

21 November 2011

Mr Sam Haddad
Director-General
Department of Planning
GPO Box 39
SYDNEY NSW 2001

Dear Mr Haddad,

**Development Application for St George Hospital Emergency
Department and Sub Acute Mental Health
Request for Director Generals Environmental Assessment
Requirements**

In accordance with Clause 3 of Schedule 2 of the *Environmental Planning and Assessment Regulation 2000* (EP&A Regulation) and Schedule 1 of State Environmental Planning Policy (State and Regional Development) 2011 (SRD SEPP), Health Infrastructure request the issue of Director Generals Environmental Assessment Requirements (DGRs) for the new Emergency Department and Sub Acute Mental Health facility at St George Hospital. The purpose of this letter is to provide a preliminary environmental assessment and other supporting documentation to allow for the DGRs to be issued.

Background and need for the project

The project involves two key elements of health service delivery at the St George Hospital (SGH). These are the development of a new Emergency Department and a Sub Acute Mental Health facility for older people. As these have different background and drivers they are described separately below.

Emergency Department

The objective for the Emergency Department (ED) is to increase its capacity meet current and future demand projections and enable the adoption of a more efficient model of care.

The ED at SGH currently faces five major challenges:

- current levels of demand are in excess of its capacity,
- population growth will further increase demand,
- the Federal Government has set new benchmarks for performance of EDs (4 hour waiting targets) which St George ED will not be able to meet in its current state,
- the current configuration of the ED is not conducive to implementing the enhanced models of care required of the department, and
- The current building and associated infrastructure is at the end of its life cycle.

In 2010 the then Area Health Service completed a service statement which reflects SGH's role as a Major Trauma Service and which has been used as the basis for developing the concept options. The main priorities are:

- Provide a fast track
- Expand paediatrics
- Increase resuscitation capacity from 3 to 5 bays
- Expand waiting and triage
- Expand adult acute
- Expand mental health and isolation facilities
- Off street ambulance drop off and parking
- Expand education and offices
- Expand Emergency Medical Unit

St George ED faces considerable and challenging site constraints including:

- the Emergency Department is landlocked which prevents easy expansion in any direction,
- the Hospital campus has very limited available space which prevents easy replacement of ED in an alternative position within the site,
- St George ED functions as a major trauma centre requiring immediate proximity to associated clinical functions such as theatres, ICU and helipad. This prevents the ED being located off the hospital campus, and
- the existing building is reaching the end of its life cycle, with significant investment required to continue.

The Emergency Department is and will continue to be a level six emergency service supporting St George Hospital as a principal referral hospital and major trauma service for Southern Sydney and Southern NSW. The secondary catchment of the St George Emergency Department is composed of Kogarah, Rockdale and Hurstville, with the tertiary catchment being Southern Sydney and Southern NSW. It also provides a default overflow role to Southern Eastern Local Health District for Neurosurgery, ENT, Plastics, Cardiothoracic Surgery and Facio-maxillary Surgery.

Presentations to SGH for emergency care have increased by 5% per year over the past five years which is higher than population growth. The presence of a revitalised St George Hospital Emergency Department in the heart of the major centre will create value by reducing the distress and disability associated with unattended emergent illness. The growth of the capacity and functionality of the Emergency Department at the St George Hospital will provide vitally needed social infrastructure to support the State Government's objectives.

Specialist Mental Health Service for Older People

Sub-acute mental health services have a primary focus on intervention to reduce functional impairments that limit the independence of patients and promote recovery. These services provide specialist clinical assessment, treatment and rehabilitation in a sub-acute inpatient setting where this provides the least restrictive and most appropriate care setting. There is an expectation that patients will improve sufficiently for discharge to a mainstream service or community setting with additional support from General Practitioners, Specialist Mental Health Services for Older People (SMHSOPs) and other service providers.

