

4 July 2018

Erin White
DA Co-ordinator
Social and Other Infrastructure Assessments
Department of Planning and Environment
GPO Box 39
SYDNEY NSW 2001

Attention: Eleanor.parry@planning.nsw.gov.au

Dear Ms White

**Lismore Base Hospital Redevelopment Stage 3C, 60 Uralba Street Lismore (SSD 8963)
Notice of Exhibition**

I refer to your letter to Council dated 28 May 2018 regarding the Development Application (DA) for the Lismore Base Hospital Redevelopment Stage 3C, referred to below as the NTX. I also refer to Council's previous letter to the Department dated 21 December 2017, in response to its request for SEAR's for this development.

In response to your letter Council wishes to provide the following comments:

1. **No. of New Beds** – the DA asserts that the proposed NTX is largely a rationalisation of existing space at the LBH and will only result in a net increase of 21 new beds and 8 additional staff. During pre-DA consultation with the applicant, Council questioned how such a large development, that involves the construction and fit out of four (4) new storeys at the cost of more than 30 million dollars, results in only 21 new beds and 8 additional staff. In this regard, Council generally accepts the applicants assertion that the DA results in only 21 new beds and 8 additional staff, however recommends that the Department:
 - seek information from the applicant as to the proposed use of Level 5 (Block B/C) and Level 7 (Block A/C) that are no longer required for beds; and
 - ensure the subject development consent addresses the lawful use of these redundant areas (Level 5 (Block B/C) and Level 7 (Block A/C)) so that they will not be able to be used for purposes concurrently with the NTX (i.e. uses approved under previous consents) that increase traffic generation and parking demands without such issues being properly assessed.
2. **Traffic and Parking** – On the basis that the development is largely a rationalisation of existing hospital beds with an increase of only 21 new beds, the trip generation, parking demands and staffing is only a minor increase in the overall scale of the hospital. The corresponding impacts on intersection performance and pedestrian demand is also small and in this regard, Council concurs with the submitted TTW report.

The TTW report considered the accident history and change in traffic flows and does not identify any trend or accident matters which require further infrastructure attention in association with hospital expansion.

In relation to parking demand, during pre-lodgement discussions with the applicant, Council requested that consideration be given to establishing clear criteria as to the threshold of parking demands, which if exceeded would trigger the need for when the next stage of the multi-level parking station should be constructed (bearing in mind it already has approval). The TTW report is lacking in clarity with respect to this matter and therefore Council requests the imposition of a parking demand assessment condition applied to the consent that has the NSW Health Infrastructure commit to improving parking availability / accessibility when thresholds are exceeded. In this regard, relevant points to note are:

- (i) The total parking demand of the hospital site has been assessed as 1,090 spaces, inclusive of this Stage 3C.
- (ii) The total available off-street parking spaces identified within the Peak Parking Demand Survey was 482 spaces (refer Table 3.1 Inventory of Lismore Base Hospital Parking).
- (iii) Hence the balance of parking demand provided by the street system is 608 spaces (i.e. 56%).
- (iv) The concern is the street system provides an overflow parking capacity for development/residents (i.e. developments on-site parking demands are not set to 100% peak) and as such there is a need to retain spare capacity within the street system for localised increases from time to time. Given the hospital normal operating demand is taking up 608 street spaces, the impact of the hospital is significant. Council works to manage this impact in conjunction with the hospital administrators.
- (v) Stage 2 of the multi-storey car park would provide a further 290 spaces, thereby reducing the hospital parking demand upon the street system down to 30%.
- (vi) It is important to define a method of registering parking occupancy. In this regard, it would seem reasonable to ask the hospital to undertake a parking occupancy assessment of some key on-street areas as a 'barometer' (say somewhere between 290 to 608 spaces) and regularly check that occupancy, say every 2 to 5 years. Current collective average occupancy around key streets of the hospital is in the order of 70%. It is suggested that once this value rises to 85% then a Parking Management Commitment prioritising the implementation of more off-street parking (i.e. the next stage of the multi-storey car park) be provided to enable Council to manage and reduce the hospital parking impacts upon the street network.

In view of all of the above, the following condition is recommended to be applied to any development consent:

Within five (5), ten (10) and fifteen (15) years from the date of the consent, a detailed assessment of the on-street parking occupancy of Hunter Street (from Orion Street to McKenzie Street), Uralba Street (from Hunter Street to Dibbs Street), Dibbs Street (North of Hewett St) and Dalziell Street, as benchmark streets, is to be undertaken.

