05 March 2019

Ms Aditi Coomar
Principal Planner
Department of Planning and Environment
320 Pitt Street
SYDNEY NSW 2000

Dear Aditi,

New Tweed Valley Hospital SSD 18_9575 – Supplementary Response to Submissions #3

I refer to your requests for additional information (via email) in relation to the above-mentioned State Significant Development (SSD) application dated 21 and 27 February 2019. A response to the Department's request is provided below with additional supporting information attached to this correspondence.

Agricultural Impact

In response to concern raised by the Department of Primary Industries (DPI), the proposed mitigation measures regarding agricultural impact have been summarised and included in the attached updated mitigation measures table. These measures will assist to mitigate and offset the loss of agricultural land/production as discussed in the Response to Submissions (RtS) Report.

The attached updated mitigation measures table includes a summary of (amongst others) the measures proposed to address land use conflict, with the Land Use Conflict Risk Assessment prepared by Tim Fitzroy and Associates referred to for detail. It is noted that these are measures relevant to implementation at Stage 2 (main works and operation of the hospital).

The reference in the Agricultural report that assumes that sweet potatoes are planted once in 3 years is justified and supported by industry guidelines. The 'Sweet potato information kit' (reprint 2000 - Qld Government http://era.daf.qld.gov.au/id/eprint/1689/4/3growswp.pdf) states that sweet potato should not be planted back into the same ground for at least 3 years (relevant page attached). Furthermore, we refer to the attached reference (from the Department of Primary Industries and Regional Development – Western Australia) to growing sweet potato which refers to rotation between 2 to 4 years. Agricultural Risk Consulting (ARC) Group has advised that in terms of disease, there is no variation between the States therefore reference to the attached material is considered appropriate.

Comments from DPI Agriculture regarding rezoning of the land and potential flow-on effects has been addressed in the RtS Report and is a matter for consideration under the separate State Environmental Planning Policy process. As outlined in the RtS Report the site-specific SEPP is administered by Department of Planning and Environment (DPE) as a separate planning process to

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the SSD application. Submissions in relation to the SEPP are addressed by DPE as part of that process.

Bushfire and Asset Protection Zone

Land and Fire Assessments (Project bushfire consultants) have provided a detailed response (attached) to the matters raised regarding the Bushfire Assessment report.

The Bushfire Assessment Report follows the prescription of Planning for Bushfire Protection (PBP) 2006 and Pre-Release PBP 2018 which identifies vegetation considered to be a classified hazard and recommends appropriate Asset Protection Zones (APZs). The land immediately west of the site was assessed as 'Rural- Managed Vegetation' (a series of aerial photographs included in the attached detailed response demonstrate this land has been consistently managed over time); this applies to Lot 6 DP 727425 and the cleared portions of Lot 3 DP828298 immediately to the west of the hospital site. The remainder and vegetated portion of Lot 3 DP828298 was classified as a hazard (as shown in Fig. A in the attachment). APZs are accordingly not required from the land classified as "managed". To date, the Rural Fire Service (RFS) has not disagreed with this assessment. The 43m setback referred to by DPE is simply the setback to the hospital envelope that has been implemented by the design team. It is not an APZ. The site has been provisioned with 50m APZs with capacity to accommodate a 67m APZ from the identified classified vegetation (refer to attached detailed bushfire response).

In summary, the evidence currently available indicates that the portion of the Lot 3 DP828298 immediately west of the hospital site is classified as managed rural land and current and future land uses are identified as grazing/cropping. The vegetated portion of the Lot 3 DP828298 was correctly identified as the potential hazard and appropriate APZs were prescribed in the Bushfire Assessment report.

A response regarding radiant heat exposure has also been provided in the attached bushfire response, indicating that suitable outcomes would be achievable, with further consideration and additional assessment to be undertaken at Stage 2 detailed design, as required.

Access from Cudgen Road

Bitzios (Project Traffic Engineers) has reviewed this matter and comments made by Council regarding the design solution of the western access from Cudgen Road. In response the following is provided.

Whilst Bitzios do not agree with Council's request for a driveway crossover to be provided at the western access for reasons previously provided and accepted by Council officers, it is acknowledged that a driveway crossover could still be provided and supplemented with a short auxiliary turn lane off Cudgen Road.