There are no funded SMHSOP mental health beds within the St George/Sutherland Hospitals Health Services (SGSHHS) resulting in sub-optimal acute mental health inpatient care for people aged 65 years and older in the area. The National definition for sub-acute care is almost always older adults with late onset psychiatric disturbance, or a physical condition accompanied by severe psychiatric or behavioural disturbance, and for whom the primary treatment goal is improvement in health, modification of symptoms and enhancement in functional behaviour or quality of life.

Sub-acute care provides multidisciplinary assessment and management of complex medical, psychiatric and functional needs and provides time limited intervention aimed at assessing and managing often complex conditions and maximising independence and quality of life.

The SGSHHS Service has a population of 60,952 people aged 65 years and older (Census 2006). The SGSHHS also has a high population of "older old" adults aged over 85 years. This population has greater physical health care needs and co-morbidities than the "young old". There is a strong correlation between increased age and the demand for sub-acute care.

Estimates, based on the above figures, predict the population over 65 years of age with a diagnosable mental health problem of varying severity to be approximately 7,700. The above data demonstrates a high priority need for acute and sub-acute SMHSOP beds for the SGSHHS.

While there are a total of 12 notional beds within the acute adult units at Sutherland and St George Hospitals. The design of the units and the fact that older people are accommodated with younger psychotic, manic and often volatile patients exposes them to increased risk of physical harm. The proposed sub-acute model of care seeks to mitigate this risk by providing a safe and therapeutic environment which is purpose built and integrated with community mental health services.

Alignment with Strategic Health Planning

Emergency Department access and performance is of growing concern to the community and governments. Ongoing media criticism of overcrowded, inadequately resourced and equipped departments is contributing to an increasing perception that public healthcare, in

metropolitan Sydney particularly, is in a continuous state of crisis and not effectively serving the community.

Commonwealth, State-wide and Local Health District strategic planning acknowledges the vital importance of well resourced emergency departments with sufficient capacity at the front line of hospital based health care. This is also true with respect to Mental Health which has seen a greater focus in recent Commonwealth and State health reforms.

Commonwealth Government Strategic Directions

Several reforms are identified by Commonwealth Government to achieve better access to emergency departments. The introduction of National access targets, together with new funding arrangements to improve access to emergency care through supporting 'emergency access' bed capacity in hospitals are two significant components of the National Health and Hospitals Reform Program.

The Commonwealth's fifth priority in this reform is to take action to improve timely access to quality care in public hospitals, particularly care in emergency departments. It recommends that public hospitals with major emergency departments be funded to ensure beds are available at all times for people needing to be admitted from the emergency department. The National access performance target requires all patients requiring public hospital emergency departments to have access to care within four hours.

NSW Health Strategic Directions

In 2008 Commissioner Peter Garling undertook the most significant inquiry ever of the NSW acute care system. The Health Action Plan for NSW is the Government's response to the Garling Report. Stage one of Health Action Plan requires better patient experiences, increased safety, education and new ways of caring. Impacts of the St George Emergency Department redevelopment on these key strategic areas are:

Creating better experience for patients: An enhanced emergency department will provide an appealing and clinically appropriate environment with state of the art equipment. Staff morale will be improved leading to improved responsiveness and patient interactions. Improved functional design will lead to better streaming and screening with improved patient impressions and functional features to promote safety of patients, staff and visitors.

Education for Future Generations: Additional capacity for education and research in the department will promote a strong focus on a learning and innovative culture. This culture will promote strong relationships between experts and novices and the intergenerational transfer of knowledge and skills

New Ways of Caring : Incorporation of capacity to effectively deliver best practice models of care and the enhancement of a learning culture will assist the ED to adopt the best ways of

caring. These new ways will be enhanced by the practical and virtual incorporation of the following models of care:

