

Consultation and Submissions

Exhibition

Under section 75H(3) of the EP&A Act, the Director-General is required to make the environmental assessment (EA) of an application publicly available for at least 30 days. The applicant was advised on 9 January 2012 that a Test of Adequacy revealed that the Environmental Assessment satisfactorily addressed the Director-General's Environmental Assessment Requirements. The application was formally accepted on 17 January 2012. A circular was forwarded to Griffith City Council from the Department of Planning & Infrastructure advising that for major projects: *Exhibitions cannot recommence until 16 January 2012. Any exhibitions starting between 16 - 31 January should run until the end of February.*

The proposal was placed on public exhibition from Friday 20 January 2012 to Friday 2 March 2012. As the exhibition period commenced during January, the exhibition period was extended until the end of February as per the Department of Planning & Infrastructures directives for the holiday period.

The project was placed on exhibition for a total of forty-two (42) days from Friday 20 January 2012 to Friday 2 March 2012. The proposal was notified in writing to surrounding landowners, advertised in The Area News, The Sydney Morning Herald and The Daily Telegraph on Friday 20 January 2012 and available for viewing at the Griffith City Council administration building, at Griffith City Library and at the Department of Planning & Infrastructure Information Centre in Sydney.

At the close of the exhibition period one (1) submission was received supporting the project. Comment from the proponent on the submission was not considered necessary.

Public Authority Submissions

No statutory external referrals were required for the proposed development.

Assessment

The Director-General identified the key issues as:

1. Relevant EPI's, policies and guidelines:
2. Built Form & Height
3. Environmental and Residential Amenity
4. Staging
5. Transport & Accessibility Impacts (Construction and Operational)
6. Ecologically Sustainable Development (ESD)
7. Contamination
8. Heritage
9. Aboriginal Heritage
10. Drainage
11. Waste
12. Hazards
13. Public Domain
14. Operational Management
15. Utilities
16. Statement of Commitments

RELEVANT ENVIRONMENTAL PLANNING INSTRUMENT'S, POLICIES AND GUIDELINES

- Objects of the EP&A Act 1979
- NSW State Plan
- SEPP (Major Development) 2005
- SEPP (Infrastructure) 2007
- SEPP No. 33 – Hazardous and Offensive Development
- SEPP No. 55 – Remediation of Land
- NSW Planning Guidelines for Walking and Cycling
- Griffith Local Environmental Plan 2002
- Relevant DCP and S94 contribution plans
- Nature and extent of any non-compliance with relevant environmental planning instruments, plans and guidelines and justification for any non-compliance.

The listed EPI's, policies and guidelines have been previously assessed in this report, with the exception of the below:

NSW Planning Guidelines for Walking and Cycling

The aim of the policy is to improve opportunities for walking and cycling and to create more walking and cycling access to urban services and public transport.

The development includes the construction of a 2.5m wide shared pedestrian and bicycle footpath for the full length of the development along Animoo Avenue. The footpath will link with the existing footpath which is located along Animoo Avenue along the Griffith Base Hospital site. This footpath will provide a direct link from both hospitals to Griffith's CBD and surrounding residential areas. The proposal is in line with Griffith's Pedestrian Access Mobility Plan (PAMP) and considered to support the NSW guidelines on planning for walking & cycling.

Relevant DCP's and S94 contribution plans:

Development Control Plan No. 20: Off-Street Parking Policy (2011) (DCP 20 2011)

Council's revised parking code was adopted in December 2011. The submitted Environmental Assessment (EA) briefly addressed both the current and previous parking DCP, and the Traffic and Parking Assessment Report addressed only the former parking DCP as the study was completed before the new DCP was adopted by Council.

The development proposes to provide as part of Phase One, a twelve (12) space staff only car parking area, a six (6) space public car parking area and drop off bay. Phase Two will include the construction of the remainder of the public car park, resulting in a total of thirty-four (34) car parking spaces in the general parking area, in addition to the twelve (12) staff only parking spaces, resulting in forty-six (46) onsite spaces in total.

The proposal is classed into three different uses under the current DCP 20: the Teaching and Learning Centre being an 'Education establishment – tertiary institution', the consulting rooms being 'Health Services Facility - Health Consulting Rooms', and the hospital being 'Health Services Facility - Hospital'. A table of each use and the spaces required under the current DCP is provided below:

Assessment of Development Control Plan No. 20: Off-Street Parking Policy (2011)

Use	Ratio	Proposed	Required
Teaching & Learning Centre (Phase 1)	Education Establishment – Tertiary Institution: 2.4 spaces per class room	<u>Ground Floor:</u> <ul style="list-style-type: none"> - 2 meeting rooms; - 4 teaching consultation rooms. <u>First Floor:</u> <ul style="list-style-type: none"> - 1 student resource room; - 1 tutorial room; - 1 skills laboratory room. 	Total of 4 teaching consultation rooms considered to be one (1) class room + Total of 5 teaching rooms. 6 x 2.4 spaces = 12 spaces. Phase 1 = 14.4 spaces
Hospital (Phase 2)	Health Services Facility - Hospital: 1 space per 2 beds Health Services Facility – Health Consulting Rooms: 3	20 overnight beds + 20 day/recovery beds/chairs. 3 consulting rooms	Hospital = 20 spaces 3 consulting rooms = 9 spaces

	spaces per consultation room		Phase 2 = 29
			Total: 43.4 < 43 onsite spaces

Phase One of the development proposes a total of eighteen (18) onsite parking spaces. Parking spaces have been calculated for Phase One to include the consulting rooms as the equivalent of one (1) teaching room. The practice consulting rooms are stated to be used for one-on-one teaching of students by local clinicians and visiting specialists both during and after-hours. Phase Two of the ambulatory/admin cluster involves the fit out of the remainder of the ground floor level to include an additional three (3) consulting rooms which will be open to the public for consultations with medical practitioners.

The previous parking code (Draft DCP 20: Off-Street Parking Policy) requires parking spaces to be provided as below:

- *Consulting rooms/surgeries - 3 spaces per consulting room + a space for each 2 employees. Note: Total parking may be reduced where it can be demonstrated that not all consulting rooms will be in concurrent operation;*
- *Schools, hospitals and other public institutions - 1 space per 2 employees; or minimum 10 spaces for students.*

The submitted Traffic Assessment conducted an assessment of the former DCP (as below) and did not take into consideration the consulting rooms, but included the proposed GP offices:

Assessment of former Draft Development Control Plan No. 20: Off-Street Parking Policy

Use	Ratio	Proposed	Required
Schools, hospitals and other public institutions	1 space per 2 employees; or minimum 10 spaces for students	23 weekday day shifts	11.5 spaces
Offices	1 space per 37m ² of floor spaces	Teaching component and GP Network Offices = 475m ²	12.8 spaces
			24.3 spaces

The traffic & parking assessment report also undertook a comparison assessment of the parking rates specified in the *Roads and Traffic Authority's Guide to Traffic Generating Developments*. Professional consulting rooms were not included in the assessment, of which data is not available under the guide.

