

11 December 2017

Ms Carolyn McNally
Secretary
Department of Planning and Environment
GPO Box 39
Sydney NSW 2001

Dear Ms McNally

**RE: Bowral & District Hospital Redevelopment
Request for Secretary's Environmental Assessment Requirements**

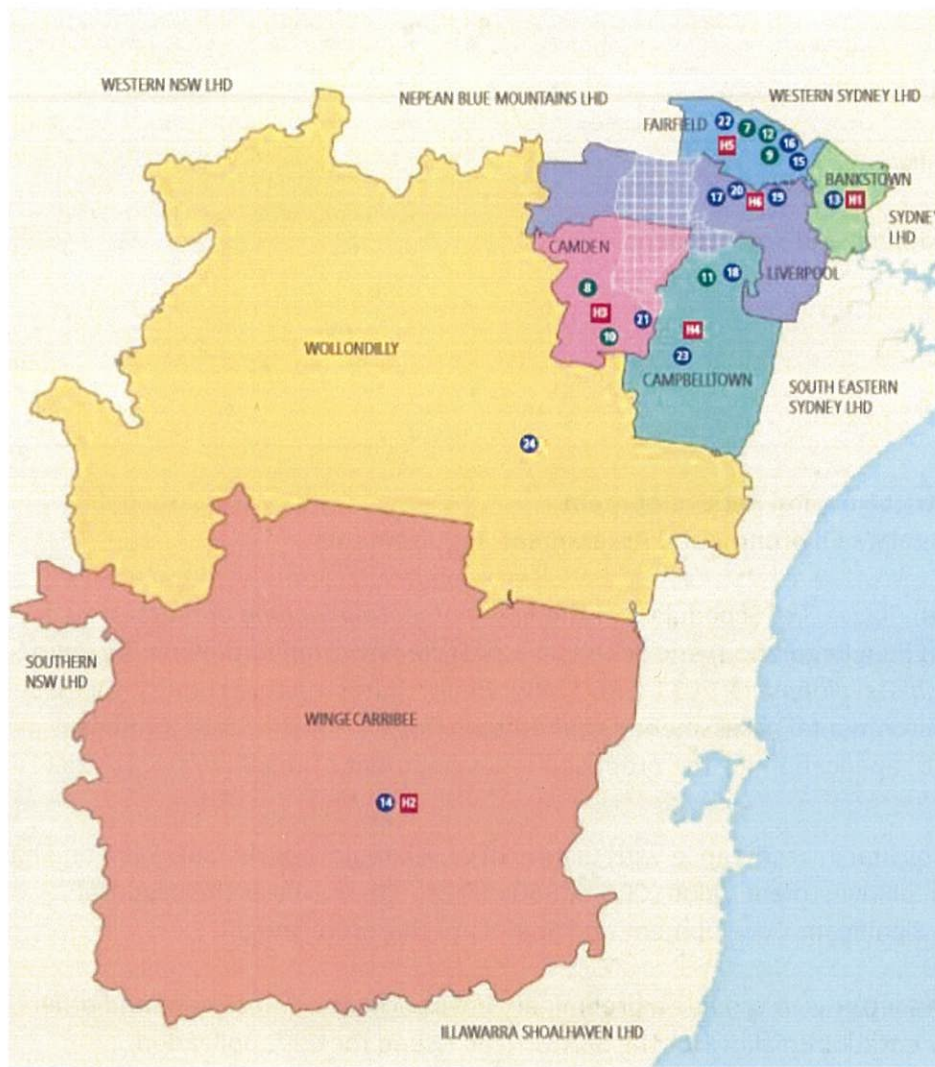
In accordance with Clause 3 of Schedule 2 of the *Environmental Planning and Assessment Regulation 2000* (EP&A Regulation) and Schedule 1 of *State Environmental Planning Policy (State and Regional Development) 2011* (SRD SEPP), Health Infrastructure request the issue of Secretary's Environmental Assessment Requirements (SEARs) for the State Significant Development (SSD) application for the proposed redevelopment of the Bowral & District Hospital.

The project is a Hospital in accordance with Clause 14 of Schedule 1 of the SRD SEPP and has an estimated Capital Investment Value (CIV) of \$50 million. On this basis the proposal classifies as State Significant Development and SEARS are therefore sought.

The purpose of this letter is to provide a preliminary environmental assessment and other supporting documentation to allow for the SEARs to be issued for this application.

1. Background to the Bowral & District Hospital

Bowral & District Hospital (B&DH) is centrally located in the town of Bowral, in the Southern Highlands and is the only hospital operating outside the Sydney metropolitan area by the South Western Sydney Local Health District (SWSLHD) – refer to Figure 1. B&DH is a 91 bed major Rural Hospital with role delineation at level 3. It has close links with a range of Sydney's teaching and referring hospitals including Liverpool, Fairfield, Bankstown and Campbelltown hospitals.



SWSLHD Hospitals

- H1** Bankstown-Lidcombe Hospital
- H2** Bowral & District Hospital
- H3** Camden Hospital
- H4** Campbelltown Hospital
- H5** Fairfield Hospital
- H6** Liverpool Hospital

Affiliated Health Organisations

- 7** Braeside Hospital
- 8** Carrington Centennial Care
- 9** Karitane
- 10** Karitane@Camden
- 11** Scarba - South Western Sydney
- 12** Service for the Treatment & Rehabilitation of Torture & Trauma Survivors (STARTTS)

Major Community Health Centres

- 13** Bankstown
- 14** Bowral
- 15** Cabramatta
- 16** Fairfield
- 17** Hoxton Park
- 18** Ingleburn
- 19** Liverpool
- 20** Miller
- 21** Narellan
- 22** Prairiewood
- 23** Rosemeadow
- 24** Tahmoor

Local Government Areas

- Bankstown
- Campbelltown
- Liverpool
- Wollondilly
- Camden
- Fairfield
- Wingecaribee
- South West Growth Centre

Figure 1: South West Sydney Local Health District

B&DH provides a wide range of services (see Table 1) to the population of the Wingecarribee Shire. The hospital is also accessed by patients from surrounding local government areas such as Wollondilly and Goulburn Mulwaree.