- streaming of children and adults, and low and high acuity patient,
- fast track care for primary care and low acuity patients including cardiac assessment,
- support for the rapid referral of admitted patients to appropriate short-stay units or specialised longer term beds, these include:
 - Medical assessment Unit (MAU)
 - Emergency Medical Unit (EMU)
 - Rapid Assessment Unit (RAU)
 - Psychiatric Emergency Care Centre (PECC)
- use of Clinical Initiatives Nurse to monitor and provide immediate care for waiting patients,
- use of Nurse Practitioners to promote efficient management of uncomplicated cases,
- provision of specialised teams focused on older person care such as ASETT and Aged Care Assessment Team,
- epidemic management systems,
- disaster management systems,
- safe assessment rooms for delirious and seriously intoxicated patients,
- provision of surge capacity to accommodate seasonal or irregular demand peaks, and
- access to CAPAC and other home care programs to support the early return to home of patients.

Local Health District Strategic Directions

Central Sydney and Illawarra Area Health Healthcare Strategic Service Plan 2010 has as one of its key sixteen healthcare priorities initiatives to enhance access, maximise patient flow, support the continuum of care, and ensure integration between emergency/critical care and other hospital and community based services. The initiatives will strengthen St George Hospital's role as a tertiary referral centre and its State-wide roles in major trauma and cancer care.

Planning for the St George Emergency Department commenced under the auspice of the former South Eastern Sydney and Illawarra Area Health Service. In response to the Commonwealth Hospital and Health Reform Agreement, Area Health Services were dissolved and new Local Health Districts (LHDs) were formed with a revised and strengthened role. St George Hospital is now part of the South Eastern Sydney Local Health District.

Site Context and locality

St George Hospital campus is located in Kogarah, bounded by Gray Street to the south-west, Kensington Street to the north-west, as well as segments of Belgrave and South Streets, and Chapel Street and St George Private Hospital to the south and east. The hospital is sited close to main transportation links including rail (500m from Kogarah Station) and close by Princes Highway for private transport access as well as for ambulance and patient transport. The main entry to the hospital is from Gray Street, and access to the multi-storey car park is

also available adjacent the main Gray St entrance. The existing St George Emergency Department is located on Kensington Street, with ambulance entry and exits both from that street.

