

Confidentiality Requested: no

Submitted by a Planner: no

Disclosable Political Donation: no

Agreed to false or misleading information statements: yes

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Govt. Agency: No

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Tweed Heads, NSW

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Content:

Submission from Tweed District Residents & Ratepayers Association.

Summary: No-one makes productive, prime agricultural red soil farms any more. Find an alternate site for the Tweed Valley Hospital.

IP Address: 220-235-146-187.dyn.iinet.net.au - 220.235.146.187

Submission: Online Submission from company Tweed District Residents Assoc (org_object)

https://majorprojects.accelo.com/?action=view_activity&id=300086

Submission for Job: #9575 New Tweed Valley Hospital

https://majorprojects.accelo.com/?action=view_job&id=9575

Site: #4045 Tweed Valley Hospital

https://majorprojects.accelo.com/?action=view_site&id=4045

TWEED DISTRICT RESIDENTS & RATEPAYERS ASSOCIATION

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Deputy Secretary-Planning Services
Department of Planning & Environment
G P O Box 39
SYDNEY 2001

11th December 2018

Submission - Application Number SSD 18-9575 New Tweed Valley Hospital

Environmental Impact Statement – Part Lot 102 DP 870722

Kindly refer to our concurrent submission on the SEPP rezoning proposal, which we reject unreservedly.

It is hoped Department officers will uphold 23 years of community consultation and gazetted documents dealing with planning matters in the Tweed Shire, all of which support the retention of the principal Health Precinct in the Shire, at Tweed Heads, disallowing the rezoning, thus making this submission on the EIS superfluous.

Rezoning benefits will assign solely to land holders who have been land banking nearby farmlands and attempting rezonings thereon for various purposes from Christian high schools to nursing homes and residential expansion since the early 1990's. Due to these continued, ongoing attempts to change rural land use, various studies were undertaken resulting in the following :-

“The protection of agricultural land on the NSW North Coast is a long-term government initiative. It was first identified in 1995 in the North Coast Urban Planning Strategy and subsequently in the NSW Coastal Policy (1997), the Northern Rivers Regional Strategy (1999) and the Northern Rivers, Upper North Coast and Mid North Coast Catchment Blueprints (2002). It is consistent with the goal and strategic directions of the state government.

The aim:

“100% of those large contiguous areas of land mapped as most important for current and/or future food, fibre and timber production and rural employment permanently protected in agricultural reserves by 2008”.

*Source: Dept Infrastructure, Planning & Natural Resources, Northern Rivers Farmland Protection Project Final Recommendations February 2005

Lot 102 has been reserved for the above purposes and is State Significant Farmland whose use for development is prohibited when other feasible site options exist, as is the case in Tweed Shire.

The Minister is in breach of his own direction under S9.1(2) of the EP&A Act 1979.

The environmental impact of the rezoning, concurrent Stage 1 works and the concept proposal could not be better designed to disastrously impact the greatest number of people possible –

Impacts – Agricultural

1. This unique land, highly productive, volcanic red soil cannot be replaced or relocated.
2. Various springs are located throughout the 500ha ensuring drought free cropping
3. The plateau's 500 ha return some \$10 million to the Tweed economy and are a major employer and economic driver
4. Diminution of the 500ha contiguous lands required for protection as State Significant Farmlands will occur
5. (4) is brought about by the Minister for Planning, Hon. Anthony Roberts, announcing he has already appointed a specialist consultant to facilitate the creation of a Regional Health Precinct around the new hospital site
6. Increased traffic movements affecting viability and workability of surrounding farm
7. Economies of scale in farming practices will be impacted
8. Restraints will be emplaced on farm practices, i.e. machinery noise, chemical uses, spray drift etc
9. Unknown effects of increased air borne pollution on crop viability & pasture
10. Other red soil sites in the Shire, at Terranora and Banora Point have been urbanised leaving this small base for farming
11. Cudgen Plateau is essential for continuance of farming as a **productive** contributor -v- service industry
12. The "farmer shortage" will be exacerbated as rezoned lands will deny the opportunity to hand on the family farm in the middle of the "urban area"

13. The opportunity for farm stays, small scale on farm production in keeping with the NCRP strategy will be foregone

Impacts Social

- a) Imposition of increased air pollution and noise by the >700,000+ people who will be accessing the hospital, 24 hour emergency vehicles, sirens, helicopters, light pollution, etc.
- b) Destroying Kingscliff locale as “low key coastal settlement”
- c) Disrupting the ambience of all who live at Kingscliff to enjoy a quiet, peaceful, low impact lifestyle
- d) Ruination of the clean, green, Tweed Caldera scenic amenity
- e) Devastating the sensible retirement planning of thousands of Tweed people who settled north of the river to be near to Tweed Heads District hospital
- f) Minister for Planning, the Hon. Anthony Roberts referring to Kingscliff as the “Tweed Regional City”
- g) Removing certainty from the lives of thousands of NSW residents by this complete contempt for the established planning process
- h) Causing incredible anxiety amongst residents north of the river by refusal to inform as to what health facilities will remain in Tweed Heads

Impacts – Buffer Zones

- i) Failure of the proposed building footprint designers to properly observe the mandatory minimum buffers specified in NSW Government policy intended to maintain separation of highly sensitive health facilities from conflicting adjacent land uses
- j) Failure to provide NPWS mandatory proximity zone protection requirements for highly endangered species on the site margins
- k) Failure to fulfill obligations under NSW SEPP Coastal Management 2018 not to disturb the proximity zone of wetland habitats by excavation
- l) Possible loss of the highly endangered Mitchell’s Rainforest Snail by devastation of its habitat’s environs
- m) Where is the bush fire buffer zone required?

- n) Where are the buffer zones to protect the hospital buildings from spray drift, agricultural machinery noise, etc.

Flooding

The decision to choose this site is flawed. The arguments that

- a) Tweed Hospital (TH) could not be expanded due to PMF flooding concerns
- b) TH was inaccessible during major flood events
- c) Are totally at odds with the Government's own North Coast Regional Plan 2036, adopted in 2017, which nominated Tweed Heads as the Regional Hospital and Health Precinct, whilst the Locality Master Plan for Kingscliff & Cudgen made no mention of relocation of the District Hospital.
- d) Contrary to the Health Minister's claims of accessibility, in the last major flood Kingscliff was cut off for several days from road access to the Pacific Motorway, the Gold Coast and all of the Tweed Shire except the 3 coastal villages to the south. In this respect it is no better than a number of other rejected sites.
- e) In regard to the PMF, the flood event referred to is on a scale well beyond experience, but is by definition catastrophic. All public utilities serving the hospital will be shut down; all road access in all directions will be closed; 17,000 homes and most streets in the Shire will be flooded; 41,000 of today's population will be displaced; the Tweed River will likely have broken into the sea south of the current estuary; and traffic movement will be confined to flood boats and helicopters. The regional hospital will presumably be in all but Emergency Services lock-down in such conditions if they ever occur.

Conclusion re Flooding

We submit the real criterion for PMF should have been that all active floors of the Regional Hospital are isolated from the PMF, not necessarily the site itself. That isolation can readily be achieved with filling, building elevation, and/or water barriers on sites presently well below the PMF.

NB: The original core Tweed District Hospital, 1972 (c) wards, emergency, operating theatres etc. was built up to be absolutely flood proof. Subsequent expansion of the hospital, by NSW Health, was all done at GROUND LEVEL with no regard to possible flooding. In any event, the site has never flooded, and with proper planning and construction TH could be appropriately designed.

Far North Coast Regional Plan 2036

Kingscliff & Cudgen

In contrast to Tweed Heads, the lesser villages of Kingscliff & Cudgen barely rated a mention in the NCRP. The residents' declared environment and lifestyle expectations are expressed in the recent draft Kingscliff Locality Plan (KLP) – two years in the making –

- Low key coastal atmosphere
- Beach proximity
- Environmental qualities of Cudgen Creek
- Expansive coastal foreshore
- Agriculture and farming define the settlements
- Green hinterland back drop
- Unique landscape and visual character of Tweed Valley
-

What the government has failed to properly share is that the initial doubling of the current Tweed Hospital size and its transfer to Kingscliff (along with all the associated private health infrastructure around it will achieve the opposite to the community vision expressed through consultation.

It will instead create the City of Kingscliff/Cudgen, the Regional Health Precinct city-scape that was once intended for Tweed Heads.

How can a new hospital ultimately 20% bigger than the current Gold Coast University and akin to Frenchs Forrest, be inserted into a town with no associated development in proximity.

The Minister for Planning the Hon. Anthony Roberts has recently announced that he has already appointed a specialist consultant to facilitate the creation of a Regional Health Precinct around the new hospital site.

Flawed Decisions

Apart from the above issues which flag a determination to block any relevant concerns even being introduced before the DA is approved, there are two flawed decision-making events that should justifiably be revisited by whatever government is in power after March 2019. The first is the unilateral decision to relocate the hospital and the second is the flawed site choice criteria.

1. Relocation flaws.

The current government has held office for three terms, constantly promising Tweed health services improvements, but doing little, except planning. To their credit they consulted with the community in devising a North Coast Regional Plan 2036 (released March 2017) showing a new hospital site at the core of a Health Services precinct which was to be the economic driver for the

expanded Regional City of Tweed Heads. At the same time, this Regional Plan argued strongly for better protection of what is simply the best agricultural land in Australia.

The state government also authorized the 2017 exhibition of the draft Tweed Local Environmental Plan strongly reinforcing the Tweed Heads Regional Hospital & Health Precinct at Tweed Heads.

Summary

The EIS on this site should be abandoned -

- Targeting State Significant Farmland when other site options exist. These lands were designated to be protected, not destroyed by the Government.
- Revising the 2017 North Coast Regional Plan by Ministerial decree to shift the Tweed Hospital away from the City of Tweed Heads to the Town of Kingscliff with no prior community consultation whatsoever.
- Ruining Kingscliff's local beach and fresh food tourism industry. Changing the core business focus and culture of the town from tourism and small crop agriculture to health services without any discussion with the community.
- Undermining the community's hard fought 3 story limit in Kingscliff (and the coastal villages) by changing its character through an iconic multi-storey building that will overwhelmingly dominate the skyline
- Gutting the economy of Tweed Heads by removing the key economic driver (hospital) and betraying Tweed Heads residents with medical issues who invested their life savings in homes with hospital proximity.
- Failing to consult with the community prior to the site choice decision, contrary to claims made in the EIS.
- Ignoring any mention in the Community Consultation appendices of the two petitions with well over 8000 signatures that went to the Upper & Lower Houses of NSW Parliament, nor of the 4600 followers of the "Relocate" FaceBook page. These were the strongest community responses recorded in ANY forum.
- Ignoring any mention of the resolution by Tweed Shire Council to oppose siting of the Tweed Hospital on prime agricultural land when considering social impacts and community responses.

- Falsely asserting that the chosen site was the “best” and “chosen by experts” when in fact it was a commercial decision from the limited land for sale at one particular point in time in 2017. The “experts” never considered any land that was not for sale. Using the same compulsory acquisition powers currently being exercised over the reluctant owner of the Cudgen site, they could have selected ANY site in the Tweed Valley.
- Isolating the majority of Tweed’s residents (Tweed Heads & Banora) from access to the Tweed Regional Hospital during major flood events
- Diminishing Kingscliff residents’ quality of life with intense urbanization, increased traffic congestion and parking demand, 24hr ambulance emergency sirens, 24hr helipad emergency aircraft arrivals, all-night floodlighting of entire site, loss of amenity, loss of rural ambience, lifestyle, etc
- Disguising the full costs of relocating the Hospital development by assigning the future costs of extending transport and utility infrastructure to other public Authorities. E.g. light rail proposed from Gold Coast airport to Tweed Heads.
- Business & residential migration to the hospital precinct will increase property demand and therefore real estate prices in Kingscliff, rendering it unaffordable for family offspring to live there in the future

However, the main reason why this site and adjacent areas are totally unsuitable for a hospital precinct is that

**** **No-one is making productive, prime agricultural red soil any more** ****

There are alternative, suitable, low impact sites available.
ends

Tweed District Residents & Ratepayers Assoc
Ronni Hoskisson – Hon Sec
December 12 2018

Confidentiality Requested: no

Submitted by a Planner: no

Disclosable Political Donation:

Agreed to false or misleading information statements: yes

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Govt. Agency: No

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64 PHILLIPS LANE

TWEED HEADS, NSW

2485

Content:

Please see submission attached.

NB: State Significant Farmland cannot be replaced, if rezoned. Kindly find a more suitable site for the hospital.

IP Address: - 220.235.146.187

Submission: Online Submission from company Tweed District Residents & Ratepayers Assoc
(org_comments)

https://majorprojects.accelo.com/?action=view_activity&id=300090

Submission for Job: #9659

https://majorprojects.accelo.com/?action=view_job&id=9659

Site: #0

https://majorprojects.accelo.com/?action=view_site&id=0

OBJECTION FORM

TWEED VALLEY HOSPITAL

not on

STATE SIGNIFICANT FARMLAND

Submission from

Relocate Kingscliff Hospital from State Significant Farmland Inc


Draft Plans and Policies
[Home > Draft Plans and Policies](#)
[On Exhibition](#)

Department of Planning & Environment

Exhibition

Proposed State Environmental Planning Policy - Tweed Valley Hospital

The proposed State Environmental Planning Policy (SEPP) would amend the Tweed Local Environmental Plan 2014 by rezoning part of 771 Cudgen Road, Cudgen (Part Lot 102 DP 870722) from Zone RU1 Primary Production and Zone R1 General Residential to Zone SP2 Infrastructure (Health Services Facility), making health services facilities and ancillary uses permissible with development consent. The amendments will also remove the current maximum height of buildings, minimum lot size and floor space ratio controls.

We seek your feedback on the Explanation of Intended Effect (EIE). Submissions can be made until 13 December 2018.

3. Fill in the online submission form

To make an online submission, please fill in the following fields. Those marked with an asterisk "*" are mandatory.

- ☐ I am making a personal submission
- ☒ I am submitting my organisation's submission

Name: (Optional)

<input type="text" value="Ms"/>	<input type="text" value="Hayley"/>	<input type="text" value="Paddon"/>
Title	First Name	Last Name

The names entered above will not be published in the list of submitters on the Department's website. The organisation name entered below WILL be published.

