

Section 75W Modification Project Approval (MP 08_0170)

Newcastle Private Hospital

Property:

Lots 401 & 402

DP 1197237

Lot 2 DP 1080386

SP 60845

158 Croudace Street, and 14 & 20 Lookout Road,
New Lambton Heights

Applicant:

Healthscope Operations Pty Ltd

Date:

September, 2015

Document Control

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1.0 Introduction

1.1 INTRODUCTION

ADW Johnson Pty Ltd has been commissioned by Healthscope Operations Pty Ltd to prepare an application for a modification to the Project Approval MP 08_0170 under Section 75W of the *Environmental Planning and Assessment Act 1979*.

The proposal seeks to modify the Project Approval MP 08_0170 to enable alterations and additions to the existing 'Kingston' Newcastle Private Hospital building, whilst also incorporating a range of modifications (alterations and additions) to the new building approved under MP 08_0170, as well as a new elevated pedestrian connection link between the existing Kingston and Croudace Buildings. The modifications reflect a greater holistic approach to updating, upgrading and planning for the hospital uses to be integrated across current and approved buildings and to reflect updated analysis of services and financial modelling from that which drove the 2010 approval.

1.2 APPLICATION DETAILS

Section 75W Modification Application

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Development Application

Applicant Name:	Healthscope Operations Pty Ltd
Applicant Address:	Healthscope Operations Pty Ltd C/O – ADW Johnson Pty Ltd 7/335 Hillsborough Road Warners Bay NSW 2285
Property Description:	Lots 401 & 402 DP 1197237, Lot 2 DP 1080386, and SP 60845 158 Croudace Street, and 14 & 20 Lookout Road, New Lambton Heights
Project Description:	Section 75W Modification Application to Project Approval MP 08_0170

1.3 BACKGROUND

Newcastle Private Hospital (NPH) via Healthscope Operations Pty Ltd, received approval for a \$33.7 million expansion of the Newcastle Private Hospital from the Planning Assessment Commission on 15th January, 2010 (refer to original approval attached at **Appendix A**). The expansion consists of remediation of land and the construction and operation of an additional hospital building with car parking at NPH, connecting to the existing Kingston Building (including minor alterations to the Kingston building).

The hospital was acquired in 2010. Since acquisition, NPH has successfully focused their investment, (some \$16M over the past four years) into a successful program of increasing services and facilities within the footprint of the existing hospital building (the Kingston Building), which was originally built under a 1996 development consent granted by Newcastle City Council. The modifications to the existing hospital building to date have progressed via certification processes for minor internal room changes and development approval for the amendments carried out in 2014. The works have included introduction of day and inpatient oncology (cancer) services (2011), installation of a specialist hybrid theatre (2012), introduction of a neurosurgical unit (2013), growth in diagnostic and interventional cardiology services (2013) and most recently the re-organisation of the day surgery area to incorporate a cardio-thoracic theatre (2014). The eighteen (18) parking spaces in front of the Kingston Building under MP 08_0170 have been provided.

These increases in services over the past four years, combined with analysis of demographics, drivers for services and financial modelling have positioned NPH to progress with expansion and investment and undertake the remediation and construction of the additional hospital building.

The Department of Planning and Environment (DPE) recently modified the NPH expansion project to extend its lapse date, through to 15 January 2017 (also included at **Appendix A**).

1.4 OVERVIEW OF EXPANSION

Overall Project Approval MP 08_0170 provided approval for an additional sixty (60) inpatient beds and 1310m² of suites in a new up to six (6) storey building (3 storeys of hospital uses and 3 parking levels with those set into the slope of the land in some elevations), as well as two (2) operating theatres in the Kingston Building. Two hundred and forty four (244) car parking spaces formed part of the approval. At the time of application, the works represented a Capital Investment Value of \$33.7million.

NPH wish to construct and operate the approved additional hospital building and alterations to the existing hospital building, whilst also incorporating a range of modifications (alterations and additions) to both buildings. Broadly the modifications reflect a greater holistic approach to updating, upgrading and planning for the hospital uses integrated across current and approved buildings and to reflect updated analysis of services and financial modelling from that which drove the 2010 approval.

The modifications and allocation of hospital uses is based on NPH desire to achieve efficient provision of integrated hospital services between existing and new buildings and to meet the changing needs of staff, providers and clients.

In consultation with the NSW DPE, it has been established that the Project Approval is a transitional Part 3A project under the provisions of Schedule 6A of the Environmental Planning & Assessment Act 1979 (EP&A Act). As such Part 3A (as in force immediately prior to repeal of Part 3A) continues to apply to the Project Approval, including modification provisions of Section 75W. The NSW DPE confirmed via email on the 10th February, 2015 that the proposed modifications could indeed proceed as a Section 75W application to the Department.

2.0 Proposed Modifications

2.1 OBJECTIVES OF THE PROPOSED MODIFICATIONS

Broadly the proposed modifications reflect a greater holistic approach to updating, upgrading and planning for the hospital uses integrated across current and approved buildings and reflects updated analysis of services and financial modelling from that which drove the 2010 approval. Through consultation with the NSW DPE, it was confirmed via email on the 10th February, 2015 that the proposed modifications could indeed proceed as a Section 75W application to the Department.

The modifications and allocation of hospital uses is based on Newcastle Private Hospital's desire to achieve efficient provision of integrated hospital services between existing and new buildings and to meet the changing needs of staff, providers and clients.

2.2 DESCRIPTION OF PROPOSED MODIFICATIONS

The proposed modification seeks consent for the provision of an additional two levels to the approved new building to the north of the existing Kingston Building, internal alterations to the approved new building, an elevated pedestrian connection linking the existing Kingston Building and Croudace Building, and internal alterations and additions to the existing Kingston Building.

The amended architectural plans have been prepared by dwp|suters and are attached at **Appendix B** of this report.

Overall the modifications generally maintain the approved medical uses in the new building (two (2) floors of inpatient beds and a floor of medical suites), however adds an additional floor of consulting suites (all consulting suites now split between the ground floor and fourth floor), and an additional level of beds (all bed wards now contained over the first, second and third floors).

The following table provides a level by level comparison of the proposed modifications to the existing and approved (2010) development on the site (also incorporating 2014 mods to the Kingston building under separate DA approval from NCC DA 2013/1498):

Table 1 Comparison Table outlining Modifications

KINGSTON BUILDING & NEW BUILDING		
	EXISTING & 2010 APPROVAL (incorporating 2014 mods to Kingston building as well)	PROPOSED S75W MOD 2015
Basement B3	73 carparks	73 carparks [includes two disabled parking spaces], 6 motorcycle spaces
Basement B2	134 carparks [51 new + 83 exist] loading dock, stores and existing laundry	136 carparks [51 new + 85 exist], 5 motorcycle spaces, loading dock, stores and CSSD relocated into existing laundry area
Basement B1	113 carparks [70 new + 43 exist] and other [general	112 carparks [73 new + 39 exist], 15 motorcycle spaces

	stores etc]	and other [general stores etc]
Ground	62 carparks [31 new, 18 new on-grade, 13 existing on-grade] 62 beds [30 new + 32 exist beds] Radiology, pathology, oncology, rehab, clinic & general support areas	62 car parks [31 new includes one disabled parking space and 18 new built on-grade at entrance, 13 existing on grade] 29 beds [29 exist] Expanded radiology, No change to pathology, oncology, rehab, clinic & general support areas
First	60 beds [30 new + 30 exist] 9 theatres [7 exist + 2 new] ICU, cardiac, CCU, day procedure, expanded recovery area to address the additional 2 theatres and general support areas	48 beds [16 new CCU with 15 existing ICU beds and 17 existing HDU beds] 10 theatres [7 exist + 2 new theatres plus a Catheter procedure lab with holding + recovery] Expanded sterile stock store with clean lift access to the CSSD at basement level B2 ICU, cardiac, CCU, day procedure, expanded recovery areas to address the additional 2 theatres and general support areas, a new elevated connection link to the Croudace Building with replanning to achieve connections
Second	60 beds [60 existing with general support areas] medical suites [1310m ² GFA]	90 beds [60 existing + 30 new with general support areas within the footprint of the 2010 approved area]
Third	n/a	30 beds [30 new following the ward footprint layout of the second floor level]
Fourth	n/a	Medical suites [1310m ² GFA – following the medical suites footprint layout of ground floor]

SUMMARY

Total Carparks	382 carparks	383 carparks – includes the 244 new spaces and 25 motorcycle spaces as per the Statement of Commitments under MP 08_0170
Total Beds	182 beds	197 beds (+15)
Total Theatres	9 theatres	10 theatres [includes the Catheter Procedure Lab]
Total Suites	Medical suites (1310m ² GFA)	Medical suites 2620m² GFA [+1310m²]
Inclusions		Expanded radiology [MRI & external entrance], expanded recovery area, relocated CSSD with clean lift access to the theatre floor + elevated connection link to the Croudace Building

Note: Modifications also proposed to lifts, circulation and other minor alterations and additions not included in summary above.

The following is a brief explanation of the floor layout drawings (please refer to **Appendix B**) that make up the schedule of accommodation along with summaries of the car parking and bed numbers and the comparison between the existing development approval and the S75W modification.

Plan SK201 Basement Level B3

The layout is the current approved development plan:

- Jacaranda Drive car park entry and exit;
- Provides for 73 car parking spaces of which two spaces are designated for disabled parking;
- Provides for 6 motorcycle parking bays;
- Is a part raked floor to enable the lower area to be set-out below the loading dock; and
- Includes for two lifts positioned to suit the layouts of the clinical floors.

Plan SK202 Basement Level B2

The layout is the current approved development plan with minor modifications:

- Provides the service yard and loading zone area with access from Jacaranda Drive, the loading area is for all incoming goods and stores, the waste removal functions will remain with existing dock area;
- Provides for 51 new car parking spaces [amendment to change car park connection ramp to existing car park];
- Provides for 5 motorcycle parking bays;
- Includes for two lifts positioned to suit the layouts of the clinical floors;
- The existing laundry altered to house the new CSSD area;
- A new lift included to connect the CSSD area to the theatre floor [sterile access route], the existing goods lift will provide the dirty route from the theatre floor to the new CSSD; and
- The existing Kingston Building provides for 85 car parking spaces on two part levels.

Plan SK203 Basement Level B1

The layout is the current development approved plan with minor adjustments:

- Provides for 73 car parking spaces [amendment to change car park connection ramp to existing car park to lower level];
- Provides for one way ramp connection between the existing car park entry and the new car park for parking control;
- Provides for 7 motorcycle parking bays, for two lifts positioned to suit the layouts of the clinical floors;
- A new lift has been included to connect the CSSD area to the theatre floor [sterile access route]; and
- The existing Kingston Building provides for 39 car parking spaces including four disabled parking positions.

Plan SK204 Ground Floor

The layout is the current development approved plan with minor amendments:

- Provides for 31 car parking spaces with one designated disabled car park plus the 18 on-grade car park spaces at the hospital entrance;
- Provides for 3 motorcycle parking bays;
- The DA approved layout was for a 30 bed ward, the modification is for an internal change of use to medical consulting suites;
- Includes for two lifts positioned to suit the layouts of the clinical floors;

- A new lift has been included to connect the CSSD area to the theatre floor [sterile access route];
- The existing area occupied by radiology to be re-furbished and re-arranged for:
 - Pre-admissions clinic;
 - Pre-op admissions; and
 - Education meeting spaces.
- The existing pre-admissions clinic area can address for expansion of pathology or for other uses; and
- The ground floor entry area and car park amended to address the structural requirements for the new first floor link between the Kingston and Croudace Buildings.

Plan SK205 First Floor

The layout is the current development approved plan with minor amendments:

- The DA approved layout was for a 30 bed ward, the modifications is for an internal change of use to incorporate a Catheter Lab Procedure Suite and a 16 bed CCU with support areas;
- The DA approved layout included for 2 additional theatres in the eastern extension over the service dock , the modifications is for the area to house one theatre and sterile stock store;
- The existing CSSD area to be re-organised for a new theatre and support spaces;
- A new lift has been included to connect the CSSD area to the theatre floor [sterile access route];
- Includes for two lifts positioned to suit the layouts of the clinical floors; and
- The existing recovery area to the south to be extended house the additional recovery bays associated with the additional two theatres as well as the connection link across to the Croudace Building.