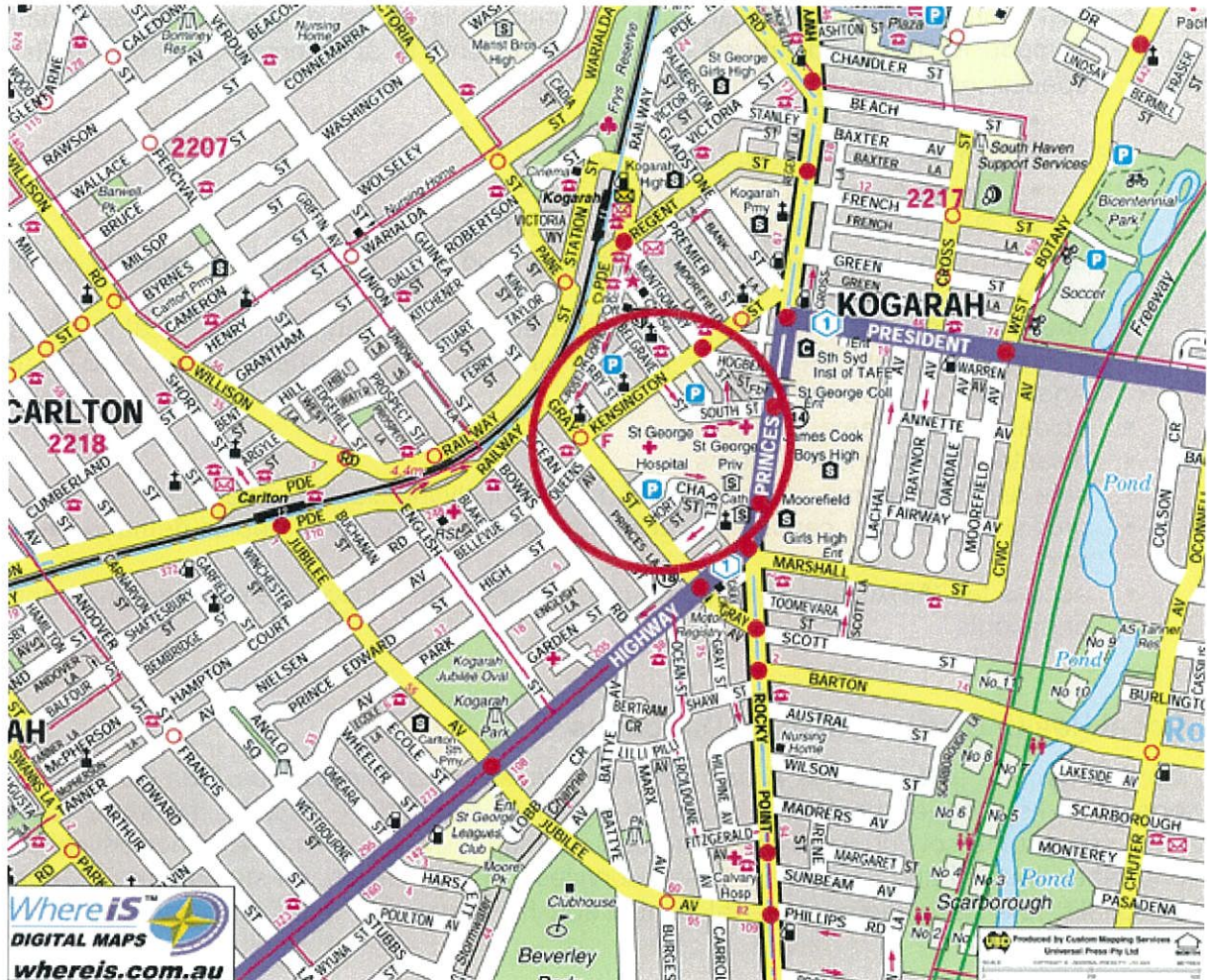


Figure 1 Locality

The locality in which the Hospital Campus is located characterised by a mix of residential, commercial and retail uses with a number of medical centres and doctors' offices located in the vicinity of the hospital. The St George Private Hospital is located adjacent and St Patricks Primary School and Bethany College are also nearby in Chapel Street and the Princes Highway respectively.



Emergency Department

The St George Hospital is a very constricted campus with little space for future expansion and development. This project not only releases space from the old ED, but will be constructed in a manner which provides opportunity to redevelop the campus in line with the Health Services Masterplan for the hospital which is currently being finalised. The building has been designed to accommodate vertical expansion in the future but that is not part of this application.

The existing St George Emergency Department is located on Kensington Street, with ambulance entry and exist both from that street. The proposed new site for the St George Emergency Department is on the Gray Street frontage of the hospital. Ambulance access to ED will be provided via a dedicated entry and exit point set apart from the main entrance driveway to the hospital.

The site for the new Emergency Department is currently occupied by the Maintenance and Engineering workshop and waste management area, all of which will be relocated to as part

of an early works program associated with the project. These works do not form part of this application and are being assessed separately under Part 5 of the *Environmental Planning and Assessment Act 1979* (EP&A Act) via the State Environmental Planning Policy (Infrastructure) 2007. A new loading dock entryway is also being provided, again with access to Gray Street, but kept fully independent of both the ambulance access and the main hospital entry driveway.

The key guiding principles for the design of the ED can be summarised as follows:

- Easy flow of patients through the department without unnecessary exposure to unrelated activities and pedestrian traffic
- Correct functional relationships between the subcomponents of the ED so that staff can carry out their duties with maximum efficiency and patients can be managed safely in the appropriate environment.
- The plan to facilitate and enhance the models of care preferred today, whilst remaining flexible enough to allow for other management styles which may be developed into the future.
- Correct connectivity to other related departments and activities.
- Close compliance with the Schedule of Accommodation and the Australasian Health Facility Guidelines.