Comparison assessment under the Roads and Traffic Authority's Guide to Traffic
Generating Developments:

Use	Ratio	Proposed	Required
Private hospitals	Peak parking accumulation = $-19.56 + 0.85B + 0.27ASDS$ Where B = number of beds, and ASDS = number of staff per weekday shift	45 beds + 23 weekday staff	24.9 spaces
Offices	1 space per 40m ²	Teaching component & GP network Office - 475 m ²	11.9 spaces
			Total 36.8 spaces

The submitted plans also indicate a future expansion to the inpatient cluster of five single-bed rooms, of which have not been taken into the overall onsite parking calculations. It is calculated that this expansion would require an additional 2.5 spaces. However the expansion does not form part of this application.

It is considered that if the practice consulting rooms are not included in the calculation, the total onsite parking proposed will comply with Council's parking policy, requiring a total of 43 onsite parking spaces. However if they are included at the 'consulting room' ratio, onsite parking for the total development is short by seven (7) spaces (requiring a total of 53 onsite parking spaces). It is noted that in the environmental assessment there is insufficient information as to the nature and the function of the practice consulting rooms, such as whether the consulting rooms will be open to the public for appointments with medical students or whether they will be used privately for medical training. However as the primary function of Phase One is for the provisions of rooms for teaching, these consulting rooms have been included as class rooms, with the consulting rooms being classified as the equivalent of one classroom. Furthermore, under Council's revised parking code the proposal may have been eligible to apply for a reduction in onsite parking of up to 50% based on shared parking for a medical centre hospital (primary use) and educational establishment (second use).

Phase One requires 14 onsite parking spaces, however the development it is providing 18 spaces. The EA states that the teaching centre will have up to eight (8) students on site any given time. It is also assumed that not all students and staff will arrive via private vehicle, as some may car pool, be dropped off, or may walk or cycle. The purpose of the requirement of 3 spaces per consulting room is based on expected customers (i.e. 1 waiting to see the doctor, 1 with the doctor, 1 finished the consult). Based on the facility having up to eight (8) students at anyone time, and the nature of the facility (educational as opposed to

commercial) it is unlikely that all teaching rooms will be full concurrently with the consulting rooms.

It is considered that the provision of the total of forty-six (46) onsite spaces to service the whole development is adequate. This is considered adequate as not all staff or patients will access the site by private vehicle. The EA states that some medical staff will work at the facility on a 'fly-in fly-out basis'. Furthermore, the Traffic Assessment included in the EA has undertaken a study of the area and found that 122 on-street parking spaces are available surrounding the site. A survey undertaken on 23 May 2011 during the morning peak (7:00 am – 12:00 pm) found that at 9:30 am 106 spaces were vacant. During the peak afternoon demand (12:00 pm – 6:00 pm) found that at 3:15pm there were 86 spaces vacant. The Traffic Assessment also indicates that the previous use of the site as a nursing home should also be considered, which the assessment has done and found that the proposal will result in a nett increase in traffic generation potential to the site of between 6 – 7 peak hour vehicles trips or a projected nett increase in traffic generation of 19 vehicle trips per hour. The Traffic Assessment states that *"The projected increase in traffic activity as a consequence of the development proposal is minimal and will clearly not have any unacceptable traffic implications in terms of network capacity"*. It is also noted that the former aged-care facility did not provide any onsite car parking and that staff and visitors utilised on-street parking.

As such, the proposed car parking arrangements are considered to comply with Council's DCP and are suitable for the proposed development.

Development Control Plan No. 21: Residential Development Policy (DCP 21)

The provisions of DCP 21 apply to the construction of dwelling houses, dual occupancies and dwelling houses in residential zones. As such the development standards specified in this DCP are not applicable to the proposal. However, the character statement for the precinct provided in the DCP should be considered.

The development site is situated within 'Precinct 8 – Hospital'. The General Information for this precinct states:

The Hospital precinct consists of the streets and blocks surrounding Griffith Base Hospital. The precinct is part of the original Walter Burley Griffin layout having a formal plan of crescents with radiating avenues and streets, particularly that it is part of the important axial link from Walla Avenue through the Benerambah Street circle, along Koorinal Avenue and the Hospital site and up to Scenic Hill. The precinct is noted for its excellent access to community facilities such as medical centres, churches, schools, childcare centres, clubs, parks and also good access to the CBD.

The streets are mostly busy collector roads 12m to 16m wide with 4.5m to 7m wide verges and setbacks are from 6m to 9m. Large established street trees and resident trees give the precinct a lot of its character. A typical allotment is a large 950m² with a frontage of 18m. The area contains a mixture of the earliest and most interesting examples of inter-war dwellings in Griffith, both detached and dual occupancy types, as well as more recent in-fill multi-unit developments. Dwelling materials include weatherboard, fibre-cement or face brick walls with mostly galvanised iron roofs for original dwellings and face brick and tiled roofs

for more recent in-fill developments. There is a mixture of front fencing including low brick, brick and steel, picket, galvanised wire and hedges. Vehicles are accommodated under side carports or in rear garages, accessed from the front or rear.

The projected future of this precinct is for it to be significantly increased in density to provide housing to meet the demand for high access accommodation, particularly for the elderly, while still preserving the heritage character of the area through maintaining existing setbacks, requiring rear only development and/or sensitive in-fill design where the existing dwellings have high heritage value. A medium density control is therefore appropriate.

It is considered that the proposal is consistent with the aspects of the precinct, particularly pertaining to the provision of access to medical facilities.

Development Control Plan No. 25: Public Notification of Development Applications (DCP 25)

Councils DCP 25 states that advertising and notification for state significant development is to be undertaken in accordance with the provisions of the *Environmental Planning & Assessment 1979* and the *Environmental Planning & Assessment regulation 2000*. The exhibition of the proposal has been discussed earlier in this report.

Development Contribution Plans:

Section 94A

In accordance with Section 94A of the Environmental Planning and Assessment Act 1979 and Council's Development Contribution Plan 2010, this development requires a payment of a contribution towards the cost of or the recoupment of the cost of the provision, extension or augmentation of public amenities, public services and infrastructure that will, or are likely to be, or that have been provided and are required to adequately serve the community. The following contribution plans adopted by Griffith City Council apply:

Section 94A Development Contributions Plan 2010:

The S94A levy to be charged is a percentage of the cost of the development which is proposed to be carried out. As the proposed cost of this development is greater than \$300 000, a one per cent (1%) levy is to be charged, as per the maximum specified by the EP& A Regulations.

A quantity surveyors report was completed for the proposal by Wilde & Woollard and estimated that the total costs of each stage would be:

- Stage 1 - \$4 452 000.00
- Stage 2 - \$11 423 000.00

As such, a S94A contribution will be payable prior to the lodgement of the Construction Certificate for each stage of the development.

Stage	Estimated cost	1% S94A payable
Stage 1	\$4 452 000.00	\$44 520.00
Stage 2	\$11 423 000.00	\$114 230.00

Section 64

The effect of section 64 of the Local Government Act 1993 is to give the functions of the Water Management Act, 2000 to Council in the same way it applies to a water supply authority. Section 306(2) of the Water Management Act 2000 enables a water supply authority to require the applicant to do either or both of the following:

- (a) *to pay a specified amount to the water supply authority by way of contribution towards the cost of such water management works as are specified in the notice, being existing works or projected works, or both,*
- (b) *to construct water management works to serve the development.*

In calculating an amount for the purposes of subsection (2)(a) Council has adopted Development Servicing Plans. The following DSPs adopted by Griffith City Council apply:

- Sewerage Development Servicing Plan No. 1: Griffith
- Water Development Servicing Plan No. 1: Griffith

A comparison of the required Section 64 payments has been compiled in the table below for the components of the hospital, consulting rooms and teaching and learning centre, along with a credit which the site holds for the previous use (aged-care facility). In 1977 a 30 bed nursing home was approved for the site, of which the site has a credit for the equivalent of 30 beds calculated at the 'nursing home' equivalent tenement. The submitted EA refers to a 58 bed facility previously in existence, however the approvals on file relate only to a 30 bed facility. The education facility has been calculated on 8 students at any one time utilising the facility.