Plan SK206 Second Floor

The layout is the current development approved plan with a change of use modification:

- The DA approved layout was for medical consulting suites, the modification is for an internal change of use to a 30 bed ward; and
- Includes for two lifts positioned to suit the layouts of the clinical floors.

Plan SK207 Third Floor

The layout is an extension to the current development approved plan:

- The modification is for an additional floor of the same area/perimeter footprint as the floors below; and
- The extension layout is for relocating 30 bed ward from the ground floor to the third floor.

Plan SK208 Fourth Floor

The layout is an extension to the current development approved plan:

- The modification is for an additional floor of the same area/perimeter footprint as the floors below, the extension layout is for medical consulting suites.

Plan SK209 Roof Plan

The layout is an extension to the current development approved plan:

- The extension layout is for relocating the roof from over the second floor to over the fourth floor.

The modifications to the new building are primarily accommodated by internal reconfigurations, an additional two floors to the approved footprint (approximately 2,620m²), and additional floor space at first floor level only (340m²) as part of an infill link at the first floor level between the approved building and the existing Kingston Building (to enable the integration of medical uses across the combined first floor of the existing, approved and proposed additional floor area).

The modifications to the Kingston Building are primarily accommodated by internal reconfigurations, additional floor space at first floor level (170m²) integrated with an additional elevated building link (180m²) between the existing Kingston and Croudace Buildings, and minor additional floor space for a new lift associated with the new CSSD (combined 28m² across four levels).

Combined, the additional floor space proposed to the approved new building and to the existing Kingston Building combined may be approximately 3,300m² (including the new elevated pedestrian link to Croudace Building) and modifies the new building by an additional two storeys (from three storeys of hospital uses to five storeys, plus parking as approved).

Ultimately upon completion of the proposed expansion to the Newcastle Private Hospital, the overall Newcastle Private Hospital campus will have a total of:

- 20 medical consulting suites;
- 237 beds; and
- Maximum of 148 staff (including doctors) per shift.

The proposal will result in the provision of a total of 440 car parks, 25 motorbike spaces, and in excess of 36 bicycle spaces for the campus (please refer to **Section 5.5** of this report for further details regarding parking).

It is also noted that the proposed modifications seek to secure 180 parking spaces for staff-only use, therefore leaving around 203 spaces for use by the medical suite staff and visitors to the hospital and medical suites. It is noted that the Newcastle DCP (2012) requirement for the visitors to the hospital and the medical suites is 159 spaces therefore sufficient visitor parking would be available within the car park even with the securing of 180 staff car parks (parking is discussed further in **Section 5.5** of this report).

2.3 DOCUMENTATION

The following documentation has been provided to support the proposed development and includes the following:

- Major Project Approval MP 08_0170 – **Appendix A.**
- Amended Architectural Plans (dwp | suters) – **Appendix B.**
- Certificates of Title, Deposited Plans and Strata Plan – **Appendix C.**
- Statement of Heritage Impact (John Carr Heritage Design) – **Appendix D.**
- Traffic Impact Assessment (Intersect Traffic) – **Appendix E.**

3.0 Site Analysis

3.1 SITE DETAILS & LOCALITY

The subject site is described as Lots 401 and 402 DP 1197237, Lot 2 DP 1080386 and SP 60845, with a physical address of 158 Croudace Street, and 14 & 20 Lookout Road, New Lambton Heights.

The owners of the subject lots are as follows:

- Lot 401 DP 1197237 – owned by Hunter New England Local Health District;
- Lot 402 DP 1197237 – owned by Hunter New England Local Health District;
- Lot 2 DP 1080386 – owned by Healthscope Limited; and
- SP 60845 – strata lots owned by the following:
 - Lot 1 – SPW Raymond Pty Ltd
 - Lot 2 – Andrew Keith Hedges & Elizabeth Stuart Hedges
 - Lot 3 – Andrew Keith Hedges & Elizabeth Stuart Hedges
 - Lot 4 – Mikaza Pty Limited (825/1000) & Sylvia Denise Finn (175/1000)
 - Lot 5 – Healthscope Limited
 - Lot 6 – Paul Jerome Walker & Krysia Teresa Walker
 - Lot 7 – Healthscope Limited
 - Lot 8 – V L Reid & J W Leitch Pty Limited (1/3), Thambar Holdings Pty Limited (1/3) & Jomal Nominees Pty Limited (1/3)
 - Lot 9 – V L Reid & J W Leitch Pty Limited & Jomal Nominees Pty Limited
 - Lot 10 – Healthscope Limited

Copies of the Deposited Plans, Strata Plan, and the Certificates of Title have been provided at **Appendix C** of this report.

The above lots comprise a total area of approximately 48ha, currently occupied by John Hunter Hospital and Newcastle Private Hospital buildings, however it is noted that only a small portion of Lot 401 will be incorporated as part of the proposed modifications to accommodate the reorganisation of the at-grade car parks between the Kingston and Croudace Buildings, a new pedestrian crossing, and extension of a footpath up to the crossing on the south-eastern side of Tea House Road. Lot 402 DP 1197237, which is to accommodate the main component of the proposed development, the new building, has an area of 4000m².

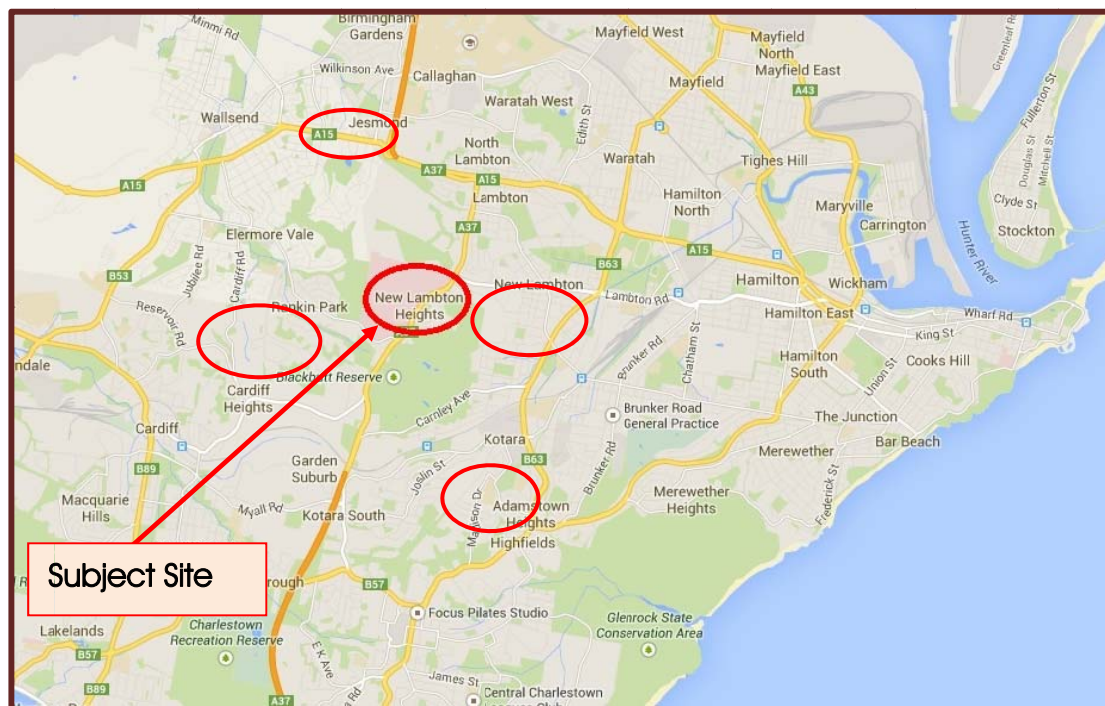


Figure 1 - Locality of site in broader local context.

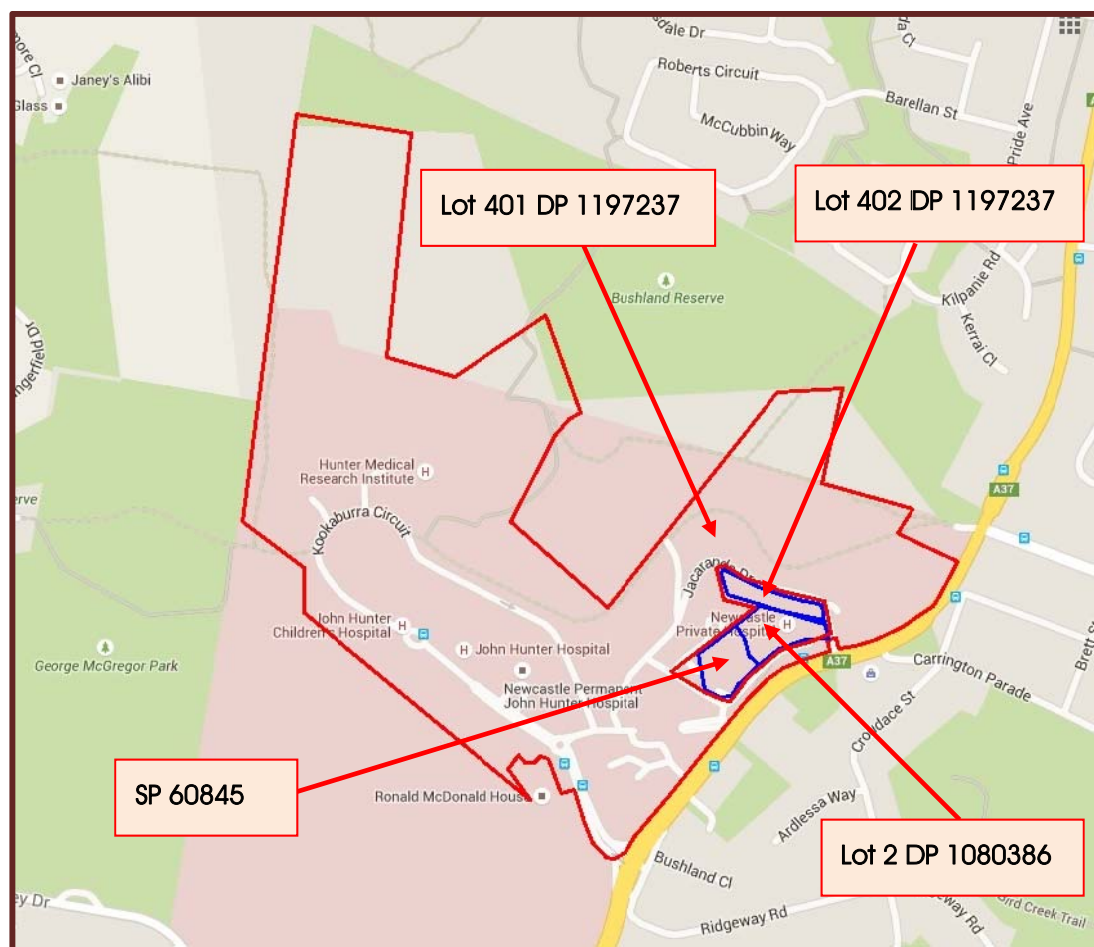


Figure 2 - Locality map within local context of New Lambton Heights.

