing clear definition as an additional entry point of the Hospital. Detailed wayfinding and signage will be undertaken as part of future work package and will be developed to ensure clear, direct, and intuitive access.	**Appendix C**
4. Canopy Cover and Landscape Plans	Consideration should be given to improving tree canopy cover, noting the proposal falls short of minimum 25 per cent recommended within the	The landscape design team has undertaken a review of the design and tree canopy coverage. The site is constrained due to the	**Appendix E**

Issue	Referral comment	Response to submission	Reference to information
	NSW Government Architect's Draft Greener Places Design Guide. Any comparisons against the 'existing' canopy coverage to justify the proposed canopy cover should be based on an assessment of the canopy cover of the previous residential use of the site, prior to clearing of the site. Consideration should be given to opportunities to providing more or larger trees at the ground plane through improved soil depth and volumes for on-structure plantings and through more detailed consideration of opportunities and limitations of plantings above and around the stormwater culvert.	building footprint and basement below, limiting the ability to increase tree canopy coverage. There are also existing underground stormwater constraints. This creates significant challenges in providing required soil volumes to meet the 25% requirement of tree canopy coverage. The previous residential (now removed) tree canopy coverage was 22.4%. The maximum possible canopy coverage for the scheme is 15.5%. It is not possible to increase the proportion of canopy cover without compromising other important elements including maintaining pedestrian paths, clear and intuitive wayfinding, and building egress. The works to Hospital Road adjacent to the site (subject to separate approval) will enhance canopy cover across the precinct.	
	Visualisations indicate landscaping to upper levels terraces and utilisation of podium roof areas for landscaping, but no details are provided on the landscape plans. Landscape plans should be updated to include these areas and demonstrate provision of high-quality outdoor spaces for occupants of the building and to assist with offsetting any shortfall in tree canopy cover.	The amended landscape plans include additional details of proposed landscaping on the upper-level terraces. A series of accessible and inaccessible landscape spaces provide opportunities for patients, staff and visitors to experience the biophilic benefits of being in contact with plants and natural systems on a day-to-day basis. Outdoor space is provided throughout the building with key locations as follows: Level 01 -a northern terrace for patients and families, and an outdoor courtyard for staff is located on the southern side of the building.	**Appendix E**

Issue	Referral comment	Response to submission	Reference to information
		Level 04 - two outdoor terraces for staff overlooking the central plaza. Level 06 - an accessible outdoor terrace for patients and families as well as a narrow landscape terrace on the western façade providing a breakout area off the kitchen.	
	Consideration should be given to the design and layout of the landscaped area to the south of the building to create a more legible and direct east-west pedestrian connection between Hospital Road and Botany Street having regard to the alignment of the connection on the HTH site.	The landscape design team has reviewed the design to ensure a generous east-west connection is provided. This was investigated at both the southern and northern existing connection between Hospital Rd and Botany St, however the southern connection adjacent to the IASB building is constrained by the ambulance bay below, and existing levels, making it a poor choice for an intuitive pedestrian route. A minimum 5m DDA-compliant and accessible pedestrian east-west pathway has been created south of the SCH1/CCCC building connecting to the stairs and ramp on the HTH site. This connection will be included as part of the future master plan for the hospital to ensure this connects to a future east-west green spine between Hospital Road and Avoca Street. This pathway is shown in the updated landscape plans.	**Appendix C, Appendix E**
	Update the planting schedule on the landscape plans to provide the mature height and width of each proposed tree, as well as the number of each of the proposed trees to be planted.	The planting schedule within the amended landscape plan has been updated to reflect these details.	**Appendix E**

Issue	Referral comment	Response to submission	Reference to information
	Provide sections clearly demonstrating soil depth and volume for all plantings on structures and plantings over the stormwater culvert.	The amended landscape plan set includes sections through the stormwater culvert demonstrating that there is sufficient soil depth to support the types and size of proposed planting.	**Appendix E**
5. Amenity of Childrens' Play Area	The Department is concerned the children's play area will be heavily overshadowed and visually enclosed by surrounding built forms. The provision of an attractive outdoor space for patients of the Children's Hospital is considered an important aspect of the amenity of the building. Therefore, provide further details, visualisations and hourly solar access studies (incorporating shadowing from the proposed HTH) to demonstrate how a high level of amenity would be achieved to the proposed space. If a high level of amenity is not achieved, consideration should be given to supplementing this play space with additional attractive and safe open space for patients such as utilising the podium roof to create additional open space for patients.	The children's play area in the southern podium is not the sole area available for children's play. It is supplemented with additional opportunities for informal play and discovery in both the central courtyard area, as well as along the eastern podium. These includes areas that do receive generous solar access- the northern landscaped area adjacent to High Street and the northern terrace on Level 01. BLP has prepared hourly shadow diagrams showing the shadows cast by SCH1/CCCC and HTH. At the winter solstice the Childrens' playground will be in shadow. However, the outdoor play space will be shaped to provide opportunities for engaging and diverse experiences to occur for ages 0-18 years, as well as families and caregivers. The design team is also working with Yerrabingin and engaging with local indigenous communities, both elders and children, to develop opportunities for this space to become meaningful and playful, and respond directly to the outcomes of the community.	**Appendix C and** **Appendix D**

Issue	Referral comment	Response to submission	Reference to information
6. Flooding	Provide updated information on flood protection to address concerns raised by the Biodiversity and Conservation Branch, including: • consideration of incorporation of a separate flood barrier where appropriate, with further information on the design of the barrier and updated modelling. • a table or plan demonstrating the flood levels and finished floor levels at all entrances including carpark entrances and measures to protect against ingress of floodwaters.	MB has responded to these comments, please refer response to Item 8 below.	**Appendix G**
7. Clarification of Extent of Works	The project description in the EIS includes 'New High Street Visitor Drop Off' however this is not reflected in the plans. Please clarify or correct.	The project description has been amended to remove this element. This is outside of the site.	N/A
	Please clarify whether the remaining works within Hospital Road shown on the plans have been already approved as part of the road lowering, or identify the future approval pathway for those works.	A Review of Environmental Factors (REF) was prepared and has been approved for the Hospital Road ground works. The above ground landscaping works will be subject to a future approval. The planning pathway for this scope of work is yet to be determined and will be identified following further design development and stakeholder engagement.	N/A
Environment, Ecology and Science (EES)			
	EES notes that the site has been cleared of buildings and vegetation as part of the Randwick Campus Redevelopment and has no comments in relation to biodiversity.	Noted.	N/A
8. Floodplain Risk Management	The emergency department and car park for Sydney Children's Hospital Stage 1 and Children's Comprehensive Cancer Centre are	MB has responded to these comments in a revised flooding assessment report. To provide flood protection for the IASB building	Appendix H

Issue	Referral comment	Response to submission	Reference to information
	proposed below ground level and below the relevant flood level. The Flood Modelling Assessment (Meinhardt Bonacci, 27 April 2021) notes correctly that a flood barrier 500mm above the probable maximum flood (PMF) of 1.4m in High Street will be required to protect the building from flooding. The subject development and the adjoining Health Transition Hub (SSD-10822510) buildings are proposed to be the flood barrier. EES does not support the use of new hospital buildings as a flood barrier – any required barrier should be separate and independent to any building wall. EES requests additional information be provided on the flooding issues, including revised reporting and drawings as follows.	and the precinct an impermeable barrier to RL56.25 is required along the full length of High Street in front of the SCH/CCCC and HTH buildings. As the IASB building will be occupied prior to the construction of the SCH/ CCCC and HTH buildings a temporary flood barrier will be required. The MB report proposes temporary and permanent flood mitigation measures as follows: 1. Prior to occupation of the IASB building, a sufficient barrier should be in place along the full frontage of High Street. This barrier needs to be at or above the PMF plus freeboard level. This barrier needs to be watertight and able to resist the hydrostatic pressures imposed by the flood water. Options could include a wall of suitable construction or a soil berm engineered to prevent piping. A flood barrier will also need to be constructed along the Botany St boundary to provide the required freeboard to the floodwaters flowing down the road reserve. 2. During construction of the SCH1/CCCC building a sufficient flood barrier needs to be maintained along the High St frontage of both the HTH and SCH1/CCCC sites. This barrier needs to be at or above the PMF plus freeboard level. 3. On completion of the SCH1/CCCC development, interim flood protection will still need to be provided along the High Street and	