To guide Council in determining the appropriate tenements for each use, Council's Water Directorate for determining Section 64 Equivalent Tenement Guidelines was used. The guidelines are based on state-wide data and local data for establishing standard equivalent tenements. An equivalent tenement or ET is the demand or loading that a development will have on infrastructure in terms of water consumption and sewerage discharge.

	Water ET	Sewer ET	Standard unit	Units	Water required	Sewer required
Nursing home	0.5 ET	0.75 ET	Per bed	30 beds	15 ET	22.5
Hospital	0.9 ET	1.4 ET	Per bed	40 beds	36 ET	56 ET
Education facility	0.015 ET	0.024ET	Per person	8 students	0.12 ET	0.19 ET
Medical Centre	0.40 ET	0.60 ET	Per room	3 rooms	1.2 ET	1.8 ET

Required hospital ET after nursing home credit

	Water required	Sewer required	Water required after credit	Sewer required after credit
Nursing Home	-15 ET	-22.5 ET		
Hospital	36 ET	56 ET	21 ET	33.5 ET

The 2011/2012 rate per tenement for water and sewer is:

- Water Supply Development Serving Plan No. 1 – Existing Griffith (infill), Bilbul, Collina, rest of Griffith = \$3602.00;
- Sewerage Development Servicing Plan No. 1 - Existing Griffith (infill), Collina, rest of Griffith = \$2080.00.

Monetary Contributions Chargeable

	Water required	Sewer required	Water	Sewer
Hospital	21 ET	33.5 ET	\$75 642.00	\$69 680.00
Education facility	0.12 ET	0.19 ET	\$432.24	\$395.20
Medical Centre	1.2 ET	1.8 ET	\$4322.40	\$3 744.00

Water and sewer contributions for the Teaching and Learning centre (education facility) will be chargeable at the commencement of Phase One. The costs for the hospital including the consulting rooms will be chargeable at the commencement of Phase Two.

Policy 750 Water - Volumetric Contributions

Policy Objective:

To require developers to make an appropriate contribution (either monetary or transfer of water allocation) so as to ensure Council maintains a satisfactory bulk water allocation for the community's use in the future.

Policy Statement:

To ensure that all new developments contribute a fair and reasonable amount to Council's bulk water allocation, developers are required to either transfer an

equivalent high security water allocation or make a monetary contribution to Council, based on the then market values, according to the following table.

Commercial/Industrial:

Minimum 1.0 ML (water meter size \leq 32mm). Plus an amount determined on the merits of each case.

Water allocation contributions may be required at both the subdivision and development stages for commercial and industrial developments. Any extra contribution at the development stage will be calculated and based upon the estimated water demand of the business or industry.

The proposal will require a combined total of 22.32 ET's for the development. An ET is equivalent to 0.7 ML. based on this, the development would require a water allocation of 15.62 ML (0.084 ML for Phase One and 15.61 ML for Phase Two).

Non-compliance issues

The proposal is not considered to have any non-compliance issues with the assessed environmental planning instruments, plans and guidelines.

BUILT FORM & HEIGHT

Bulk, Scale & Height

The proposed development will be both single and double storey in height. The teaching and learning centre and admin/ambulatory cluster located on the corner of Animoo Avenue and Warrambool Street will be double storey in height, with a height of 8.3 metres above natural ground level. The inpatients cluster located on Animoo Avenue will be single storey in height and will have a height of approximately 5 metres above natural ground level. The uppermost height of the overall building will be RL+150.25.

The existing buildings in the locality consist of mainly single storey residential dwellings along Animoo Avenue. The inpatient cluster facing this street is single storey in height and is considered to be sensitive and to the streetscape

Along Warrambool Street there are some double story structures including Griffith Base Hospital, St Patricks Primary School and the Sacred Heart Church. The proposal is not considered to be out of context in this location given the existing features of the streetscape.

The bulk of the proposal is considered to be sympathetic to the context of the locality.



Open space & Landscaping

The development proposes landscaping to the car parking area on Animoo Avenue, landscaping along the front of the inpatient cluster, three courtyards, a healing garden, an outdoor waiting area, and a landscaped area at the rear of the procedural cluster.

The landscaping will incorporate artificial turf, garden beds, pebbles, exposed aggregate paving, broom finish concrete, irrigated grass, bench seating, feature sculptures and trees. Species to be included in the landscaping have not been specified in the landscaping plans. As such, a landscaping plan including a schedule of species shall be required prior to construction commencing if the application is approved. It will also be conditioned (should the application be approved) that interim landscaping measures are implemented for the area to be used for Phase Two,

Design

Ambulatory Cluster and Teaching & Learning Centre:

The main entrance to the facility is via this cluster. The applicant suggests that the structure has been designed to have a corporate appearance to reflect its functionality and has been designed to 'announce the principal address of the hospital'. The building was designed to be oriented towards Warrambool Street to draw on the non-residential character of this area.

Inpatient Cluster:

The inpatient cluster has been designed as a single story building to fit within the residential character of Animoo Avenue which consists of single story dwellings. Due to the need for privacy and quiet, the inpatient suites have been oriented towards Animoo Avenue. The procedural cluster and the support cluster are available to staff only (apart from patients undergoing a procedure) and are not visible from the street.

It's considered that the design of the facility is considerate to the existing characteristics and features of Animoo Avenue and Warrambool Street and is suitable for the site and locality and is functional for its intended purpose.

Setbacks

In terms of setbacks, the proposal will utilise part of the road reserve along Animoo Avenue for the onsite car parking areas. The Teaching and Learning Centre will be situated approximately 8 metres from the kerb to Warrambool Street at its closest point, or 5 metres to the property boundary. The inpatient cluster will be located approximately 18 metres to the kerb at its closest point. Setbacks from the shared boundary with the hospital vary from one to four metres.

The setbacks allow for the incorporation of landscaping, courtyards, onsite parking and footpaths and are similar to the setbacks of the former aged care facility building which previously occupied the site.

Materials & Finish

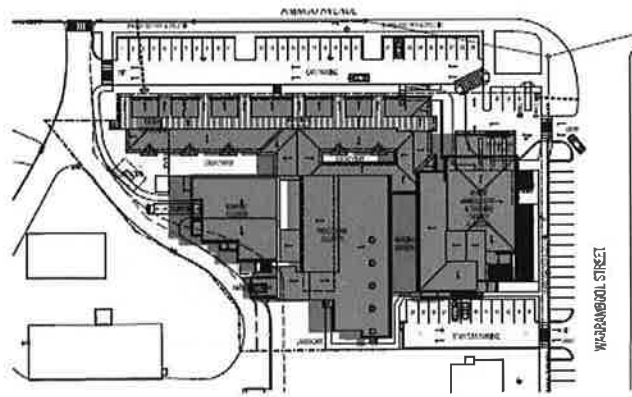
The external materials and finishes of the development are to consist of: zinc fascia and cladding, aluminium framed windows, colourbond metal roof, brickwork, FC sheet cladding, zinc cladding, concrete bench and timber cladding, exposed concrete fire stairs, aluminium louvers to the plant rooms, timber screens and roller doors to the loading docks.