Bitzios Consulting are of the view that an auxiliary left turn lane should be maintained within the design to cater for storing vehicles outside the travel lane in the event that pedestrians are traversing the driveway. This arrangement is considered an appropriate supplementary measure to Council's standard driveway crossover requirements in order to maintain the safety and efficiency of Cudgen Road.

Whilst Bitzios agree that public car parks should not be accessed from the western left-in access off Cudgen Road, the Staff Car Park should be accessed from the western access off Cudgen Road. This is required to reduce the turn volumes at the main central access on Cudgen Road, passing the central hospital entry pedestrian areas and minimise queuing at the western car park access.

MUSIC Model

A detailed response and an updated MUSIC model have been provided by Bonacci (attached), addressing DPE comments. The MUSIC model sqz file has also been provided.

Drainage Treatment Strategy

As outlined in the attached response by Bonacci, the required area of bio-retention (as single treatment measure) to treat the site in accordance with requirements is 2,000m^2. It is proposed to utilise bio-retention basins. The basins at the north of the site designed based on the unimproved state of the site at acquisition with large areas of disturbed farmland and highly erosive soils have significantly more area than that required for bio-retention, with almost 3000m^2 of basin base area available. The bio-retention area could be separated from the deeper detention area in the basins and allowed to spill into the detention area once the maximum extended detention depth was reached. The subsurface underdrain pipes that convey the treated flows from the bio-retention would be connected to the outlet pit in the detention basin and would bypass the detention storage as noted by DPE. Note that the bio-retention area required will be reduced as the MUSIC model is developed in conjunction with the architectural layout, as Enviropods and Puraceptors etc are utilised. This is subject to detailed design. Note that the MUSIC model was produced to demonstrate that the development was feasible (and able to meet water quality targets).

Sealing of Haul Roads

As outlined in the attached response by Bonacci, the sealed haul roads are part of construction staging, and will be managed in accordance with the Soil and Water Management Plan.

If all final roads and carparks are sealed for construction staging, the sealed area is approximately 4.349Ha. All runoff from the haul roads will be directed to the sediment basins. The preliminary stormwater system proposed to convey the runoff from haul roads and carparking areas is shown on Drawing C009 (attached). This will be further developed in consultation with the contractor – with the intention to utilise the construction stage stormwater system as part of the final stormwater system. The sediment basins have been sized based on the site being disturbed, as noted in the SWMP detailed calculations (refer attached Drawings C007, C008 and C009). Water quality is managed through the Soil and Water Management Plan during construction, and no MUSIC model is required.

In accordance with legislative requirements, the quality of the water that leaves the site must meet minimum requirements. The Soil and Water Management Plan must be operational until completion of the project (not just Stage 1). The Soil and Water Management Plan will be developed during further design and construction methodology workshops and will need to be updated to show proposed stormwater systems and works zones. It is anticipated that a number of Soil and Water Management Plans will be required for the various stages of construction – these will be provided

prior to commencement of construction, once the final architectural layout, construction methodology and staging have been determined. The MUSIC model is provided for the final project stage, being hospital building, carparks and associated roads (and landscaping). It demonstrates that the operational facility can meet the water quality targets.

Contamination

Health Infrastructure note the comments made by the EPA regarding contamination. Any conditions of consent requiring additional investigation would be complied with.

Additional Government Architect Comments

In response to additional comments from the Government Architect, regarding the piling works proposed as part of the Stage 1 works and suitable integration of the development into the site, Health Infrastructure propose that this can be adequately addressed via a condition of consent. The condition would ensure that the matters raised by the Government Architect are taken into account and suitable integration of the development into the site can be effectively demonstrated before piling is commenced. This would prevent the resultant impact to critical timeframes if the piling component from the Stage 1 works was to be removed.

The following condition, supplemented by further engagement with the Government Architect where reasonable and practical, is therefore proposed:

- *The Applicant must produce a design study that illustrates how the campus masterplan and concept design integrates with the topography of the site to enhance accessibility and hospital functionality, optimise engineering and geotechnical conditions, and reduce the visual impact of the building envelope. The design study must be submitted to the satisfaction of the Planning Secretary prior to the commencement of piling works.*

Health Infrastructure trusts this information satisfies your request and allows for an efficient assessment of this important project. If you have any questions, please contact Leone McEntee at leone.mcentee@health.nsw.gov.au.

Yours sincerely,

Rebecca Wark
Executive Director Rural and Regional