Issue	Referral comment	Response to submission	Reference to information
		Botany Street boundaries of the HTH site until that building is completed. 4. The basement entry off Botany Street is protected by a crest entrance level in the forecourt set at the 1% AEP plus freeboard level. Additionally, the adjacent structural walls of the entry ramp to the basement are to be set at a height above the 1% AEP plus freeboard level to also provide a permanent solution to protect the basements of both the project and the HTH building.	
	1. A description of the flood barrier, including the following: - Material type - Finished surface levels at suitable intervals along the top of the barrier - How the barrier would tie in to surrounding ground to prevent outflanking, i.e., floodwater making its way around the barrier, and	MB has designed an independent permanent flood protection structure for the High Street frontage. Drawing SK 210725-01 within the MB report illustrates the proposed structure. The barrier is concrete with a reinforced concrete base and will be integrated with the landscape design. The main entry steps which will also provide flood protection to the building. The top of the retaining wall will be set at the flood design level RL56.25M (PMF + freeboard). The permanent SCH1/CCCC barrier and main entry steps will extend to the east to marry with proposed Hospital Road levels. The Hospital Road levels will be at or above the design flood level in order to prevent outflanking of the flood waters from the east. To the west the SCH1/CCCC permanent barrier will connect to a temporary flood	**Appendix H**

Issue	Referral comment	Response to submission	Reference to information
		protection barrier during the construction of the HTH building. The permanent barrier will suitably tie into the temporary HTH barrier to prevent outflanking of the flood waters. The tie in detail between the SCH1/CCCC permanent wall and the HTH temporary wall is to be confirmed once the HTH barrier design is developed. The junction will be suitably designed to hold back any flood waters. The permanent HTH flood barrier is to be designed by others. Please refer to SSD-10822510.	
	- How the barrier would interface with the building, e.g., whether any footings are likely to be required and if these can feasibly be provided separately to the hospital building.	The proposed flooding barrier will be independent of the main building. Refer Drawing SK 210725-01.	**Appendix H**
	2. The Flood Modelling Assessment states that the flood barrier must be watertight and able to resist hydrostatic pressures. In addition, the flood barrier below the PMF level must be designed to achieve the following: - withstand the impact of likely debris, such as floating cars - accommodate predicted scour, and - withstand buoyancy and drawdown forces, if applicable.	The proposed design for the flooding barrier illustrates a proposed lower height wall in front of the taller main flood protection wall. The proposed lower wall can act as a protective barrier and will be designed to withstand debris from the flood waters. The rate of flow of flood water (and therefore debris) in this urban (i.e not tidal or riverine) and relatively flat setting is not anticipated to be fast.	
	3. For all potential flood ingress points to below ground levels of the development, the level of the entry and relevant flood level must be stated (preferably tabulated to allow ease of comparison), and a description provided of how it	A table with this information is provided in the flooding assessment report. All areas are above the relevant flood design level and protected from floodwater ingress.	**Appendix H**

Issue	Referral comment	Response to submission	Reference to information
	will be protected against the ingress of floodwater. This will include, but is not limited to: - Basement carparks (the PMF event or 1% AEP event plus 500 mm freeboard would apply) - The driveway from Botany Street, and - Air vents/louvre openings along the north elevation, including specification of the minimum permissible level(s) for any such openings on architectural drawings.		
EPA			
9. Waste Classification	The applicant must classification waste, including construction waste and excavated materials in accordance with the Protection of the Environment Operations Act 1997 (POEO Act) and the associated Waste Classification Guidelines (dated 2014). The EPA's waste classification guidelines can be found at https://www.epa.nsw.gov.au/your-environment/waste/classifying-waste/waste-classification-guidelines. The use of excavated materials can only occur without the need for the off-site receival site to hold an environment protection licence where the material has been classified as Virgin Excavated Natural Material (VENM), Excavated Natural Material (ENM) or a material consistent with the conditions of a specific resource recovery exemption/order. The definition of VENM and ENM are provided in the POEO Act.	This process will be completed post-determination in accordance with a relevant condition of development consent. No further comment.	N/A

Issue	Referral comment	Response to submission	Reference to information
10. Construction Noise	Excavation activities may cause off-site impacts that affect sensitive receptors and local communities. The EPA requests that the proponent applies feasible and reasonable mitigation actions to minimise off-site noise impacts. The EPA's Construction Noise Guideline provide guidance on managing construction works to minimise noise (including airborne noise, ground-borne noise and blasting), with an emphasis on communication and cooperation with all involved in, or affected by, construction noise. No single approach can minimise noise from all types of construction. The level of effort and sophistication needed to assess impacts and identify ways to minimise noise will be guided by factors such as the duration of works and the extent of the noise.	This process will be completed post-determination in accordance with a relevant condition of development consent. No further comment.	N/A
	The EPA does not require any follow up consultation. Randwick Council should be consulted on this proposal.	Noted.	N/A
Transport for NSW			
11. Protection of TfNSW Infrastructure and Sydney Light Rail Operation	The light rail infrastructure must be protected and any disruptions to its operation are to be minimised during the construction and operation of the subject development. It is advised that the applicant needs to assess the impacts of the operation of the Sydney Light Rail on the future locations of sensitive equipment (if any) within the subject site,	MB has prepared a statement considering the proximity of the light rail to the proposed basement excavation of the SCH1/CCCC. The light rail is located approximately 16.75m away from the basement of the SCH1/CCC basement and outside the zone of influence for the proposed excavation. Additionally, it is not anticipated that the light rail will be	**Appendix J**

Issue	Referral comment	Response to submission	Reference to information
	particularly in regard to Electromagnetic Interference and Vibration and design the development to mitigate potential impacts of the Sydney Light Rail. Recommendation It is advised that the applicant must provide detailed engineering drawings, which illustrate the delineation of the light rail tracks (and relative dimensions to the excavation area) as part of the response to submissions. The applicant must be conditioned to: - Provide all relevant documentation as requested by TfNSW for review and endorsement prior to issuing the relevant Construction Certificate; and - Protect TfNSW infrastructure and to minimise disruption to the light rail operation during the construction and operation of the subject development.	affected by the proposed excavation for the project. A drawing identifying that the proximity of the SCH1/CCCC basement is included with the statement. The proposed condition requirement including the preparation of detailed engineering drawings is acceptable.	
12. Parking Demand and Management	Section 5.2 of the Traffic and Transport Assessment prepared to support the development application states the following: "Currently parking behaviours indicate that the average occupancy of the car park during the peak period is 91% on a weekday. A review of literature indicates that a dynamic wayfinding system has the potential to increase operational capacity of a multi-storey car park to the vicinity of 95%."	The addendum transport and parking assessment addresses these comments. A potential technology proposed within the carpark to support the utilisation rate of 95% is a PGS to assist drivers to find empty car spaces and to relocate their car when returning to the carpark. A PGS system includes: ▪ Lighting above every parking space to indicate unoccupied and occupied spaces	**Appendix I**

Issue	Referral comment	Response to submission	Reference to information
	"For the Project, this means an additional 95 parking bays will be required in the main car park to offset staff parking demand and to account for additional visitor/outpatient parking demand." Recommendation It is requested that the applicant provides the following as part of the applicant's Response to Submissions: - Details on the measures including associated technologies (implementation of dynamic wayfinding systems and car stackers) that would be used to demonstrate the suggested utilisation can be achieved; and - Evidence such as calculations or examples of car parks, with a similar turnover rate to the existing hospital car park, can or do operate effectively at 95% utilisation.	▪ internal positioning system (IPS) – to provide wayfinding and guidance within the carpark PGS are used in large shopping centres and improve carpark efficiency by guiding drivers to available spaces thus reducing circulating time and maximising the occupation of all available spaces. PGS are successful in multi storey carpark settings where drivers are looking for spaces within smaller footprint. PGS have been implemented in multi storey carparks at Blacktown Hospital and Westfield Parramatta. A review of both projects found: ▪ Lighting above each carpark space reduces the time spent by drivers on each floor of a MSCP and in navigating each aisle of a carpark ▪ As a result of the time savings provided by the PGS, a higher occupancy rate is possible as parking spaces are empty for shorter amounts of time ▪ A PGS system results in a more efficient use of a whole carpark by spreading parking demand across all levels ▪ Data gathered by PGS can be used to understand peak occupancy and be conveyed back to carpark users which may result in changing travel choice or time of visitation ▪ Installation of PGS can reduce overall fuel consumption and carbon emissions.	