A schedule of external finishes has not been provided. however the applicant suggests that the colour pallet will be inspired by Griffith and surrounds, and will use natural colours. The intent of the material selection is to unify the different clusters by using natural coloured materials and textures with low maintenance, durable materials.

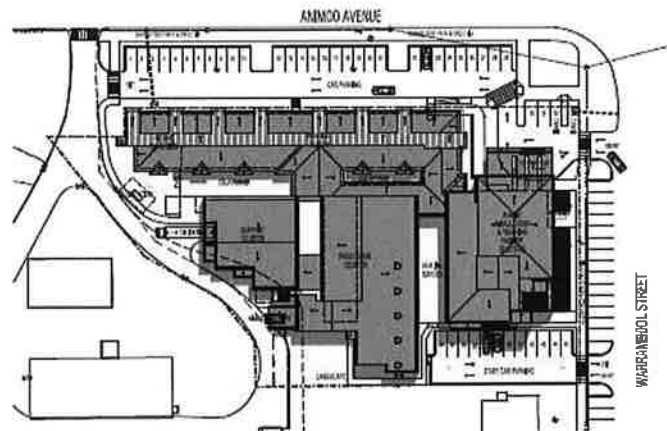
ENVIRONMENTAL AND RESIDENTIAL AMENITY

Overshadowing & Solar Access

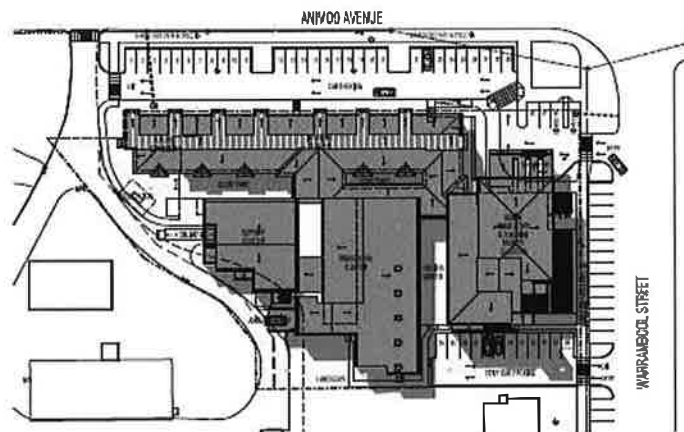
Shadow diagrams have been provided for the periods of 9am, 12pm and 3pm on the 21st of March, June, September and December. The shadow diagrams indicate that the majority of overshadowing will be contained on site, with the exception of the June period which will cast shadows onto the adjoining access road on the public hospital site. A small amount of shadowing will occur during the September period where some shadowing will be cast onto the adjoining property on the public hospital grounds, however this will not affect any existing buildings on the site.



