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# Hurstville Private Hospital Redevelopment Environmental Assessment Report

Prepared by Inspira Property Group

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## Executive Summary

### Purpose of this report

This Project Application has been made to the Department of Planning and Infrastructure under Part 3A of the *Environmental Planning and Assessment Act, 1979* (as amended by the *Environmental Planning and Assessment Amendment (Part 3A Repeal) Act 2011 No. 22*).

It relates to the proposed redevelopment of Hurstville Private Hospital which will comprise additions and alterations to the existing Hospital, focussed on the existing Medical Centre on the corner of Pearl and Millett Streets, Hurstville. The existing Hospital comprises 6,206 square metres (m<sup>2</sup>) of gross building area. There will be 5,201 m<sup>2</sup> of new building work including additions to the upper and lower basements, and 3,258 m<sup>2</sup> of the existing hospital will be redeveloped and refurbished.

The proposed development works have a Capital Investment Value of approximately \$32.2 Million.

A request for declaration of the Major Project and the issue of Director-General's Requirements was sought on 16 February 2011 and a revised request was submitted on 23 March 2011. The project was declared to be a Major Project on 29 March 2011. Accordingly the Director General's Requirements (DGRs) were issued to Continuum Healthcare Group (the former proprietors of the Hospital) on 22 July 2011. This submission addresses the Requirements.

### Overview of Project

The development proposal comprises redevelopment within the existing Hurstville Private Hospital building and new building works.

The redevelopment is predominantly internal and located at ground level of the building with partial redevelopment within the basement car parks and on level 1. The existing south-east corner of the site is currently a large excavated space used for parking and service vehicle access. It will be developed to become an extension to the existing building footprint. This extension will include: 3 new lifts, extension of the lower and upper basement levels, and 3 new storeys over the existing two storey medical centre to create a 5 storey building which will be extended into the south-east corner of the site over the new extended basement levels.

There will be a new entry to the Hospital off Pearl Street however the existing main entry to the Hospital off Gloucester Road will be retained.

There will be additional parking created over the existing at-grade car park located at 12 Millett Street in addition to the expanded basement car parking area on the corner of Millett and Pearl Street.

There will be an additional 42 beds bringing the current 54 beds to 96 beds. Day surgery and maternity services will be enhanced. The diagnostic services including radiology will be expanded and enhanced.

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## The Site

The Hospital has operated in this location since the 1920s. It is ideally located on the edge of the declared “Hurstville City Centre”, in close proximity to the Regional Bus-Rail Interchange, and M5 Motorway, which provides a direct link to the airport and Sydney Central Business District. It is 4 minutes by bus to the Hurstville rail station.

The Hospital occupies a total land area of 7,739 m<sup>2</sup> and the current building area is 6,206m<sup>2</sup>.

## Planning Context

Section 4 of this Environmental Assessment Report considers all applicable planning instruments in detail. The proposal complies with all relevant planning controls.

The land is zoned Special Uses 5(a) Hospital except the open car park at 12 Millett street which is zoned No. 2 Residential. The proposal is permissible with consent and meets the objectives of the subject zones. Further the Hospital zoning does not have specific controls for setbacks, Floor Space Ratio (FSR) or height, however it is considered the building form is on a scale compatible with the existing Hospital uses and provides a transitional interface between the potential 16 storey, high-density mixed-use development to the south and the low and medium-density residential development to the north.

## Environmental Assessment

This Environmental Assessment Report (EAR) provides an assessment of the potential environmental impacts of the development in accordance with the Director-General’s Environmental Assessment Requirements and sets out the undertakings to be made by Hurstville Private Pty Ltd to manage and minimise potential construction and operational impacts arising from the development.

## Conclusion

The EAR addresses the Director-General’s Environmental Assessment Requirements. The proposal provides an opportunity to expand the Hospital and allow for an orderly upgrade of the building, ensuring the sustained viability of operations and continuous improvement of the service offering. The potential impacts of the proposed development are minor and able to be managed. Given the planning merits of the proposal and the community service provided by the Hospital, the proposed development warrants approval by the Minister for Planning and Infrastructure.

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## CONTENTS

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<b>Executive Summary</b>	<b>3</b>
Purpose of this report	3
Overview of Project	3
The Site	4
Planning Context	4
Environmental Assessment	4
Conclusion	4
 <b>Statement of Validity</b>	 <b>11</b>
 <b>1.0 The Project</b>	 <b>12</b>
1.1 Introduction	12
1.2 Background	12
1.3 Approval Process	13
1.4 Overview of the Project	13
1.5 Director General's Requirements	15
1.6 Plans and Documents	16
1.7 Project Team	17
 <b>2.0 Site Analysis</b>	 <b>18</b>
2.1 Location and Context	18
2.2 Land Ownership and Zoning	20
2.3 Existing Development	20
2.4 Site Area	25
2.5 Site Topography	26
 <b>3.0 Redevelopment Proposal</b>	 <b>27</b>
3.1 Existing Improvements	27
3.2 Strategic Intent	31

---

3.3	Building Description	31
3.4	Development for which consent is sought	33
3.5	Demolition and Earth Works	34
3.6	Building height and floor space	34
3.7	Traffic Movements and Parking	34
3.8	Accessibility	35
3.9	Ecologically Sustainable Development	35
3.10	Stormwater and Drainage	36
3.11	Services and Infrastructure	36
3.12	Landscaping	39
3.13	Waste Management	39
3.14	Consultation	39
<b>4</b>	<b>Environmental Assessment</b>	<b>41</b>
4.1	Introduction	41
4.2	Statutory and Strategic Planning Compliance	41
4.3	Statutory Planning	41
4.4	State Environmental Planning Policies	44
4.5	Current Zoning	47
4.6	Section 117 Ministerial Directions	50
4.7	Consistency with Planning Instruments and Policies	51
4.8	Design Objectives	53
4.9	Urban Design Response	54
4.10	Setbacks	56
4.11	Privacy and Over-sighting	58
4.12	Urban Design Outcome	60
4.13	Safety by Design – CPTED Principles	62
4.14	Lighting and Signage	64
4.15	Staging	64

---

4.16	Transport, Traffic and Parking	65
4.17	Accessibility	66
4.18	Contamination and Hazardous Materials	66
4.19	Operational Management	67
4.20	Aboriginal Heritage	67
4.21	Cultural and European Heritage	68
4.22	Geotechnical Conditions & Structural Integrity	69
4.23	Water and Drainage	70
4.24	Noise and Vibration	71
4.25	Air Quality	72
4.26	Utilities and Services	73
4.27	Building Code of Australia	75
4.28	Consultation	75
4.29	Construction Management	76
4.30	Waste Management	76
4.31	Bulk Earthworks	77
4.32	Contributions	78
<b>5.0</b>	<b>Draft Statement of Commitments</b>	<b>79</b>
5.1	Introduction	79
5.2	Demolition Management Plan	79
5.3	Construction Management Plan	79
5.4	BCA Compliance	80
5.5	Plant and Equipment	80
5.6	Aboriginal Cultural Heritage	80
5.7	European and non-Aboriginal Cultural Heritage	81
5.8	Site Environmental Assessment	81
5.9	Landscape and Vegetation	81
5.10	Parking and Loading Bays	81

---

5.11	Vehicle Driveways and Manoeuvring Areas	81
5.12	Accessibility and Pedestrian Access	82
5.13	Lighting	82
5.14	Services	82
5.15	Integrated Water Management Plan	82
5.16	Consultation	82
5.17	Environmental Management Plan	82

## 6.0 Conclusion 84

### Figures

Figure 1	Regional Context
Figure 2	Site Context
Figure 3	City Centre boundaries
Figure 4	Existing entry
Figure 5	Site survey
Figure 6	Hospital site boundaries near City Centre
Figure 7	3D massing City Centre and Hospital
Figure 8	Hospital Lots
Figure 9	Enclosed Residential Lots
Figure 10	Building Sections
Figure 11	Medical Centre access
Figure 12	Pearl Street Frontage
Figure 13	Gloucester Road Frontage
Figure 14	Old wards
Figure 15	New Hospital wing
Figure 16	Hospital staff car park
Figure 17	Soil & groundwater sample locations
Figure 18	Extract from Hurstville LEP 2004
Figure 19	Extract from draft Hurstville LEP 2011 – SP2 zone
Figure 20	Extract from draft Hurstville LEP 2011 (City Centre) – B4 Mixed Use zone
Figure 21	Street view of corner of Pearl and Millett Street
Figure 22	Street view of existing setbacks to Millett Street
Figure 23	Aerial view of existing setbacks to Millett Street
Figure 24	Concept view of proposed setbacks



Figure 25	Location of upper basement and fencing
Figure 26	Pearl Street frontage existing footpath

## Tables

Table 1	Director General's Requirements
Table 2	Project Team
Table 3	Real Property list for Hospital-owned lots
Table 4	Numerical Overview of Redevelopment Proposal
Table 5	Summary of Planning Instruments
Table 6	Summary of Key Urban Design Outcomes

## Appendices

A	Director-General's Requirements <i>DEPARTMENT OF PLANNING &amp; INFRASTRUCTURE</i>
B	Capital Investment Value <i>RIDER LEVETT BUCKNALL</i>
C	Architectural Drawings <i>HEALTH SCIENCE PLANNING CONSULTANTS</i>
D	Landscape Plan <i>MOIR LANDSCAPE ARCHITECTURE</i>
E	Civil Drawings <i>NORTHROP PTY LTD</i>
F	Structural & Civil Engineering Reports <i>NORTHROP PTY LTD</i>
G	Traffic, Transport & Parking Report <i>COLSTON, BUDD, HUNT &amp; KAFES PTY LTD</i>
H	Building Services and Utilities <i>ERBAS PTY LTD</i>
I	Noise, Vibration and Air quality Reports <i>GHD</i>
J	Aboriginal Heritage Report <i>ARCHAEOLOGY AND HERITAGE MANAGEMENT SOLUTIONS PTY LTD</i>
K	European & Cultural Heritage Report <i>ARCHAEOLOGY AND HERITAGE MANAGEMENT SOLUTIONS PTY LTD</i>
L	Accessibility Report <i>MORRIS GODING ACCESSIBILITY CONSULTANTS</i>
M	Contamination Assessment: Phase 1 and 2 Reports <i>JBS ENVIRONMENTAL PTY LTD</i>

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N	Arborist's Report <i>MOIR LANDSCAPE ARCHITECTURE</i>
O	BCA Audit Report <i>DAVIS LANGDON</i>
P	Operations Manual <i>HURSTVILLE PRIVATE PTY LTD</i>
Q	Radiation safety and protection plan <i>HURSTVILLE PRIVATE PTY LTD</i>
R	Crime Prevention Through Environmental Design (CPTED) <i>INSPIRA PROPERTY GROUP</i>
S	Hazardous Materials Survey Report <i>JBS ENVIRONMENTAL PTY LTD</i>
T	Community Consultation Report (to be added after public exhibition) <i>INSPIRA PROPERTY GROUP</i>
U	Draft Voluntary Planning Agreement <i>DEPARTMENT OF PLANNING &amp; INFRASTRUCTURE TEMPLATE</i>
V	Email from DPI re inclusion of car park & traffic modelling

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## Statement of Validity

Prepared under Part 3A of the *Environmental Planning and Assessment Act, 1979* (as amended by the *Environmental Planning and Assessment Amendment (Part 3A Repeal) Act 2011 No. 22*).

### Environmental Assessment Report prepared by

Name	Helen E. Spira
Qualifications	Masters Planning, Masters Property Development, Masters Environmental Management, Diploma Applied Science (Nursing), Certificate IV Property Services (Real Estate), Licensed Real Estate Agent, Certified Practising Planner, MPIA, REINSW
Address	S 108, 203 – 233 New South Head Road, Edgecliff NSW 2027
In respect of	Major Project Application for the redevelopment of Hurstville Private Hospital

### Project Application

Applicant Name	Hurstville Private Pty Ltd
Applicant address	Suite 6, Level 10, 163 O'Riordan Street Mascot NSW 2020
Land to be developed	37 Gloucester Road Hurstville
Proposed Development	Redevelopment of Hurstville Private Hospital

### Environmental Assessment Declaration

An Environmental Assessment is attached.

Declaration	<p>I certify that I have prepared the contents of this Environmental Assessment and to the best of my knowledge:</p> <ol style="list-style-type: none"><li>1. It is in accordance with the <i>Environmental Planning and Assessment Act 1979</i> and <i>Environmental Planning and Assessment Regulation 2000</i></li><li>2. It contains all information that is relevant to the environmental assessment of the development and</li><li>3. It is true in all material particulars and does not, by its presentation or omission of information, materially mislead.</li></ol>
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Signature



Name

Helen Elizabeth Spira

Date

29 October 2012

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# 1.0 The Project

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## 1.1 Introduction

This Project Application and Environmental Assessment Report (EAR) is submitted to the Minister for Planning and Infrastructure pursuant to Part 3A of the *Environmental Planning and Assessment Act 1979* (EPAA) (now repealed). The report is to fulfill the Environmental Assessment Requirements issued by the Director General of Planning and Infrastructure under section 75F of the Act for the preparation of a Project Application for the redevelopment of Hurstville Private Hospital located at 37 Gloucester Road, Hurstville, New South Wales. The Environmental Assessment Requirements (or Director General's Requirements (DGRs)) continue to apply to the determination of the project under the transitional provisions of:

- Environmental Planning and Assessment Amendment (Part 3A Repeal) Act 2011; and
- Environmental Planning and Assessment Amendment (Part 3A Repeal) Regulation 2011 (Department of Planning and Infrastructure Planning Circular PS\_11-021)

The report has been prepared by Inspira Property Group on behalf of the owners of the Hospital, Hurstville Private Pty Ltd based on information prepared by the proponent and appointed consultants. This report should be read in conjunction with the specialist consultant reports which form Appendices to this report.

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## 1.2 Background

The Hurstville Private Hospital is located within the Hurstville Local Government Area, a major regional centre in the southern St George region of the Sydney Metropolitan Area. The Hospital's surgical and medical wards currently have 54 bed licences in use with 31 bed licences in reserve. This proposal is to increase the capacity of the Hospital to 96 beds.

More than 1000 babies are born in its five delivery suites each year. The Hospital recently delivered its 20,000<sup>th</sup> baby since the obstetric services commenced in the 1950s.

The Hospital's core specialties include urology and colorectal surgery. Other specialties include maternity and women's health, general surgery, endoscopy, orthopaedics, maxillo-facial, plastic and reconstructive surgery. The redevelopment of the Hospital will support a service delivery strategy which responds to the needs of an increasing and ageing population and the associated increasing prevalence of chronic diseases, by building on these core specialties.

The aim of the Major Project Application is to achieve a substantial increase in the capacity of the Hurstville Private Hospital to meet the future demand for private hospital health services in the local area and the region.

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### 1.3 Approval Process

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A Preliminary Environmental Assessment Report (PEAR) was prepared and an application lodged with Department of Planning (DoP) in February 2011 to have the project declared to be a Major Project under Part 3A of the *Environmental Planning and Assessment Act 1979* (EPAA).

On 29 March 2011, in accordance with section 75B of the EPAA, the Minister for Planning formed the opinion that the development proposal was a 'Major Project' pursuant to Schedule 1 (Class of Development), Group 7, Clause 18 – Health and Public Service Facilities, of the State Environmental Planning Policy (Major Development) 2005 (Major Development SEPP) and therefore to be determined under Part 3A of the EPAA 1979.

On 22 July 2011, in accordance with Section 75F of the EPAA, the Director General of the Department of Planning issued the requirements for the preparation of an Environmental Assessment report (EAR) for the project.

The project has a Capital Investment Value (CIV) of \$32.2 Million.

A copy of the Director General's Requirements for the EAR is included in **Appendix A**.

On 27 June 2011, Part 3A of the *Environmental Planning and Assessment Act, 1979* was repealed by the *Environmental Planning and Assessment Amendment (Part 3A Repeal) Act 2011 No. 22*. Development of the nature of this project, that is a Hospital, that had already been the subject of assessment under Part 3A before the repeal, continues to be dealt with under transitional arrangements in accordance with the former provisions of that Part.

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### 1.4 Overview of the Project

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The redeveloped Hurstville Private Hospital will provide an additional 4,865 square metres of floor space allowing for 96 beds and 7 operating theatres. The basement will be expanded to provide additional parking, new plant and store rooms and a detention tank.