Issue	Referral comment	Response to submission	Reference to information
		Arup notes that alternative measures, such as stacker spaces or physical changes to the carpark to improve circulation, could also be considered, however these are not currently proposed as a management response.	
13. Travel Demand Management	It is noted that a Green Travel Plan (GTP) has been prepared as part of the Traffic and Transport Assessment. It is advised that - The applicant updates and expands the existing GTP developed for the Randwick Hospitals Campus (SSD-10339-Mod-1), to provide for sustainable travel solutions for travel demand generated by the development; - The GTP needs to be developed in collaboration with the UNSW Health Translations Hub development (SSD-10822510) due to their cumulative impact, and to ensure consistency across the project sites and to identify potential synergies; - The applicant needs to identify how ongoing activities and/or those that are not completed by the Health Infrastructure prior to occupancy will be transferred to and/or delivered by Sydney Children Hospital, including provision of funding anD16:D17d resourcing for those activities, for a period of at least 5 years post-occupancy; and - TfNSW would welcome further discussions with the proponent regarding these matters to ensure their delivery.	Given the NSW Government's significant investment in public transport improvements and the strategic shift toward more sustainable transport modes, the Randwick Campus Redevelopment is focused on delivering an integrated approach to travel and access planning. Randwick Health & Innovation Precinct partners continue to work with the NSW Government to ensure current and future transport and access needs are considered and managed in a coordinated way across the new facilities. This includes implementing the Green Travel Plan, targeting a mode shift from parking to more sustainable travel modes including walking, cycling and public transport. This approach seeks to reduce the amount of people driving to work, and encourages maintenance of existing road network demands, in line with the long-term strategic shift to more sustainable travel across metropolitan Sydney as the population grows. The GTP will be updated in coordination with landholders within the precinct and address the matters raised by TfNSW. This update will take place prior to issue of Occupation	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	Recommendation It is requested that the applicant be conditioned to update the Green Travel Plan in consultation with TfNSW and submit a copy of the final plan for TfNSW endorsement, prior to the issue of the Occupation Certificate. "	Certificate in accordance with the recommended condition.	
14. Safety Assessment of the Proposed Development	The proposed access arrangement allows light and heavy vehicle movements via Botany Street with multiple conflicts at the access to the loading dock to the Health Translation Hub, the loop road and the cark park access for the subject site. The following conflicts in vehicle / pedestrian movements would have the potential to cause safety issues: - Vehicles accessing the loading dock for the Health Translation Hub (HTH) and the car park for the subject development; - Vehicles accessing the loading dock for the HTH and the proposed loop road; and - Vehicles accessing the subject site as well as other properties adjacent to the site and pedestrian accessing these sites. Swept paths analysis has not been undertaken for the maximum size of the vehicle accessing the loop road (Ambulances) via Botany Street in the Traffic and Transport Assessment. Recommendation	The SCH1/CCCC and UNSW HTH project teams have worked collaboratively throughout design development of both projects. A consolidated loading dock was considered during masterplanning, however ultimately was not deemed to be a feasible solution due to: ▪ Different loading dock levels at the HTH and SCH1/CCCC. ▪ Staging of the respective projects; and ▪ Potential conflicts between clinical and UNSW operations.	**Appendix I**

Issue	Referral comment	Response to submission	Reference to information
	It is requested that the applicant undertakes the following as part of the Response to Submissions: - Consider providing a consolidated loading dock for the subject site as well as the Children's Hospital Stage 1 and Children's Comprehensive Cancer Centre with access via Hospital Road. This is to remove the heavy vehicle access via Botany Street;		
	- A Stage 2 (Concept Plan) Road Safety Audit for the proposed vehicle and pedestrian access arrangement to the subject site in accordance with Austroads Guide to Road Safety Part 6: Managing Road Safety Audits and Austroads Guide to Road Safety Part 6A: Implementing Road Safety Audits by an independent TfNSW accredited road safety auditor; and	A Stage 2 Road Safety Audit (RSA) has been prepared in accordance with Austroads Guide to Road Safety Part 6 and Part 6A. The audit area comprises the proposed access for vehicles and pedestrians off Botany Road, ramps to the carparks and carpark circulation. The key findings of the RSA are that a barrier system is required along the carpark ramp access, and further details about signage and linemarking are required. These items will be addressed the detailed design phase.	**Appendix I**
	- A swept path analysis for the maximum size of the vehicle (Ambulances) entering and leaving the loop road to / from Botany Street. Based on the results of the road safety audit and the swept path analysis, the design drawings need to be reviewed to identify safety measures that may need to be implemented.	Swept path analysis has been included as Appendix A of the addendum transport and parking assessment. The swept paths indicate that the Project's design satisfactorily accommodates access for ambulances.	**Appendix I**
15. Operational Traffic Management	It is noted that a number of different users from multiple sites will be accessing the proposed entry route/ drop off area/ loop road. It is not clear	A queuing analysis of the entry / drop off loop road has been prepared as part of the Arup addendum transport and parking assessment. This assessment has drawn upon trip	**Appendix I**

Issue	Referral comment	Response to submission	Reference to information
	how this area will be managed such that queuing back onto Botany Road will not occur. Recommendation It is requested that the applicant provides the details on the estimated number of vehicles using the proposed entry route/ drop off area/ loop road and undertakes a queuing analysis to confirm that the proposed access and internal circulation arrangements would not cause queuing on Botany Street as part of the applicant's Response to Submissions.	generation data for the SCH1/CCCC, the Integrated Acute Services Building (IASB) and the UNSW HTH. The analysis found that the proposed parking bays will satisfy the peak hour demand 90% of the time). Accordingly, the queuing expected at the Botany Street access is likely to be minimal (10% probability of occurring during the peak hour) and is not expected to impact the existing road network.	
16. Construction Pedestrian and Traffic Management	It is noted that a Preliminary Construction Pedestrian and Traffic Management Plan (CPTMP) has been prepared as part of the Traffic and Transport Assessment. It is advised that the applicant updates and expands this Plan in consultation with TfNSW to prepare a CPTMP. Recommendation It is requested that the applicant be conditioned to prepare a Construction Pedestrian and Traffic Management Plan (CPTMP) in consultation with TfNSW and the Sydney Light Rail Operator and submit a copy of the final CPTMP for TfNSW endorsement, prior to the issue of any construction certificate or any preparatory, demolition or excavation works, whichever is the earlier.	Noted. In accordance with this advice the CPTMP will be updated in consultation with TfNSW and Sydney Light Rail. This will be completed prior to issue of the construction certificate in accordance with an anticipated condition of consent.	N/A
Heritage NSW			

Issue	Referral comment	Response to submission	Reference to information
17. Heritage	The subject site is not listed on the State Heritage Register, nor is it in the immediate vicinity of any SHR items. It is noted the following State Heritage Register items are in the greater vicinity of the subject site: • Corana and Hygeia (SHR no. 00454) • Sandgate (SHR no. 00067) • Ritz Theatre (SHR no. 00348) • Big Stable Newmarket (SHR no. 00388) • Nugal Hall (SHR no. 00173) As delegate of the Heritage Council of NSW, I provide the following comments: • The SHR items are separated by existing development and therefore there are no visual links. • No significant views of the SHR items will be impacted by the proposal. No further heritage comments are required in relation to built heritage. The Department does not need to refer subsequent stages of this proposal to the Heritage Council of NSW in relation to built heritage.	Noted.	**N/A**
18. Aboriginal Cultural Heritage	Aboriginal cultural heritage regulation advice for EIS The Aboriginal cultural heritage assessment provided for the EIS meets the SEARs for this SSD to the satisfaction of Heritage NSW. Heritage NSW support the mitigation measures and recommendations outlined by Mary Dallas	Noted and agreed. No further action required at this time.	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	Consulting Archaeologists (MDCA) in Section 6.0 (on pages 39-40) of the ACHAR (October 2018). These mitigation measures are also referenced in the EIS (sections 7.5.4. and 8.2). We recommend that the conditions of consent specifically reference the monitoring methodology in the ACHAR.		
Sydney Water			
19. Water Servicing	Potable water servicing should be available via a 150mm CICL watermain (laid in 1940) on High Street. Adjustments or amplifications to the potable water network may be required complying with the Water Services Association of Australia (WSAA) code – Sydney Water edition. This advice is not formal approval of our servicing requirements. Detailed requirements, including any potential extensions or amplifications, will be provided once the development is referred to Sydney Water for a Section 73 application.	A Section 73 Compliance Certificate will be obtained post-determination of the SSDA in accordance with the conditions of development consent.	**N/A**
20. Wastewater Servicing	Wastewater servicing should be available via the existing sewer connection to the site. Adjustments or amplifications to the wastewater network may be required complying with the Water Services Association of Australia (WSAA) code – Sydney Water edition.		
	This advice is not formal approval of our servicing requirements. Detailed requirements, including		