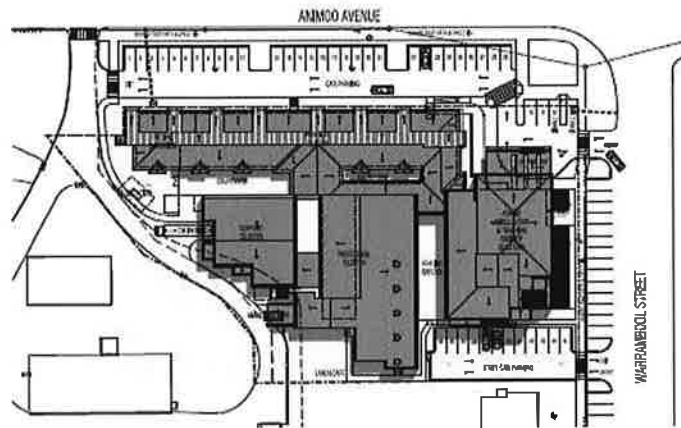
SEPTEMBER 21st - 9 am



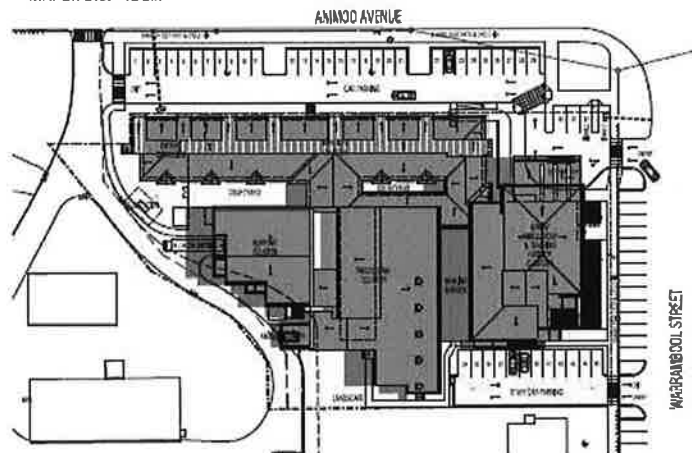
SEPTEMBER 21st - 12 pm



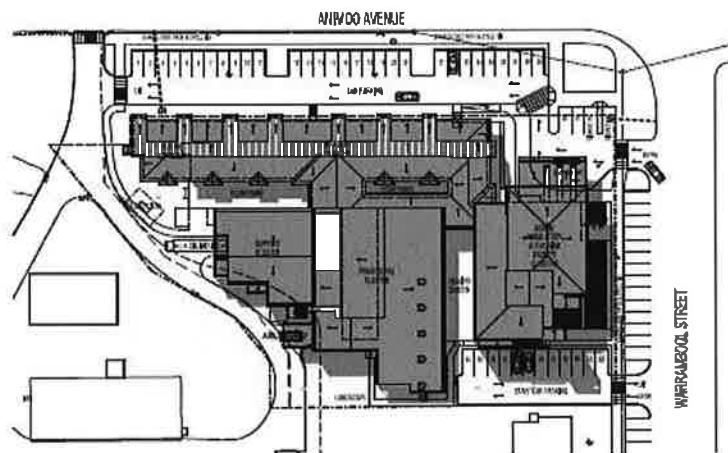
SEPTEMBER 21st - 3 pm



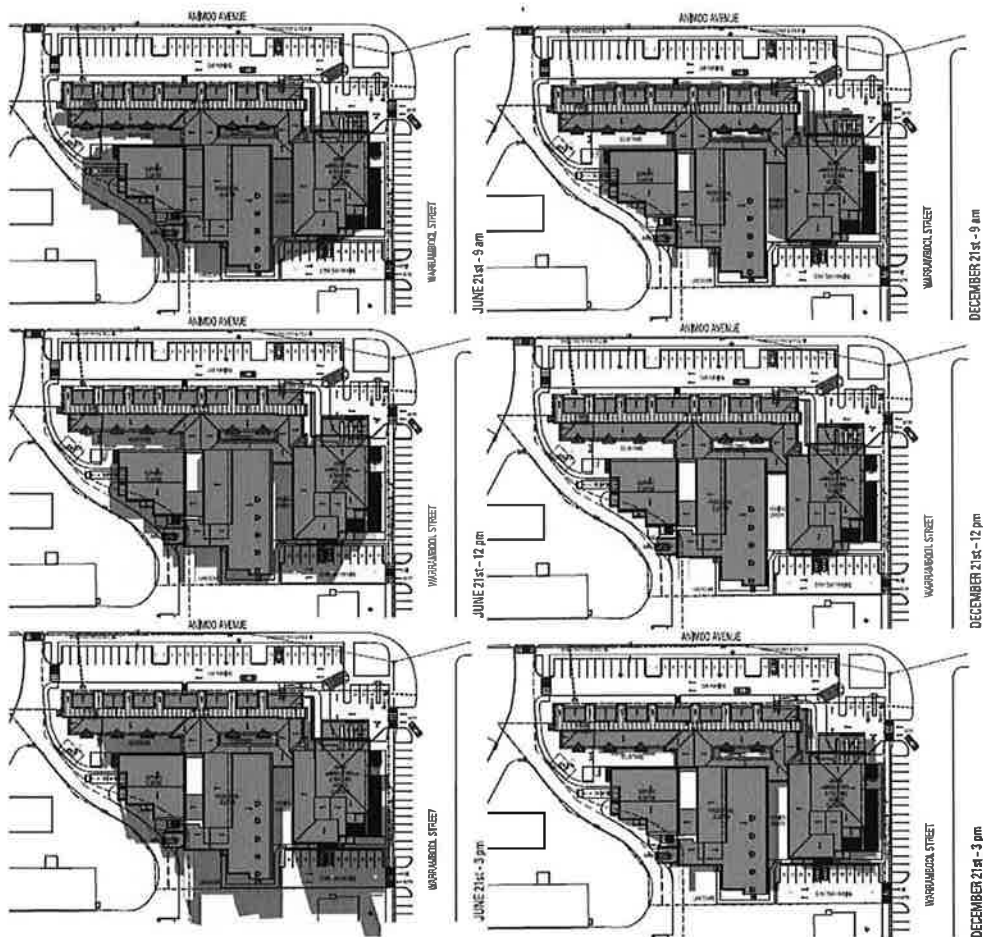
MARCH 21st - 12 am



MARCH 21st - 9 am



MARCH 21st - 3 pm



Privacy

It is considered that the development would not cause any significance loss of privacy to adjoining properties or existing buildings on the public hospital site. The teaching and learning centre and admin/ambulatory cluster located on the corner of Warrambool Street and Animoo Avenue will overlook St Patricks Primary School sports field and thus no loss of privacy would occur. The inpatient cluster will have direct views from these rooms to the car park. It is not considered that privacy of the dwellings adjoining the site on Animoo Avenue would have their privacy compromised in any way. It is considered that the impacts of overshadowing and loss of privacy on adjoining properties would not be significant.

The following diagram and photos indicate the possible visual impact as described

NEIGHBOURING PROPERTIES ACROSS THE STREET TO THE NORTH BOUNDARY AT ANIMO AVENUE



**Photos and Sketch Plan
provided by Mode Design.**

Noise & Vibration

Construction

Noise generated during construction is estimated to be general noise associated with building works. All building, excavation and demolition work will be restricted to be carried out between 7:00 am and 6:00 pm Monday to Saturday with no work to be undertaken on Sundays or Public Holidays. A variation to these times may be permitted on submission of a written request to Council indicating the date and time of the proposed work.

Operational

Noise associated with the operation and running of the facility is mainly expected to be generated by plant and equipment. These items are proposed to be located on the south-eastern portion of the site behind the hospital building and will be screened from view of the residences on Animoo Avenue. The principal air handling unit will be fully enclosed and located over the procedural cluster. Any openings required are stated to be acoustically attenuated, eliminating noise impact on surrounding properties. Plant equipment associated with the teaching component will be enclosed on the second story in an acoustic enclosure.

STAGING

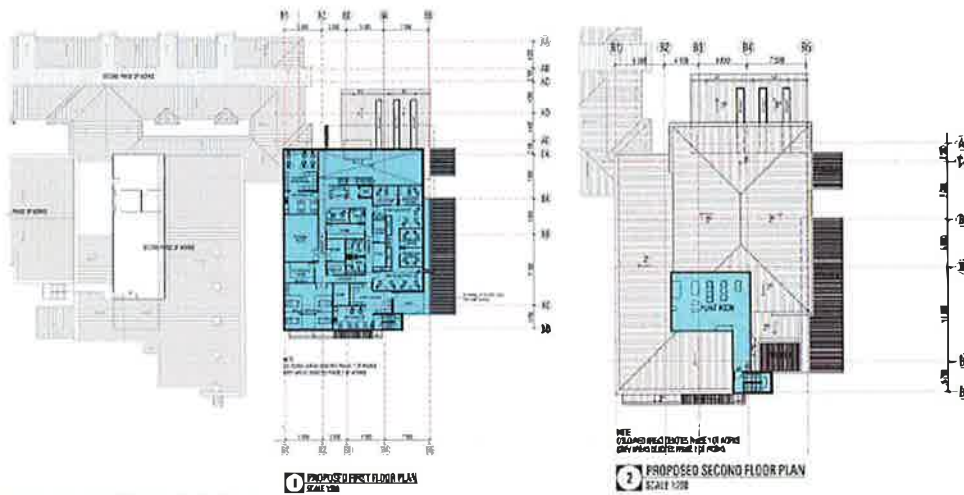
As discussed previously, the development is to be constructed in two stages. Stage One (Phase One) will include the construction of the Murrumbidgee Clinical Teaching and Learning Centre which. The teaching and learning centre will be situated partially on the ground floor and will occupy the first floor level above the admin/ambulatory cluster.

Stage One

Phase One of the development of the Murrumbidgee Clinical Teaching and Learning Centre will include:

- Tutorial room/small lecture theatre;
- A student resource centre;
- Eighteen (18) onsite car parking spaces (twelve staff spaces and six (6) public spaces);
- Drop off bay;
- Interview rooms;
- Four practice consulting rooms;
- A meeting room;
- A reception area; and
- Office space and amenities;
- Construction of a second story for an enclosed room air-conditioning plant.

The ground floor level component to be used as the admin/ambulatory cluster will be built as a shell for Phase One, and fitted out as part of Phase Two.



Proposed Phase 1



Space to be fitted out
for clinical teaching
facility Ground Floor

Stage Two

Phase Two will include the construction of the remainder of the proposal including:

- The fit out of the admin/ambulatory cluster, comprising reception, consulting rooms, interview room, meeting rooms;
- Outreach support room, chapel, administration support space, coffee shop and gift store/florist;
- Inpatient cluster including twenty inpatient one-bed rooms each with ensuite, patient lounges;
- Staff stations and support space;
- Procedural cluster comprising two operating/procedure rooms, recovery space and support space;
- Ambulance bay;
- Loading/deliveries dock;
- Waste containment areas;
- Storage and cleaning equipment space;
- External landscaping including courtyards and a healing garden;
- Hospital support cluster including kitchen, stores, staff change facilities;
- Construction of a share pedestrian/bicycle footpath along the frontage at Animoo Avenue;
- Car parking; and
- A physical link to Griffith Base Hospital for patient, public and staff traffic flow.

Construction of Phase Two will commence once funds are secured.



TRANSPORT & ACCESSIBILITY IMPACTS

Existing road network

The development is located at the intersection of Animoo Avenue and Warrambool Street. Animoo Avenue is classified as a "Collector road" as specified on *Council's Road Hierarchy Plan* and caters for a moderate amount of traffic as it provides a link from the surrounding residential areas to the neighbouring school and hospital district. Animoo Avenue, is a two-lane/two-way bitumen sealed road, approximately twelve (12) metres wide with kerb and gutter constructed along both sides of the road.