Table 1: Summary of services at B&DH

Clinical Services	
• Emergency Medicine • General Medicine, including stroke, cardiac and aged care • General Surgery • Allied Health including Social Work, Physiotherapy, Speech Pathology, Dietetics, Occupational Therapy, Podiatry, Specialised Aged Care and Developmental Paediatrics • Paediatrics, including Paediatric Outreach and Child and Adolescent Mental Health • High Dependency Unit (HDU) • Ophthalmology • Equipment Loans • Alcohol and Other Drug services, including Needle Exchange • Pharmacy • Pathology	• Geriatrics • Anaesthetics, including pre-admission clinic • Cardiac Assessment and Rehabilitation • Orthopaedic Surgery • Obstetrics • Gynaecology • Mental Health including Day Therapy and Youth Services • Rehabilitation • Aboriginal Health Clinic • Palliative Care • Haematology • Radiological Imaging, including X-ray, Ultrasound and Computed Tomography (CT) • Renal Dialysis (single chair for self-dialysing home dialysis patients, classified as an outpatient space and not included in inpatient bed count)

Source: Health Infrastructure – Clinical Services Plan (CSP) Bowral and District Hospital Redevelopment to 2026

The Southern Highlands Private Hospital (SHPH) is co-located on the campus occupying the north-western quadrant of the site. SHPH has 81 inpatient beds, 4 operating theatres, rehabilitation facilities and a Cancer and Day Infusion Centre. SHPH uses B&DH contracted providers for imaging and pathology services. SHPH provides bronchoscopy services, chemotherapy treatment, supportive care and education for public patients.

The existing B&DH infrastructure is currently being impacted by a range of issues, including:

- Ageing assets and infrastructure reaching beyond the economic life. Buildings were built ranging from 1889 to 1996 and the main clinical building (Milton Park) was constructed in 1961.
- The existing facilities suffer from the following functional deficiencies:
 - No clear main entrance to the hospital.
 - Fragmented services (24-hour zone).
 - Access between Emergency Department and High Dependency Unit via either an external veranda or through the birthing unit to the southern lift.
- Utilisation of not fit-for purpose ward areas for growing demands in allied health, aged care and rehabilitation, cancer, cardiovascular, complex care and internal medicine, critical care, drug health, laboratories, medical imaging, paediatrics and neonatology, surgical specialities, and women's health.
- Need to implement medical advances and install new technology.
- Need to increase capacity to meet demand. This increased demand and flow increases infrastructure "wear and tear".

2. Need for the Project

The B&DH Redevelopment Project is being driven by a range of service needs listed below:

- Address population demographics: from 2011 to 2026 the proportion of elderly patients is expected to increase putting a greater pressure on the existing capacity and capability of the hospital. The resident cohort aged >70 years is projected to increase from 6,669 in 2011 to 11,223 people in 2026
- Increase in service demand: B&DH requires an increased capacity to meet unmet demand for acute and sub-acute inpatient services.
- New models of care: there is a need to update facilities to support the introduction of enhanced and contemporary models of care and new services integrated across the care continuum, including a greater emphasis on multidisciplinary Ambulatory and Community models.
- Workforce: ability to attract and retain workforce through the provision of modern facilities, the ability to work in speciality areas with new and contemporary models of care, and increased staff amenities.
- Provision of a safer and more appropriate environment to provide healthcare compliant to service delivery standards.
- Maximise partnership opportunities: B&DH is co-located with SHPH and there is existing service sharing and collaboration between the two hospitals.

3. The Site & Locality

Bowral is located in the Southern Highlands of NSW within the Wingecarribee Local Government Area (LGA), approximately 115km south west of Sydney. Bowral is located in a valley south of Mt Gibraltar and is the commercial and retail centre of the Southern Highlands.

Bowral is easily accessible from Sydney by road (Hume Highway) and rail (Southern Highlands Rail Line).

The B&DH, located south east of the Bowral Town Centre has a high degree of connectivity to the Town Centre. Bowral Street, provides the east-west link to the Town Centre and connects to Moss Vale Road/ Bong Bong Street/ Mittagong Road (the B73 Road).

The area surrounding the hospital has a generally low density residential character. Directly north of the hospital site is the Bowral Heritage Conservation Area, including State Heritage Listed Bradman Oval and Bradman Museum at Glebe Park. The B&DH is not listed as an individual heritage item and it is not located within the Bowral Heritage Conservation area under the Wingecarribee Local Environmental Plan 2010 (WLEP 2010).



Figure 2: Aerial View of the B&DH and surrounds
Source: Six Maps

The site is surrounded by:

- Bowral Street to the north with Bradman Museum and Glebe Park and low density residential areas beyond. This area to the north is within the Bowral Heritage Conservation Area, in accordance with the Wingecaribee Local Environmental Plan 2010.
- Mona Road to the east with generally low density residential beyond.
- Ascot Road and Loseby Park to the south
- Sheffield Road to the west and generally low density residential beyond.

A number of the residential properties surrounding the hospital are used as consulting rooms and health service facility type uses.

