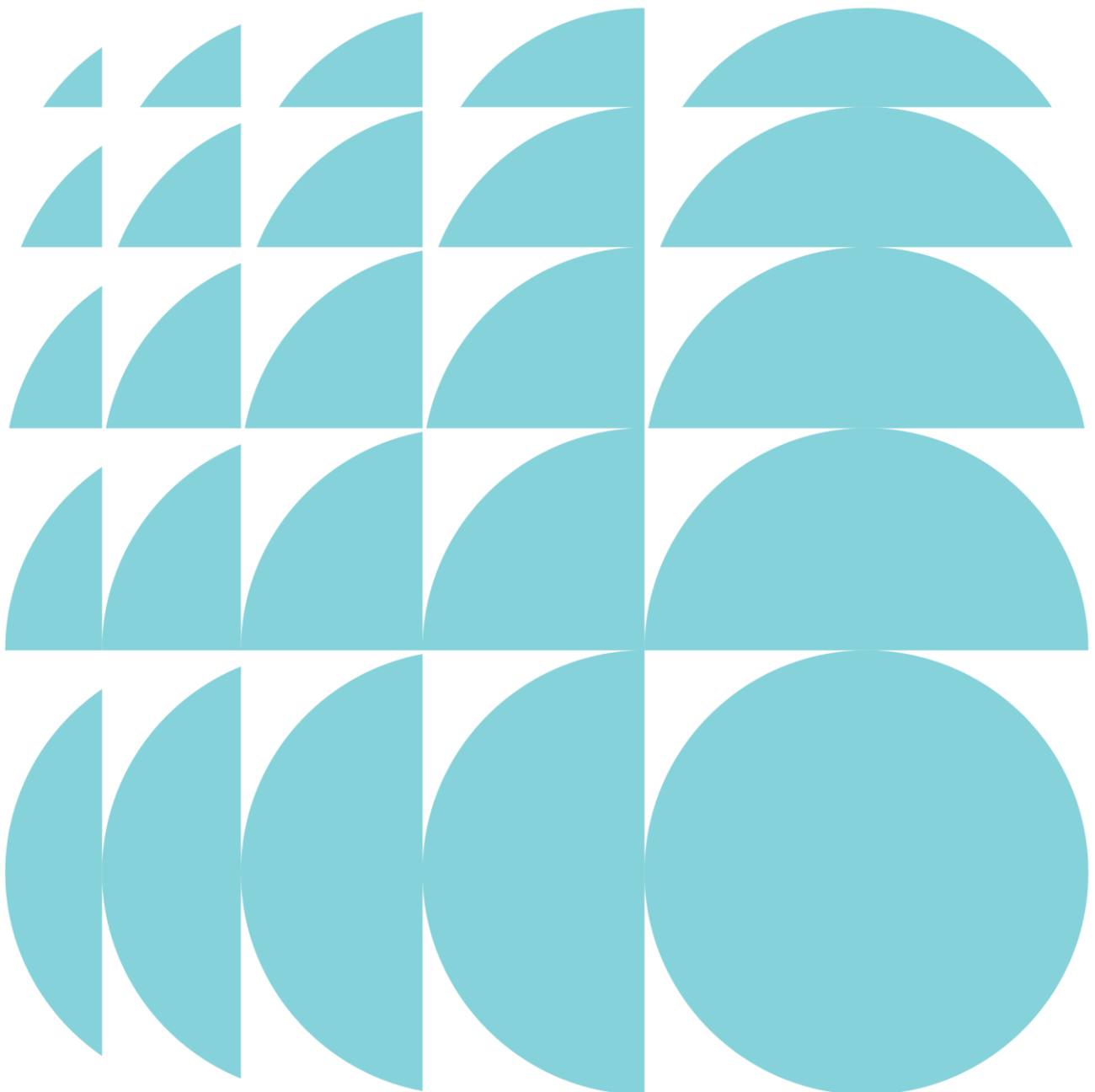


The Sutherland Hospital Operating Theatre
Upgrade Project

Cnr Kingsway & Kareena Rd, Caringbah, NSW

Prepared for NSW Health Infrastructure

11 February 2021 | 2200117



CONTACT

Allison Heller Director aheller@ethosurban.com

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This document has been prepared by:

This document has been reviewed by:



Mari Jaervis/Lucy Fokkema

11.2.2021

Allison Heller

11.2.2021

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VERSION NO.	DATE OF ISSUE	REVISION BY	APPROVED BY
2	11.2.2021	LF	AH

Ethos Urban Pty Ltd
ABN 13 615 087 931.
www.ethosurban.com
173 Sussex Street, Sydney
NSW 2000 t 61 2 9956 6952

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1.0 Introduction

1.1 Overview

This Social Impact Assessment report supports a State Significant Development Application (SSDA) for the proposed Sutherland Hospital Operating Theatre Upgrade Project (SSD-11099584) at the corner of the Kingsway and Kareena Road, Caringbah NSW. The applicant is Health Administration Corporation, on behalf of NSW Health Infrastructure.

The purpose of this report is to analyse the potential social impacts that may arise from the development, having regard to social trends and issues affecting the local and broader surrounding areas.

This report addresses the requirement for a Social Impact Assessment (SIA) specified in the Department of Planning, Industry and Environment's Secretary's Environmental Assessment Requirements (SEARs) for the project – as set out in **Section 1.2** below. It follows the principles set out in the draft *Social Impact Assessment Guideline for state significant projects* (NSW DPIE 2020) and covers the Social Impact Evaluation requirement of the Sutherland Shire Development Control Plan 2015.

Consideration of the Sutherland Shire Council's Social Impact Evaluation requirements is not required by the SEARs, but has been included as a means of providing a comprehensive assessment of social impacts.

This report includes the following components:

- Project summary and site context
- Baseline analysis of the designated area of social influence of the development, including current and forecast population profile, population health profile, and existing social infrastructure networks
- Strategic policy context, including relevant state and local government drivers
- Social issues and trends relevant to the proposed development
- Community perspectives of relevance to the proposed development
- Predicted social impacts of the proposed development at this location, along with recommended mitigation and enhancement measures.

A suggested social impact monitoring and measurement plan has also been provided – as per the NSW DPIE Draft SIA Guideline 2020.

1.2 Assessment scope and specification – SEARs

The Department of Planning, Industry and Environment issued Secretary's Environmental Assessment Requirements (SEARs) to the applicant on 10 December 2020 for the preparation of an Environmental Impact Statement for the proposed development. The SEARs outlines the following requirements (see **Table 1**).

Table 1 SEARs specifications and report references

SEARs	Where addressed in this report
10. Social impacts	
<ul style="list-style-type: none"> • Provide a Social Impact Assessment prepared in accordance with the draft Social Impact Assessment Guideline 2020. 	Section 8.0

1.3 Background

1.3.1 The Sutherland Hospital

The Sutherland Hospital is a large 375-bed metropolitan hospital in the Sutherland Shire in Sydney, and part of the South East Sydney Local Health District.

The Sutherland Hospital currently has 5 operating theatres and 1 endoscopy procedure room. The hospital provides a wide range of surgical specialties and is a Centre of Excellence for:

- Gastroenterology and complex endoscopic interventions
- Orthopaedics and Joint Replacement, performing most of the elective orthopaedic surgery for St George and Sutherland Hospitals.

To meet current and future demand for health services, the Sutherland Hospital is currently being redeveloped. As part of the Stage 1 Redevelopment, in 2018, the hospital opened a new Emergency Department and 60 new inpatient beds including a new Emergency Short Stay Unit, General Medical Unit, General Surgical Unit and Critical Care Medicine Unit.

1.3.2 The Sutherland Hospital Operation Theatres Project

The Sutherland Hospital Operating Theatres Project (the proposed development) aims to improve the capacity and quality of health services at The Sutherland Hospital.

The current operating suite at The Sutherland Hospital was built in 1984 and background analysis undertaken by Health Infrastructure has identified that the existing operating theatres are significantly undersized compared to the current standards; the layout is cramped, poorly configured and lacks functionality. Services infrastructure (electrical, mechanical, air conditioning, etc) also require upgrades to align with contemporary standards.

The proposed development would deliver a contemporary operating theatre environment, improve efficiencies and access to services, and enable implementation of new models of care and surgical clinical pathways.

The key components of the project include:

- The operating theatres will increase from 5 to 8 as well as the endoscopy suits increasing from 1 to 2, resulting in a total of 10 spaces with associated clinic rooms
- Supporting spaces including recovery, day surgery, storage, staff amenities and other clinical and non-clinical support spaces
- A new Central Sterilising Services Department (CSSD) will be built immediately above the operating theatres
- A new MRI space will be built immediately below the operating theatres.

The proposed development would be delivered as a combination of new build and refurbishment in a “live” hospital environment.

2.0 Objectives and scope of the assessment

2.1 Assessment framework and methodology

Social Impact Assessment (SIA) involves the analysis of social changes and impacts on communities that are likely to occur as a result of a particular development, planning scheme, or government policy decision. The purpose of Social Impact Assessment is to assess the impacts of the development, both positive and negative, for all stages of the project lifecycle for key stakeholders and the broader affected community.

2.2 Assessment framework and methodology

2.2.1 Social Impact Assessment

The assessment of social impacts in this report has been based on two guidelines:

- *Draft Social Impact Assessment Guideline* (NSW DPIE 2020), applicable to all State-significant projects and developments.
- *Sutherland Shire Development Control Plan 2015, Chapter 41: Social Impact* (Sutherland Shire Council, 2015).

As the proposed development classifies as State Significant Development, the DPIE Guideline has been followed as the primary basis for assessment, for the purposes of this report. Social factors and principles of the Council's DCP have been acknowledged and comparison to the DPIE categories has been provided in the section below.

Consideration of the Sutherland Shire Council's Social Impact Evaluation requirements is not required by the SEARs, but has been included as a means of providing a comprehensive assessment of social impacts.

As outlined in the *DPIE Social Impact Assessment Guideline* (2020), social impacts vary in their nature and can be positive or negative, tangible or intangible, physically observable, or psychological (fears and aspirations). Social impacts can be quantifiable, partly quantifiable or qualitative. They can also be experienced or perceived differently by different people and groups within a community, or over time.

The assessment involves a number of steps, including a baseline analysis of the existing socio-economic environment of a defined study area or areas; identifying list of stakeholders and considering their views; scoping of relevant issues; identification and assessment of potential impacts against the specified suite of factors set out in the NSW DPIE SIA Guideline; determination of the significance of the impacts, and identification of measures to manage or mitigate the project's potential negative impacts and enhance potential benefits.

The methodology employed in preparing this SIA is designed to ensure that the social environment of communities potentially impacted by a project is properly accounted for and recorded, and anticipated impacts are adequately considered and assessed.

2.2.2 Social factors for assessment

The NSW DPIE Draft SIA Guideline (2020) classifies social impacts in the following way, which forms the core basis of this assessment:

- *Way of life: how people live, get around, work, play and interact with one another on a day-to-day basis*
- *Community: its composition, cohesion, character, how it functions, and sense of place*
- *Accessibility: how people access and use infrastructure, services and facilities*
- *Culture: people's shared beliefs, customs, values and stories, and connections to Country, land, water, places and buildings*
- *Health and wellbeing: people's physical, mental, social and spiritual wellbeing*
- *Surroundings: access to and use of natural and built environment, including ecosystem services, public safety and security, as well as aesthetic value and amenity*

- *Livelihoods: including impacts on employment or business, experience of personal breach or disadvantage, and the distributive equity of impacts and benefits*
- *Decision-making systems: the extent to which people are able to participate in decisions that affect their lives, procedural fairness, and the resources provided for this purpose.*

Each of these categories should be assessed based both on the tangible observable impacts, as well as considering fears and aspirations of communities impacted.

The Sutherland Shire DCP (2015) Social Impact chapter defines social impacts as: “the ways in which individuals or communities might be affected by new development in respect of: Health and wellbeing; Access to facilities, amenities and services (including transport, health, education, retail etc); Cultural cohesion, identity, safety and security; Socio-economic outcomes; and Equitable, inclusive and sustainable opportunities in relation to the above.” (p.1)

The Shire has further identified a list of matters to be considered when evaluating social impacts related to development of Health and Medical facilities.

- *Anti-social behaviour and crime prevention*
- *Access and Mobility*
- *Culture and Community Values*
- *Quality of Life*
- *Economic advantage*
- *Contribution to the existing environment*
- *Safety and Security*
- *Transportation*
- *Community risk perception*

Comparison of social factors and matters specified by Sutherland Shire Council and by NSW DPIE are shown in below in **Table 2**. This SIA report addresses the matters for consideration identified by Council, as part of a holistic consideration of the social factors identified in the *Draft SIA Guideline* (NSW DPIE, 2020).

Table 2 Comparison of social factors in the NSW DPIE and Sutherland Shire Council guidelines

NSW DPIE social factors	Sutherland Shire Council social factors and matters of consideration
Way of life	<ul style="list-style-type: none"> • Quality of Life • Transportation
Community	<ul style="list-style-type: none"> • Culture and Community Values
Accessibility	<ul style="list-style-type: none"> • Access and Mobility • Access to facilities, amenities and services • Transportation
Culture	<ul style="list-style-type: none"> • Culture and Community Values • Cultural cohesion, identity, safety and security • Contribution to the existing environment
Health and wellbeing	<ul style="list-style-type: none"> • Anti-social behaviour and crime prevention • Health and wellbeing • Quality of Life • Safety and Security
Surroundings	<ul style="list-style-type: none"> • Anti-social behaviour and crime prevention • Contribution to the existing environment • Safety and Security
Livelihoods	<ul style="list-style-type: none"> • Economic advantage

NSW DPIE social factors	Sutherland Shire Council social factors and matters of consideration
	<ul style="list-style-type: none"> Socio-economic outcomes
Decision-making systems	<ul style="list-style-type: none"> NA
Relevant across most of the categories	<ul style="list-style-type: none"> Community risk perception Equitable, inclusive and sustainable opportunities

2.2.3 Assessment methodology

Stages in the preparation of this Social Impact Assessment are as follows:

- Baseline analysis of the existing socio-economic environment, involving:
 - Study area definition, including primary and secondary geographic areas likely to be impacted (see **Section 6.2** of this report)
 - Demographic analysis, including socio-economic characteristics of current communities and population forecast (see **Section 6.0**)
 - Review of relevant background information, along with relevant local and state policy frameworks (see **Sections 5.0** and **Section 6.0**)
- Stakeholder and community engagement: Findings of stakeholder and community consultation undertaken by Health Infrastructure have been reviewed to identify community and stakeholder aspirations and values. A further stakeholder interview was also conducted with Health Infrastructure and SESLHD regarding the objectives of the project (see **Section 7.0**).
- Scoping of issues: Analysis of potential impacts during and post-construction, with each of the directly affected communities and other stakeholders identified in relation to the way they may be affected. Both positive and negative potential issues are identified. An SIA Scoping Checklist has been prepared at the outset of this assessment, in line with the specifications of the NSW DPIE *Draft SIA Guideline* (2020). This is attached at **Appendix A**. This scoping process has underpinned the social impact assessment in **Section 8.0**.
- Identification of impacts as per the *Draft SIA Guideline* parameters. The social impact assessment ultimately appraises the significance of each identified impact based on its duration, extent and sensitivity of impact "receivers." This results in a social risk rating for impacts, as per the social impact significance matrix shown in **Section 8.0**.
- Identification of mitigation strategies to manage impacts and enhance benefits of the development.

2.2.4 Information sources and assumptions

- ABS Census of Population and Housing 2016* (Australian Bureau of Statistics, 2016)
- Building Momentum: State Infrastructure Strategy 2018-2038* (Infrastructure NSW, 2018)
- Caringbah Medical Precinct Development Control Plan* (Sutherland Shire Council, 2015)
- Greater Sydney Region Plan: A Metropolis of Three Cities* (Greater Sydney Commission, 2017)
- NSW State Health Plan: Towards 2021* (NSW Health, 2017)
- NSW Health Strategic Priorities 2019-20* (NSW Health, 2019)
- Our Greater Sydney 2056 South District Plan* (Greater Sydney Commission, 2017)
- Premiers Priorities* (NSW Government, 2019)
- SESLHD website*: <https://www.seslhd.health.nsw.gov.au/sutherland-hospital/about-us/operating-theatre-upgrade>, accessed in February 2021
- Social Impact Assessment Guideline, Draft* (NSW DPIE, 2020)
- South Eastern Sydney Local Health District Journey to Excellence Strategy 2018-2021* (SESLHD, 2018)
- Sutherland Shire Community Satisfaction Survey Report* (Micromex for Sutherland Shire Council, 2018)

- *Sutherland Shire Community Strategic Plan* (Sutherland Shire Council, 2017)
- *Sutherland Shire Development Control Plan* (Sutherland Shire Council, 2015)
- *Sutherland Shire Local Strategic Planning Statement* (Sutherland Shire Council, 2020)

Assumptions applied to complete this SIA include:

- The key findings of the background studies and technical reports are accurate.
- Socio-economic data for each study area accurately reflects the community demographic profile.
- Outcomes of the community consultation and engagement undertaken to date accurately reflect community views.
- All potential social impacts to the local community and special interest groups that can reasonably be identified have been included in this report.

A note on COVID-19: *COVID-19 is an unprecedented global health crisis and economic event that is rapidly evolving. At the current time, the research and analysis of economic and population data – such as forecasts of population or employment growth and so on – reflects a return to “business as usual” scenario, while also noting the potential impacts that may be associated with the COVID-19 virus, travel and border restrictions impacting on migration numbers, and the anticipated return to growth in economic or population indicators.*

3.0 Site analysis

3.1 Site location and context

The Sutherland Hospital is situated in the Sutherland Shire, approximately 20km south of the Sydney CBD. **Figure 1** provides a regional context map of the site showing its location in relation to the Sydney CBD. **Figure 2** provides the location of the site.

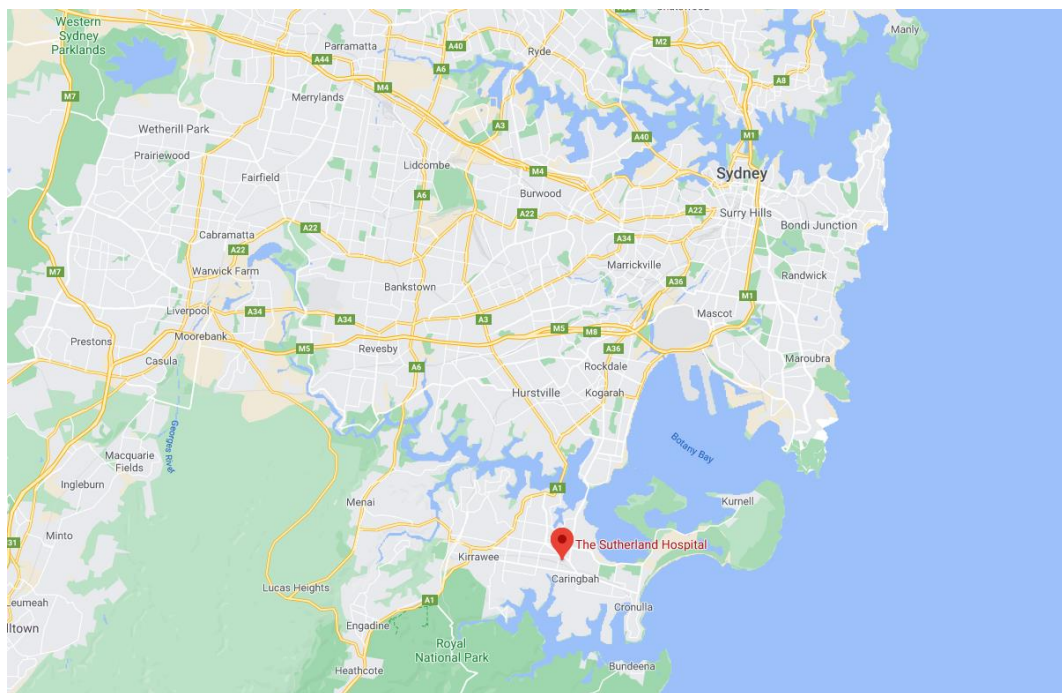


Figure 1 Site context

Source: Google Maps, 2021.