The redeveloped Hospital will comprise the following:

- 10,483 square metres of floor space
- 94 car parking spaces
- 4 new theatres, with 7 theatres in total
- Storage and service areas
- Upgraded plant rooms
- Expanded and modernised hospital facilities.

The overall project will include:

- Improved building design to allow for future modifications and technological advancements in surgical, medical and diagnostic services;
  - New ancillary facilities to meet increased demand, expanded research and educational facilities and changing clinical needs;
  - New car-parking facilities;
-

- Enhanced pedestrian and vehicle access;
- A transitional development interface between the high rise City Centre and the low-rise residential area to the north, west and south;
- Facilitate the expansion of an employment node in close proximity to Hurstville Railway Station;
- A high quality urban environment and well designed, accessible public domain;
- Enhanced access to public transport including walking, cycling, rail stations and the bus network;
- Managed vehicle movements so that pedestrians, residents, visitors and patients can move safely and freely around the site;
- Encouraging the use of public transport by improving the access to the bus and rail network, including disabled patrons;
- Improved amenity of the area by enhancing the landscaping of the site;

The redevelopment project will increase the capacity of the Hospital from 13,000 admissions per annum to an estimated 20,000 admissions per annum.



## 1.5 Director General's Requirements

The Director-General's Requirements (DGRs) for the proposed project were issued to the owner of Hurstville Private Hospital on 22 July 2011 under Section 75F of the EPAA. The DGRs are summarised in the table following, including reference to where they are addressed later in this report and the relevant complete technical report.

A full copy of the DGRs is found at Appendix A.

TABLE 1: DIRECTOR GENERAL'S REQUIREMENTS

General Requirements	
Topic	Section
Executive Summary	Introduction
Statement of Validity	Introduction
Site Analysis	Section 2
Description of Proposed Development	Sections 1.4, 3.2, 3.3, 3.4
Assessment of Key Issues	Section 3
Assessment of potential impacts	Section 4
Quantity Surveyor's Certificate of Cost	Appendix B
Conclusion and Justification of the suitability of the site, and public interest benefit of the proposal	Conclusion
Key Assessment Requirements	
Relevant EPIs, policies and guidelines	Sections 4.1 – 4.7
Built Form and Urban Design	Sections 4.8 – 4.9; Appendix C
Environmental & Residential Amenity	Sections 4.8 – 4.9, Appendix C
Crime Prevention Through Environmental Design	Section 4.13, Appendix R
Transport and Accessibility Impacts	Sections 4.16 – 4.17; Appendix G

Ecologically Sustainable Development	Sections 3.9; 4.26; Appendix H
Contributions	Appendix U: Draft VPA
Contamination/Hazards	Sections 3.13; 4.18; Appendix M
Operational Management	Section 4.19, Appendix P
Heritage	Section 4.21; Appendix K
Aboriginal Heritage	Section 4.20; Appendix J
Water & Drainage	Section 4.23; Appendix E
Noise and Vibration	Section 4.24; Appendix I
Waste	Section 4.30, Appendix P
Utilities	Section 4.26; Appendix H
Consultation	Section 4.28; Appendix T
Statement of Commitments	Section 5.0

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## 1.6 Plans and Documents

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The following plans and documents are attached or the proposed contents of the detailed Plans to be prepared prior to construction are included in the EAR:

- Existing site survey plan
  - Site Analysis Plan
  - Locality/Context Plan
  - Architectural Drawings
  - Geotechnical and Structural Report
  - Stormwater Concept Plan
  - Erosion & Sediment Control Plan
  - View Analysis
  - Landscape Plan
  - Shadow Diagrams
  - Construction Management Plan
  - Traffic Management Plan.
-



## 1.7 Project Team

The project team includes the following consulting firms:

TABLE 2: PROJECT TEAM MEMBERS

Team Member	Company
<b>Landowner</b>	Vital Healthcare Australian Property Pty Ltd ABN 48 751 610 688
<b>Proponent</b>	Hurstville Private Pty Ltd (Lessee)
<b>Project Management</b>	Hurstville Private Pty Ltd
<b>Urban Planning</b>	Inspira Property Group
<b>Architecture and Urban Design</b>	Health Science Planning Consultants
<b>Landscape Design</b>	Moir Landscape Architecture Pty Ltd
<b>Structural Engineer</b>	Northrop Pty Ltd
<b>Civil Engineer, Drainage, Water</b>	Northrop Pty Ltd
<b>Building Services Engineer</b>	Erbas Pty Ltd
<b>Acoustics, Vibration &amp; Air Quality</b>	GHD Pty Ltd
<b>Traffic &amp; Transport</b>	Colston Budd Hunt & Kafes Pty Ltd
<b>Contamination Assessment</b>	JBS Environmental Pty Ltd
<b>Aboriginal and European Heritage</b>	Archaeological & Heritage Management Solutions
<b>Community Consultation</b>	Inspira Property Group
<b>Accessibility</b>	Morris Goding Accessibility consultants
<b>Quantity Surveyor</b>	Rider Levett Bucknall
<b>Surveyor</b>	Mitchell Land Surveyors
<b>BCA Audit</b>	Davis Langdon
<b>BCA Certifier</b>	Blackett Maguire Goldsmith

## 2.0 Site Analysis

### 2.1 Location and Context

#### Regional Context

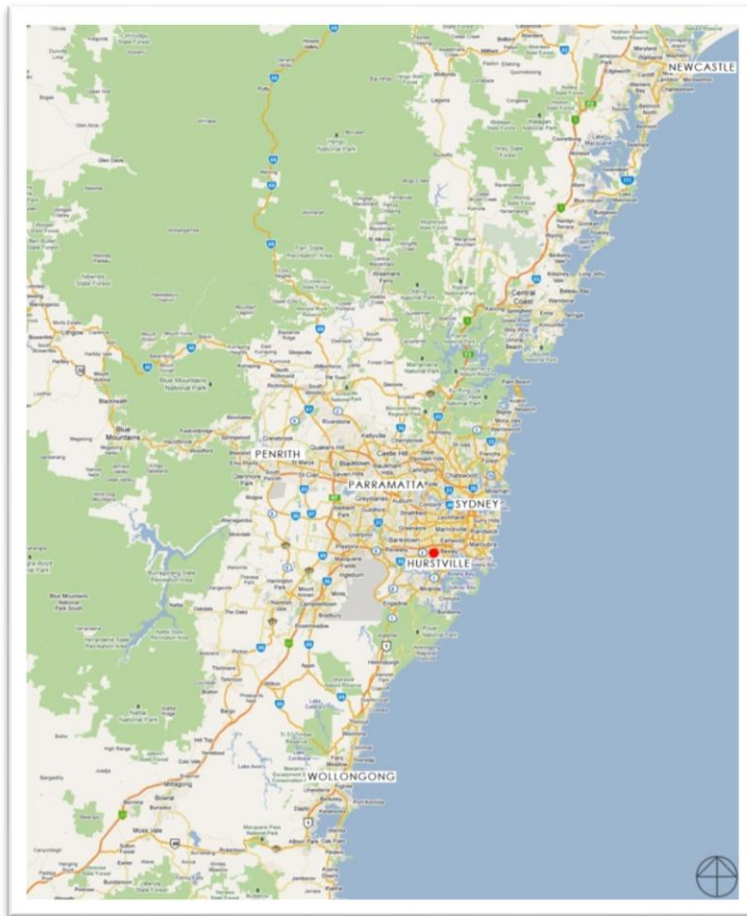


FIGURE 1: REGIONAL CONTEXT OF HURSTVILLE CITY

Hurstville Private Hospital is located 24 kilometres south-west from the Sydney Central Business District (CBD). The Hospital is accessed from the Sydney CBD by the M5 Motorway then King Georges Road with a drive of approximately 20 minutes.

Hurstville City Centre has been identified as a Major Centre in the Metropolitan Strategy for Sydney.

## Local Context

The Hospital is within 1 kilometre (14 minutes' walk) of both the Hurstville Regional Bus/Rail Interchange and the Penshurst Railway station.

A bus service runs from Pearl Street to Hurstville Railway Station. The service provides disabled access and it is a 4 minute trip which runs regularly throughout each day.



FIGURE 2: REGIONAL LOCATION PLAN SHOWING THE HOSPITAL SITE IN THE CONTEXT OF THE CITY CENTRE, KING GEORGES ROAD AND THE ILLAWARRA RAILWAY LINE



## 2.2 Land Ownership and Zoning

The Real Property Description is noted in Table 3 following. The land is comprised of 12 Lots which are owned by Vital Healthcare Australian Property Pty Ltd.

The site is zoned Special Uses 5(a) Hospital under the Hurstville Local Environmental Plan (LEP) 1994. Hospital uses are permissible with consent in this zone. The car park Lot at 12 Millett Street is zoned Residential 2(a) and the car park use is permissible with consent in this zone.

## 2.3 Existing Development

The Hospital is located across the road, and to the north-west of the boundary of the Hurstville City Centre and opposite existing and proposed high density residential apartment developments.



FIGURE 3: LOCATION OF HURSTVILLE PRIVATE HOSPITAL OPPOSITE THE CITY CENTRE BUSINESS ZONE



FIGURE 4: EXISTING HOSPITAL ENTRY

In 1924, two ex-army nurses returned from World War 1 and established the Goshen Private Hospital, in what was previously a private house called Meryla. In 1951 the Hospital was purchased with money raised by the Rotary Club and became the Hurstville Community Hospital. The Hospital was purchased by private interests in 2007 and since that time it has been progressively modernised and new wards developed.

The most recent renovations included 15 new adult beds, a new 4 bed High Dependency Unit and a new Special Care Nursery, completed in February 2009. The Hospital currently has 54 bed licences in use.

The Hospital comprises a number of buildings of varying quality and age. The front of the Hospital on Gloucester Road includes the original residence built in the 1800s which is the location of the Hospital Administration.

There is a glass fronted reception area on Gloucester Road from which the various wards of the hospital radiate. The central area of the Hospital is a small landscaped courtyard adjacent a cafeteria which is well patronised. The Hospital frontage to Pearl Street comprises a pharmacy, medical centre and Day surgery wing, with a radiology unit and consulting rooms on the second storey. The Millett Street frontage is the rear section of the Hospital comprising birthing rooms, kitchen and amenities. 12 Millett Street is a single level car park for the exclusive use of Hospital staff.

The Hospital is a “U-shaped” development. It encloses 3 privately owned properties comprising 5 dwellings including 2 detached dwellings and 3 villas. The hospital campus has three street frontages including Gloucester Road (100.6 metres), Pearl Street (94.6 metres) and Millett Street (55 metres). The main entrance is off Gloucester Road and the parking is off Millett Street.

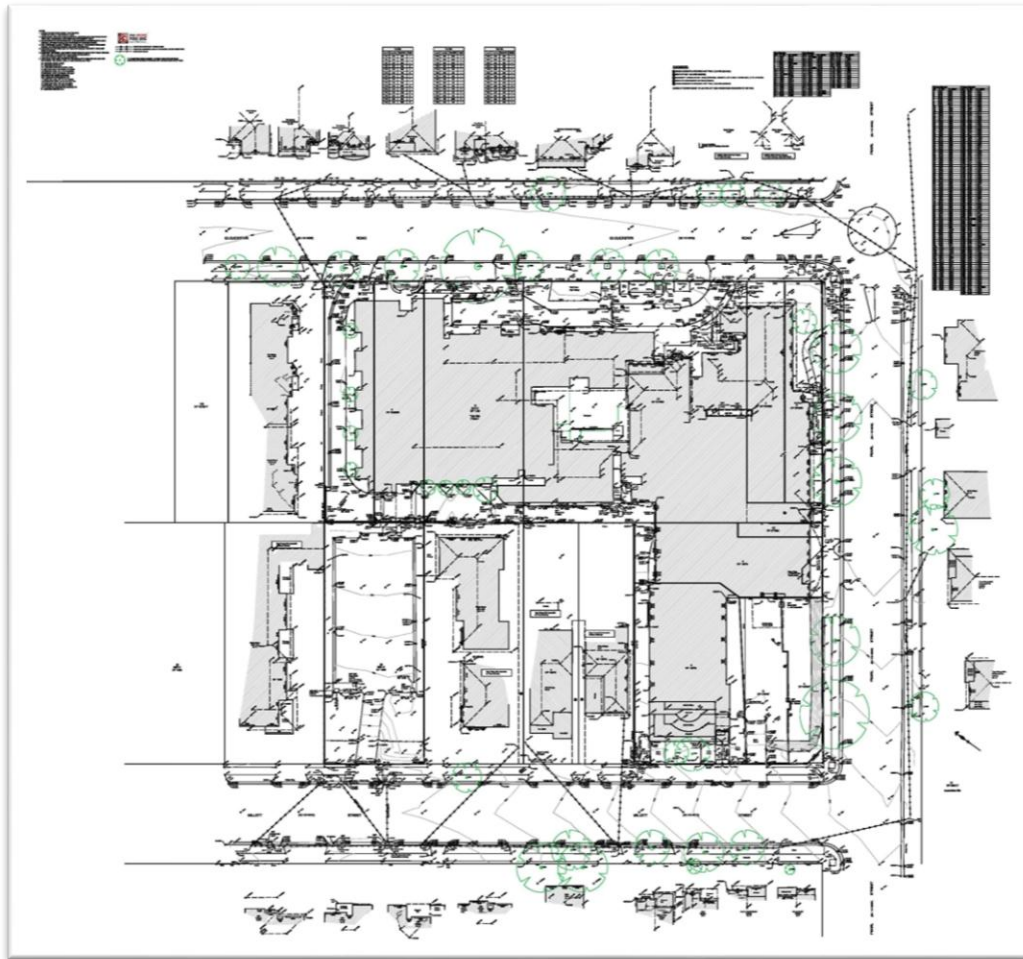


FIGURE 5: SITE PLAN SHOWING EXISTING HOSPITAL IMPROVEMENTS (SOURCE: MITCHELL LAND SURVEYORS)

The local area is characterised by early period housing interspersed with modern homes and apartments. To the immediate west and north are low and medium density residential developments. To the south-east is a large development currently approved to be 10 to 15 storeys in height, comprising approximately 35,000 square metres of residential apartments and commercial and retail uses. The portion of the development lot located opposite on Pearl Street is known as Site 2A in the Hurstville Development Control Plan No. 2 (DCP2), which applies to land in the City Centre. The access to basement parking for Site 2A will be off Pearl Street, opposite the Hospital.

Site 2A forms the boundary of the area described in planning documents as the Hurstville City Centre.

Once the draft Hurstville Comprehensive Local Environmental Plan 2012 is gazetted, Site 2A can be developed to 16 storeys as a mixed use development.





FIGURE 6: HURSTVILLE HOSPITAL SITE IN RELATION TO CITY CENTRE (HBO+EMTB)



FIGURE 7: EXISTING 3D MASSING STUDY SHOWING HOSPITAL OPPOSITE SITE 2A AND CITY CENTRE (HBO+EMTB)

## Real Property Description

The lots which comprise the properties are shown in Table 3, following.

TABLE 3: REAL PROPERTY DESCRIPTION

Lot and DP
Lot 20, SEC D, DP1426 (Car Park)
Lot 12 SEC D DP 1426
Lots 2 and 5, DP 16273
Lots A and B, DP 375463
Lots C1 and C2, DP 377900
Lots A and B, DP 400487
Lots 1 and 2, DP 1045223





FIGURE 8: LOTS WHICH COMPRISE HURSTVILLE PRIVATE HOSPITAL (SOURCE: GOOGLE EARTH)



FIGURE 9: PRIVATE LAND ENCLOSED BY THE HURSTVILLE PRIVATE HOSPITAL (HBO+EMTB)

## 2.4 Site Area

The land currently owned by Vital Healthcare Australian Property Pty Ltd which comprises the Hospital and is zoned Special Uses 5(a) is 6,760 square metres ( $m^2$ ) in area and the car park is 979.25  $m^2$  in area bringing the total area of Hospital uses to 7739  $m^2$ . The site is a U-shape with 3 street frontages.

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## 2.5 Site Topography

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The site drops steeply away from the corner of Millett and Pearl Streets where it has been excavated to provide access to basement car parking and building basement. The lots facing Gloucester Road are elevated above the road and slope gently towards the north-west. The car park and private dwelling lots on Millett Street slope at a higher gradient from north-east to south-west. The site generally is higher than immediately adjacent lots to the north-west. The site is lower than the development sites opposite on Pearl Street.