Relocate Kingscliff Hospital from State Significant Farmland Inc

Organisation details:

<input type="text" value="Relocate Kingscliff Hospital from"/>	<input type="text" value="Public Officer"/>
Organisation (max. 100 characters) *	Position in organisation *
<input type="text" value="relocatetvhospital@gmail.com"/>	
Email *	
<input type="checkbox"/> I am a government agency or authority	

Address: *

91 Ash Drive

Address 1

Address 2

Banora Point

Suburb - we will publish your suburb in the list of submitters with a link to your submission

NSW



2486

State

Postcode

Submission: *

We will publish your submission including any personal information about you which you have chosen to include in your submission, on the department's website. Your submission can be either typed in the column below or uploaded.

Your comments (max 9,500 characters) See Submission on following pages

Please upload any attachments in **PDF format**.

4. Agree to the following statements

I have read the Department's [Privacy Statement](#) and agree to the Department using my submission in the ways it describes. I understand this includes full publication on the Department's website of my submission, any attachments, and any of my personal information in those documents, and possible supply to third parties such as state agencies, local government and the proponent.

I agree to the above statement ☒

6. Offence to provide false or misleading information

It is a serious criminal offence under the Crimes Act 1900 to provide information to the Department of Planning and Environment knowing that, the information is false or misleading or the information omits any matter or thing without which the information is misleading.

I have read and understood the above ☒

I understand that by clicking the "Send Submission" button, I am providing the information contained in this form to the Department of Planning and Environment and confirm that that information is not false or misleading ☒

Signed:

Date

HG Paddon

12 December 2018

Submission on Proposed Tweed Hospital SEPP

Executive Summary.

Our Incorporated Association “Relocate Kingscliff Hospital from State Significant Farmland Inc 18005678”, commonly referred to as the Relocate Group, is a community of concerned farmers and Tweed Valley locals who are campaigning for a less destructive alternative site for the proposed Tweed Valley Hospital. Our members are drawn from all occupations and political persuasions, but have no alliance with any political party or developer.

We strenuously object to the proposed rezoning of the State Significant Farmland at 771 Cudgen Road Cudgen intended to permit the erection of a Hospital and allow associated health services to establish on that site. Our reasons for objection are substantial and extensive. They are scheduled comprehensively in the table following this summary. Whilst this completely unforeshadowed departure from established public policy raises a myriad of questions that go to the integrity of the process and its proponents, we have short-listed below those that simply go to the heart of its viability.

We urge that the proposed SEPP not proceed for the following reasons:

- **State Significant Farmland.** Use of protected farmlands for development when other feasible options exist, in breach of the Minister’s own Direction under Section 9.1(2) of the EP&A Act 1979.
- **Ecologically Sustainable Development (ESD)** Failure to acknowledge or defend the ESD principle of Intergenerational Equity as required by SEARs and the EP&A Regulations when responding to consequences of destruction of Australia’s best and most productive farmland.
- **Illegal Habitat Destruction** Failure to acknowledge the widely reported presence of the highly endangered Mitchell’s Rainforest Snail in scheduled wetland habitat at the site margins, and to respond to the NPWS mandatory proximity zone protection requirements for that species under the *Environment Protection and Biodiversity Conservation Act 1999*. Further failure to properly respond to obligations under NSW SEPP (Coastal Management) 2018 not to disturb the proximity zone of scheduled wetland habitats containing endangered species by excavating the site’s entire SEPP mapped proximity zone for the purpose of water quality management of hospital runoff, PRIOR to obtaining development consent for a Hospital. In the absence of any documentary evidence of compliance this work appears to be illegal under several statutes, and should cease forthwith.

See Sections 

1.1, 1.3, 1.4, 1.5,
2.4

6.2, 6.4.2

Appendix 1

1.2

3.2

6.8

Appendix 2

- **Activity Buffers.** Failure of the proposed building footprint designers to properly observe the mandatory minimum buffers specified in NSW Government policy intended to maintain separation of highly sensitive health facility buildings from existing, incipient, and proposed bushfire fuel sources (APZ's); and from conflicting adjacent land uses, particularly chemical spraying and dust from agricultural activities.
- **Apprehended Bias.** Failure of the Minister for Planning & Environment to recuse himself from reviewing public submissions and forming a un-biased opinion on whether to proceed with this SEPP, having already financed and appointed a private consultant to recruit private health services to the Cudgen Hospital site to commence the very ancillary services the SEPP approval is intended to allow. The appointment suggests apprehended bias, and if so, the Minister is no longer capable of making a decision on the SEPP without prejudice.
- **North Coast Regional Plan 2036.** Disregard for the Planning & Environment Department's own adopted North Coast Regional Plan 2036 released in 2017 and endorsed by Health Minister Hazzard as reflecting Health Department hospital site choices. Not only did the plan nominate Tweed Heads as one of only four Regional Cities capable of sustaining district hospitals, it demanded absolute protection of State Significant Agricultural Land from development. The Health Minister's 2018 relocation decision managed to break both undertakings simultaneously. The NCRPlan should not be arbitrarily amended without resuming the extended public process which underpinned its adoption.

3.2,

3.3

Appendix 2

2.8

2.2,

4.2,

5.1,

5.2

- **Flawed Consultation.** Transparency and advance consultation underpin modern expectations for democratic decision-making in Australian society. Nothing could be further from the truth in this instance. Despite over 8000 opposition signature petitions to NSW parliament, a hostile social media website with 5000 followers and strong resolutions of opposition from Tweed Shire Council, the Minister continues to insist his hospital project enjoys popular support. In fact the pages below show secrecy, exclusion, complexity, misinformation and autocratic decree have been the hallmarks of this consultation process. It has now arrived at the current point where a SEPP to enable destruction of prime farmland is finally being exhibited for comment. (Note that the actual destruction of the prime farmland is already well underway with earthmoving plant active on a site plastered with 2m high signage announcing the new hospital in progress - well prior to rezoning or any development consent for a hospital.) This is symbolic of the proponent's contempt for due process, contempt for the Tweed Shire Council's justified opposition, and contempt for the public, to whom they want to make clear that any effort to participate in consultation will be wasted energy.

The prolonged travesty of the consultation process is explored in detail in the tables below. The SEPP should not enjoy approval on this basis.

- **Flawed Site Selection Process.** Much of the site selection process still remains shrouded in secrecy– even from the participating vendors – so there is no way of knowing for certain whether the site selection was fully merit based, or was effectively pre-determined from the outset. Unanswered parliamentary questions have been raised by the NSW Opposition and MLC Dawn Walker in this regard. In any case there is sufficient evidence to say that the scope was limited to land actually for sale, the price was, by the Minister's account, a key factor, and arguments made for the site choice by HI NSW employee Peter Lawless in his subsequent post announcement Site Selection Summary Report (the real report by Charter Keck Cramer remains a state secret) have been widely criticised as inconsistent. Claims that the site choice process behind this SEPP obtained the best and most suitable site are therefore highly dubious. It should not proceed on this basis.

Section 4

1.1

Section 2

- **Site Confinement.** The site to be rezoned is tightly bounded on all sides by existing development, protected environmental wetlands, and protected state significant farmland. Despite the SEARs requirement for examination of cumulative impact, and the SEARs application nominating an ultimate 900 bed hospital, there has been no attempt by the proponent to provide evidence that such a hospital can eventually be accommodated wholly on the site. (The Planning Minister has appointed a consultant to foster clustering of private health related services in and around the hospital precinct. Due to confinement these too must be accommodated **ON** the site.) After recognition of the real constraints of perimeter buffers mentioned earlier, the footprint of the ultimate hospital complex will exceed the confines of the site. It should not be approved on this basis.
- **Co-location Consequences.** As mentioned earlier, co-location of private health related services in the hospital precinct is already being officially sought. The reality and extent of such additional services (and their infrastructure needs) in relation to a Level 5 Hospital is far beyond the capacity of the site, yet no other land is available in immediate proximity. It will inevitably promote the alienation of even more prime agricultural land and further multi-storey building as the only way to achieve the necessary expansion. Approval of the SEPP will tip the first domino in this line. The rest will follow.
- **Flooding and the Probable Maximum Flood (PMF).** Much has been made of the site's insulation from the PMF, allowing it to remain operational even during such an event. However the nature of that event is actually akin to Hurricane Katrina which closed down and evacuated a dozen major hospitals in New Orleans in 24 hours. Not because they were inundated, but because they were isolated from supplies and lost all power water and waste disposal services for at least a week. In this extreme event Kingscliff hill will be an island between the swollen river and the raging ocean, with no functioning services and no essential supplies. According to the EIS, power and water storage on the Cudgen site is less than a day. There is no plan or ability to stay open during a PMF in this location. To genuinely meet the PMF criterion, it would be much better placed with a strong land-bridge to higher ground accessing a large flood free urban centre. Furthermore the attempt to relocate south of Tweed Heads to enable Q100 access from the south is demonstrably false. All access roads north and south, except perhaps to three coastal villages are flooded. The real consequence of moving south is denial of access by flood isolation for the majority of the population (who live north of the Tweed River) from the Tweed Valley Hospital. This argument for site choice is not sustained.

3.1

3.4

2.7,
2.11

- | | |
|--|-------------------------|
| <ul style="list-style-type: none"> • Building Height Limits in Kingscliff and the coastal villages have been obtained through years of activism and much public consultation. This 9 storey SEPP will instantly set a local precedent which by attrition could overturn these hard-won principles without any community engagement whatsoever. The pressure from adjoining parcels to accommodate demand for expansion without excessive invasion of farmland will drive floor levels generally upwards. | 5.1
5.3 |
| <ul style="list-style-type: none"> • Visual Impact. Suggestions that the visual impact of the final 900 bed hospital will be unremarkable are nonsense. This is a multi-storey group of buildings in an isolated location on the crest of a hill, prominently visible from the surrounding floodplain and from higher land kilometres to the north. As the only tall building, it will be a landmark that dominates the skyline in the way that Chartres Cathedral dominates the rural landscape of France. That is to say the hospital will be a signature landscape icon for the district. It will dramatically change the visitor perception of Kingscliff/Cudgen from a distance and on arrival. Its perimeter position will also form a gateway to the southern part of the town. The community have never been properly informed so that they appreciate this dramatic change of image, scale and character of their town before the project proceeds. | 6.5.2
6.3.8
6.3.9 |
| <ul style="list-style-type: none"> • Transformation of a Locality. Clause 228(2) of the <i>Environmental Planning and Assessment Regulation 2000</i> requires examination of the consequences of any transformation of a locality. As the proposal demonstrably will overwhelm the existing Cudgen/Kingscliff landscape, economy, traffic destinations, and culture, it deserves more than the cursory examination this EIS offers. | 6.5.2 |
| <ul style="list-style-type: none"> • Traffic and Parking The cumulative impacts of traffic and parking changes have been seriously underestimated because they include only the hospital itself and not the associated private premises the hospital precinct is intended to foster. Nor do they include the impact of the expansion of TAFE as part of the teaching hospital, or the urban expansion and densification needed to support the new community. The on-site parking provisions are intended to be a self funding revenue source, unlike the adjoining streets in walking distance which are free. Paid parking will not commence until all free parking has been consumed. The project's location will be a parking burden imposed on surrounding streets. Its traffic impacts are misrepresented. | 6.1
6.3.1
6.3.2 |

The group website at www.RelocateTweedValleyHospital.org contains substantial elaboration of these points, and further historical background illuminating the continuing threats for Cudgen farmland.

DETAILED OBJECTIONS

1. STATE SIGNIFICANT FARMLAND DESTRUCTION

#	Issue	Detail	Remedy
1.1	False claims of all other sites being “non-feasible”	<p>The SEPP for using farmland for a hospital targets State Significant Farmland when other feasible site options exist. “Feasible” means literally “can be done”. Sections 5.2.4 p.72 and 5.6.1 p.108 of the EIS attempt to justify non-compliance by conflating the phrase “not feasible” with “not cheapest” or “sub-optimal” or “undesirable”. These are semantic concoctions intended to set aside the clear intention of the absolute protections provided under the EP&A Act’s Section 9.1(2) direction on State Significant Farmlands, and the NCRP 2036.</p> <p>Furthermore, such claims rely on a nonsense that highly expert (yet still secretive) consultants were paid handsomely for preparing a second round short list of acceptable sites, all of which were non-feasible.</p>	Claims made of other sites being “non-feasible” should either be genuinely substantiated or rejected.
1.2	ESD	<p>The EP&A Act and Regulation require an EIS to consider Ecologically Sustainable Development; ESD i.e. “development that meets the needs of the present without compromising the ability of future generations to meet their own needs”. One of the four key precepts of which is Intergenerational Equity. We know future generations will face a perhaps lethal combination of global warming causing desertification and drought, in conjunction with overpopulation requiring additional food and living space (which in turn reduces available food-producing land.) This proposal intends to permanently destroy a significant amount of the most productive and best watered agricultural land in Australia and perhaps trigger further concomitant losses. If so it will potentially deny future generations an entitlement to a critical food supply they would otherwise have enjoyed.</p> <p>The ESD Precautionary Principle (that destruction should not occur in the absence of guarantees that it will not have long term consequences) also applies.</p>	The Applicants should satisfactorily demonstrate their proposal delivers Intergenerational Equity. The EIS fails entirely to mention this fundamental precept in the ESD chapter.

#	Issue	Detail	Remedy
1.3	Disregard of State Significant Farmland	<p>The site at 771 Cudgen Road, Cudgen should never have been an option for consideration, let alone chosen as the preferred site. During a period of extreme drought across the State, it is unbelievable that the government could see fit to use a parcel of drought-free State Significant Farmland as a viable option for redevelopment. Despite the distinct lack of appropriate community consultation, the TVH SSSR itself acknowledges that 'Community consultation (has) identified that there was (is) significant opposition to any site that includes SSF.' This coupled with the fact that in its current zoning (RU1) the proposed development is in fact prohibited, hence the need for rezoning.</p> <p>The rezoning of this parcel of land is in direct contradiction of the State's own (Department of Primary Industries) Policy: Maintaining land for agricultural industries, 2011. The Policy includes direction to:</p> <ul style="list-style-type: none"> • promote the continued use of agricultural land for commercial agricultural purposes, where that form of land use is sustainable in the long term; (the site and its current use is very sustainable – drought free land for growing food for current and future generations) • avoid land use conflicts; (rezoning to SP2 would be a significant conflict to surrounding land uses – farms and coastal wetlands) • protect natural resources used by agriculture; (this land should be protected not concreted) • protect other values associated with agricultural land that are of importance to local communities, such as heritage and visual amenity (a change in land use will negatively affect the cultural aspects of the area of farming and fresh food tourism, relaxed beachside lifestyle/tourism/recreation, the farming heritage, the scenic amenity will change from farms and mountain ranges to concrete structures, with invasive lighting) <p>The policy also states 'The conversion of land used by agricultural enterprises to other uses should only take place where fully justified in the strategic planning context.' Considerations include:</p> <ul style="list-style-type: none"> • all alternative sites and options for non-agricultural developments; • any decisions to convert agricultural land of high value to regional and state agricultural industries should be a last option <p>There is no 'justified' strategic planning to support the rezoning of this land, in fact it goes against many facets of the current planning documents in place for the area, which the community has fought hard to maintain. In addition, up until recently all planning for future hospital services in the Tweed have been focused on the redevelopment of the existing site at Tweed Heads, until a recent complete 'flip' by those in power.</p>	<ul style="list-style-type: none"> • Save the most productive farmland in Australia for now and more importantly in the future.