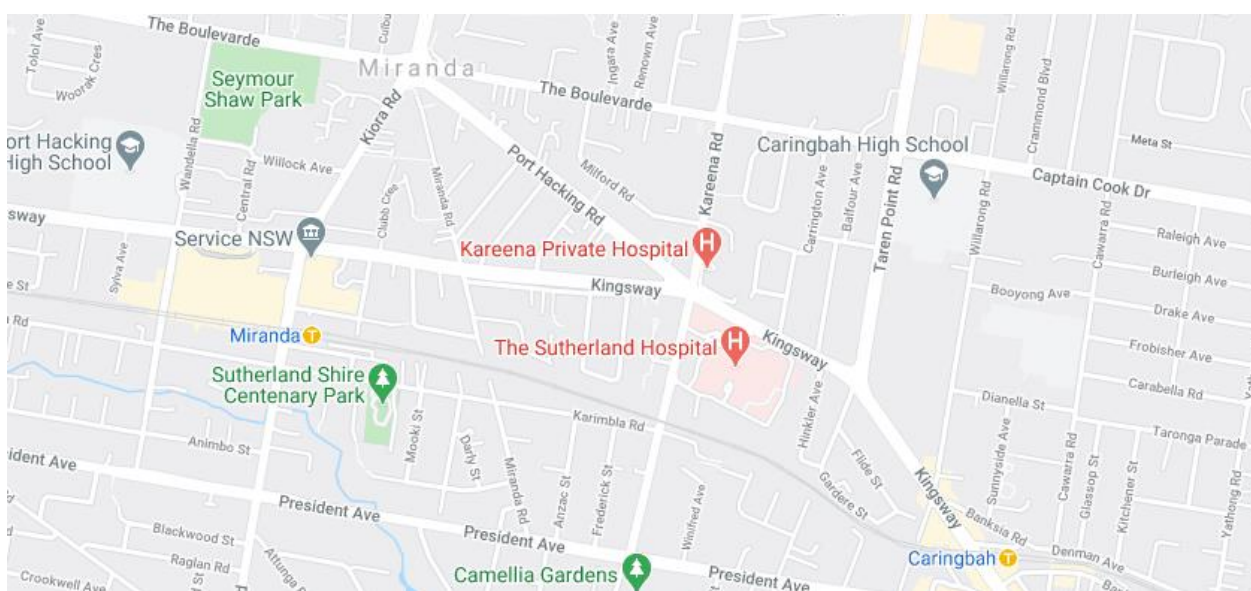


Figure 2 Site location

Source: Google Maps, 2021.

The Sutherland Hospital is located within the South East Sydney Local Health District (SESLHD), which is one of 19 Local Health Districts and Speciality Health Networks in NSW. The SESLHD covers the LGAs of Woollahra, Waverley, Randwick, Botany Bay, Rockdale, Georges River, Sutherland, and parts of the City of Sydney (**Figure 3**).



Figure 3 South Eastern Sydney Local Health District

Source: NSW Health

3.2 Existing development

The proposed development is an expansion and refurbishment of The Sutherland Hospital. The existing hospital campus includes 1-4 storey buildings accommodating the 375-bed Sutherland Hospital, NSW Ambulance, Emergency Department, Pathology, Family Care Cottage, a multi-storey car park south of the building and several at-grade parking lots. Stage 1 Redevelopment of The Sutherland Hospital was completed in 2018 (see **Figure 4**).

The Sutherland Hospital is situated at the corner of the Kingsway and Kareena Road, Caringbah, between the Kingsway and the railway line. The site is approximately 10 minute walking distance to the Caringbah train station and adjacent retail strip to the south-east, and 20 minute walking distance to the Miranda station to the west.



Figure 4 The Sutherland Hospital

Source: Richard Crookes Construction, 2021.

3.3 Surrounding development

The area surrounding the site is primarily characterised by low- to medium density residential uses, including single family homes and apartment buildings up to 6-storey height, as well as health and aged care uses (see **Figure 5** and **Figure 6**). The low-density residential lots east of the hospital have been earmarked to be redeveloped as apartment buildings with bonus height and floor space allowances for redevelopments containing health service facilities at the base. Kareena Private Hospital is located to the north-west of the site (**Figure 7**).



Figure 5 Residential dwellings, Kingsway, to the north of the site

Source: Google Maps, 2021.



Figure 6 Residential flat buildings, Hinkler Road, to the east of the site

Source: Google Maps, 2021.



Figure 7 Kareena Private Hospital, Kareena Road, to the north-west of the site

Source: Google Maps, 2021.

4.0 Proposed development

4.1 Description of proposed development

The Sutherland Hospital is a large 375-bed metropolitan hospital in the Sutherland Shire, and is part of the South East Sydney Local Health District. To meet current and future demand for health services, the hospital is currently being redeveloped.

This SSDA seeks approval for the construction and operation of The Sutherland Hospital Operating Theatres Project. The key components of the proposed development include:

- New operating theatres (increasing the total number of operating theatres from five to eight), with associated clinical rooms
- New endoscopy suites (increasing the total number of endoscopy suites from one to two), with associated clinical rooms
- New supporting spaces including recovery, day surgery, storage, staff amenities and other clinical and non-clinical support spaces
- New Central Sterilising Services Department (CSSD) to be built immediately above the operating theatres.
- New MRI space to be built immediately below the operating theatres.

Indicative artist impressions of the proposed development are shown in **Figure 8** and **Figure 9** over page.

The proposed development would be delivered as a combination of new build and refurbishment in a 'live' hospital environment, as shown in **Figure 10** and **Figure 11** over page.

The proposed development would increase operating theatre capacity to meet future demand driven by an increasing and ageing population with associated increase in chronic and complex diseases. It would deliver a contemporary health service to the community, including leading operating theatres and modern, patient-friendly recovery spaces and a new and expanded Central Sterilising Service Department. The Project would improve patient safety and enable contemporary and innovative work practices.

The key drivers for the project, as identified in background analysis completed by Health Infrastructure, are:

- Building capacity to meet service demand driven by population growth and an ageing demographic, with an increase in chronic disease co-morbidity and multi-morbidity
- Strengthening the role of The Sutherland Hospital in leadership and clinical excellence in orthopaedic surgery and gastroenterology
- Improving access and efficiencies in service delivery
- Meeting community expectation of patient-centred care, delivered close to home
- Replacing ageing, inadequate, and noncompliant infrastructure that is at the end of its useful life.

The proposed development would build on and support the \$62.9 million Sutherland Hospital Redevelopment Stage 1, completed in 2018, which delivered a new and expanded Emergency Department, as well as an expanded Intensive Care Unit and additional general medical and surgical beds.



Figure 8 Indicative artist impression of proposed development

Source: SESLHD, 2020 <<https://www.seslhd.health.nsw.gov.au/sutherland-hospital/about-us/operating-theatre-upgrade>>



Figure 9 Indicative artist impression of proposed development

Source: SESLHD, 2020 <<https://www.seslhd.health.nsw.gov.au/sutherland-hospital/about-us/operating-theatre-upgrade>>

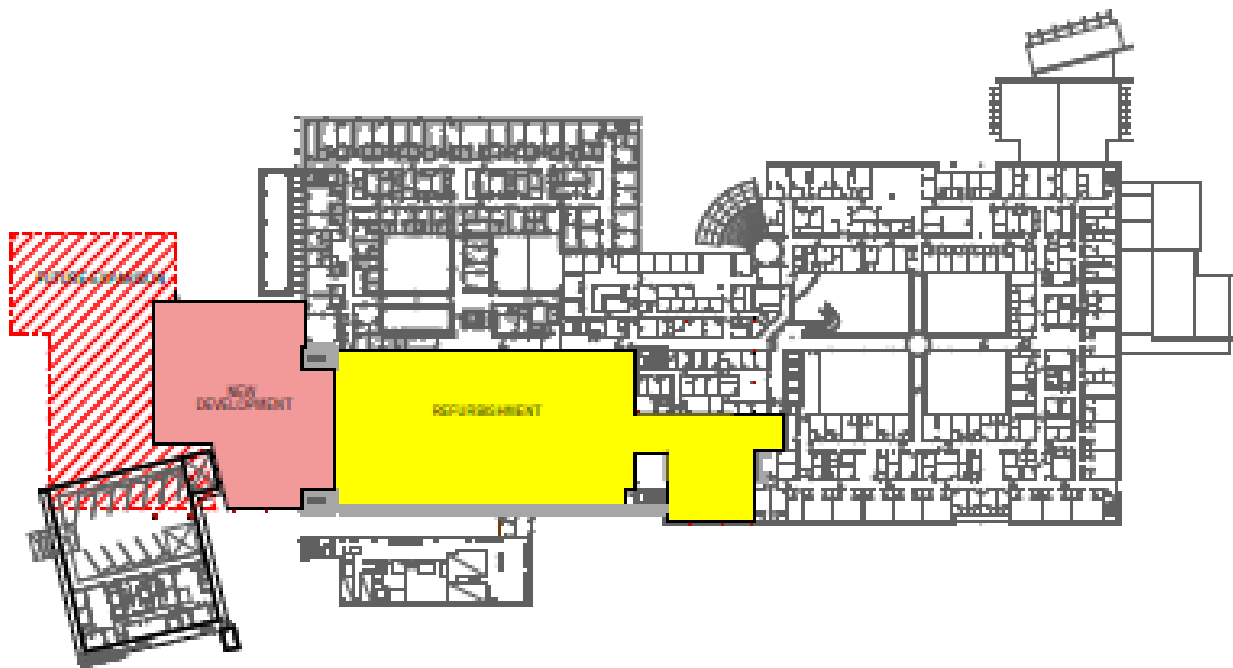


Figure 10 Sketch layout for the Project – site context

Source: Health Infrastructure

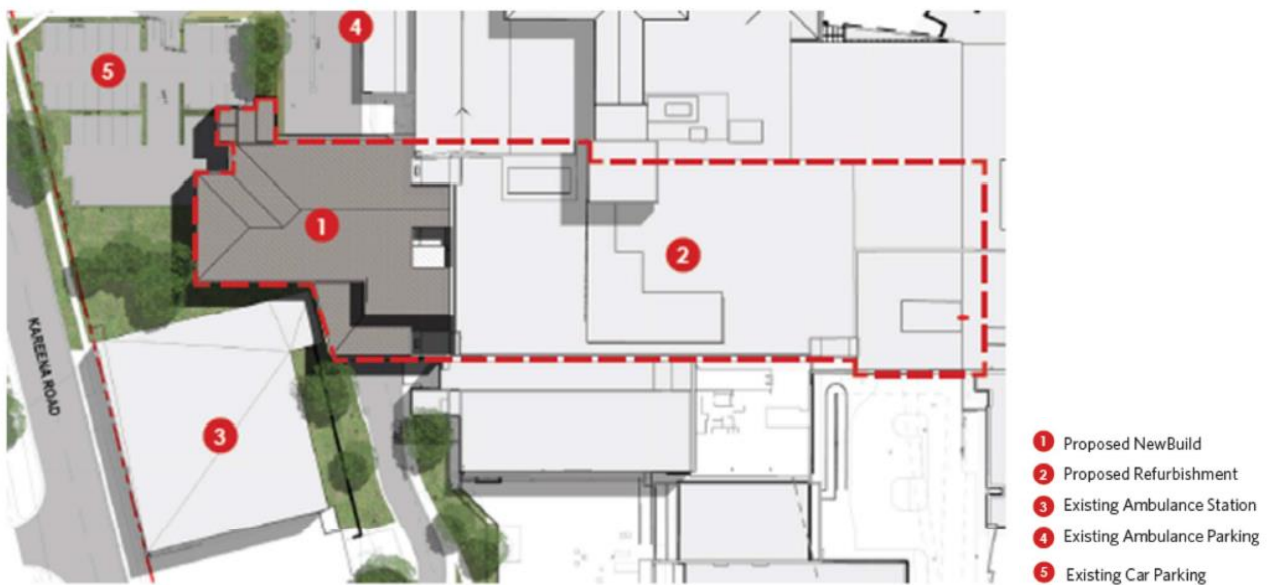


Figure 11 New build location – site context

Source: Health Infrastructure

4.2 Construction staging

As the proposed development would include a new build and refurbishment undertaken in a live hospital environment, the construction period will require careful staging and management to ensure operational continuity for the hospital and integration with The Sutherland Hospital's existing core clinical and logistics functions.

A key consideration of the proposed development is to stage construction to ensure that there are five operating theatres operational at all times, i.e. ensuring that the capacity of the hospital is never below current levels.

A detailed staging strategy has been developed by the project team to maximise business continuity. There are two main phases to the proposed development:

- **Phase 1 – new build.** Build out to West towards Kareena Road and the Ambulance station. The new build will have three levels:
 - Level 2 (ground level) will be the MRI and supporting space
 - Level 3 will be the Operating Theatre complex and
 - Level 4 will be the new CSSD

These will all be built concurrently, with completion date of Phase 1 targeted for Q1 2023.

- **Phase 2 – refurbishment.** The second phase of the proposed development will be a full refurbishment of the existing Level 3 area currently occupied by operating theatres and will include two new operating theatres, two new procedure rooms, one new recovery room, a new Surgical Short Stay Unit and new staff amenities (change rooms, tea room, offices, workspaces).

The refurbishment stage will involve some staging and is targeted for completion by Q1 2024.

A Change Management Strategy and Communications and Consultation Plan have been developed for the Project and detail the processes and communication strategies to ensure that key stakeholders are advised and consulted about major changes and disruptions, and the process for providing feedback and further consultation during the Project.

4.3 Design principles and elements

The following section describes the design principles that have informed the proposed development.

It is a key consideration of the proposed development that the spaces that would be delivered are primarily clinical spaces for use by staff. Spaces such as operating theatres and the MRI and supporting space are subject to Australasian Health Facility Guidelines, and reflect these standards.

Interior design – operating theatres, CSSD and supporting spaces

The principles of the interior design are guided by Australasian Health Facility Guidelines as well as consultation with over project user groups, staff input and expert advice to maximise the improvements to the environment in which care is provided and staff are working. The functional location of operating theatres, patient bays, outdoor spaces, work spaces have been discussed as part of the process.

The following are the overarching design principles for Perioperative Services and CSSD:

- Supports the patient journey and efficient workflow
- Access to natural light to be utilised where possible for patient recovery and staff areas
- Digital and ICT requirements will be incorporated to support efficient and safe workflow and patient care
- Separation of ambulant admissions and inpatient/Emergency Department transfers
- Maximise patient privacy and dignity
- Prioritise patient safety in terms of line of sight and visibility, minimise patient travel times and minimise delays in responding to clinical incident codes

- Supports the movement of personnel, ambulant patients, mobile equipment, patient trolleys, and materials with a minimum of cross traffic
- Clear internal separation of spaces (e.g. public and private) and demarcation of sterile and non-sterile zones and definition of traffic flows to enable enforcement of infection control guidelines
- Controlled egress and entry, ensuring a secure perimeter and minimising access points
- Supports the workflow of clean and dirty instruments between the Operating Suite and CSSD
- Supports integration with the existing Hospital and its systems and processes

The interior design will be inspired by the local environment of the Sutherland Shire and embraces a calming colour palette similar to the Stage 1 redevelopment.

Exterior design

The exterior design will be in response to local surroundings. The material selection will be based on two key elements:

- Integration with the existing hospital structure
- Referencing the surrounding context of the site.

Landscaping

The vision for landscaping design is inclusiveness, connection and safety. Design elements include:

- Increased planting
- Provision of meeting and resting places, including a new reflective garden in the undercroft created by the cantilevered new part of the build.
- Reduced interface between vehicles and pedestrians.

Public art

Artworks on the grounds of The Sutherland Hospital is being designed in collaboration with the Project's Aboriginal Consultative Group and will reflect the rich local culture recognising Aboriginal history to support connection to country through art, song and creation of a meeting place.

It is intended a diverse range of contemporary art experiences, applied in strategic locations, designed to soothe, relax and delight will be developed.

5.0 Strategic policy context

The following section identifies the key social drivers for this site, based on a review of the key state and local policies and strategies. The following key documents have been reviewed:

- *Premier's Priorities* (NSW Government, 2019)
- *NSW State Health Plan: Towards 2021* (NSW Health, 2017)
- *NSW Health Strategic Priorities 2019-20* (NSW Health, 2019)
- *Building Momentum: State Infrastructure Strategy 2018-2038* (Infrastructure NSW, 2018)
- *Greater Sydney Region Plan: A Metropolis of Three Cities* (Greater Sydney Commission, 2017)
- *Our Greater Sydney 2056 South District Plan* (Greater Sydney Commission, 2017)
- *South Eastern Sydney Local Health District Journey to Excellence Strategy 2018-2021* (SESLHD, 2018)
- *Sutherland Shire Local Strategic Planning Statement* (Sutherland Shire Council, 2020)
- *Sutherland Shire Community Strategic Plan* (Sutherland Shire Council, 2017)
- *Development Control Plan - Caringbah Medical Precinct* (Sutherland Shire Council, 2015)

A summary of the key themes of these documents are identified in **Table 3** below. A comprehensive review of the documents is provided at **Appendix B**.