Issue	Referral comment	Response to submission	Reference to information
	any potential extensions or amplifications, will be provided once the development is referred to Sydney Water for a Section 73 application.		
Randwick City Council			
21. Pedestrian Connectivity – East West Pedestrian Link	The Randwick Hospital expansion area, within which the SCH1/CCCC building is located, adjoins the UNSW Kensington Campus to the west and the existing RHC to the east. The UNSW University Mall and Library Walk provide the primary east-west midblock pedestrian route and unifying the social spine through the university campus - from Anzac Parade to Botany Street. The signalised crossing proposed on Botany Street at Gate 11 will further enhance the safety and legibility of this east-west pedestrian spine.	The Applicant notes the benefits of the proposed Botany Street signalised crossing. The new signalised intersection on Botany Street, being delivered as part of the Integrated Acute Services Building project, has informed the design development of the SCH1/CCCC to maximise legibility and connectivity of the east-west pedestrian spine.	**N/A**
	To the south east of the proposal, Nurses Drive and Delivery Drive provides the only viable open air east-west mid-block pedestrian route through the hospital campus - from Avoca Street to Hospital Road. This pedestrian pathway should be progressively upgraded and enhanced to improve pedestrian legibility, complaint accessibility, pedestrian safety, and amenity, as part of a long-term masterplan. See commentary below under the heading 'Bicycle access' below for further detail.	The Applicant notes the importance of east-west pedestrian connections through the existing hospitals campus. The SCH1/ CCCC design has taken into account the aspirations of the Randwick Health & Innovation Precinct by enhancing connections that can be further built upon by future stages of development across the hospitals campus. The design has incorporated key connections with the existing hospitals campus that are aligned with the precinct masterplan vision.	**Appendix C** **Appendix E**
	The proposed plans provide a constrained, confusing, and poorly articulated podium-level east-west route from the Botany Street footpath	The Applicant notes the importance of the podium-level east-west connection. The SCH1/CCCC design has been updated to	**Appendix E** **Appendix F**

Issue	Referral comment	Response to submission	Reference to information
	via the UNSW HTH building south podium to the Hospital Road shared path. It is recommended that the generous width connection proposed along the south edge of the UNSW HTH building is continued to ensure a direct and seamless connection to deliver a coordinated pedestrian route from Botany Street through to Hospital Road, and in the future, continuing east through the RHC.	provide an improved east-west connection across the podium-level. The improved design creates a wide pathway to the south of the SCH1/CCCC building, with the podium-level landscaping enhanced to ensure appropriate viewlines provide for a clear, open and intuitive east-west pedestrian route. Please refer to Appendix F for the updated podium-level east-west pedestrian route.	
	Council notes that the completion of this east-west campus pedestrian pathway, through the hospital expansion area to link the university and hospital campuses is critical to the successful movement of pedestrian workers, visitors and residents between the university and hospital campuses and beyond.	The Applicant notes the importance of the east-west pedestrian pathway proposed as part of the SCH1/CCCC SSDA. The SCH1/CCCC design has been developed to enhance the aspirations of the Randwick Health & Innovation Precinct that can be further built upon by future stages of development across the hospitals campus. The design supports and strengthens connections and wayfinding throughout the site and beyond, enabling visitors, patients and staff to experience a seamless journey across the health precinct.	**N/A**
22. Pedestrian Connectivity – High Street footpath	The proposed pedestrian footpath along High Street is approximately 2.5m wide with a nature strip of approximately 1-1.2m. Council requires a minimum footpath width of 4.5 metres to provide for the increased density of new development and to cater for projected increased pedestrian movement along High Street, including movements generated by patronage. It is understood that flooding constraints have	The Applicant does not support the recommendation to increase the footpath width as this would result in a sub-optimal design solution. The Applicant is committed to achieving the aspirations of the Randwick Health & Innovation Precinct vision to be healthy, green and connected and has designed high quality	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	informed the design of the footpath and landscaping along High Street, however widening of the footpath width in this location should be further investigated.	footpaths and significant public plazas within the Redevelopment to appropriately cater to increasing pedestrian activity. The Applicant notes that over 3,000 sqm of publicly accessible pedestrian plaza and landscaping will be delivered by SCH1/CCCC opening up numerous new pedestrian routes within and across the footprint of the Randwick Campus Redevelopment (comprising SCH1/CCCC, IASB and HTH) within the broader context of the precinct. This includes an improved and generous 5m east-west connection to the south of the SCH1/CCCC and HTH. The proposed High Street footpath design consisting of a 2.5m wide pavement and landscaping buffer of 1-1.2m responds to a number of physical and engineering constraints within the footprint of the project. The design incorporates the existing built stormwater infrastructure including raised pits along the High Street frontage of the site that are designed to accommodate significant flood events. The current design provides a landscape buffer ensuring physical separation between pedestrians on the footpath and the stormwater infrastructure to reduce the risk of conflict. The overall landscape design provides for compliant grading whilst incorporating a flood mitigation wall and significant changes in height between the existing footpath and the proposed plaza.	

Issue	Referral comment	Response to submission	Reference to information
		The proposed footpath design for High Street is consistent with the proposed solution for the adjacent UNSW HTH building and other sections of High Street in the immediate vicinity.	
23. Pedestrian connectivity – Bicycle Access	Significant improvements must be made to bicycle access through the campus to the proposed End of Trip Facilities. This is especially so given that within the 2019 RHC Staff Travel Census, two of the top five barriers to the use of bicycles as a mode of transport to work include 1) lack of local infrastructure: lanes/ paths/ routes, and 2) navigating traffic and busy roads (rider confidence). From the perspective of people who choose to ride a bicycle to and from the SCH1/CCCC building, there are significant challenges when approaching the site from the east and from the south.	The Applicant notes the routes referenced in this comment are outside the SCH1/CCCC SSDA site area. Notwithstanding this, the SCH1/CCCC project is committed to enhancing campus connections in line with the aspirations of the Randwick Health & Innovation Precinct. Health In frastructure welcomes ongoing consultation with Council to explore opportunities with the relevant stakeholders that enhance the use of existing bicycle pathways provided through the campus.	**N/A**
	Anecdotal feedback indicates that many professionals working within the Randwick Health and Innovation Precinct (RHIP) choose to reside near to Coogee Beach. From the east, it is now very difficult to ride along High Street. This is due to the complex road and rail layout and the narrow and busy footpaths near to the light rail terminus in High Street. Accordingly, and in support of the objectives of RHC Green Travel Plan, it is recommended that Health Infrastructure must work closely with Council to nominate and design an appropriate east-west link though the combined campuses - to link Magill Street (near	The Applicant notes Francis Martin Drive provides an appropriate shared east-west link that is and will continue to be utilised by cyclists to access the proposed End of Trip facilities. In line with the key principle of enhancing campus connections, Health Infrastructure welcomes close collaboration with Council to explore opportunities available that enhance this existing east-west link.	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	to the proposed End of Trip facilities) with Avoca Street.		
	In addition, recent residential developments to the south of the RHIP (including the Newmarket) create latent demand for improved access for bike riders approaching from the south and from existing bicycle links further south across Anzac Parade and down to the Maroubra Junction/ Eastgardens area. Again, Council seeks close collaboration with Health Infrastructure to explore the opportunities to strengthen north south bike links, such as along Hospital Road.	The Applicant notes Hospital Road south of Magill Street provides an appropriate shared north-south link that can be utilised by cyclists to access the proposed End of Trip facilities from the south. In line with the key principle of enhancing campus connections, Health Infrastructure welcomes close collaboration with Council to explore potential opportunities that may assist to enhance this link.	**N/A**
	The creation of strong east-west, and north-south links for those who choose to ride bicycles would strongly align with the objectives of RHC Green Travel Plan. Council recommends a condition of consent requiring that Health Infrastructure work together with Council to establish east-west and north-south bicycle routes to meet the objectives of the RHC Green Travel Plan. This is required to ensure the needs of all workers and visitors who choose to ride to each of the many campuses within the Randwick Health and Innovation Precinct are met.	The Applicant notes the availability of existing shared east-west and north-south links that are currently and will continue to be used by cyclists. In particular, Francis Martin Drive and Hospital Road south of Magill Street. The Randwick Campus Redevelopment is committed to holistically enhancing campus connections and wayfinding in support of the aspirations for the Randwick Health & Innovation Precinct. Health Infrastructure supports close collaboration and welcomes ongoing consultation with Council to explore potential opportunities that may assist to enhance the available shared bicycle links.	**N/A**
	The significantly improved End of Trip facilities proposed in close proximity to the Integrated Acute Services Building within the existing hospital car park (and those proposed in the HTH building) are very welcome. However, access to	The Applicant notes the significantly improved proposed End of Trip facility, being delivered as part of the Integrated Acute Services Building project, and the importance of this facility in meeting the objectives of the	

Issue	Referral comment	Response to submission	Reference to information
	these facilities for bike riders negotiating the hospital campuses has to be clearly marked, very legible and must be designed to be safe and separated from other traffic. Again, Council recommends a condition of consent requiring Council and Health Infrastructure work together to establish strong and safe east-west and north-south bicycle routes	Randwick Hospitals Campus Green Travel Plan. The SCH1/CCCC project is focused on enhancing connections and wayfinding across the site to enable seamless journeys across the health precinct to align with the aspirations of the Randwick Health & Innovation Precinct. Health Infrastructure supports close collaboration and welcomes ongoing consultation with Council to explore opportunities that may assist to enhance the existing shared bicycle links to the proposed End of Trip facility. Access to the end of trip facilities within SCH1/CCCC will be clearly identified with signage to be developed at the detailed design stage.	
24. Pedestrian Connectivity – Parking	It is acknowledged that for the 40 extra beds proposed by 2025, the provision of a new visitor car park will result in up to 50 additional parking bays. It is also acknowledged that the proposal seeks to optimise the operation of existing parking assets with the existing RHC main car park, which is being investigated for potential optimisation in efficiency which includes implementation of dynamic wayfinding systems and car stackers. The details of these proposals are not provided within the submitted EIS or accompanying documentation. Detail should be provided during the assessment and prior to the approval of the proposal. It is indicated that a proposed dynamic wayfinding system has the potential to increase operational capacity of a	Refer to previous response to TfNSW comment at Item 12. The traffic and transport response to submissions assessment includes details of PGS to assist drivers to find empty car spaces and to relocate their car when returning to the carpark. Arup notes that as the existing RHC carpark has an unintuitive layout and does not have the capability to gather data about occupancy rates and length of stay it is likely to benefit from the implementation of a PGS.	**Appendix H**