3.1 The Site

The site is located at 97 – 103 Bowral Street, Bowral, in the Wingecaribee local government area, and the legal description is Lot 4 in DP 858938. The northern corner of the campus was subdivided and a long term ground lease till 2056 to Southern Highlands Private Hospital (Lot 3 DP 858938)

The site is approximately 32,485m² excluding the area of the private hospital.

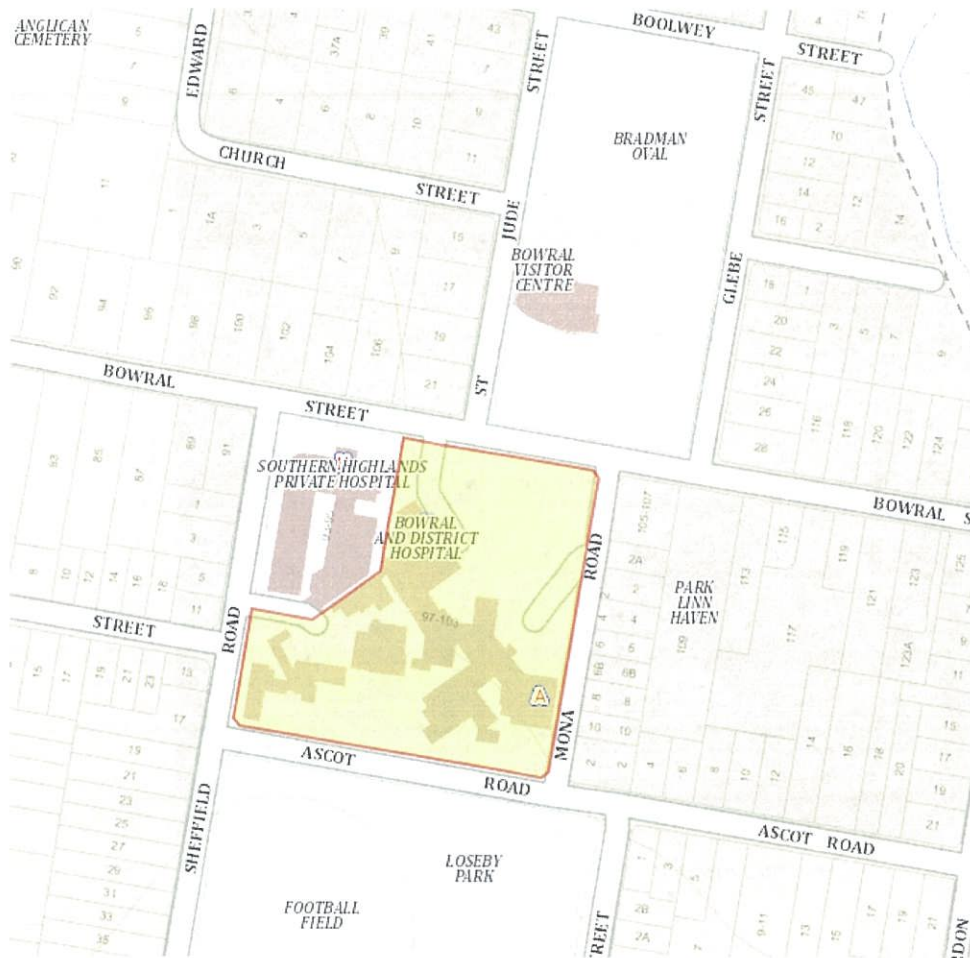


Figure 3: Map view of the B&DH and surrounds
 Source: Six Maps

3.2 Topography and site features

The entire hospital site generally falls from south west to the north east corner. The levels on site vary between RL686 at the highest point to RL679 at the lowest. There is a gradual fall of between 1% and 5% through the area of development from RL681 to about 679.5.

The existing public car park occupies most of the footprint of the proposed building. There is an extensive landscape area to the east of the proposed building.

A trunk drainage line exists in Bowral Street which falls towards the east. There is a pit in Bowral Street near the North East corner of the site which should be suitable to receive discharge from the new stormwater drainage system.

3.3 Existing buildings

The bulk of the acute and ambulatory services are provided around the centre of the site, in the Milton Park Wing and Watsons Building. Milton Park Wing and the Administration Building are the most prominent buildings on site, with heights of 3 storeys and 2 storeys respectively.

The “Old Hospital” and associated buildings form a cluster of original hospital buildings in the south west corner. These are accessed by a driveway and turning circle off Sheffield Road. Many of the older buildings have undergone alteration or extensions over the course of their lives.

Southern Highlands Private Hospital occupies the north west corner, over two floor levels. There is a main entry on Bowral Street and a secondary entry off Sheffield Street. An enclosed walkway and ramp provides a link between the private hospital, a privately operated medical imaging centre, and the public hospital emergency department.

The back of house services are located in a conglomerate of buildings at the south east corner of the site. These departments, as well as the Mortuary, are serviced by a dedicated driveway from Ascot Road.