#	Issue	Detail	Remedy
1.4	Northern Rivers Farmland Protection Project 2005	<p>EIS p.108 Farmland Protection DPI Feb 05 Use of SSF farmland for development (reference DPI policy). The policy is clear that Australia's best farmland needs to be protected as a national asset, as a valuable industry for the Tweed Shire, and as food security for future generations. These lands were designated to be protected, not destroyed by Government. Directions to Tweed Council from DoPE specifically refer to their obligations to enforce the SSF protection policy embodied in the NRFPP.</p> <p>The State Significant Farmland's viability threshold of 500ha. in the NRFPP is already at-risk. It only needs further loss of approximately 30ha for the entire Cudgen Plateau to lose its technical eligibility for special protection. The risks are elaborated further below.</p>	Abide by the precepts of the NRFPP which are at the core of all NSW FNC farmland protection policy.
1.5	Failure to observe statutory instructions meant to protect farmland.	<p>The site at 771 Cudgen Road, Cudgen should never have been an option for consideration, let alone chosen as the preferred site. During a period of extreme drought across the State, it is unbelievable that the government could see fit to use a parcel of drought-free State Significant Farmland as a viable option for redevelopment. Despite the distinct lack of appropriate community consultation, the TVH SSSR itself acknowledges that 'Community consultation (has) identified that there was (is) significant opposition to any site that includes SSF.' This coupled with the fact that in its current zoning (RU1) the proposed development is in fact prohibited, hence the need for rezoning.</p> <p>The rezoning of this parcel of land is in direct contradiction of the State's own (Department of Primary Industries) Policy: Maintaining land for agricultural industries, 2011. The Policy includes direction to:</p> <ul style="list-style-type: none"> • promote the continued use of agricultural land for commercial agricultural purposes, where that form of land use is sustainable in the long term; (the site and its current use is very sustainable – drought free land for growing food for current and future generations) • avoid land use conflicts; (rezoning to SP2 would be a significant conflict to surrounding land uses – farms and coastal wetlands) • protect natural resources used by agriculture; (this land should be protected not concreted) • protect other values associated with agricultural land that are of importance to local communities, such as heritage and visual amenity (a change in land use will negatively affect the cultural aspects of the area of farming and fresh food tourism, relaxed beachside lifestyle/tourism/recreation, the farming heritage, the scenic amenity will change from farms and mountain ranges to concrete structures, with invasive lighting) <p>The policy also states 'The conversion of land used by agricultural enterprises to other uses should only take place where fully justified in the strategic planning context.' Considerations include:</p> <ul style="list-style-type: none"> • all alternative sites and options for non-agricultural developments; • any decisions to convert agricultural land of high value to regional and state agricultural industries should be a last option 	<p>Do not proceed with the SEPP.</p> <p>This land needs to be protected as a national asset, with farming being a significant industry for the Tweed Shire's economy as well as providing food security for future generations</p>

#	Issue	Detail	Remedy
		<p>There is no 'justified' strategic planning to support the rezoning of this land, in fact it goes against many facets of the current planning documents in place for the area, which the community has fought hard to maintain. In addition, up until recently all planning for future hospital services in the Tweed have been focused on the redevelopment of the existing site at Tweed Heads, until a recent complete 'flip' by those in power.</p> <p>Refer to Appendix 1 of this document for a more comprehensive analysis if the utility of agricultural land on the Cudgen Plateau.</p>	

#	Issue	Detail	Remedy
2. SITE SELECTION NON-TRANSPARENCY & POLICY DEVIATIONS			
2.1	Site Selection Process	<p>As stated in the government's own Tweed Valley Hospital Site Selection Summary Report July 2018, (TVH SSSR) 'Selecting the right site for the Tweed Valley Hospital is vital to building the future of healthcare and servicing the health needs of the Tweed-Byron community now and into the future.' However, the site selection process undertaken by the government has been flawed from the beginning. Lack of planning and use of appropriate site selection research, the government simply asked the community to 'put their hands up' to find a site – no use of sound planning, engineering or otherwise. Just 'who wants to sell'.</p> <p>Furthermore, a parcel of State Significant Farmland should have been immediately excluded from consideration due to its value to the community, the fresh food producing power, the government's commitment to maintain agricultural land and the impact that its development would have on the fabric and culture of the surrounding area.</p> <p>The approach taken by NSW Health does not show respect for community views particularly when the location in question has had numerous attempts at rezoning and development in the past - all of which have been rejected by the community. These have been very well documented in the media for more than a decade. Years of work has gone into ensuring that the fertile soils of the Cudgen plateau had the highest levels of protection through State Significant Farmland status [2]. Furthermore, MP Geoff Provest has acknowledged the importance of Cudgen plateau farmland in the media, following an unsuccessful attempt to locate a police station in the same location (ref). NSW Health is now using its own mismanagement of Tweed Shire Health Services to force a decision between what is being touted as a now "urgent" health crisis and the years of community planning by the Tweed Shire Council to restrict overdevelopment on the coastal strip.</p> <p>Most infrastructure projects go through years of consultation, engineering, design, planning, site selection, environmental assessment, business case proposals etc, prior to gaining delivery funding and therefore a flag to proceed. In fact, years of appropriate planning has gone into the previous proposal to redevelop the existing Tweed Hospital site. So why is it that this project has been spun around with no planning, minimal consultation, no design but suddenly it is happening at Cudgen and all previous planning for redevelopment has been thrown out the window?</p> <p>This, together with a distinct lack of appropriate/thorough community consultation or social and environmental impact assessment means that we have been presented with a seriously cobbled together rushed through 'dart thrown at the map' style of site selection – and then a 'how do we push it through' scenario. Including the notion of a 'early works' EIS to be followed by a 'full' EIS with very little mention of the precursory SEPP determination and public 'exhibition' period.</p>	Do not proceed with the SEPP. Revisit the process.

#	Issue	Detail	Remedy
2.2	Disregard for statutory obligations.	To initiate its search for a “Greenfields” site, HI NSW in the first instance placed a public advertisement for Round 1 Expressions of Interest that expressly mentioned that it might include any lands protected by the 2017 North Coast Regional Plan, although they are to be specifically excluded from consideration by “unless no feasible alternatives exist”. There is no evidence that the Health Minister referred that issue to the Minister for Planning & Environment before proceeding with the advertisements. HI NSW failed in its statutory duty to NOT seek to exploit such land until feasible alternatives were exhausted.	Recommend the flawed site selection process without excluding properties not on the market, as HI NSW has in any case elected to pursue Compulsory Acquisition which means the entire Eol process pointlessly restricted the optimal choice.
2.3	False Claims of Selection Criteria	<p>P.5 SEARs Application “The site selection process identified this site as the most suitable location for a major referral hospital serving the Tweed-Byron community”. This statement incorrectly implies the site selection process was purely on merit and not biased to convenience or pricing. In fact the process is one devised to generate a quick low conflict commercial transaction where Expressions of Interest (Eol) for sale are invited from landowners in the generally favoured locality and from the limited offers received, the least bad is chosen. This process can hardly be described as “optimal”. Many more appropriate sites may exist but are excluded due to lack of vendor interest. Mysteriously the government deliberately chose not to declare lands permanently protected from development by its own planning legislation ineligible for the Eol – suggestive of a pre-emptive bias towards the chosen site. In defence of the final selection the Health Minister stated “... <i>additional infrastructure costs</i> (of other sites) <i>would significantly impact on the budget available to build clinical space.</i>” (Hon. Brad Hazzard media release 16-07-18). Clearly the site selection was arrived at using more influential criteria than simple “Suitability”.</p> <p>Consequently it seems that the Health Department has falsely asserted that the chosen site was the “best” and “chosen by experts” when in fact it was a commercial decision from the limited land for sale at one particular point in time in 2017. The “experts” never considered any land that was not for sale or volunteered for sale. Using the same compulsory acquisition powers currently being exercised over the reluctant owner of the Cudgen site, they could have selected ANY site in the Tweed Valley. This means that State Significant Farmland could have been actively avoided, as required by statute and public policy.</p>	Recommend the flawed site selection process without excluding properties not on the market, as HI NSW has in any case elected to pursue Compulsory Acquisition which means the entire Eol process pointlessly restricted the optimal choice.

#	Issue	Detail	Remedy
2.4	<i>“The Fallacy of GreenField Sites”</i>	<ul style="list-style-type: none"> • Although a commonly used term in development vernacular, the term Greenfield site can have varying definitions. In seeking a greenfield site, the proponents sought land whereby there were no limitations presented by existing building. An unused, unbuilt piece of land was sought for the location. This leaves the farming community under constant attack without protection since the equipment, plant and materials they use is soil, natural resources and open fields. Their workplace, their ‘office’ can be chosen as a greenfield site and their work considered of lesser value because it does not occur within the confines of a building. The term greenfield site does not recognise that agricultural land for farming is in use and engaged in constructive production 24 hours a day. The absence of a roof and walls around the workspace does not make it ‘available’ for other purposes. • In seeking a greenfield site, the proponent’s criteria were flawed by accepting into their consideration any land without buildings. The proponents should not have included land with currently established and functioning agricultural activity. This should be equated with being built on. • The process was severely flawed from commencement where expressions of interest were accepted from land with classification as state significant farmland. Debating over the status of State Significant Farmland or State Significant Development and attempting to justify the case for SSD is ludicrous when clearly feasible alternatives exist. 	The proponent should return to their selection phase and conduct it effectively by re-examining possible options and clearly defining criteria for the site. This should include the exclusion of any agricultural land designated as of state significance as well as agricultural land that either presently or in the future is utilised for productive agricultural purposes.
2.5	Adaptation	The Tweed Valley Hospital Site Selection Summary Report July 2018 (TVH SSSR) fails to properly assess all sites for viability accounting for how easily some site challenges might be remediated through engineering or other means. It simply compares sites in their current condition, with infrastructure service plans based on historical intentions developed prior to a surprise imposition of a hospital. Half a decade is available to respond by revising infrastructure strategies in the same way that the proposed site will in any case necessitate. (In the absence of disclosure of the real report there can no certainty of the application, or not, of this principle.)	Do not proceed with the SEPP. Revisit the process.
2.6	Projected Infrastructure & Demography	The analysis didn’t consider potential availability of infrastructure at the opening date, rather than the present; nor was hospital positioning centroidal to long term regional demography discussed as a factor driving site selection.	Do not proceed with the SEPP. Revisit the process

#	Issue	Detail	Remedy
2.7	Servicing the catchment	<p>The Tweed Valley Hospital Site Selection Summary Report July 2018 (TVH SSSR) notes that the need for the new hospital is two-fold, being that the existing Tweed Hospital is at capacity and that there is a need to service a growing population across the Tweed-Byron catchment. The TVH SSSR states that the new hospital will form the core of the network of hospital and community health centres across the Tweed-Byron region.</p> <p>The argument for discarding the current site in favour of a “greenfield” one that is relatively close-by in broad hospital catchment terms is not sustained by this choice. Redevelopment plans existed and were demonstrably feasible so that remaining on the current site was an option deserving of public debate. The report is presently denied access through GIPA, the summary having been written by the client not the consultants (who have as yet provided no public endorsement of that publication as reflective of their work.)</p> <p>The TVH SSSR states that the reasons a redevelopment is not proceeding at the Tweed site is that ‘The physical limitations of the existing Tweed Hospital site, has inadequate space to develop new buildings and access is impacted by flooding.’ Firstly, inadequate space is hardly a factor when more land could simply be acquired, as has been the case in purchasing a new location. Secondly, access is impacted by flooding at most locations including the proposed site at Cudgen where most approach roads are flood affected including as recently as March 2017. Neither argument has persuasive grounds.</p>	Do not proceed with the SEPP. Revisit the process
2.8	Pre-emptive decision-making	<p>Divisions 3.2 and 3.3 of the EP&A Act 1979 legally oblige the Minister for Planning to receive & consider comment from the public exhibition prior to making a decision on the SEPP. A key purpose of this SEPP is to permit further health related uses in addition to a hospital on the Cudgen site.</p> <p>Financing and appointing a consultancy to pursue the Regional Health Precinct (discussed in 3.4 below) demonstrates a prior commitment to a decision to proceed with the rezoning of the Cudgen State Significant Farmland for a Hospital and related purposes. The SEPP decision process is therefore contaminated by bias. In consequence, we believe the Minister is no longer capable of exercising his decision responsibilities without prejudice.</p>	The Minister must recuse himself from participation in the SEPP decision. Failure to do so will render him in contempt of the legislation.
2.9	Unconfirmed Concerns over Possible Administrative Failure	Despite Applicants for three sites being publicly declared as short-listed in the round 2 EoI for alternative locations for the Tweed Valley Hospital, anecdotal evidence suggests at least one of these had not provided signed compliance with the second round contract documents. That party would therefore have been ineligible for consideration. If this is so, it would seem HI NSW may have misled the Minister by advising that three formal complying tenders had been under consideration when there were not, and the process therefore lacked integrity.	Do not proceed with the SEPP until the veracity of the claims is examined and if sustained, revisit the failed process.
2.10		na	