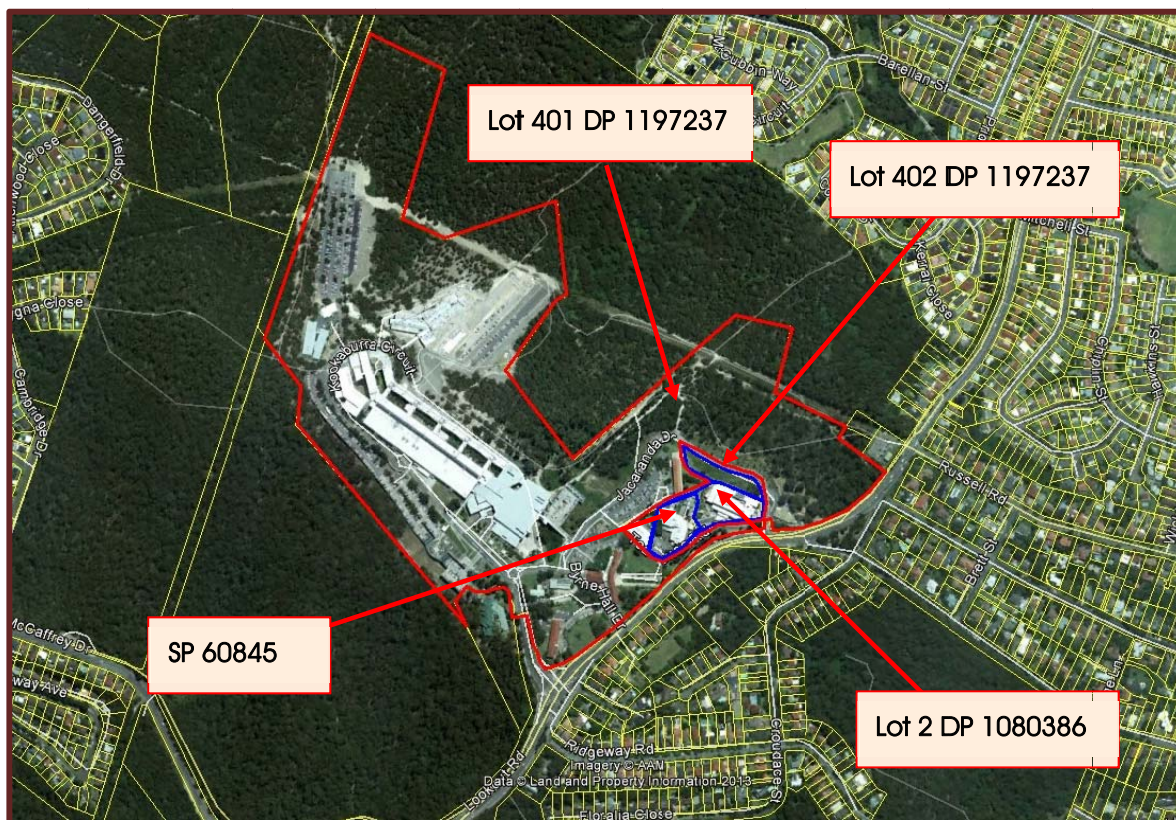


Figure 3 – Aerial image of the site and surrounds.

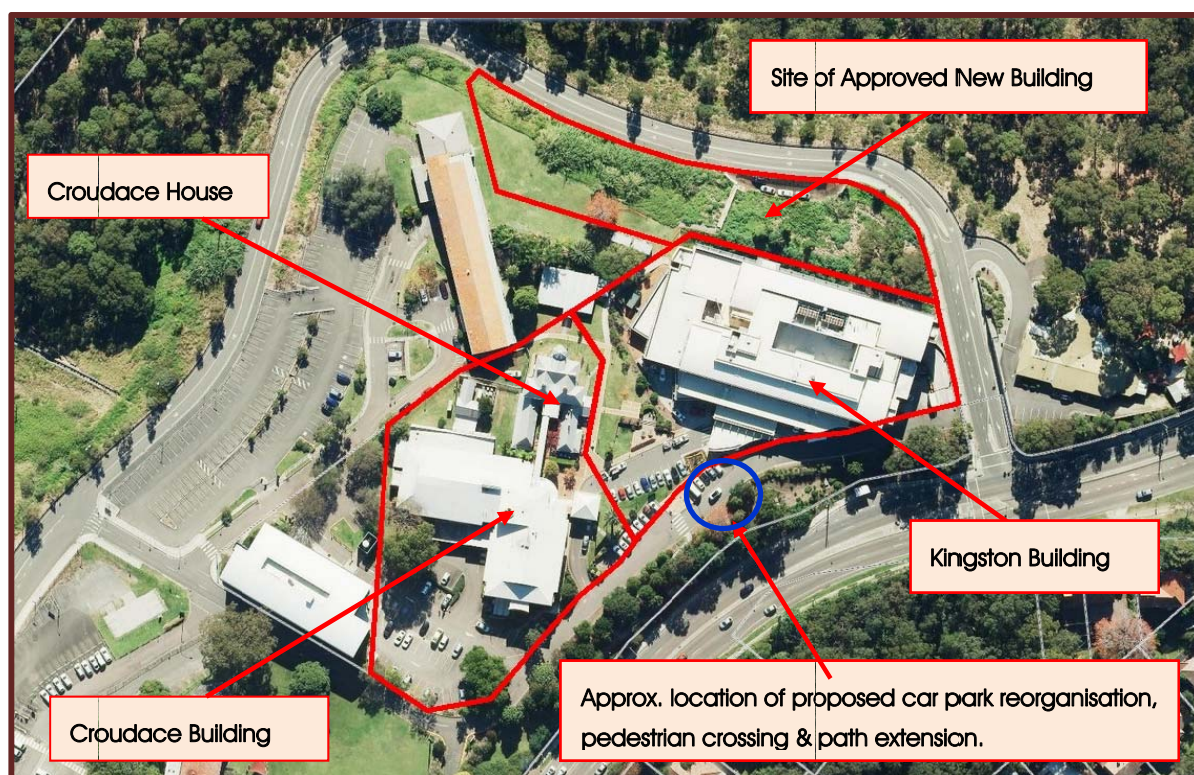


Figure 4 - Aerial photograph of site.

The subject site is located within New Lambton Heights which, in a local context, is situated north of Kotara, south of Jesmond, east of Rankin Park and west of New Lambton. In a broader regional context New Lambton Heights is located within Newcastle which is situated some 150km north of Sydney.

3.2 LANDUSES LOCALLY, AS WELL AS CURRENT AND PREVIOUS USES ON THE SITE

The development site currently contains buildings that make up the Newcastle Private Hospital, however the area of proposed development for the new building is currently vacant.

- Lot 402 DP 1197237 is currently vacant;
- Lot 401 DP 1197237 currently contains buildings making up the John Hunter Hospital, however the relevant portion of the site to the proposed development currently consists of part of the at-grade car park between the Kingston and Croudace Buildings, a portion of Tea House Road, an existing pedestrian crossing and path;
- Lot 2 DP 1080386 comprises the Newcastle Private Hospital 'Kingston' building, associated basement, and at-grade car parking; and
- SP 60845 comprises the Croudace House heritage building, the Newcastle Private Hospital Croudace building and associated at-grade car parking.

The subject site is largely surrounded by substantial areas of vegetation, however buildings associated with the John Hunter Hospital spread to the east of the development site, and areas of residential development are located to the east and southeast of the site, opposite Lookout Road.

The following photographs show the surrounding area and views around the site:



Photograph 1 - View of existing Kingston Building of the Newcastle Private Hospital looking east.



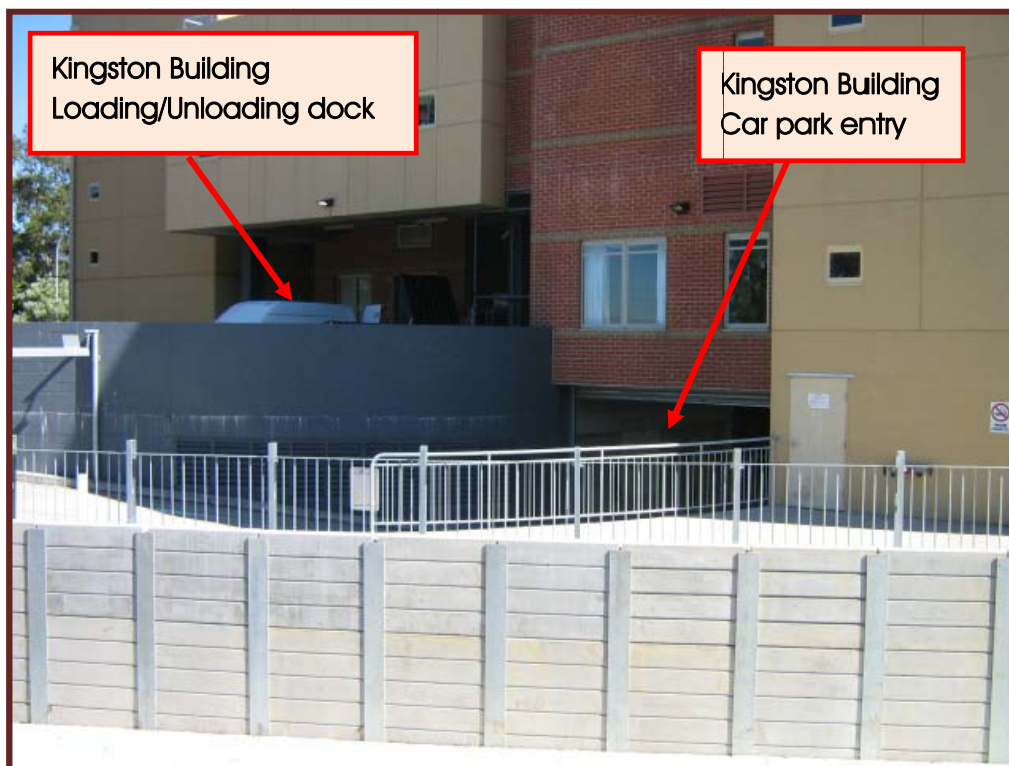
Photograph 2 - View of Croudace House (heritage item) from north of the site (please note the proposed building will not extend past existing end of Kingston Building at a height above ground level, so views to and from Croudace House will remain the same).



Photograph 3 - View of the intersection of Jacaranda Drive and Croudace Street.



Photograph 4 - View of existing Kingston Building of Newcastle Private Hospital and existing car park below.



Photograph 5 - View of entry into loading dock and existing car park (Kingston Building).

3.3 TOPOGRAPHY, DRAINAGE AND FLOODING

The main development site is situated to the north of the existing "Kingston Building" and has a moderate to steep slope to the north and west.

The site is elevated approximately 95m AHD and is located on the upper reaches of the closest surface water body, Dark Creek, which is located to the north of the site. The region consists of rolling to steep hills, with slopes greater than 20%.

The site being located very near to the top of a hill with the ground falling steeply away to the north:

- Is not traversed by a significant overland flow path;
- Does not receive significant overland flow from upstream; and
- Is not affected by peak flood water from any watercourses.

3.4 VEGETATION

The subject site contains minimal vegetation, as can be seen in **Figure 4 – Aerial Photograph**, and the above site photographs. Vegetation on site generally consists of planted small trees, shrubs

and thick grass cover. The seven trees that currently stand on the development site have been approved for removal as part of Project Approval MP 08_0170, noting that these trees were already approved for removal under a previous car park DA 06/0511.

Land to the north of the subject site contains bushland which will be retained. Asset Protection Zones already established for the proposed development do not require removal of this vegetation.

3.5 MINE SUBSIDENCE

The subject site is identified as being located within a proclaimed Mine Subsidence District under the Mine Subsidence Compensation Act 1961.

3.6 GEOTECHNICAL PROPERTIES AND SOILS

Reference to the 1:100,000 Newcastle Coal Geology sheet indicates that the site is underlain by rocks belonging to the Kotara Formation of the Adamstown Subgroup (Newcastle Coal Measures, Permian age). Rocks typical of this formation include sandstone, siltstone, conglomerate, coal and tuff.

Fill on the site ranges from 1.0m to 5.6m deep. Generally, silty clay filling was encountered in all test locations, ranging in depth from 1.0m to 5.6m, brown clayey silt topsoil was encountered in Pits 103 and 104 underlying the filling ranging in depth from 1.5m to 1.9m, generally stiff silty clay was encountered underlying the topsoil to depths ranging from 1.7m to 2.0m in Pits 103 and 104, and conglomerate, sandstone and pebbly sandstone varying from extremely low to medium strength, generally low strength, was encountered underlying the soil profile in all test locations (except Pit 101) ranging in depth from 1.0m to 11.46m.