The Phase One Environmental Assessment undertaken by JBS Environmental Pty Ltd (Appendix M) includes the following information:

“A review of the online topographic map provided by the NSW Natural Resources Atlas Home (NSW DNR 2010) indicates that the site has an elevation ranging between 55 and 65 metres Australian Height Datum (AHD). The site slopes from the south eastern corner to the north western portion of the site, with the highest point coinciding with the south eastern site corner boundary.

Topographical features noted include:

The site boundary along Gloucester Road was observed as 0.5 to 1 metres higher than the road reserve.

The car park located at 12 Millett Street slopes from the north eastern corner to the south west, with a decline in elevation of approximately 1.5 metres.

The loading dock and underground car park located on the south western corner of the site is 2 metres below Millett Street.”

## 3.0 Redevelopment Proposal

### 3.1 Existing Improvements

The Hospital land is entirely developed with private hospital facilities and a car park. A description of the improvements is described following, with reference to the figure below which numbers each of the different existing buildings and car park.



FIGURE 10: BUILDING COMPONENTS (PHOTO SOURCE: NEARMAP)

The site is a u-shaped development of approximately 7,740 m<sup>2</sup> which primarily addresses the Gloucester Road frontage. The site is bound to the south by Pearl Street, to the west by Miller Street and to the east by Gloucester Road.

The Hospital is essentially one large complex, which comprises a number of building sections built over a period from the early 1900's to 2009. The Hospital buildings include a reception area, operating surgeries, a day surgery unit, a medical centre and basement car park, a cafeteria, a courtyard, a commercial kitchen, amenities, a hazardous materials store and hospital rooms. There is a separate at-grade car park.

The site slopes generally from south-east to north-west, and the basement parking and loading dock beneath the Medical Centre are approximately 1.5 metres below the level of both Pearl and Millett Streets.

The open sealed car park located at 12 Millett Street, is situated approximately 1.5 metres below the level of the Hospital buildings and slopes gently from east to west.

**Area 1** is the Medical Centre, which is a 2 storey building. There are 2 levels below the Pearl Street natural ground level comprising basement parking, loading dock, records storage, plant and equipment. The two habitable storeys addressing Millett Street and Pearl Street comprise the Medical Consulting rooms.

There is a large excavated area, currently used for parking, which will be the focus of the new development and it will link into the existing Medical Centre building which will be refurbished.

The existing setbacks from each boundary will be maintained and the new section of the building will align with these setbacks.

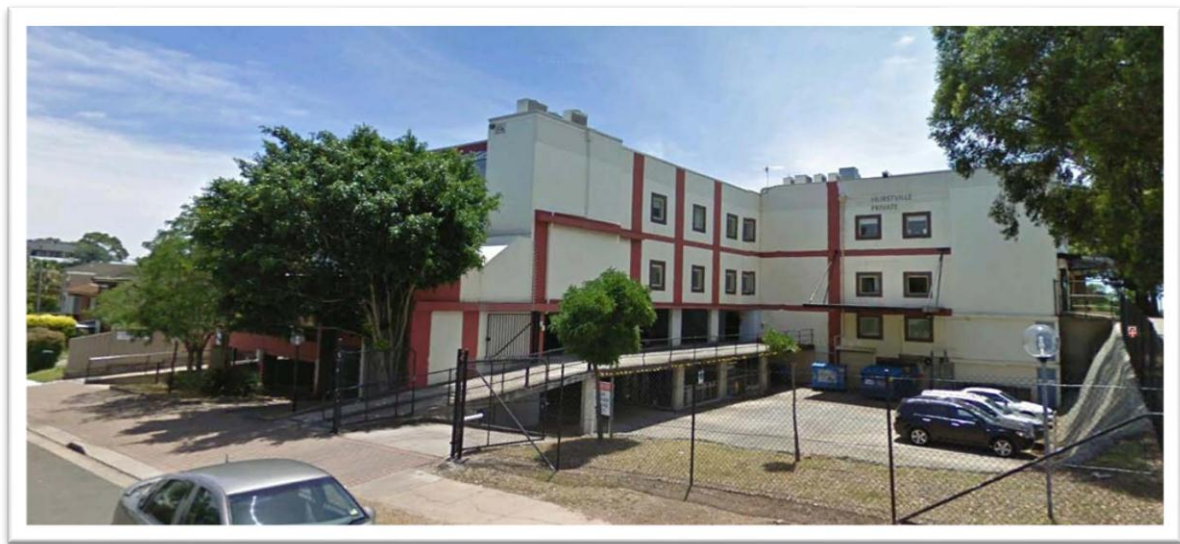


FIGURE 11: VIEW OF BASEMENT PARKING AREA UNDER MEDICAL CENTRE FROM THE CORNER OF PEARL AND MILLETT STREETS  
(SOURCE: GOOGLE EARTH)

**Area 2** comprises a one storey development which accommodates surgical consulting rooms. These buildings, built in the 1970s, are of masonry construction with a tiled roof and adjoin the reception area.





FIGURE 12: PEARL STREET FRONTAGE LOOKING TOWARDS COLO-RECTAL ASSOCIATES CONSULTING ROOMS (SOURCE: GOOGLE EARTH)

**Area 3** comprises the original residential building in which the hospital was established in 1924. The building has been substantially modified over the years. It comprises the Administration offices, Board Room, kitchen, cafeteria and store rooms. It connects to the theatres and consulting rooms on the ground floor.



FIGURE 13: GLOUCESTER ROAD ENTRY TO HOSPITAL

**Area 4** is a connecting wing of the hospital which currently includes wards on the ground floor and service rooms associated with the delivery suites on the second floor. It is of masonry construction with a tiled roof, and was built in the 1970s.



FIGURE 14: MIDDLE SECTION WARDS: AREA 4

**Area 5** is the most recently constructed part of the Hospital, completed in 2009. It includes patient wards on the ground floor and the new delivery suites and wards on the second floor, rear wing. It is of masonry construction with a tiled roof.



FIGURE 15: NEW WING OF HOSPITAL AND GLOUCESTER ROAD ENTRY TO REAR ACCESS: AREA 5

**Area 6** is an open car park for staff use only which was completed in 2010.

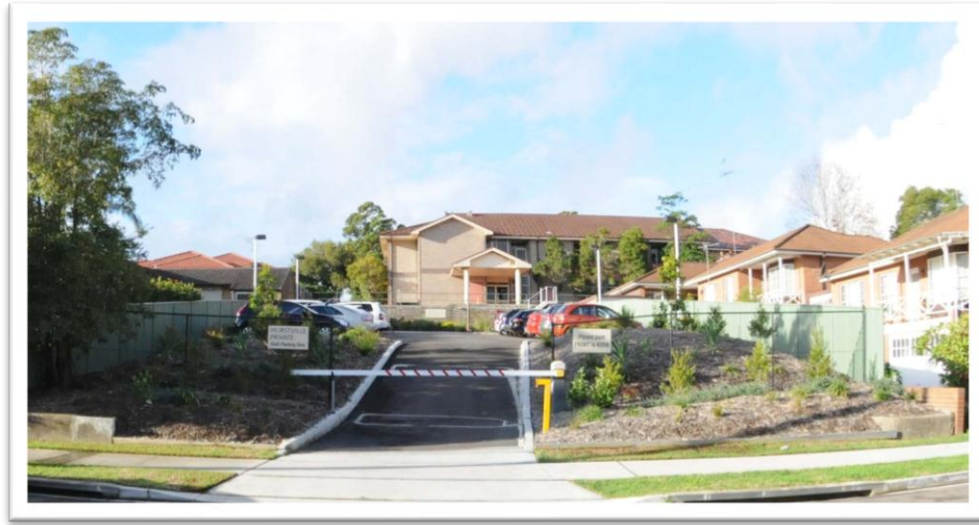


FIGURE 16: MILLETT STREET STAFF CAR PARK: AREA 6

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## 3.2 Strategic Intent

The Hospital proprietor's strategic intent is to be a recognised leader in the provision of high quality, modern surgical and health care in Australia. The objective of the Hospital redevelopment is to improve quality, increase capacity, and to respond to demand for private hospital services created by the growth and ageing of the population. The redevelopment will facilitate the implementation of new technologies which will enable new diagnostic, procedural and treatment services.

The Hospital is fully accredited by the Australian Council on Healthcare Standards. This is professional and national recognition of the high standard of care provided at Hurstville Private and an ongoing commitment to quality improvement.

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## 3.3 Building Description

The project will involve the redevelopment of the building which is identified as the Medical Centre. The development will add approximately 4,865m<sup>2</sup> of new floor space including:

- 4 theatres
  - 3 new lifts
  - New wards
  - New consulting rooms
  - New basement car parking and delivery dock
  - Link-way bridge to connect wards to new lifts
  - Bridge will also connect kitchen and linen delivery area to lifts
  - Refurbishment work to existing wards, consulting suites and kitchen.
-

- Additional parking and cantilevered turning bay deck over a section of the existing open at-grade car park located at 12 Millett Street.

Construction is proposed to commence as soon as practicable after the project has been determined, with occupation shortly thereafter.

Redevelopment over the Medical Centre and vacant basement area will allow for continued operation of the Hospital without interruption and the major works can be substantially confined to that location.

There will be three (3) new storeys over the existing two storey Medical Centre building and a new 5 storey building and extension of the basement car park in the vacant area on the immediate corner of Pearl and Millett Streets. There will be minor refurbishment of other parts of the Hospital.

The main entry to the hospital will not be altered. There will be a refurbished reception and waiting area accessed from Gloucester Road. Patients will arrive and depart by foot, ambulance or car via the main entry.

## Numerical Overview

TABLE 4: OVERVIEW OF PROPOSED DEVELOPMENT

Component	Proposal
Current Floor Space	5,618 m <sup>2</sup>
Proposed Floor Space	4,865m <sup>2</sup> + 5,618m <sup>2</sup> = 10,483m <sup>2</sup>
Max Building Height (Medical Centre site only)	25.12 m
Max. Number of storeys (Medical Centre site only)	5 storeys
Vehicle parking spaces	1 ambulance 1 service vehicle 1 loading dock 91 standard car spaces 3 disabled spaces
Number of Beds	96 beds

A level by level description of the *new* works includes:

### Lower Basement Level:

- 29 vehicle car spaces
- Dry store
- Chemical Store
- Garbage bins
- Detention tank
- 3 new lifts (to top level)
  - 1 new lift from lower basement to Level 1 consulting
  - 2 additional lifts from Ground to fifth floor
- Mechanical plant

### Upper Basement Level

- 23 car spaces inc. 2 disabled spaces, 1 of which is dedicated for staff
- Medical supplies



- Clean linen
- Dirty linen
- CSSD
- Oxygen store
- Garbage bins

#### Ground Floor and Open Car Park

- 4 new Operating Theatres
- Redevelopment of existing surgical admissions, recovery and waiting areas
- Day oncology
- Radiology
- Pathology
- 42 vehicle spaces including 1 disabled space

#### Level One

- New consultants suites
- Redevelopment of two Consulting rooms

#### Level 2

- New 33 bed surgical ward

#### Level 3

- New 17 bed maternity ward
- 5 Delivery suites

#### Level 4

- New 26 bed maternity ward

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### 3.4 Development for which consent is sought

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The proposed development includes the following principal components:

- Demolition of existing theatre in Medical Centre building
  - Demolition of some connecting walls between the reception area, Colo-Rectal Associates consulting suites and the Medical Centre building
  - Establishment of new concrete columns to support new floors on the Medical Centre building
  - Bulk earthworks and excavation for new lifts
  - Excavation for the detention tank
  - New and refurbished basement car park
  - New vehicle access to basement car park and loading dock
  - Cantilevered Extension over existing at-grade park and designated ground level parking for 42 vehicles
-

- Extension and redevelopment of the Medical Centre over the excavated south-eastern corner of the site to create a modern 5 storey building with 2 levels of basement parking and services
- New floors connected over existing Colo-Rectal Associates consulting rooms to link to original Administration building (Area 2)
- Refurbishment of patient wards (Areas 2 and 4)
- New Landscaping on Pearl Street and Millett Street
- Public domain works including footpaths, lighting and tree planting
- New signage on the Pearl Street frontage.

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### 3.5 Demolition and Earth Works

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In order that the Hospital can continue to operate and provide a quality service environment, the focus of works will be the existing Medical Centre and basement car park located on the corner of Pearl and Millett Streets, Hurstville.

The Demolition Plans, in Appendix C, show the extent of demolition works proposed. The focus of the works relates mainly to the connections between Medical Centre and adjacent rooms and walls in the Administration section and Colo-Rectal Associates consulting rooms. Only one theatre will be removed during the demolition and construction process.

The construction waste management plan summary is described in Section 3.13.

Approximately 250 cubic metres of bulk earthworks will be required to excavate the basement and accommodate the new lift wells and the detention tank.

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### 3.6 Building height and floor space

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#### Gross Floor Area

The proposed total gross floor area of the new development will be approximately 10,483 m<sup>2</sup> above ground level.

#### Building Heights

The building's maximum height is 25.12 metres. The building will be 5 storeys above Pearl Street natural ground level.

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### 3.7 Traffic Movements and Parking

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#### Access

Currently the Hospital can be accessed for patient drop-offs and ambulances from the entrance at the corner of Gloucester Road and Pearl Streets, on the Gloucester Road frontage.

Adjacent the existing maternity wing, there is access to the rear of the Hospital (refer Figure 15).

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There is access to the basement parking and the loading dock underneath the Medical Centre from Millett Street near the corner of Pearl Street.

There is access to the open car park located at 12 Millett Street from the Millett Street frontage. Pedestrian access via steps is located at the rear of the car park adjacent the laneway which runs behind the Hospital from Gloucester Road to Millett Street.

### Parking

There are 3 car spaces located at the front of the Hospital on Gloucester Road.

In total there are currently 69 spaces including 1 disabled space.

The total number of car spaces in the new development will be 94 including 3 disabled spaces.

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## 3.8 Accessibility

The Hospital currently has disabled access to all areas barring the two administration offices in the original homestead. The new development will allow for the addition of three new lifts providing access from the lower basement to the fifth floor. The accessibility assessment report is in Appendix L.

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## 3.9 Ecologically Sustainable Development

The new works and refurbishment have been designed to incorporate the principles of Ecologically Sustainable Development (ESD) and to comply with the deemed-to-satisfy provisions of Section J – Energy Efficiency of the Building Code of Australia 2010.

Hospitals are energy hungry and resource intensive by their function. Lighting, heating, hot water and electrical energy system technologies are used intensively in their operation, contributing to elevated carbon emissions.

A co-ordinated ESD approach to design and operation of the proposed facility will result in a reduction of energy consumption, greenhouse emissions and water use.

To achieve this end Hurstville Private Hospital aims to lead by example and incorporate ESD initiatives in its design. Some of these initiatives include:

- An energy efficient building design and materials that require less energy to operate;
  - A building design that increases access to natural daylight and maximises external views;
  - Passive and active solar design that provides comfortable indoor temperatures using sun and natural light, in turn reducing the use of heating and cooling systems;
  - Operating an efficient lighting system (including external lights that do not disperse light into neighbouring properties);
  - Specifying the use of low emission paints, adhesives, sealants, carpets, floor coverings and furnishings.
-

Other innovations to reduce energy and resource consumption in the proposed health care facility will include:

- The building envelope constructed from high performance, low maintenance, sustainable construction systems exceeding BCA requirements;
- Large external windows and glazed bays to maximise energy efficiency, elevate interior surface brightness and reduce glare (in effect using day lighting to offset interior lighting requirements);
- Glass will be multi-paned insulated glass units (IGUs), tinted and reflective with low emissivity coatings to reduce solar heat gain and solar radiation. Frames will be thermally broken to minimise conductive heat transfer;
- The interior spaces will benefit from day-lighting cast from internal courtyards, low Volatile Organic Compounds (VOC) finishes, formaldehyde minimisation, water efficient taps, toilets, showers and urinals.

Once operational, the Hospital will operate plant and equipment according to the relevant maintenance guidelines. In summary operations will focus upon:

- Reducing energy, water and resource use
- Minimise waste
- Re-use materials and resources where possible
- Selecting environmentally friendly materials in construction and fit out; and
- Improving indoor environment quality and well-being of occupants.

Further details regarding plant and equipment and ESD opportunities can be found in Section 4.26 - 4.27.