Services

There is an underground service tunnel below the existing ED which will remain in situ and has been considered in the engineering design.

Ambulance and service entry roads will require new concrete crossovers at Gray Street and new access roads to the north west and north east of the proposed building. 'Griffith House' located to the north west of the proposed building has local heritage significance and its future is being assessed as part of the early works package.

The capacity of the generator and substation has been analysed and it anticipated that the current generator is in need of upgrading. The existing substation will need to be decommissioned and replaced with two pad mounted kiosks in front of the Gray Street car park.

A new plant room is required to serve the new department which will be located on the 1st floor in between the two lift shafts. The existing hospital chilled water system has sufficient capacity to serve the new emergency department. Medical gases and oxygen tank are to be located adjacent to the theatre block. An audit of the existing steam powered hot water and heating system has been conducted with a view to decentralise the system to improve energy efficiencies.

This sewer main has sufficient capacity to take discharge from the proposed new Emergency Department Building. Sections of existing drainage within the hospital in the vicinity of the proposed ED building may require deviation depending on their depth in relation to the structure.

The new Emergency Department will require a fire hydrant service which will most likely require extension from the existing Tower Block service or a new separate main from Gray Street, depending on the location of street hydrants in Gray Street.

Traffic

A traffic study has been carried out and concluded that there were no negative impacts on pedestrian or vehicle access to the site caused by the development. A swept path analysis of the loading dock area, ambulance entry/exit, service entry/exit and waste handling entry/exit has been carried out and is incorporated in the design proposal.

Environmental Sustainable Design

NSW Health has a comprehensive set of Engineering Services and Sustainable Development guidelines (TS11) which are intended as a handbook to be used during the briefing and design process. These guidelines have been issued to the design team as part of their brief to ensure a fully compliant design is produced. The key sustainable development objectives outlined in TS11 are:

- comfortable and healthy indoor environment (in terms of thermal comfort, visual comfort and indoor air quality)
- minimised non-renewable resource consumption (e.g. energy, water) and environmental impacts (e.g. greenhouse, other air and water emissions, solid waste), and
- cost-effectiveness over its whole life cycle.

These principles are underpinned by the following sustainable development drivers:

- Government Energy Management Policy (GEMP) objectives of the NSW Government's Sustainability Advisory Council NSW Water Conservation Strategy, and
- NSW Government's Waste Reduction and Purchasing Policy (WRAPP). These principles are endorsed by NSW Health and are to form part of the design development for the works at SGH. All design consultants are to confirm their adherence to the principles in TS11.

SGH ED will consider the following initiatives for implementation:

- Energy efficiency generally
- Potential use of solar hot water
- Harvesting of rainwater for watering of adjoining landscaped areas
- Minimisation of non-renewable resource consumption
- Minimisation of solar gain in summer and maximisation in winter by careful design of sun shading and the use of insulation as well as technological options such as solar-efficient glass
- Opportunities for day lighting where viable and where the opportunity exists to assist in improving patient well-being
- Use of renewable energy systems
- Use of environmentally sound materials

The plans are being developed with the basic principles of good environmental design recognising southern Sydney's temperate coastal climate. The project will be certified to conform to the BCA requirements (under Part J) for energy management, as well as the specific energy requirements laid down in the health engineering documentation TS11.

Sub Acute Mental Health Service for Older People

The sub-acute program at St George will provide a 16 bed Sub-acute Mental Health Service for Older Persons located in a largely single storey building which will be connected to the adjacent existing Adult Mental Health Acute Inpatient Unit on South Street. The two existing buildings in this location will be demolished. A shared entry and reception area will be developed to service both the acute and sub acute units. The GFA of the new SAMHSOP is approximately 1180m². The location next to the Acute Mental Health facility provides:

- Drop off for patients;
- Easy access for visitors;
- Clinical adjacency to existing Acute Mental Health service.