3.7 CONTAMINATION

It was established under the Project Approval MP 08_0170 that whilst the proposed development site was identified as containing contamination materials of potential concern (including asbestos or asbestos containing materials (ACMs), certain heavy metals, polycyclic aromatic hydrocarbons (PAHs), and biological hazards), a Remedial Action Plan has been prepared for the site, and an accredited site auditor has reviewed the Remedial Action Plan and confirmed that the proposed remediation strategy is suitable. Accordingly, the Department established that it was satisfied that contaminated material would be managed through the remediation strategy and provided suitable conditions within the approval to ensure this occurs.

Based on the above, no further assessment of land contamination is considered necessary for the proposed modification.

3.8 BUSHFIRE

The subject site is identified as being located within bushfire prone land on Council's bushfire prone land map.

It was established as part of the Project Approval MP 08_0170 that any bushfire risk can be minimised through the establishment of an Asset Protection Zone and by designing the building to certain standards, noting however, that these measures would not remove the risk from bushfire completely. The Department incorporated recommendations from the NSW Rural Fire service (RFS) into the conditions of approval to ensure that the project would be developed in accordance with the requirements of the relevant guidelines for bushfire protection, including the establishment of a 70m wide asset protection zone (without requiring removal of any trees), landscaping within the asset protection zone being designed and maintained in accordance with the requirements of the asset protection zone, and recommending the development of a bushfire evacuation management plan.

The Department indicated that they were satisfied that bushfire risks would be minimised and that evacuation plans would be in place to minimise threats to patients and staff.

Based on the above, no further assessment of bushfire is considered necessary for the proposed modification.

3.9 EUROPEAN HERITAGE

The subject site is not located within a heritage conservation area under the Newcastle LEP 2012, however, heritage items listed under Schedule 5 to the Newcastle LEP 2012 are situated on the subject site, including Croudace House and the Remnant Garden, Croudace House.

It is noted that the observation tower, which was built after the completion of the house, is believed to have been constructed to take advantage of the views to the north, and as such this view corridor is the most important aspect, as bushland would have screened other views from the house.

Consequently the building (as approved) was designed to minimise impacts on the Croudace House view curtilage. The six storey building is to be built outside the view curtilage, whilst the smaller 3 storey car park will not impact on the view and will be screened by landscaping designed to complement the existing gardens.

The Department established that the development design was sympathetic to the heritage values of the building and gardens and would not reduce views to the north in the view curtilage. Consequently the Department was satisfied that the impacts on heritage values of Croudace House and gardens would be minimised and were acceptable.

Heritage is discussed further in **Section 5.4** below.

3.10 ABORIGINAL ARCHAEOLOGY

Due to the highly disturbed nature of the site, it is likely that any areas of Indigenous significance that may have been present would have been destroyed as the result of past activities and filling. It is considered unlikely that there are any places of Indigenous significance on site.

3.11 TRAFFIC, ACCESS AND ROAD NETWORK

The site is located on Jacaranda Drive, which is accessed via Lookout Road at two separate intersections, both serviced by traffic signals. The main entrance to the hospital campus site is via the signalled Lookout Road / Kookaburra Crescent intersection. Kookaburra Crescent then provides connection through the hospital site to Jacaranda Drive. The secondary access to the site is also via a traffic signalled intersection, which has direct access onto Jacaranda Drive.

Lookout Road is a major road, forming part of MR 23, and operating as an arterial road linking the Newcastle Bypass with Newcastle Road. Lookout Road is a four-lane, two-way highway, with a 60kph speed limit and on-street parking where width permits.

The roads within the hospital campus, Kookaburra Crescent, Jacaranda Drive and Tea House Road are all two-lane, two-way local authority roads under the control of Newcastle City Council.

Jacaranda Drive is a local internal circulation road, constructed in 2007 as part of the upgrade to the Hospital Layout. It has a variable width but is 8m wide for much of its length, with no parking allowed, and markings for cyclist use. Jacaranda Drive links the main hospital internal road network with the secondary access to Lookout Road, providing all hospital users with alternate access into and out of the precinct.

Tea House Road is a local internal access road, approximately 6.5m wide, providing access from Jacaranda Drive to the Newcastle Private Hospital, Croudace House and other Hospital buildings. It is a cul-de-sac, but provides the main access road to the Private Hospital. There are no pedestrian footpaths and no parking permitted along its length. There are speed bumps to control speeds and zebra crossings to facilitate pedestrian flows across the road between the car parks and hospital buildings.

There is very little on-street parking allowed within the overall Rankin Park / John Hunter Precinct. There is however, significant parking available in the residential streets on the eastern side of Lookout Road. Observations indicate that in the order of 50 non-residential vehicles park all day in these streets. There is also on street parking where width permits on Lookout Road.

Newcastle Private Hospital currently has 124 parking bays across the 2 basement levels of parking in the Kingston Building, and 13 surface parking bays between the Croudace and Kingston Buildings for a total of 137 existing parking spaces.

3.12 UTILITY SERVICES

All services, including power, water, sewer, telecommunications and gas are available for connection to the site.

3.13 OBSERVATIONS FROM THE SITE CHARACTERISTICS AND LOCALITY

The subject site is located within an existing hospital campus and has previously been approved for a new hospital building under Major Project Approval (MP 08_0170). The site is relatively unconstrained from a physical, ecological and design perspective, and any site constraints have previously been addressed under MP 08_0170. The site is ideal for the proposed alterations and additions to the existing and approved Newcastle Private Hospital buildings on the site.

4.0 Planning Controls

4.1 ENVIRONMENTAL PLANNING & ASSESSMENT ACT 1979 & REGULATION 2000

The EP&A Act 1979 and the EP&A Regulation 2000 constitute the principle planning legislation in NSW and provide the statutory framework for the assessment of the proposed subdivision.

Consideration has been given to the objectives of the EP&A Act 1979 and it is considered that the proposed modification, where relevant, is consistent.

4.2 STATE PLANNING CONTROLS

4.2.1 SEPP 55 – Remediation of Land

SEPP No. 55 aims to promote the remediation of land for the purpose of reducing the risk of harm to human health or any other aspect of the environment.

As noted in Section 3.8 above, a Remedial Action Plan has been prepared for the site, and an accredited site auditor has reviewed the Remedial Action Plan and confirmed that the proposed remediation strategy for the site is suitable. Accordingly, as part of the Project Approval MP 08_0170, the Department established that it was satisfied that contaminated material would be managed through the remediation strategy and provided suitable conditions within the approval to ensure this occurs.

4.2.2 SEPP (Infrastructure) 2007

The general aim of this Policy is to facilitate the effective delivery of infrastructure across the State of NSW. Division 10 – Health services facilities, of this SEPP is considered to apply to the proposed development. The proposed development is located within a SP2 Infrastructure - Health Services Facility Zone, and remains permitted with consent.

Under this SEPP Schedule 3 identifies traffic generating developments that require referral to the RMS. The development is identified as traffic generating development requiring referral to the RMS under the *"area used exclusively for parking or any other development having ancillary parking accommodation"* purpose of development. The development provides a total of 244 new car park spaces as per the previous Statement of Commitments (MP 08_0170), in addition to the existing 196 spaces across the Newcastle Private Hospital campus.

4.2.3 SEPP (State and Regional Development) 2011

The aims of this Policy are to identify development that is State significant development, State significant infrastructure and critical State significant infrastructure; and to confer functions on Joint Regional Planning Panels to determine development applications that are deemed 'Regional Development'.

This is not relevant to a s75W modification application.

4.3 REGIONAL PLANNING CONTROLS

4.3.1 Lower Hunter Regional Strategy

The Lower Hunter Regional Strategy was adopted in October 2006, in summary the purpose of the strategy is to provide broad guidance to future planning of the Lower Hunter.

The Lower Hunter Regional Strategy (LHRS) recognises that the Lower Hunter area is characterised by a population which is older than, and continuing to age at a rate faster than, the NSW average. Despite strong growth in its population, a high level of out-migration by young people continues, projections suggest that a much greater proportion of the population will be aged 65 and over in the future. This has implications for the Region's social diversity and future infrastructure and servicing needs, including health.

The LHRS vision for the future for the Lower Hunter is one that is sustainable, affordable, prosperous and liveable; where there is access to quality infrastructure and services, including education and health.

In regards to sustainability, the LHRS refers to the quality and equity in health services, and part of the criteria for determining sustainability is 'do adequate services exist?', and 'are they at capacity or is there some capacity available'. Demand for increased health services, and the exhaustion of capacity within their existing hospital buildings, has dictated Newcastle Private Hospital's need to expand their medical services.

The subject site is located within the John Hunter Hospital specialised centre (see **Figure 5** below). The key functions of specialised centres are concentrations of regionally significant economic activity and employment.

Newcastle Private Hospital is the largest private hospital facility in the Hunter region and is conveniently located within the John Hunter Hospital campus.



Figure 5 – Extract from the Lower Hunter Regional Strategy.

This Section 75W application seeks to enable the further expansion of much-needed health services provided to the community by Newcastle Private Hospital within an existing specialised centre providing for health services, in accordance with the Lower Hunter Regional Strategy.

4.4 LOCAL PLANNING CONTROLS

4.4.1 Newcastle Local Environmental Plan 2012

The site is zoned SP2 Infrastructure – Health Services Facility Zone under the Newcastle LEP 2012.

The objectives of the SP2 Zone are:

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

The proposed alterations and additions remain consistent with the objectives of the SP2 zone.

Figure 6 below is an extract from the Newcastle LEP 2012 and illustrates the zoning of the site in the context of the surrounding locality.

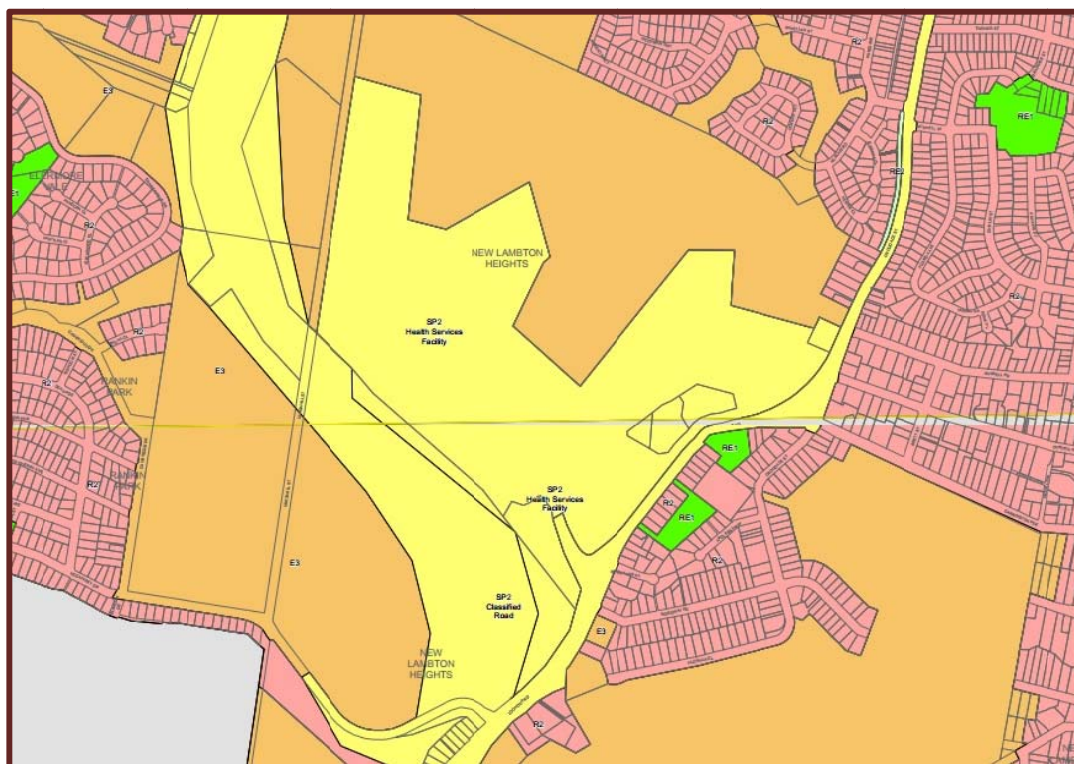


Figure 6 – Extract from the NLEP 2012 Zone Map.