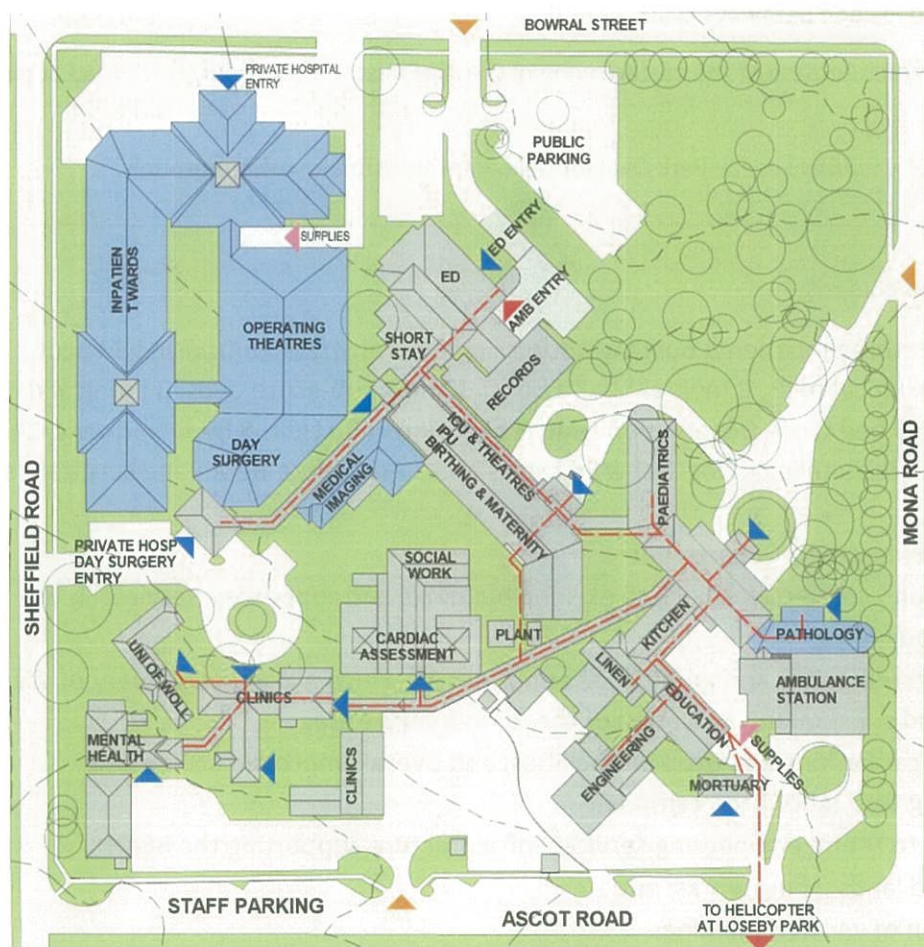


Figure 4: Existing B&DH building layout

Source: McConnel Smith and Johnson - Bowral Master Plan Report (June 2016)

The key issues that impact on the delivery of clinical services at Bowral Hospital are:

- The sprawl and disconnected nature of clinical services across the site.
- The ageing nature of buildings and service infrastructure.
- The size constraint and inflexibility of existing buildings.

- Unclear wayfinding undermines patient confidence in the hospital.

3.4 Site access and parking

The site currently has road access from all four boundary streets. Ascot Road is for logistics for B&DH.

Primary parking areas are provided to the north of the site off Bowral Street and towards the south of the site with access off Ascot Road. The north carpark is used by the patients and visitors to the public hospital and the south carpark is primarily used by staff.

There are five bus routes servicing the hospital with bus stops located around the site boundary, with Bowral Street and Mona Road being the most intensely serviced streets. There are multiple pedestrian entry points and pathways available.

An Ambulance Station is located at the eastern wing of the Administration Building, with road access via Ascot Road.

The hospital currently utilises Loseby Park Oval for helicopter transfers to other hospitals.

4. The Project

The proposed works comprise:

- A new 3 – storey inpatients building addressing Bowral Street comprising 34 acute medical/ surgical beds, 2 mental health beds; 10 new sub-acute beds; 2 medical day only beds; 8 bed Close Observation Unit; 9 bed Maternity Unit; 8 bed Paediatric Unit; Perioperative Suite including 2 new Theatres and 1 Procedure Room and surgical day only beds;
- A 14 bed Emergency Department
- Linkways and connections back to existing buildings and supporting services in the retained buildings;
- A reconfigured public and ambulance entry into ED which allows for delivery of the Project and subsequent relocation of the ED in a future stage;
- On-grade car parking and drop off facilities, and overall improved access and wayfinding throughout the campus;
- Upgrades to IT and engineering services infrastructure supporting the B&DH;
- Associated landscaping works; and
- Demolition of vacated buildings.

The following figures 5 - 7 show the concept plan and artist impressions for the redevelopment of B&DH.