The sub-acute inpatient unit will provide integrated care with a seamless transition from acute to sub-acute, community to sub-acute and from the sub-acute setting into the community. The internal and external living areas of the unit will need to be of an increased size to cater for a longer length of stay. Some separation of beds to allow for a mix in patient gender is also required.

The sub-acute mental health inpatient unit for older people will deliver the following benefits:

- Specialist multidisciplinary diagnosis and care planning to optimise symptom management and functional capacity;
- Provision of further assessment and treatment for people with moderate to severe mental health disorders to enable them to transition back into community settings including residential aged care facilities;
- Primary focus on intervention to reduce functional impairments that limit the independence of patients and promote recovery;
- Strengthened capacity for specialist older persons mental health services to provide detailed multidisciplinary assessment and short term admissions;
- Multidisciplinary assessment, clinics, therapeutic outpatient services;
- Reciprocal consultation and liaison service to Aged Care services Development and implementation of health promotion and prevention strategies to promote healthy ageing and reduce the risk factors associated with mental illness in an ageing population;
- Reduce unnecessary acute admissions and reduce the length of stay within acute mental health inpatient units; and
- Integration, outreach and transitional care with community SMHSOP and primary care to promote continuity of care.

The unit would operate 24 hours a day, 7 days a week. Visiting hours would be in line with hospital policy. The project is jointly funded by the Commonwealth and State Governments.

Services

The new 16 bed Mental Health Facility shall be supplied from the existing 750 kVA Kiosk substation that is situated in close proximity. Vos confirm that there is sufficient capacity to support the additional load from the existing electrical services infrastructure. The existing security system in place can be expanded to support the new building. New ventilation systems will be provided as required for the new extension.

The existing site hydraulic service and fire hydrant provisions appear to have sufficient capacities required for the proposed building. Further detailed investigation is being carried out. Cold water pipes shall be extended from the existing meter to service the New Mental Health building. Sewer drainage from the existing Mental Health Centre is connected to the authority sewer main on South Street. The existing Mental Health Centre sewer system is gravity feed system and the new building will be connected the 225mm authority sewer main adjacent to the new build.

The existing Mental Health Centre is currently serviced by an existing authority gas meter located at the entrance to the car park. A new gas service shall be extended and modified from the existing gas main to service the new building.

The Fire hydrant service supply to the existing Mental Health Centre is via connection to authority water main on South Street. The new building fire hydrant service shall be extended from the existing fire hydrant main servicing the existing Mental Health Centre

Environmentally Sustainable Design objectives

The key ESD objective for the SAMHSOP project is to integrate ecologically sustainable initiatives into the design, construction and operation of the building. Design and operational issues for consideration will include:

- Passive solar design principles
- Sun shading devices
- High quality level of thermal insulation for the facades and roof elements
- Efficient and sustainable heating and cooling systems
- High volume / quality fresh air supply integrated into the mechanical system with options for outside air ventilation mode operation
- Natural lighting
- Glare control
- Rainwater collection and re-use
- Dual flush wcs and water efficient hydraulic fittings
- Energy efficient lighting, lighting control systems and equipment selection
- Sustainable selection of materials
- Low VOC paint

Traffic and parking

A campus wide study is underway with regard to car parking and this unit is included in that study.

Hazards

No hazardous materials or contamination have been identified, although there may be bonded asbestos in asbestos cement sheeting or in under floor spaces. A formal Hazardous Materials and Contamination investigation is being undertaken.

Geotechnical investigation

No geotechnical issues have been identified however a formal geotechnical investigation will be prepared as part of the application.