4.4.2 Land Use Definitions and Permissibility

The applicable land use definition for the proposed development is 'hospital' which is permissible within the SP2 Infrastructure – Health Services Facility zone, with the consent of Council.

4.4.3 Specific Newcastle LEP 2012 Clauses

- **Clause 4.3 - Height of Buildings**

Under this clause, the height of a building on any land is not to exceed the maximum height shown for the land on the Height of Buildings Map.

The subject site is not identified as having a maximum building height on Council's NLEP 2012 Height of Buildings Map. However the proposed maximum height of the building from existing ground level is 26.487m, which is only an additional 3.918m in height from the maximum height of the approved building to the lift overrun (22.569m).

- **Clause 4.4 - Floor Space Ratio**

Under this clause of NLEP 2012, the maximum floor space ratio for a building on any land is not to exceed the floor space ratio shown for the land on the Floor Space Ratio Map.

The subject site is not identified as having a maximum floor space ratio on Council's NLEP 2012 Floor Space Ratio Map. However the additional floor area proposed as part of the alterations and additions is approximately 3,300m² including the elevated pedestrian connection link).

- **Clause 5.10 – Heritage Conservation**

This clause requires development consent to be granted by Council for the demolition, moving, or altering of the exterior of any heritage items, Aboriginal objects, or a building, work, relic or tree within a heritage conservation area. The consent authority must, before granting consent, in respect of a heritage item, or heritage conservation area, consider the effect of the proposed development on the heritage significance of the item or area concerned.

The subject site is not located within a heritage conservation area under the Newcastle LEP 2012, however, heritage items listed under Schedule 5 to the Newcastle LEP 2012 are situated on the subject site, including Croudace House and the Remnant Garden, Croudace House.

As noted in Section 3.10 above, the observation tower, which was built after the completion of the house, is believed to have been constructed to take advantage of the views to the north, and as such this view corridor is the most important aspect, as bushland would have screened other views from the house.

The approved building and car park (MP 08_0170), and the proposed building additions, have been carefully designed to avoid impacts on the Croudace House view curtilage, noting that the approved three storey car park will also be screened by landscaping designed to complement the existing gardens.

Under MP 08_0170 the Department was satisfied that the impacts on heritage values of Croudace House and the remnant gardens would be minimised and were acceptable. The proposed building additions will have no additional impacts on the Croudace House view curtilage.

Notwithstanding that the Croudace House view curtilage is considered to be the most important aspect of the heritage item, the proposed alterations and additions also incorporate an elevated linkway that follows the existing roadway over the car park between the Croudace Building and Kingston Building which will be located nearby to the Croudace House and remnant garden area. As such, a Statement of Heritage Impact has been prepared by John Carr Heritage Design to assess the impact of the proposed linkway and minor upper level extension to the existing Kingston building on the heritage significance of Croudace House and the remnant garden.

The report confirms that the proposed linkway and upper level extension to the Kingston Building will have minimal affect on the heritage significance of the

heritage items due to its footprint covering the existing area of the entry portico and its relative small size compared to the existing building.

Heritage is discussed further in **Section 5.4** below.

- **Clause 6.1 – Acid Sulphate Soils**

This clause of the LEP refers to the provision that a person must not carry out works described in the relevant table on land of the class specified for those works, without development consent.

The subject site is identified as containing Class 5 Acid Sulphate Soils, which relates to works within 500m of adjacent Class 1, 2, 3 or 4 land that is below 5m AHD and by which the watertable is likely to be lowered below 1m AHD on adjacent Class 1, 2, 3 or 4 land.

The subject site is not located within 500m of any adjacent Class 1, 2, 3, or 4 land that is below 5m AHD, and nor will the proposed alterations and additions lower the watertable.

- **Clause 6.2 – Earthworks**

This clause of the LEP aims to ensure that earthworks for which development consent is required will not have a detrimental impact on environmental functions and processes, neighbouring uses, cultural or heritage items or features of the surrounding land.

The proposed development generally does not involve any new earthworks outside of those previously approved under MP 08_0170. Any minor earthworks required as part of the reorganisation of car parks seeks the appropriate consent under this Section 75W application.

4.4.4 Newcastle Development Control Plan (DCP) 2012

Newcastle Development Control Plan 2012 (NDCP 2012) applies to the proposed development. The purpose of the NDCP 2012 is to:

- Provide detailed provisions relating to matters of significance to The City of Newcastle to be considered by Council when exercising its environmental assessment and planning functions under Part 4 of the *Environmental Planning and Assessment Act 1979*;
- Expand upon the aims, objectives and other provisions of the Newcastle Local Environmental Plan 2012;
- Provide detailed criteria for the assessment of development applications; and

- Identify notification requirements in accordance with section 74C(c) of the *Environmental Planning and Assessment Act 1979*.

We have reviewed NDCP 2012 and the following sections are relevant for consideration and have been addressed in detail in Sections 3 and 5 of this report:

- Section 3.11 – Community Services
- Section 4.02 – Bush Fire Protection
- Section 4.03 – Mine Subsidence
- Section 4.04 – Safety and Security
- Section 4.05 – Social Impact
- Section 5.01 – Soil Management
- Section 5.02 – Land Contamination
- Section 5.03 – Tree Management
- Section 5.05 – Heritage Items
- Section 7.01 – Building Design Criteria
- Section 7.02 – Landscape, Open Space and Visual Amenity
- Section 7.03 – Traffic, Parking and Access
- Section 7.04 – Movement Networks
- Section 7.05 – Energy Efficiency
- Section 7.06 – Stormwater
- Section 7.07 – Water Efficiency
- Section 7.08 – Waste Management
- Section 8.00 – Public Participation

4.4.5 Other Relevant Policies, Strategies and Controls

NSW State Health Plan

The NSW State Health Plan acknowledges a growing and ageing population as being a major factor in driving up health costs, which continues to place increasing demands on health services and other human services. Further, the Plan recognises the rise in community expectations of health services, with people expecting ready access to treatment for more health conditions. One of the seven key strategic directions of this plan is to create better experiences for people using health services. The proposed development seeks to facilitate the provision of increased health services to the community to help meet the growing demand and increasing expectations for such health services to be readily accessible.

NSW 2021 Plan

The proposed development is also consistent with the NSW 2021 Plan, which lists one of its five key strategies as being to return quality services, including providing world class clinical services with timely access and effective infrastructure. The proposed development allows Newcastle Private Hospital to complement their existing and approved facilities with increased and improved medical facilities.

Newcastle Urban Strategy 2012

The Newcastle Urban Strategy has been adopted by Newcastle City Council as a means of providing direction to future development patterns throughout the city of Newcastle. The Strategy is designed to analyse, influence and determine:

- Land use, transport and development practices;
- Corresponding social, economic and ecological impacts;
- Social and economic trends and their implications for city growth;
- The role each neighbourhood and district plays, e.g. residential, industrial or commercial areas; and
- The roles Newcastle plays locally, regionally and globally.

The Newcastle Urban Strategy recognises the value of enhancing the quality of life for all citizens, and identifies the importance of accessible and appropriate services and infrastructure in achieving this.

The Strategy also identifies commercial viability and marketing as one of the key city-wide strategies, and seeks the inclusion of health care facilities within urban centres as a highly desirable element.

The proposal is consistent with these elements of the Newcastle Urban Strategy. The proposal will provide an increase in accessible and appropriate health services facilities to

contribute to the enhancement of the quality of life for all citizens of Newcastle, and will contribute to the commercial viability of Newcastle.

Newcastle 2030 Community Strategic Plan

The Newcastle 2030 Community Strategic Plan also highlights the growing and ageing population within Newcastle. One of the key objectives of the Plan is active, healthy communities with physical, mental and spiritual health well-being. The strategy identified by the Plan to achieve this objective is to ensure the community has access to needed services and facilities. The aim of the proposed development is to facilitate the provision of increased health services to the community where the growing demand for such services is generated by the growing and ageing population.

Newcastle Local Planning Strategy

The Local Planning Strategy (LPS) is a comprehensive land use strategy to guide the future growth and development of Newcastle City Council. The Strategy implements the land use directions from Newcastle 2030 Community Strategic Plan (CSP), and underpins the Newcastle Local Environmental Plan 2012 providing a land use planning platform to move towards a smarter, more liveable and sustainable Newcastle.

The subject site is identified as being located within the specialised centre of the John Hunter Hospital campus which is of particular importance to the economy and employment generation, specialising in health service provision.

The Strategy acknowledges that the Newcastle LGA has a proportionally higher share of jobs generated in the special use zones (including education and training, health care and social assistance, arts and recreation services) than the Lower Hunter Region and Sydney Metropolitan Area. Over 26% of all jobs in the Newcastle LGA are presently generated in the Special Use category and it is forecast that the category will experience the greatest actual growth, generating 38% of job growth in the LGA. These special uses mostly occur in three clusters – the John Hunter Hospital, the University of Newcastle and Newcastle City Centre. Potential to expand in these locations will depend not only on the availability of adjacent land but also on the provision of hard infrastructure such as roads, energy utilities, broadband and public transport in addition to soft infrastructure such as retail and personal services.

The John Hunter Hospital area is recognised as continuing to be an important facility for Newcastle and the region and should be supported, particularly in light of an aging population.

The proposed building additions seek to facilitate the provision of increased health services to the community within an existing specialised centre, and within the footprint of an approved building thereby reducing further environmental footprint, to help meet the growing demands of an ageing population.

Social Impact Assessment Policy

Newcastle City Council has adopted a Social Impact Assessment Policy to ensure that where relevant social considerations are an integral part of the development assessment system. In order to realise this objective the policy seeks to:

- (a) Indicate which development applications should include comment regarding social impacts or a detailed social impact statement;
- (b) Provide clear guidelines as to how social impact assessments should be conducted;
- (c) Enhance consistency, certainty and transparency in Council's assessment of the social impact of development proposals;
- (d) Ensure that the process of assessing social impact has statutory legitimacy; and
- (e) Assist Council staff to improve their understanding and assessment of social issues relating to development applications.

Social impact is addressed further within **Section 5.12** of this report.

5.0 Development Issues

5.1 URBAN FORM AND DESIGN

Suters Architects have prepared detailed Architectural Plans of the proposed alterations and additions which are included at **Appendix B** of this report.

5.1.1 Orientation, Massing and Visual Impact

The approved new building under MP 08_0170 was designed to optimise its north/south orientation by virtue of the linear nature and orientation of the allotment (Lot 402 DP 1197237).

Because of the steep cross fall of the site, the approved three storey carpark/loading dock podium is able to virtually cover the entire extent of the site without obstructing the Croudace House view curtilage. A spiral ramp is located at the western end of the podium connecting all levels. The design principles for the building's podium base remain unchanged.

The inclusion of two additional levels to the approved development has carefully followed the aesthetics of the original design in compositional form, elemental detailing and material selections. The massing of the five storey building above the podium is constrained to approximately half the length of the podium obscuring the north elevation of the existing Kingston Building. The building additions follow the approved building form and orientation above podium level maintaining the slightly rotated plan pivoting at its western end. The massing of the new building, including the additional building levels, is considered appropriate to the context, being parallel and relatively similar in height to the Kingston Building. The scale is reduced by deep modeling to facades, as well as cladding and fenestration articulation.

This idea is further developed with the addition of deep overhanging awnings projected at differing angles, in plan, on alternate storeys. Aesthetically, because of the strong linear mass of the building, the strategy is to reinforce each of the storeys as a discrete rectangular prism randomly stacked, thereby emphasising strong horizontality, consistent with the carpark podium levels.