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### 3.10 Stormwater and Drainage

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The existing stormwater and drainage system has been designed to comply with local plans and policies and operates within capacity. A detention tank will be incorporated in the new basement area of the Hospital. Further details of the stormwater system and design and Water Cycle Management are included in Section 4.23 and Appendix E.

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### 3.11 Services and Infrastructure

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The Building Services Audit and Utilities report has been prepared by Erbas and Associates Pty Ltd. The proposed upgrade measures are described in Section 4.26. The report is contained in Appendix H. The Operational Policies and Procedures are contained in Appendix P.

#### Potable Water

The hospital has an existing incoming DN100 water supply to a utility meter and backflow device. The supply to the building is boosted via a new triplex variable speed pump and the pipework reticulates to all the sanitary fixtures and equipment to the property.

The property has two existing hot water circulation systems and water heater plant to each.

#### Sewerage

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The sanitary drainage for the property has 3 systems and connection points to the Sydney Water sewer main. Two systems drain to the Gloucester Road Sydney Water sewer, and one system drains to the Millett Street, Sydney Water sewer.

### Gas

The property has an existing incoming street 210 kPa supply to the utility regulator/meter at the main entrance. The supply to the building is a (2.75 kPa) 100 mm copper service and the pipework reticulates to all the appliances, that is domestic hot water heaters and kitchen.

### Electricity

The hospital is served by an outdoor chamber substation, located near the main entry on Gloucester Road. There is an emergency standby generator connected through an automatic transfer switch. The generator and changeover switch are installed in the plant room behind the services area and provide back-up power to the existing hospital critical care systems.

### Communications

Major communications are located within the Comms Room and a room behind the reception area and include:

- Telephone Building Distributor with Krone frames
- PABX
- Communications data cabinets and patch panels
- TV and Music systems cabinet
- Switcher, Sound mixer, PA power amplifier, Battery and charger.

A structured cabling system is then reticulated around the hospital. A new structured cabling system will be installed as part of the new works.

### Fire Hose Reels

The existing hose reel system is installed to a previous code that is currently non-compliant to current BCA requirements. The hose reels will be upgraded to meet current code.

### Fire Hydrants

The property has an existing incoming DN100 water supply from Gloucester Road to a booster valve assembly without a containment backflow device. The fire hydrants are boosted via an electric pump to Ord. 70 requirements. The hydrant system will be upgraded to comply with the National Construction Code during the proposed works.

### Portable Extinguishers

The existing building is serviced with extinguishers which meet code requirements.

### Fire Detection

Major detection mechanisms include:

- Smoke detectors
- Thermal detectors
- UESDA
- Gaseous Suppressor.

### Air Conditioning System

The existing Hospital has been expanded at various stages and mechanical services provided to suit.

Operating Theatres 1 and 2 and the associated areas are served by two air-cooled chillers with associated roof mounted air handling units.

Operating Theatres 3 and 4 and the associated areas are served by two built-up refrigeration plants composed of refrigerant compressors, air-cooled condensers and air-handling plants.

Air conditioning to various other areas are provided via a number of independent air-cooled split type or air-cooled packaged type air conditioning units. Majority of the air-cooled condensers are located on the roof of the existing Medical Centre where additional levels are proposed.

There is no central control panel provided to monitor the operation of these air conditioning systems.

### Mechanical Ventilation

Mechanical ventilation systems are provided to various areas where required mainly via roof mounted exhaust air fans. Car Park mechanical exhaust is provided as required and discharged at roof level.

### Medical Gases

The plant accommodating the existing medical gases plants are located on Basement Level 2. All oxygen, nitrous oxide, tool gas etc will be relocated to upper basement level adjacent the loading dock as part of the redevelopment.

#### OXYGEN

Cylinder supply system located in the Basement 2 level provides oxygen gas supply to various oxygen outlets in the Hospital.

Each bank of the two banks consists of 12 cylinders in a rack and is located within a wire-fenced enclosure.

#### NITROUS OXIDE

Cylinder supply system located in the Basement 2 level provides nitrous oxide gas supply to various nitrous oxide gas outlets in the hospital.

Each bank of the two banks consists of 2 chain-locked cylinders and is located within a wired-fenced enclosure.

#### MEDICAL AIR

The medical air plant is located in a wire-fenced enclosure in basement 2.

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Medical air is generated via two-off (2) “Atlas Copal” compressors, two-off (2) new “MTA” air driers and associated accessories.

Medical air system provides medical air to various medical air outlets in the Hospital.

#### MEDICAL SUCTION

The medical suction system is a compressed gas venturi ejector-operated suction system and is making use of the medical air supply as the compressed gas and provides suction services at the various suction outlets provided throughout the Hospital.

#### TOOL GAS

Cylinder supply system located in the Basement 2 level provides tool gas supply to various tool gas outlets in the Hospital. Each bank of the two banks consists of 1 chain-locked cylinder and is located within a wire-fenced enclosure.

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### 3.12 Landscaping

While the facility occupies an expansive building footprint on the available land, there is perimeter landscaping on the Gloucester Road frontage, and on the western boundary adjacent the neighbouring residential properties.

There is a large central courtyard adjacent the café which is well used by patients and visitors.

Landscaping will be enhanced on the Pearl Street, Millett Street and Gloucester Road frontages as part of the new works.

Landscape Plans have been prepared by Moir Landscape Architecture and are included in Appendix D.

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### 3.13 Waste Management

Waste generated by the Hospital is currently managed according to industry best practice and increased waste volumes generated by the increased number of admissions to the Hospital will be incorporated into the existing systems. The procedures and policies for waste management are detailed in the Operations Manual in Appendix P and summarised in Section 4.30 following.

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### 3.14 Consultation

While there were no specific requirements for consultation noted in the Director General’s Requirements for the environmental assessment, consultation has occurred over a number of years with the residents closest to the Hospital regarding the proposed development. Consultation has also occurred with Hurstville City Council, the Parliamentary Secretary for Planning and Infrastructure, various public authorities and representatives of Department of Planning and Infrastructure.

The community will also be invited to make submissions during the public exhibition period.

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In preparing to write the Environmental Assessment Report, a meeting was held on 2 May 2012 with Hurstville City Council officers. At the meeting, officers asked for information about the following matters:

- Whether the project would be staged
- Where would the loading dock be located
- What number of beds would there be
- What the construction period is anticipated to be.

The redevelopment process has involved service planning and consultation with Hospital administration and user groups. The objective of the consultation has been to ensure that the Hospital can operate efficiently even during the construction process.

Consultation with officers from the Department of Planning and Infrastructure and the Parliamentary Secretary has occurred with the objective of incorporating the land located at 12 Millett Street, which is the Hospital staff car park, into the project. The inclusion of other ancillary uses in the project has also been discussed however this option is not being pursued in the Project Application.

Consultation with the owners of the property 'enclosed' by the Hospital has been undertaken with the objective of keeping them informed of progress with the design and proposed development schedule.



## 4 Environmental Assessment

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### 4.1 Introduction

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The proposed additions and alterations to the existing Hospital have been designed to allow for the expansion of existing services and modernisation of facilities and equipment.

The height, bulk and scale of the development have taken advantage of the vacant area over the basement car park adjacent the Medical Centre. The new levels on what is currently the Medical Centre will provide a transition from the 16 storey development of the City Centre to the south, on the opposite side of Pearl Street to the two storey developments further north along Millett Street and Gloucester Road.

### 4.2 Statutory and Strategic Planning Compliance

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The Director General's requirements for the project require that the Environmental Assessment address relevant environmental planning instruments and Guidelines which include:

- Environmental Planning and Assessment Act 1979
- NSW State Plan
- Metropolitan Plan for Sydney 2036
- Draft South Subregional Strategy
- SEPP (Major Development) 2005 (repealed)
- SEPP (Infrastructure) 2007
- SEPP No. 33 – Hazardous and Offensive Development
- SEPP No. 55 - Remediation of Land
- Hurstville Local Environmental Plan 1994
- Draft Hurstville Local Environmental Plan 2011
- Relevant Hurstville City Council Development Control Plans.

The Environmental Assessment Report and Project Application's consistency with the relevant planning instruments and policies is described following. Any variations or non-compliance with these plans and policies is noted following and described in the report.

### 4.3 Statutory Planning

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#### Environmental Planning and Assessment Act

The proposed redevelopment of the Hurstville Private Hospital was declared to be a Major Project under Part 3A of the EPAA in March 2011. The proposal is to modernise and expand the Hospital and its ancillary medical and diagnostic services.

The Project Application is consistent with the objectives of the EPAA by promoting orderly and economic development of the land. It allows for development for public purposes and facilitates the delivery of services to the community. It promotes the social welfare of the community.

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Opportunities for public consultation will be provided.

### NSW State Plan 2012

The State Plan includes objectives which seek to improve and maintain access to quality healthcare facilities. The State Government supports the redevelopment of health infrastructure to improve quality and increase bed numbers. This proposal is consistent with these objectives.

### Sydney Metropolitan Strategy & South Sub-regional Strategy

The Sydney Metropolitan Strategy and the draft South Sub-regional Strategy describe plans and planning objectives to support growth in centres such as Hurstville and to ensure integration of land uses, employment, transport, services, cultural and entertainment venues, open space and recreational opportunities.

It is consistent with the objectives of the Sydney Metropolitan Strategy and South sub-region Strategy by:

- contributing to health services,
- supporting innovation including knowledge infrastructure
- the efficient use of land
- urban renewal
- supporting development around identified Centres
- providing local employment close to public transport.

***The elements of the South Sub-regional Strategy which apply to the existing and proposed development of the site include:***

**Strengthen Hurstville as a major employment centre in the South Sub-region with employment numbers expected to grow from 23,000 to 26,000 between 2001 and 2031.**

The Hospital currently employs over 160 full-time and casual employees and there are 64 employees in the Medical Centre. With the proposed expansion of the Hospital to 96 beds with ancillary health service facilities, the number of employees is expected to increase to over 300 FTE. The number of construction jobs created will be approximately 200.

**Strengthen Knowledge assets and key industries including emerging medical facilities in Hurstville.**

The Hospital assets are proposed to be upgraded and expanded as a result of the successful implementation of this proposal.

**Establish a framework to support innovation including knowledge infrastructure such as hospitals.**

The Hospital is already fully accredited by the Australian Council of Healthcare Standards. This proposal aims to ensure that the Hospital can continue to improve quality and service delivery into the future.

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## Sydney Over the Next 20 Years – Discussion Paper

The Discussion Paper notes that “integrated land use, transport and infrastructure planning will help us achieve specific goals of NSW 2021: to improve housing affordability and availability, invest in critical infrastructure and build liveable centres.” The Discussion Paper informs the State Plan 2021 and the proposed update of the Metropolitan Strategy for Sydney.

The following Discussion Paper principles are addressed by this proposal:

### **Planning for a growing population.**

The proposal meets the needs of a growing and ageing population by expanding the hospital infrastructure to meet the needs of the local community. There is an increasing population, increasing demand for services and the population is ageing.

### **Integrating land use with transport.**

The consolidated site is 1 kilometre or 14 minutes’ walk from both Penshurst Railway Station and Hurstville City Centre and Bus/Rail Interchange. There is an accessible bus at the door which is 4 minutes journey from the Hurstville Railway station.

### **More jobs in the Sydney Region**

The proposal provides for an increase in permanent jobs in the order of 100 extra jobs and 200 temporary construction jobs. There will also be a flow on effect of more jobs for local retailers and service providers.

### **Growing Sydney’s value: increase diversity of employment to strengthen local economies and provide a wider range of jobs closer to home.**

The expansion of the Hospital will directly facilitate an increase in employment in a regional centre.

### **Achieving Renewal: Building communities through redevelopment**

Renewal of the Hospital will meet the ever-increasing demand for ‘state of the art’ health facilities and ancillary medical and diagnostic facilities.

### **Implementation**

The proposal relies entirely on private funding of infrastructure which is used by the general community. There are existing utilities and transport infrastructure in the local area. The specific increases in demand on local infrastructure and utilities will be met as part of the redevelopment project.

### **Hurstville Council’s Community Strategic Plan 2021**

Hurstville Council’s Community Strategic Plan 2021 describes the community’s vision for the next 10 years in Hurstville. Providing health services and infrastructure for the growing and ageing population is a key ‘pillar’ of the strategy.

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## 4.4 State Environmental Planning Policies

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The following policies apply to the proposal and it is consistent with their objectives and provisions.

### **SEPP (Major Development) 2005**

This SEPP was formerly known as:

- State Environmental Planning Policy (Major Projects) 2005
- State Environmental Planning Policy (State Significant Development) 2005.

The aims of this Policy are as follows:

- to facilitate the development, redevelopment or protection of important urban, coastal and regional sites of economic, environmental or social significance to the State so as to facilitate the orderly use, development or conservation of those State significant sites for the benefit of the State,
- to facilitate service delivery outcomes for a range of public services and to provide for the development of major sites for a public purpose or redevelopment of major sites no longer appropriate or suitable for public purposes.

State significant sites are typically sites that the Minister for Planning considers may have a wider social, economic or environmental significance for the community, for example, universities, hospitals, employment precincts and major residential developments. The site may also have redevelopment significance important to implementing the State's planning objectives.

In March 2011, the Minister for Planning declared the project to be a 'Major Project' pursuant to Schedule 1 (Class of Development), Group 7, Clause 18 – Health and Public Service Facilities: the capital investment value of the project must be more than \$15 million for the purposes of providing professional health care services to people admitted as in-patients."

It is estimated that the proposed development has a Capital Investment Value (CIV) of over \$30 Million.

This EAR has been prepared in response to the Director General's Requirements in accordance with Part 3A of the EPAA.

### **SEPP (Infrastructure) 2007**

The aim of this Policy is to facilitate the effective delivery of infrastructure across the State by:

- (a) Improving regulatory certainty and efficiency through a consistent planning regime for infrastructure and the provision of services, and
- (b) providing greater flexibility in the location of infrastructure and service facilities, and
- (c) allowing for the efficient development, redevelopment or disposal of surplus government owned land, and

- (d) identifying the environmental assessment category into which different types of infrastructure and services development fall (including identifying certain development of minimal environmental impact as exempt development), and
- (e) identifying matters to be considered in the assessment of development adjacent to particular types of infrastructure development, and
- (f) providing for consultation with relevant public authorities about certain development during the assessment process or prior to development commencing.

This SEPP provides a consistent planning regime for infrastructure and the provision of services across NSW, along with providing for consultation with relevant public authorities during the assessment process. The SEPP supports greater flexibility in the location of infrastructure and service facilities along with improved regulatory certainty and efficiency.

The proposed development does not trigger consultation requirements with Roads and Maritime Services (RMS) under the provisions of Schedule 3 of the SEPP; however officers of the agency have been consulted during the preparation of the EAR.

#### **SEPP No. 33 – Hazardous and Offensive Development**

The Department of Planning noted in Circular PS11-008 that:

“Hazardous and Offensive Development (SEPP 33) is a systematic approach for assessing development proposals for potentially hazardous and offensive industry or storage. SEPP 33 introduces performance-based definitions of ‘hazardous’ and ‘offensive’ and sets out specific assessment requirements for such proposals.

By providing for merit-based assessment SEPP 33 overcomes the limitations of previous definitions of hazardous and offensive development — in which a use was considered hazardous or offensive on the basis of the particular type of industry it represented. This approach ensures that locational, design and safety management considerations are an integral part of the assessment process.

SEPP 33 ensures that only proposals which are suitably located, and able to demonstrate they can be built and operated without posing a significant offsite risk can proceed.”

The Hospital currently has a Radiation Safety and Protection Plan for controlling operations associated with the existing Radiology Department. The Plan is attached in Appendix Q.

A Waste and Hazardous Materials Report has been prepared by JBS which outlines the potentially hazardous materials to be removed during the demolition process, and the management of materials in accordance with SEPP 33. The Hazardous Materials Survey report is attached in Appendix S.

## SEPP No. 55 – Remediation of Land

This Policy aims to promote the remediation of contaminated land for the purpose of reducing the risk of harm to human health or any other aspect of the environment.

The policy states that land must not be developed if it is unsuitable for a proposed use because it is contaminated. If the land is unsuitable, remediation must take place before the land is developed. An approval authority such as the Council must be assured that the land will be suitable for its proposed new use prior to rezoning.