Planning Strategies and Relevant Controls

NSW State Plan

The project is consistent with the health priorities contained in *Chapter 4: Health Communities* of the NSW State Plan (2010). These priorities are:

1. *Improve and maintain access to quality healthcare in the face of increasing demand.* The new ED will provide a significant improvement to the quality of health care provided into the future and the SAMHSOP will provide greater access for older people to mental health beds in the southern region.
2. *Improved survival rates and quality of life for people with potentially fatal or chronic illness.* The new ED will provide a more efficient and effective model of care for emergency and trauma cases in lines with the hospitals status and allow for a greater volume of patient throughput. The mental health facility will allow older patients with sub acute illness to be treated and reintegrated into the community thus improving quality of life.
3. *Promote healthy lifestyles.* Prevention through healthy life choices and early detection through screening activities and diagnostic assessments are being integrated with primary care and service provision in the development of health services across the State.
4. *Reduce preventable hospital admissions.* The service delivery models for the future are largely ambulatory and home-based as opposed to inpatient negating the need for additional inpatient beds even in the face of anticipated increasing demand. However the need for fast and effective emergency department access is crucial to preventing hospital admissions. Inpatient services such as the SAMHSOP are critical to the process of preventing future admissions for acute care.

Metropolitan Strategy (NSW Department of Planning, 2010)

Delivery of the enhanced St George Emergency Department will provide significant added value to supporting:

- A stronger Global Economic Corridor from Macquarie Park through North Sydney to Sydney Airport and Port Botany. The St George Hospital Emergency Department serves the Kogarah, Rockdale and Hurstville areas. All are within this corridor and are identified as major urban centres.
- A target of over 550,000 new jobs for Sydney which will mean 21,000 new jobs in Southern Sydney.
- A target of 640,000 new homes by 2031 with 35,000 new homes in Southern Sydney.
- A stronger focus on urban consolidation to contain the Sydney's urban footprint.
- This will lead to more medium-to-high-density residential developments around transport corridors and major urban centres.

Strong population and employment growth in the hospital catchment has occurred because of this Policy promoting greater housing density around transit nodes. Growth has been particularly strong in high emergency department demand population age groups cohorts. Particularly, an ageing population with increasing co-morbidities is placing increasing demands on the emergency department

Draft Sydney South Sub regional Strategy

The Draft Strategy identifies Kogarah as a Major Centre and provides direction for the future regeneration of the town Centre. The actions in the Strategy include the encouragement ...”of residential development within proximity of Kogarah Station and support increased commercial and retail activity east of the rail corridor”. This will impact on the demand for hospital resources. The Strategy also identifies the hospitals as magnet infrastructure.

State Environmental Planning Policies

The following table identifies the State Environmental Planning Policies (SEPPs) that apply to the land or type of development that is subject to this proposal. Many of the policies below are applicable only by virtue that they apply to the State. The proposals’ compliance with those Policies is indicated where applicable.

#	Name	Applies	Complies
1	Development standards	✓	✓
4	Development without consent and miscellaneous exempt and complying development	✓	NA
6	Number of storeys in a building	✓	NA
10	Retention of low cost rental accommodation	✓	NA
19	Bushland in Urban areas	✓	NA
21	Caravan parks	✓	NA
22	Shops and Commercial premises	✓	NA
32	Urban Consolidation (Redevelopment of Urban Land)	✓	NA
33	Hazardous and offensive development	NK*	NK
50	Canal Estate Development	✓	NA
55	Remediation of land	✓	✓
64	Advertising and Signage	✓	NA
65	Design Quality of Residential Flat Buildings	✓	NA
	Housing for Seniors or People with a Disability 2004	✓	NA
	Building Sustainability Index: BASIX 2004	✓	NA
	Major Projects 2005	✓	NA
	Mining, Petroleum Production and Extractive Industries 2007	✓	NA
	Temporary Structures and Places of Public Entertainment 2007	✓	NA