Warrambool Street is classified as a "Residential Access road" as specified on *Council's Road Hierarchy Plan* and caters for a moderate amount of traffic as it provides a link from the surrounding residential areas to the neighbouring school and hospital district. Warrambool Street, is a two-lane/two-way bitumen sealed road, approximately thirteen (13) metres wide with kerb and gutter constructed along both sides of the road.

Type of traffic to the site

The *Environmental Assessment* submitted that the type of vehicles to access the proposed development will range from standard passenger vehicles (throughout the car parking areas) to medium rigid vehicles (loading dock).

Proposed driveways

Two (2) additional driveways have been proposed to access the development. The proposed southern most driveway is to be located off Warrambool Street to access the staff car parking area. This driveway is proposed to provide two-way vehicular access to the staff car parking area. The proposed northern most driveway is to be an 'Entry Only' driveway and is to be located off Warrambool Street. This driveway will access the drop off bay at the main entrance of the Private Hospital and provide access to the proposed public car-park to be located on Council's road reserve north of the subject site.

"Entry Only" signage is to be installed within the property boundary of the northern most driveway to be constructed off Warrambool Street. To ensure a one-way flow of traffic through the proposed public car parking area, a "No Entry" sign is to be installed in the area separating the public car parking area from the drop off bay. This is to ensure vehicles are not impeded in the drop off bay and that vehicles do not exit the public car parking area via Warrambool Street. A "No Entry" sign is to be installed in the public car parking area exit point onto the existing internal access road (located off Animoo Avenue). This is to ensure vehicles do not access the public car parking area via Animoo Avenue.

Increase in traffic to the site

A Traffic and Parking Assessment Report was completed by Varga Traffic Planning Pty Ltd. As part of the Traffic and Parking Assessment Report, calculations have been conducted for the estimated traffic generation likely to be associated with the proposed development utilising formulae from the *RMS' Guide to Traffic Generating Developments*. Varga Traffic Planning Pty Ltd has

calculated that the proposed development will generate an average of 25 vehicle trips per hour. Based on the previously existing Aged Care Facility, Varga Traffic Planning Pty Ltd has calculated from the above formula that between 6-12 peak hour vehicle trips would have been generated by the former use of the subject site. As such, the report has calculated that the potential Net Increase of traffic generated by the proposed development would be 19 vph.

From the above information it can be seen that the estimated increase in traffic generation associated with the proposed development is not considered to impact on the surrounding road network where the efficiency and/or function of the road network are compromised.

Loading/unloading

The *Environmental Assessment* submitted specifies that a designated loading/unloading dock is to be provided as part of the "support cluster" building and is shown on the submitted plans.

As mentioned previously within this report, an existing driveway is located off Animoo Avenue which services the subject allotment (Lot 1 DP 1043580) and the neighbouring allotment (Lot 2 DP 1043580). As vehicles are required to cross property boundaries for the existing use of Griffith Base Hospital located on Lot 2 DP 1043580, and as part of the proposed use for the Private Hospital development, Lot 1 DP 1043580, an easement is to be created where vehicles cross property boundaries. The easement is to be created in accordance with Section 88B of the Conveyancing Act for vehicular access prior to the lodgement of an Occupation Certificate.

Car parking spaces

The *Environmental Assessment* specifies that the development is to accommodate 46 car-parking spaces onsite; which includes twelve (12) staff car-parking spaces and two (2) disabled car-parking spaces. Council's Development Control Plan No. 20 (2011) specifies that the dimensions for car parking spaces are to be 2.6m wide x 5.5m long. This slightly exceeds the Australian Standard and will be conditioned accordingly.

Turning templates in accordance with AS 2890.1:2004 "Off-street car parking" have been utilised to ensure that the manoeuvrability throughout the site for standard passenger vehicles entering and exiting the site are accommodated. As specified in AS 2890:2004 all vehicles are to enter and exit the site in a forward direction. Direction Arrows are to be installed within the car parking areas in accordance with AS 2890.1:2004 to ensure a one-way movement of traffic throughout the site. A blind aisle extension and manoeuvring area is to be constructed at the western end of the staff car park to comply with the requirements outlined in AS 2890.1:2004 Clause 2.4.2. The public car parking area to be constructed as part of the development is proposed to be located on Council's road reserve. As such, the applicant is to enter into a lease agreement with Council for the land to be utilised for the car parking area.

The *Environmental Assessment* specifies that the existing 90° parking spaces along Warrambool Avenue and the existing parallel parking spaces along Animoo Avenue are to be utilised to service the development. Traffic counts were

conducted for the car parking spaces along Warrambool Avenue and Animoo Avenue during peak periods to determine the use of these spaces. The results of the counts indicate that a surplus of vacant car parking spaces are available along Warrambool Avenue and Animoo Avenue during peak times which can be utilised as overflow car parking spaces for the proposed Private Hospital. The existing car parking spaces located along Warrambool Avenue and Animoo Avenue in their current arrangement are satisfactory to Council. However these spaces will not be for the sole use of the hospital.

Pedestrians

As part of the Private Hospital development a 2.5 metre wide, concrete pedestrian footpath is to be constructed along Animoo Avenue and Warrambool Street for the full frontage of the development. The pedestrian footpaths are to be constructed in accordance with *Council's Engineering Guidelines – Subdivisions and Development Standards December 2008*. The proposed painted pedestrian crossing at the northern most entrance off Warrambool Street is appropriate as a pedestrian crossing in this location would result in vehicles stacking onto Warrambool Street waiting for pedestrians to cross the access point. A painted pedestrian crossing is to be installed onsite as per the submitted drawings linking the proposed pedestrian footpaths along Animoo Avenue and Warrambool Street to the Private Hospital.

ECOLOGICALLY SUSTAINABLE DEVELOPMENT (ESD)

The EA has addressed ESD and states that the proposed facility has been designed to minimise the environmental impact of the buildings, improve patient outcomes, staff productivity and aims to achieve energy and water efficiency. The EA states that a number of strategies have been undertaken to achieve this, such as;

- a reduction in the quantity of glazing on the northern facades to avoid excessive heat drain in the building to minimise the use of air-conditioning to cooler rooms;
- maximise the use of natural light to reduce the use of artificial lighting;
- use of energy efficient light fittings that meet the energy efficiency requirements of the Building Code of Australia, including motion detector sensors to allow lights to be automatically turned off when not in use;
- use of renewable energy systems including some solar hot water heating;
- maximise natural ventilation, increasing thermal comfort, improving air quality;
- use of recycled, renewable and environmentally friendly materials such as sustainable timber, water based paints and recycled concrete additives;
- use of recycled water for toilets and landscape irrigation;
- use of gas hot water heaters;
- use of courtyards to create places of respite for staff and patients;
- increased insulation to external walls and roofs;
- individual climate and ventilation central to inpatients rooms.

It's considered that the development has considered ESD into the design, construction and operation of the facility.

CONTAMINATION

As previously discussed, the site has been used as an aged care facility since the 1970's. The aged care facility has been unused for a number of years since relocating to another site within Griffith. The site was subsequently sold and an application was lodged with Griffith City Council in 2011 for the demolition of the age care facility.