Table 3 Strategic policy review

Policy themes	Implications for Social Impact Assessment	Relevant documents
Improving health outcomes and access to health services for the South Eastern Sydney Local Health District (SESLHD)	<ul style="list-style-type: none"> • The site is located within the SESLHD, which serves a growing population, many of whom are ageing and experiencing long-term, chronic and complex health conditions. It is estimated that by 2027 there will be 112,500 (50%) more Emergency Department presentations, 21,685 (20%) more acute admissions and a need for 480 additional acute beds. • There is growing demand on SESLHD's health services and infrastructure due to healthcare inequity and growing demand on emergency services, hospital beds, outpatient and community services. It is a priority of the SESLHD to redesign its health services, reform aspects of their system and build health infrastructure in order to meet growing demand across all patient cohorts. • It is a vision of the SESLHD to deliver "person-centred" care, create world-class hospitals which think beyond their walls to address health challenges, provide "safe, reliable and passionate care that makes sense for each person", and use digital and other technologies to provide the best hospital services and treatments (p. 6). • As the number of people living with chronic or complex illnesses in SESLHD is increasing, it is the Premier's priority to reduce preventable visits to hospital by 5% by 2023, through the improvement of outpatient and community care. It is also a priority deliver timely access to hospital services by reducing Emergency Department wait times. • It is a priority of Sutherland Shire Council to provide emergency, rescue and other public health and safety services in order to ensure community wellbeing. Additionally, Council is committed to planning, providing, and advocating for quality medical, specialist and preventative services and facilities. 	<ul style="list-style-type: none"> • South Eastern Sydney Local Health District Journey to Excellence Strategy 2018-2021 (SESLHD, 2018) • Sutherland Shire Community Strategic Plan (Sutherland Shire Council, 2017) • Premiers Priorities (NSW Government, 2019)
The role of health infrastructure in supporting improved wellbeing	<ul style="list-style-type: none"> • It is a priority of NSW Health to "keep people healthy, out of hospital and connected to community-based care wherever possible" (p. 28). To meet evolving healthcare needs, NSW Health aims to invest in new healthcare facilities, establish healthcare precincts with public and private services, and redesign clinical service in order to meet the evolving healthcare needs of the state. • Approximately 40% of NSW Health's built infrastructure is over 50 years old, necessitating major investment into upgrades and new infrastructure to cope with increasing demand. Future investment will focus on infrastructure which will improve integration between hospital and primary care and prevent 	<ul style="list-style-type: none"> • Building Momentum: State Infrastructure Strategy 2018-2038 (Infrastructure NSW, 2018) • South Eastern Sydney Local Health District Journey to Excellence Strategy

Policy themes	Implications for Social Impact Assessment	Relevant documents
	<p>unnecessary hospital readmissions and Emergency Department attendances.</p> <ul style="list-style-type: none"> • NSW Health identifies investment into health infrastructure as a key step toward a “21st century health system that will be sustainable, purposeful and, most importantly, deliver positive health outcomes for the people of NSW” (p. 31). • The SESLHD is committed to “keeping our community healthy and cared for as close to home as possible” and will facilitate access to world-class healthcare services in order to achieve this. By upgrading and constructing new healthcare facilities, the SESLHD’s hospitals aim to be “fit for purpose” for delivering healthcare into the future (p. 21). 	<p>2018-2021 (SESLHD, 2018)</p> <ul style="list-style-type: none"> • NSW State Health Plan: Towards 2021 (NSW Health, 2017) • NSW Health Strategic Priorities 2019-20 (NSW Health, 2019)
Growing employment in Caringbah Medical Precinct	<ul style="list-style-type: none"> • The Caringbah Medical Precinct (also known as the Caringbah Health Cluster) is a major employment centre for the Sutherland LGA. It is a key Council priority to grow this precinct to deliver new employment opportunities for the LGA, while improving access to health services. • To facilitate the growth of the Caringbah Medical Precinct, Council is: <ul style="list-style-type: none"> – Providing planning incentives to deliver health services at the lower levels of residential flat buildings – Supporting the co-location of new health services near Sutherland and Kareena Hospitals – Encouraging walking and the use of public transport by developing a health cluster – Revitalizing Caringbah Centre – Facilitating more mixed-use developments which provide amenity for residents, workers, and visitors. 	<ul style="list-style-type: none"> • Caringbah Medical Precinct Development Control Plan (Sutherland Shire Council, 2015) • Sutherland Local Strategic Planning Statement (Sutherland Shire Council, 2020)
Delivering on the vision of a 30-minute city	<ul style="list-style-type: none"> • The Greater Sydney Commission’s (GSC) Greater Sydney Region Plan outlines a vision of a “30-minute city”, in which jobs, services and other quality public spaces are accessible within 30-minutes of people’s homes. The GSC is committed to delivering a well-connected city which is safe and walkable, and which optimises community use of infrastructure. • The GSC has identified the role of health and education precincts in economic growth and productivity. As health clusters evolve to precincts and innovation districts, economic productivity increases substantially. In the South District alone, there was a 73% growth of jobs in health and education over the 20 years between 1996 and 2016. It is acknowledged that the Sutherland Hospital does not yet comprise a cluster as characterised by the South District Plan’s “Maturity Pathway” for health and education precincts. 	<ul style="list-style-type: none"> • Our Greater Sydney 2056 South District Plan (Greater Sydney Commission, 2017) • Sutherland Local Strategic Planning Statement (Sutherland Shire Council, 2020)
Supporting population growth and change with investment in infrastructure	<ul style="list-style-type: none"> • The population of Sutherland LGA is increasing at a steady rate of approximately 0.7% per annum and is projected to reach 257,100 people by 2036. There is a projected increase in the percentage of people aged under 19 years (24%) and aged over 60 years (28%) calling Sutherland LGA home by 2036. • Over the next 20 years it is expected that demand for healthcare will grow by over 50% in NSW, compared to a population growth of 28%. This is largely due to the increase in 70–84-year-olds who are the predominant users of healthcare services. The state requires “disruptive innovation” in healthcare to cope with increasing demand and deliver long-term solutions for population health (p. 168). • It is a state and local priority to ensure that services and infrastructure meet communities’ changing needs now and well into the future. Planning of services and social infrastructure must recognise the changing composition of local populations and consider the overall health and wellbeing outcomes “for the community and intergenerational equity” (p. 26). • Sutherland Shire Council intends to consider the capacity of existing infrastructure and commit to the improvement of infrastructure to cope with demand from the existing and anticipated population. 	<ul style="list-style-type: none"> • Sutherland Local Strategic Planning Statement (Sutherland Shire Council, 2020) • Building Momentum: State Infrastructure Strategy 2018-2038 (Infrastructure NSW, 2018) • Our Greater Sydney 2056 South District Plan (Greater Sydney Commission, 2017)

6.0 Local social context

6.1 Introduction

This section provides an overview of the site and the existing social context surrounding the site. It analyses the existing social characteristics of the community within the identified study areas to better understand the potential characteristics and context of the existing community that may be impacted by the proposed development.

Key community characteristics

A review of the demographic profile of the local area (sourced from the ABS Census of Population and Housing 2016), has highlighted the following key community characteristics:

- **The study area population is growing and ageing.**
 - The Primary Study Area (PSA) within 400 meters from the site had an estimated resident population of 3,122 in 2019.
 - The Secondary Study Area (SSA) is the key patient catchment for The Sutherland Hospital – the Sutherland Shire LGA. The Shire was home to 230,610 residents in 2019, and is forecast to grow to 250,599 in 2036, by an additional 20,000 residents.
 - The population of the Shire area is also rapidly ageing – over two thirds of the projected overall growth is based on residents aged 65 years or older.
- **The area is characterised by relatively older community that is less culturally diverse than other areas of Greater Sydney. Many family households live in the area and typically in owner occupied separate houses.**
 - In 2016, the median age of PSA residents was 44 years (significantly higher than the Greater Sydney average of 36) and included a large share of residents aged 70 years or over, likely including residents of the many aged care providers and social housing offerings near the hospital site. The median age of the Shire is also higher than the regional average, at 40 years.
 - Family households and owner occupiers are the primary household type within the PSA and the Shire, however there is a strong share of lone person households in the PSA by comparison to Greater Sydney.
 - The residents of the PSA (78%) and the Shire (81%) are largely born in Australia, and the rate is notably higher than the SESLHD or the Greater Sydney average of 62%.
 - 1.4% of the PSA and 1.1% of the Shire residents identify as being of Aboriginal and/or Torres Strait Island descent, on par with Greater Sydney benchmark of 1.4%.
- **Whilst the Shire is a relatively wealthy area, there are pockets of socio-economic disadvantage identified, including parts of the PSA.**
 - Whilst the Sutherland Shire median income levels are above those of Greater Sydney average and the health of the LHD as a whole compares favourably with other parts of NSW, there are various pockets across the Shire that post higher than average levels of relative disadvantage, including close to The Sutherland Hospital. The PSA is also characterised by lower than average income levels, likely related to the social and retirement housing within the area.
 - As health issues such as multiple morbidities and long-term conditions are typically more prevalent in disadvantaged areas, the local inequities may signify health risks and barriers preventing people from accessing and benefitting from health services.

6.2 Study area definition: area of social influence

For the purposes of the Social Impact Assessment, study areas have been chosen taking into consideration the need to factor in both local social impacts and those likely to occur on a broader scale.

The study areas have been defined using ABS Statistical Area boundaries (SA1 or LGA boundaries) that best reflect the identified geographical areas.

6.2.1 Primary Study Area (PSA)

For this assessment, a Primary Study Area (PSA) has been defined to represent the local community within the immediate area of the site. Whilst we typically consider the residents of the 400m of the subject site for the purposes of the PSA analysis, for this assessment the residents living within 500m of the subject site have been included due to the SA1 boundaries that the statistical data is available for. A map illustrating the approximate area is shown in **Figure 12** below.

There are likely to be localised social impacts relating to the immediate surrounds of the site, for example impacts associated with the demolition of the existing dwellings and construction of the new buildings (i.e. amenity values, access, noise, air quality etc). Longer term impacts such as increased activity in the area are also anticipated to occur within the close proximity to the proposed development, as well as likely changes to perceptions of safety or community sense of place.

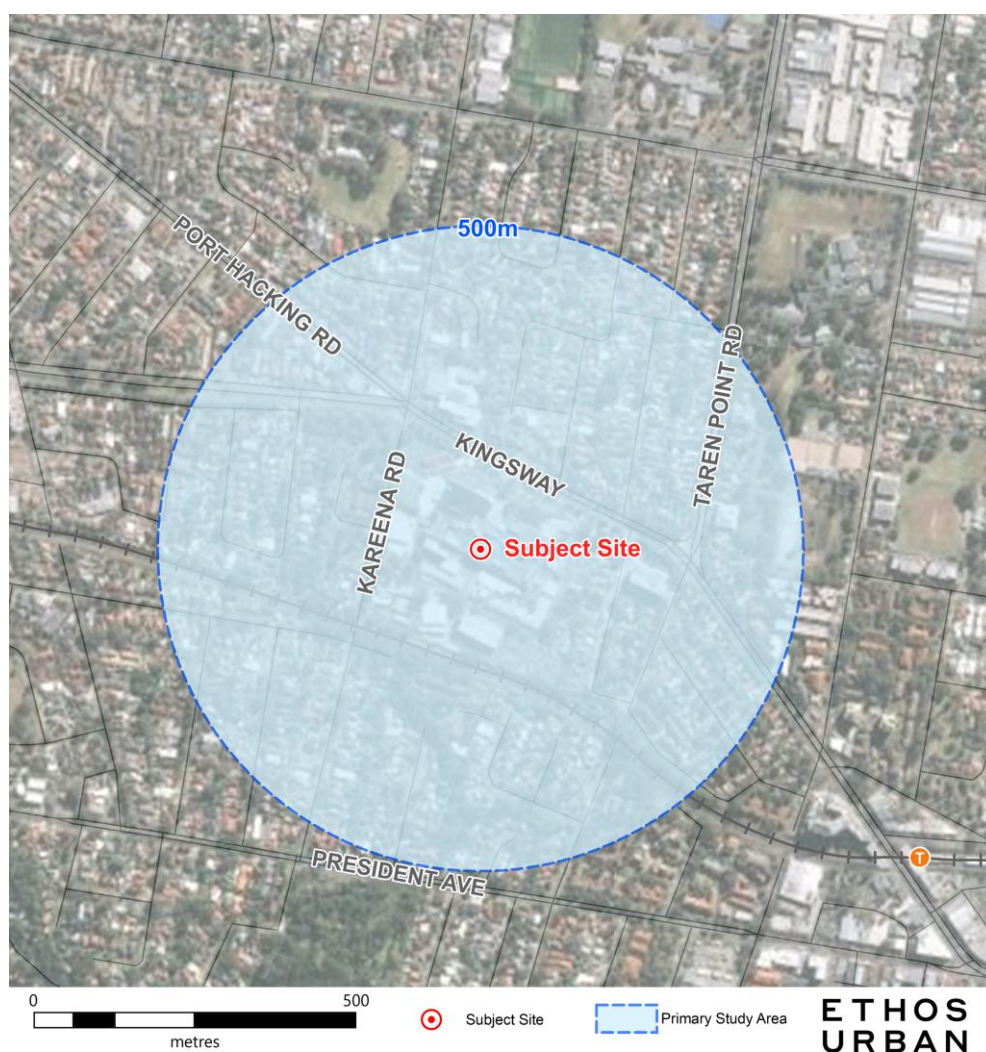


Figure 12 Primary Study Area

Source: Mapinfo Pro, Ethos Urban

6.2.2 Secondary Study Areas (SSA)

A Secondary Study Area (SSA) has also been considered necessary for the purposes of this study due to the broader impacts and benefits that the proposed development will likely have on the surrounding regional community. This includes residents living within the Sutherland Shire LGA, the core patient catchment for the hospital.

It is noted that the Sutherland Shire also forms the key worker catchment for the nearly 10,000 Health Care industry workers employed within the LGA, with 64% of them living locally¹.

Consideration has also been given to the social profile of residents living within the South East Sydney Local Health District (LHD), which includes The Sutherland Hospital. Note that whilst the SESLHD includes the Sydney Eye Hospital within the City of Sydney LGA and north-eastern parts of the City of Sydney area, we have aligned our population profile and projections with the above map and info on the SESLHD website, that excludes the City of Sydney from the population calculations.²³

A map illustrating these two areas is shown in **Figure 13** below.

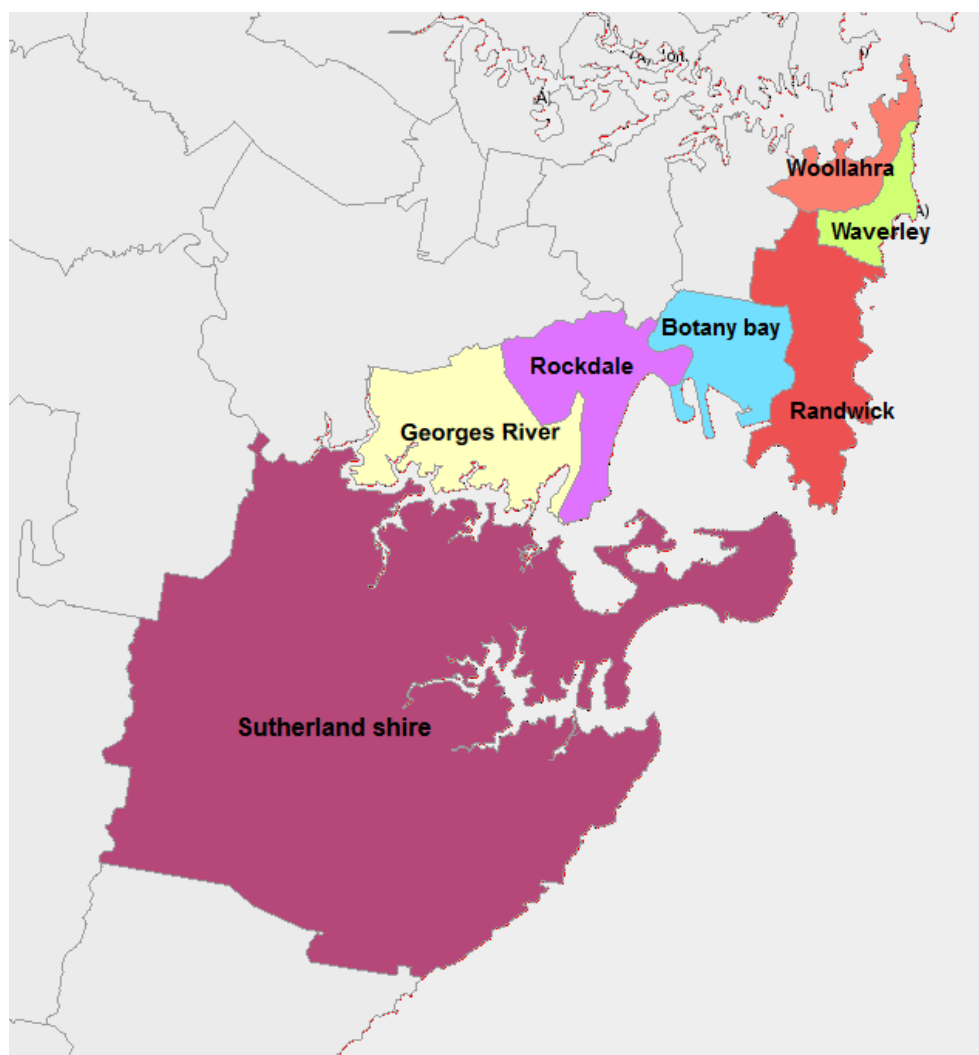


Figure 13 South Eastern Sydney Local Health District

Source: NSW Health

¹ <https://economy.id.com.au/sutherland/workers-place-of-residence-industry?Indkey=23017>

² <https://www.seslhd.health.nsw.gov.au/services-clinics/directory/about-us>

³ <https://www.seslhd.health.nsw.gov.au/services-clinics/directory/public-health/contact-us>

6.3 Community profile: demographic characteristics

An overview of the demographic and social economic profile of PSA and SSA residents is compared to the Greater Sydney benchmark in **Appendix C** and is based on 2016 ABS Census of Population and Housing data and latest 2019 Estimated Resident Population (ERP) figures. The key findings for the PSA and the Sutherland Shire are highlighted below:

- **Population:** In 2019, the PSA had an (ERP) of 3122, an increase of +200 residents since 2011. Sutherland LGA was home for 230,610 residents in the same year, and nearly 858,000 lived in the SESLHD overall.
- **Age profile:** The PSA has a high median age of 44 years by comparison to Greater Sydney (36 years). This median is driven by a high proportion of PSA residents aged over 50 years and account for 42% of the total resident population, whereas across Greater Sydney this age group only represents 31% of the population. In particular, the PSA has a high share of residents aged over 70 years (18%), many of whom may be tenants of the various aged care providers within the PSA and benefit from the location adjacent to the hospital. The prevalence of this age group in the PSA is double the rate of Greater Sydney residents aged 70 or older (9%), whilst 12% of the Shire residents fall in the same age bracket. Importantly, the large share of elderly residents will likely increase demand for hospital and other health related services in the local and regional area.
- **Need for assistance:** Whilst the age profile of the local areas is generally older than the metropolitan average, 5.1% of PSA and 4.3% of the Shire residents identify as needing assistance with daily activities, which is in line with the Greater Sydney benchmark of 4.9%.
- **Educational attainment:** Generally, PSA residents are well educated, with 50% of the resident population having completed non-school qualifications and Year 12, however somewhat lower than the Shire (61%) or Greater Sydney (68%) average.
- **Cultural and linguistic diversity:** Majority of the PSA (78%) and Sutherland Shire residents (81%) were born in Australia. The largest share of the Shire residents born overseas were from countries including England (3.8%), New Zealand (1.6%) and China (1.4%), with all other countries having even lower representation. Whilst English is the primary language spoken at home by residents, 2% of the Shire residents speak Greek at home. A breakdown of the top countries of birth and languages spoken at home are shown in **Table 4** over page.