The preliminary (Phase 1) and invasive (Phase 2) investigations of the site undertaken by JBS Environmental Pty Ltd in 2010 and 2011 indicate that the site is expected to be suitable for continued use as a Hospital and a car park. The two full reports are attached in Appendix M.



FIGURE 17: LOCATION OF SOIL AND GROUNDWATER SAMPLE LOCATIONS



## 4.5 Current Zoning

The use of the land which is zoned Special Uses 5(a) is limited to that of Hospital with the exception that other “public purposes” or uses incidental or ancillary to this purpose are permitted with Council’s consent.

The land which now forms the car park, formerly 12 Millett Street, Hurstville, and the adjacent properties to the north and the west are zoned No. 2 Residential Zone.

The Hospital development is located diagonally opposite Site 2A in the Hurstville Development Control Plan No.2 (City Centre DCP No. 2), on the corner of Pearl Street and Forest Road. All land in the City Centre is currently zoned No. 3(b) City Centre Business Zone.

**The map extract following from Hurstville Local Environmental Plan 1994 shows the current zoning of the Hospital and adjacent lots.**

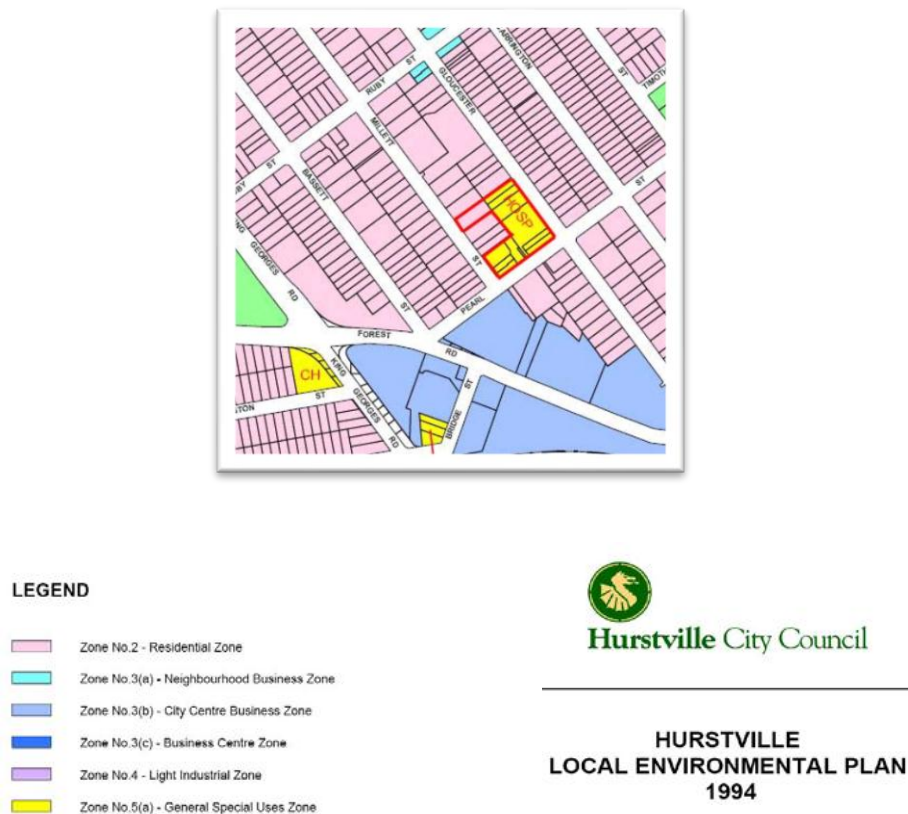


FIGURE 18: EXTRACT FROM HURSTVILLE LOCAL ENVIRONMENTAL PLAN 1994



## Draft Hurstville Local Environmental Plan 2011

Hurstville Council has prepared a draft LEP 2011 which was exhibited in early 2012.

The making of the Hurstville Comprehensive Local Environmental Plan 2011 will see the introduction of new zones across the LGA which conform to the zones prescribed in the Standard Instrument LEP issued by the Department of Planning.

Council is proposing to rezone the Hospital Special Uses zoned land to SP2 Infrastructure. Council proposes to rezone the car park to Zone R2 Low Density Residential, consistent with the proposed zoning of land immediately to the north, south and west.

The enclosed residential properties are also proposed to be zoned R2 Low Density Residential.

**Despite this draft zoning being applied to the car park Lot, on the 4 June 2012, the DPI advised that it considered the car park Lot to be ‘related development’ and that it forms part of the declared Major Project MP11\_0042. The advice is attached in Appendix V.**

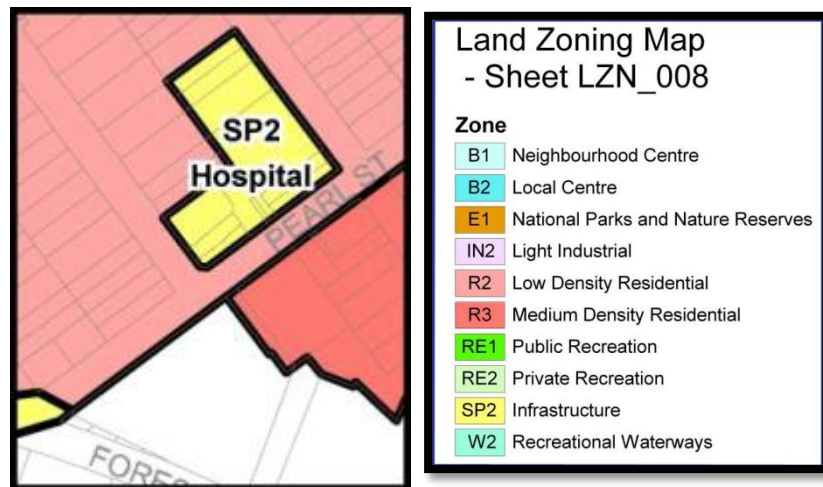


FIGURE 19: EXTRACT FROM DRAFT HURSTVILLE COMPREHENSIVE LEP ZONING MAP SHOWING HOSPITAL SITE

Diagonally opposite, within the boundary of the “City Centre”, site 2C in the Hurstville DCP 2, City Centre, currently has development approval for a mixed use development ranging from 8 to 15 storeys in height. The currently approved Floor Space Ratio (FSR) is overall 4.22:1 and 14 storeys at its highest point.

This site is proposed to be zoned B4 Mixed Use in the draft Hurstville Local Environmental Plan (Hurstville City Centre) 2011. The FSR will increase to 4.5:1 and 40 metres Height of Buildings will be permissible on the Pearl Street frontage, which is currently approved for 8 storeys.

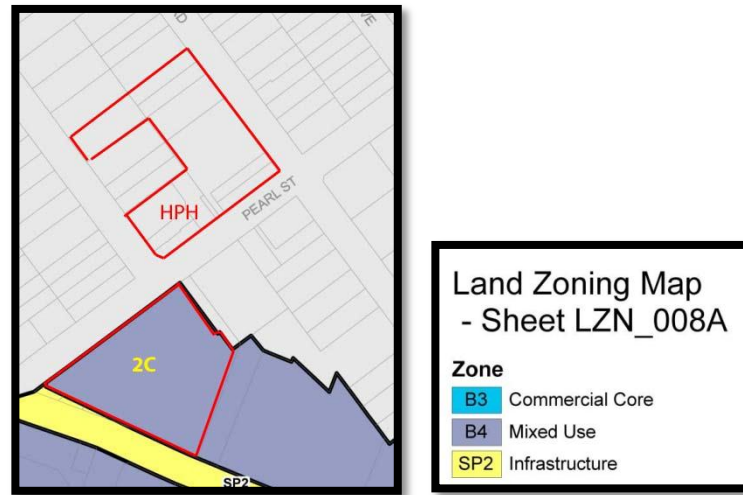


FIGURE 20: DRAFT HURSTVILLE LEP (CITY CENTRE) 2011 WITH BOUNDARIES OF THE HOSPITAL AND SITE 2C IN RED.



FIGURE 21: CORNER OF PEARL STREET AND MILLETT STREET, FROM MILLETT STREET, SHOWING PROPOSED LOCATION OF ADDITION TO HOSPITAL IN FOREGROUND AND SITE 2C MIXED USE DEVELOPMENT SITE IN MIDDLE GROUND WHICH CAN GO TO 40 METRES.

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## 4.6 Section 117 Ministerial Directions

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The Minister for Planning has issued a number of Directions under Section 117(2) of the Environmental Planning and Assessment Act 1979 in relation to the preparation of draft Local Environmental Plans.

The following discussion examines those Directions which apply to this Project Application.

### **Direction 1.1 Business and Industrial Zones**

The objective of this direction is to:

- encourage employment growth in suitable locations
- protect employment land in business and industrial zones and
- support the viability of identified strategic centres.

While the Hospital is not located in a Business zone, it supports this Direction by encouraging employment growth and the expansion of the Hospital in a suitable (existing) location. It is also consistent with the objectives of the Sydney Metropolitan Strategy and the draft South sub-regional Strategy directions.

### **Direction 2.3 Heritage Conservation**

The objective of this direction is to conserve items, areas, objects and places of environmental heritage significance and indigenous heritage significance. No heritage items are located on the site. There is a locally significant heritage item located at 50 Gloucester Road which is opposite the current main entrance to the Hospital. There are no other items of significance or conservation areas in near vicinity the subject land. Further down Millett Street there are two other private residences which are listed in Schedule 2 of the Hurstville LEP 1994 being Alinda at 29 Millett Street, and Erina, at 18 Millett Street.

The proposed setbacks and stepping down of the development from the corner of Pearl and Millett Streets will reduce the visual impact of the built form and minimise impacts on viewscales. It is proposed that there will be active street frontages to encourage pedestrian activity and enhance the character and amenity of the local area. The development and landscaping will complement the local area rather than detract from it.

### **Direction 3.4 Integrating Land Use and Transport**

The objective of this direction is to ensure that urban structures, building forms, land use locations, development designs, subdivision and street layouts achieve the following planning objectives:

- improving access to housing, jobs and services by walking, cycling and public transport; and
- increasing the choice of available transport and reducing dependence on cars; and
- reducing travel demand including the number of trips generated by development and the distances travelled, especially by car; and
- supporting the efficient and viable operation of public transport services, and
- providing for the efficient movement of freight. T

The Project Application supports this direction by providing employment within walking distance of two rail stations and there is a bus at the door of the Hospital. Bicycle racks will also be provided.

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## 4.7 Consistency with Planning Instruments and Policies

**Table 5: Summary of consistency with strategic and statutory planning instruments and policies**

Instrument	Comment	Compatible
<b>State Legislation</b>		
Environmental Planning & Assessment Act 1979	The proposed redevelopment promotes economic and orderly development and is consistent with the objectives of the Act.	Yes
<b>Strategic Plans</b>		
NSW State Plan	The Plan notes that improving and maintaining access to health facilities and services is a key principle.	Yes
Sydney Metropolitan Strategy	The proposed Hospital redevelopment and expansion of employment opportunities close to transport is consistent with the Strategy.	Yes
Draft South Sub-regional Strategy	The Strategy's objectives are to facilitate knowledge infrastructure, health services, increased employment and integration of land uses and transport, and the Project is consistent with these aims.	Yes
Sydney over the next 20 years: Discussion paper	The Paper describes principles aimed at achieving integrated land use, transport and infrastructure outcomes for NSW by 2021. The Hospital redevelopment is consistent with the aims described in the Discussion Paper.	Yes
Hurstville Community Strategic Plan 2021	Hurstville Community's vision for the local area includes providing services for the ageing and growing population. This Project responds to those increased demands for health services.	Yes
<b>State Environmental Planning Policies</b>		
SEPP 55 – Remediation of Land	The site is considered to be able to be made suitable for the proposed land uses through remediation. A Phase 1 and Phase 2 Environmental Site Assessment were carried out by JBS Environmental in 2010 and 2011.	Yes
SEPP Major Development 2005	The project was declared to be a 'Major Project' by the Minister pursuant to Schedule 1 (Class of Development), Group 7 – Health and Public Service Facilities.	Yes
SEPP (Infrastructure) 2007	The SEPP includes provisions relating to development with impacts on local infrastructure. This proposal is not inconsistent and aims to enhance the local health services infrastructure.	Yes
SEPP 33 (Hazardous & Offensive	The Hospital is licensed to run the existing Radiology	Yes

Development)	services. A Hazardous Waste Survey has been conducted to advise on the possible location and appropriate methodologies for disposal of potentially hazardous waste.	
Local Planning Instruments		
Hurstville Local Environmental Plan 1994	The Hospital uses and the proposed redevelopment are permitted with consent.	Yes
Draft Hurstville Local Environmental Plan 2011	The Hospital use and the proposed redevelopment is permissible use in the draft SP2 Infrastructure Zone. The car park is regarded as 'related development' and therefore permissible within the context of the Major Project Declaration.	Yes for SP2 Infrastructure.  Yes for existing permissible development in the R2 Low Density zone.
Hurstville LGA Wide Development Control Plan (DCP) 1		
▪ Car Parking	To provide sufficient, safe and convenient parking facilities to meet user requirements including pedestrians, cyclists and vehicles.	Yes
▪ Access & Mobility	Ensure compliance with Disability Discrimination Act 1992 and relevant Australian Standards	Yes
▪ Crime Prevention through Environmental Design	Improve safety by design and natural surveillance	Yes
▪ Energy Efficiency	Use less energy, promote energy efficiency	Yes
▪ Drainage & On-site Detention Requirements	Drainage and detention designed to meet specified capacities	Yes
▪ Waste Management	Minimise waste, re-use materials where possible, recycle where possible.	Yes
▪ Advertising & Signage	Encourage advertising signs which are compatible with the scale, character and amenity of the locality and surrounding development	Yes
S117 Directions for preparation of draft LEP		
1.1 Business and Industrial Zones	The proposal provides for increased employment opportunities close to public transport.	Yes
2.3 Heritage Conservation	The proposal does not affect any Heritage Items in the vicinity of the subject land.	Yes
3.4 Integrating Land Use and Transport	The proposal improves accessibility and provides for the integration of employment and hospital services near a major rail station.	Yes

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## 4.8 Design Objectives

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The provision of high quality health care services by Hurstville Private Hospital has contributed to the well-being of the local and regional community since 1924.

Over this time, many upgrades and retrofits to the Hospital have been made, enabling a continuous service to the local and wider community.

An increase in bed numbers is required to ensure future viability and to be able to respond to innovations in surgical and diagnostic techniques.

The design principles applied envisage a high quality architectural built form outcome. Consideration of function, building form, sustainability, urban renewal, service delivery and the expansion's impact on the surrounding neighbourhood is paramount in achieving a positive social, environmental and economic outcome.

Major Design objectives for the development project include:

- To retain the original homestead on Gloucester Road which currently houses the Hospital Administration as a link to the Hospital's history and community character;
  - Retain existing main entry/ drop off point, from Gloucester Road;
  - Redevelop the rear Millett Street loading area and better integrate this redevelopment with the street and existing building;
  - Activate the streetscape at ground level;
  - Improve casual surveillance;
  - Establish a building form, edge and corner statement which addresses the street on the corner of Pearl and Millett Street where currently there is just an excavated space;
  - To comfortably integrate the proposed building massing/ scale /height into the surrounding residential neighbourhood;
  - To create a transitional building form between the proposed 16 storey developments on Pearl Street and the 2 - 4 storey buildings north, east and west of that site;
  - Choose high quality architectural materials appropriate to the surrounding context, thereby enhancing the streetscape;
  - Develop a coherent and sensitive approach yet a new contemporary identity for the scheme;
  - Make good the generated massing born out of strategic technical and functional requirements which have influenced the organisation of the principle building elements and volumes.
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## 4.9 Urban Design Response

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### Urban Renewal

The Pearl and Millett Street corner site at present is prominent, but underdeveloped, making no real contribution to the existing neighbourhood character. There is no significant landscape planting here and the corner is an excavated and undeveloped area which was clearly meant to be developed at some later date. There are currently exposed concrete reinforcing rods and the building mass appears 'unfinished'.

The building is sited to take advantage of this available development area and to make a contribution to the urban environment. It will respond to the building form to be developed diagonally opposite.

### Retaining the Main Entrance

The existing Hospital entrance which adjoins the original homestead which housed the Hospital is to be retained as a clear and visible entrance that leads visitors, staff and patients through to the upgraded operational areas of the hospital. By retaining this connection with the Hospital's past, and leading them into the new operating suites, the entrance will retain its welcoming and character-filled attributes. The new areas of the hospital will be modern, lively and with increased amenity, establishing the new dynamic while ensuring that visitors and patients feel that they are in a high quality, client and service-oriented environment.