#	Issue	Detail	Remedy
2.11	Misrepresenting Flooding issues underpinning the site decision	<p>Flooding (hospital operations vs access to facility) see below</p> <p>SEARs Pp 4-5 <i>“As a result, the existing and growing population centres to the south of the Tweed River became cut off from access to the full range of acute hospital services”</i> is hardly an argument for relocating the hospital south of the river where the situation simply changes to <i>“the existing and growing population centres to the north of the Tweed River become cut off from access to the full range of acute hospital services.”</i> (The suggested alternative northern population option of Robina Hospital in any case found its carpark was also inundated and inaccessible in the same flood event.) Flooding of the hospital is a genuine concern. Flooding of the access roads connecting the community to the hospital is pervasive throughout the Tweed Valley and is not solved by site relocation.</p> <p>The site at 771 Cudgen Road, Cudgen may be a viable location in a significant flood event, even a PMF, for maintaining the hospital as operational (although there is presently no evidence of planning for supply of energy and potable water beyond 8 hours). However, in any Q50 or larger flood event this location would not be accessible to the majority of the catchment population, especially those to the north due to the flooding of the M1 and Tweed Valley Way at Chinderah, but even those to the south (ie Casuarina – flooding at Tweed Valley Way/Cudgen Creek, Cabarita – flooding at M1/Clothiers Creek Road.</p> <p>Most recent flood history demonstrates the above issues by the fact that residents in the coastal villages of Kingscliff, Casuarina and Cabarita in particular, were cut off by flood waters for approximately 3 days during the event of March 2017. Therefore meaning that should the hospital proceed at 771 Cudgen Road, Cudgen the hospital will then only really be accessible for three local villages rather than the majority of the catchment, and would exclude all of those in the majority population centres north of the River / Tweed Heads.</p>	There are other suitable locations identified during the site selection process that would easily be adapted to provide better accessibility during flood events. The goal of having a 100% PMF proof solution has not been fully realized at Cudgen, yet has prevailed over the pragmatic goal of having an hospital accessible to the maximum number of community members
3. CRITICAL SITE DEFECTS			
3.1	Confinement	<p>The proposed Hospital site is fully constrained by the abutting lands whose zoning prevents site development expansion in any direction. Nevertheless, the Minister for Planning (& the NCRP principles) expects Regional Hospitals to form the nucleus of a “doughnut” of surrounding health-services related development. (See 3.4 below).</p> <p>The SEPP attempts to remedy this flaw by permitting full exploitation of the entire site for both public and private premises. However, it fails to recognize the space demanded by the ultimate 900 bed facility and its ancillaries cannot be met by this site alone. (e.g Allied Health, Private Hospital/Day Surgery/Imaging /Consulting rooms, Complementary Medicine, Disability Supplies, Aged Care, Day Care, Short-term Accom., Med density residential, private parking Stations, Transport Hubs etc.) This site choice is fundamentally flawed because it is too confined to meet the published needs of the ultimate expanded hospital precinct.</p>	Select an alternative site unbounded by restricted uses and capable of expansion to accommodate the published long-term visions of the Departments of Health and of Planning and Environment.

#	Issue	Detail	Remedy
3.2	Buffer Zone Errors and Interventions	<p>Buffer Zone Conflicts</p> <p>TWEED VALLEY HOSPITAL EIS and Part 5 Activities</p> <p>The EIS is wrong.</p> <p>The site is severely compromised by overlapping buffer zones, which protect a number of environmental values and manage risks. The EIS fails to correctly declare these buffers which define the available site footprint.</p> <p>The four (4) in question are Bushfire APZ, Land Use Conflict Agricultural Spray & Dust Buffers, EPBC Threatened Species Buffers and Coastal Wetland Buffers.</p> <p>The northern site boundary lies within a designated wetland protected under the Coastal Management SEPP. The SEPP prescribes a proximity buffer not to be disturbed unless it can be demonstrated it will have insignificant environmental impact. As the NPWS policy recommendations under the Commonwealth EPBC Act specifically require a 50m protective buffer to the designated wetland habitat of the threatened species “Mitchells Rainforest Snail”, and that snail has been reported at numerous locations in this wetland, this buffer cannot be disturbed. The proposal to excavate the entire buffer zone within the site for Water Quality Management Ponds would therefore appear to be illegal.</p> <p>If so, any civil contracts to construct these ponds are illegal and must be terminated forthwith. The ponds must be relocated out of the wetland proximity zone, and any damage caused to the wetland proximity zone restored.</p> <p>Furthermore, the SEPP if implemented, should not include the proximity buffer. Similar problems arise with APZ buffers to proposed deep screen tree planting, which create a fuel zone too close to proposed buildings.</p> <p>A full discussion is provided in Appendix 2 of this document.</p>	<p>As the combined buffers occupy the majority of the proposed hospital site, they render it insufficient for the total footprint needed for ultimate development.</p> <p>The site should be abandoned.</p> <p>If the SEPP proceeds the Wetland Proximity Buffer must be excluded from rezoning to hospital related uses.</p> <p>Amend any rezoning proposal to exclude the statutory protected wetland proximity buffer.</p>

#	Issue	Detail	Remedy
3.3	The Impact of Spray Drift	<p>The surrounding farming is a threat to a facility of this nature.</p> <p>LUCR Assessment of farmland did not reflect familiarity with farming practices. Authors assumed that crops they saw will remain the same ad infinitum. This shows a remarkable lack of knowledge of farming as crops change with seasons, technologies, seed availability, trends and a host of factors. A low ground crop may be replaced by trees and the type and use of sprays adjusted to suit. The predominant wind direction is from the south.</p> <p>Appendix B Part 1 SSD Stage 1 DA Drawings shows the buffer zones and tree removal – indicating that along half the site facing Cudgen road large pine trees will be removed. The LUCRA (Land Use Conflict Risk Assessment) identified that to combat spray drift a buffer of 30 metres between the hospital and farmland will need to be maintained yet this seems to have been applied only for the west border. With half the trees removed along the southern boundary for entrances and exits to the hospital the question is how will the spray drift know only to go where the trees have been retained and not through the gaps where they have been removed? With an inconsistent buffer surrounding the hospital and opposite the southern farmland, the zoning cannot be changed to accommodate a hospital for health reasons.</p>	<p>Crop choices change due to need for land integrity which result in different sprays and techniques. – Farming can not be restricted due to the presence of a hospital, rather the change of zoning must be restricted to protect adjacent farming and land</p>
3.4	Co-location and the Regional Health Precinct	<p>Bland assertions that further farmland destruction will definitely not be allowed beyond the current hospital site simply beggar belief, as that was exactly the case in 2017 prior to this current Hospital DA. The future vision is of 9 storey towers standing isolated in the former vegetable fields. One is expected to believe that this multistorey hospital complex will be the sole land use change that will be permitted to occur on the protected lands of the Cudgen Plateau. It is hard to conceive of a major 900 bed 9 storey hospital remaining isolated against farmland, when there already are “Regional Health Precinct” enterprises being encouraged to cluster around the Hospital. On 13th August the Hon the Minister for Health wrote to the Mayor of Tweed Shire advising her that Planning Minister Roberts had already engaged a consultant briefed to <i>"explore opportunities to create a best practice health and education precinct around the catalyst investment in the new hospital and will consider planning scenarios around the hospital campus, the TAFE site opposite and the major development areas to the north."</i> He announced a Tweed Valley Regional Health Services Precinct of integrated private and public consulting rooms, day surgery, public health services, complementary medicine, retail, commercial, short-term accommodation, private parking stations and so on. These will be somehow squeezed onto this site, or happily locate kilometres away from their focus. It is clear the very same arguments used to justify the proposed Hospital site will in future be used to justify necessary expansion of its footprint to embrace essential ancillary health services.</p>	<p>Either the EIS provides an honest discussion of the real consequences and cumulative longer-term impact on farmland of a Regional health Precinct, or the SEPP encouraging ancillary development must be withdrawn.</p>

#	Issue	Detail	Remedy
4. CONSULTATION & COMMUNICATION FAILURES			
4.1	False consultation representation on Site Selection	<p>HI NSW failed to properly consult with the community prior to the site choice decision announcement, contrary to claims made in the EIS. The claimed consultation was conceded and initiated only after widespread community anger over the unheralded site pronouncement, and was not part of any plan as implied in the EIS. Furthermore, the preferred option was never taken off the table while the Minister conditioned “consultation” to include a direction to the public to perform the investigation and assessment work to identify alternatives; work that should properly have been undertaken by professionals. This amateur input was to be compared to the (still secret) professional site selection report believed to be by Charter Keck Cramer. The process included the Tweed Shire Council for the first time but was terminated prematurely by a further announcement that all three short listed properties had been deemed “not feasible” and no further discussion would be admitted. The Minister’s Final Site Selection Summary Report was written in-house and has been the subject of concerted criticism over its flawed logic. The Minister continues to refuse GIPA requests to release the original report to allow any comparison with his department’s summary.</p> <p>Authors of the 2018 Tweed Valley Hospital Site Selection Report used by Health Infrastructure NSW are believed to be Charter Keck Cramer consultants of Martin Place Sydney. Their report used to justify the final site selection is still being withheld from the parties who tendered their sale interest, and the public at large, whose GIPA requests are declined. CKC were not the authors of the HI NSW Summary Report and as yet have not publicly endorsed the summary report as consistent with their own work.</p>	Release the CKC Site Selection Report for public scrutiny and comparison with the HI NSW Summary Report. Recommence the Site Selection process if there are serious inconsistencies between the two reports.
4.2	Inadequate Communication	<ul style="list-style-type: none"> • Failure to engage community by way of creating awareness of SEPP in any real sense; & failure to explain SEPP process significance in terms of EIS. There were no workshops or paper explanatory documents exhibited or circulated, other than an impenetrable 3000 page EIS. • Misrepresenting public consultation activity in the EIS document, as described elsewhere in our EIS response. • Endorsing arbitrary amendment of the 2017 North Coast Regional Plan by decree (see below) renders its underpinning consultation meaningless. Drastic amendments to the NRCP should be returned to the wider community of stakeholders for comment before adoption. • Failure to provide the community sufficient time to absorb, interpret and respond to a highly controversial, highly complex, and yet inadequately documented SEPP • Misrepresenting consultation process as complete by placing advertising signage on site suggesting existing approval during the exhibition period, thus discouraging participation. 	The SEPP is of major regional planning impact significance and should be re-advertised with supporting public consultation and accessible explanatory documentation of the wider changes it facilitates.

#	Issue	Detail	Remedy
4.3	Concealing Opposition and lack of appropriate community consultation	<ul style="list-style-type: none"> Ignoring two petitions with well over 9000 signatures that went to the Upper & Lower Houses of NSW Parliament, and the 4700 followers of the "Relocate" FaceBook page. These were the strongest community responses recorded in ANY forum. Ignoring the resolution of Tweed Shire Council to oppose siting of the Tweed Hospital on prime agricultural land. Ignoring the fact that their own community consultation (as stated in TVH SSSR pg 12) identified there was significant opposition to any site that includes SSF. Limited communication to landowners/residents and businesses of the impacted catchments (including those immediately affected in Tweed Heads, Kingscliff and Cudgen). The community has not been given equitable access to information during the site selection, general HI consultation, SEPP and EIS consultation periods. Many residents are still reporting having not receiving any information regarding the hospital to their letterboxes, have not been requested to participate in surveys, are not aware of Pop ups and have not been notified of any information sessions, contact information or where to seek further information. Therefore, the information quoted in documents such as the TVH SSSR or EIS documents IS NOT representative of the true community sentiment. Furthermore, data presented in the two pie charts representing community consultation contained in TVH SSSR appear to be built using quantitative information. However, the consultation was conducted using qualitative research methods? We would like to question the pie charts utilised to demonstrate community opinion from both the POP-UP consultation sessions and the Written consultation results. These pie charts were designed to graphically illustrate if people were "Opposed", "Supported" or were "Neutral" in opinion about the proposed hospital site. We can not understand how it is possible to achieve these statistics with the qualitative techniques Elton Consulting used to conduct consultations, particularly at the pop-ups. <p>Opportunities provide to the community were extremely limited with pop ups being conducted at sites for a single instance and for very limited windows of time ie 2 hours. This is definitely not sufficient and definitely not in-line with best practice community consultation for infrastructure projects.</p>	<p>Include reference to the true scale of public opposition in notes for the Minister making the SEPP decision and in the EIS</p> <p>Respond as to why the local Council are being steamrolled when they can truly demonstrate strong community and stakeholder support for their current planning restrictions.</p> <p>Conduct a thorough community consultation process prior to the determining approval of SEPP and EIS to ensure that the whole community are aware of the proposal to move the hospital to SSF at Cudgen and that the current services at the existing hospital will be closed, and provide appropriate avenues for people to contribute their feedback. Process must recognize the aged demographic with limited ability to access technology and/or venues.</p> <p>Provide evidence of quantitative questions and data for which community consultation results have been based.</p> <p>Provide evidence of through what avenues the community were made aware of the opportunities to seek information and provide input/</p>
4.4	Undermining the legitimate consultation process	<p>In the middle of the SEPP & EIS Exhibition period HI NSW erected prominent signage on the proposed site announcing commencement of the Tweed Regional Hospital. This misled many of the public into believing such work already had development consent and there was no longer an opportunity to participate in the decision by making submissions.</p> <p>The entire process has been corrupted by corporate misconduct.</p>	<p>Repeat the exhibition with false advertising removed from the public domain.</p> <p>See also other instances 'Administrative Misconduct' below.</p>

#	Issue	Detail	Remedy
4.5	Community Participation Ignored, Obstructed & Divided	<ul style="list-style-type: none"> • The communities which make up the Tweed are welcoming, friendly and easy going. They have worked together to determine a united direction documented in endorsed Tweed Shire and Northern NSW Plans. The proposed site has unusually split the community due to divisive activities associated with the proposed development. Mistrust has been ignited in community through lack of consultation and refusal to listen by the proponents. • The process has been fatally flawed as it lacked the core integrity of genuine community bottom up consultation. When major changes are imposed without discussion or understanding people get angry. Proceeding with an unwanted SEPP will entrench division within the community and create a 'them and us' situation. The SEPP should not proceed when its implementation divides a previously united community that enjoyed amiable relationships and an enviable lifestyle. • The community has been misled by the staggered proposal and concept process leaving many to believe that they can have no input to, or impact on, the direction of their place of residence (Tweed Coast), or that the services they source in Tweed Heads will continue as normal. • Unendorsed and undesired development imposed by one arm of Government. No call or movement requiring a hospital in Kingscliff by any residents or groups. Residents accept that the closest hospital is in Tweed Heads when choosing to live on the Tweed Coast. • NSW Health has abused process by beginning activities and fencing on the proposed site during the community evaluation period. This has been a deliberate obstruction during the process coupled with screening on the site to continually misinform the public that the process is over. Representatives and ministers have made accusations of time delay aimed at residents participating in lawful and necessary process. Comments in the media and printed on the site falsely give the public the impression that the site zoning and development application has been approved. <p>During the rushed process NSW Health made changes to initial land parcel selected to eliminate challenges based on the preservation and protection of the wetlands area</p>	The Process of Application is flawed and open to manipulation – it must be amended.