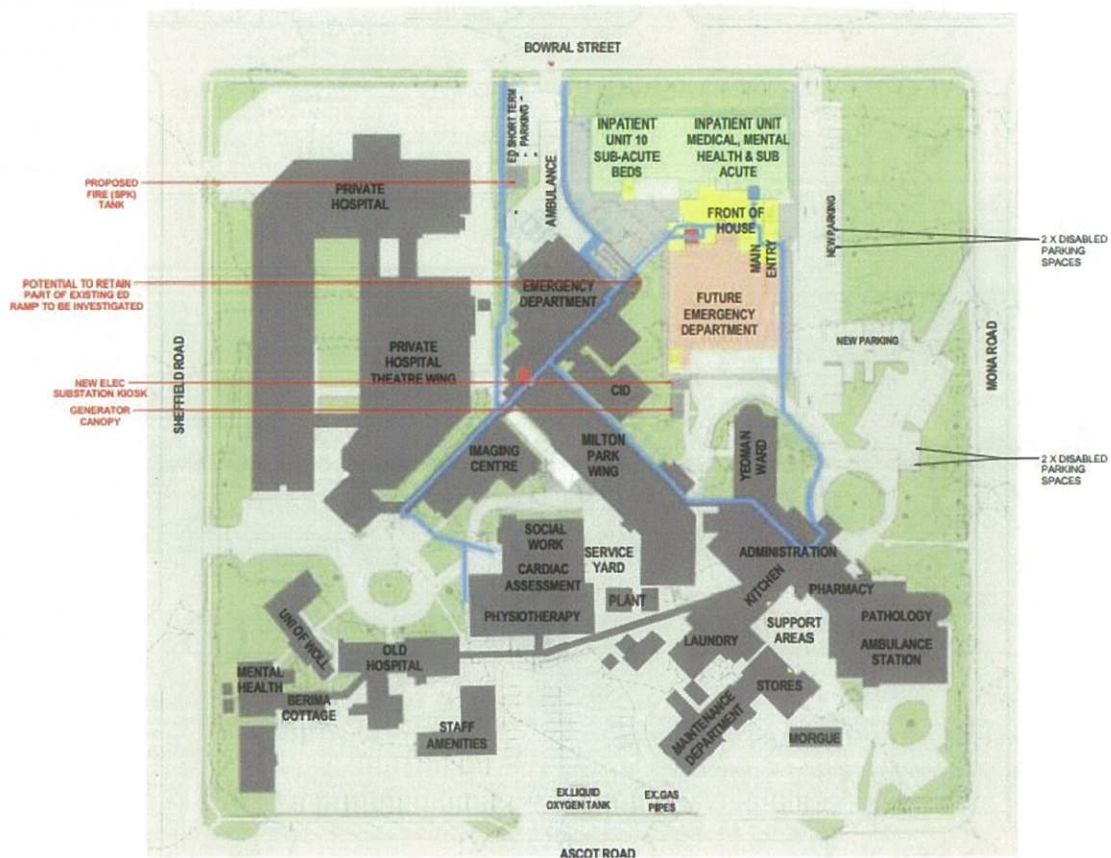


Figure 5: Concept B&DH redevelopment footprint

Source: McConnell Smith & Johnson – Site Plan – Patient/ Public Circulation (October 2017)

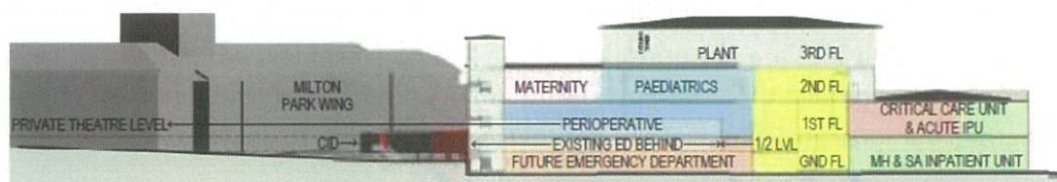


Figure 6: Concept 'block and stack' plan

Source: McConnell Smith & Johnson – October 2017



Figure 7: Artist impression of the B&DH redevelopment
Source: McConnel Smith & Johnson Architects

5. Planning Framework

5.1 Strategic Planning Context

NSW: Making it Happen was released in September 2015 and replaces the State's previous 10 year plan, NSW 2021. NSW: Making it Happen outlines 30 key reforms for the State, including 12 personal priorities of the Premier.

The Premier's Priorities are key priorities for the NSW Government which identify 12 key areas of focus to rebuild the economy, return quality services, renovate infrastructure, strengthen our local environment and improve education, health and community services.

Of particular relevance to the redevelopment of B&DH Hospital are the priorities to:

- improve access to quality healthcare
- improve survival rates and quality of life for people with potentially fatal or chronic illness through improvements in health care
- maintain and invest in infrastructure

Development of these services in regional areas, in particular, is a significant capital investment and results in employment opportunities. Projects will also contribute to achievement of the following priorities:

- jobs closer to home
- increased business investment in rural and regional NSW

- increased business investment

State Infrastructure Strategy - The 'State Infrastructure Strategy Update 2014' was prepared by Infrastructure NSW at the direction of the Premier to guide how proceeds from the Rebuilding NSW initiative could be spent. The 30 major projects and programs have been identified as strategically important and economically sound. The NSW Government has accepted the following recommendations in relation to health investment:

- Reserve \$300 million to accelerate the delivery of multipurpose health facilities in smaller country towns.
- Reserve \$100 million to invest in up to 19 'one stop shops' facilitating health care in metropolitan and regional areas.
- Pursue a mix of not-for-profit/private sector delivery of infrastructure and public health services.
- Prioritise configurations that implement best practice clinical redesign and reduce operating costs.
- Continue to pursue partnerships for a better mix of services with the not-for-profit and private sectors.
- Continue to pursue system-wide reforms to deliver more efficient and effective health services.

The proposed B&DH Hospital redevelopment is consistent with these recommendations.

South East & Tablelands Regional Plan - The South East & Tablelands Regional Plan (July 2017) outlines the NSW Government's vision, goals and actions for the sustainable growth of this Region to 2036.

The Regional Plan projects that by 2036, an additional 45,500 people (representing a 17% population increase from 2016 - 2036) are expected to be living in the Southern Highlands and Tablelands (which includes Bowral). One in three people in the Region are projected to be over the age of 65 by 2036.

The aims of the Regional Plan is to guide the delivery of homes, jobs, infrastructure and services to support the growing and changing needs of the South East & Tablelands Region. It sets directions for regional growth to achieve sustainable development outcomes that are balanced with environmental values. It aims to protect and restore environmental values and connections to the landscape, to contribute to healthy, engaged communities.

The redevelopment of Bowral is consistent with the Strategic Planning Framework for the Region. In particular, direction 21: Increase access to health and education services.

The Regional Plan highlights that the NSW Government is supporting the South East and Tablelands economy and communities through the infrastructure investments including the redevelopment of B&D Hospital.