### The Internal Experience

As the Hospital development will allow for a significant increase in the provision of surgical services, particularly day surgery, the proposed building has largely been designed to be experienced internally and to comply with both quality and service expectations of consumers, and the Australasian Health Facility Guidelines.

While waiting areas are generally internalised, design techniques have been used to create internal courtyards and light wells. These contribute to the quality of the internal environment.

Providing natural daylight access has been a key design driver, along with ensuring privacy for patients and preventing over-sighting of neighbours of the building.

The building's orientation means that access to daylight for both staff and patients improves amenity and the recovery experience. It also means that the building mass does not negatively impact on neighbouring properties by over-shadowing.

### Integrating into the External Environment

The external expression is therefore subdued but conceived to positively sit within the existing quarry-like site, finally completing the streetscape with a built form.

A strong, massed built form that anchors this corner site is required to enhance the public domain.

The proposed building is composed of a series of stacked floor plates articulated horizontally and vertically. The upper floors generally contain bedroom modules on the perimeter with consulting suites and new theatres occupying ground and first floor levels.

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A series of recessed areas and projections on level 1 provide strong visual articulation and clarity to the architectural tripartite massing. The upper and lower basement areas will retain car parking and a screened waste handling/delivery dock.

Tactile three-dimensional screen wall elements rise above upper ground level providing scale and activation of the lower facade. Above this a floating red Alucabond frame provides a strong uniting visual band around the perimeter walls. The colour also links the existing buildings with the proposed addition to the Hospital. Above this band juxtaposed horizontal stripes of contrasting width and colour add further interest and scale. Projecting bay windows on bedroom levels enliven the facade by their cast shadow play.

### Scale and Local Context

The scale of the development is appropriate given its proximity to an approved 15-storey mixed use development immediately across from the site on Pearl Street and Forest Road. This site, which forms the boundary of the City Centre, has recently been rezoned to allow up to 16 storeys of mixed use development, including the Pearl Street frontage which can be built up to 40 metres in height. The proposed new Hospital building will be 5 storeys and forms an appropriate transitional zone between the City Centre and adjacent residential development. Refer to the Architectural Drawings in Appendix C.

An acceptable level of solar access is provided to adjoining properties. There is no adverse overshadowing caused by the proposed bulk of the development to neighbouring properties because of the aspect of the Hospital. Positive environmental outcomes through environmental design initiatives set a good precedent to others.

The proposed varied facade treatment is conceived to satisfactorily deal with urban design concerns of repetitive design elements and details which can result in a predictable monolithic appearance. Variety is found in the complexity of detail and varied design palette proposed. A considered, modulated facade that enlivens and complements the existing streetscape has been achieved, resulting in a high quality, modern appearance.

Hospitals are historically institutional in appearance and function and it has been a goal in the architectural design to 'de-institutionalise' this project and create a modern dynamic building of appropriate scale and detail.

Essentially form follows function, and to create an efficient design and comply internally with Australasian Health Facility Guidelines, the building is a series of stacked floor plates. The carefully articulated design has eliminated the sheer façade which currently exists on the eastern and western faces of the building.

### Internal Courtyards and Light-well

The clever design of the building additions include an internal light-well to ensure that all bedrooms have access to natural light. Two other courtyards are retained, including the main landscaped courtyard adjacent the café near the reception area.

This reinforces the homely and community focussed environment which has been characteristic of the Hospital since its establishment.

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## Community Character

The building creates a new strong civic presence and responds as a transitional area to the City Centre buildings opposite on Pearl Street. The retention of the existing character-filled main entrance and approach on Gloucester Road will ensure that it continues to be welcoming and familiar.

The new building's enhanced form and modern character will ensure that it contributes to the local streetscape. A new (secondary) entrance on Pearl Street will be landscaped, safe and accessible, ensuring that it contributes to enlivening the pedestrian environment and increasing safety. It reinforces the role of the Hospital, both internally and externally, as a community facility and 'place'.

## Future Expansion

The hospital plan and the building design allow for future expansion and adaptability. The structural system, ward layout and the use of a removable walkway on the northern face of the building enable ease of horizontal expansion.

The design's inherent flexibility allows for future changes to the service offering and technological innovations which may impact on the use of space.

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### 4.10 Setbacks

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The existing setbacks from each boundary have been retained where possible in the proposed new development. Where the new building is to be developed in the excavated area on the corner of Pearl Street and Millett Street, the building addition/extension will generally align with the existing building façade and setbacks.

The enclosed glass balconies on the Millett Street frontage will be encased and used for plant and equipment storage. Refer figure following under the section: Privacy and Over-sighting.

The average distance between the existing building and the boundary with 6 Millett Street - which is to be retained at its current separation - is 3170 mm. The minimum distance for the portion of the metal deck roof eaves at the north-eastern corner of the new extension is 1090 mm from this boundary.

The building is set back from the northern boundary with 6 Millett Street a distance of 3002 mm at its narrowest point where a structural column is to be constructed for support.

The minimum distance from the external casing of the new lift shaft and the rear boundary is 615 mm.

The minimum distance from the cantilevered deck over the rear of the at-grade car park at 12 Millett Street and the northern boundary is 732 mm. The deck is 12066 mm deep to allow for tandem parking, two cars deep. The deck is proposed to be at AHD 68.15m to align with the ground level of buildings fronting Gloucester Road, and the highest point of the lower deck will be retained at its existing AHD 65.55m.

The average distance between the lower deck northern edge and the northern property boundary is to be retained at its current setback distance of 2000 mm.

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FIGURE 22: EXISTING SETBACK OF CAR PARK AND FIRST FLOOR FROM MILLETT STREET FRONTAGE (COURTESY GOOGLE EARTH)



FIGURE 23: AERIAL VIEW OF SETBACKS FROM MILLETT AND PEARL STREET FRONTAGES (COURTESY GOOGLE EARTH).

#### 4.11 Privacy and Over-sighting

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Overlooking from the new building has been addressed by placing a walkway/corridor on the new upper levels of the building rather than bedrooms or offices. At 'ground' level, the upper basement parking has been retained and will now be enclosed. The existing perimeter fencing between the Hospital property and adjoining residential property will be retained.



FIGURE 24: PROPOSED SETBACKS FROM MILLETT STREET AND SUSPENDED REMOVEABLE WALKWAY ON UPPER LEVELS TO MINIMISE OPPORTUNITIES FOR OVERSIGHTING DOWN MILLETT STREET



FIGURE 25: LOCATION OF EXISTING UPPER BASEMENT PARKING AND FENCING BETWEEN HOSPITAL AND ADJOINING PROPERTY. PARKING LEVEL WILL BE RETAINED AND ENCLOSED, FENCING WILL BE RETAINED.



FIGURE 26: PEARL STREET FRONTAGE PATHWAY WILL BE UPGRADED AND LIGHTING IMPROVED



## 4.12 Urban Design Outcome

Key urban design outcomes are summarised following.

TABLE 6: KEY URBAN DESIGN OUTCOMES

Urban Design Outcome	Response
<b>Effective transition between City Centre buildings and residential areas</b>	The existing buildings and proposed 5 storey redevelopment provide a transition in height, bulk and scale between the 16-storey apartments and mixed use developments of the City Centre (opposite on Pearl Street) and the one to four storey residential dwellings and apartments in the immediate vicinity of the Hospital.
<b>Activation of ground level streetscape</b>	<p>The main entry to the building will be retained on Gloucester Road, which is a moderately busy and visible approach to the Hospital. Gloucester Road is the main pedestrian and vehicle approach to Forest Road and the Railway Station.</p> <p>There will be consulting rooms on the Pearl Street frontage which have screened glass and natural surveillance of the street.</p> <p>The vehicle entry points are both at the eastern end of the Hospital to minimise vehicle movements within the Hospital campus.</p>
<b>Articulation and Modulation of façade</b>	Each new façade has been carefully articulated with window frames, cladding, framing and horizontal elements to break up each frontage of the newly developed area of the Hospital.
<b>Provision of street landscape character</b>	<p>The new Pearl Street frontage will be landscaped and there will be new paving and entry features. Additional landscaping will be provided to enhance the entry and exit points on both the Millett Street and Gloucester Road frontages.</p> <p>Existing street trees will be retained.</p>
<b>Effective demarcation of public and private space</b>	<p>Entry into the Hospital will be retained in its current location. The entry achieves security through control of access to other floors and departments, passive surveillance and an accessible pedestrian approach.</p> <p>Access to the new operating areas of the Hospital will be refurbished, with careful demarcation and security access between visitor rooms, waiting rooms, recovery areas and the like. Fire and Life safety is achieved along with staff and visitor security measures.</p>

<b>Glazing (amenity)</b>	Glazing has been selected to ensure performance from a solar, acoustic and light transmission perspective. This ensures that there is plenty of natural light, balanced with the need for privacy, the need for shading and the minimization of glare and direct sunlight.
<b>Sustainable Design</b>	<p>The new building has been designed to minimise vertical travel;</p> <p>It optimizes ground level access to the main building functions;</p> <p>It encourages access to the Hospital by public transport, taxi or by foot;</p> <p>The design is flexible to accommodate a range of uses and possible expansion;</p> <p>The façade materials are durable and maintain a quality appearance throughout their effective life;</p> <p>Internal materials and finishes have been selected to minimise waste and volatile compounds, and minimise energy and water use.</p>
<b>CPTED</b>	The building has been designed to comply with CPTED principles to ensure the safety of patients, visitors and staff and to ensure there is a feeling of safety and ownership.
<b>Views</b>	<p>Views of the surrounding area are optimized while preventing over-sighting of neighbouring properties through careful placement of bedrooms and windows.</p> <p>The new building sits within an existing excavated space and there will be an extra three storeys over the new structure which includes the existing Medical Centre. As the focus of the new development is on the corner of Pearl and Millett Street views from surrounding locations are not obstructed or negatively impacted.</p>
<b>Character</b>	The character of the building will establish a bold and modern statement in a location which is currently occupied by an excavated vacant basement and ageing buildings. It responds to the new buildings which have been developed and approved opposite on Pearl Street.
<b>Context</b>	The Hospital has existed in the context of the surrounding residential development for nearly a century, and was in fact one of the first buildings and establishments in the local area. Its progressive modernisation while retaining the original character elements is entirely appropriate within the context of being a clinical setting providing high quality and technologically progressive service provision.



<b>Scale</b>	The scale of the building provides an effective transition zone between the 16 storey City Centre and the local residential developments.
<b>Setbacks</b>	The existing setbacks will be retained except in minor instances where utilities and decking protrude a short distance into existing setback areas.
<b>Privacy</b>	Privacy of both patients and visitors will be retained through the use of façade modulation, glazing, and fenestration techniques.
<b>Over sighting</b>	Over sighting has been prevented by only having corridors and the basement car park on the northern face which adjoins residential development.
<b>Overshadowing</b>	The aspect of the Hospital means that there is no detrimental overshadowing of neighbouring properties at any time of the year.

#### 4.13 Safety by Design – CPTED Principles

A Crime Prevention Through Environmental Design report has been prepared by Inspira Property Group and is attached in Appendix R.

Crime prevention through environmental design (CPTED) seeks to influence the design of buildings and places by:

- Increasing the perception of risk to criminals by increasing the possibility of detection, challenge and capture
- Increasing the effort required to commit crime by increasing the time, energy or resources which need to be expended
- Reducing the potential rewards of crime by minimising, removing or concealing ‘crime benefits’
- Removing conditions that create confusion about required norms of behaviour, (NSW Department of Urban Affairs and Planning, 2001).

This CPTED assessment has concentrated on the proposed additions and alterations to the existing Hospital, which are focussed on the extension of the Medical Centre, the creation of additional basement parking, 3 new lifts from basement level, and the addition of new storeys and a connecting walkway to the other parts of the Hospital. However existing pedestrian and vehicle access paths and operational areas of the Hospital have also been briefly examined.

While there is no publically available information regarding crime in the Hospital grounds, a July 2008 Bureau of Crime, Statistics and Research (BOCSAR) bulletin reported that between 1996 to 2006 police-recorded a 50% increase of assaults on NSW hospital premises from 214 in 1996 to 322 in 2006. A significant majority of victims were hospital health-care workers (BOCSAR Crime and Justice Bulletin 116, 2008).

However within the Hurstville Local Government Area, only one assault crime was recorded in 2011 on a health business premises (Australian Bureau of Statistics, abs.gov.au, viewed 10 October, 2012). Non-domestic violence assault crimes are focussed on the Hurstville Railway Station and other town centres within the local government area (ibid).

## Design Issues

Overall, the proposed building and landscape design is considered to be robust and congruent with CPTED principles. The design assessment has considered:

- External design
- Internal design
- Landscape design.

The assessment identified number of CPTED issues under the following broad characteristics of the proposed design:

- Courtyards
- Loading bays and emergency vehicle areas
- Car parks and
- Building access points.
- 

## Proposed mitigation measures

Broadly, proposed mitigation measures include the following operational policies which are already in place at the Hospital:

- After hours management measures such as consideration of adequate levels of lighting, CCTV and security patrols at key locations such as building access points, courtyards, loading bays, basements and car parks
- Use of robust materials in finishes to minimise the impact of malicious damage
- Use of clear signage in relation to pedestrian access clearly marking staff only areas
- Installation of clear and prominent signage reminding users not to leave valuables in their cars, and
- Restricting access to car park areas after hours by allocating certain areas as staff-only areas.

## Additional issues during construction stage

Consideration has also been given to the management of additional issues during the construction works. This includes consideration of:

- Management of vacant areas
- Pedestrian and user safety
- Signage and emergency vehicles (NSW Police & NSW Fire Brigades)
- Security of waste construction materials to prevent scavenging.

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#### 4.14 Lighting and Signage

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The existing perimeter lighting is proposed to be retained. There will be new lighting on the new building on the corner of Pearl and Millett Street which will be designed to comply with Australian Standard 4282 1997 “Control of the Obtrusive Effects of Outdoor Lighting” to ensure the safety of pedestrians and visitors to the hospital without creating uncomfortable glare for nearby residents or passing motorists. Details of proposed lighting and signage can be found in the Architectural Drawings attached in Appendix C.

The new signage on the addition to the Hospital on the Pearl Street façade will be a subdued silver metallic sign with back-lighting, to be placed flush with the façade as per the drawings.

No other new signage is proposed apart from required signs showing the ingress and egress points to the Hospital which will comply with Council and RMS guidelines and required safety signage.

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#### 4.15 Staging

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The partial redevelopment of Hurstville Private Hospital is proposed to occur in a single stage. The construction sequencing will occur in an orderly manner commencing with demolition and site preparation work. There will be some excavation in the basement of the existing Medical Centre for the expanded basement car park and the new lifts. The focus of the works is the redevelopment over the Medical Centre.

There will be some minor refurbishment works in other parts of the Hospital which will occur in an orderly manner to ensure that the Hospital remains fully operational during the construction program and that there is minimal disruption to services and delivery of patient care.

Construction will begin on completion of the approval process. Early works and site preparatory works will be undertaken followed by development over the existing Medical Centre.

The phasing of the proposed works is as follows:

1. Pre-construction planning
2. Final design management
3. Demolition
4. Site establishment
5. Construction
6. Completion activities
7. Approvals
8. Commissioning.

The intention is to continue all medical and clinical functions in the Hospital to the maximum capacity possible.

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## 4.16 Transport, Traffic and Parking

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The Traffic, transport and parking report was prepared by Colston, Budd, Hunt and Kafes and is found in Appendix G.

The proposed additions to the Hospital will see the number of beds increase from 54 to 96. The area for consulting rooms will reduce from 1314 m<sup>2</sup> to 1217 m<sup>2</sup>.

The requirement for additional car spaces is therefore an additional space for every 2 beds as per Hurstville Development Control Plan 1 Guidelines for Car Parking. With an additional 42 beds, twenty-one (21) additional car spaces will be required.

There are currently 69 car spaces including 1 disabled space.

There are 94 car spaces proposed including 3 disabled spaces, which is an increase of 24 spaces. One of the car spaces is a dedicated accessible space for staff.

Vehicular access to the site is provided from Gloucester Road and Millett Street. With the hospital additions focussed on Millett Street, vehicular access will be retained from Gloucester Road and Millett Street.