#	Issue	Detail	Remedy
5 BROKEN PLANNING COMMITMENTS & PRECEDENT CREATION			
5.1	Multiple Planning Instrument Breaches	<p>The impact on the Tweed Shire planning framework as a whole will be a major unmentioned consequence of any approval. It would overturn a suite of current planning instruments and policies (the North Coast Regional Plan, Tweed Local Environment Plan 2014, draft Kingscliff Locality Plan, Tweed Road Development Plan, S.94 Contributions plan, local DCP's and various infrastructure strategies), all of which will require amendment – some major. Loss of confidence in the public consultation process following the current amendments by decree will undermine any prospects of essential community participation in rewriting these plans.</p> <p>Examples are:</p> <p>Tweed Local Environment Plan</p> <ul style="list-style-type: none"> Prohibits the use of RU1 land for hospital/health precinct Prescribes development height limits - approx. 3 storey. (Seeks to rezone to eliminate restrictions to allow for multi-storey / 9 storey). Prescribes floor space ratios (Seeks to rezone to eliminate restrictions.) <p>Kingscliff Locality Plan</p> <p>Seeks to continue to build Kingscliff as a tourist destination (Proposal changes the essence of the area to a health precinct therefore undermining the desirability for tourism.)</p> <p>Reinforces land use strategy as per Tweed LEP (Proposal ignores zoning/land use currently stipulated and seeks to completely change future vision for Kingscliff)</p>	<p>The EIS documentation should acknowledge the financial cost and social impact of imposed planning change, including severely undermining public trust in the consultation process. The government should institute and fund a program of consequential revision of affected statutory plans, public policies & infrastructure strategies to remedy the arbitrary changes imposed by the Hospital.</p>
5.2	North Coast Regional Plan (2017) non-compliance, omissions & misrepresentations	<p>The Hospital relocation is in direct conflict with the The North Coast Regional Plan 2036. (NCRP) The SEPP and EIS intend to disregard major elements of this plan. The NCRP review (EIS pp.70 & 108) mentions only the compliance areas and fails to plausibly address its serious non-compliance.</p> <ul style="list-style-type: none"> The NCRP places both Tweed Hospital site and the Regional Health Precinct firmly in Tweed Heads. <i>“Regional City Centres will have the largest commercial component of any location in the region and provides a full range of higher-order services, including hospitals and tertiary education services. Tweed Heads, Lismore, Coffs Harbour and Port Macquarie are the four regional cities for the North Coast”</i>. NCRP p.90 NCRP commitment to protecting State Significant Agricultural land protection is unequivocal. (NCRP Direction 11 p.38 & Appendices A & B p.85) Unlike the Health Minister's site selection process, the NCRP is founded in years of consultation starting in 2016. <i>“The Plan is the product of extensive consultation with councils, stakeholders and the wider community, conducted around a draft Plan in 2016. The feedback from this consultation has been integral to finalising the North Coast Regional Plan 2036.”</i> NCRP p.4 The Application for SEARs claimed that hospital relocation has been under discussion since 2012, yet the Health Minister allowed the 2016 draft NCRP and the 2017 final document to proceed with his Department's endorsement only last year. These claims cannot be 	<p>Drastic amendments to the NCRP implied by the Hospital relocation should be returned to the wider community of stakeholders for comment and subsequent formal endorsement before adoption of the SEPP and approval of a Hospital DA.</p> <p>Alternatively, any development should be consistent with the current NCRP.</p>

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		<p>simultaneously true.</p> <ul style="list-style-type: none"> The NCRP intended the hospital as the economic powerhouse for the Regional City of Tweed Heads. (Goal 2, Direction 5). There is no socio-economic analysis of the transfer of the Shire's core economic activity from Tweed Heads to Kingscliff <p>The NCRP was revised by Ministerial decree to shift the Tweed Hospital away from the City of Tweed Heads to the Town of Kingscliff with no prior community consultation whatsoever. The hospital proposal at 771 Cudgen Road, Cudgen is in opposition to the following NCRP sections:</p> <ul style="list-style-type: none"> Goal 2 – Direction 8 Promote the growth of tourism (Proposed Cudgen location diminishes the desirability of Kingscliff as a tourist destination) Eco-tourism and nature-based tourism should only be located where a long-term, beneficial and sustainable relationship with the environment can be established (Hospital operations do not provide a beneficial relationship with the environment at this location) Goal 2 – Direction 11 Protect and enhance productive agricultural lands (rezoning of SSF at 771 Cudgen Road destroys prime agricultural land and puts adjacent farmland at risk through precedent). Goal 3 – Direction 19 Protect historic heritage - Historic heritage is a major contributor to the region's identity and character. It also has the capacity to generate economic value, particularly through tourism. (The farming heritage and its relationship to tourism in the area is continually threatened by rezoning and removing farmland therefore damaging the region's identity and character.) Goal 3 – Direction 20 Maintain the region's distinctive built character (Introducing a multi-story (9 storey) industrial building to the Kingscliff/Cudgen landscape is in direct opposition to the area's identity and character – seaside village and farming lands.) Local govt narrative/urban growth areas Cements Tweed Heads as the regional city (Moves regional city status away from Tweed Heads to Kingscliff) <p>Foster the growth of knowledge-based, education and health-services industries within the Southern Cross University and The Tweed Hospital precincts. (Moves hospital away from the Tweed Health precinct undermining the local economy currently in place to be close to the hospital and moves facilities away from the current population base who have specifically situated themselves in proximity to this facility)</p>	
5.3	Undermining LEP Height Limits	<p>Current Tweed Coast height limit restrictions in the Tweed LEP were established through extensive community consultation and activism, particularly in Kingscliff.</p> <p>The SEPP will overturn these hard-fought principles, creating a landmark multi-storey building on a ridge-line that will invite precedent-based development applications; ultimately altering the character of Kingscliff/Cudgen, and potentially extending the loss of principle to nearby coastal villages.</p>	<p>The site choice should be reviewed to select a less conspicuously prominent visual cue, or the SEPP building envelope should be substantially lowered. If proceeding to DA, the EIS should address this issue.</p>

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6 SUPPORTING EIS DOCUMENT DEFECTS			
6.1	Traffic generation under-reporting	One of the arguments for the suitability of the site for rezoning relies on Stage 1 hospital traffic generation being able to be met with minor capacity adjustments to the district & local network. This superficial approach for only Stage 1 of the Hospital alone, neglects the ultimate demands on network capacity from both the fully developed 900 bed hospital, the announced co-location of a Regional Health Precinct (see 3.4 above) and health related TAFE Campus expansions in immediate proximity. These 3 effects would likely combine to produce a multiplier effect of the order of 400%. It also neglects free consumption by the proposed Health Precinct complex of the reserve capacity of the network that would have been available to service already planned urban expansion in the district. No account is taken of the financial cost to TSC of the shortened life span of existing pavements subjected to a massive increase in axle passes	Review the site suitability; after accounting for true costs and feasibility of providing transport infrastructure, capacity improvements that include the full final vision for the 900 bed hospital and the already announced complementary health services precinct and the Kingscliff TAFE Medical Teaching Facility. These should include both geometric and structural cumulative upgrade costs of affected roadways.
6.2 SOCIAL & CULTURAL IMPACTS <i>General Overview and Response to Proponent Supporting Documentation</i>			
6.2.1	Appendix Z - SEIA – Social and Economic Impact Assessment	<ul style="list-style-type: none"> Reasons given in support of the project are generic and not specific to the site. Eg improved health services, improved safety from flooding (for whom?), Increased employment during construction, improved self-sufficiency. Justifications apply to both a greenfield or an upgraded site and are not unique to the specific site selected. Proponent is not proving that this is the <u>only option</u> as is required to override the state significant farmland status. There is a need for upgraded hospital services but the question is what does this site offer over all others that make it the ONLY option in order for a SEPP to be warranted and comply with legislation. Negative impacts of the development in regard to social and economic impact are rated as “moderate”. There is no explanation to show how and by using what instrument and criteria this moderate impact was concluded and no definition of “Moderate”. The conclusion of ‘moderate’ can only be determined to have been arrived at by subjective means. <p>Negative impact on Tweed Heads – Report describes the impact on Tweed Heads as Negative “in the short term” and will be better long term. Long term projections do not provide evidence of how recovery will occur and appear to be based on nothing more than time and hope. No vision for Tweed Heads is presented and the proponent cannot assert any future that is positive or otherwise. Given this lack, the net effect of relocating the hospital is SERIOUS and the SEPP should not proceed due to the damaging impacts on economic and employment in Tweed Heads.</p>	
6.2.2	Appendix J – Land Use Conflict Risk Assessment (LUCRA)	<p>The LUCRA was undertaken in October 2018 – after proposed site was chosen. This assessment should have been undertaken before determination of the site due to nature of conflict – SSF with SSD.</p> <p>Proximity to Farmland & Protecting the Unwell</p> <ul style="list-style-type: none"> The report acknowledges that there is a risk of spray and dust. IT does not acknowledge that the planned building is a hospital, and therefore the inhabitants/residents will be a group of 	

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		<p>the most vulnerable and unwell. When the people on the site are not in 'normal health' but in a compromised state of health serious attention must be given to risks. It must be remembered that hospitals have a focus on illness, not on health even though their desired outcome is better health. Patients are sick or injured. The report states:</p> <p>"While a default buffer area of 300m width is recommended between State and Regionally significant farmland and residential development the DPI does not stipulate a set back from commercial/industrial developments to state and regionally significant farmland" – quote from appendix J.</p> <p>If the hospital is classed as commercial and recommendations don't exist then clarification must be sought immediately in consultation with the farming community. A recommended width must be determined before progressing further and rezoning land which does not meet required buffer zones to support the size of development. These recommendations will also ensure standards exist and can be applied in any future similar situations. Clarification of the buffers is particularly important in the case of a health facility where normal or even reduced exposure to sprays may bring on harmful responses.</p> <p>Claimed Commercial Nature of the Development</p> <ul style="list-style-type: none"> • A hospital is not commercial by nature, although it embraces some principles of commercial operation. It is a public service for the ill and injured. The proposed site is not being rezoned as business or industrial but SP2 given the unique requirements of a hospital. Comments in the Land Use Conflict assessment are misleading as they allude to the interaction of farmland and commercial zonings possibly requiring less caution than required for farmland and residential abutment. There may be no recommendations for commercial/farmland abutment however the absence of any recommendations in regards to the combination of these two zonings is not relevant. A lack of recommendations for the interrelationship between commercial and farmland is not evidence that a problem doesn't exist or requires less caution. It must be proven to not exist. <p>Minimum Standards Must Be Established</p> <ul style="list-style-type: none"> • In regards to land use conflict, given the sensitivity of the patients who will reside in the hospital, adopting as a minimum the standards applicable for interaction between residential zonings and rural state significant farmland would be a prudent and appropriate starting point. Furthermore, these are not normal "residents." They are a confined concentration of health compromised, injured and ill people who therefore are at greater risk and susceptibility to airborne allergens and irritants. The SEPP should not proceed with such scant data. <p>Patient Sensitivity</p> <ul style="list-style-type: none"> • There is some question as to whether buffers are achievable due to the positioning of wetlands to the north and farmland to the west and south. Prevailing winds are from the south and will blow onto the hospital. Consideration of the way of life for the patient is 	

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		<p>important too. The effect of spray and dust on patients and those with compromised health for asthma, respiratory issues, allergy, contamination, and iatrogenic diseases are well documented in health literature. There are proven scientific links between sprays and dust and these diseases.</p> <p>Is SSFarmland and a Hospital Compatible?</p> <ul style="list-style-type: none"> • The location of the hospital site in and next to farmland requires scientific study to prove no ill effects. Being a health care facility creates urgency to ensure patient safety PRIOR to any decision to locate in farmlands in a position that might risk patient wellbeing. Ignorance of the actual risk, particularly when there is suspicion of it, is not a defence and not acceptable for patient safety. Iatrogenic diseases and illness can be a critical cause of litigation and costs millions to the community and health facilities. 	
6.3	General Amenity	<p><i>Lifestyle Impacts – Attractiveness, Desirable & Useful Features</i></p> <ul style="list-style-type: none"> • Diminishing Kingscliff residents' quality of life with intense urbanization, increased traffic congestion and parking demand, 24hr ambulance emergency sirens, 24hr helipad emergency aircraft arrivals, all-night floodlighting of entire site, loss of amenity, loss of rural ambience, lifestyle, etc. Not properly disclosing these long-term impacts. • The removal of zoning for one section of Kingscliff/Cudgen creates an obvious lack of continuity and clash with the rest of the coastal strip. The zoning does not and will not match with any existing zoning. The existing structures and character of the town create an unpleasant juxtaposition with the hospital. Visual amenity and lifestyle of the neighbouring residences, town and village are a total mismatch with the hospital. • A change to zoning will destroy the amenity of Kingscliff by creating an unacceptable visual misfit that dominates the town. A SEPP that allows high rise over three storeys will draw the attention, dominate the landscape from all directions and destroy the amenity so carefully created. • Cudgen is a smaller village west of Kingscliff that will be overwhelmed by the proposed development. Cudgen is adjacent to the main road of Tweed Coast Way and sits at a lower elevation than the proposed site. The elevation variation will multiply the imposing and overwhelming stature of the nine-storey building from the viewpoint of Cudgen. The village is accessed via two intersections – one of which is the main intersection to Cudgen Road which will be the main road for the hospital. Both access roads feed into and from Tweed Coast Road so the residents of this village in particular will be impacted by traffic, noise and light with the amenity of their village severely impacted. • The TAFE on the opposite side of the road is low rise and enhanced by greenery and expansive grounds. This same aesthetic is not achievable for a development of the required size and function on the land available. To maintain the amenity of the rest of the town and not destroy the thoughtful planning that is beneficial in tourism dollars is not possible on the 	

