

Reference: 16S1536000

19 October 2018

Capital Insight Pty Ltd  
76 Berry Street  
NORTH SYDNEY NSW 2060

**Attention: Mr. Jeremy Wilson (Senior Project Manager)**

Dear Jeremy

## **RE: BOWRAL AND DISTRICTS HOSPITAL – RESPONSE TO SUBMISSIONS**

GTA Consultants (GTA) has been requested by Capital Insight (CI) to provide a letter response to submissions received on the State Significant Development Application (SSDA) for the Bowral and Districts Hospital Redevelopment.

The submission spreadsheet is attached and the following aims to address the queries raised.

Each submission has been referenced to the responses below.

### **Item 1 – Parking**

Parking surveys were undertaken as part of the Transport Assessment and included both on site and on street parking. A parking study was also independently been undertaken by Council and considered in the Transport Assessment. Additional site observations have also been undertaken by GTA that verify the conditions surveyed. The surveys take into consideration any parking occurring within the study area resulting from other surrounding uses. The study did not assess event conditions that may occur from cricket matches due to the minimal increase in traffic expected by the redevelopment. As stated in the report the redevelopment is about bringing existing facilities up to standard and not about any significant increases to existing services. The car parking impact from the redevelopment can be accommodated on site.

It is noted that the parking surveys undertaken by both GTA and Council were prior to the installation of two pedestrian refuge islands on Bowral Street. This has resulted in a loss of some on street parking spaces. Regardless of this, both surveys indicate there is still sufficient available on street parking in the area.

There is no intention as part of this proposal to increase beds or staff as a result of vacant buildings on site. Any future upgrades or changes in staff and bed numbers for the site post the redevelopment would be subject to separate assessment.

### **Item 2 – Traffic Congestion**

Site observations and traffic surveys were undertaken in both the AM and PM peak periods for four intersections surrounding the hospital. As outlined in the Transport Assessment all four intersections operate at a level of service A, this indicates that all intersections currently operate well with spare capacity which is in line with observations of traffic flows surrounding the site. The proposed redevelopment is about bringing existing facilities up to standard and not about any significant increases to existing services and results in a negligible increase in traffic generation. Therefore, as

outlined in the Transport Assessment the proposed redevelopment is not anticipated to have any notable impacts to the surrounding road network.

There is no intention as part of this proposal to increase beds or staff as a result of vacant buildings on site. Any future upgrades or changes in staff and bed numbers for the site post the redevelopment would be subject to separate assessment.

### Item 3 – Parking during Construction

A parking strategy has been developed to alleviate the parking impact as much as possible during construction. It is acknowledged that there will always be an element of inconvenience during construction activities and that there will be additional on street parking occurring during the construction period. The proposed 2P parking restrictions on street surrounding the hospital would assist to manage the parking shortfall during construction and provide an improved environment for short term appointments and visitors at the hospital.

The Transport Assessment provides a parking strategy for staff and visitors to the hospital during construction. Parking associated with construction workers is addressed in the preliminary Construction Traffic Management Plan prepared by TSA Management.

### Item 5 – Bus Stop Relocation

The bus stop and bus shelter relocation are proposed to be around 22 metres from its existing location. It will be located so that bus services can still turn from Bowral Street into St Jude Street. This has been approved through the Traffic Committee.

### Item 6 – Report Clarifications

The area schedule provided in the TIA excludes the inclusion of the new ED. However, all calculations regarding parking and traffic reflect bed and staff numbers which have been updated to reflect the inclusion of the ED.

The text in the Executive Summary has been mis-interpreted – The report says: BDH is located around one kilometre from the Bowral Town Centre along Bong Bong Road and Bowral Street and is bordered by Bowral Street, Sheffield Road, Mona Road and Ascot Road. The intention is that from the CBD to the hospital one would travel along Bong Bong Road and then Bowral Street.

### Item 7 – Active Transport

Most staff activity associated with regional hospitals occurs via vehicles due to the nature of staff shift times and the limited availability of convenient public transport. Walking and cycling often proves difficult due to the distance between the home and work place as well as a lack of quality facilities. Section 7 of the Transport Assessment outlines opportunities and strategies that could be implemented, however it is noted that this proposal only generates a minimal number of additional vehicle trips and therefore these travel demand strategies are not required for this proposal, however the hospital should consider for their future operation.

Naturally, should you have any questions or require any further information, please do not hesitate to contact me in our Sydney office on (02) 8448 1800.

Yours sincerely

**GTA CONSULTANTS**

A handwritten signature in black ink, appearing to read 'KMcNatty', written in a cursive style.

**Karen McNatty**  
**Associate Director**

encl.