The site is within 10 minutes' walking distance of Hurstville Railway Station. Hurstville is on the Eastern Suburbs and Illawarra lines. Local bus services are provided by a number of operators, including Sydney Buses, Veolia and Punchbowl Bus Company. Services operate to and from the interchange at the railway station, including buses with disabled access.

To encourage travel modes other than private vehicle, it is proposed to adopt a travel demand management approach, through a work place travel plan to meet the specific needs of the hospital. The specific requirements, including number of employees, hours of work, shift times, etc., will be incorporated in the work place travel plan to support the objectives of encouraging the use of public transport.

In summary, the main points relating to the transport implications of the proposed hospital additions are as follows:

- The proposed extension would provide for an increase of some 42 beds;
  - The area for consulting rooms will be slightly reduced
  - The proposed development would increase employment and service densities close to good public transport services and is consistent with government objectives to reduce private car travel and encourage public transport use;
  - A work place travel plan will be implemented for the Hospital;
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- The proposed parking provision satisfies Council's requirement for the proposed increase in bed numbers;
- Access, servicing and internal layout will be similar to the existing situation;
- The road network will be able to cater for the additional traffic from the proposed development.

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#### 4.17 Accessibility

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The Access Review Report is a key element in design development of the Hurstville Private Hospital redevelopment, and an appropriate response to the AS1428 series, Building Code of Australia (BCA), and ultimately the Commonwealth Disability Discrimination Act (DDA).

Morris-Goding Accessibility Consulting has prepared the Access Report to provide advice and strategies to maximise reasonable provision of access for people with disabilities. The report is found in Appendix L. The development has been reviewed to ensure that ingress and egress, paths of travel, circulation areas, toilets and accessible car parking comply with relevant statutory guidelines.

The recommendations in the report are associated with detailed design and are achievable. The recommendations will be addressed prior to the construction approval stage.

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#### 4.18 Contamination and Hazardous Materials

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A Phase 1 and Phase 2 Environmental Assessment was undertaken by a Department of Environment, Climate Change and Water (DECCW) accredited Site Auditor, JBS Environmental Pty Ltd, to inform this application. The reports are included as Appendix M.

The conclusions were as follows (JBS Environmental Pty Ltd, 2011):

- The site was formerly used for low density residential, was subsequently developed into the Private Hospital, and then added to piecemeal as the surrounding properties were absorbed into the larger hospital site;
  - Due to the piecemeal absorption of each Lot into the larger site, and the lack of previous environmental reports, the unknown source of fill material across the site posed a potential contamination risk;
  - Areas of the site have historically been used for car parking and vehicle access;
  - Areas of the site have been historically and/or currently used for hazardous materials storage, including medical gas and generator fuel stores;
  - AECs include the fill material across the site, the soils underlying the current and former car parking and vehicles access and the areas under the hazardous materials storage facilities; and
  - The potentially contaminated media includes fill materials, natural underlying soils, and a minimal risk to groundwater.
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The conclusions from the Phase 1 Environmental Site Assessment included recommendations for an intrusive investigation.

A Phase 2 Environmental Site Assessment was conducted in 2011 which included 19 soil bores and 4 groundwater monitoring wells.

Based on the findings of this investigation and subject to the limitations in Section 12 of the report, conclusions are as follows:

- There were no unacceptable risks to onsite future receptors from soils;
- There were no unacceptable risks to onsite future receptors from groundwater;
- There were no odorous or stained soils observed on the site, and all aesthetic issues have been addressed.

Based on the analysis of the soil and groundwater on the site, there are no background contaminant levels that require consideration and:

- There are no unacceptable human health risks posed by potential chemical mixtures;
- There is no evidence of, or potential for, migration of contaminants from site; and
- Remediation or on-going management is not required.

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#### 4.19 Operational Management

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Details of the Hospital's operational management policies and procedures are in the attached Operations Manual in Appendix P.

The new hospital will continue to operate 24 hours, 7 days a week. With the extra capacity, the number of beds will increase from 54 beds to 96 beds. The proposal will see an increase from 200 staff to 300 staff total FTE, however the number of staff numbers per shift will vary throughout the day and night and days of the week. There is around 80 staff on a day shift.

Nursing staff work in shifts seven days per week, while most of the clinical staff work Monday to Friday. The theatres are operational from Monday to Friday, and one Saturday per month.

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#### 4.20 Aboriginal Heritage

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An Aboriginal Heritage Assessment was undertaken by Archaeological and Heritage Management Solutions Pty Ltd (AHMS) and is included in Appendix J.

The Director General's Requirements (DGRs) indicate that an Environmental Assessment "shall address Aboriginal Heritage in accordance with the "Draft Guidelines for Aboriginal Cultural Heritage Impact Assessment and Community Consultation 2005". These guidelines outline the content and composition of any Aboriginal heritage study, which they typically divide into two stages: 1) a preliminary assessment, primarily a desktop or base-line study to identify the feasibility of Aboriginal heritage issues to occur; followed by 2) a more detailed impact assessment if (1) has demonstrated potential impacts to Aboriginal heritage.

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A preliminary assessment was undertaken addressing first of all whether there are indeed any Aboriginal cultural heritage values present. In the absence of any archaeological or other cultural values, the Guidelines allow that:

*“If following a preliminary assessment, it is determined that Aboriginal cultural heritage values are not likely to occur on the proposed development site, no further assessment is required. This conclusion, and the rationale for this finding, must be documented in the preliminary information and subsequent application submitted for determination”.*

The required Aboriginal cultural heritage assessment of the following scope was prepared according to Step 1 of the Guidelines:

- *A description of the location and nature of the proposed development*
- *A description of any social and cultural values including the spiritual, traditional, historical or contemporary associations and attachments which the place or area has for the present-day Aboriginal community; and*
- *An assessment of which of the Aboriginal cultural heritage values that are known or likely to occur are likely to be directly or indirectly affected by the proposal.*

The methodology of assessment included consultation, desk top assessment, predictive analysis and site inspection. No Aboriginal objects were located during the survey and it is considered that none are likely to exist undiscovered. The property has been completely developed and has only a few remnant areas of soil, the rest being buildings and hardstand areas. The very few areas of soil are heavily disturbed and most likely to have imported to the site for landscaping purposes.

In the absence of not only any potential Aboriginal archaeological contexts but of any pre-1788 environmental values, it is not appropriate to consider Aboriginal cultural values outside of those that may be considered shared values of the entire community. No issues of cultural values were raised by the Metropolitan Local Aboriginal Land Council (MLALC).

It is considered that the proposed activity is unlikely to harm any Aboriginal objects and that there is no need for further assessment based on the process outlined in the Part 3A guidelines. The property inspection included a discussion at the end between Oliver Brown (AHMS) and Jason Pitt (MLALC) wherein both parties agreed on the outcome reported above.

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## 4.21 Cultural and European Heritage

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In May 2012 Archaeological and Heritage Management Solutions Pty Ltd (AHMS) prepared a Heritage Impact Statement (HIS) of the proposed redevelopment of Hurstville Private Hospital, 37 Gloucester Street Hurstville, NSW. The report is attached in Appendix K.

The HIS identified that the Hurstville Private Hospital is not listed on any State or local heritage register and that there are several locally listed heritage items in the vicinity of the site.

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No views or vistas considered to be of heritage significance were identified to or from the Hurstville Private Hospital or locally listed heritage items in the vicinity of the site.

The Hurstville Private Hospital is assessed as having social, historical and some aesthetic heritage significance at a local level in accordance with the NSW Heritage Council.

The proposed redevelopment of the Hurstville Private Hospital will not adversely impact the heritage significance of the site or the heritage significance of heritage items in the vicinity of the site.

The proposed redevelopment of the hospital will ensure the continuity of the provision of health care services from the site which contributes to its ongoing heritage significance.

The proposed redevelopment does not impact any aesthetically significant fabric at the site.

The proposed redevelopment will affect one room in the former Victorian residence on the ground floor at the subject site by removing in-fill partitions and doorways for an additional waiting room space. This is assessed as a positive heritage outcome as it partially restores the layout of the rooms to their more original state.

The wooden architrave at the entrance to the room identified should be retained and it should be protected during the redevelopment.

No further heritage assessment appears to be warranted for the proposed redevelopment of the Hurstville Private Hospital.

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## 4.22 Geotechnical Conditions & Structural Integrity

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The following statement has been prepared by Northrop Consulting Engineers. The original letter report is attached in Appendix F.

The proposed development consists of alterations and additions to the existing hospital which include the refurbishment to parts of the existing hospital, the addition of three (3) new floors over parts of the existing hospital and the construction of a new five (5) storey building with two (2) basement Levels adjoining the existing two basement levels on the corner of Pearl & Millett Streets.

Existing Structural Drawings have been sourced from James Griffiths Consulting Structural Engineers Pty Ltd. These drawings indicate that the existing building to which the additions occur is concrete framed. The proposed extension of this building will also be concrete framed, utilising the existing concrete columns to support the vertical loads. The existing hollow block walls to the stair shafts on Millett Street will be removed and replaced with reinforced concrete shear walls.

The new Lift Shaft and Stair Shaft constructed on the Northern end of the existing access road along the North Western boundary will also be constructed of reinforced concrete walls.

The existing concrete columns will be increased in strength to support the additional vertical load where required.

The new works will also be a concrete framed building, consisting of reinforced slabs, band beams and transfer beams supported vertically by concrete columns, reinforced concrete walls and core filled reinforced block work.

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The re-constructed reinforced shear walls of the existing building and the newly constructed shear walls will provide the lateral stability to the construction over the existing building and to the new building.

The existing drawings indicate that the existing concrete columns are supported by either pad footings founded on rock or concrete bored piers socketed into rock.

The Geotechnical Engineer (Jeffery & Katauskas) will be responsible for confirming the founding material under the existing pad footings and bearing capacity of the said. The founding material under a number of columns will be exposed to confirm the size of the pads and bearing capacity of the material during construction. Jeffery & Katauskas will be responsible for determining settlement of the existing pad footings under the additional vertical loads and rectification works will be designed if required.

The new concrete columns and load bearing walls will be supported by pad/strip footings founded on rock to the satisfaction of the geotechnical engineer. The existing lower level basement slab will be locally removed to construct the new pad/strip footings.

There is a small amount of excavation required under the detention tank and car park areas under the southern corner of the building.

On Levels 2, 3 and 4, on the north-western side of the building, it is proposed to construct a lightweight corridor with a view to it potentially being removed in the future. The corridor will be constructed using structural steel floor beams and joists with compressed fibre cement flooring. The floors will be horizontally braced to support the lateral loads. Beams spanning the full length of the corridor will support the vertical loads. The roof will also be horizontally braced.

It is also proposed to construct a slab on Level 2 over the existing roof structure to support the plant and mechanical equipment servicing the wards and new operating theatres. This plant slab will be constructed where possible by utilising the existing structural steel rafters and where required, new steel beams. These will then support pre-cast concrete planks which will be topped with a concrete slab.

Where required, the existing rafters will be increased in strength and supported mid-span by increasing the heights of the existing concrete columns.

The roof structure will comprise of fire-rated steel columns supporting steel rafters and purlins. The fire ratings will be achieved either by an approved coating or by cladding in fire-rated gyprock.

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#### 4.23 Water and Drainage

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The following statement has been prepared by Northrop consulting engineers. The Drawings are in Appendix E and the full report is Appendix F.

Following consultation with Hurstville City Council Drainage Engineer, on-site stormwater detention will be required for all new roof area associated with the redevelopment. Calculations indicate the development will need to provide 72,500 litres of detention. It is proposed that an underground detention tank is implemented to achieve the requirements set out by Hurstville City Council.

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The principles for stormwater management on site can be summarised as follows:

- Runoff from the majority of new roof area will be collected and diverted via downpipes to an underground detention tank, located on the lower basement level of the site underneath the access ramp from Millett Street. The downpipes will be connected to the soffit of the upper basement slab to discharge into the detention tank.
- The detention tank will discharge the captured roof runoff to the existing connection to the council system, located in the road reserve in Millett Street.
- Runoff from the new lower basement pavement will be conveyed to the existing pump-out pit infrastructure.

Shoring will be required for the excavations in the vicinity of the detention tank as there will be insufficient room available for temporary batters.

Reinstatement of the existing paver footpath, adjacent to Millett Street, will be required in the vicinity of the outlet for the detention tank. Refer to Civil Engineering Drawing Co3(A) for the location extent of the footpath to be replaced.

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## 4.24 Noise and Vibration

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GHD prepared the noise and vibration assessment. The full report is in Appendix I.

The main findings of the noise impact assessment are described following with reference to the GHD report.

### Construction Noise and Vibration

Assessment of construction noise and vibration indicates that during recommended standard hours majority of construction activities are expected to exceed the noise affected CNML at various receivers within 75 m of the project site. Within 10 metres certain construction activities are expected to exceed the highly noise affected CNML. Implementation of reasonable and feasible mitigation measures detailed in Section 7.1 of the report should be considered and implemented to minimise noise impact.

### Operation Noise

The operational noise assessment suggests that project-specific and sleep disturbance noise goals are achievable provided that any additional site mechanical plant is suitably selected and located.

Limiting criteria for mechanical plant and equipment noise emissions are essentially the project specific criteria presented in Section 3 of the GHD report. Once the plant and equipment selection and placement has been finalised, a separate review of mechanical plant noise should be conducted by a suitable qualified person to ensure that project specific criteria are met.

Section 7.2 of the report specifies in-principle noise mitigation and management measures that are suggested for site operations.

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### Traffic noise due to the proposal

Noise logging indicates that existing road traffic noise currently exceeds the RNP road traffic noise criteria of 55 dB(A)  $L_{Aeq\ 1hour}$  for day and 50 dB(A)  $L_{Aeq\ 1hour}$  for night.

Road traffic noise increases due to the development are anticipated to be minimal as the volume of additional generated traffic is significantly less than existing volumes. Noise predictions indicate that a less than 2 dB(A) increase in traffic noise due to the development is expected and would be generally imperceptible.

### Traffic Noise impact on the proposal

To provide an acceptable internal environment with respect to road traffic noise, a wall construction to achieve at least Rw 29 is recommended consisting of the following minimum specifications:

- Conventional timber stud-framed walls, clad externally with 9 mm thick timber or hardboards or flat cellulose-cement sheets, and internally with 10 mm thick plasterboard or 6 mm thick hardboard.

To provide an acceptable internal environment with respect to road traffic noise, glazing to achieve at least Rw 24 is recommended consisting of the following minimum specifications:

- 6 mm operable sliding windows.

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## 4.25 Air Quality

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The Air Quality Assessment report was undertaken by GHD Pty Ltd and is attached in Appendix I.

The air quality impact of the proposed project is influenced by two main emission sources, which include the dust emissions resulting from the construction activities and the boiler emissions resulting from the generation of hot water and for use as a back-up generator. A risk assessment of both construction and operation emissions was carried out in order to determine the likelihood and consequence of impacts on the local environment and community. All of the identified risks are considered to be negligible or low provided that the identified mitigation measures are implemented.

Construction impacts have the potential to extend beyond the construction area. Construction dust is expected to be greatest during the preparation/demolition stage as opposed to the building stage. However, provided that the methods and management systems designed to maintain air quality during construction are implemented as outlined in the mitigations section of the Air Quality Report (in Appendix I), construction impacts are not expected to be any more than minor.

Construction and operational emissions are not expected to affect domestic water supplies. Through management of the smaller particle size fractions (equal and less than  $PM_{10}$ ), it follows that the nuisance dust would also be managed.

Operational air quality impacts are expected to be no more than minor. However, ambient particulate monitoring shows background particulate levels are often exceeding the NEPM (Air) goals of  $50\ \mu g/m^3$ . It is expected any contribution from the HPH boiler would be managed in order to achieve the best

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possible environmental outcome possible through the use of best practice techniques and efficient boiler selection.

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## 4.26 Utilities and Services

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The following report extract was prepared by Erbas Pty Ltd and the full report is found in Appendix H.

### BCA Classification

In accordance with the NCC National Construction Code NCC 2012, the building classification is:

Table A1.1:	Climate zone 5 (Sydney)
Part A3:	Class 9a
Part C1:	Type A construction
Effective Height:	Greater than 15 metres, less than 25 metres.