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		<p>lot size. The zoning should not be changed to permit an erroneous and inharmonious development. It would be impossible to build a hospital of the size required on the current site while abiding by current height restrictions. The planned 9 storey high rise will be completely out of character with the rest of the town.</p> <ul style="list-style-type: none"> • Salt Resort accommodates 300 rooms under current zoning restrictions. Although not a medical facility the land area required to accommodate these large resorts is far in excess of the site in question. With zoning change the hospital becomes an excessively and negatively dominant urban landmark in a regional/rural town. To overwhelm the entrance to the town of Kingscliff with a medical facility will destroy the amenity of Kingscliff and Cudgen where they will become identified as 'sick' towns because of the presence of a large central hospital. <p>A hospital of this size in a town with a small population sends a message that this is an unhealthy place. Not the relaxed, outdoors, natural environment that supports healthy lifestyles as it currently is. This is not the character that has made Kingscliff the desirable place to live that it is.</p>	
6.3.1	Traffic Amenity and Impacts	<ul style="list-style-type: none"> • Requirement for better and more frequent public transport changing Kingscliff from coastal town to urban hub and destroying the amenity – no suitable roads for bus turning, waiting and point of origin services to support a health facility without impacting on the whole town and particularly nearby residents with increased public transport. 	
6.3.2	Parking Amenity & Impacts	<ul style="list-style-type: none"> • Local residents will suffer from constant parking disturbances such as being unable to park in front of their own homes and having strangers come and go outside their homes on a 24 hour basis. This will impact resident lifestyles, the amenity of their private homes and their security. Having visitors or knowing they can park their car curb side at their home will be a constant challenge. A section of the community should not be forced to endure the ongoing stress and impacts created by a hospital facility. • There are many studies of charge avoidance of paid parking in a range of setting from shopping centres to hospitals. When this occurs, the surrounding streets become clogged with vehicles changing the safety of private homes (theft, children near parked cars and traffic), and the loss of amenity of the quiet and open street thoroughfare. The proponent states they plan to impose charges for parking similar to Lismore Base Hospital pushing users of the hospital who wish to avoid fees to seek parking in alternate venues such as the TAFE and local streets. Hospital users or workers who avoid parking onsite will create significant inconvenience for students unable to park to attend study; residents who are unable to access their homes as people park over their driveway entrances; and the flow of traffic will be slowed by road space being confined by cars filling streets. This situation does not occur currently and should not be the burden of unfortunate nearby residents to endure. The proponent suggests that expansion of health, education, training and research facilities on 	<p>The SEPP should not proceed.</p> <p>The SEPP should not proceed. Parking should be provided free of charge and not be a source of revenue for the hospital or an outside parking company. It is HI responsibility to provide enough adequate parking for the use of the facility with no impacts on neighbouring facilities or residents.</p> <p>The site is too small because of the restrictions of</p>

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		<p>the proposed site could be up to 100% more than the original hospital concept. These additional buildings will be built in the position of at-grade carparks. These strategies indicate an awareness by the proponent that the site is too small to accommodate all of these additions to the hospital facility while also being able to supply car parking. i.e., They have to build on them to expand. If this occurs where is the parking? It is clear that the intention is to begin with the central hospital on this site and to acquire more land for either parking or facilities over time once precedent has been set and 'not fitting' can be justified as an argument to acquire more SS farmland. If there is to be parking, where will the additional facilities go? and if there are to be extra facilities where will the additional parking go?</p>	<p>buffers etc and the SEPP should not proceed.</p> <p>Approval for a 'concept' is a trojan horse. HI must define the exact contents of the other structures and specify the long-term solution for parking onsite before the SEPP can proceed.</p>
6.3.3	Noise Amenity and Impacts	<ul style="list-style-type: none"> • As the site is already surrounded by residential to the east and west there is high risk of constant noise disturbance due to plant and machinery as well as a profoundly increased number of people in the vicinity, traffic, sirens, and helicopter arrivals and departures. • Plant & Machinery - The plant and machinery required to operate air conditioning for a nine-storey building will generate 24 hour noise levels that will be markedly and unpleasantly noticeable in the noiseless silence of farmland and quiet residential areas. Noise treatments have been planned to insulate the hospital for noise, however the impact of the noise created by the development will create undesirable conditions for residents and the fauna in the nearby wetlands. • Residents have lived in a quiet rural/regional town and have had no requirement for double glazing of their homes or other treatments for noise disturbance. They have been able to enjoy the peacefulness of where they live with windows left open in summer and an easy going way of life. This ambience will be completely destroyed in the area with residents expected to put up with noise from a range of sources on a day-in, day-out basis. • Helicopter – One of the most dramatic noise disturbances will occur with helicopter arrivals and departures. The EIS claims helicopter arrivals will be insignificant as the Level 5 Hospital is not and will not be, a Trauma Hospital. This somewhat disingenuously suggests that single trauma victims will bypass the large Tweed hospital ED, or non-trauma patients (remote accidents, obstetrics etc) will not arrive by helicopter. Available figures say that it is quite normal for there to be 2 to 3 of these per day and they can occur at any time of the day or night. The greatest impact will be felt by those closest to the hospital including the fauna that reside in the abutting heritage wetlands. The flight path of the helicopter at low altitude will be a noise issue for the wider Kingscliff and coastal strip and farmlands, and a particularly significant disturbance in the quiet silence of Kingscliff and Cudgen at night. The times for helicopter noise will be completely unpredictable and a severe disturbance. <p>Traffic – Along with greater traffic congestion, traffic creates noise pollution. The use of sirens by ambulance vehicles along with the constant hum of motors and traffic will be a hallmark of the hospital precinct and will ruin the serenity of the wetlands area and the noise amenity of Kingscliff and Cudgen. Sound pollution will be more distinct at certain times of the day when</p>	

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		the traffic is busier, however the 24/7 operation of the facility will ensure that noise disturbance will be profoundly noticeable at night. The impact of night time disturbances on visiting tourists will be intense and will have significant secondary influences on opinions of the region as a tourist destination claiming to offer a quiet, natural and relaxing experience.	
6.3.4	Light Amenity & Impacts	<ul style="list-style-type: none"> The proposed site sits on an elevated ridge that affords views to the north, south, east and west. In the reverse this also means that any structure built on this ridge is visible from the north, south, east and west. One of the major impacts to residents living both close by and at a distance is the light disturbance that will emit from 24/7 lighting of the site. Lighting for a hospital is intentionally bright so that people can see clearly on the site however this light will be visible from all parts of Kingscliff and further away to Casuarina and Chinderah. This is a severe impact to the amenity of the entire village of Cudgen and to the town of Kingscliff and its developments at Salt, Seaside and Casuarina. <p>The adjacent Kingscliff Wetlands are home to several unique species and a Koala population. The area will experience disturbance for 24/7 due to light and noise. There has been no examination of the impact of this lighting on the species in the wetland area</p>	<p>What is being done to address the disturbance of flora and fauna in adjacent wetlands by bright lighting that will operate 24 hours?</p> <p>What is being done to address the disturbance by light emissions to residents of Cudgen, Kingscliff, Chinderah, Salt and Casuarina?</p> <p>The SEPP should not proceed.</p>
6.3.5	Safety & Country Town Familiarity – strangers, security and floods	<ul style="list-style-type: none"> Kingscliff is a small town with a low incidence of overt crime and violence. As a holiday town the streets are generally safe and it would be unusual for visitors or residents to encounter mental health, violence and drug crimes in the township. It is well documented that emergency departments and public hospitals are venues where frequent security and safety issues are experienced due to a range of complex reasons including the presence of a range of patients and visitors who seek assistance in emergency departments for drug and alcohol issues, mental health issues or who resort to aggression and violence due to a number of situations such as family anxiety or homelessness. The presence of people attending and leaving the hospital with such problems will result in increased violence, homelessness, violence and aggression, drug use, theft and related crimes in the community as people leave the hospital site and their problem behaviours are experienced in Kingscliff. Currently at Tweed Hospital the new Tweed Heads police station is close by. This is a larger police station where 24-hour police support is available within a short period of time due to its location a street from the hospital. The two facilities are located close which enables expedient police presence if required by security. The police station in Kingscliff does not have the opening hours or staffing to be able to provide support with any crisis experienced in the emergency departments or wards of a large hospital in Kingscliff. Most concerning is the fact that no police are available at night or during high risk periods to manage the spillage of people who may be intoxicated, drug affected or violent onto surrounding roads/neighbourhood areas in Kingscliff. This is especially a serious concern for close living residents of Kingscliff and Cudgen. With the major police station based in Tweed Heads there is a serious issue of time and capacity for police to attend a hospital or incident in the town of Kingscliff. This extended 	<p>The SEPP should not proceed as there are no police protections in place or planned for the town of Kingscliff. These currently exist in Tweed</p>

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		<p>time to provide police attendance in Kingscliff or Cudgen also unacceptably removes police from Tweed Heads and cross border maintenance.</p> <p>Isolating the majority of Tweed's residents (Tweed Heads & Banora) from access to the Tweed Regional Hospital during major flood events, contrary to claims of improved flood access in the EIS</p>	
6.3.6	<i>The Impact of Aviation on Amenity</i>	<ul style="list-style-type: none"> • If the development were to proceed the proposed site would be the puzzle piece to fit between the town of Kingscliff and the village of Cudgen – two residential areas. Its anticipated that aviation in the form of Helicopters will make regular take off and landings at the regional hospital helipad on the site on a daily 24 hour basis. The flight paths of the helicopters will travel low and loud over residential areas or the protected wetlands to the north. The landing area and site will be bordered by residential to the east and west and therefore large disturbances will be caused by entry and exit of helicopters. Residents who have bought homes in the vicinity have never expected they would be exposed to the noise and risks of aircraft flying over and close to their homes. • With the wetlands adjacent to the hospital there is a real risk of bird and bat strike due to startled animals. The possibility of a major accident caused by bird strike is a serious and frightening threat for local residents who fear an airborne vehicle crashing into their home or work as a result. These types of tensions and concerns turn their attractive neighbourhood into a risk zone impacting on resident wellbeing, emotional and mental health. 	
6.3.7	<i>Coast & Country Lifestyle/ Outdoors and Nature Lifestyle</i>	<ul style="list-style-type: none"> • For Kingscliff, Cudgen, Casuarina and Cabarita the major alterations to the lifestyle experienced by residents and visitors cannot be underestimated. The coast and country lifestyle supported by the many businesses with this focus will be replaced by business associated with illness and medical. Tourism visitors and accompanying services/businesses that can enhance the chosen healthy outdoors lifestyle by the beach and countryside, will be replaced with medical and illness related businesses. The skills of local people in tourism related occupations will not be in demand leading to unemployment. • The land selected is the prime position in the town – it is the eastern gateway for the town and stands on a piece of land that is one of the most elevated in the area and commands views along the entire coastline. This means that from both north and south the vista is dominant. To place a hospital so prominently sends a message that this is a 'sick' town not a healthy place. • The people of this area are proud of their outdoor healthy lifestyle spent in healthy outdoor nature loving activities such as swimming, running and the use of the pristine waterways in the region. The lifestyle of the area is one of the dominant reasons why people make the choice to live in Kingscliff. A large hospital is an antithesis to the lifestyle enjoyed. • The largely seachange/treechange population come from cities and other urban areas choosing this town as a deliberate escape from the tensions and traumas of city life. People 	

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		<p>live in the Tweed to be removed from the stresses of the city such as traffic congestion, light pollution, the wailing sirens of emergency vehicles, and the fear for safety that occurs in larger urban areas.</p> <p>To rezone this site and place a large urban style hospital on it contradicts all documented development plans. Potential residents have been able to make informed choices by viewing local development plans to see if the Tweed of the future is where they want to live. To proceed with the SEPP is to change the identity and direction of the community for the majority of people against their will. Residents have deliberately chosen to remove themselves from the intensity of urban environments, and have invested significant finances and personal sacrifices to do so. Changing the zoning and SEPP is unacceptable.</p>	
6.3.8	<i>Proposed Building Amenity & Town Character</i>	<ul style="list-style-type: none"> • Visible amenity – Assessment reports fail to recognise the link between the dramatic change to visible amenity of a large hospital building and the impact on the primary industry of the town of Kingscliff – tourism. Assessments also fail to examine or demonstrate that there will be no impact on the attitudes and likelihood of visitation by tourists if the focus of the town alters to medical. For a multi-million dollar industry this is too important to fail to analyse. • Existing large developments in the Tweed Coast have been carefully designed to complement and respect the zoning. It is this flow and continuity in architecture that has created and contributed to the appeal of the town. The largest development in the area – Peppers and Mantra Resorts at Salt adhere to the zoning for the town and therefore enhance the laid back, up market and desirable ‘feel’ which is so sought by visitors. A significant percentage of the accommodation at these resorts will have the hospital buildings become the predominant landmark, rather than the current green ridge, in views to the north. This will remove the marketed ambiance for the resorts in many of their suites and will impact on their bottom line. • Although all attempts will be made in building design and architecture to make the hospital building agreeable to the eye, a hospital building is not just any building. A hospital must be housed within a framework that has a serious function, and this functionality creates limits to the aesthetic. No Sydney Opera House will be created here – externally it will be large, functional, simple geometric construction with a range of other large and visible plant and support structures that do not attract aesthetic conditioning. Even with landscaping, the dominant functional features can’t be masked. This isn’t a simple office building or a building for beauty. Major plant and equipment that is necessary and required for the functioning of the building and work undertaken within, must be housed onsite. There is always an industrial element to the entire hospital complex. As the Hospital will be on such a prominent piece of land and visible from all sides, the visibility of unattractive functional elements from a range of directions will be unavoidable detracting further from the amenity of the town of Kingscliff and village of Cudgen. • In the Land Use Conflict Assessment the report indicates that the hospital must locate all A/C 	