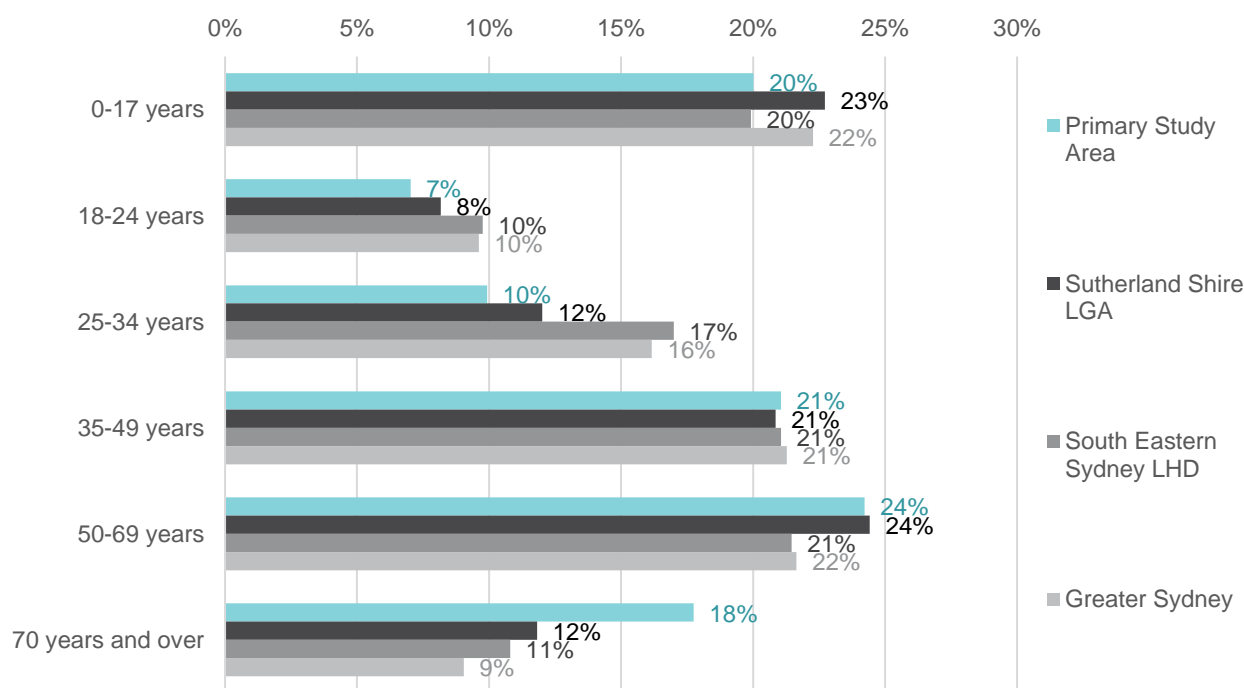


Figure 14 Age profile

Source: ABS 2016 Census of Population and Housing

Table 4 Cultural and linguistic diversity

	Primary Study Area	Sutherland Shire LGA	South Eastern Sydney LHD
Top five countries of birth			
1	Australia (78.4%)	Australia (81.1%)	Australia (61.9%)
2	England (4.2%)	England (3.8%)	China (6.7%)
3	China (2.1%)	New Zealand (1.6%)	England (3.7%)
4	New Zealand (2.0%)	China (1.4%)	New Zealand (1.9%)
5	India (1.0%)	South Africa (0.6%)	Nepal (1.2%)
Top five languages spoken at home			
1	English (82.3%)	English (73.7%)	English (43.2%)
2	Greek (2.4%)	Greek (2.0%)	Mandarin (6.3%)
3	Mandarin (2.2%)	Mandarin (1.5%)	Greek (3.9%)
4	Cantonese (1.4%)	Cantonese (1.0%)	Cantonese (3.8%)
5	Italian (1.4%)	Arabic (1.0%)	Arabic (2.4%)

Source: ABS 2016

- **Aboriginal and Torres Strait Island residents:** 1.4% of the PSA and 1.1% of the Shire residents identify as being of Aboriginal and/or Torres Strait Island descent, on par with Greater Sydney benchmark of 1.4%.
- **Household composition:** Family households are the predominant household type within the PSA, accounting for 69% of total occupied dwellings, however this is lower than the Shire (77%) or the Greater Sydney average (74%). 35% of the PSA households are couple families with children. 12% of the PSA households are one parent families, somewhat higher than the Shire or Greater Sydney benchmarks of 10% and 11%. The share of PSA lone persons households at 28% is higher than the Greater Sydney benchmark of 22%, and Sutherland Shire 21%, likely reflecting the high proportion of retirement living in the area.
- **Household type:** The primary household type within the PSA and the Shire are separate houses, accounting for 66% and 64% of all occupied dwellings respectively. There is a smaller share of semi-detached/row/terrace houses (25%) in the PSA, which is notably higher than the 14% in the Shire and Greater Sydney area. Flats, units or apartments form 9% of the PSA dwellings, which is notably lower than common in the rest of the Shire (22%), Greater Sydney (28%) or LHD (41%).
- **Housing tenure:** The PSA housing market is largely driven by owner occupiers, where 81% of dwellings in the PSA are owned outright or with a mortgage, compared to 78% in the Shire and 64% in the Greater Sydney area. An estimated 27% of occupied private dwellings in the PSA are rented, lower than the Greater Sydney benchmark of 35% for rented dwellings. However, including a higher than average proportion of households renting State housing (7%), compared to Shire (2.3%) or the Greater Sydney average (4.2%).
- **Household Income:** In 2016, PSA residents earned a median annual household income of \$77,280, some -16% lower than the Greater Sydney benchmark of \$92,200, and 25% lower than the Sutherland LGA median of \$103,200. This may be related to the retirement living and social housing renters in the area.
- **Relative disadvantage:** The Socio-Economic Indexes for Areas (SEIFA) are produced by the Australian Bureau of Statistics to describe various aspects of advantage and disadvantage, in terms of people's access to material and social resources, and their ability to participate in society. The Index of Relative Disadvantage factors in issues such as income, employment, occupation, education, housing and English proficiency. Whilst the Sutherland Shire median income levels are above those of Greater Sydney average and the health of the LHD as a whole compares favourably with other parts of NSW, there are various pockets across the Shire that post higher than average levels of relative disadvantage, many nearby the hospital site.

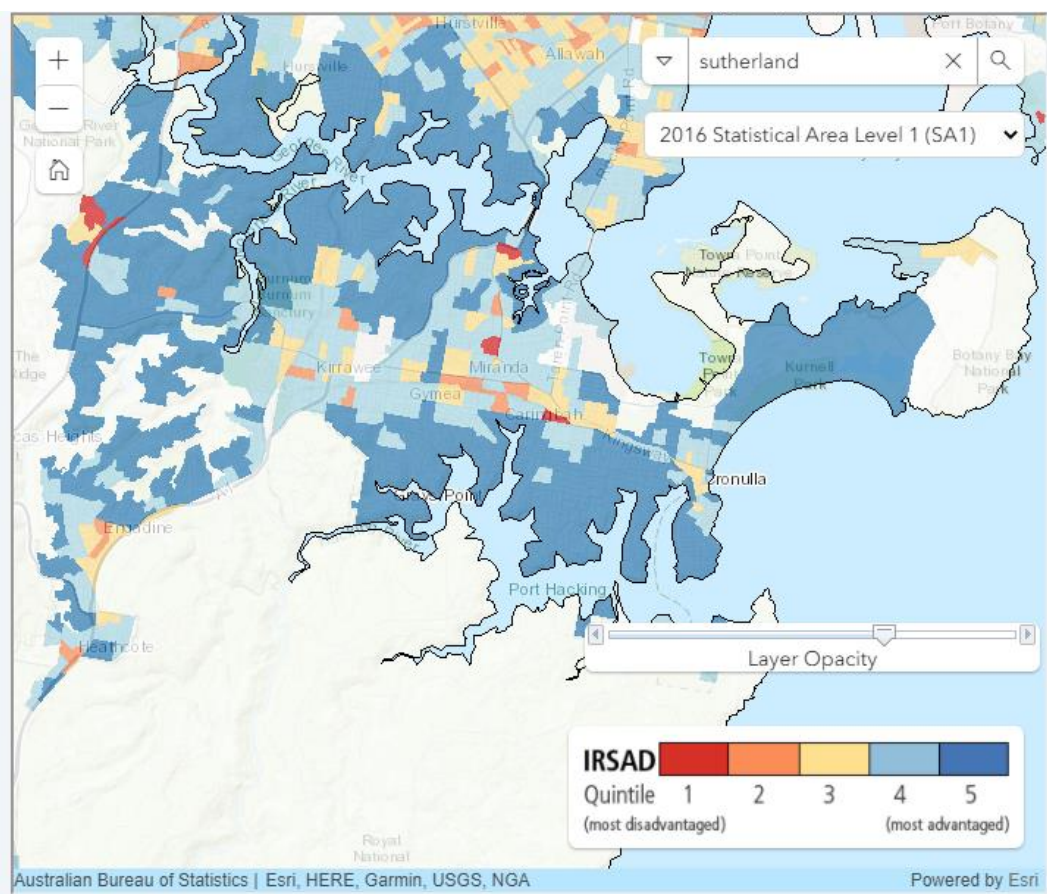


Figure 15 Relative disadvantage – focus on the Sutherland Shire area

Source: ABS Census of Population and Housing (2016)

6.4 Population forecasts

Population estimates and forecasts have been prepared for Sutherland LGA and the Greater Sydney area, with reference to the ABS 2019 ERP figures, and the DPIE Population Projections 2019.

The estimates show that Sutherland LGA had an ERP of 230,610 in 2019.

Projections indicate that the resident population of Sutherland LGA is forecast to increase to 250,599 in 2036, increasing at an average annual rate of 0.7% over the period. Overall, the Shire population is expected to grow by 12% by 2036, compared to 25% across the Greater Sydney area (25%)

Population estimates are shown below in **Table 5**.

Table 5 Population forecast, Greater Sydney age profile 2020-2041

Source: ABS 2019, DPIE

Population	2019	2026	2036	2019 to 2036
Sutherland Shire LGA	230,610	248,610	250,599	+19,989
Greater Sydney	5,312,163	5,746,820	6,661,720	+1,349,557

Population projections by age cohorts for the data available for 2016 and 2036 show that whilst the population is ageing across the Greater Sydney region, this is notably more pronounced in the Sutherland Shire area, where over 2/3 of the projected overall growth is based on residents aged 65 years or older (projected to increase by additional 22,000 in the age group, in addition to the ~37,000 counted in 2016).

Table 6 Population forecast, Sutherland Shire LGA age profile 2016-2036

	2016	2021	2026	2031	2036	2016 to 2036	2016	2036
0-4	14,312	15,303	15,401	15,375	15,023	+711	7%	6%
5-14	28,965	30,633	31,250	31,743	30,768	+1,803	13%	12%
15-19	13,894	13,955	14,145	13,801	14,632	+738	6%	6%
20-24	6,755	6,596	6,723	7,231	7,081	+326	3%	3%
25-34	28,562	28,826	27,276	26,402	25,578	-2,984	13%	10%
35-44	31,146	32,142	33,701	33,648	31,289	+143	14%	12%
45-54	30,807	32,633	33,181	34,103	35,390	+4,583	14%	14%
55-64	27,594	29,131	29,654	31,093	31,299	+3,705	13%	12%
65-74	20,154	22,598	24,546	25,954	26,253	+6,099	9%	10%
75-84	11,070	13,687	17,128	19,461	21,307	+10,237	5%	9%
85+	5,919	6,582	7,427	9,411	11,979	+6,060	3%	5%
Total	219,178	232,086	240,432	248,222	250,599	+31,421		

Source: DPIE

Table 7 Population forecast, Greater Sydney age profile 2016-2036

	2016	2021	2026	2031	2036	2016 to 2036	2016	2036
0-4	312,774	360,542	393,991	410,826	418,763	+105,989	7%	6%
5-14	566,812	637,805	701,637	770,215	816,517	+249,705	12%	12%
15-19	279,546	294,168	332,756	353,756	389,892	+110,346	6%	6%
20-24	351,283	359,281	361,035	394,041	414,315	+63,032	7%	6%
25-34	795,851	896,550	912,286	901,111	933,469	+137,618	17%	14%
35-44	677,955	782,851	897,363	963,588	976,944	+298,989	14%	15%
45-54	596,752	645,886	702,624	791,762	897,009	+300,257	13%	13%
55-64	493,118	548,671	586,793	631,452	684,346	+191,228	11%	10%
65-74	344,401	402,566	452,003	503,497	541,074	+196,673	7%	8%
75-84	184,031	225,973	289,220	342,895	391,642	+207,611	4%	6%
85+	85,732	98,319	117,112	148,827	197,749	+112,017	2%	3%
Total	4,688,255	5,252,612	5,746,820	6,211,970	6,661,720	+1,973,465		

Source: DPIE

6.5 Health profile and social determinants of health

The following section provides a brief snapshot of the health and wellbeing of the population of the South Eastern Sydney Local Health District (SESLHD), where the site is located.

6.5.1 Local health profile

The SESLHD serves 930,000+ people that live in the district, many of whom (37%) experience long term health conditions. The population is growing and ageing, creating a significant driver for health care needs. The number of long-term health conditions also often increases with age.⁴

- Over the last decade, the prevalence of overweight and obesity, a prime driver for the increasing incidence of diabetes and a risk factor for cardiovascular disease, some musculoskeletal conditions and cancers, has increased by about 5% in the District.
- Some of the SESLHD LGAs post significantly higher rate of premature mortality from cancers, respiratory disease, circulatory diseases, diabetes and external causes (incl suicide) compared to the NSW average.
- SESLHD contains 100,350 people living with a disability as of 2015. 30,000 residents have a profound or severe disability. It has been recorded that while 100% of people with a profound disability receive the required assistance, 45% of people with less severe disabilities are not receiving the required assistance.
- 10% of SESLHD's population over the age of 15 are carers, with 60% of carers being women, and 75% of carers being aged between 50 and 69. It is reported that the wellbeing of carers is significantly lower than the general Australian population, as carers have their own needs apart from the person for whom they care for and often experience financial hardship and limited life opportunities.

Background analysis provided by Health Infrastructure has identified that the Sutherland Shire population generally has a lower burden of disease when compared to the NSW average. This may help to offset the higher demand generated by the growing and ageing population. However:

- In SESLHD, an estimated 21% of the resident population live with multi-morbidities, increasing to 82% for those aged 85 and over.
- Residents of Sutherland Shire are at higher risk than Greater Sydney or NSW of having high cholesterol, drinking at harmful levels and being overweight.
- Premature mortality data for Sutherland Shire residents aged 0-74 years shows that overall age standardised death rates for the period 2006-2010 are lower than the NSW average for all major disease groups (cancer, circulatory disease, ischaemic heart disease, cerebrovascular disease, respiratory system and suicide/ self-inflicted injuries).
- The prevalence of diabetes mellitus is a key indicator of health status in the population and the resulting impact on demand for health services from chronic disease. The prevalence of diabetes in residents in the Sutherland Shire (4.0%) is above the SESLHD average (3.8%), but below the NSW average (5.27%).
- The prevalence of cancer in the residents of the Sutherland Shire is generally below the NSW average. However, age standardised rates for some cancers such as prostate cancer and melanoma are higher in the Sutherland Shire than in the rest of Australia.

Hospitalisations at The Sutherland Hospital for chronic diseases either as a principal diagnosis or comorbidity are increasing. This impacts on patient's treatment and length of stay. There were 5,600 hospitalisations and nearly 36,000 bed days in The Sutherland Hospital where diabetes was recorded as a secondary diagnosis, an increase of 97% in volume and representing 23% of separations and 45% of bed days (115 beds) in 2018/19. The average length of stay is high at 6.4 days (The Sutherland Hospital average LOS is 3.2 days) and has fluctuated year to year without any sustained decline, reflecting the complexity of patients with diabetes.

⁴ South Eastern Sydney Local Health District Journey to Excellence Strategy 2018 – 2021

6.5.2 Social determinants of health

A person's health is closely linked to the conditions in which they live, work, grow and play – known as the “social determinants of health”. Socioeconomic position, educational attainment, lifestyle behaviours can affect the health of individuals and communities. Health issues such as multiple morbidities and long-term conditions have found to be more prevalent in disadvantaged areas.

Whilst the Shire's median income levels are similar to those of Greater Sydney average and the health of the LHD as a whole compares favourably with other parts of NSW, there are substantial differences in access to services and health outcomes for different groups, and localities. The *South Eastern Sydney Local Health District Equity Strategy* (2015) notes that a large number of people living in the LHD may be experiencing significant levels health risks and inequities:

- 10,000 people have been unemployed long-term
- 20,000 children live in low income families
- 6,000 people are homeless on any night
- 50,000 adults run out of food at least once a year and cannot afford to buy more
- 67,000 adults report high psychological distress.

Each of these inequities signify substantial barriers which may prevent people from accessing and benefitting from health services within the SESLHD.

There is also marked variation between subgroup populations. There is over-representation of Aboriginal and culturally and linguistically diverse patients (CALD) with long terms health conditions.

- About 9,000 residents or ~1% of the SESLHD population identify as Aboriginal. The Aboriginal and Torres Strait Islander population experience significant disadvantage as they are 29% more likely to be hospitalised than non-Aboriginal people in SESLHD and contribute to 11% of the SESLHD's homeless population.
- 395,000 people speak a language other than English at home. 37,000 residents do not speak English well or at all. While the majority of overseas-born migrants to Australia enjoy good health, increased risks exist in specific population groups (such as refugees). People from non-English speaking backgrounds may also be less likely to report medical conditions or have difficulty accessing health services due to language barriers and are a priority population group.

As noted in the **Section 6.3**, while the Sutherland Shire is a relatively wealthy area, there are pockets of socio-economic disadvantage identified, including parts of the PSA (see **Figure 15**). The Sutherland Shire median income levels are above those of Greater Sydney average and the health of the LHD as a whole compares favourably with other parts of NSW, there are various pockets across the Shire that have higher than average levels of relative disadvantage, many nearby the hospital site. As health issues such as multiple morbidities and long-term conditions are typically more prevalent in disadvantaged areas, the local inequities may signify health risks and barriers preventing people from accessing and benefitting from health services.

6.6 Local social infrastructure context

A review of the existing local social infrastructure has been undertaken to inform the Social Impact Assessment and establish a baseline for the assessment of existing facilities. An overview of the local social infrastructure context is provided below, identifying key social infrastructure within a local 800m catchment of the site (a distance equivalent to a 10-15 minute walk). A map illustrating the approximate area is shown in **Figure 16** over page.

The following categories of social infrastructure relevant to the project are identified as being within walking distance of the site:

- **Health facilities:** There are several health care and associated facilities within walking distance of the site. Most prominent of those include the Sutherland Hospital, Kareena Private Hospital, Southcare, Caringbah Community Health Centre, and the Sutherland Heart Clinic.
- **Aged care facilities:** Various age care providers operate nearby, including Ibis Care Miranda, Logeman Court, Juliana Village, and Miranda Aged Care Facility.
- **Community facilities:** Nearby community facilities include the Caringbah library,
- **Recreational facilities and open space:** There are several open spaces and recreational facilities within walking distance of the site, including Caringbah Bowling and Recreation Club, Ascot Place Reserve, Camelia Gardens, Highfield Park, Sunnyside Avenue Reserve, and Glen McGrath Oval.
- **Places of worship:** There are several places of worship within walking distance of the site, including Caringbah Baptist Church and Our Lady of Fatima Parish Caringbah.
- **Educational facilities:** There are six educational facilities located within walking distance of the site, including Miranda North Public School, Endeavor Sports High School, Caringbah High School, Caringbah North Public School, and De La Salle Catholic College Caringbah.

6.7 Transport and accessibility

The site is highly accessible by public transport – both bus and rail services. It is approximately 600 metres from the Caringbah Railway Station which is serviced by the T4 Eastern Suburbs line.

The site is also accessible to a number of local and district bus routes including:

- 477 Miranda to Rockdale
- 478 Miranda to Rockdale via Ramsgate
- 969 Cronulla to Sutherland
- 971 Cronulla to Hurstville
- 977 Miranda to Lilli Pilli (Loop Service)
- 750S Taren Point to Caringbah
- S262 St Patrick College to Miranda Station via Sylvania
- S382 Our Lady of Mercy College to Miranda Station via Caringbah Station

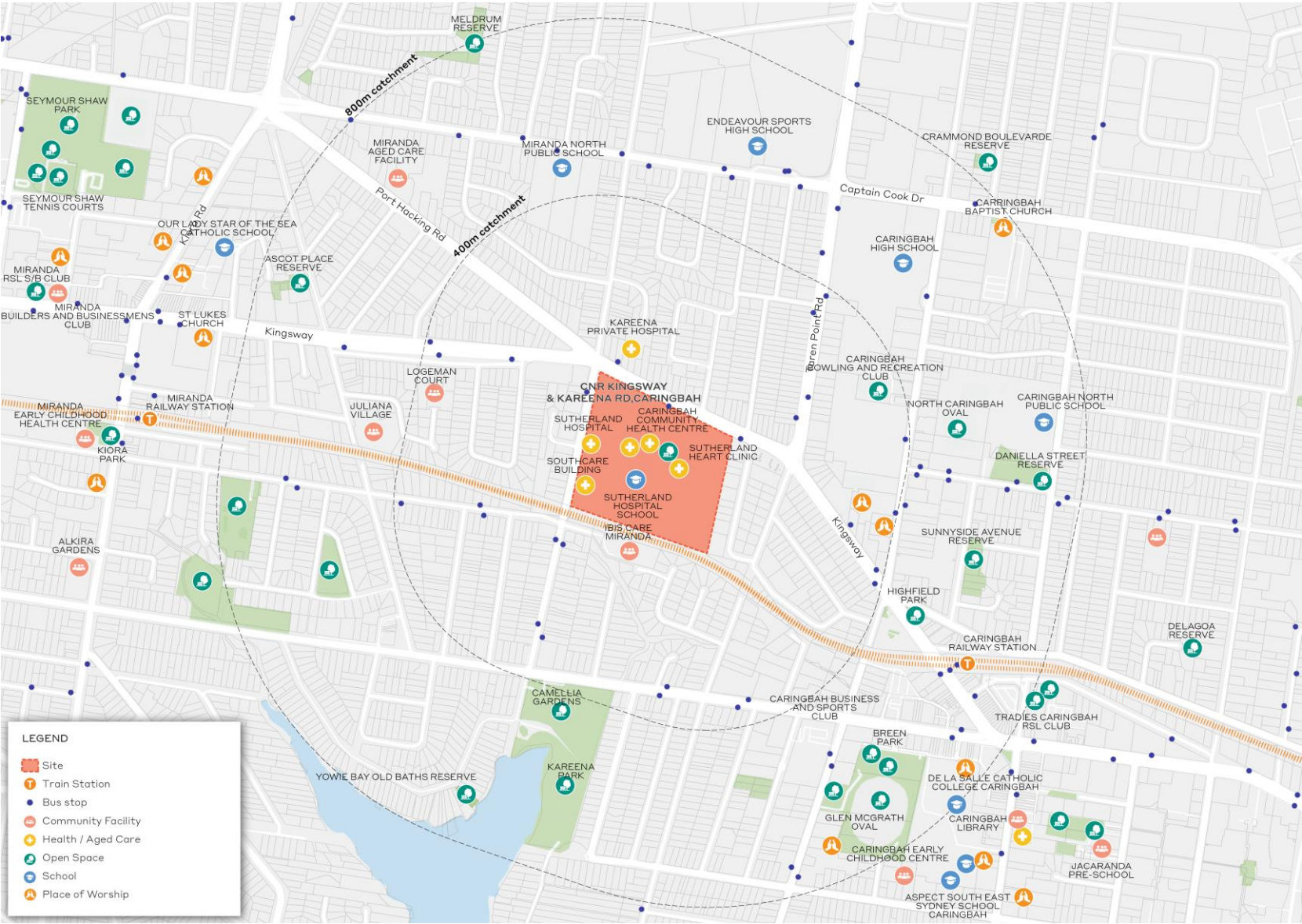


Figure 16 Social infrastructure context

Source: Ethos Urban

6.8 Local social issues and trends

The following section provides an overview of the local social issues and trends relevant to the proposed development.