5.2 Statutory Planning

5.2.1 Environmental Planning and Assessment Act 1979

The *Environmental Planning and Assessment Act 1979* (EP&A Act) establishes the assessment framework for State Significant Development (SSD). Under Section 89D of the EP&A Act the Minister for Planning and Environment is the consent authority for SSD. Section 78A(8A) requires the development application for SSD is to be accompanied by and Environmental Impact Statement (EIS) in the form prescribed by the Regulations.

5.2.3 Biodiversity Conservation Act 2016

The *Biodiversity Conservation Act 2016* (BC Act) aims to maintain a healthy, productive and resilient environment for the greatest well-being of the community, now and into the future, consistent with the principles of ecologically sustainable development. The BC Act replaces the *Threatened Species Conservation Act 1995* (TSC Act) as the key piece of legislation that identifies and protects threatened species, populations and ecological communities in NSW.

There are several obligations placed on HI under the BC Act in relation to the Proposal. HI must consider threatened species, populations, ecological communities, habitat, key threatening processes, offsets and recovery plans in fulfilling its statutory responsibilities.

5.2.4 State Environmental Planning Policy (State and Regional Development) 2011

The State and Regional Development SEPP (S&RD SEPP) identifies development which is declared to be State Significant. Clause 14 of Schedule 1 of the policy provides that the proposed development as described herein is SSD, as follows:

Development that has a capital investment value of more than \$30million for any of the following purposes:

- a) *Hospitals*
- b) *Medical centres*
- c) *Health, medical related facilities (which may also be associated with the facilities or research activities of NSW local health district board, a University or an independent medical research institute).*

As the proposal is for the purposes of a hospital, and has a total estimated Capital Investment Value (CIV) in excess of \$30million, it is considered SSD.

5.2.5 Other State Environmental Planning Policies

In addition to the S&RD SEPP, the following policies apply to the site and will need to be considered as part of the SSD application:

- State Environmental Planning Policy 33 - Hazardous and offensive development
- State Environmental Planning Policy 55 - Remediation of Land
- SEPP (Infrastructure) 2007

5.2.6 Local Environmental Plan

Permissibility

The site is zoned SP2 Infrastructure under the Wingecaribee Local Environmental Plan 2010 (WLEP 2010) for the purposes of “Health Services Facility”.

Health services facilities are permissible with development consent on the land under WLEP 2010.

Clause 57(1) of the State Environmental Planning Policy (Infrastructure) 2007 (ISEPP) allows a health services facility to be permissible in any of the prescribed zones listed in the ISEPP. SP2 is a Prescribed Zone in the ISEPP and therefore the proposal is permissible with consent.

Zone Objectives

The objectives of the SP2 zone are:

- To provide for infrastructure and related uses.
- To prevent development that is not compatible with or that may detract from the provision of infrastructure.
- To ensure that the scale and character of infrastructure is compatible with the landscape setting and built form of surrounding development.

The proposed hospital redevelopment is capable of demonstrating consistency with these objectives.

Height and FSR

There are no maximum Floor Space Ratio or building height controls applying to the site under the WLEP 2010.

Flooding

There is a natural waterway (Mittagong Creek) approximately 300m to the north east of the corner of the site where Bowral Street intersects with Mona Road. The B&DH is not constrained by Wingecaribee’s Natural Resources Sensitivity Map under the WLEP 2010 as indicated in Figure 8. Wingecaribee’s Flood Planning Area Map under the WLEP 2010, indicates that the B&DH is not flood prone land as indicated in Figure 9.

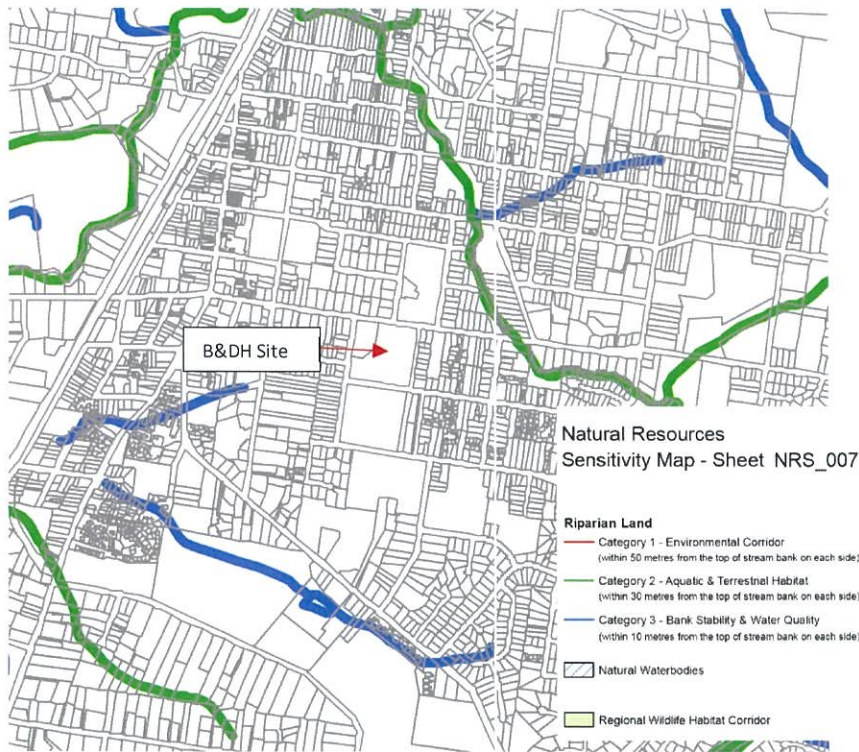


Figure 8| Riparian lands in relation to the B&DH
Source: Wingecarribee LEP 2010 - Natural Resources Sensitivity Map 007