### Mechanical Services

Air conditioning will be provided to the conditioned space via air-cooled chillers, gas-fired heat pumps, air handling units and energy recovery systems to recover energy from exhaust air systems, variable speed pumps complete with associated ductwork and air distribution arrangement.

Air-cooled chillers and air handling units serving the top three levels will be located on the roof.

Air handling units and variable air volume boxes will be providing air conditioning to the majority of the hospital complete with economy cycle. Indoor fan coil units will generally be concealed ducted type located in ceiling space or bulkheads. Wall mounted type indoor fan coil units will be provided to communications room etc.

Winter heating shall be provided via gas-fired heat pumps via the air handling or fan coil unit systems.

The system will be able to provide individual temperature control per zone. Each zone shall be designed to about 80 to 100 square meters. Mechanical ventilation to amenities which includes the laundry room, dirty utilities, cleaners, toilets, electrical switch room and waste rooms etc. shall be provided as required in accordance with the National Construction Code (NCC), TS11 and Australian Standards AS/NZS1668.1 and AS1668.2.

### Electrical Services

The existing substation at the front of the site in Gloucester Road will require upgrading to accommodate the additional load of the redevelopment and the new works. A new upgraded low voltage connection will be required for the proposed works from the new substation on the site. A main switchboard comprising non-essential, critical essential (generator) and essential will sub-distribute to distribution boards located within the redeveloped areas and to service each floor of the new areas. A percentage of planned spare capacity will be designed for the new infrastructure.

An Ausgrid smart meter will be provided at the main switchboard location. Separate sub mains will be reticulated for Group A, Group B and Group C services.

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During design development an investigation will be conducted to establish whether the existing 190kVA generator can be retained and a similar sized generator utilised to run in parallel with the existing or whether it is cost efficient to install a new larger generator to serve the critical care areas.

A new communications fibre optic and voice lead-in cabling will be required for the proposed works. A new main communications room will connect the voice and data networks to the Hospital. Cabinets will be located to suit design requirements. Integrated Nurse Call/Security and Patient Entertainment Systems, Pocket Paging, BMS, Public Address and background music will also be provided.

Battery operated clocks will be provided.

Patient treatment areas where electro-medical equipment will be used for procedures will be classified as either body type or cardiac type will be designed in accordance with AS/NZS 3003.

Energy efficient lighting and control solutions will be provided based on ambient lighting conditions including perimeter dimming systems, motion sensors, time-clocks and addressable lighting, to reduce the lighting power density below NCC 2012 Section J requirements. Colour rendering of lamps in special areas will be provided in accordance with AS/NZS 1680.2.5.

Essential services, including emergency and exit lighting will be provided in accordance with the NCC 2012 and Australia Standards.

### Hydraulic and Fire Services

The cold water supply to the hospital is boosted via triplex variable speed pumps that will need to be replaced with a new pump set to allow for the rise in height of the additional development. The incoming cold water supply to the site will require upgrading from the meter. A new hot water and warm water plant will be provided to supply the redevelopment. The existing hot water plant will be made redundant subsequently to commissioning the new hot water plant. The two existing hot water plants that currently supply the hospital will remain operational, until the new hot water plant has been installed and commissioned. A new warm water system will reticulate at 45°C to reduce the number of thermostatic mixing valves to the additional development.

A new gas line will be provided to supply the new hot water and mechanical plant. The existing reticulation will be generally maintained if found to be able to deliver the future demand. The existing fire hose reel system is installed to a previous code that is now non-compliant to the current NCC and requires upgrading. Additional fire hose reels will also be required to service the new development and locations of fire hose reels shall be compliant with AS 2441-2005 Installation of Fire Hose Reels.

The current fire hydrant system will require upgrading to comply with the current NCC. The existing fire hydrant booster valve, located adjacent the main entrance to the hospital in Gloucester Road needs to be replaced and relocated 10 metres from the building, to comply with the current fire hydrant installation code AS 2419.1-2005. The existing fire hydrant pump needs to be replaced with a diesel pump and located 6 metres from the building. The existing and new fire hydrant valves need to be relocated into the fire stairs.

The new roof area shall be eaves gutter type and designed to a one in twenty year event, for six minute storm duration where a fail-safe flood path exists. Where a fail-safe flood path does not exist, once in

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100 year storm of 6 minutes duration shall be used as a calculation basis as available from Bureau of Meteorology statistics.

### ESD Principles

Environmentally sustainable design principles will be considered and incorporated during the design stage for all building services. Recommendations for consideration in the Architectural design have also been included. The ESD initiatives will consider the following broad principles:

- Energy – reduction in energy consumption;
- Water – reduction in potable water usage;
- Materials – selection of environmentally friendly materials in construction and fitout;
- Indoor Environment Quality – improvement of the indoor environment and well-being of occupants.

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## 4.27 Building Code of Australia

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A Building Code of Australia (BCA) audit of the existing Hospital was conducted by Davis Langdon. The report is attached at Appendix O.

This preliminary audit identified that there are some departures from the deemed-to-satisfy provisions of the BCA and as such replacement items and new works will be required to meet the performance requirements. It is intended that design details and engineering details will be addressed prior to Construction Certification.

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## 4.28 Consultation

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A consultation plan has been prepared to identify stakeholders and the engagement strategy. The Consultation Outcomes Report will be attached at Appendix T after the public consultation period. Extensive consultation has occurred with the residents/owners of the property which are enclosed by the Hospital. Their input and feedback will be sought regarding the proposed development, potential impacts and amelioration measures.

Ongoing consultation will continue with the various agencies and authorities associated with the Project Approval, and local political representatives.

Following the completion of the public exhibition period, a consultation report will be prepared detailing the strategy, responses and any amendments to the Project Application which have resulted from stakeholder responses.

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## 4.29 Construction Management

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A detailed Construction Management Plan will be prepared prior to obtaining the Construction Certificate which addresses the following matters:

- Site preparation activities
- Construction activities
- Location of amenities
- Impacts on adjoining neighbours
- Consultation
- Risk and mitigation measures
- Occupational health and safety
- Traffic Management
- Waste management and
- Noise management.

The plan will identify the detailed plans for activities such as the Traffic Management Plan which will be prepared prior to commencement of works in consultation with the Head Contractor.

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## 4.30 Waste Management

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Waste generated by the Hospital is currently managed according to industry best practice and increased waste volumes generated by the increased number of admissions to the Hospital will be incorporated into the existing systems. The procedures and policies for waste management are detailed in the Operations Management Report in Appendix P.

### Demolition and Site Preparation

There will be some demolition waste created by the removal of walls and panelling, and preparation of the lower basement for the extension of the car park and new building area. Areas to be demolished are identified in the drawings attached in Appendix C.

A hazardous waste assessment report has been prepared by a Hazardous Materials Auditor and is attached in Appendix S. The audit identified the possible location of materials such as asbestos that will need to be removed, contained and disposed of appropriately and describes appropriate waste disposal methodologies.

### Construction Waste

The management of the site during the construction will be by the Head Contractor. The Head Contractor will prepare operating plans to ensure waste is managed throughout the demolition and construction project according to the following principles:

- Environmental objectives
  - Routine monitoring and maintenance requirements
  - Ensuring a range of acceptable levels for monitored parameters
  - Action levels which trigger intervention in response to monitoring observations
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- Documentation protocols
- Reporting procedures.

### Operational Waste

The Hospital currently generates the following waste streams:

- Secure paper waste;
- Clinical waste;
- General Waste;
- Baled recycled waste; and
- Grease pit sullage.

The secure paper waste volume is not expected to increase.

General waste is currently cleared at a rate of 8 x 31.5 cubic metres per week. This is expected to increase to 10 x 45 cubic metres per week.

Baled recycled waste is expected to increase from 300 kg to 500 kg.

Sullage removed from the grease trap is expected to increase from 600 litres every 6 weeks to 600 litres every 4 weeks.

### Clinical Waste

The expanded Hospital operations are anticipated to generate an increase of approximately 144 kilograms per week. The waste is disposed of within the main loading dock clinic bins according to handling and disposal policy procedures.

The contaminated and biological waste systems are not connected to the sewage discharge system. Containers of waste are collected by a registered and approved biological hazards waste contractor. The existing contract will be extended to cover the increased waste generated.

### Hazardous Materials

All dangerous goods on site are stored and used as per material safety data sheets (MSDS) provided with the substance. There will be a new oxygen storage area located on the upper basement level. Hazardous materials inventories will be maintained along with current practices of management as detailed in the Operations Management Report in Appendix P. The Radiation Safety and Protection Plan is attached in Appendix Q.

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## 4.31 Bulk Earthworks

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It is anticipated that 250 cubic metres of soil will be removed from the basement area as part of the site preparation and early works program. This includes soil to be removed for the detention tank and soil to be removed for the new lift shaft.

Soil removed from the site will be tested and disposed of appropriately.

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## 4.32 Contributions

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A draft Voluntary Planning Agreement (VPA) has been included as Appendix U. Negotiations with Hurstville City Council regarding contributions or Works in Kind will be conducted as part of the Major Project determination process. Preliminary discussions have occurred with Council officers to consider the scope and nature of a possible draft VPA.

## 5.0 Draft Statement of Commitments

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### 5.1 Introduction

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The draft Statement of Commitments details measures for environmental management, measures to mitigate potential adverse impacts during both the construction and operational stages of the project, and any monitoring that will be undertaken.

The proponent will be responsible for implementation of these Commitments and commits to the preparation of a Building User's Guide prior to the occupation of the building to ensure that plant and equipment is operated as efficiently as possible.

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### 5.2 Demolition Management Plan

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A Hazardous Materials Management Plan will be prepared prior to the demolition following a hazardous materials survey to be conducted by an Occupational Hygienist.

All work will be carried out in accordance with AS2601 – 2001 Demolition of Structures and according to the relevant Workplace Health and Safety guidelines.

Demolition works will include measures to mitigate the following potential impacts:

- Demolition vehicle movements
  - Dust
  - Noise
  - Minimising waste
  - Minimising exposure and disposal of hazardous wastes
  - Erosion and sediments in run-off.
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### 5.3 Construction Management Plan

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A detailed Construction Management Plan will be prepared once the Project is approved, which responds to any specific conditions of consent. The purpose of the Construction Management Plan is to provide a document that ensures that the environmental safeguards and mitigation measures specified in the project consent are implemented and monitored.

The objectives of the CMP are to:

- Ensure all requirements of the project consent are met;
- Ensure the project operates in accordance with the Hurstville Private environmental policies;
- Ensure that relevant statutory requirements are complied with;
- Manage the environmental hazards and risks associated with the Project;
- Minimise the potential for environmental harm;
- Provide a mechanism for communicating and implementing site environmental policy; and

- To provide a process for review and continual improvement of project environmental management.

The Construction Management Plan will address the following topics:

- Construction hours;
- Air Quality/dust control procedures;
- Noise Management procedures;
- Construction vehicle movements;
- Waste Management Plan;
- Community safety plan;
- Arrangements for temporary pedestrian and vehicle access;
- Storage and handling of materials;
- Environmental Training and awareness;
- Contact and complaints handling procedures; and
- Emergency preparedness and response.

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## 5.4 BCA Compliance

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All building work will be carried out in accordance with the provisions of the Building Code of Australia.

### Waste Management

Prior to the commissioning and occupation of the new areas of the Hospital, a Waste Management Plan will be prepared which covers existing waste streams and the methodology for dealing with increased waste volumes and management of new locations for the various waste stream receptacles. Plans will be prepared which comply with relevant legislation regarding waste and resource recovery, environmental health and safety, and environmental management including:

- NSW Health Infection Control Policy, May 2007
- NSW Health Waste Management Guidelines for Health Care Facilities, August 1998
- ISO 14001: 1996
- ISO 9001:2000; and
- Relevant Council and DECCW Guidelines.

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## 5.5 Plant and Equipment

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Cooling towers and water heating systems shall be operated and maintained in accordance with AS3666:2000, the Public Health Act 1991 and Public Health (Microbial Control) Regulation 2000.

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## 5.6 Aboriginal Cultural Heritage

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If any Aboriginal archaeological relics are uncovered during the course of the works, then all works shall cease immediately in that area and the National Parks and Wildlife Service will be contacted. The Proponent shall comply with any requirements of the NPWS to cease work for the purposes of archaeological recordings.

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## 5.7 European and non-Aboriginal Cultural Heritage

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If any archaeological relics are uncovered during the course of the works, then all works shall cease immediately in that area and the NSW Heritage office is to be contacted. Depending on the possible significance of the relics, an archaeological assessment and excavation permit under the NSW Heritage Act 1977 may be required before further works can proceed in that area. The proponent shall comply with any requirements of NPWS officers to cease work for the purpose of archaeological recordings.

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## 5.8 Site Environmental Assessment

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The proponent has undertaken a Phase 2 Environmental Site Assessment (Appendix M) which indicated that additional soil samples should be undertaken underneath the footprint of the building following demolition works to ensure no additional contamination is present. This is particularly important given that the hospital has developed over time by incorporating areas that may have previously been used for contaminating activities associated with the operation of the hospital in its earlier forms.

The report's author also suggested that prior to demolition of the buildings, a hazardous material survey should be undertaken to identify any buildings which may contain hazardous materials. The Proponent will consider the findings of the hazardous waste survey in the Waste Management Plan.

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## 5.9 Landscape and Vegetation

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The proponent will provide landscaping and public domain works in accordance with the landscape drawings submitted with the Environmental Assessment Report and attached at Appendix D.

All street trees shall be protected at all times during the works. All trees to be retained on site will be suitably protected by way of tree guards, barriers or other measures to reasonably safeguard against damage to root systems, trunks and branches.

The arborist's report which advises on the method for pruning and protecting trees during construction is included in Appendix N.

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## 5.10 Parking and Loading Bays

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All car spaces and service bays shall be designed to comply with AS2890: Parking Facilities.

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## 5.11 Vehicle Driveways and Manoeuvring Areas

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Parking and driveway access will be designed in compliance with Hurstville Development Control Plan No. 1 (Car Parking) and relevant Roads and Maritime Service policies.

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## 5.12 Accessibility and Pedestrian Access

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The design of the access into the Hospital will permit appropriate, safe and dignified use by all people including those with disabilities. Access will be designed in accordance with:

- NSW Health Facilities Guidelines: Part B, Design for Access, Mobility, Occupational Health and Safety, and Security;
- DDS32 Improved Access for Health Care Facilities
- AS1428 and BCA requirements.

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## 5.13 Lighting

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All lighting will be designed to comply with AS1518 with respect to lighting design for roads and public spaces and AS4282 with respect to “The Control of the Obtrusive Effects of Outdoor Lighting.”

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## 5.14 Services

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The proponent will notify the relevant authorities and obtain relevant certifications for connections to or adjustment of services affected by the proposed construction works and increased demand created by the expanded hospital.

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## 5.15 Integrated Water Management Plan

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The proponent will submit an Integrated Water Management Plan which addresses water efficiency opportunities.

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## 5.16 Consultation

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The proponent will continue to liaise with the local residents and stakeholders during the development process. There will be ongoing consultation with relevant authorities.

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## 5.17 Environmental Management Plan

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The proponent will prepare an environmental management plan which addresses the following operational issues:

- Visitor safety
  - Site Security
  - Noise management
  - Traffic and pedestrian management
  - Storage of materials
  - Emergency and Evacuation Procedures
  - Fire Safety
  - Waste Management
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- Lighting
- Signage
- Workplace Travel Plan
- Water and Energy Efficiency.

## 6.0 Conclusion

The provision of quality health care services by Hurstville Private Hospital has contributed to the well-being of the local and regional community since 1924.

The proposed new development will improve the performance of the Hospital and facilitate the implementation of technical innovations in surgical techniques.

The principles to be applied to guide future development will result in a substantial increase in the capacity of the Hospital and its ability to meet demand into the future with positive social, health, environmental and economic outcomes for the local community.

The proposed Hospital redevelopment will provide increased employment opportunities and will contribute to patronage of public transport.

The objective of the proposal is to contribute to the amenity and accessibility of the local area. It will create a modern transitional interface between the 16 storey developments of the City Centre and the surrounding low density residential development.

It will contribute to orderly and economically sustainable land development and urban renewal in a timely manner. It therefore meets the objectives of planning instruments and Strategies at a local, state and Federal level.

Given the project's compliance with relevant environmental planning instruments, policies and guidelines, and the minimal impacts the expanded Hospital will have on the surrounding environment, it is recommended that the Project Application is approved, subject to the draft Statement of Commitments.