Issue	Referral comment	Response to submission	Reference to information
	multi-storey car park in the vicinity of 95%. This may result in an increase in efficiency of 4%, potentially providing an additional capacity of 65 parking spaces during peak times. However, the details of this approach are not provided. Further details and recommendations should be provided during the assessment and prior to approval of the proposal.		
25. Emergency Department – Vehicle Access and dropoff/pickup	The proposed Botany Street drop off to the emergency department is characterised by blank walls, significant hard paved areas and narrow paved footpaths and waiting areas. Further, it is unclear how visitors and patients arriving by car can easily and intuitively understand the direction to take to the reception, triage and waiting area. Council questions why the IASB Satellite Imaging facility is located at the emergency drop off.	Competing requirements for access to not only the Emergency Department, but also the IASB and the HTH have all been considered in the design of this shared vehicular entry and drop off point. The location and design of the Emergency Department is based on required functional adjacencies and workflows and ensures a clear arrival point and clear and direct access to triage as a key functional priority - this is illustrated in the updated architectural drawings at Appendix C. BLP have provided updated additional renders demonstrating how clear access and amenity will be provided to the emergency department reception. Detailed wayfinding and signage will be undertaken as part of future work package and will be developed to ensure clear, direct, and intuitive access.	**Appendix C** and **Appendix D** - refer to Appendix A of this report for the architectural renders.
26.	A further concern is the significant overshadowing of this arrival area throughout the year and particularly in winter. This contrasts with	As noted previously, functional adjacencies require the Emergency Department to be located on Level B1. Competing requirements	**Appendix C**

Issue	Referral comment	Response to submission	Reference to information
	the current sunny north facing High Street entry. Additional information and detailing is required to demonstrate how this waiting space will be treated to provide a warm and inviting arrival experience and safe waiting area for parents and children, given the constraints outlined above.	for access to not only the Emergency Department, but also the IASB and the HTH have all been considered in the design of this shared vehicular entry and drop off point. Coloured glass panels provide interest and warmth to the façade in this location to reflect the colours of wetlands. Within the emergency department, opportunities for public art will be considered at the detailed design stage to optimise the warmth and amenity provided within this space. Refer to architectural drawings for additional internal detail of the emergency department.	
27. Emergency Department Location	Council questions the location of the children's emergency department underground in a location with no real outlook and only token access to natural light and sunshine.	The location and design of the emergency department within the hospital is based on required functional adjacencies and workflows. Providing a clear arrival point and direct access to triage is a key functional priority and the design delivers this - as illustrated in the updated architectural drawings at Appendix C.	
28. Landscaping and Deep Soil provision	The north facing ground level plaza and the overall landscape and planting themes are generally supported. However the location of the proposed deep soil zones above a stormwater culvert along High Street and in the leftover areas around vehicular ramps to the south of the HTH building are unsatisfactory outcomes and do not satisfy the intent of deep soil provisions, which are to provide consolidated landscaped areas that people can enjoy that allow large trees to	The existing stormwater infrastructure, coupled with the building infrastructure, provide limited opportunity for deep soil on site. The design provides sufficient soil depth over the culvert to enable planting.	**Appendix E** **Appendix F**

Issue	Referral comment	Response to submission	Reference to information
	prosper. Further, areas with structures underneath, including culverts are not considered to be deep soil zones.		
	Significant benefit would be realised if deep soil areas were provided in the plaza. This would permit larger trees to be planted to provide shade and contribute to tree canopy requirements. It is also noted that one of the larger trees proposed in the child play area would not be possible due to the low clearance of the pedestrian bridge that crosses over the play area.	The B1 emergency department is located below the plaza which prevents the ability to provide significant deep soil in this area. The landscape design has been reviewed by Aspect and an updated planting schedule provided to ensure that proposed plantings are supported by sufficient soil depth.	**Appendix E** **Appendix F**
	Further landscape detail is required for the proposed roof level and upper level terraces as the building form steps back. The podium roof areas should be utilised to provide outdoor landscaped terraces areas for patients, visitors and workers where possible.	The amended landscaped plans include further details that illustrate the extent and use of the outdoor terraces. Level 1 (north),Level 4 (northwest and southwest) and Level 6 (south) have accessible landscaped rooftop terraces. All external roof areas have the provision to be able to be landscaped in the future.	**Appendix C, Appendix E** **Appendix F**
	A 6m wide stormwater culvert easement of 6m applies along the north, High Street boundary. Concern is raised regarding the ability to plant trees above this service. Proposed landscaping should be reviewed to ensure adequate soil mass and depth is provided over the culvert structure.	The amended landscape plan set includes sections demonstrating that adequate soil depth will be provided over the culvert to support the proposed planting strategy.	**Appendix E**
	The small curved planter bed at the southeast corner of the building within the gathering space garden lacks gravitas and appears too weak to establish a true and enduring sense of place.	The curved planter bed contains and screens an external ground level terrace for indigenous family and community uses. The curved planter bed is designed to provide privacy whilst also utilising culturally significant plants and forms. This will further be developed in collaboration with Yerrabingin.	**Appendix E**

Issue	Referral comment	Response to submission	Reference to information
	The indicative street trees and pavement level planting along the Botany Street and High Street frontages within Councils road reserve currently have a formal generic character. In contrast, the landscaping for the SCH1 and CCCC site is inspired by the coastal dune system. A coordinated landscape outcome that picks up some of the sand dune planting themes along this section of the High Street streetscape would be beneficial. Council recommends coordination between Randwick City Council's Public Domain team and the proposals Landscape Architect moving forward.	The Randwick Campus Redevelopment (RCR) is deeply committed to delivering positive public domain outcomes to enhance the civic value and streetscape across the Precinct. The RCR will continue to work with Council as the redevelopment progresses, to achieve seamless pedestrian experiences along High Street for all community, noting this will also support improved amenity for High Street residents.	**N/A**
29. Building Height	The building is technically 11 storeys (not 9 storeys as described) when including portion of the basement that are above ground and the top floor plant level. Council questions why the footprint of the plant room level is so large as it contributes to the overall bulk and scale of the building. It is recommended that alternative locations for the roof top plant be investigated, such as a basement plant room.	The proposed building is in total twelve (12) storeys when accounting for all the proposed levels from level B2 to level 09. The SCH1/CCCC plant room has been sized according to the needs of a heavily serviced hospital and research laboraratory building. It is common for hospitals to typically include an interstitial plant room. Site constraints did not support the use of on-floor based plant rooms or the incorporation of a basement plant room.	**Appendix C**
30. High Street frontage wall datum	There is an emerging seven to eight storey street wall height along the south side of High Street for recent UNSW and Randwick Hospital buildings. For example, the Bright Alliance and the UNSW Wallace Wurth Building establish the characteristic 7-8 storey building height along the High Street frontage. The UNSW HTH building, proposed at 8 storeys, responds to this datum at	Noted. The floor levels of the SCH1/ CCCC have been designed to align with key levels established by the IASB – namely at Levels B1, Level 00 and Level 01 to address key clinical adjacency requirements. The height of the SCH1/ CCCC shares an overall building height datum with IASB and a podium datum with HTH.	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	the High Street frontage and then has a significant upper- level setback of over 9m to the tower portion of the building.		
31.	The SCH1/CCCC building is expressed as a 6 storey building with 9 storey building setback approximately 8.4m, with level 10 setback a further 3m all around. This generates an interesting dynamic to the High Street frontage within the context of the streetscape. Notwithstanding, the north east overhanging architectural corner requires further development. The submitted perspectives raise concerns regarding the architectural resolution of the overhanging corner element in terms of the expression of the windows, detailing and materiality of this feature. The VIA Photomontage View 2 within the Visual Impact Assessment illustrates the importance and prominence of the northeast corner of the building when viewed west along High Street.	The overhanging element is in context with other buildings located within the adjoining UNSW precinct, namely the Lowy building. The treatment of the corner has been reviewed and minor amendments made including changes to soffit treatment, geometry, and window treatments. These changes serve to refine the north-east overhang.	**Appendix C** **Appendix D**
32. Architectural themes	The strict symmetrical plans and 3D building form appears to be at odds with the allusion to sea cliffs and sand dunes which inspired the building design that are inherently free form and irregular. The building expression and shaping should respond to the urban context which varies on the north, south, east, and west sides of the building. Further, the architectural language and expression of the windows and sun shading devices should respond to the uses of each	Further design work has been undertaken to refine the north east overhang, including soffit treatment, geometry, and window treatments. The building design is considered an appropriate response to its surrounding context on all elevations. Further modelling work has been undertaken to help determine the location of sun shading, which is appropriate to the building uses within.	**Appendix C** **Appendix D**