Attachment 1 – Bowral RTS Table (GTA Response)

## Attachment 1

Response to Submissions Table

Bowral SSD	Issues			GTA Letter Reference
Public				
M Blissett of 100 Bowral Street, Bowral, NSW	<p>I want to express my concerns on the validity of the traffic survey. I live with my family at 100 Bowral street and find the existing impact of the hospital extremely significant. The report makes reference to the Private Hospital but neglects to make comment on a number of other health relating consulting rooms that surround the hospital. The report makes no reference to the parking required for the International Cricket Hall of fame and the cricket matches held at the oval.</p> <p>It will be a completely wasted opportunity if the redeveloped did not include basement car parking. Bowral will always be a car dominated travel area due to the financial restraints to provide a frequent public transport system.</p> <p>A consultant can almost support any position and in this case the consultant has focused on the fact that there is a very minor increase in bed numbers and therefore nothing will change. It does not recognise that the hospital already creates a significant problem and simple functions such as the entry and exit of private property, the collection of garbage bins and parking for personal visitors of adjoining private residences has not been considered.</p> <p>We have live in our home for many years and the increase in street parking has been very considerable and the redevelopment of the hospital should provide for additional car parking to cater for future efficiencies in the delivery of acute care.</p> <p>BASEMENT CAR PARKING MUST BE PROVIDED TO EASE LOCAL CONGESTION AND FUTURE PROOF THE OPERATION OF THE HOSPITAL.</p>			Item 1 - Parking
E Carmichael	<p>Serious consideration has not been given to the traffic congestion this development will cause in already congested Bowral and the very dense surrounds of the hospital. Instead of greater reliance on residential parking to service workers cars and delivery vehicles, keeping in mind that in the areas around the hospital this is already at 80-90% full plans should be made by the State Government to purchase from Council sections of Loseby Park along Ascot Road to assist with the 1-2 years of mayhem that will occur. Work people could be bussed to the site from the outskirts as another option. What is important to remember is that this section of Bowral is busy with functions at Bradman Oval, the cricket museum, the private hospital and Bowral Street alone being a main artery within the towns traffic system.</p> <p>Carpark work has been completed and your own documents state an overall increase in less than 5 car spaces. Staff are already required to park off site to assist with movements on site. This is general madness as there will be an increase in staffing once the building is completed. This along with the large number of vacant building which will have to be rented out or occupied by Health Services being relocated will just exacerbate the already chronic parking problems within this area.</p> <p>This is another example of poor planning without consideration of lack of infrastructure and impact on the area.</p>			Item 2 - Traffic Congestion and Item 4 Construction Traffic Management.
P Edwards, 100 Mittagong Road, Bowral	<p>The proposal for a new Clinical Services Building at Bowral Hospital is a welcome initiative for the residents of the Southern Highlands. It is the first major building development since the Milton Park Ward in 1961, and promises to provide new, code compliant clinical facilities to replace the existing outdated, non-compliant buildings. The announcement of the new building has generally been welcomed by the community.</p>			