The podium levels appear as open deck carpark with continuous horizontal spandrel with safety screening providing the base for the building above. The western approach as one turns the bend near the JHH Campus Rehabilitation building arguably offers the most important view of the proposed development and the strategy will herald the building's presence. Equally important is the view of the western façade, Croudace House curtilage and Rehabilitation building.

The approach from the east along Jacaranda drive is more immediate with the prismatic forms breaking down in scale around the plant rooms servicing each storey individually.

The loading dock follows and is set into deep shadow by the very large canopy of the building over covering the yard and offering visual and acoustic separation between the podium base and the hospital's built form over.

Apart from the aesthetic value of the deep awnings to upper levels, they provide solar control and allow fenestration to no longer be constrained with a fire-separating spandrel. Consequently the glazing is full height, optimising natural light and northerly views. A secondary horizontal sunshade projects at door head height to further control sun and articulate fenestration. The glazing is broken down into a frame pattern and a rhythm is established along the length of each north and south elevation by careful placement of mullions of varying depths.

The west elevation is treated similarly with additional mesh screen sun control. The roof is a simple, uncluttered low pitch metal deck form, having minor service penetrations and fixtures. It is largely achieved by separately servicing each storey from plant room at the east end of the building. Overall height of the building to the northern fascia is Relative Level (RL) 121.276. The height of Kingston Building lift motor room parapet is RL 117.4 and height to eaves is RL 112.00. Height to plant room parapet (a substantial portion of Kingston Building roof) is RL 116.00. The new lift will be under-slung to minimise extension of roof height above the shaft and to be below the northern fascia line.

The loading dock is predominantly sheltered with the built form of the podium level as an awning, providing visual and acoustic separation from outlook above. The east end of the dock is screened to tie this area into the entire facade composition. The screening does not completely obscure visibility for safety of traffic movement, but filters some of the utilitarian activities associated with the dock.

5.1.2 External Materials and Finishes

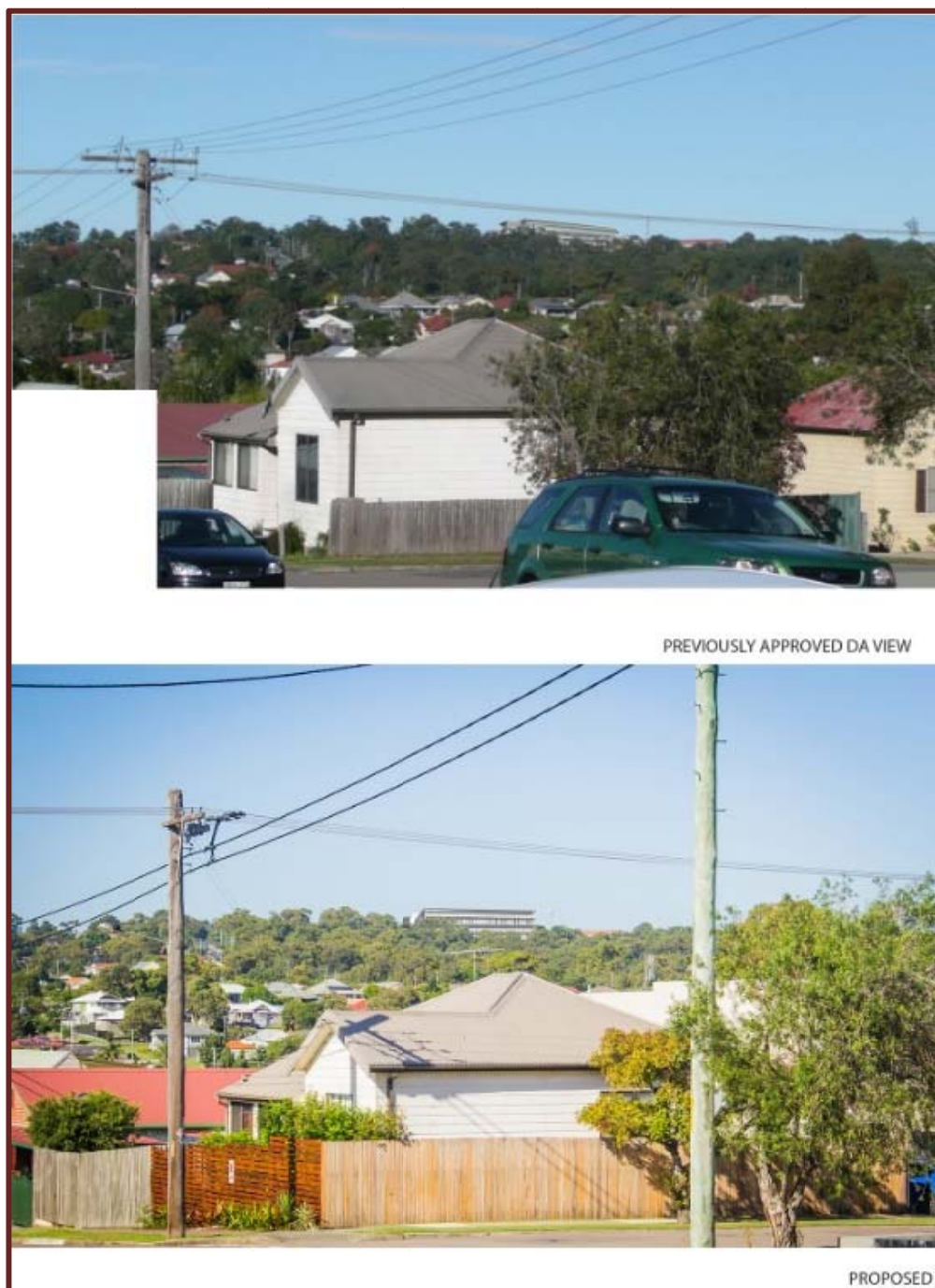
External materials remain of minimal range, in harmony with clean and uncluttered lines of the building. Materials include off-form concrete, pre-finished modular cladding, wood cladding, and colorbond metal roof. Architectural Plan SK901 at **Appendix B** provides the materials and colours board for the proposed alterations and additions.

5.1.3 View Analysis and Photomontages

There will be distant views of the building's roof line and upper floors from the north which are shown in the photomontages below (**Photographs 6 and 7** and also included at **Appendix B**) from Dent Street and Morehead Street, Lambton some two kilometres away.



Photograph 6: Photomontages of the approved development in comparison with the proposed development looking southwest from Dent Street, Lambton.



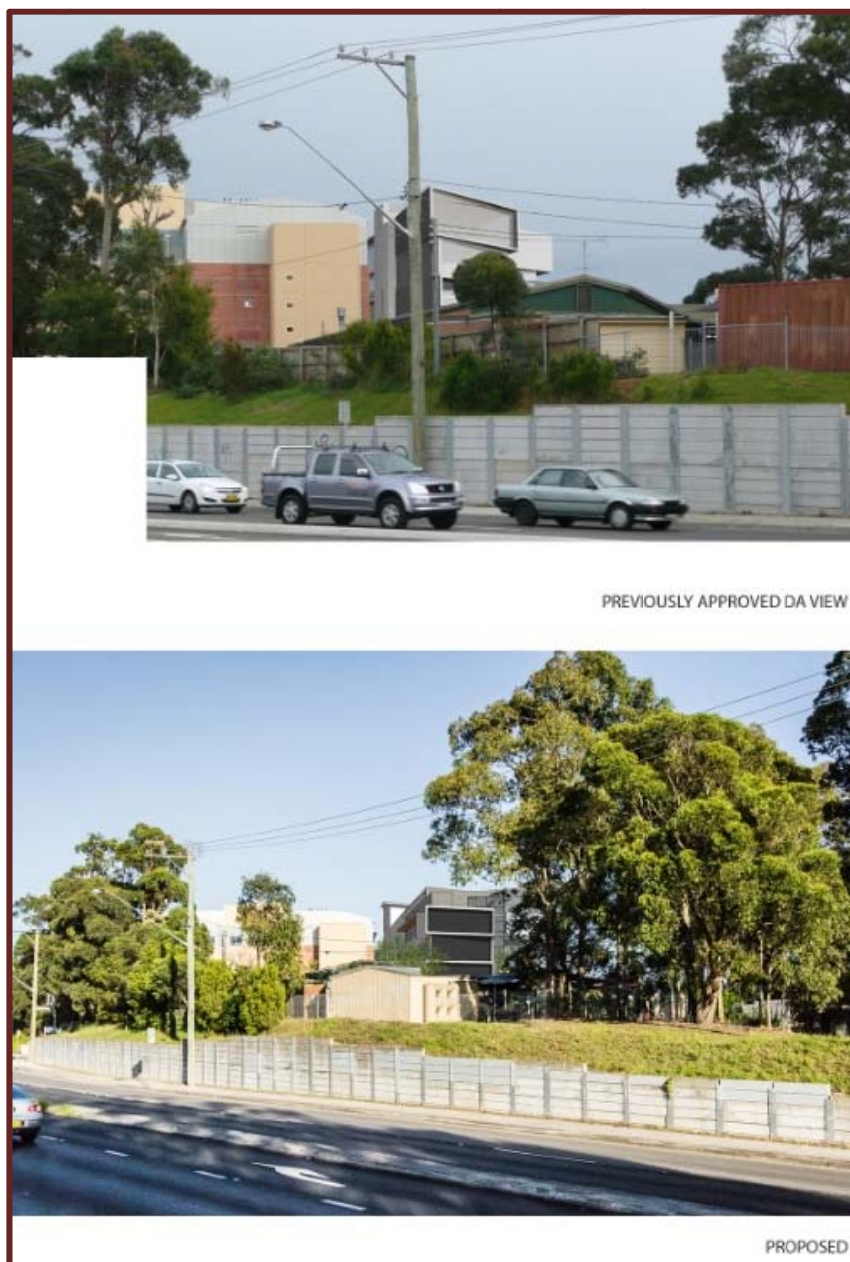
Photograph 7: Photomontages of the approved development in comparison with the proposed development looking southwest from Morehead Street, Lambton.

The photomontages above demonstrate that there is very little change to the overall impact of the building as a result of the additional floors proposed. The simple clean roofline and forms of the proposed building addition complements the existing buildings including Croudace House, and the deep modeling of the facade works to reduce the brightness (and therefore its dominance) in the context. This is particularly evident when one compares the dominance of the stark white facade of John Hunter Hospital further to the west.

Similar to the approved building north of the Kingston Building, very little of the proposed additional floors are visible from the main entry at Lookout Road. **Photograph 8** below demonstrates how the scale and massing of the proposed additional levels relates to the approved building and the Kingston Building. **Photograph 9** is from Lookout Road slightly further to the north.



Photograph 8: Photomontages of the approved development in comparison with the proposed development looking north-northwest from Lookout Road.



Photograph 9: Photomontages of the approved development in comparison with the proposed development looking north-northwest from Lookout Road.

The most important view is considered to be **Photograph 10** below, because it is one of the few opportunities to see the proposed building in its entirety. This view looks south-east and provides an indication of the view from the western approach along Jacaranda Drive. It demonstrates the appropriateness of scale and mass in context. Landscaping is purposely kept cropped and low to the ground to emphasise the strong horizontal lines of the building, and the angularity of its upper levels.



Photograph 10: Photomontage of the proposed development looking south-east.

5.1.4 Privacy

Privacy between south-facing bedrooms in the new building and those north-facing in Kingston have previously been addressed by widening the light-court through rotation of the building. Additionally it was intended to possibly detail translucent screening to both buildings to mitigate the problem. It is anticipated that internal curtains and/or blinds will also assist with screening.

5.2 LANDSCAPING

Landscaping will remain unchanged from what was approved under MP 08_0170.

The general objectives of the landscaping for the new hospital building and car park areas were to integrate the car park with surrounding bushland and hospital grounds and provide a memorable and attractive entry and exit for users of the car park. The approved landscaping design and management measures will ensure a positive outcome for the site.