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		<p>units, all balconies and also windows on the opposite side to the farmland to the south to avoid contamination. This is an important planning consideration making the site unsuitable due to the restrictions on the building – exactly what was intended to be avoided by relocating the Tweed hospital and choosing a greenfield site as opposed to upgrading Tweed Hospital.</p> <ul style="list-style-type: none"> • One of the advantages stated of the proposed site is the emphasis on healing views from the elevated levels of the hospital. Access to balconies and open air will only be available on the northern side of the building which will also be the location of other plant and equipment such as air conditioning extractors. This will affect the amenity of the new structure as well as the capacity to deliver “healing views” which will mostly be only to the north and accompanied by the sounds of 24/7 air conditioner motors. Building balconies on the northern side will dictate location of wards to ensure access to the much publicised healing views. Views from other angles may be restricted due to the need to place consulting rooms, staff, clinical services and theatres. • The confusion and lack of differentiation between the site decision and the hospital has been a predominant characteristic of the early phases of this planning application. The blurring of the two has been promoted by the proponents who have publicly denounced anyone rejecting the site as time wasters and anti-hospital, both of which are profoundly untrue. People rejecting the site have been subjected to accusations and abuse. There has been strong pressure by a minority to adhere to prescribed social morals with insinuations that objections to the inappropriate site are attempting to harm others. This has been portrayed and promoted consistently by political office bearers. However, the question for the SEPP is not actually about a hospital even if the intended build is a hospital – it is about a change of the environmental planning instrument to accommodate a large building with a disproportionate and negative impact on the surrounding area. The building and the intention to change the historical function of the land is out of character to all other development in the area. It is noteworthy that the community has maintained a long-standing rejection to changing the function of the land on the site having on multiple occasions rejected proposed development. The current zoning and SEPP must stand. It should not be a case of try, try again for development on the site or any part of the state significant farmland. <p>If the assurances of not requiring further adjoining land are believed, the proponent faces substantial challenges to its envisaged expansion. The site is clearly confined by its boundaries (north – wetlands, south – road, TAFE and SS farmland, east – residential, west – SS Farmland). The building parcel with appropriate buffers will not enable the accommodation of the full range of support and other services/commercial enterprises within the parcel that the proponent has stated it wishes to achieve. It is clear that additional land will be required. To rezone the land and change the SEPP gives permission to the proponent to completely</p>	

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		eradicate the amenity of the current land use. If rezoned to SP2 the proponent will be permitted without approval to add further buildings to the site over which the objection to amenity impacts will be negligible. This will create an even more negative visual impact on the highly visible site. Once approval is made, the amenity of the town of Kingscliff will become secondary to the justification for expansion of the hospital precinct. Initial zoning and policy changes cannot be approved with the clear long term impacts that can be anticipated.	
6.3.9	<i>Lost Amenity - Agricultural Town Border and Entrance Lost</i>	<ul style="list-style-type: none"> The renowned and recognisable rural entrance and eastern border to the town of Kingscliff will no longer express the amenity of a unique coastal/country town. Instead it will mirror the suburbs of Sydney or Brisbane. People who live in or visit the Tweed wish to escape from city life – most locals and visitors list the natural and relaxed atmosphere of Kingscliff as a determinant in their decision to live here or visit. Most visitors are from South East Queensland and visit due to the ambiance of the town which has built a reputation over years. Large high-rise buildings and a major health facility which are about illness do not elicit this desirability for tourist visitation and are a turn off. <p>Discarding years of community consultation and planning (around Kingscliff as a beach and food tourism town) through the overwhelming social, economic and visual impact of the hospital.</p>	
6.3.10	<i>The Amenity of Access to Local Produce</i>	<p>One of the highly valued lifestyle benefits of living in Kingscliff is the access to fresh, locally grown produce straight from the farmer. This farm to plate experience is also one of the hallmarks of current agri food tourism experiences. Directly opposite the proposed entrance to the development a local and long-standing farm produce business supplies fruit and vegetables straight off the land to thousands of locals. The weekly farmers market held in the car park of the next-door TAFE grounds reiterates the affinity for, and value placed on, quality locally harvested and produced food. This is a part of the fabric of the region and defines the rural/urban blend of the locality. Sitting across from, and within state significant farmland, Mate and Matts store provides the interface whereby food grown in the visible red volcanic soils across the road satisfies a growing demand for produce grown 'next door'. This combination of farmland, food stall and market create the safe, charming, natural and relaxed ambiance for which Kingscliff is renowned. The nine-storey building to be built opposite will deprive Mate & Matts business in many ways. Heading into Kingscliff, traffic turns right from Cudgen Road into the farm stall. Road changes will focus on access to the hospital not the existing business. Similarly, the plot of diverse vegetables being grown in the garden next to the store will literally be overshadowed by the nine-storey shade cast across the road. Vegetables don't grow without sunshine.</p>	

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6.3.11	Nature based amenity	Beautiful natural environments are found throughout the township of Kingscliff, giving the town its character – beach, mangrove, wetlands, creek and farmland are comfortably woven together with respectful attention paid to the living fauna and flora that coexist in the area. A corridor of wetland flora and rainforest is accessible through open farmland for transient animals. Native species like Koala utilise the tracts of trees and farmland to move between areas of safety. if fauna in the wetlands is to survive this coastal-country link must remain unbroken. Rezoning the site, and the isolation of the wetland area from the open country and farmland to the south will result in the unwanted degradation and destruction of the wetland area and the flora and fauna within.	
6.4 Cultural Impacts -			
6.4.1	Farming History	<ul style="list-style-type: none"> • The Cudgen and Kingscliff areas have a long-documented culture and history of farming. The proponents History and Heritage report confirms that the single activity consistently undertaken on the site since settlement is farming. Rezoning will curtail a culturally valued and ongoing historic practice from continuing on the site. There is a requirement by decision makers to ensure continuity of farming as it is a cultural identity for the area on this site. • There is an existing strong and continually growing relationship between farming and tourism which is being embraced by farmers to diversify and includes the current trends in high value tourism such as farm to plate. Rezoning stifles and constricts the further development of the already existing dominant industries of the area. • The Historical Heritage Assessment does not acknowledge the more recent but noteworthy historical fact that the site is part of declared State Significant Farmland. This is reiteration of the site having been in ongoing agricultural use for more than 140 years. • As with the Governments preference for online sources of information the historical heritage assessment accessed only online historical records. No research involving physical materials or archives was undertaken. This means the report is not complete and accurate conclusions cannot be drawn. <p>No community consultation was undertaken in regards to historical significance or knowledge. The assessment was not adequately completed for conclusions to be drawn</p>	The Historical Heritage Assessment must be fully completed before rezoning of the site or any disturbance of the site is undertaken. Without completing the full study progress on the site is in breach of the Environmental Planning and Assessment Act 1979
6.4.2	Development and Political History on SSF	<ul style="list-style-type: none"> • Objection to development of this site has been historically ongoing and firmly supported by the residents of the area. This time, strong community sentiment has been overturned by a decision by one minister without any benefit of any knowledge of the area or the impacts. • There has been no call for the change of SEPP from the community. The community has spoken loudly in the most recent democratic forum (last council election in 2016) whereby 93% of the community voted for a candidate whose major policy was maintaining the three-storey limit in Kingscliff. Such voter support demonstrates that the low-rise profile of the town is valued and considered one of the contributing aspects to the town's desirability and popularity. 	

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		<ul style="list-style-type: none"> • The community are well aware that the area is growing and they want to balance this with solid decisions that enable them to maintain the character of the place they live without compromising it. Residents feel they should not be forced to abandon farmland for a facility that can be built on an alternative site that doesn't require the unsatisfactory concession of rezoning State Significant Farmland. Community members believe there are other feasible alternatives that when properly investigated will result in a better outcome for the entire community. • Calls for rezoning have been made by developers multiple times and have been rejected by the public and Tweed Council and the Dep't of Planning due to a commitment to agreed and endorsed plans and applicable legislation such as the Kingscliff Locality Plan and the North Coast Regional Plan. • Alternative uses of the site have been sought previously and been rejected categorically by the community and the Department of Planning. The previous development attempts characteristically were less obtrusive to the nature and amenity of the site than the one currently planned and could be argued were of similar importance to the state. (Application for a police station was sought on the site but NSW Dept of Planning rejected subdivision of the site because the site "was classed as Class 1 Agricultural Land and has been identified as State Significant Farmland" 2010). Nothing should be changed – the proposed site for this development is still state significant farmland and the SEPP should not proceed. Previous development attempts have been categorically rejected by both the community and in accordance with development instruments. These rejections are the best yardstick and provide conclusive evidence in comparison to poorly conducted consultation. They reveal without question that the community is not supportive of development of this land, that land classification must be respected, and that its status as state significant farmland must remain even when the proposed development is itself considered significant. • It cannot be argued that previous rejection of development applications and proposals occurred because the specifics of the development weren't attractive enough to the community i.e., That a development would have successfully occurred if it was the right type and an acceptable development to the community. • Rejection of the rezoning and development of the site is the dominant viewpoint in the community with 4500+ supporters on the Relocate Facebook page and an 8000+ petition collected in 10 weeks. Signatures were collected through accessing local people at Tweed Coast markets and local events. These locations were the only options available to the community due to the restricted nature of time and resources available to them. Despite these hurdles, and in a comparable time frame, the proponent's consultation consulted with only 200 people of which most said they were not in support. • The constant barrage of development options over the decades has demonstrated historically that the site should remain farmland. This is the desire of the majority of the 	

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		<p>community and in line with current SEPP that should remain unchanged. The site is wrong, the need for a hospital is not. The site zoning should not be approved.</p> <ul style="list-style-type: none"> • The ability to ignore the state significant farmland status of the site has been due to the nature of the proposed development on the site being classed SSD. The proponent has been able to push through and ignore the barriers that previously existed, and to act before notice has been given of acceptability. On this basis alone and in demonstration of the Gov't abiding by its own rules of propriety (ie no developer gets to advertise their development on a proposed site before they actually have approval for it!) The site must not be rezoned and the SEPP should not proceed. • The location of the particular site in relation to the full complement of state significant farmland on the Cudgen plateau has been argued as relevant as its exclusion from the rest doesn't fragment the land but merely removes a section off the edge. A previous decision by the Department of Planning refused a police station because the development would have fragmented the state significant farmland. On the contrary, the site in question for this development is more important to the preservation of the whole. The sites position at the head or edge of the classified land makes this the site from which the rest of the farm land opens and which importantly introduces the rural amenity into Kingscliff and Cudgen. It also is the vital link between farmland and the preserved wetlands on its immediate northern border. To remove this significant site from the whole will remove the vital link between the rest of the plateau and the coastal fringe. It may be on the edge but it is an essential part of the classified land. 	
6.4.3	<i>South Sea Islanders Heritage Lost Without Any Opportunity for Examination</i>	<ul style="list-style-type: none"> • The Historical Heritage Assessment lists the South Sea Islander community as having significant ties to land at Cudgen. No members of South Sea Islander community were consulted regarding the impact of the development on their heritage. • The Environmental Planning & Assessment Act 1979 states that a planning proposal must contain provisions that facilitate the conservation of: items, places, buildings, works, relics, moveable objects or precincts of environmental heritage significance to an area, in relation to the historical, scientific, cultural, social, archaeological, architectural, natural or aesthetic value of the item, area, object or place, identified in a study of the environmental heritage of the area, The authors conceded that due to "lack of time" the study had not been fully completed. Under the Act the site must remain undisturbed and until the full picture can be ascertained through community consultations and contact with the South Sea Islander community. 	Historical Heritage Assessment to be fully completed before rezoning of the site or any disturbance of the site is undertaken. Without completing the full study progress on the site is in breach of the Environmental Planning and Assessment Act 1979

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6.4.4	Combining the Tweed and Byron Shires	<p>P.5 SEARs Application “<i>The site selection process identified this site as the most suitable location for a major referral hospital serving the Tweed-Byron community</i>”. The recent name change of the hospital to the Tweed Byron Hospital has been a new introduction. No community consultation and no assessment of any impacts on either Tweed or Byron Shire in regards to the amalgamation or name change of the regional hospital has occurred. The Tweed Hospital was not referred to as the Tweed Byron Hospital throughout the previous years in any planning, and the combined name is being used as justification for pulling the location of the hospital south of the Tweed River and away from the highest density of population in the region. This name has been imposed during the development process by NSW Health. No community consultation or documentation raised the possibility that the hospital would be equally shared between shires and this is a new addition since the proposed site was chosen. A codeveloped budget between councils would reflect a unified responsibility – it does not exist. Tweed council remains solely expected to shoulder the costs for infrastructure while making the hospital more available to Byron, and accommodating wear and tear and busier local roads created by the thousands of additional vehicles and users that will need to use Tweed roads and services to access a “shared” hospital.</p> <p>Community consultation did not extend to Byron Shire even though it would be important to receive the input of Byron Shire residents for a piece of infrastructure with relevance to both shires.</p> <p>It has not been clarified if all services will remain in the new Byron hospital or if some will be transferred and those considered essential will remain within Byron. In fact, there is little discussion of the interrelationship between Byron hospital and Tweed Hospital. The population of Byron has not been factored into estimations of usage, traffic and other factors with a huge impact on the Kingscliff and Cudgen. It has not been shown that there is any specific advantage of having the hospital in Kingscliff versus Tweed proven for Byron residents. Without clarification of these factors and confirmation that the hospital does not have to be even larger than revealed, the SEPP should not proceed. It is premature to presume it can fit on the site.</p>	<p>Clarification as to the history of the now named Tweed – Byron Hospital should be documented for both transparency and history.</p> <p>Relationships, responsibilities and the financial commitments of both Tweed and Byron Shire Councils must be clarified to ensure that the residents of Tweed are not left footing the bill for large Infrastructure projects imposed without lead time for preparation</p>
6.5 Community Attitudes -			
6.5.1	Residential Influence Ignored – TH, Kingscliff	<ul style="list-style-type: none"> Concerned residents unable to genuinely participate in refusal of site and to have influence over the area in which they reside Tweed Heads residents unable to genuinely participate in refusing loss of Tweed Hospital from the area in which they reside – ageist and exclusive methodology of consultation 	The SEPP should not proceed
6.5.2	Loss of Desirable Cultural Features – TH, Kingscliff	<ul style="list-style-type: none"> The proposal does not address the unwilling transformation of the locality within Tweed (Kingscliff/Cudgen/Tweed Heads). This includes changes to the essence of the locality, visual impact and perception, cultural/way of life, and community pride and identity. To proceed with the SEPP ignores these aspects that are the heart of any community. 	