Growing complexity of population health characteristics

According to the Australian Institute of Health and Welfare, Australian's have higher life expectancies than ever before, yet approximately half of the population lives with at least one chronic health condition:

“Chronic conditions are an ongoing cause of substantial ill health, disability and premature death, making them an important global, national and individual health concern... Many people with chronic conditions do not have a single, predominant condition, but rather they experience multimorbidity—the presence of 2 or more chronic conditions in a person at the same time. People living with multimorbidity often have complex health needs and report poorer overall quality of life... This places a heavy demand on Australia’s health care system and requires substantial economic investment.”⁵

The prevalence of complex diseases is also increasing, this includes diseases which are multifactorial and can be attributed to multiple environmental or socioeconomic characteristics. Complex diseases or illnesses can also arise through the interaction of multiple genes with external factors. As Australia’s demography and disease patterns change, the population ages and the burden of chronic illness grows, the healthcare system will inevitably come under increasing pressure⁶.

There is a need to transform the Australian healthcare system in order to provide better care for chronic and complex health conditions, as well as better end-of-life care. The Australian Government intends to reform the national health system by increasing funding in all states and territories from \$100 billion between 2015-2020 to an estimated \$131 billion between 2021-2025. This will fund specialist hospital services, including cancer treatment, rural health, hospital infrastructure, drug and alcohol treatment, preventative, primary and chronic disease management, and mental health, in order to reduce pressure on hospitals and reduce avoidable hospitalisations.

Demand for additional health facilities in SESLHD

The site is located within South East Sydney Local Health District, which is one of 19 Local Health Districts and Speciality Health Networks in NSW. The SESLHD covers the LGAs of Woollahra, Waverley, Randwick, Botany Bay, Rockdale, Georges River, Sutherland, and parts of the City of Sydney. SESLHD manages nine hospitals including:

- Prince of Wales Hospital and Community Health Services (Randwick)
- Royal Hospital for Women (Randwick)
- Sydney/Sydney Eye Hospital (Macquarie Street)
- Uniting War Memorial (Waverley)
- St George Hospital and Community Health Services (Kogarah)
- Calvary Health Care (Kogarah)
- Sutherland Hospital and Community Health Services (Caringbah)
- Garrawarra Centre (Waterfall)
- Gower Wilson Memorial Hospital (Lord Howe Island).

There is a growing strain on healthcare services within the District due to:

- Population growth - an additional 120,000 residents is expected to live in the District by 2036 (a 14% growth over the 2019 figures). The SESLHD anticipates that by 2027 there will be 112,500 (50%) more Emergency Department presentations, 21,685 (20%) more acute admissions and a need for 480 additional acute beds in the SESLHD.

⁵ <https://www.aihw.gov.au/reports/australias-health/chronic-conditions-and-multimorbidity>

⁶ <https://www.mja.com.au/journal/2007/187/9/challenges-health-and-health-care-australia>

- An ageing population - while increases in the population are expected in all age groups, the greatest growth will be among the older age groups, in particular those aged over 70 years.
- 37% of SESLHD residents experience long term health conditions. As the population is growing and ageing, this creates significant driver for health care needs since the number of long-term health conditions often increases with age.⁷
- Health issues such as multiple morbidities and long-term conditions have found to be more prevalent in disadvantaged areas. Whilst the health of the LHD as a whole compares favourably with other parts of NSW, there are substantial differences in access to services and health outcomes for different groups, and localities. The South Eastern Sydney Local Health District Equity Strategy (2015) notes that a large number of people living in the LHD may be experiencing significant levels health risks and inequities.

To meet these growing health needs, SESLHD requires additional infrastructure and funding for capital developments in order to ensure population health into the future, and to counteract health inequities⁸.

Various projects are being undertaken across the LHD, including \$720-million capital works project underway at the Randwick Hospitals' Campus; recent refurbishment of the recovery and endoscopy units at St George Hospital completed in May 2019; and the Sutherland Hospital's Emergency Department Short Stay Unit (EDSSU) officially opened in 2018. Further upgrades across the SESLHD network are planned.

Development of the Caringbah Medical Precinct

Sutherland Shire Council is planning to strengthen the existing cluster of medical facilities in close proximity to Sutherland Hospital, including Kareen Private Hospital, and Caringbah Centre.

A high proportion of residents of the Sutherland Shire LGA are employed in the health care and social assistance industry, and The Sutherland Hospital and Kareena Private Hospital are major employers in the area.

Council have identified the Caringbah Medical Precinct (also known as the Caringbah Health Cluster) as a major employment centre for the Sutherland LGA. In its *Local Strategic Planning Statement*, Council has identified that growing this precinct to deliver new employment opportunities for the LGA, while improving access to health services, is a key priority.

Sutherland Shire Council's objectives for the Caringbah Medical Precinct (also known as the Caringbah Health Cluster) are to:

- *Promote the development of Health Services Facilities to meet the current and future health needs of Shire residents and provide specialist medical services to the region.*
- *Obtain efficiency benefits of co-locating new medical facilities in close proximity to Sutherland Hospital and Kareena Private Hospital*
- *Increase employment self-containment for the Sutherland Shire by providing more local job opportunities in medical services.*
- *Encourage walking and the use of public transport by developing a cluster of new medical facilities within walking distance of Caringbah Centre.*
- *Assist in revitalizing Caringbah Centre with more local medical facilities.*
- *Facilitate mixed use developments comprising Health Services Facilities and residential flats which provide amenity for all residents, workers, and visitors.*

The precinct is shown in **Figure 17** over page.

⁷ South Eastern Sydney Local Health District Journey to Excellence Strategy 2018 – 2021

⁸ https://www.seslhd.health.nsw.gov.au/sites/default/files/groups/Planning_Population_and_Equity/Health_Plans/JourneytoExcellence_v13.pdf

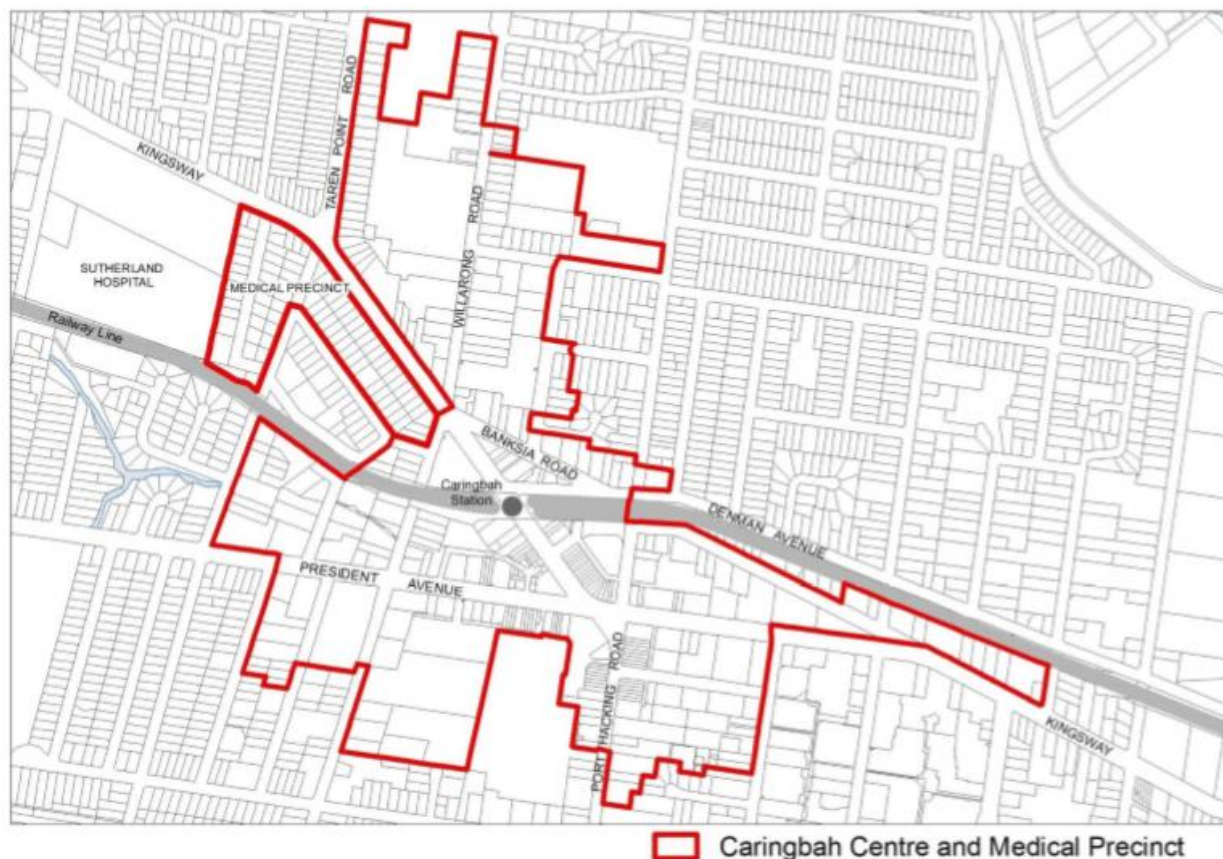


Figure 17 Caringbah Medical Precinct

Source: Sutherland Shire Council DCP, <https://shared-drupal-s3fs.s3-ap-southeast-2.amazonaws.com/master-test/fapub_pdf/DCP-CP/SUTHERLAND/2019-05-01-section-7.11-plan-2016-amendment-2_S-145.pdf>

The precinct will be bounded by the Kingsway to the north, the railway line to the south, the Sutherland Hospital to the northwest and Willarong Road to the southeast. It will be within a 800m radius of Caringbah Railway Station, enabling easy access to shops, offices, services and active transport links, as well as making it an appropriate location to deliver additional dwellings as well as medical facilities. The precinct currently features a mixed-use development which contains residential apartments and a number of medical facilities at 416-422 Kingsway, Caringbah⁹.

At present, the Caringbah Health Cluster does not conform with the characteristics set by the South District Plan's Maturity Pathway for health and education precincts. However, the development of Medical Precinct in Caringbah will likely enhance the capacity of Sutherland Hospital and encourage new collaborations between medical services through the co-location of new health services.¹⁰

⁹ <http://planningingenuity.com.au/projects/mixed-use-development-caringbah-medical-precinct-medical/>

¹⁰ https://www.sutherlandshire.nsw.gov.au/files/sharedassets/website/document-library/corporate-management/strategic-planning/2020-lsps_10-sep-web-signed.pdf

7.0 Community and stakeholder perspectives

The following section provides an overview of the community and stakeholder consultation undertaken to inform the proposed development, including engagement activities and outcomes. The purpose of this section is to highlight user values and aspirations relevant to the proposed development.

7.1 Key findings

Community and stakeholder consultation highlighted the following key aspirations for the project:

- Desire to proactively minimise disruption to the hospital environment, and to maintain operational continuity for The Sutherland Hospital throughout the project implementation. This is a core concern of the project team, and reflected in the staging of the construction.
- Ensuring that patient experience is not affected during the construction period, and remains at a high level throughout the project implementation. It is noted that this design option was chosen to minimise impacts to the clinical environment.
- Desire for improved access to an MRI machine within the Sutherland Shire. The local community (including a petition of 5000 signatures), members of Parliament and SESLHD staff have been campaigning for an MRI machine at the hospital for several years.¹¹
- Improved wayfinding within the existing hospital, and future extensions to the hospitals
- Improvements to the amenity and atmosphere of The Sutherland Hospital, including opportunities to incorporate green and open space, landscaping, arts and cultural elements and Aboriginal artworks.
- Aboriginal Consultative Group highlighted the opportunity to incorporate Aboriginal art and design elements within the project. For example, the project will incorporate coastal colours as well as earthy tones to better reflect the local environment,

It is noted that clinical and technical spaces within the proposed development are only accessible to staff, with a small number of spaces, consultation rooms, High volume Surgical Short Stay Unit and scanning rooms being accessible to the public while under medical supervision. These spaces are subject to Australasian Health Facilities Guidelines.

7.2 Engagement to inform this SSDA

The following outlines the process and outcomes of community and stakeholder engagement undertaken to inform and guide this SSDA.

Engagement activities undertaken by Health Infrastructure

Between October 2019 and December 2020, Health Infrastructure led an engagement process to understand community and stakeholder concerns and aspirations regarding The Sutherland Hospital Operating Theatre Upgrade.

The following stakeholders were identified by Health Infrastructure as most relevant to this project:

- The Sutherland Hospital, including:
 - Executive team
 - Staff
 - Patients
 - Suppliers
 - Visitors
 - Unions

¹¹ SESLHD 2020, "Sutherland Hospital to receive long-awaited MRI machine," < <https://www.seslhd.health.nsw.gov.au/news/sutherland-hospital-to-receive-long-awaited-mri-machine> >

- Volunteers,
- Surrounding residents and businesses
- Aboriginal and Torres Strait Islander communities, including Aboriginal Health Representatives
- NSW Government stakeholders, including:
 - Fire and Rescue NSW
 - NSW Government Architect
 - Transport for NSW
 - NSW Ambulance
- Sutherland Shire Council.

The following engagement activities were undertaken:

- Establishment and coordination of project governance structure, including:
 - Clinical Reference Group - required to provide expert clinical advice on clinical and health service delivery matters to the project team
 - Executive User Group – responsible for overseeing Project User Groups and aligning design briefs with the Clinical Services Plan and NSW Health operational policies
 - Project User Groups – responsible for developing functional briefs for health planning units, and provide feedback on health service delivery matters and non-clinical factors as they impact the design and operational implementation
 - Various internal project planning committees, including the Executive Steering Committee, Planning and Development Committee and Project Planning Team.
- Attendance at Consumer Advisory Group, comprising representatives of patients, visitors and volunteers
- Establishment and coordination of Aboriginal Consultative Group. The purpose of this group is to:
 - Advise of patient, consumer, carer, family and community views so they are recognised and reflected in the facility design
 - Advise on the development of key design principles for achieving a culturally appropriate and sensitive environment
 - Participate in the design processes, including providing review and feedback on designs and informing relevant aspects of design development
 - Identify and advise on priority areas and issues relating to facility design that require consumer and community engagement
 - Promote the collaborative and positive input being provided to the design process within the community.
- Community Information Session (attended by 66 consumers and community members). This session was promoted through:
 - Facebook posts
 - Sutherland Shire Community Events website page
 - 200 local resident letter drop
 - The Sutherland Hospital consumer, volunteer, and community contact list.
- Establishment and maintenance of project website, including project updates
- Year in Review Newsletter sent to volunteer and community contact list,
- Stakeholder letters to:
 - Sutherland Shire Council
 - Fire and Rescue NSW

- NSW Government Architect
- NSW Ambulance.

Engagement outcomes to date

Health Infrastructure has undertaken extensive consultation regarding this project, as described above. However, it is acknowledged that the proposed development aims to deliver new spaces such as operating theatres, CSSD and MRI which will not be accessible to the general public, and are subject to stringent technical and regulatory specifications. Opportunities to incorporate community feedback may therefore be limited.

Consultation has highlighted the following key aspirations for the project:

- Staff at the hospital highlighted the following:
 - Desire to proactively minimise disruption to the hospital environment, and to maintain operational continuity for The Sutherland Hospital throughout the project implementation. This is a core concern of the project team, and reflected in the staging of the construction.
 - Desire to manage potential for infection effectively. In response, The Sutherland Hospital's Inspection Control Manager has been proactively involved in all staging discussions.
 - Ensuring that patient experience is not affected during the construction period, and remains at a high level throughout the project implementation.
 - It is noted that this design option was chosen to minimise impacts to the clinical environment.
- Consumer consultation highlighted the following:
 - Desire for improved access to an MRI machine within the Sutherland Shire. The local community (including a petition of 5000 signatures), members of Parliament and SESLHD staff have been campaigning for an MRI machine at the hospital for several years, as currently approximately 800 inpatients each year who require MRI services have to be transferred to St George Hospital or private providers for scans.¹²
 - Improved wayfinding within the existing hospital, and future extensions to the hospitals
 - Improvements to the amenity and atmosphere of The Sutherland Hospital, including opportunities to incorporate green and open space, landscaping, arts and cultural elements and Aboriginal artworks.
- Aboriginal Consultative Group highlighted the opportunity to incorporate Aboriginal art and design elements within the project. For example, the project will incorporate coastal colours as well as earthy tones to better reflect the local environment,

7.3 Outcomes of broader LGA-wide consultation undertaken by Sutherland Shire Council (2017)

Consultation undertaken by Council to inform the development of the *Community Strategic Plan* in 2017 has highlighted the following key values of the Sutherland Shire community, which constitute considerations for this project more broadly:

- *Our access to our beautiful beaches, parks and natural reserves*
- *Our sense of community – we are a place of locals*
- *Our location - it's near to the city without being too close*
- *Our lifestyle and quality of life*
- *Our peace and quiet*
- *Our safety.*

A mixed-method *Community Satisfaction Survey* was commissioned by the Council in 2018 (responded by 616 residents). Results were weighted to provide a balanced view of responses. The survey identifies that 84% of the residents rate the quality of life living in the Sutherland Shire as Excellent or Very Good. The survey confirms that the most valued aspect of living in the LGA are the surrounding/ access to beautiful beaches, parks and nature

¹² SESLHD 2020, "Sutherland Hospital to receive long-awaited MRI machine," < <https://www.seslhd.health.nsw.gov.au/news/sutherland-hospital-to-receive-long-awaited-mri-machine> >

reserves, mentioned by over half of the respondents. Highest priority issues within the Shire thinking of the next 10 years were identified as managing traffic congestion (mentioned by 43%), managing development (37%), and ensuring the infrastructure/ services to cater for the growing population, noted by fifth.

7.4 Data considerations for this assessment

We note that the community and stakeholder perspectives are primarily based on engagement activities that require an active interest to participate. This may lead to over-representation of the voices of certain community or stakeholder groups (e.g. older women are more likely to have time and interest to participate in community meetings) and underrepresentation of others, and may hence be biased to an extent.