The building is believed to have contained asbestos, of which was removed from the site as part of the demolition. A condition of the consent for the demolition (DA 50/2011) was that all hazardous materials and waste be handled and removed in accordance with NSW Workcover requirements and relevant state legislation.

The EA states that a contamination certificate was to be issued on completion of all demolition works as part of a purchase agreement by Griffith City Council. Discussions between the purchasers and vendors (after the EA was complied) determined that the contamination report was not necessary based on the previous use of the site.

Table One of Managing Land Contamination: Planning Guidelines SEPP 55 – Remediation of Land does not identify aged care facilities as being an activity that could result in contamination. The table does identify asbestos production and disposal, however asbestos found in building materials of the aged care facility were removed from the site as part of the demolition.

The site is located within a precinct which is part of the original Walter Burley Griffin design, identifying the site as part of the original hospital precinct. The site and adjoining hospital site have been used for medical and health related purposes since the early 1930's. In the 1970's the aged care facility was constructed at the subject site (Pioneers Lodge) and was used as such up until 2008 when the new Pioneers Lodge aged care facility (on Sidlow Road Griffith) was completed. The demolition of the former aged care facility commenced in late 2011 and was finalised in early 2012. The site is currently vacant and fenced off from public access.

Given these previous uses, it is considered that the site is not contaminated nor does it require any remediation works prior to construction of the hospital.

HERITAGE

The subject site is not a state or locally heritage listed item, nor is the site within a heritage conservation area or near to an item of heritage significance. As previously discussed, the Sacred Heart Catholic Church located at 5 – 39 Warrambool Street is a heritage listed item. The subject site is located approximately 160 metres from the heritage listed item. The heritage assessment included in the EA suggests that the proposed development would not have any detrimental impact on the heritage significance of the Sacred Heart Catholic Church and associated buildings and that there is no objection to the development on the grounds of heritage impact.

As such, the proposal is not identified as having an impact on any items of heritage significance in the area.

ABORIGINAL HERITAGE

The subject site has not been identified in Griffith Local Environmental Plan 2002 as being a heritage item or as a site of known or potential Aboriginal heritage significance.

The heritage assessment included in the EA undertook a review of the Aboriginal heritage Information Management System Database in July 2011 for a distance of 200 metres surrounding the site. The search revealed that there are no listed Aboriginal sites or places recorded or declared near the subject site. Furthermore, a review of the *Griffith Heritage Study: A Community-based Heritage Study for Griffith City Council and NSW Heritage Office 2004* found that there was no evidence identifying the site as containing known or potential Aboriginal heritage significance.

The heritage assessment included in the EA states that it is reasonable to conclude that there are no known Aboriginal objects or a low probability of objects occurring in the area of the proposed activity and that the development may proceed with caution.

An advisory condition will be included as a draft condition of consent advising of responsibility to comply with the Due Diligence Code of Practice for the Protection of Aboriginal Objects in New South Wales should any items or objects be discovered during construction, and a duty to stop works immediately and notify the NSW Office of Environment and Heritage.

DRAINAGE

The submitted Environmental Assessment states that the development proposes to incorporate water sensitive urban design measures by utilising some roof discharge for landscaping. Excess runoff is to be diverted to the car parking area which is to be used as a detention basin.

The subject development is located within the Ortella Street catchment as identified in Council's Onsite Detention Policy. On-Site Detention is to be implemented for the entire development to ensure that the maximum discharge from the developed site does not exceed 65L/s/ha. Discharge of stormwater for the site is to be directed to Council's street system along Animoo Avenue and/or Warrambool Street.

The design of the onsite detention system is to comply with the requirements outlined in *Council's Engineering Guidelines - Subdivisions and Development Standards December 2008*. Details of the development's drainage system will be required to be submitted to Council along with hydraulic calculations.

The existing stormwater pipes which are connected to Animoo Avenue and Warrambool Street from the subject site are damaged. The damaged stormwater pipes are to be repaired if they are utilised as part of the proposed stormwater detention system. If the existing discharge pipes are not to be utilised, they are to be removed and reinstated with kerb and gutter at the applicant's expense. Suitably approved stormwater pipe kerb adapters are to be installed in the kerb and gutter for all stormwater pipes to be connected to Council's kerb and gutter system.

WASTE & HAZARDS

Construction

The EA identifies that a waste management plan for during construction will be developed and submitted prior to construction works commencing. The applicant suggests the plan will entail:

- Efforts to minimise waste onsite by avoiding over-estimation of purchasing requirements, minimising packaging materials, and buying environmentally approved and recycled content products;
- Procedures for the collection and sorting of recyclable construction materials;
- The type and quantity of materials that are to be re-used or recycled;
- Provision of containers for recyclable materials including cardboard, glass, metal, and plastic; and green waste;
- The re-use of timber, glass and other materials;
- The recycling of asphalt, metal, bricks, tiles, masonry, concrete, plasterboard, plastic, batteries, cardboard, carpet and other materials;
- Provisions for collection of daily rubbish from workers
- Procedures for removal of waste (materials that cannot be reused or recycled) from the site;
- Procedures for removal of hazardous or dangerous materials from the site;
- Buy environmentally approved and recycled content products;
- Removal of hazardous or dangerous materials from the site will be in accordance with State and Federal legislation;
- Litter and debris 'trapped' against site fencing will be regularly cleaned; and
- Burning off will not be carried out on site.

Operational

The EA has identified operational waste (also hazardous) generated from the hospital operations to consist of:

- Hospital Facility Grade (General) Waste: Any waste, which is not capable of being composted, recycled, reprocessed or re-used. Body fluids contained within a pad, bluey, tissue, dressing etc, are classified as Solid Waste. Other forms of general waste include; food sources, paper hand towels, gloves.
- Organic Waste: Waste, which is capable of being composted includes food products, grease traps, flowers.
- Recyclables items: Composed of materials or components, capable of being remanufactured or re-used. This includes paper, cardboard, wood, glass, metal, endomechanical devices, scissors and barrier materials.
- Private & Confidential Documents: Papers containing sensitive information. These items must be disposed of by a licence operator and destruction must be evidenced by a certificate of destruction.
- Pharmaceutical Waste: Consists of pharmaceutical or other chemical substances (including poisons), as specified by the Poisons & Therapeutic Goods Act 1996. This waste also includes expired or discarded pharmaceutical.
- Cytotoxic Waste: Materials contaminated with residues containing material toxic to cells principally through action on cell reproduction. This also includes any item or material associated with or in the manufacture of cytotoxics.
- Clinical Waste: Refers to any waste that has the potential to cause sharps injury or infection to blood borne viruses. When packaged and disposed of appropriately there is no public health significance. Clinical Waste includes

Sharps, Human tissue (excluding hair, nails and teeth), Laboratory specimens and Animal tissue from medical research. Blood and Body Fluids in their liquid state (ie held in containers) are known as Liquid Waste and all liquid blood and body fluids are clinical waste.

- Chemical Waste refers to waste included in the Dangerous Goods Regulations and Poisons & Therapeutic Act which demand special disposal requirements; this includes mercury, cyanide, formalin and glutaraldehyde.
- Radioactive Waste is material contaminated with radioactive substances which arises from medical research or treatment. It may be in solid or gaseous form and include body fluids of a patient who has been exposed to radiation. Radioactive waste must be lead shielded and allow to decay to a safe level as set by the Radiation Control Regulation 1993 before disposal.