Issue	Referral comment	Response to submission	Reference to information
	building level, rather than a just providing a random patterning.		
33.	The blockish building shaping and white facade panels lacks the warmth and interest of sandstone cliffs. Additional under croft height and transparency of the ground and first floor levels at the High Street entry would help to create a lighter and more inviting entry experience. The upper level northeast overhanging corner feature is awkward in its current expression and requires further development and refinement.	The building mass is primarily driven by clinical requirements. The façade design has been simplified and the background colour of the folded panels are a sandstone hue. The sun shading element colours are a mix of golds and bronzes that are reminiscent of the colours found in weathered sea cliffs. Refined soffit treatments are proposed to the High Street entry. The ground floor is highly transparent with the generous use of glazing. The location of the ICU department at Level 1 prevents further visibility into this level. Further design work has been undertaken to refine the north east overhang, including soffit treatment, geometry, and window treatments.	**Appendix C** **Appendix D**
34. Sun shading devices	The building sun shading devices should respond to the solar conditions that vary according to the building's orientation. Windows that face north are generally best shaded with horizontal overhangs (or blades}, south facing windows may not need any shading, west and east facing windows generally are best shaded, as illustrated, with vertical blades that protect windows when the sun is low in the sky. This overlay of variety across the various building elevations would help to mitigate repetitive expression of panels and windows.	Further modelling work has been undertaken to help determine the location of sun shading. Sun shading is appropriate to the building uses within. Sun shading elements to the northern façade incorporate horizontal elements and shades have been removed from the southern façade.	**Appendix C** **Appendix D**

Issue	Referral comment	Response to submission	Reference to information
35. Overshadowing of outdoor spaces	The proposed building will significantly overshadow the proposed children's play area through most of the year and particularly during the winter months, resulting in an inappropriate location for a children's play area. A location that receives sunshine, with a northern aspect would be preferable. Locating the play area to the north of the building, within sight of the proposed cafe, would provide a safer and more welcoming location. Alternatively, a north facing play area on an upper level terrace or roof of the building could be considered. The north leg of the building, as proposed, blocks mid-morning sunshine from reaching the plaza. Reshaping and or increasing the height of the under croft of the north west corner of the building should be explored to improve solar access to the plaza in the mid- morning. Shadow studies should be provided at hourly intervals for the winter solstice to assess solar access to the key public domain areas such as the plaza and children's play area.	Opportunities for children's play will be provided throughout the ground floor podium, not solely in the southern podium. The children's playground is sited to the south to meet the functional requirements of the hospital and provide a secluded and semi-private space for children, families and carers away from High Street. The hourly shadow has been prepared and is discussed at Item 5. While the children's play area will be shadowed, there are alternative opportunities for informal play and discovery provided in both the central courtyard area, as well as along the eastern podium. There are no opportunities to incorporate north facing play areas on upper-level terraces.	**Appendix C** **Appendix D**
36. Pedestrian bridges	The southern Integrated Acute Services Building (IASB) link bridge is two storeys high and crosses over the children's play area. The bridge is low to the ground and is somewhat heavy in appearance. It is recommended that the bridge is redesigned and refined to maximising the visual openness beneath the bridge and the transparency of the bridge to deliver a thinner profile and fineness of detailing and expression.	The IASB and existing SCH bridge links are simple forms with a shared façade and soffits incorporating public art. The IASB bridge link is has a clinical function - this requires greater privacy and prevents extensive transparency. A custom perforated panelled façade is proposed to this bridge. The bridge is single storey with structural integrity to support a later second storey.	**Appendix D**

Issue	Referral comment	Response to submission	Reference to information
	Rather than repeating the vertical cladding of the main building on the bridge element, a contrasting light steel and glass architectural expression would provide a more successful outcome. A similar approach should be taken for the eastern Children's Hospital link bridge.	The link to the existing Children's Hospital will have a custom frit on glass. This ties in to the bridge link currently under construction as part of the IASB, where public art is being integrated as part of its façade treatment.	
37.	Council questions the reason for providing a central open-air section with glazed airlocks at each end of the bridge. A continuous glass enclosure may provide better weather protection for people crossing the bridge and remove the need for two airlocks.	This comment appears to relate to the Botany Street pedestrian bridge that is part of the HTH project. Please refer to SSD -10822510. There are no bridges proposed utilising 'glazed air locks' as part of this project.	**N/A**
38. Sustainability	It is noted that the proposal includes a 15.5 percent site canopy cover. This canopy target is well below the minimum 25 percent tree canopy cover outlined in the Urban Tree Canopy Guide within the NSW Government Architect's Draft Greener Places Design Guide. The Draft Design Guide is recommended for use by State and Local Governments and industry to increase tree canopy across Greater Sydney. The proposed site canopy cover should be increased.	Refer to response above at Item 4 regarding canopy coverage. The site is constrained due to the building footprint and basement below, limiting the ability to increase tree canopy coverage.	**Appendix F**
	Council notes and supports the projects commitment to meeting the 5 Star Green Star Rating requirement as built for the development. Notwithstanding, the submitted Ecologically Sustainable Development Report only makes a reference to photovoltaics being under consideration, with further assessments to be undertaken. Provision of photovoltaics will be an important factor in meeting the 5 star green star	The Applicant is committed to improving the environmental performance and sustainability of the SCH1/CCCC project in line with NSW Government policy. The SCH1/CCCC project has been designed and will be delivered in accordance with the Health Infrastructure Engineering Services Guidelines (ESG) - August 2021 and Design Guidance Note (DGN) No.058 - Environmentally Sustainable	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	rating. Council recommends a commitment to this provision, as well as details on size and location of photovoltaic systems should be provided during the assessment stage. Photovoltaics could be incorporated into a landscaped design for the roof space as an outdoor landscaped area for patient access. Unlike the southern area of the building on the ground floor, the roof top area would receive maximum sunlight throughout the day.	Development which provides details of environmentally sustainable design (ESD) requirements and assessment, including an ESD evaluation tool for Health Services Facilities. The ESD Report which was submitted as part of the SCH1/CCCC SSD Application was prepared in accordance with the HI ESG and DGN No.058. Roof top photovoltaics remain under consideration by the design team in line with the overall SCH1/CCCC ESD strategy.	
	It is noted that the water efficient fixtures/ fittings are yet to be specified. Council recommends these include sensors to control use and minimise water wastage.	Noted. Detailed design development will incorporate water efficient fixtures and fittings.	**N/A**
	Council supports the use of passive irrigation of garden beds through grading and wicking beds and is interested to see the location of the proposed wicking garden beds as these could be utilised on a rooftop landscaped area.	Noted. Detailed design development will consider including subsurface / below mulch irrigation. The landscape design team has investigated wicking beds and are considering implementing these to the rooftop terraces.	**Appendix F**
	It is noted that a recycled water and rainwater harvesting and reuse systems will be considered. Council recommends this include a dual reticulation system for the building for potable and non-potable water supplies.	The Applicant notes recycled water is proposed to be supplied via separate reticulation and to only serve cooling tower make-up water and irrigation. Harvested rainwater is proposed to be collected in a storage tank, appropriately treated and then pumped into dedicated non-potable reticulation within the building.	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	Consideration should be given to the provision of joint sustainability initiatives between the hospital and UNSW to deliver sustainability initiatives such as localised trigeneration or a centralised stormwater rainwater harvesting system.	The SCH1/CCCC and UNSW HTH project teams have worked collaboratively throughout design development. Practical initiatives have been considered by both project teams with joint sustainability initiatives difficult to incorporate due to key differences in: - staging of the respective projects; - operational targets; and - building use and functionality.	**N/A**
39. Noise	The SSDA Acoustic Assessment contains the acoustic noise and vibration survey as well as the construction noise and vibration assessment. The assessment contains management procedures to mitigate and minimise the potential noise impacts. The acoustic assessment report sets the noise criteria and provides recommendations for construction. Further acoustic assessments should be undertaken once all the plant, equipment and attenuation measures have been installed to determine whether the proposed development can satisfy the relevant requirements when in operation. Appropriate conditions should be included in this regard.	Noted. This matter can be addressed as a condition of consent.	**N/A**
40. Contamination	A Preliminary Site Investigation for Contamination Report, Detailed Site Investigation for Contamination Report and a Remediation Action Plan has been prepared for the site. The RAP states that the site can be rendered suitable for the proposed development subject to	This process will be completed post-determination in accordance with a relevant condition of development consent. No further comment.	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	implementation of the remediation procedures, unexpected finds protocols and completion of the validation assessment. A suitably qualified environmental consultant should be engaged to verify the implementation of the RAP and to validate the site following the completion of all below ground works. Appropriate conditions should be included in this regard.		
41. Cooling Towers	It is noted that cooling towers are proposed for this development in which the Public Health Act 2010 will need to be complied with and cooling towers will need to be registered with Council. Appropriate conditions should be included.	This process will be completed post-determination in accordance with a relevant condition of development consent. No further comment.	**N/A**
Civil Aviation Safety Authority (CASA)			
42.	CASA has reviewed the Aviation Impact Assessment report by Avipro (Appendix BB of the EIS) for the Sydney Children's Hospital Stage 1 and Children's Comprehensive Cancer Centre (SCH1/CCCC) at Randwick Hospital and has no objections to the SCH1/CCCC and no issues with the Aviation Impact Assessment. CASA will assess the building and cranes in detail from an obstacle perspective under the Airspace Regulations on receipt of an invitation to comment from Sydney Airport. Any infringement of the Procedures for Air Navigation Services – Aircraft Operations surfaces for more than three months (or less than three months without suitable mitigation) by a	Noted. This process will be managed by the project post determination in accordance with a relevant condition of consent.	**N/A**