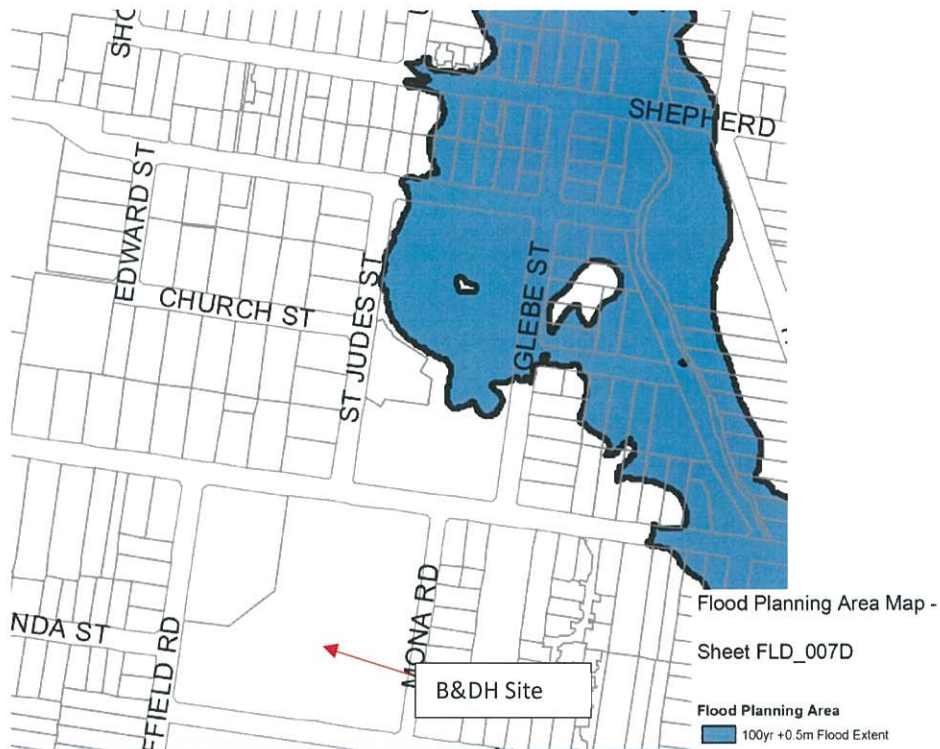


Figure 9| The B&DH site in relation to the Flood Planning Area Map
Source: Wingecarribee LEP 2010 - Flood Planning Area Map 007D

Archaeology and Heritage

A search of the State Heritage Register identified two items of State Significance on the State Heritage Register in the vicinity of the B&DH, the Bradman Oval and Collection of Cricket Memorabilia (SI01399). The Bradman Oval is bounded by Glebe Street, Boolwey Street, St Jude Street and Bowral Street and is located north of the B&DH.

Section 170 of the Heritage Act 1977 requires State Government Agencies to keep records of heritage items they own or operate. These registers can be found on the NSW Heritage Inventory. A search of this inventory was carried out on 29 November 2017. No items were identified as being located within or in the vicinity of the study area.

A search of Schedule 5 of the Wingecarribee LEP 2010 identified a number of local heritage items within the vicinity of the study area, however, the B&DH site itself is not listed as an individual local heritage item. B&DH lies in the vicinity of the following heritage items that are listed on both the State Heritage Register and locally listed in the WLEP 2010:

- I541, Bradman Oval, directly to the north on the other side of Bowral Street.
- I469, Bradman Museum Collection and Grandstand, set within Bradman Oval and fronting onto St Judes Street.

The Hospital is also in the vicinity of the Bowral Conservation Area, whose boundary is the northern side of Bowral Street. Refer to Figure 10.