5.3 AMENITY IMPACTS

Amenity is discussed from three perspectives. Amenity associated with Croudace House, the amenity of the hospital and grounds generally, and amenity effects on the broader locality.

The amenity of Croudace House relies on its curtilage including views from the upper floors of the building. The view corridor is framed by trees which will screen the carpark. The view corridor out over forested areas to the north will remain unchanged. The significant curtilage to the north of the building, which is an existing garden area, will continue to be enhanced by the approved landscaping. The landscaping will reflect the traditional style of garden consistent with the heritage values of the site.

The site is a hospital and the primary purpose of the site is health care. The amenity requirements of health care are mainly concerned with the internal operations of the hospital and include good access, appropriate internal noise levels and patient privacy. Access will be constructed to the required standards. Internal noise and privacy concerns will continue to be addressed by internal fittings and operations. The general amenity of the grounds is not a significant health care issue. As per the previous Project Approval (MP 08_0170) construction noise will be managed appropriately.

The separation of the approved building, and proposed building additions, from any potentially sensitive neighbouring sites, and the location, on a busy arterial road, are likely to mitigate any significant effects from construction on the amenity of the nearest dwellings and public parks.

The proposed building additions will be visible from the adjoining road but will be screened in the main by existing buildings. The road is subject to a high level of traffic, and a corresponding level of potential views of the building. However, the view itself is not sensitive due to the presence of existing buildings and the relatively minor effect of the building additions. No visual amenity affects on the road corridor are likely.

The site is located on a ridge and has an extensive visual catchment. In this visual catchment there is no close up view of the proposed building additions due to the adjoining forest areas. From those areas where the proposed building additions will be perceptible it will be as part of a broader urban landscape. The approved building already introduces a visual change but only to a very small section of the overall view. The change will be that the buildings on the site become slightly more prominent but only if chosen as a viewpoint. The proposed building additions are considered to be of little additional visual change from what was approved. Generally, the change in the view will not be noticeable. The effect on the general amenity of the visual catchment will be minimal. Please refer to the perspectives prepared by dwp|suters attached at **Appendix B** of this report.

5.4 HERITAGE

Although the subject site is not located within a heritage conservation area under the Newcastle LEP 2012, heritage items listed under Schedule 5 to the Newcastle LEP 2012 are situated on the subject site, including Croudace House and the Remnant Garden, Croudace House.

It is noted that the observation tower, which was built after the completion of the house, is believed to have been constructed to take advantage of the views to the north, and as such this view corridor is the most important aspect of the heritage item, as bushland would have screened other views from the house.

It is noted that the approved building and car park (MP 08_0170), and the proposed building additions (the subject of this application), have been carefully designed to avoid impacts on the Croudace House view curtilage, noting that the approved three storey car park will also be screened by landscaping designed to complement the existing gardens.

Under MP 08_0170 the Department was satisfied that the impacts of the development on heritage values of Croudace House and the remnant gardens would be minimised and were acceptable. As noted above, the proposed building modifications will have no additional impacts on the Croudace House view curtilage.

Notwithstanding that the Croudace House view curtilage is considered to be the most important aspect of the heritage item, the proposed alterations and additions also incorporate an elevated linkway that follows the existing roadway over the car park between the Croudace Building and Kingston Building which will be located nearby to the Croudace House and remnant garden area. As such, a Statement of Heritage Impact has been prepared by John Carr Heritage Design to assess the impact of the proposed linkway, and minor upper level extension to the existing Kingston building, on the heritage significance of Croudace House and the remnant garden (refer to **Appendix D** of this report).

It is noted that very little remains of the original garden other than the sandstone pillar and surrounding paving flagstones. Notwithstanding this, the remnant garden area will remain unaffected by the new works, with the route of the proposed elevated linkway taking the structure away from the remnant garden area and keeping some distance from the side (eastern) elevation of the Croudace House.

In addition, the columns supporting the linkway structure, whilst passing nearby to the existing garden and relaxation area, will form part of the more recent modernisation of this area and the road and car park. The raised walkway will also provide a source of shade during the mornings, may reduce the need for umbrellas, and will allow views of the building from the car park and surrounding grounds of the hospital, attracting the observer towards the heritage item for a closer observation. The high level link has been designed in glass to not only help reduce the visual impact that would accompany a "solid" or infilled structure, but to also allow a higher level of observation of Croudace House for staff and patients from the linkway than would be afforded from ground level. The proposed building materials for the linkway and upper level extension to the Kingston Building have also been selected to blend with the materials used in the existing building, allowing the additions to appear as part of the earlier structures.

The Statement of Heritage Impact report concludes that *"the proposed" linkway between the Croudace Building and the Kingston Building will have minimal affect on the heritage significance of the items due to the extensive use of glass and the location of the link over the existing car park area and its elevation one storey above ground level. The transparency of the envelope together with the slenderness of the structure helps provide an important link between the two hospital buildings that in time will be hardly noticed by staff and visitors to the site. The additions to the southern end of the Kingston building will have minimal affect o the heritage significance of the heritage items due to its footprint covering the existing area of the entry portico and its relative small size compared to the existing building.*

The proposed linkway and small additions over the existing entry to the Kingston Building have been found to not only have minimal impact on heritage significance of Croudace House and the remnant garden memorial, but in addition adds another dimension to view the heritage items

from one level above the ground which has the potential to engender more interest in the former Mine Managers Residence”.

The Statement of Heritage Impact report provides the following recommendations:

- *Material and colour selections should blend with the existing buildings. Reason – The minor alterations to both existing buildings where the linkway joins them will be less obvious if the colours and materials blend to each building; and*
- *Consider the installation of an interpretation panel in the linkway. Reason – to provide the public with information about Croudace House and the Sister Blanch Cresswick memorial remnant garden area.*

5.5 TRAFFIC AND PARKING

An updated Traffic and Parking Assessment was undertaken by Intersect Traffic to review the traffic and parking implications of the proposed alterations and additions (**Appendix E**).

The Traffic and Parking Assessment provides the following conclusions:

- It is expected that the additional traffic generated by the modification to the hospital expansion project in the AM and PM peak period is likely to be up to 49 vtpm and 66 vtpm respectively;
- The local and state road network has sufficient spare capacity to cater for the additional development traffic without adversely impacting on current levels of service (LoS) experienced by motorists on the road network particularly given that current LoS are expected to improve significantly when the SH23 link from Jesmond to Rankin Park is constructed within 10 years;
- The additional traffic generated by the proposed development is less than 3% of the current peak hour traffic volumes through the major intersections on the local road network. This is within the normal seasonal, weekly and daily peak hour variations on the road network therefore there will be little or no noticeable impact on the level of service currently experienced by motorists travelling through these the intersections within the local road network;
- No changes are proposed to the approved access arrangements off Jacaranda Drive;
- Sidra modelling of the Lookout Road / Jacaranda Drive has shown that this intersection will continue to operate satisfactorily post development with good levels of service, little delay and small queue lengths that do not exceed the sheltered turn bay length on Lookout Road; and
- The development plans for the expansion of the hospital shows that on completion the hospital provides a total of 440 car parks, 25 motorbike spaces and in excess of 36 bicycle spaces across the Newcastle Private Hospital campus.

Under Newcastle City Council's DCP 2012 the proposal is required to provide the following car parking requirements:

Hospital *1 car space per 2 staff plus 1 car space per 3 beds*
1 bike space per 10 staff (Class 2) and 1 bike space per 10 staff (Class 3);
and
1 motorbike park per 10 car parking spaces

Health Consulting Rooms *1 car space per practitioner plus 1 space per 2 additional staff plus 2 spaces per practitioner for visitors;*
1 bike space per 10 practitioners (Class 2) plus 1 bike space per 10 staff (Class 3); and
1 motorbike space per 20 car spaces.

It is noted that the number of practitioners and other staff for the medical suites is currently unknown, and the opening hours of each suite is also unknown, with most medical suites generally not being open every day, or parts of the day, as practitioners attend to their hospital commitments. It is common within medical facilities such as this that only 75% occupancy occurs at any one time.

Therefore as a conservative approach, the calculation of parking for the medical suites parking requirement assumes that each suite contains 1 practitioner and 2 additional staff.

The total car parking requirement for the Newcastle Private Hospital campus, including the existing Kingston and Croudace buildings is then determined using the following information provided by the proponent which indicates that upon completion of this expansion, the Newcastle Private Hospital campus will have a total of:

- 20 medical consulting suites
- 237 beds; and
- Maximum 148 staff (including doctors) per shift.

As such, the parking requirements for the proposal under Newcastle DCP 2012 are identified in the table at **Figure 7** below:

Table 4 Newcastle DCP (2012) Parking requirements					
Land-Use	Component	Quantity	Car Spaces	Bike Spaces	Motorbike Spaces
Hospital	Beds	237	79	15 (Class 2)	8
	Staff	148	74	15 (Class 3)	8
Medical Suites	Practitioners	20	20	2 (Class 2)	1
	Staff	40	20	4 (Class 3)	1
	Visitors		40		2
	Total		233	17 (Class 2)	20
				19 (Class 3)	

Figure 7 – Table 4 – Newcastle DCP (2012) Parking Requirements within the Traffic and Parking Assessment (Intersect Traffic, 2015).

Therefore, the Newcastle Private Hospital campus is required to provide 233 car spaces, 36 bicycle spaces (Class 2 and 3) and 20 motorbike parks under Newcastle DCP 2012.

The amended development plans for the expansion of the hospital show that on completion, the hospital expansion provides a total of 383 car parks, 25 motorbike spaces and in excess of 36 bicycle spaces. There are also approximately 57 on-site car parks currently servicing the Croudace building and the existing medical suites, bringing the total car parking for the campus to 440 car parks. Therefore, the proposed development more than complies with the requirements of Newcastle DCP 2012, and also exceeds the requirement of 244 car parks and 25 motorbike parks required within the Statement of Commitments under MP 08_0170, which includes the 200 spaces agreed to by the hospital when the land on which the development is to be located was purchased from Hunter New England Health.

It is noted that the proposal also seeks to secure 180 parking spaces for staff-only use, therefore leaving around 203 spaces for use by the medical suite staff and visitors to the hospital and medical suites. It is noted that the Newcastle DCP (2012) requirement for the visitors to the hospital and the medical suites is 159 spaces therefore sufficient visitor parking would be available within the car park even with the securing of 180 staff car parks.

- Servicing of the site will remain as per the approved hospital expansion;
- The modification to the expansion of the Newcastle Private Hospital does not alter the construction traffic impacts that the development will have on the local road network except that the additional floor levels of construction will increase the construction period slightly. No further analysis is considered necessary as this has already been addressed in the original application;
- Existing pedestrian facilities in the vicinity of the site are satisfactory and no nexus exists for additional pedestrian facilities;
- The existing public transport services and infrastructure in the vicinity of the site is considered excellent and suitable for the development. Changes to the existing public transport system or additional infrastructure are therefore not required; and
- Whilst the development is expected to generate some additional bicycle traffic the level of the increase will not be enough to warrant the provision of additional cycle ways in the vicinity of the site.

Having carried out this traffic and parking assessment for the proposed modifications to the Newcastle Private Hospital Expansion it is recommended that the proposal can be supported from a traffic perspective as it will not adversely impact on the local road network and complies with all relevant Newcastle City Council, Australian Standard and NSW Roads and Maritime Services requirements.

5.6 DRAINAGE, STORMWATER MANAGEMENT AND EROSION & SEDIMENT CONTROL

A Civil and Stormwater Drainage report and Stormwater Management Concept Plan was submitted by Northrop Engineers under the previous Project Approval (MP 08_0170).