Issue	Referral comment	Response to submission	Reference to information
	crane would present an unacceptable risk to the safety of air transport operations to and from Sydney Airport.		
Sydney Airport Corporation Limited			
43. Protected airspace	At a height of 102.4m AHD, the proposed development will penetrate Sydney Airport's protected Airspace. The proposed development will therefore subject to a determination made under the Airports (Protection of Airspace) Regulations 1996.	The proposed height of the project has received approval from Federal Department of Infrastructure, Transport, Regional Development and Communication- refer controlled activity approval at **Appendix L.**	**Appendix L**

The following **Table 3** provides the public submissions (reproduced in full) and the project response.

Table 3 Response to Public Submissions

Comment	Project response
Submission 1	
I have looked at the proposed plans for the above development and it does look like a wonderful facility which will have enormous benefits for the community and especially for children with cancer, their families and for cancer research. However, as an owner of an apartment on Blenheim Street facing High Street, I do have concerns. I note on Page 9 of the Environment Impact Statement it states that "HI has been working closely with the below stakeholders to inform the proposed development." The very first stakeholder listed was "adjoining landowners & occupants". I would like to comment here that I am unaware of any earlier communications regarding this development. The first communication I received was the Notice of Exhibition dated 14 May 2021.	Health Infrastructure has a strong commitment to engagement with key stakeholders across all stages of the Randwick Campus Redevelopment, to ensure the Project meets the needs of staff, patients, carers, families and the community now and into the future. Since the Randwick Health & Innovation Precinct was announced in 2017, the Project team have engaged with local residents, landowners and businesses through door knocks, letterbox drops of project communications including Statutory Planning information and project updates. Recognising the challenges of providing updates in person during COVID-19 social distancing requirements, the Project also initiated an in-depth online information portal, which includes project updates and direct access to the DPIE's Major Projects Planning Portal. Community information pop-ups were also provided at the Randwick Hospitals Campus both within the hospital for staff and consumers, and outdoors for the

Comment	Project response
	community. Please refer to the Sydney Children's Hospital Stage 1 and Children's Comprehensive Cancer Centre Consultation Report Appendix EE, submitted for public exhibition. The Project team is deeply considering how the project can transform and improve amenity for residents, including the façade design, setbacks, new landscaping and seamless pedestrian links to ensure a high civic value for residents to the north of the site. Since public exhibition of the Environmental Impact Statement, work has been undertaken to refine the façade design and shape of the building, including simplification of the façade colouring and sunshades. This information is detailed in Appendix D of the Submissions Report. The design of the new children's hospital and research facility is intended to be within the context of other adjoining buildings including the Prince of Wales Integrated Acute Services Building, the UNSW Health Translation Hub as well as the broader Randwick Health & Innovation Precinct.
A major concern is the amenity of my tenants. There has been no real indication of a timeframe except Milestone 2025. I'm not sure what that means. Furthermore, once this project is completed there will be the next stage, the UNSW Health Translation Hub. There will be all the issues associated with a major construction site - noise, vibrations, dust & dirt, construction traffic etc for an extended period of time. Previous tenants were subjected to the construction of the light rail. It is hard to retain good tenants with construction happening 6 days a week.	Information regarding project milestones is available on the Randwick Campus Redevelopment website and will be updated over the course of the project. In preparation for activities that may impact local residents and neighbours, such as commencement of construction, in-depth community consultation will be undertaken. The main works contractor, in consultation with Health Infrastructure, will develop a Construction Environmental Management Plan (CEMP) that responds to and complies with the Conditions of Consent issued by Department of Planning, Industry and Environment (DPIE). The Plan will outline a range of dust, vibration, noise and traffic mitigation measures to reduce the impact of construction works on the neighbouring stakeholders. The Randwick Campus Redevelopment community information phone line (1800 571 866) and email (randwickcampusredevelopment@health.nsw.gov.au) are available to the community 24 hours per day, 7 days per week.
Another concern I have is the effect it may have, especially in the medium term on the value of my investment. I have had to reduce rent due to Covid and I lose my current tenant, it will become even more difficult to find another. If I wished to sell, it is always going to be more difficult when there	Impacts on property prices are not a planning consideration.

Comment	Project response
is a major construction site across the road, and it will surely affect the price as well.	
I am also concerned about the scale of the building. In the EIS it states on Page 91 "The massing of proposed built form has been carefully considered to reduce perceived bulk and scale." While, I think the plans for the ground level look great with the landscaping and greenery as well as the setback; as one looks up to the mid-levels from the point of view of apartments across the road, it definitely will like a massive wall of glass and aluminium. Under Visual Analysis on the same page there is even acknowledgement that the most significant visual impact will be as viewed from High Street.	While the SCH1/CCCC will be prominent in the streetscape, the proposed height, bulk and of the building is consistent and compatible with the wider health precinct and the changing and future character of this side of High Street. The building height is consistent with the IASB building to the south and the HTH building to the north.
Submission 2	
As a parent of a patient in the existing oncology ward at Randwick, an on reviewing the architectural plans on exhibition, I feel that there is inadequate external space for long stay patients, parents and families in the new ward. The plans should show external access to L06 external terrace. The Vision for the SCH1/ CCCC Project states there are number of project objectives were also developed during the Masterplanning Phase as follows: 'Promoting family togetherness and ensuring children's and families' wellbeing; 'Leading clinical services and innovative models of care ' Integrating research; education and partnerships through collaboration; ' Attracting global talent and promoting a future-ready workforce; 'Achieving sustainable, effective and future-focused outcomes. While the design meets most objectives specifically improves the size of the facility and the integration of research, (I commend the CCI, UNSW, Hospital, HINSW and government for its investment) the project currently looks to be falling short of world class "Promoting family togetherness and ensuring children's and families' Wellbeing" as there is no access to southern external balconies shown on the plans. The sole external space for the oncology ward is smaller on a per patient ratio, perhaps smaller overall, than the existing.	Patients, families, staff and the community are at the centre of Project planning, recognising that the built environment can meaningfully transform wellbeing and the health care experience. For this reason, the Project is deeply committed to engaging these groups in co-design to ensure the new facility meets their needs now and into the future. The Project team has worked closely with oncology consumers and families to revise the internal and external areas of the Level 6 floorplate to ensure patient and family centered design is prioritised. This has been an iterative review process aimed to optimise opportunities for family togetherness and connection to enhance the wellbeing of long stay patients and their families. Following consultation with oncology consumers, two external spaces have been incorporated into the design, including a 60m2 external terrace located to the south of the Oncology IPU and a separate external balcony, BBQ area and garden accessible from the parent retreat area. These external spaces are positioned to be accessible and safe, enhance wellbeing for patients and families with easy access fresh air, green space and natural light during their stay, as well as increase opportunities for socialising and reprieve for parents. Further consultation has resulted in design revisions of internal spaces including the kitchen and parents lounge to better meet the needs of the ward and enhance