Infrastructure 2007	✓	NA
Exempt and Complying Development Codes 2008	✓	✓
Exempt and Complying Development Codes Amendment (Commercial and Industrial) 2009	✓	✓
Affordable Rental Housing 2009	✓	NA
State and Regional Development 2011	✓	✓
Deemed SEPP (Georges River Catchment)	✓	✓

* Not known at this stage

State Environmental Planning Policy (State and Regional Development) 2011

State Environmental Planning Policy (State and Regional Development) 2011 (SRD SEPP) was made on 1 October 2011 and declares certain development to be State Significant Development (SSD). Schedules 1 and 2 of the SRD SEPP list general classes of SSD and identified SSD sites which are subject to the SSD provisions of the Act, unless the development is permitted without development consent. The Minister for Planning and Infrastructure may also declare development to be SSD by an order, but only if the Minister has obtained and made publicly available advice from the Planning Assessment Commission about the state or regional planning significance of the development.

In the case of hospitals, Clause 14 of Schedule declares hospitals with a Capital Investment value over \$30million to be SSD. This proposal has a CIV of \$48million and is therefore considered to be SSD and the SRD SEPP therefore applies.

Kogarah Local Environmental Plan 1998

The site is zoned Special Uses 5(a) Special Uses (General) Zone under the Kogarah local Environmental Plan 1998 (KLEP). The objectives of this zone are:

- (a) to accommodate development by public authorities,
- (b) to accommodate private educational, religious or similar land uses,
- (c) to allow appropriate community land uses,
- (d) to enable associated and ancillary development, and
- (e) to identify and protect land intended to be acquired for special uses.

Development for the purpose of the particular land use indicated by red lettering on the land use map and land uses ordinarily incidental or ancillary to that land use are permitted with consent. On that basis, the proposal is permissible.

The following clauses from the KLEP apply.

Clause 8 deals with Tree preservation and requires consent to ringbark, cut down, top, lop, remove, injure or wilfully destroy any tree (other than a fruit tree used only for domestic purposes) where the tree is greater than 3.5 metres and has a spread of greater than 3 metres in diameter.

Clause 9 relates to the requirement for consent from Council to excavate or fill land in certain circumstances.

Clause 13A provides that consent is required for certain works that are proposed on land identified as having risk of Acid Sulfate Soils (ASS). This has not been identified on the site but will be addressed in the geotechnical study.

Clause 17A requires consent for the demolition, alteration, disturbing, or moving a heritage item or erecting a building on or subdividing land on which a heritage item is located. Clause 17F relates to proposals that may impact on heritage items. There are two heritage items located in proximity to the proposed works – “Griffith House” is an item of local heritage significance as is the Kogarah Fire Station which is on Gray Street. A Heritage Impact Statement is being prepared which addresses these items. Griffith House is being considered under the “early works” REF mentioned earlier.

Clause 21 requires Council to consider certain issues in respect to land zoned Special Uses 5(a) or Open Space 6(a).

St George Hospital Masterplan

A masterplan is currently being prepared for the hospital site which addresses the health services need of the hospital into the future. Further information on the masterplan will be provided with the development application

Consultation

A meeting was held with Kogarah Council in September 2011 to discuss the proposal and get feedback on the issues that may concern Council. A copy of the meeting minutes is attached.

Request for Director General Requirements

On the basis that the proposal falls within the criteria identified in Schedule 1 of the State and Regional Development SEPP, Health Infrastructure formally request that the Department of Planning issue the Director General requirements (DGRs) to facilitate the preparation of the Environmental Impact Statement to accompany the development application for the proposal.

If you require any additional information please contact Phil Cortis on 9978 5412 or Leoné McEntee on 9978 5420/0410 432 505. We would be happy to meet with your Department to discuss the proposal at any time.

Yours sincerely
Health Infrastructure

A handwritten signature in black ink, appearing to read "DR", written over a faint circular stamp.

Robert Rust
Chief Executive