However, the Council and Health Infrastructure approaches appear well considered and engagement activities broad enough to gauge and represent a range of community views to adequately inform the Social Impact Assessment.

8.0 Social Impact Assessment

8.1 Assessment framework and scope

As the proposed development classifies as a State Significant Development, this SIA has been prepared based on the *Draft SIA Guideline* (NSW DPIE 2020), as per the SEARs. Social factors and matters identified in the *Sutherland Shire DCP Social Impact Evaluation* guidelines have been considered as part of the analysis (see comparison tables of the social factors of the DPIE and Council guidelines in **Section 2.0**.)

This assessment considers the potential impact on the community and social environment should the social impacts envisaged occur, compared to the baseline scenario of the existing use of the site and social context.

The purpose of this social impact analysis is to:

- Identify, analyse and assess any likely social impacts, whether positive or negative, that people may experience at any stage of the project lifecycle, as a result of the project
- Investigate whether any group in the community may disproportionately benefit or experience negative impacts and proposes commensurate responses consistent with socially equitable outcomes
- Develop social impact mitigation and enhancement options for any identified significant social impacts.

Ultimately, there can be two main types of social impacts that may arise as a result of the proposed development. First, direct impacts can be caused by the project which may cause changes to the existing community, as measured using social indicators, such as population, health and employment. Secondly, indirect impacts that are generally less tangible and more commonly related to matters such as community values, identity and sense of place. Both physically observable as well as psychological impacts need to be considered.

This study identifies the following key social factors relevant to the assessment of social impacts of the project:

- Way of life
- Health and wellbeing
- Accessibility
- Community
- Culture
- Surroundings
- Livelihoods

Impacts on decision-making systems were identified as negligible as part of the SIA Scoping stage and have therefore not been assessed in detail in this report.

8.2 Impact assessment factors and responses

The following section sets out the assessment of social impacts arising from the proposed development and recommended responses, including measures to enhance social benefits and mitigate potentially negative impacts, across the suite of factors set out in the DPIE SIA Guideline. The assessment has been based on the information available to date, and is primarily a desktop study, informed by a review and analysis of publicly available documents relevant to the precinct.

It includes a risk assessment of the degree of significance of risk, including the envisaged duration, extent, and potential to mitigate/enhance and likelihood of each identified impact. The social impact significance matrix provided within the DPIE Draft *Social Impact Assessment Guidelines (2020)* (see Figure 18) has been adapted for the purposes of undertaking this social and impact assessment.

Each impact has been assessed and assigned an overall risk that considers both the likelihood of the impact occurring and the consequences should the impact occur. The assessment also sets out recommended mitigation, management and monitoring measures for each identified matter.

		Magnitude level				
		1 Minimal	2 Minor	3 Moderate	4 Major	5 Transformational
Likelihood level	A Almost certain	Medium	Medium	High	Very High	Very High
	B Likely	Low	Medium	High	High	Very High
	C Possible	Low	Medium	Medium	High	High
	D Unlikely	Low	Low	Medium	Medium	High
	E Very unlikely	Low	Low	Low	Medium	Medium

Figure 18 Social impact significance matrix

Source: NSW Department of Planning and Environment, 2020, *Technical Supplement to support the Social Impact Assessment Guideline for State-significant projects (Draft)*, (adapted from Esteves A.M. et al. (2017) *Adapting social impact assessment to address a project's human rights impacts and risks*, *Environmental Impact Assessment Review* 67, 73–87.)

8.3 Key affected communities

This assessment covers both the Primary Study Area (PSA), which is expected to experience social impacts associated with the temporary construction activities and some of the future operational impacts, as well as the broader social localities (Secondary Study Area/SSA) that are likely to experience the resulting benefits from the operational phase of the project. These study areas are shown in **Section 6.0**.

Key communities to experience social impacts and/ or benefits of the project can be grouped as follows:

- Hospital communities (staff, volunteers, suppliers etc)
- Patients attending the health facilities within the hospital precinct, their carers and visitors
- Neighbouring residents, including aged care living residents
- Neighbouring businesses
- Local area workers
- Visitors to other institutions and businesses within walking distance of the area
- Users of Kingsway
- Temporary construction workers in the area.

8.4 Impact assessment factors and responses

8.4.1 Way of life

Potential impacts

During construction:

- Potential negative way of life impacts associated with changes to daily working and living routines and the environment of the Sutherland Hospital. Consultation with Sutherland Hospital staff and stakeholders has highlighted that proactively minimising disruption to the hospital environment, and maintaining operational continuity for The Sutherland Hospital throughout the project implementation is a core concern of the project team. In addition, it is a key stakeholder priority to ensure that patient experience is not affected during the construction period, and remains at a high level throughout the project implementation. To minimise potential impacts to way of life:
 - The proposed development has been carefully staged to ensure that operational capacity during the construction period is never reduced beyond current levels.
 - The extension of the Sutherland Hospital will be completed and operational prior to commencing refurbishment of existing facilities.
 - The Sutherland Hospital's Infection Control Manager has been proactively engaged throughout the project to minimise risk of infection to staff and consumers.
- Temporary negative impacts to way of life associated with the noise, dust and vibration caused by the construction activity at the site, which may result in disruption and associated inconvenience for The Sutherland Hospital community, patients, visitors, and local residents, other workers and visitors in the immediate vicinity. The impacts may disproportionately impact following groups:
 - Workers at The Sutherland Hospital: Due to construction taking place in "live" hospital environment, there may be impacts to the usual working environment and routine of the staff of the hospital and surrounding buildings (e.g. noise or vibration may be disrupting activities in the Hospital building). For example, the new build will be directly adjacent the hospital and ambulance buildings, and the refurbishment will take place inside the existing hospital building that will continue its operations throughout the works. It is noted the project team has engaged extensively with the relevant user groups and stakeholders and the project has been carefully staged to minimise disruption. For example, the construction works have been staged to take place in specific sequences to retain current number of operating theatres at any one time.
 - Visitors to the hospital, including patients and their carers who may be experiencing illness or distress. They may be more sensitive to way of life impacts associated with the construction phase as a result.
 - Residents living along Kingsway and Kareena Road, close to the construction site, may be disrupted by construction noise and dust. It is noted there are various aged care and social housing dwellings near the site, and residents may be more sensitive to various social and wellbeing impacts. It is noted that the proposed works are located within the Hospital site, but some impacts to neighbouring residents may be possible.
 - Note that detailed assessments have been provided with the EIS in relation to noise and vibration, air quality, and visual impact.
- Potential way of life impacts for workers, patients and visitors of the Hospital, as well as surrounding residents and Kingsway users associated with traffic changes during construction at the site, including:
 - Possible changes to preferred mode of transport choice for workers, residents, patients and others accessing the buildings surrounding the construction site.
 - Possible disruption and changes to way of life associated with increased traffic, reduced parking, pressure on parking from construction workers accessing site, truck movements associated with the construction activity on the site, which may result in increased inconvenience or road safety issues in the area.
- Potential way of life impacts associated with changes to access and wayfinding through The Sutherland Hospital site due to the establishment of the construction site, which may result in inconvenience and disruption to staff, patients and visitors moving around the precinct. This may be disproportionately felt by patients and their carers accessing hospital services, who may not be familiar with the neighbourhood or may be experiencing illness or disability, or limited mobility.

Potential impacts

- Potential way of life impacts associated with cumulative construction impacts, i.e. an extended period of disruption due to changed road conditions, noise, dust and changed wayfinding. Local workers, long-term/ repeat patients and neighbouring residents in the PSA may experience “construction fatigue” due to several projects undertaken or planned in the immediate surrounds of the area, including the Sutherland Hospital Stage 1 Redevelopment, recent apartment building completion and proposed Caringbah Medical Precinct immediately east of the site. However, it is noted that The Sutherland Hospital Stage 1 Redevelopment was completed in 2018, and the proposed development is forecast to take place between 2021 and 2023. As such, cumulative impacts are expected to be minimal.

During operation:

- Improvements to way of life and daily routines for staff and visitors of The Sutherland Hospital associated with delivery of high quality, contemporary health care capacity at this site that prioritises functionality and clinical best practice.

The current operating suite at The Sutherland Hospital was built in 1984 and background analysis undertaken by Health Infrastructure has identified that the existing operating theatres are significantly undersized compared to the current standards; the layout is cramped, poorly configured and lacks functionality. Services infrastructure (electrical, mechanical, air conditioning, etc) also require upgrades to align with contemporary standards.

The proposed development would expand and refurbish existing facilities with contemporary high-quality operating theatres, endoscopy suits, associated clinic rooms, a new Central Sterilising Services Department (CSSD), a new MRI and supporting spaces including recovery, day surgery, storage, staff amenities and other clinical and non-clinical support spaces.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with noise and vibration and visual amenity during the construction phase.
- Implement the Staging Plan developed for the project to minimise disruption to the hospital activities.
- Implement the Communications and Consultation Plan developed for the Project ensuring that all stakeholders (incl. surrounding residents, workers, patients, carers, visitors, and other stakeholders) are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Explore opportunities to incorporate staff and consumer feedback and priorities into the design of the projects non-clinical spaces and the reflective garden.
- Implement the Change Management Plan developed for the Project to support the transition from the current working environment to the future working environment delivered by the proposed development.
- Consider opportunities for new accessways and connection points to the site to be designed to enhance the connectivity to the surrounding neighbourhood (e.g. ensure adequate wayfinding and pedestrian connections to bus stops along Kingsway and Kareena Road, the future Caringbah Medical Precinct, Caringbah shopping strip, etc)
- Consider opportunities to enhance pedestrian connections between the site and surrounding health infrastructure (e.g. Kareena Private Hospital) to ensure that workers, patients and visitors are able to easily access surrounding facilities in the Caringbah Medical Precinct (e.g. ensuring surrounding walking paths are level and well-maintained, safe, well-sign posted).
- Ensure pedestrian connections between the site and surrounding health facilities are accessible to people experiencing reduced mobility (e.g. ensuring surrounding walking paths are level and well-maintained, there are frequent resting places).
- Develop an operational plan of management to monitor the impact of the expanded hospital operations on staff and other stakeholders.

Potential impacts	
Summary:	
Overall impact	<p>Overall improved access to high quality health care facilities at the Sutherland Hospital would have a significant positive benefit to way of life. The redevelopment of the site, if impacts associated with construction are well mitigated, will ensure positive social outcomes for the community.</p> <p>Negative social impacts associated with way of life are medium during construction, but low during operation:</p> <ul style="list-style-type: none"> • Construction: C3 (possible moderate) • Operation: D1 (unlikely minimal)
Likelihood	Short term construction impacts with longer term positive impacts associated with improved contemporary health care facilities on this site.
Duration	Operational benefits are long term
Severity/ sensitivity	High sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	Construction impacts would likely impact workers, patients, residents and visitors in the PSA. Provision of improved health care facilities would impact residents of and workers living across the SSA and beyond.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.4.2 Health and wellbeing

Potential impacts
<p><u>During construction:</u></p> <ul style="list-style-type: none"> • Potential temporary changes to the use of the health infrastructure at this site due to construction taking place in "live" hospital environment. It is noted the project team has engaged with the relevant user groups and stakeholders and the project works have been carefully staged to minimise disruption and maintain the accessibility of health infrastructure throughout construction. For example, the works have been planned to take place in specific sequences to retain current number of operating theatres at any one time. • Potential wellbeing impacts for residents, hospital staff, and other workers, residents and visitors in the area, associated with construction dust, noise and vibration. Many visitors to The Sutherland Hospital (i.e. hospital patients and their carers) are likely to be experiencing illness, disability or distress, and may be therefore disproportionately impacted by construction impacts (e.g. visitors with existing respiratory conditions). • Cumulative impacts to wellbeing – ongoing construction in this area (The Sutherland Hospital Stage 1 Redevelopment, recent apartment buildings completed and proposed Caringbah Medical Precinct immediately east of the site) has the potential to cause local residents, precinct staff and patients psychological stress and deteriorated health. However, it is noted that The Sutherland Hospital Stage 1 Redevelopment was completed in 2018, and the proposed development is planned to take place between 2021 and 2023 and as such cumulative impacts are expected to be minimal. <p><u>During operation:</u></p> <ul style="list-style-type: none"> • Positive social benefits associated with improved access to health facilities on this site. The proposed project will deliver increased capacity at The Sutherland Hospital, providing additional surgery, inpatient and care services leading to improved health outcomes of the residents of the Sutherland Shire and beyond. The key components of the project include:

Potential impacts

- The operating theatres will increase from five to eight, as well as the endoscopy suits increasing from one to two, resulting in a total of 10 spaces with associated clinic rooms.
- Supporting spaces including recovery, day surgery, storage, staff amenities and other clinical and non-clinical support spaces.
- A new Central Sterilising Services Department will be built immediately above the operating theatres.
- A new MRI space will be built immediately below the operating theatres. It is noted that currently, inpatients requiring MRI scans have to be transferred to St George Hospital or private facilities.

The new, purpose-built operating theatres have been designed and built in consultation with The Sutherland Hospital staff and patients to create facilities and services that respond to the needs of patients, carers, families, local residents and the community.

- Positive benefits to wellbeing associated with improvements to work environments on this site, associated with contemporary and high-quality new and refurbished clinical and non-clinical spaces, which would enable improved quality of care for patients at The Sutherland Hospital. The current operating suite at The Sutherland Hospital was built in 1984 and background analysis undertaken by Health Infrastructure has identified that the existing operating theatres are significantly undersized compared to the current standards; the layout is cramped, poorly configured and lacks functionality. Services infrastructure (electrical, mechanical, air conditioning, etc) also require upgrades to align with contemporary standards.
- Positive health and wellbeing benefits associated for staff, patients and visitors associated with the delivery of a well-designed building, including provision of meeting and resting places, including a new reflective garden in the undercroft of the new building, new planting on the site, and arts program reflecting the local heritage and Aboriginal history. The proposed development would provide space for reflection, restoration and relaxation, as well as social interaction.
- Cumulative improved wellbeing benefits associated with the proposed development's contribution to the growth of the Caringbah Medical Precinct, which would enhance accessibility of health and wellbeing services in the Sutherland LGA.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with noise and vibration and visual amenity during the construction phase.
- Implement the Staging Plan developed for the proposed development to minimise disruption to the hospital activities.
- Implement the Communications and Consultation Plan developed for the Project ensuring that all stakeholders (including surrounding residents, workers, patients, carers, visitors, and other stakeholders) are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Implement the Change Management Plan developed for the Project to support the transition from the current working environment to the future working environment delivered by the proposed development.
- Encouraging better use of pedestrian connections between the site and surrounding current and future facilities (e.g. recent Stage 1 and future expansions of the hospital, the Caringbah Medical Precinct, Caringbah shopping strip) to encourage active transport to and from The Sutherland Hospital.
- Explore opportunities to incorporate staff and consumer feedback and priorities into the design of the projects non-clinical spaces and the reflective garden. As many components of the proposed development are clinical spaces, such as operating theatres and an MRI, the proposed development needs to conform to regulatory standards for health facilities.
- Consider further opportunities to enhance staff and patient access to green to green space and fresh air to improve health and wellbeing of precinct consumers and staff.

Potential impacts	
Summary:	
Overall impact	<p>Overall improved health facilities at the Sutherland Hospital site would have a significant positive benefit to health and wellbeing. The redevelopment of the site, if impacts associated with construction are well mitigated, will ensure positive health and wellbeing outcomes for the community. Negative social impacts associated with health and wellbeing are medium during construction, but low during operation:</p> <ul style="list-style-type: none"> • Construction: C3 (possible moderate) • Operation: D1 (unlikely minimal)
Likelihood	Positive impacts of the proposed development are highly likely.
Duration	Operational benefits are long term.
Severity/ sensitivity	High sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	Construction impacts would likely impact residents and workers in the PSA, as well as Westmead Health Precinct patients and carers. Access to improved health care facilities and associated amenity would impact the resident community and the hospital staff living across the SSA and beyond.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.4.3 Accessibility

Potential impacts

The proposed development may have the following potential social impacts with relation to accessibility, including how people access and use infrastructure, services and facilities.

During construction:

- Potential changes to pedestrian and vehicular access to and use of health infrastructure surrounding the site, such as The Sutherland Hospital buildings and the adjacent ambulance station building and parking, noting that the construction is taking place in "live" hospital environment. Key considerations include:
 - Majority of the works will take place inside the existing building. The new build component of the building is situated between the hospital and the ambulance station buildings.
 - Establishment of hoarding and changes to the streetscape associated with the construction phase may affect wayfinding and access for health care workers, hospital users and visitors.
 - Reduced or temporarily relocated parking, truck movements associated with the construction activity may impact accessibility across the site.

It is noted the project team has engaged with the relevant user groups and stakeholders and the project works have been carefully staged to minimise disruption. For example, works have been planned to take place in specific sequences to retain current number of operating theatres at any one time.

- Some hospital consumers (including patients, their families, visitors and volunteers) are likely to experience illness, disability or distress, and may therefore disproportionately impacted by accessibility issues.
- Potential reduced accessibility and inconvenience associated with construction-related traffic flows, increased traffic, reduced parking, truck movements on the streets surrounding the site.

Potential impacts

During operation:

- Improved accessibility of health services and facilities in the Sutherland Shire and SESLHD, to meet the needs of growing and ageing population in the area. Improved accessibility associated with the delivery of:
 - Upgraded and additional operating theatres (the number of operating theatres would increase from five to eight, and endoscopy suites would increase from one to two, with additional supporting spaces)
 - A new Central Sterilising Services Department,
 - New clinical and non-clinical supporting spaces at this site
 - A new MRI and supporting space. It is noted this is a community priority, as currently inpatients requiring scans have to be referred to St Georges Hospital or private clinics.
- Social benefits associated with delivery of health uses at an accessible location, close to bus stops and Caringbah Station, daily living needs, and in an area with a high proportion of elderly and social housing residents who may have increased health care needs. This would contribute towards achieving the Greater Sydney Commission's vision of a "30-minute city" where services, employment and infrastructure are easily accessible to housing.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with noise and vibration and visual amenity during the construction phase.
- Implement the Change Management Strategy and the Staging Plan developed for the project to minimise disruption to the hospital activities.
- Implement the Communications and Consultation Plan developed for the Project ensuring that all stakeholders (including surrounding residents, workers, patients, carers, visitors, and other stakeholders) are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Internal and external wayfinding strategies will be implemented ensure that the hospital site and surroundings are legible and walkable for users of the site during both construction and operation. Stakeholder consultation undertaken by Health Infrastructure has highlighted that improving wayfinding within the site is a priority.
- Encourage use of pedestrian connections to bus stops along the Kingsway and Kareena Road.
- Ensure pedestrian connections between the site and surrounding health facilities are accessible to people experiencing reduced mobility (e.g. ensuring surrounding walking paths are level and well-maintained, there are frequent resting places).
- Consider opportunities to enhance pedestrian connections between the site and surrounding current and future facilities (e.g. the Caringbah Medical Precinct, Caringbah centre) to encourage active transport and to promote physical activities.
- Continue to collaborate with Sutherland Shire Council, Ambulance NSW, TfNSW to identify opportunities to enhance positive benefits to accessibility.

Summary:

Overall impact	Overall improved access to high quality health facilities at the Sutherland Hospital site would have a significant positive benefit to accessibility. Negative social impacts associated with accessibility are medium during construction, but low during operation: <ul style="list-style-type: none"> Construction: C2 (possible minor) Operation: D1 (unlikely minimal)
Likelihood	Positive impacts of the proposed development are highly likely.
Duration	Operational benefits are long term.