Comment	Project response
The Project principles also include “4. Wellbeing Achieve an environment which is safe for all and which promotes healing and contributes to improved health outcomes. Ensure the wellbeing of all children, families, staff and visitors particularly through excellent access to green space, fresh air and daylight.” There is nothing more helpful than having space to build connections in a ward where the other patients and families understand what you are going through. Privacy helps these discussions. This is a ward that which at full capacity will have over 14,000 patient and parent nights accommodation, very often patients spend over a month in the ward. The Architectural Design statement says, “This will create a ‘greened’ surround to this focal centre of the entire built form. It will also allow internal users at each level visual access to visual and physical green as the move up and through the building." However to support the principle of the building, Wellbeing, improved or additional external access to external spaces should be considered to allow for respite of more patients, parents and families. The current balcony for Oncology L06, is small for a 40 bed/family oncology ward. External space for patients, parents and families who spend months and months in the hospital, particularly the oncology ward, is limited to a small balcony off the ward. The description of the Landscape on Outdoor terraces in the architectural design report says, access will be provided however there are no doors shown to access this. Feedback in the documents on exhibition from Session 3 Third Review - HI SDRP SESSION #01- 10.02.21 says “Provide details on the location, access and amenity of outdoor spaces to the upper levels of the building. No floor plans to the upper levels were provided”; the Answer is in meeting 3 “More detail regarding outdoor spaces to upper floors will be presented at the next SDRP session. Refer to the Architectural drawing package for all floor plans, including outdoor terraces." And in meeting 4, “The SDRP# 4 session	wellbeing by designing spaces that act as a hub, encouraging social interaction of families and enabling parents to connect and seek support. The design now includes increased space for communal and recreational spaces, kitchen areas and flexible layouts for support spaces when they are not required for clinical care. The Project team continue to seek opportunities to work in partnership with patients, families and staff to progress the final stages of design to deliver this generational opportunity to transform kids’ health.

Comment	Project response
related to issues specifically looking at the architecture and associated facade design. The advice letter reflected these discussions. Issues outside of this ‘architecture and façade’ review were included from the previous session as they were considered still relevant. Refer to the responses provided as part of Session 3 Third Review - SDRP#01 - 10.02.21, Section Master Plan/ Landscaping”, which is confusing and appears to be a circular reference. The plans supporting do not yet detail access to L06 balcony to support the principle of wellness to patients, parents and families who's children are being treated for cancer in the L06 oncology ward. As a parent of a child who has been treated for cancer, who has spent 320 nights in the hospital, we would like to see the oncology ward social spaces meet the projects aspiration of being world class in Wellness for all.	
Submission 3	
We are writing to you to advise that we support the construction of the above Projects. We believe they are of benefit to the people of Randwick. Besides being social and economic assets for the City of Randwick and creating jobs for the locals, they serve not only Randwick’s residents, they are beneficial to the people of NSW and to Australia as well. We further declare we did not make any reportable political donations in the past two years.	This Project is a once in a generation opportunity to transform paediatric services and the next exciting phase of the Randwick Campus Redevelopment. The community, along with patients, families and staff are at the centre of Project planning, recognising that the built environment can meaningfully transform wellbeing and the health care experience. The Project is also a catalyst to improve the civic value of the Randwick Health & Innovation Precinct and provide exceptional services and facilities for the community. We welcome this feedback and will continue our focus on community needs as we progress planning for the Sydney Children’s Hospital Stage 1 and Children’s Comprehensive Cancer Centre and the Randwick Health & Innovation Precinct.

6. RESPONSE TO DRAFT CONDITIONS

As part of their submission on the SSDA, TfNSW provided draft conditions of consent for the project. An initial project response to the draft conditions is provided in **Appendix K.** The conditions will be subject to further review and this response does not constitute acceptance of the draft conditions. The applicant is willing to work together with TfNSW to develop appropriate conditions.

7. UPDATED EVALUATION AND CONCLUSION

This Submissions Report has been prepared to address the matters raised by government agencies during public exhibition of the proposed Sydney Children's Hospital Stage 1 and Children's Comprehensive Cancer Centre at Randwick Hospital Campus (SSD-10831778).

In summary, no significant material changes are proposed to facilitate the approval and construction of the project as previously outlined in the SSDA package. Following lodgement of the SSDA and receipt of the DPIE's identification of key issues and submissions on the proposed development, the proponent has:

- Proposed minor design refinements to the architecture and landscaping of the proposal, including refinements to the façade design, enhancements to landscaped terraces across the building and improvements to pedestrian connectivity.
- Provided updated technical information in relation to flooding and carparking and additional justification where requested to address matters raised in the submissions.
- Continued to engage with adjacent landholders including UNSW and stakeholders including Randwick City Council to address matters raised and ensure the proposal benefits the broader precinct.

These actions have resulted in the final design outcome presented within the amended Architectural Plans at **Appendix C,** and the amended Landscape Plans provided at **Appendix E.** The project refinements and additional information do not modify the conclusions of the planning assessment provided in the Environmental Impact Statement submitted with SSDA-10831778.

In summary, the proposal as amended is considered suitable for the site and worthy of support by the Minister for the following reasons:

- The land is part zoned R2 Low Density Residential and R3 Medium Density Residential under Randwick Local Environmental Plan (RLEP) 2012.The proposal is permissible with consent under Clause 57(1) of *State Environmental Planning Policy (Infrastructure) 2007* (**ISEPP**) and consistent with the land use objectives.
- The design of the proposal has been reviewed by the SDRP and the design has been developed accordingly. As such, it is considered the proposal achieves 'design excellence' in accordance with the SEARs requirements issued by the DPIE for the project. The proposal is high in quality in terms of built form and architectural treatment and responds positively to the existing character and future scale of the area. The simplification of the façade, rationalisation of the colour palette and integration of sun shading devices into the façade as shown within the amended Architectural Plans will enhance the building appearance within the streetscape
- A design for an independent flood barrier has been prepared to mitigate flood risk to the building and the precinct.
- The design and treatment of the outdoor terraces has been reviewed to ensure that these spaces provide maximum usable outdoor space.
- The amended landscaping concept delineates a generous east west pedestrian path from the HTH through the SCH1/CCCC site to improve pedestrian connectivity through the site.
- The proposal has responded to traffic and transport matters raised by the DPIE and TfNSW to ensure the proposal will not adversely impact the surrounding road network or local parking supply. Arup has prepared an addendum transport and parking assessment and in summary:
  - Details the benefits that a dynamic wayfinding system can provide for the carpark demonstrating the ability to deliver the relevant parking efficiencies.
  - A Stage 2 (Concept Plan) Road safety Audit has been completed as required with the key findings of that a barrier system is required along the carpark ramp access, and further details about signage and line marking are required.
- Subject to the various mitigation measures recommended by the specialist consultants, the proposal does not have any unacceptable impacts on adjoining properties, the public domain or end users in terms of traffic, heritage, social and environmental impacts. The Updated Mitigation Measures proposed for the project are provided in **Appendix B** for clarity.

As outlined throughout this report, the proposed development as sought within the SSDA is in the public interest, responds to the statutory requirements under the *Environmental Planning and Assessment Act 1979* and has adequately addressed and responded to the issued SEARs for the project and each of the submissions received during the public exhibition period. As such, the proposal in its current form is considered appropriate for the site and should be supported by the Minister for Planning as the consent authority for State Significant Development.

DISCLAIMER

This report is dated 1 October 2021 and incorporates information and events up to that date only and excludes any information arising, or event occurring, after that date which may affect the validity of Urbis Pty Ltd **(Urbis)** opinion in this report. Urbis prepared this report on the instructions, and for the benefit only, of Health Infrastructure New South Wales **(Instructing Party)** for the purpose of Response to Submissions **(Purpose)** and not for any other purpose or use. To the extent permitted by applicable law, Urbis expressly disclaims all liability, whether direct or indirect, to the Instructing Party which relies or purports to rely on this report for any purpose other than the Purpose, and to any other person which relies or purports to rely on this report for any purpose whatsoever (including the Purpose).

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All surveys, forecasts, projections and recommendations contained in or associated with this report are made in good faith and on the basis of information supplied to Urbis at the date of this report, and upon which Urbis relied. Achievement of the projections and budgets set out in this report will depend, among other things, on the actions of others over which Urbis has no control.

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This report has been prepared with due care and diligence by Urbis and the statements and opinions given by Urbis in this report are given in good faith and in the reasonable belief that they are correct and not misleading, subject to the limitations above.

APPENDIX A SUBMISSIONS REGISTER

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APPENDIX B UPDATED MITIGATION MEASURES

APPENDIX C AMENDED ARCHITECTURAL PLANS

APPENDIX D ADDENDUM ARCHITECTURAL DESIGN REPORT

APPENDIX E AMENDED LANDSCAPE PLANS

APPENDIX F PUBLIC DOMAIN AND LANDSCAPE RESPONSE TO SUBMISSIONS REPORT

APPENDIX G ADDENDUM LANDSCAPE DESIGN REPORT

APPENDIX H FLOODING ASSESSMENT

APPENDIX I TRAFFIC AND TRANSPORT ASSESSMENT RESPONSE TO SUBMISSIONS

APPENDIX J PROPOSED BASEMENT EXCAVATION AND LIGHT RAIL

APPENDIX K TFNSW DRAFT CONDITIONS

APPENDIX L APPROVAL OF AIRSPACE INTRUSION