St Vincent's and Mater Health have a Waste Management Policy of which directs employees to correctly dispose of wastes in accordance with the Protection of the Environment Operations Act 1997 and NSW Health Directives 2005 132 and 2005 247.

The St Vincent's & Mater Sydney Waste Management Policy states:

- All waste materials at St Vincent's and Mater Hospitals are to be disposed of in accordance with the standards established by the NSW Department of Health, Occupational Health and Safety Legislation, the Environmental Protection Authority and the Hospital's Occupational Health & Safety, Infection Control and Waste Avoidance and Resource Recovery Committees.
- All waste is to be appropriately segregated and disposed of at the point of waste generation, protecting the health and safety of all employees involved in the handling, storage and removal of waste.
- Infection Control measures must be adhered to prevent cross infection from waste to staff and patients.
- Failure to comply with any part of this Policy by staff member will result in disciplinary actions.

Reuse & Recycling

- All staff are to comply with the Hospital's recycling program
- Recycling of items is arranged through the Environmental Services/Housekeeping Department at all of the hospitals;
- The following items are being recycled at St Vincent's and Mater Hospitals: endomechanical devices, scissors, metal, non-medical glass, paper, cardboard, plastic, along with batteries, vegetable oil (Kitchen only) and toner cartridges.
- Items containing pharmaceutical material must not be recycled, they are to be disposed of in clinical waste.

The submitted EA also outlines identification and disposal vessels, waste handling procedures including clinical waste and sharps and waste storage procedures. A final waste management plan will be required as a condition of consent.

The table below lists waste categories and disposal methods:

Waste type	Disposal method
General waste	Landfill.
Clinical waste	Incinerated or validated steam sterilisation, then supervised landfill.
Sharps	Incineration. Bleach washed by approved contractor.
Non-sharps	Incinerated or validated steam sterilisation, then supervised landfill.
Liquid	Sewer.
Cytotoxic	Licensed contractor (incineration: 110°C).
Radioactive	Licensed contractor. Monitor before disposal by incineration or supervised landfill (dilute isotopes may be disposed of via sewerage).
Paper	Recycling.
co-mingled recycling	Recycling.

As part of Council's requirements, the development will need to enter into a Liquid Trade Waste Agreement with Council and implement any liquid trade waste requirements.

Hazards

The EA has identified potential hazards as the storage, use and management of hazardous materials and waste. The proposed hospital, once operation will be required to adopt the current Hazardous Substances Management Policy developed by St Vincent's Private Hospital. The Policy is stated to have been created in accordance relevant provisions of the NSW Occupational Health & Safety Act 2000, NSW Occupational Health & Safety Regulation 2001, the National Code of Practice for the control of scheduled carcinogenic substances, NSW Health guidelines for safe use of hazardous substances and dangerous goods as well as relevant Australian Standards and St Vincent's Hospital and the Mater Dangerous Goods Management Policy.

PUBLIC DOMAIN

The proposal is considered to positively impact on the public domain by providing improved medical services to residents in the locality and surrounding towns. The EA has outlined ways in which the proposal will benefit the public domain:

- Creating a Medical Training facility beneficial to members of the local community planning to further their education in the Health Services;
- Creating short and long term employment from the initial construction phase to the long term operation of the medical facility;
- Establishing specialised medical services currently not available in Griffith;
- Strengthening investment in Griffith in a non water based industry prompting sustainable development by diversifying the local economy; and
- Providing specialised medical treatment assessable to outer regional areas as part of overall Government Health improvement initiatives.

Furthermore, a lack of interest in the proposal by means of any objections to the development during the exhibition period shows that the community are in favour of having such a facility accessible.

OPERATIONAL MANAGEMENT

The EA has addressed the following operational issues:

- Noise from plant and equipment;
- Radiation;
- Chemical and biological hazards;
- Emergency and evacuations procedures; and
- Lighting and signage.

Noise from plant and equipment

The EA has identified the potential for noise to be generated by plant and equipment use in the daily running's of the hospital. The development proposes to locate these items on the southern portion of the site where they will be screened from residential properties by the proposed hospital.

The principle air handling plant will be housed in a fully enclosed plant room located above the procedure rooms. The secondary plant for the teaching and learning centre will be located on the second level of the admin/ambulatory cluster.

Radiation

The hospital will not offer medical imaging or nuclear medicine services, and anticipates that there will not be any radiation management issues at the hospital.

Chemical and Biological Hazards

As previously discussed, the hospital will be required to adopt and adapt the St Vincent's Hospital Hazardous Substances Management Policy.

Emergency and Evacuations Procedures

The facility proposes to adopt and adapt the St Vincent's Emergency Plan.

Lighting and Signage

The development will incorporate external lighting to the ground plain (rather than vertical) to provide lighting for safety, without generating unwanted glare and light pollution to the adjoining residential properties.

Way finding signage will be installed throughout the car parking areas to guide visitors and staff through the site. Building identification signage is proposed, however details of such have not been provided. A separate application may need to be applied for the signage.

UTILITIES

Water

The EA does not mention any proposed changes to the existing water connection for the subject site to Council's potable water main. As part of the previous

development located on the subject site (aged care facility) the potable water connection was through the neighbouring Griffith Base Hospital. Council have recently amended the connection of Council's potable water service to the Griffith Base Hospital and subject site to allow for separate connections. As such, the subject site has access to Council's potable water system via the 150mm diameter potable water main along Animoo Avenue and/or via the 100mm diameter potable water main along Warrambool Street.

Council's records indicate a total of four (4) water meters are connected to the subject site. The *Environmental Assessment* does not indicate whether the existing water meters connected to the subject site are to be altered as part of this development. Due to the previous use being similar in water usage requirements, Council's existing water main infrastructure can supply the demand required for the development.

Sewerage

A referral has been received from Council's Water & Sewer Department for the most viable options of sewer connection for the proposed development. Option 1 involves the applicant constructing a new sewer main from the development to the Council owned sewer manhole along Wyangan Avenue. Option 2 is that the applicant constructs a new sewer main from the development to the Council owned sewer manhole along Animoo Avenue. Reinstatement of the connection to the internal sewer line from the proposed development to the Griffith Base Hospital internal sewer system has been investigated by Council's Water & Sewer Department and due to the poor condition of the line, the line not being to Council's standard, and the numerous easements that would be required to be created, connection to this infrastructure is not recommended. Application is to be made to Council's Sewer Department for extension of Council's sewer main to the subject allotment.

Electricity

The applicant is to make their own arrangements for the connection to this service. Written confirmation from the service provider is to be submitted to Council prior to the lodgement of a Construction Certificate application to ensure the capacity of the service can accommodate the proposed development.

Gas

The applicant is to make their own arrangements for the connection to this service. Written confirmation from the service provider is to be submitted to Council prior to the lodgement of a Construction Certificate application to ensure the capacity of the service can accommodate the proposed development.

Telecommunications

The applicant is to make their own arrangements for the connection to this service. Written confirmation from the service provider is to be submitted to Council prior to the lodgement of a Construction Certificate application to ensure the capacity of the service can accommodate the proposed development.

STATEMENT OF COMMITMENTS

The submitted EA includes an extensive list of measures relating to environmental management and mitigation measures for during construction of the stages, such as prior to issuing of the construction certificate, prior to the commencement of building works, during construction, prior to occupation and ongoing matters. The statement of commitments are deemed satisfactory.