Potential impacts	
Severity/ sensitivity	Moderate to high sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	Construction impacts would likely primarily impact workers, patients, visitors and residents in the PSA, access to improved health facilities would benefit patients, carers and workers across the SSA.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.4.4 Livelihoods

Potential impacts

Construction phase:

- Increased access to employment opportunities within the construction sector during the construction phase. While these jobs will be temporary, project based work is typical to the sector. It is estimated that 377 full time jobs will be required for completion of the construction period.
- Potential improved viability of businesses in the area associated with trade from construction workers (for example for cafes and shops in Caringbah).
- Possible property impacts to residential properties close to the site, due to ongoing construction activity in the area. However, it is noted that The Sutherland Hospital Stage 1 Redevelopment was completed in 2018, and the proposed development is forecast to take place between 2021 and 2023.

Operational phase:

- Significant positive benefits to livelihoods associated with contributing towards the ongoing transformation of the Caringbah Medical Precinct. Sutherland Shire Council have highlighted that "collaborat[ing] with health services stakeholders and look[ing] for opportunities to improve employment in the Caringbah Health Cluster" is a key priority.¹³ Council have stated: *"Creating the conditions to support the co-location of new health services near this magnet infrastructure strengthens the hospitals' existing competencies and encourages new synergies. This will support growth and evolve into a health and education cluster to take advantage of our resident workforce skills and allow more people to work locally. It can also address the growing demand for local services from our ageing population."*¹⁴
- Positive benefits to livelihoods associated with delivery of new employment opportunities at The Sutherland Hospital. It is expected the proposed development would generate 146 new fulltime jobs by 2026. In 2016, the health care and social assistance industry was Sutherland Shire's largest (and second fastest growing) employer, accounting for 15% of the total workforce.¹⁵ There is therefore high potential for future employment opportunities at this site to be accessible to local residents of the Sutherland Shire.
- Provision of employment opportunities at this site would also support the Greater Sydney Commission's vision for a "30-minute city" where jobs and services are provided close to housing.
- Potential improved viability of other businesses in the area associated with concentration of employment uses and increased number of patients and visitors at this site, including flow on positive impacts for businesses located along the Kingsway.

Responses / mitigation measures

¹³ Sutherland Shire Council 2020, *Local Strategic Planning Statement*, p.29 < https://www.sutherlandshire.nsw.gov.au/files/sharedassets/website/document-library/corporate-management/strategic-planning/2020-lsps_10-sep-web-signed.pdf >

¹⁴ Sutherland Shire Council 2020, *Local Strategic Planning Statement*, p.62 < https://www.sutherlandshire.nsw.gov.au/files/sharedassets/website/document-library/corporate-management/strategic-planning/2020-lsps_10-sep-web-signed.pdf >

¹⁵ Sutherland Shire Council 2020, *Local Strategic Planning Statement*, p.62 < https://www.sutherlandshire.nsw.gov.au/files/sharedassets/website/document-library/corporate-management/strategic-planning/2020-lsps_10-sep-web-signed.pdf >

Potential impacts

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts to local businesses associated with disruption during the construction phase.
- Develop a communications and engagement strategy to communicate with surrounding residents, workers, patients and carers and visitors to ensure that all stakeholders are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Explore opportunities for socially sustainable procurement methods which prioritise employment of local residents in Sutherland Shire.

Summary:

Overall impact	Provision of new contemporary health care facilities at this location would have a significant positive benefit to livelihoods. The redevelopment of the site, if impacts associated with construction are well mitigated, will ensure positive social outcomes in terms of increased employment opportunities and improved viability of local businesses. Negative social impacts associated with livelihoods are low, both during construction and operation: <ul style="list-style-type: none"> • Construction: C2 (possible minor) • Operation: D1 (unlikely minimal)
Likelihood	Positive impacts of the proposed development are highly likely.
Duration	Operational benefits are long term, construction impacts are temporary.
Severity/ sensitivity	Moderate sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress
Extent	Construction impacts would likely mostly impact the construction sector and provide jobs within the PSA. Whilst it is a vision of both state and local governments to provide employment opportunities closer to home, the number of jobs provided within the new health care facilities and supporting businesses would likely impact workers further across the SSA.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.4.5 Community, including its composition, cohesion, character

Potential impacts

During construction:

- The construction period may disrupt the existing local community surrounding the site, including:
 - Impacts to composition:
 - Changes to the composition of the local community may be experienced during construction, with an increased number of construction workers in the local area. The construction period is forecast to generate 377 jobs.
 - No change to the composition of the local resident population during construction, as the site currently functions as a hospital, and therefore has no resident population.

Potential impacts

- Potential impacts to how the community functions associated with the establishment of a major construction site which may impact daily routines and networks of The Sutherland Hospital staff, patients, visitors, volunteers, local residents and any businesses in the area.

During operation:

- Potential changes to the community composition of The Sutherland Hospital associated with the increased capacity of the hospital, which would increase the number of staff, patients, visitors and volunteers accessing the site, leading to changes in the composition of the community of the site. However, it is noted that the expansion of The Sutherland Hospital is aligned with strategic drivers for the future of the area.
- Potential changes to the community profile associated with delivery of new employment opportunities and expansion of the workforce at this site. It is expected the project would deliver 146 additional jobs in the area. Sutherland Shire Council's *LSPS* recognises that the Caringbah Health Cluster (including The Sutherland Hospital) is a major employment centre in the LGA, and it is a Council priority to attract investment and create more opportunities to improve employment in the health sector in this area.
- Potential benefits to community cohesion and functioning for the staff, patients and visitors of The Sutherland Hospital community associated with the delivery of high quality clinical and non-clinical spaces and staff amenities that reflect contemporary standards to support worker, patient and carer wellbeing. Consumer and staff consultation highlighted that improved wayfinding and amenity of The Sutherland Hospital was a key priority.
- Potential benefits to community cohesion associated with increased provision of landscaped open space (i.e. undercroft) enabling for people to meet and gather. This space would incorporate landscaping, native planting and elements of Aboriginal cultural heritage.
- Potential impacts to sense of place associated with refurbishment and extension of the existing Sutherland Hospital site. However, it is noted that the proposed development is delivering improved spaces that will generally be accessible only to staff (i.e. operating theatres, sterilising department) and therefore impacts to sense of place would be limited to staff.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with disruption to The Sutherland Hospital during the construction period.
- Develop a communications and engagement strategy to communicate with surrounding residents, workers, patients and carers and visitors to ensure that all stakeholders are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Ensure the design includes outdoor gathering spaces that are welcoming to all community members, to provide a transition from interior to exterior use of public space, can facilitate casual social interaction enhancing community cohesion.
- Explore opportunities to include high quality internal and external gathering spaces, breakout spaces and other design elements to support worker wellbeing within the proposed development. However, it is acknowledged that operating spaces, MRIs and other elements of the proposed development are subject to regulatory standards that may restrict flexibility of the design.

Summary:

Overall impact	<p>Overall improved high quality health care facilities at The Sutherland Hospital would have a significant positive benefit to community. The refurbishment and expansion of the site, if impacts associated with construction are well mitigated, will ensure positive social outcomes for the broader community. Any negative social impacts on the community composition and cohesion are medium during construction, but low during operation:</p> <ul style="list-style-type: none"> • Construction: C2 (possible minor) • Operation: D1 (unlikely minimal)
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Potential impacts	
Likelihood	Short term construction impacts with longer term positive impacts associated with improved health care facilities and public space at this site.
Duration	Operational benefits are long term.
Severity/ sensitivity	High sensitivity to impacts, as changes to the site would impact visitors to the hospital who may be experiencing illness, disability or distress.
Extent	Construction impacts would likely impact worker profile in the PSA. Improved landscape undercroft may benefit the local community within the PSA.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.4.6 Culture: shared beliefs, customs, values and stories, and connections to land, places, buildings

Potential impacts
<p><u>Construction phase:</u></p> <ul style="list-style-type: none"> Potential changes to the community's connection to place associated with the construction period, which would result in changes to the appearance and functionality of the site and may disrupt place narratives associated with the site. <p><u>Operational phase:</u></p> <ul style="list-style-type: none"> Potential impacts to connections to place associated with refurbishment and extension of the existing Sutherland Hospital site. However, it is noted that the proposed development is delivering improved spaces that will generally be accessible only to staff (i.e. operating theatres, sterilising department) and therefore impacts to sense of place would be limited to staff. Positive benefits to connection to place associated with the delivery of improved clinical and non-clinical spaces of a high technical and architectural quality. However, it is noted that some spaces within the proposed development would generally be accessible only to staff (i.e. operating theatres, sterilising department) and therefore impacts to sense of place would be limited to staff. Positive benefits to connection to place associated with delivery of a reflective garden within the undercroft, incorporating native plantings, public art and other elements. Positive benefits to culture associated with incorporating Aboriginal design elements within the proposed development, which would assist in maintaining connection to Aboriginal culture and heritage. As part of the consultation process, an Aboriginal Consultative Group has been engaged to identify opportunities to represent Aboriginal culture and perspectives within the proposed development: The purpose of this group is to advise on development of key design principles for achieving a culturally appropriate and sensitive environment.
Responses / mitigation measures

During construction:

- Identify opportunities for public art on hoardings or other placemaking opportunities in consultation with Sutherland Shire Council to reduce visual impact of construction activity and catalyse improved connection to place at the site.

During operation:

- Incorporate Aboriginal and Torres Strait Islander cultural heritage into the design of indoor and outdoor spaces, as per recommendations of the Aboriginal Consultative Group. For example, celebrating connection to Country through selection of colour palette, and providing opportunities for local Indigenous artists to provide artwork within the project.

Potential impacts	
Summary:	
Overall impact	<p>Provision of high quality contemporary health care facilities at this location would have a positive benefit to culture. However, it is noted that the proposed development is delivering improved spaces that will generally be accessible only to staff (i.e. operating theatres, sterilising department) and therefore impacts to sense of place would be limited to staff.</p> <p>Negative social impacts associated with culture are low during construction and operation:</p> <ul style="list-style-type: none"> • Construction: D2 (unlikely minor) • Operation: D1 (unlikely minimal)
Likelihood	Positive impacts of the proposed development are likely, and negative impacts are minor during construction.
Duration	Operational benefits are long term, construction impacts are temporary.
Severity/ sensitivity	High sensitivity to impacts, as changes to the site would impact visitors to the hospital who may be experiencing illness, disability or distress.
Extent	Construction impacts would likely impact stakeholders within the PSA. Operational benefits have the potential to enhance connection to culture for visitors, staff and patients from across the SSA and beyond.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site and communities directly affected. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.4.7 Surroundings – amenity

Potential impacts
<p><u>During construction:</u></p> <ul style="list-style-type: none"> • Impacts on the amenity of the area associated with dust, noise, vibration due to construction activity. It is noted that the construction is taking place in a "live" hospital environment and patients and visitors are considered as sensitive receivers. The patients and carers visiting the facilities may be experiencing disabilities, illness and/or distress that may be particularly sensitive to construction-related disruption. • Changes to the streetscape and appearance of the site associated with construction activity. The establishment of hoarding and changes to the streetscape associated with the construction phase may have an adverse effect on: <ul style="list-style-type: none"> – Visual and aesthetic value of the area. Noting the new build outside the hospital has a relatively small footprint within the hospital precinct and said impacts may be minimal. – Perceptions of night-time safety in the area – for the health-care staff working night-time shifts in the hospital as well as patients and carers needing to access the site (e.g. for emergencies) during the night. – Potential changes to wayfinding around and inside the hospital, that may cause inconvenience and disruption to patients, visitors and staff working on this site. • Changes to work and care environments due to construction taking place in "live" hospital environment. It is noted the project team has engaged with the relevant user groups and stakeholders and the project has been carefully staged to minimise disruption. For example, the works have been planned to take place in specific sequences to retain current number of operating theatres at any one time. <p><u>During operation:</u></p> <ul style="list-style-type: none"> • Improvements to work and care environments on this site, associated with provision of contemporary and high-quality new and refurbished clinical and non-clinical spaces, including new and contemporary operating theatres, endoscopy suits,

Potential impacts

CSSD, MRI space, and supporting spaces including recovery, day surgery, storage, staff amenities providing modern work environment to support staff and patient wellbeing.

- Permanent changes to the surroundings and appearance of the site associated with the delivery of the new build component of the project, new reflective garden, and art elements across the site.
 - Improved amenity and design on this site. It is noted that the new build is situated between two existing buildings, and the design will be in response to local surroundings, referencing the surrounding context of the site (e.g. height of the existing buildings) and materials will be integrated with the existing hospital structure.
 - Landscape design is based on principles of inclusiveness, connection, and safety. A new reflective garden in the undercroft created by the cantilevered new part of the build has been proposed to provide meeting and resting places for the hospital community and consumers. It is envisaged landscaping includes increased tree canopy.
 - Health Infrastructure recognises that exposure to the arts has a beneficial impact on patient wellbeing. Arts on the grounds of The Sutherland Hospital is being designed in collaboration with the Projects Aboriginal Liaison Committee and will reflect the rich local culture recognising Aboriginal history to support connection to country through art, song and creation of a meeting place. It is intended a diverse range of contemporary art experiences, applied in strategic locations, designed to soothe, relax and delight will be developed.
- Impacts to surroundings associated with the increased capacity of the site, including increased noise, traffic and pedestrian movements associated with expanded hospital operations at this site.
- Potential improved perceptions of safety associated with increased activation of the site associated with an increased number of patients and workers on the site, accessing the site and other services in the area. This may be valuable for hospital staff who may be working shift hours and need to access and move around the site during late night hours.

Responses / mitigation measures

During construction:

- Mitigation measures set out in the Construction Management Plan will be implemented to reduce the impacts associated with noise and vibration and visual amenity during the construction phase.
- Implement the Change Management Strategy and Communications and Consultation Plan developed for the Project ensuring that all stakeholders (incl. surrounding residents, workers, patients, carers, visitors, and other stakeholders) are made aware of the timing and likely impact of the construction period. Opportunities for feedback and to ask questions should also be provided.

During operation:

- Explore opportunities to incorporate staff and consumer feedback and priorities into the design of the projects non-clinical spaces and the reflective garden.
- Encourage use of pedestrian connections between the site and surrounding current and future facilities (e.g. the Caringbah Medical Precinct) to encourage active transport and improve perceptions of safety in the areas surrounding the development (e.g. wayfinding, lighting, adequate shade, public art).
- Develop an operational plan of management to monitor the impact of the expanded hospital operations on surrounding residents and other users.

Summary:

Overall impact	<p>Provision of high quality health facilities at this location would have a significant positive benefit to surroundings. Negative social impacts associated with surroundings are medium during construction, but low during operation:</p> <ul style="list-style-type: none"> • Construction: C3 (possible moderate) • Operation: D1 (unlikely minimal)
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Potential impacts	
Likelihood	Positive impacts of the proposed development are highly likely, if strategic and design briefs are executed well, and negative impacts are mitigated during construction (e.g. staging plan to minimise disruption).
Duration	Operational benefits are long term, construction impacts are temporary.
Severity/ sensitivity	Moderate to high sensitivity to impacts - due to construction taking place in "live" hospital environment and presence of people likely to be experiencing illness, disability, distress.
Extent	Construction impacts would likely impact workers, patients, carers, residents and visitors in the PSA, improved surroundings and amenity would affect users of the site and workers and visitors from the broader SSA to the site.
Potential to mitigate/ enhance	Construction impacts would need to be proactively mitigated due to the sensitivity of users of the site. During operation, there is a high ability for workers, patients and visitors to adapt to new facilities on the site, due to their proposed quality and design.

8.5 Monitoring and management framework

To monitor and measure the ongoing impact of the proposed development on relevant stakeholders and the surrounding community, the following framework is recommended:

During construction

- Development of a Construction Management Plan that includes complaints handling procedure for identifying and responding to community issues related to construction impacts.
- Implementation of the Change Management Strategy and Communications and Consultation Plan developed for the Project that detail the processes and communication strategies to ensure that key stakeholders are advised and consulted about major changes and disruptions, and the process for providing feedback and further consultation during the Project.

During operation

- Continued consultation with relevant stakeholders, as identified by Health Infrastructure, to identify emerging social issues and trends.
- Development and implementation of an operational plan of management that mandates data collection (e.g. user surveys) to enable ongoing monitoring of the performance of the proposed facilities over time.

9.0 Concluding comments

An assessment of the social impact categories, as defined within the *Draft Social Impact Assessment Guideline* (DPIE, 2020) and *Sutherland DCP Social Impact Evaluation* (Sutherland Shire Council, 2015) has been undertaken with consideration to the issues identified through the baseline analysis.

Each category of impact is appraised with a significance of the impact based on the likelihood, consequence and social risk rating. Overall, the level of impacts range from being low to moderate, with no major significant negative impacts identified in relation to the proposal.

Key challenges identified with the proposed development relate to:

- Potential temporary negative impacts to way of life associated with the proposed development, associated with changes to the daily living routines and environment of The Sutherland Hospital. Consultation with Sutherland Hospital staff and stakeholders has highlighted that proactively minimising disruption to the hospital environment, and maintaining operational continuity for The Sutherland Hospital throughout the project implementation is a core concern of the project team. In addition, it is a key stakeholder priority to ensure that patient experience is not affected during the construction period, and remains at a high level throughout the project implementation.
- To minimise potential impacts to way of life:
 - The proposed development has been carefully staged to ensure that operational capacity during the construction period is never reduced beyond current levels.
 - The extension of the Sutherland Hospital will be completed and operational prior to commencing refurbishment of existing facilities.
 - The Sutherland Hospital's Infection Controller has been proactively engaged throughout the project to minimise risk of infection to staff and consumers.

The most significant social benefits of the proposal relate to:

- Positive benefits to health and wellbeing and accessibility associated with improved capacity of health facilities on this site. The proposed project will deliver increased capacity at The Sutherland Hospital, providing additional surgery, inpatient and care services leading to improved health outcomes of the residents of the Sutherland Shire and beyond. The key components of the project include:
 - The operating theatres will increase from five to eight, as well as the endoscopy suits increasing from one to two, resulting in a total of 10 spaces with associated clinical spaces.
 - Supporting spaces including recovery, day surgery, storage, staff amenities and other clinical and non-clinical support spaces.
 - A new Central Sterilising Services Department will be built immediately above the operating theatres.
 - A new MRI space will be built immediately below the operating theatres. It is noted that currently, inpatients requiring MRI scans have to be transferred to St George Hospital or private facilities.
- The new, purpose-built operating theatres have been designed and built in consultation with The Sutherland Hospital staff and patients to create facilities and services that respond to the needs of patients, carers, families, local residents and the community.
- Positive benefits way of life and wellbeing associated with improvements to work environments on this site, associated with contemporary and high-quality new and refurbished clinical and non-clinical spaces, which would enable improved quality of care for patients at The Sutherland Hospital. The current operating suite at The Sutherland Hospital was built in 1984 and background analysis undertaken by Health Infrastructure has identified that the existing operating theatres are significantly undersized compared to the current standards; the layout is cramped, poorly configured and lacks functionality. Services infrastructure (electrical, mechanical, air conditioning, etc) also require upgrades to align with contemporary standards.
- Positive impacts to livelihoods associated with increased employment opportunities, including during the construction phase (377 full time jobs) and operational phase (146 full time jobs). In 2016, the health care and social assistance industry was Sutherland Shire's largest (and second fastest growing) employer, accounting for

15% of the total workforce.¹⁶ There is therefore high potential for future employment opportunities at this site to be accessible to local residents of the Sutherland Shire.

- Positive benefits to connection to place associated with delivery of a reflective garden within the undercroft, incorporating native plantings, public art and other elements.
- Positive benefits to culture and surroundings associated with delivering of a landscaped reflective garden, incorporating Aboriginal design elements, which would assist in maintaining connection to Aboriginal culture and heritage and strengthening place narratives.

The overall long-term benefit of the proposed development is considered to be positive, and potential negative impacts can be mitigated through implementation of a robust Construction Management Plan, effective staging and development of a Plan of Management for the site based on ongoing consultation with the staff, consumers and relevant stakeholders.

¹⁶ Sutherland Shire Council 2020, *Local Strategic Planning Statement*, p.62 < https://www.sutherlandshire.nsw.gov.au/files/sharedassets/website/document-library/corporate-management/strategic-planning/2020-lsps_10-sep-web-signed.pdf >

Appendix A. SIA scoping checklist

See attached document.