Stormwater Management for the approved development includes the following:

- 1) Roof water collection and reuse for wash down within the loading dock and waste storage areas as well as for irrigation. Northrop note that there are no policy or legislative requirements for water reuse for this development, but rather the inclusion of such within this proposal is an active choice of the applicant with the aim of improving efficiency and furthering environmental sustainability.*
- 2) Collection and treatment of runoff from paved surfaces to remove waterborne pollutants (generally characterised by sediments, nitrogen, phosphorous, oils and greases). The proposal incorporates a pollution removal facility (sand filter) designed in accordance with Newcastle City Council's DCP 2005, 'Element 4.5 Water Management'.*
- 3) Ground water will be managed using conventional techniques (water proofing membranes, subsoil drainage pipes etc) to prevent ingress or nuisance within the basement car park. The in situ geotechnical investigation report, undertaken by Douglas Partners (reference No. 39740.02), indicates that ground water profiles are relatively low and should not result in any significant effects.*
- 4) Collection of stormwater runoff derived upstream (from a small catchment to the south comprising the Kingston Building roof and adjacent garden area). This runoff will be collected and conveyed to prevent nuisance or impact upon the new building and discharged to maintain the status quo (i.e. utilising the same discharge points as currently occurs).*

The above stormwater management principles approved under MP 08_0170 continue to be appropriate for the proposed building additions.

In regards to erosion and sediment control, the Contractor will continue to be responsible for adequately implementing the requirements of the 'Sediment and Erosion Control Plan' which will be specifically prepared for this site and the development as part of the Construction Certificate Phase.

5.7 MINE SUBSIDENCE

A Structural Report on Mine Subsidence Issues Affecting the Site was prepared by Northrop Engineers and submitted under MP 08_0170.

The report indicates that the subject site lies within a proclaimed mine subsidence district and as such is subject to constraints on development as prescribed by the Mine Subsidence Board (MSB).

The site is underlain by abandoned workings in the Borehole Seam at a depth of approximately 100-120 metres that were worked prior to 1920. As a result, the MSB required the site to be investigated, and a mitigation strategy developed, agreed and implemented to ensure that any surface development once constructed, would be safe, serviceable and repairable.

It was indicated that once the investigation of the workings has been completed and a geotechnical analysis completed, the structural design criteria for the site can be determined. If

the predicted subsidence is too great to be accommodated by the structure some remedial grouting of the mine workings may be required to make the site suitable for this development.

Condition B6 of Project Approval (MP 08_0170) states that prior to the commencement of construction, the Proponent must remove the risk of mine subsidence, or confirm, through geotechnical investigations, that there is no risk of mine subsidence affecting the site, to the satisfaction of the Mine Subsidence Board (refer to the original Project Approval attached at Appendix A).

It is understood that this condition still stands, and the proponent agrees that this Condition will need to be met prior to commencement of construction.

5.8 NOISE AND VIBRATION

The construction and operation of the proposed alterations and additions to the existing and approved Newcastle Private Hospital Buildings will remain consistent with the relevant conditions of consent, notably C3 Vibration Limits during construction, and E1 Noise Limits during operations.

In accordance with the noise control strategies outlined under the previous Project Approval MP 08_0170, noise control strategies during refurbishment of the existing Kingston Building will include construction of temporary barriers/partitions, sealing of mechanical services penetrations and ducts and relocation of occupants during particularly noisy activities, etc.

Furthermore, noise control within the construction phase of the approved new hospital building and proposed building additions will involve the following:

- Noise and vibration monitoring program;
- Equipment selection;
- Acoustic Barriers / Screening; and
- Consultation / Complaints Handling Procedures.

Again, in accordance with the noise control strategies outlined under the previous Project Approval MP 08_0170, noise control strategies for the operational phase of the approved development and proposed building additions involve the following:

- For the refurbishment of the existing Kingston Building:
 - Machinery enclosures / screens;
 - Partition walls and ceilings;
 - Flanking paths;

- Ventilation and hydraulic systems;
 - Background noise and masking; and
 - Administrative noise control.
- For the approved new building and proposed building additions:
 - Acoustic treatment of exhaust plants producing sound pressure levels in excess of 60dB(A);
 - Ventilation openings and acoustic louvers;
 - In-duct silencers for any plant room exhaust / intake fan openings;
 - In-duct silencers for any ducted supply / exhaust air associated with any emergency generators;
 - Noise control strategies for noise emissions from chillers on the roof-top plant deck of the existing Kingston Building;
 - Erection of signs indicating truck drivers to turn off engines in the loading dock;
 - Double glazing to windows in all sensitive areas above and adjacent to the loading dock;
 - Glass installation should comply with AS 1288-2006. Materials, construction and installation of all windows are to comply with AS 2047-1999; and
 - Location of waste disposal bins in shielded areas, and waste collection restricted to weekdays 7:00am to 6:00pm.

5.9 WASTE MANAGEMENT

In accordance with Project Approval MP 08_0170, all waste / surplus building material from the construction phase of the development will be recycled wherever possible. A detailed Waste Management Plan will be incorporated into the detailed Environmental Management / Construction Plan.

Operational waste, including biological and anatomical waste, from the approved new hospital building and proposed building additions, will be removed by the existing contractor for the existing Newcastle Private Hospital buildings on a daily or more frequent needs basis.

The existing EPA licence for dealing with sharps held by Newcastle Private Hospital will be updated to include the new hospital building.

5.10 ENERGY EFFICIENCY

In accordance with MP 08_0170, a number of measures will be incorporated into the development, including the proposed building additions, in order to address ESD principles. The

proposal will continue to meet Section J of the BCA and include the ESD measures advised under MP 08_0170 including water savings measures, appropriate landscaping species and reuse of stormwater.

5.11 UTILITIES AND SERVICES

As indicated within the Project Approval (MP 08_0170) the proposed development will be provided with connection to all essential services, including power, water, sewer, gas and telecommunications.

5.12 SOCIAL IMPACT

Newcastle City Council has adopted a Social Impact Assessment Policy to be used in the assessment of applications such as that proposed by this application. The policy has been operative since November 1999 and provides guidance for the identification of potential social impacts by way of a matrix and with the use of scoping questions. The SIC follows and addresses the relevant requirements of the policy.

Access & Mobility

The proposal will comply with the BCA access requirements.

Accommodation & Housing

The proposed development will not result in the loss of any existing housing stock.

No special accommodation needs are likely to be required for any temporary workforce associated with the development.

Community Services and Facilities

The proposed development is unlikely to result in a significant increased demand for community facilities and services within the locality.

The proposal has no significant adverse physical impact on public spaces such as overshadowing or wind tunnelling effects.

The proposed alterations and additions to existing and approved hospital buildings makes a significant contribution to health care in the Hunter region and the proposed expansion of the Newcastle Private Hospital will reinforce this role.

Community Structure

The development will not decrease the community's capacity to act cooperatively and will not cause divisions within the community.

The proposal does not physically separate one part of a community from another.

Crime and Public Safety

The proposed alterations and additions are not a high risk development that requires extensive measures to be incorporated to provide security to the occupants of the building outside of the common sense practice of: incorporating appropriate lighting of communal spaces and carparks; design that allows for casual surveillance; and appropriate consideration of landscape design.

Further comment in relation to Crime is made below within Section 5.13 of this report.

Interaction between New Development and Existing Community

This report demonstrates that the proposed development will not have an adverse impact on immediately adjoining neighbours or the general area.

Needs of Social Groups

The gender mix of the population will not be affected by the proposed development.

The proposed development requires no additional services primarily affecting women.

No special needs group will need to be catered for as a result of the proposed development.

Population Change

The proposal will not result in a significant population change.

Recreation Facilities

No recreation area or facility will be lost as a result of the proposed development and no change in quality of existing recreation areas or facilities will result.

Social Equity

It is not expected that the proposed development will assist any specific disadvantaged social group. At the same time it is not expected that the proposed development will disadvantage any social group.

5.13 SAFETY AND SECURITY

As discussed in the Section on Planning Controls, Newcastle City Council has adopted a memorandum of understanding with the Newcastle Police Service for the consideration of crime in assessment of development. This proposal has been considered relative to the principles of surveillance; access control; territorial reinforcement; and space management as documented

in the publication "Crime prevention and the assessment of development applications" published by the Department of Urban & Transport Planning.

Surveillance

The proposal will maintain the incorporation of:

- Clear sightlines between public and private spaces; and
- Ongoing and increased patronage of the site.

The continued use of the site for the purpose of a hospital, the proposed expansion of the facility accommodating increased patronage to the site, and the locality of the facility on a highly visible site within a larger overall hospital campus, offers a high level of security to the area through casual surveillance.

Access Control

The site and development incorporates appropriate physical and symbolic barriers to attract, channel and restrict the movement of people to and within the site, including fencing, landscaping and signage.

Territorial Reinforcement

The design ensures a clear distinction as to what areas of the site / building are public versus private, and ensures the ongoing provision of a health facility servicing the wider community, contributing to the likelihood of general respect and care for the facility by the public.

Space Management

The physical spaces have been designed such that they are able to be maintained by the owners so that the buildings appear to be well kept and therefore deter crime

Furthermore, as advised under MP 08_0170, the Newcastle Private Hospital has an existing Security Management Plan. The Security Management Plan will be revised to include the new building and its operations.

All staff and visiting medical officers at Newcastle Private Hospital will be issued with security photo identification access cards.

Electronic lockdown will occur at 9:00pm and will be unlocked at 6:00am with an access card required to enter the hospital during this time.

Night patrols will be carried out by a contracted security firm who check all external doors. Internal hospital security will be the responsibility of a night wards person.

The Kingston Building is serviced by a staff duress system, which is an emergency alert system used by individual staff. The alert is linked to the security system. This “staff duress” system will be extended to the new proposed development. CCTV will be installed within the new car park areas.

Lighting throughout the facility will be in accordance with AS1680 together with NSW Health Code TS11. Lighting to enable the evacuation of the building in the event of an emergency shall be provided to comply with the BCA and AS2293. Central test switching of the facility will be provided to comply with the latest Australian Standards. The incorporation of the “Running Man” style of exit sign will also be provided in the new facility.

The existing Newcastle Private Hospital’s comprehensive Emergency and Evacuation Plan will be updated to include the proposed building additions. Emergency and Evacuation planning is done in collaboration with external consultants, who provide training to staff in evacuation procedures at compulsory education days held monthly. The new hospital building and staff will be incorporated into these plans and training programs.

The Fire Safety Strategy and Assessment prepared by Arup for the existing Newcastle Private Hospital ‘Kingston Building’ (February, 2003) will also be updated to encompass the approved new hospital building and the proposed building additions.

6.0 Conclusion

The need for the proposed modification is in response to overall holistic planning, integrating uses across current and approved buildings within the Newcastle Private Hospital precinct, and reflecting updated analysis of services and financial modelling from that which drove the 2010 Project Approval (MP 08_0170).

The proposed modifications and allocation of hospital uses is based on Newcastle Private Hospital's desire to achieve improvements to the efficient provision of integrated hospital services between existing and new buildings and to meet the changing needs of staff, providers and clients.

In particular the proposed modifications facilitate the provision of increased health services to the community to help meet the growing demand and increasing expectations for such health services to be readily accessible.

The subject site is located within an existing developed hospital campus and is relatively unconstrained from a physical, ecological and design perspective. Prior Project Approval for a new hospital building provided under MP 08_0170, established this fact and the proposed modifications do not change this.

Consideration of the range of matters in this report confirms that the proposed modifications may be carried out without significant adverse impact to neighbouring properties, the context and character of the locality or the environment.

The proposal presents a significant opportunity to expand and improve a vital health service for the community of Newcastle and the wider Hunter region and has been designed to meet the demand for hospital services in the locality.

Accordingly, we believe that the proposed modifications are appropriate for approval.

Appendix A

MAJOR PROJECT APPROVAL (MP 08_0170)

Appendix B

ARCHITECTURAL PLANS (DWP/SUTERS)

Appendix C

CERTIFICATES OF TITLE, DEPOSITED PLANS AND STRATA PLAN

Appendix D

STATEMENT OF HERITAGE IMPACT (JOHN CARR HERITAGE DESIGN)

Appendix E

TRAFFIC AND PARKING ASSESSMENT (INTERSECT TRAFFIC)