The results of such parking assessment shall be compared against the parking assessment in Transport and Accessibility Impact Assessment report by TTW, dated 15 May 2018 (TTW Report). Where the average of the peak hour occupancy for these benchmark streets exceed 85%, then NSW Health Infrastructure must submit to Council for written approval a **Parking Management Commitment Plan (PMCP)** detailing the actions to be implemented to return the on-street parking to the levels identified in the TTW Report and the timeframes for such proposed actions.

NOTE: *A likely action of the PMCP to return the on-street parking to the levels identified in the TTW Report will be the construction of Stage 2 of the approved multi-storey car park on 67 Uralba Street (Lot 2 DP121351).*

NOTE: *The PMCP must give consideration to the on-going monitoring and reviews by Council of its adopted on-street parking management framework.*

Reason: *to reasonably manage the parking demand of the approved hospital development.*

3. **SEPP 33 – Hazardous and Offensive Development** – the DA states that: “A SEPP 33 assessment was undertaken by AECOM for the approved Stage 3A development, but that assessment applied to the entire hospital operations. The SEPP 33 Screening Assessment undertaken by AECOM at that time confirmed that LBH is not considered to be potentially hazardous based on the Dangerous Goods stored and so no further assessment is required. The findings and conclusions of that assessment were referred to in the Stage 3B SSDA and the DPE confirmed they were acceptable. In relation to the subject Stage 3C NTX development, the findings and conclusions of the AECOM assessment remain relevant. Council recommends that the Department be satisfied:
 - that the findings and conclusions of the AECOM assessment are relevant for the proposed NTX; and
 - in relation to the disposal and transporting of clinical or radioactive waste.
4. **Water and Sewer** – Council notes that the receiving sewerage system downstream of the site is subject to performance issues within the catchment during extreme inclement weather. Council has identified this issue in the broader context of the catchment and seeks to manage inflow and infiltration from within the catchment as is the case with all old sewerage systems throughout NSW.

Notwithstanding the above, on the basis that the development proposes an increase of only 21 new beds, Council recognises that the increased demand on Council's water supply and sewerage systems will have a minimal impact. In this regard, it is noted that the increased demand in comparison to the overall demands of the entire hospital is negligible.

Council requests that the development consent require the developer obtain the relevant approvals for water supply and sewerage works, including Liquid Trade Waste pre-treatment (where required), in accordance with s68 of the LG Act.

5. **Noise Impact** – Council notes that the recommendations that were nominated in the Noise Impact Assessment Report should be adopted.
6. **Waste Management** – Council recommends a condition be applied to the consent that a Waste Management Plan be prepared to minimise construction waste through reduction/recycling processes.
7. **Obstacle Limitation Surface** – Council notes that the height of the proposed NTX exceeds/penetrates the OLS by 8.88m. In this regard, Council recommends the DA be referred to CASA for their review and that the development adopt and implement all CASA recommendations.
8. **Construction Management** – The management of construction impacts is considered to be a key issue with the proposed development, particularly given the proximity of nearby residences. In this regard, Council endorses the preparation and implementation of detailed construction management plans that appropriately manage and mitigate the amenity impacts of the construction of the NTX.
9. **Glare and Reflection** – Council requests that the following condition be applied to any consent:

Roofing and wall cladding materials shall be factory pre-finished with low glare and reflectivity properties. The selected roofing and wall cladding material and colour must not cause a glare nuisance or excessive reflectivity to adjoining or nearby properties, In the event that a glare nuisance does arise from the use of a material, Council reserves the right to require materials to be treated to address the glare nuisance.

***Reason:** To ensure that excessive glare or reflectivity nuisance from roofing materials does not occur as a result of the development.*
10. **S138 Roads Act 1993 Approvals** – the development consent is to require the developer obtain the required approvals under s138 of the Roads Act 1993.
11. **Fire Safety (External Cladding)** – Council has previously raised concern, via a letter to the Crown Certifier for the LBH on 12 July 2017 (with a copy forwarded to NSW Fire and Rescue), that the Composite Aluminium Panels used in the construction of the hospital building Stages 3a and 3B may not address the relevant requirements of the Building Code of Australia.
12. **Consolidation** – During pre-lodgement discussions with the applicant, Council advised that it recommended the separate allotments subject of the DA be consolidated.

In addition to the above, it is requested that the Department send Council a copy of draft conditions of consent for comment prior to the issue of the consent.

Should you require any further information, please do not hesitate to contact me.

Yours faithfully

Mr R Mallam
Snr Development Assessment Officer (Planning)