Appendix B. Social policy context

The following section includes a review of state and local policies, strategies and documents that articulate the desired social outcomes for the area. The following documents have been reviewed:

Premiers Priorities	
NSW Government (2019)	
Purpose and Vision	<p>The Premiers Priorities are a set of goals set by NSW Premier, Gladys Berejiklian, and represent a commitment to making a significant difference to enhance the quality of life of the people of NSW.</p> <p><i>“They aim to tackle many of the issues that have been put in the too hard basket, for too long. Each priority has an ambitious target. They have been set with the purpose of delivering on my government's key policy priorities, being:</i></p> <ul style="list-style-type: none"> <i>• a strong economy</i> <i>• highest quality education</i> <i>• well-connected communities with quality local environments</i> <i>• putting customer at the centre of everything we do</i> <i>• breaking the cycle of disadvantage.”</i>
Key Directions and Strategies	<p><i>The document contains a number of priorities relevant to the proposed development:</i></p> <ul style="list-style-type: none"> <i>• Improving outpatient and community care</i> <ul style="list-style-type: none"> <i>– Reduce preventable visits to hospital by 5% through to 2023 by caring for people in the community.</i> <i>• Improving service levels in hospitals</i> <ul style="list-style-type: none"> <i>– 100% of all triage category 1, 95% of triage category 2 and 85% of triage category 3 patients commencing treatment on time by 2023.</i>
NSW State Health Plan	
NSW Health (2017)	
Purpose and Vision	<p>The NSW State Health Plan is a strategic framework which combines NSW Health's existing plans, programs and policies while setting priorities across the state system. The plan focuses on devolved decision-making, health system integration and increased transparency of funding and performance, while outlining how NSW Health plans to roll out reforms in clinical care.</p> <p>The vision of the NSW Health Plan is to deliver “the right care, in the right place, at the right time”, as well as improving overall health outcomes across the state.</p>
Key Directions and Strategies	<p><i>The plan contains a number of directions and strategies relevant to the proposed development:</i></p> <ul style="list-style-type: none"> <i>• DIRECTION ONE: Keeping People Healthy – Prevention is critical to keeping people healthier and out of hospital. NSW Health already delivers effective public health programs in areas like smoking, obesity, risky alcohol use and early intervention. NSW Health will continue to invest in these programs targeting high risk groups, and will ensure they are monitored, evaluated, and refined to continue to deliver results</i> <i>• DIRECTION TWO: Providing World-Class Clinical Care – Hospitals are core to NSW Health business with the priority being to provide high quality, patient-centred clinical care ‘first time, every time’. NSW Health is streamlining Emergency Department processes, reducing unwarranted variation in care, reducing re-admission rates, introducing new service models to meet emerging health issues, tightening performance standards, and continuing to focus on quality control to deliver better patient care.</i> <i>• STRATEGY FOUR: Designing and Building Future-Focused Infrastructure – NSW Health's facilities are valued at \$19 billion, and as more pressure is placed on the healthcare system, different approaches are required to effectively maintain, develop and manage these assets. Working in collaboration with Local Health Districts and Specialty Health Networks, a major construction and upgrade program is underway across both urban and regional NSW to establish healthcare precincts with public and private services.</i>

NSW Health Strategic Priorities 2019-20

NSW Health (2019)

Purpose and Vision	<p>The Strategic Priorities for 2019-20 provide the health system and stakeholders with a meaningful overview of NSW Health's target outcomes for the year ahead. It builds on and complements the State Health Plan as well as directly aligning with the NSW State Government and Premier's Priorities.</p> <p>Central to NSW Health's Strategic Priorities is a move from "volume to value" and a direct focus on patient experience.</p>
Key Priorities and Objectives	<p><i>The document contains a number of priorities and objectives relevant to the proposed development:</i></p> <ul style="list-style-type: none"> • <i>Priority 1: Keep people healthy</i> • <i>Priority 2: Provide world-class clinical care where patient safety is first</i> <ul style="list-style-type: none"> – <i>Objective 2.1: Continue to embed quality improvement and redesign to ensure safer patient care</i> – <i>Objective 2.4: Ensure timely and equitable access to appropriate care</i> • <i>Priority 7: Deliver infrastructure for impact and transformation.</i> <ul style="list-style-type: none"> – <i>Objective 7.1: Utilise capital investment to drive new models of health service delivery</i>

Building Momentum: State Infrastructure Strategy 2018-2038

Infrastructure NSW (2018)

Purpose and Vision	<p>The NSW State Infrastructure Strategy 2018–2038 builds on the NSW Government's major long-term infrastructure plans over the last seven years. The strategy sets out the government's priorities for the next 20 years, and combined with the Future Transport Strategy 2056, the Greater Sydney Region Plan and the Regional Development Framework, brings together infrastructure investment and land-use planning for our cities and regions.</p> <p>The vision of the NSW State Infrastructure Strategy for metropolitan NSW is as follows: <i>"By 2056, Greater Sydney will be a metropolis of 'three cities' – an Eastern Harbour City, Central River City and Western Parkland City. Residents will be able to access jobs and services within 30 minutes. Newcastle, Wollongong and Gosford will be important economic hubs with key transport and freight gateways, and strong service-based industries"</i></p>
Key Objectives	<p><i>The strategy contains a number of objectives relevant to the proposed development:</i></p> <ul style="list-style-type: none"> • <i>Plan and deliver world-class health infrastructure that supports a 21st century health system and improved health outcomes for the people of NSW</i> <p><i>Guiding principles for the 20-year Health Infrastructure Strategy</i></p> <ul style="list-style-type: none"> • <i>Provide infrastructure that supports the delivery of world-class health care services</i> • <i>Develop fit-for-purpose infrastructure that is planned to align with forecast population growth and demographics</i> • <i>Identify and protect strategic areas for future health infrastructure needs at early stages of land use planning</i> • <i>Support improved health outcomes for people and the community</i> • <i>Support access to quality health services and facilities across the whole of NSW, either through physical access or access to eHealth and telemedicine</i> • <i>Deliver services more efficiently to contribute to managing the forecast increases in costs of providing health services through service improvements and ongoing contestability of service provision (where appropriate) for health infrastructure</i> • <i>Support increasing the flexible use of system capacity and capability to meet the needs of people using and employed by the system at every stage</i> • <i>Continue to seek opportunities to further develop eHealth systems and to encourage patients to access eHealth services where appropriate</i> • <i>Develop and maintain a sound (digital) information system on asset management condition and capacity</i> • <i>Achieve strengthened long-term planning to support the provision of service delivery priorities</i>

Greater Sydney Region Plan: A Metropolis of Three Cities

Greater Sydney Commission (2017)

Purpose and Vision	<p>The Greater Sydney Commission's Greater Sydney Region Plan is a 20-year plan to manage growth and change for Greater Sydney in the context of social, economic, and environmental matters. The plan informs district and social plans, assists infrastructure agencies to plan and deliver for growth and informs the private sector and the wider community of the growth management and infrastructure intentions of the government.</p> <p>The overarching vision of the plan is as follows: "Greater Sydney is Australia's global city; an economic powerhouse of 4.7 million people, endowed with the natural beauty of Sydney Harbour, bushland, beaches and the Blue Mountains. Greater Sydney's people have embraced this place for its opportunities and its potential".</p>
Key Objectives and Strategies	<p><i>The plan contains a number of objectives and strategies relevant to the proposed development:</i></p> <ul style="list-style-type: none"> • <i>Objective 2: Infrastructure aligns with forecast growth – growth infrastructure compact:</i> <ul style="list-style-type: none"> ◦ <i>Strategy 2.1: Align forecast growth with infrastructure.</i> ◦ <i>Strategy 2.2: Sequence infrastructure provision across Greater Sydney using a place-based approach.</i> • <i>Objective 14: A Metropolis of Three Cities – integrated land use and transport creates walkable and 30-minute cities</i> • <i>Objective 21: Internationally competitive health, education, research, and innovation precincts:</i> <ul style="list-style-type: none"> ◦ <i>Strategy 21.1: Develop and implement land use and infrastructure plans for health and education precincts that:</i> <ul style="list-style-type: none"> a. <i>create the conditions for the continued co-location of health and education facilities, and services to support the precinct and growth of the precincts</i> b. <i>have high levels of accessibility</i> c. <i>attract associated businesses, industries and commercialisation of research</i> d. <i>facilitate housing opportunities for students and workers within 30 minutes of the precinct.</i>

South District Plan

Greater Sydney Commission (2017)

Purpose and Vision	<p>The Greater Sydney Commission's South District Plan is a 20-year plan to manage growth in the Canterbury-Bankstown, Georges River and Sutherland LGAs. The plan represents what should be reflected in local planning documents.</p> <p>The overarching vision for the South District, where the site is located, is for a "30-minute city" with "quicker and easier access to a wide range of jobs, housing types and activities ... [to] improve the District's lifestyle and environmental assets".</p>
Key Priorities and Actions	<p><i>The plan contains a number of priorities and actions relevant to the proposed development:</i></p> <ul style="list-style-type: none"> • <i>Planning Priority S3: Providing services and social infrastructure to meet people's changing needs.</i> <ul style="list-style-type: none"> – <i>Action 8: Deliver social infrastructure that reflects the needs of the community now and in the future.</i> • <i>Planning Priority S8 Growing and investing in health and education and Bankstown Airport trade gateway as economic catalysts for the District.</i> <ul style="list-style-type: none"> – <i>Action 25: Facilitate health and education precincts that;</i> <ul style="list-style-type: none"> a. <i>create the conditions for the continued co-location of health and education facilities, and services to support the precinct and growth of the precincts</i> b. <i>provide high levels of accessibility</i> c. <i>attract associated businesses, industries, and commercialisation of research</i> d. <i>facilitate housing opportunities for students and workers within 30 minutes of the precinct.</i> • <i>Planning Priority S12: Delivering integrated land use and transport planning and a 30-minute city</i> <ul style="list-style-type: none"> – <i>Action 50: Prioritise;</i> <ul style="list-style-type: none"> a. <i>public transport projects to the Harbour CBD to improve business to business connections and support the 30-minute city</i>

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	<ul style="list-style-type: none"> b. <i>infrastructure investments, particularly those focused on access to the transport network, which enhance walkability within two kilometres of metropolitan or strategic centres or 10 minutes walking distance of a local centre</i> c. <i>infrastructure investments, particularly those focused on access to the transport network, which enhance cycling connectivity within five kilometres of strategic centres or 10 kilometres of the Harbour CBD.</i>

South Eastern Sydney Local Health District Journey to Excellence Strategy 2018-2021

SESLHD (2018)

Purpose and Vision	<p><i>The South Eastern Sydney Local Health District Journey to Excellence Strategy outlines the health district's vision and strategic priorities in partnership with staff, community stakeholders and other service providers. The strategy aims to guide the SESLHD towards transformational change over the coming years.</i></p> <p><i>The SESLHD's vision is "exceptional care, healthier lives", and acknowledges the district's responsibility to provide the best possible, compassionate care when people need it, as well as enabling its community to stay healthy and well.</i></p>
Key Priorities and Actions	<p><i>The plan contains a number of priorities and actions relevant to the proposed development:</i></p> <ul style="list-style-type: none"> • <i>Safe, person-centred and integrated care:</i> <ul style="list-style-type: none"> – <i>Everyone in our community will have access to safe, compassionate and high-quality healthcare. That care should be provided either at home, or as close to home as possible.</i> • <i>Better value:</i> <ul style="list-style-type: none"> – <i>We will deliver value to our patients and community through maintaining financial sustainability and making investments consistent with our vision.</i> • <i>Community wellbeing and health equity:</i> <ul style="list-style-type: none"> – <i>We will work together with our partners to achieve health, wellbeing and equity for our shared communities.</i> • <i>Workforce wellbeing:</i> <ul style="list-style-type: none"> – <i>We will create an environment where our people will be accountable and can be happy, well and supported to reach their potential.</i> • <i>Foster research and innovation:</i> <ul style="list-style-type: none"> – <i>We will focus on translating research and innovation into clinical service models that deliver positive health outcomes.</i>

Sutherland Shire Local Strategic Planning Statement

Sutherland Shire Council (2020)

Purpose and Vision	<p><i>The Draft Sutherland draft LSPS responds to a number of key strategic documents, including the GSC's Greater Sydney Region Plan and South District Plan as well as the Community Strategic Plan. The LSPS outlines the vision and planning principles to guide land use decisions for the next 20 years. It identifies a series of priorities to deliver specific land use outcomes for infrastructure, housing, town centres, employment, transport, recreation, and the environment.</i></p>
Key Priorities and Actions	<p><i>The plan contains a number of priorities and actions relevant to the proposed development:</i></p> <ul style="list-style-type: none"> • <i>Planning Priority 1: Align Planning to Existing Infrastructure:</i> <ul style="list-style-type: none"> ○ <i>Consider the capacity of existing infrastructure, committed improvements, and forecast demand from the existing and anticipated population when planning for the future.</i> • <i>Planning Priority 13: Grow Caringbah Health Cluster</i> <ul style="list-style-type: none"> ○ <i>Collaborate with health services stakeholders and look for opportunities to improve employment in the health sector in the Caringbah Health Cluster.</i> <p><i>Council have outlined a series of goals they hope to achieve which are listed below:</i></p> <ol style="list-style-type: none"> 1. <i>Work together in Sutherland Shire as a community informed and engaged in its future</i>

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2. Enhance and protect the beautiful and healthy natural environment of Sutherland Shire
3. Sustain Sutherland Shire as a caring and supportive community.
4. Evolve Sutherland Shire's culturally rich and vibrant community.
5. Progress the Sutherland Shire as a prosperous community for all.
6. Sustain Sutherland Shire as a liveable place where we can all continue to enjoy a high quality of life.

Sutherland Shire Community Strategic Plan

Sutherland Shire Council (2017)

Purpose and Vision	<p>The Sutherland Shire Community Strategic Plan outlines the community's aspirations and long-term vision for the Sutherland Shire and has been prepared by Council in collaboration with, and on behalf of residents, businesses, all levels of government and local agencies, to help build a vibrant and sustainable future for the local community.</p> <p>The vision of the Community Strategic Plan is as follows: <i>"A connected and safe community that respects people and nature, enjoying active lives in a strong local economy."</i></p>
Key Strategies and Actions	<p>The plan contains a number of strategies and actions relevant to the proposed development:</p> <ul style="list-style-type: none"> • Strategy 3.1: The community has access to services, programs, and facilities to support and enhance health and wellbeing. <ul style="list-style-type: none"> – Action 3.1.1: Plan, provide and advocate for quality medical, specialist, preventative and allied health services, and facilities. – Action 3.1.2: Deliver community services and facilities that respond to the changing needs of our community. – Action 3.1.3: Provide emergency, rescue and public health and safety services which support community wellbeing.

Caringbah Medical Precinct Development Control Plan

Sutherland Shire Council (2015)

Purpose	<p>The Caringbah Medical Precinct Development Control Plan outlines the development controls, strategies, and objectives of the proposed Caringbah Medical Precinct. The Plan presents the location and description of the development, as well as the anticipated outcomes.</p>
Key Objectives	<p>The plan contains a number of objectives relevant to the proposed development:</p> <ul style="list-style-type: none"> – 7.1 Objectives <ol style="list-style-type: none"> 1. Promote the development of Health Services Facilities to meet the current and future health needs of Shire residents and provide specialist medical services to the region. 2. Obtain efficiency benefits of co-locating new medical facilities in close proximity to Sutherland Hospital and Kareena Private Hospital 3. Increase employment self-containment for the Sutherland Shire by providing more local job opportunities in medical services. 4. Encourage walking and the use of public transport by developing a cluster of new medical facilities within walking distance of Caringbah Centre. 5. Assist in revitalizing Caringbah Centre with more local medical facilities. 6. Facilitate mixed use developments comprising Health Services Facilities and residential flats which provide amenity for all residents, workers, and visitors.

Appendix C. Community Profile

Category	Primary Study Area	Sutherland Shire LGA	South Eastern Sydney LHD	Greater Sydney
Household Income				
Median household income (annual)	\$77,280	\$103,200	\$98,610	\$92,200
Variation from Greater Sydney median	-16.2%	11.9%	7.0%	na
% of Households earning \$2,500pw or more	26.9%	37.0%	35.3%	31.8%
Age Structure				
Median Age (years)	44.0	40.0	37.0	36.0
Country of Birth				
Australia	78.4%	81.1%	61.9%	61.9%
Aboriginal and Torres Strait Islanders	1.4%	1.1%	0.9%	1.4%
Other Major English-Speaking Countries	8.2%	7.6%	9.1%	7.6%
Other Overseas Born	13.4%	11.3%	29.0%	30.5%
% speak English only at home	82.3%	73.7%	43.2%	62.5%
Household Composition				
Couple family with no children	21.2%	25.6%	24.9%	23.8%
Couple family with children	34.8%	40.2%	34.4%	37.5%
Couple family - Total	56.0%	65.8%	59.3%	61.3%
One parent family	12.4%	10.0%	9.6%	11.1%
Other families	0.6%	0.9%	1.5%	1.3%
Family Households - Total	69.0%	76.7%	70.5%	73.7%
Lone person household	28.4%	21.0%	23.3%	21.7%
Group Household	2.6%	2.3%	6.3%	4.6%
Dwelling Structure (Occupied Private Dwellings)				
Separate house	66.1%	64.0%	43.1%	57.2%
Semi-detached, row or terrace house, townhouse etc.	24.8%	13.6%	15.1%	14.0%
Flat, unit or apartment	9.1%	22.0%	41.1%	28.2%
Other dwelling	0.0%	0.5%	0.7%	0.5%
Occupancy rate	92.5%	93.5%	92.2%	92.3%
Average household size	2.6	2.7	2.6	2.8
Tenure Type (Occupied Private Dwellings)				
Owned outright	36.5%	38.1%	32.6%	30.0%
Owned with a mortgage	34.2%	39.5%	30.9%	34.2%
Rented	27.4%	21.6%	35.8%	35.1%
State or territory housing authority	7.1%	2.3%	3.2%	4.2%
Other tenure type	1.9%	0.8%	0.7%	0.7%
Attending Education (% of those attending)				
Pre-school	11.1%	8.5%	6.9%	6.9%
Infants/Primary Total	35.1%	36.0%	29.4%	32.2%
Secondary Total	29.3%	27.9%	22.9%	25.0%
Technical or Further Educational Institution	8.5%	7.2%	7.1%	7.6%
University or other Tertiary Institution	14.5%	18.1%	29.4%	24.2%
Other type of educational institution	1.5%	2.3%	4.2%	4.0%
% of total population attending education	20.9%	24.1%	24.8%	25.2%
Highest Level of Education Completed (% of population aged 15 years and over)				
Year 12 or equivalent	53.8%	61.4%	72.2%	67.5%
Year 9-11 or equivalent	39.5%	35.5%	23.3%	26.7%
Year 8 or below	6.0%	2.7%	3.5%	4.4%
Did not go to school	0.6%	0.4%	0.9%	1.5%
Highest Level of Non-School Qualification				
Postgraduate degree	7.6%	8.5%	14.5%	13.9%
Graduate diploma or certificate	2.3%	3.5%	3.4%	3.4%
Bachelor degree	28.6%	29.1%	38.8%	36.4%
Advanced diploma or diploma	18.5%	20.4%	17.5%	17.7%
Certificate	43.0%	38.5%	25.7%	28.6%
% of persons with non-school qualifications (15 years and above)	50.4%	57.2%	55.9%	52.7%
Employment Status				
Unemployed/ looking for work	2.9%	3.5%	4.9%	6.0%
Labour force participation rate	58.3%	68.9%	67.4%	65.6%
Need for Assistance				
With Need for Assistance	5.1%	4.3%	4.3%	4.9%
No Need for Assistance	89.9%	91.2%	89.1%	88.7%
Need not stated	5.0%	4.5%	6.7%	6.4%