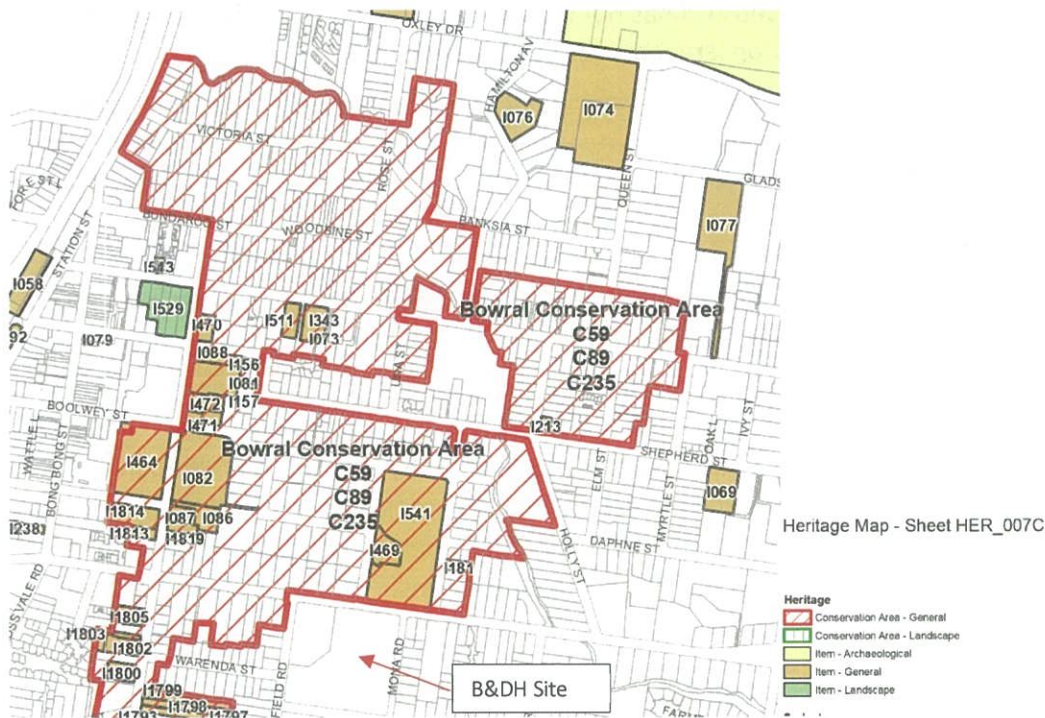


Figure 10| B&DH in relation to Bowral Conservation Area and Heritage Items.
Source: Wingecarribee Local Environmental Plan 2010 – Heritage Map 007C

6. Preliminary Impact Identification and Risk Assessment

Based upon our preliminary environmental assessment, the potential impacts associated with the proposal are summarised below and will be addressed in detail in the EIS.

6.1 Trees

A Tree Assessment has been carried out by Naturally Trees to identify trees of high quality on the site. Three trees located along Mona Road have been identified as of very high significance. The bulk of the remaining trees of high significance are located in the north east pocket of the site as well as along the eastern boundary of the private hospital. The Concept Plan has been developed to largely preserve these two areas of landscape. All other trees are viable to be retained with the exception of those trees that have to be removed to make way for construction of the new facility. An Arborist report will be submitted with the SSD package.

6.2 Biodiversity

Section 7.9 of the *Biodiversity Conservation Act 2016* requires that an EIS submitted with an SSD application be accompanied by a *biodiversity development assessment report unless the Planning Agency Head and the Environment Agency Head determine that the proposed development is not likely to have any significant impact on biodiversity values.*

The B&DH is an existing hospital with significant built form across the site. An arborist has assessed the trees to be removed and has not identified any Threatened Species as per Schedule 1 of the *Biodiversity Conservation Act 2016* among them.

It is not expected that the proposal will have a significant adverse impact on the natural environment. To the extent required by state legislation, biodiversity impacts will be addressed in the EIS.

6.3 Traffic and Parking

Traffic analysis will be undertaken to determine the appropriate access arrangements for the site, in addition to analysis of parking demand.

6.4 Heritage and Visual Impact

The preliminary Heritage Impact Statement (HIS) prepared by Weir Phillips Heritage Architects concludes that based on their assessment, the proposed removal and redevelopment of the northern and central section buildings of the site is considered to be acceptable in terms of impact on the adjacent Heritage Conservation Area and State and local listed Heritage Items.

The SSD application will be accompanied by a detailed HIS to assess the impact of the proposal on the heritage significance of the adjacent State and local listed Heritage Items and on the Bowral Heritage Conservation Area.

6.5 Geotechnical, Ground Contamination and Hazardous Materials

The existing conditions of the site have been assessed by Douglas Partners in a Contaminated Land Preliminary Site Investigation. The assessment considers that the site exhibits potential for contamination and recommends that a detailed intrusive investigation of the site be undertaken to target areas identified in the report. The report concludes that the site can be made suitable for the proposed development with respect to contamination, subject to implementation of the provided recommendations. As a result, a detailed site investigation and any necessary remediation and validation (if required) will be undertaken as part of the proposed works.

A Hazardous Building Materials survey has been undertaken by Douglas and Partners (September 2016). The survey found that both asbestos-containing materials and hazardous materials were identified on the site. The report recommended that prior to or as part of the proposed works, all identified asbestos and other hazardous materials be removed, and anything remaining will need to be detailed in the site specific Register and Asbestos Management Plan of the report. The EIS will give consideration to any further investigations required prior to, and following the demolition of the buildings and any validation requirements relating to ground conditions to ensure the site is suitable for the intended use.

A geotechnical investigation of the site will be undertaken where the new acute services building is proposed. Recommendations for the substructure of the building will be considered in the detailed design of the building and will be addressed and any validation requirements relating to ground conditions to ensure the site is suitable for the intended use.

Relevant investigations will be undertaken in accordance with SEPP 55 – Remediation of Land, Managing Land Contamination – Planning Guidelines, and SEPP 33 – Hazardous and Offensive Development. The assessment against the SEPPs will be submitted with the SSD Application.

6.6 Noise and Vibration

An analysis of the construction and operation noise will require careful consideration of impacts upon the amenity of residential uses nearby. An acoustic and vibration assessment will be submitted with the future SSD Application.

6.7 Built Form

Whilst the site has no maximum building height control, the surrounding development is predominantly a low density residential environment. The proposed scheme will be the subject of a merit assessment with regard given to the siting, height and massing of the proposed development in the context of the surrounding landscape.

6.8 Infrastructure and servicing

The site is adequately serviced with potable water, sewer, stormwater, electricity and telecommunications services. Consultation will be undertaken with all relevant service providers in relation to any required capacity augmentation of existing services to the site.

7. Request for SEARs

On the basis that the proposal meets the criteria identified in Schedule 1 Clause 14 of the State and Regional Development SEPP, Health Infrastructure formally request that the Department of Planning and Environment issue the Secretary's Environmental Assessment Requirements to facilitate the preparation of the Environmental Impact Statement for the redevelopment of the B&DH.

If you require any additional information, please contact Rachel Mitchell on 0438 220 252. We would be happy to meet with your Department to discuss the proposal at any time.

Yours sincerely

A handwritten signature in blue ink, appearing to read "SSA-".

Sam Sangster
Chief Executive