<p>Parking: The EIS and Transport Impact Assessment show an increase of only 3 parking spaces on site for the new building when it is completed, but they make no additional parking provision for staff and the public for the re-use of the existing buildings after the new CSB becomes operational. The existing parking situation has been under evaluated, particularly in relation to the Southern Highlands Private Hospital, Bradman Oval and Museum's parking on St. Jude Street, and the medical consulting rooms in Bowral Street. Section 4.5.1 of the EIS advises that the TIA confirms that the new CSB will generate a need for 14 new parking spaces, but the overall on-site parking will increase by only 3 spaces. The proposed parking plan does not provide the increased parking that the TIA says will be required to meet the increased demand. In addition, the EIS proposes to ask Council to restrict street parking around the hospital to 2P. Hence, Hospital parking when the CSB is operational will increase the demand for on street parking.</p>			Item 1 - Parking and Item 3 Parking during construction
<p>Is the Department of Planning satisfied that this will be acceptable to nearby residents, Hospital staff, visitors and Wingecarribee Shire Council? How does SWSLHD or the Hospital intend to provide off-street safe and secure parking for Hospital staff?</p>			Item 1 - Parking
<p>Parking during construction: Section 3.3.8 indicates there will be an increase of 2 (onsite) parking spaces before the commencement of the major works (CSB). This statement does not extend to say that the increase will be short-lived and there will be a shortfall of 39 on-site spaces during the construction of the major works, according to Section 9.4.3 of the EIS and the Transport Impact Assessment, and that the shortfall will be accommodated in nearby residential streets, which is unacceptable. It is inconsistent with Section 2.6 that says "A staging strategy will be implemented to ensure that car parking facilities are not affected as a result of the proposed works." The existing 66 space carpark off Bowral Street will cause the loss of more than 39 spaces, because the Early Works carpark is already complete and in use, so cannot be counted in the "replacement" parking for the CSB works. Figure 20 does not acknowledge that Hospital parking already occurs along St. Jude Street, Glebe Street and Warenda Street.</p>			Item 3 - Parking during construction
<p>Construction workers' parking in adjoining streets is not an acceptable option. The Preliminary Construction Management Plan (Appendix 3) addresses construction workers' parking and differs from the TIA. Which is correct, or to be followed?</p>			Item 3 - Parking during construction
<p>Section 4.5.2: Moving the westbound bus stop in Bowral St 45m to the west will reposition it to the west of St. Jude Street. The bus service Route 814 operates from Mona Rd, into Bowral St and then north along St. Jude St, so a bus stop west of St. Jude St will not be feasible for Berrima Buslines.</p>			Item 5 - Bus stop relocation
<p>The Executive Summary of the Transport Impact Assessment (TIA), para. 3, describes the Hospital's location as "along Bong Bong Road and Bowral Street". There is no "Bong Bong Road" bounding the Hospital, or anywhere near it.</p>			Item 6 - Report Clarifications
<p>The Gross Floor Area (GFA) in the TIA is 5990 sq. metres compared with the EIS's 8159 sq. metres. There is a major disconnect between the EIS and the TIA, which does not recognise the ED within the CSB. As parking requirements are traditionally determined by GFA as well as other measures, the discrepancy between the EIS and TIA results in a significant under-estimate of new parking required by the CSB. The rationale of excluding nursery cots from the calculation of traffic generation and hence parking is curious if not false (Section 4.3). A significant generator of traffic to hospitals and demand for parking is visits to newborns.</p>			Item 6 - Report Clarifications.
<p>The Preliminary Construction Management Plan (Appendix 3) addresses construction workers' parking and differs from the Transport Impact Assessment. Which is correct, or to be followed?</p>			Item 3 - Parking during construction
<p>The TIA's statements regarding existing parking in Bowral Street, Mona Road and Sheffield Road (TIA 2.2.1, 2.2.2, and 2.2.3) are inaccurate. Figure 2.10 shows 12 and 14 unrestricted parking spaces on the north side of Bowral St at Glebe Park. These numbers were reduced after the Council installed pedestrian safety refuges in the centre of Bowral Street at the intersections of Sheffield Rd and Mona Rd. The TIA is dated 9/7/18 and is out-of-date with reality in respect of existing parking.</p>			Item 1 - Parking

Public Health First C/O E Carmichael (spokesperson)	We strongly believe the EIS is deficient, misleading and contains many omissions and factual errors.			
	We seek to have these corrected in order that the local community fully understand the proposed upgrade			
	And we seek that the issue of parking during the 18-24 month construction phase be addressed urgently because it will seriously disadvantage the surrounding community and anyone coming to the hospital by car.			Item 3 - Parking during construction
	<b>Car parking arrangement during construction phase.</b>			
	<p>Bowral, as well as Moss Vale has a problem with insufficient town parking. In relation to this EIS, parking is a major problem for those working at, attending and visiting patients at the hospital. There is competition between visitors, staff attending the private and public hospital, with the overflow parking requirements being met by the use of busy public street parking.</p> <p>This is documented in council's (several year old) parking study contained in the EIS.</p> <p>During the 18-24 month construction phase there will be very significant disruption for current users of existing parking and a huge impact of a wide range of vehicles of construction workers and concrete delivery trucks etc. It is proposed in the EIS that existing street parking be used to handle this increase, which in the congested street surrounding the hospital would be laughable if it weren't so serious.</p> <p>We understand the options discussed with council to increase available parking in streets adjacent to the hospital are not being taken up by Health Infrastructure.</p> <p>The parking requirements to upgrade the hospital should not be borne by the local residents.</p>			Item 1 - Parking and Item 3 - Parking during construction
	<b>We respectfully request that the NSW Government:</b>			
	Immediately fund parking upgrades or/and rights for work vehicles associated with the hospital upgrade be arranged with the local council.			
	If this is not done, there will be a huge backlash from local residents and hospital staff and visitors as construction work increased.			
<b>TFNSW</b>	<b>Active Transport</b>			
	<p>Future development iterations should:</p> <ul style="list-style-type: none"> <li>Implement wayfinding strategies including safe marked walkways in proposed carpark improvements and Green Travel Plan/Travel Access Guide to assist with increasing the mode share of walking and cycling for staff, out-patients and visitors.</li> </ul>			Item 7 - Active Transport
	<b>Bus Infrastructure</b>			
	<p>The current Bowral and District hospital is well serviced by Public Transport with 4 services (808, 811, 814, &amp; 815) and has 3 bus stops bordering the site. In relation to changes to bus stop locations, the proponent is advised to ensure:</p> <ul style="list-style-type: none"> <li>All access requirements are compliant (DDA and DSAPT requirements).</li> <li>To consult with the local operator (Berrima Buslines) and TfNSW.</li> </ul>			Item 5 - Bus stop relocation