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		<ul style="list-style-type: none"> • In Kingscliff and the Tweed Coast residents are proud that the land surrounding their town is State Significant Farmland - not just any rural land. The loss of any part of this land will remove the character of the town and particularly of the selected site. The proposed site is situated as the pinnacle of the SSF and is not the tiny sliver/fragment that won't be missed as suggested by the proponents. This specific farmland site is integral to the identity of both Kingscliff and Cudgen because it serves a number of functions: <ol style="list-style-type: none"> a. It separates the two towns giving them their own identity. Cudgen embraces rural while Kingscliff is coastal bordered by natural features of agriculture and ocean. b. The site is the dominant site overlooking the coastal strip to the east, north and south, and the Cudgen plateau of checkerboard farmlands to the south and west. c. The site position is immediately west of the primary township of Kingscliff in a key position west of the main commercial centre. This farmland accentuates the blend that is characteristic of Kingscliff between the natural environment and low-rise, environment-respecting coastal development. This is why tourists and locals get a sense of being away from it all because they pass by and witness the activities on the farm on a daily basis. d. The SSF site creates the quintessential town entrance with historical farm houses and wide fields of grass, ploughed rich red soil, growing crops or cows on both sides of the street as you head into the town. On the short distance along Cudgen Road the atmosphere of casual, natural Kingscliff is established as you pass by a popular farm to plate fresh fruit and vegetable store selling locally grown produce from the fields right next to its car park. Further along, the unobtrusive education campus of the Kingscliff TAFE is nestled in the crevice of the ridge and subtly reveals the values of the town, emphasising the importance of hands on education that supplies skills training for the dominant industries of the region. It's a short drive past the start of the residential area, library and community health centre adjoining the protected wetland rainforest that blends into the town with a clear statement of belonging right where it is. A right turn and a few hundred metres along is the main shopping centre with a large Woolworths and other stores set back one street from Marine Parade. Marine Parade is populated on one side by small local boutiques, hairdressers and a variety of restaurants, cafes and a hotel catering for locals and tourists. Opposite in the centre of town is the Kingscliff holiday caravan park and an immaculate beach and visitor friendly beach promenade, community centre and park area. The town is simple with only two main streets. The 2 streets are busy with local traffic and get crowded with holiday makers and visitors on weekends and every day through the main tourist season which stretches through the spring, summer and autumn months. Clearly the state significant farmland site and small coastal town is not the right fit for a massive modern and urban style hospital. The character of the town will be destroyed by rezoning of the land, and along with it the businesses and industries that have worked so hard to put Kingscliff on the national tourist map. • The option to live in the area is identified by many as the combining of seaside and country 	

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		atmospheres which will be destroyed if a large urban health facility is built in the prime position in the town of Kingscliff and eliminating the delineation between Cudgen and Kingscliff. Residents describe the sense of peace and wellbeing they achieve by observation and admiring of farmland, crops and soils in their journeys. Tourists repeat this. The site is the most prominent piece of farmland of the plateau. To rezone it for use other than as SSF is to destroy the features of Kingscliff and Cudgen that make them so appealing to over 1.8 million visitors each year. (Destination Management Plan – Destination Tweed)	
6.5.3	Merging of 2 Distinct Communities – Cudgen & Kingscliff	Residents have made a choice to live in the village of Cudgen or the town of Kingscliff. The site and the size of the planned development will join Cudgen and Kingscliff and eliminate the delineation between the two. Cudgen residents have chosen to live in a small village beside farmland. Residents will now be confronted with a piece of large urban infrastructure making them feel they are in the middle of a large city.	
6.5.4	Demographic profile Changed for TH, Kingscliff	<ul style="list-style-type: none"> • The proposal will change the demographic of several areas of the Tweed. Hospitals tend to create lower socio-economic precincts around them. This is understandable because the issues listed in this objection mean that unless aged or ill, people prefer to live at a decent distance from hospitals. Lifestyle near a public hospital is affected by the traffic, noise, safety and security issues etc that come with a facility of this type. For Kingscliff with its already established demographic and appeal to high-end, high-value visitors, the desirability for a hospital in the area should be questioned. • In Tweed Heads the demographic is of an aging population – Tweed, Banora, and Terranora are all aging populations and have a higher mean age than Tweed Coast. The comfort of being near a hospital is a reasonable desire for the aged. People have selected their place of residence and made significant personal investment in property knowing where the hospital was located. If they had chosen to confirm the reliability of buying in Tweed Heads and being near the hospital, consulting any plan for the area stated a vision for an expanded and upgraded hospital in Tweed heads. • The difference in age demographic in Tweed vs Coast indicates that the most populated area with the largest intensity of population likely to require hospital services for the next 20 years will be Tweed. • Demographics for the Tweed reveal an aging population focused around Tweed Heads, Banora, and Terranora. On average all aging populations are older than Tweed Coast. Residents have selected their preferred suburb and made significant personal investment in property knowing where the hospital was located. Investigations into Tweed Council and relevant planning documents to the year 2036 confirmed the major hospital would be in Tweed heads. This difference in demographics for age in Tweed Heads versus Coastal towns indicates that the most populated areas with largest population requiring hospital for next 20 years will be Tweed Heads and surrounds. • Areas around hospitals are generally lower socio economic which will change the 	

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		<p>demographic makeup of both Kingscliff and Tweed. People requiring the services at a hospital may wish to make living arrangements in Kingscliff. If they are of a lower socio-economic demographic, they will find a challenge in affordability of housing. Retirees may be challenged to afford the proximity they require to the hospital.</p> <ul style="list-style-type: none"> • The businesses that have benefitted from the higher socio-economic mix of the Tweed Coast will experience less demand with the loss of tourism. A less attractive tourist profile will impact the socio- economics of the entire area. 	
6.6	Health Choices -	<p>Residents make choices about where they live based on their personal needs and desires. People live in Kingscliff with the knowledge that the closest hospital is located in Tweed Heads. They have been satisfied with the access they have and the length of the trip to Tweed Heads should they require hospital treatment. No documentation exists of local people calling for a hospital to be built in Kingscliff because of the distance to Tweed</p>	
6.6.1	Needs of the Aged Ignored	<ul style="list-style-type: none"> • Similarly, there are many residents in the suburbs north of the Tweed River (Tweed Heads, Banora, Billambil, Terranora) in Tweed who have chosen their place of residence specifically due to the proximal location of the hospital. These people will be severely disadvantaged by moving the site south over the river. The bulk of the people for whom this choice is important are the aged who have been grossly overlooked in the examination of relocating the hospital and in their ability to participate in the process of making this decision. These people are retirees or pensioners and have limited financial, technological and other resources or abilities. Their circumstances require ease of access to a hospital facility either by their own proximity or by using affordable and appropriate transport. • Although the population of Tweed has been mentioned briefly in assessments there has been little if any consultation with the aged sector of the community to ascertain the impacts, costs and opinions of this group. The aged population (65 and over) makes up 34.6 % of the Tweed Heads population with another 15.3% of over 55 -64 indicating that the northern section of the Tweed Shire is an aging population who will increasingly need the services of a nearby hospital. The hospital will be moved away from them if the proposed site is approved. • During flood events the proponent has suggested that residents north of the river travel to Robina Hospital. This is a grossly inadequate solution for the aged who may not have their own transport, cannot afford private transport which may not be available during flood events anyway, and who need to access the services of a hospital regularly because of their ongoing impaired health. 	<p>Genuine attempts to engage with and consult with the aged population in Tweed Heads must occur to get a clear understanding of the impacts on this silent and ignored group. HI must meet them in their community rather than expect them to adapt to and be able to fluently use technology. Meeting the aged in aged care settings will give this neglected but prominent group in the Tweed a rightful voice in determining policy for their future.</p>

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6.7	ECONOMIC, EMPLOYMENT & EDUCATION IMPACTS - General	<ul style="list-style-type: none"> • Unplanned economic transformation of both Kingscliff and Tweed Heads without any community input, defying endorsed plans, and to vastly different dominant markets than currently exists. • Change of all existing structures of the locality of Kingscliff from a focus on tourism to a focus on medical service provision. • Building new infrastructure is frequently called 'Progress'. Firstly we must define what progress is and is not. Progress is not changing things, particularly the natural environment with human-made structures with an assumption they are better. Progress is improvement or advancement. Changing currently accepted and future focused zoning laws may permit a large building and will allow for the improvement of a hospital. However, it will not bring desirable improvement to the township of Kingscliff. It will not support Kingscliff/Cudgen local residents and the wider Tweed area to advance in the direction that valid consultations with the people have uncovered and documented in numerous endorsed plans. This will be a 'gaining of ground' only for medical staff housed within a hospital, not for the large majority of Tweed residents. To proceed with changes to the land will be a regression and deterioration for the residents of Tweed, for the local people of Kingscliff/Cudgen and the Tweed Coast. It will demonstrate a return to and acceptance of governing with a "we know best" attitude that average Australians find unacceptable. It will impact on developing and growing economic and employment sectors for the region by removing the distinct drivers of the prosperity in specific areas and pitting them against each other with only one to survive. For the most beneficial economic, employment and education outcomes the SEPP should not proceed to use state significant farmland due to its impact on two major industries in Kingscliff and Cudgen – Tourism and Drought Resistant Farming. A site must be chosen for the proposed hospital development where the land is without other useful purpose. The current choice interferes with the successful industries of existing areas. To pursue this site means that economic benefits to the Tweed are reduced not multiplied. A vibrantly maintained visitor industry, and an effective farming presence which supports the food security of the area and the state is a boon to a regional town. This is further enhanced when the two industries complement each other, enhancing the tourism and farming industries with planned mutual benefits and growth. A medical precinct should be developed where it is able to capitalise and build on the established skill base in Tweed Heads Hospital. • The EIS assessments have based their assessments on what is existing now. Rezoning does not add to the Cudgen/Kingscliff area as it currently exists NOW ie a town with a focus on tourism, agriculture and relaxed seaside living. It will damage the present economy and the amenity of the area. Tourists and locals will be severely impacted by traffic, building and no alternative ways to get into and past the town at the busiest time of year in summer. 	

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Economic Considerations			
6.7.1	a. Cost Shifting and Cost Omission	<ul style="list-style-type: none"> • It is well known by local farmers that the proposed site sits on basalt. The calculations of blasting and piling for this rock have not been included in cost estimations. Piling and blasting rock of this type is an expensive process that frequently blows out budgets. The omission of this activity from price estimates for the site contradict the argument that the site is the most cost effective. Estimations for a nine story building piling costs into this type of rock provided by building companies are very high which will add to the site costs and make the argument of the cost saving of the site completely incorrect. Land should not be rezoned without correct cost calculations released to show the savings comparisons. • Minimal roadworks will be done by the proponent leaving the large proportion of road access issues in the lap of Tweed Shire Council. The council already provides the road and transport infrastructure to the existing Tweed Heads Hospital, and will bear the full brunt of enabling access to a site kilometres from the highway. The Tweed Coast Road is a rural single lane with no curb and guttering and is insufficient to handle the increased traffic of over 10,000 cars per day. Application for federal grant to fund the necessary alterations to Tweed Coast Road has been rejected leaving Tweed Council and the ratepayers of Tweed to foot the bill. • Ratepayers of one shire should not bear the cost of a government decision to relocate a regional hospital to a site where the supporting infrastructure is not adequate to service the populations of two shires (Tweed and Byron). Tweed Shire Councils option is to increase rates or to reduce other services of need in the shire. Either one is unacceptable for residents and indicative that rezoning to allow a facility on state significant farmland must not occur when there are minimal expenses to upgrade in Tweed. This is cost shifting and therefore makes the economic argument for the affordability of the site invalid. 	Quotations of blasting and piling work to be included in the budget. Estimates of basalt blasting, removal and piling must be quoted and added to project costings to prove the assertion it is the best option due to cost as compared to rebuilding Tweed Hospital. This must be included unless evidence of different rock proves this action to be unnecessary.
6.7.2	b. Tourism	<ul style="list-style-type: none"> • Transformation of locality (currently beach/food tourism and recreation – will change to major health therefore discouraging tourists) • The largest and most overlooked rationale to reject the rezoning of state significant farmland and build a large level 5 hospital at Kingscliff is the value of tourism and the long-term strategic direction of the destination of the Tweed Coast. The hospital will detract from the destination appeal and the Tweed's focus to develop high value tourism in agricultural and culinary tourism, business events and nature based tourism. • Food and agri-tourism are the key experience themes of the visitor economy. They attract high value tourism based on our highly productive agricultural land and food service sector that is connected through agricultural and culinary tourism. Visitation to the Tweed is centred on a low key naturally beautiful destination. A major regional hospital at the entry of the "low key" destination will destroy the ambience and the appeal for high value visitors. • Loss of Well-Developed Brand Identity for Kingscliff – The dramatic alteration of the 	

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		<p>presentation and perception of the area from Natural coast/ country to urban will extinguish the regional brand cultivated over years. Visitor marketing has been dominated by promotion of the 'unspoilt' natural beauty and outdoor activities and describes Kingscliff as: "charming village setting", "Surrounded by national parks and ranges with tropical foliage" - Peppers Salt Website. "A pretty coastal town" – Ytravel Blog, "An easy-going seaside town" – VisitNSW.com, "For those who want to avoid the buzz and excitement of the Gold Coast" Aussietowns.com.au</p> <ul style="list-style-type: none"> • Alteration of the identity of the coastal farming region from a natural, laid back, unspoilt and high-end location to the urban sick centre of the Tweed will have far reaching economic and employment effects on tourism and the value added enterprises that benefit from visitation. • Lodged between the backpacker/yuppy of Byron and the high-rise glitz of the Gold Coast the Tweed can continue to resoundingly profit from attracting visitors that value and seek out the same sorts of experiences that locals love and treasure if it manages and maintains its key assets and natural environments. The unique attributes that make the Tweed a simply beautiful place to live are under threat from a hospital development that simply doesn't match the destination or the dream. (Tweed Destination Management Plan 2018) • Reduction in Tourism - Salt and Kingscliff are the core of the high value visitor offering. Food tourism, accommodation and business events are all centred around this area. The road access to be used by the hospital will clog the main access to Salt and Kingscliff and cause similar congestion as experienced on Ewingsdale road in Byron Bay (16,000 vehicles per day). It is reality to expect 10,000 plus vehicle movements per day generated by the hospital (refer to GC University Hospital traffic counts). This combined with the TAFE access and School access will feasibly exceed these numbers. Byron's traffic is becoming a major impediment to visitation. We will be repeating this mistake if we place a hospital on the main route into a small tourist town. • The major tourist accommodation for the Kingscliff region (Salt Resorts – one of the largest residential conference venues in the country) will have views of the dominant hospital rather than the relaxing unimpeded ridges and views to Mount Warning or the Gold Coast Hinterland, destroying the amenity for which it is renowned and reducing its visitor attraction. • Restriction to Kingscliff Economy –Tourism supports the existing trade and small businesses that dominate the Kingscliff foreshore, Salt Village and Casuarina precincts. • No longer the region where the country meets the sea used as the marketing identity of the region. Attraction to the coast brings tourism to other inland areas as visitors travel to Mt Warning, Murwillumbah and smaller villages. It will only take one large high-rise development in a prominent position to undo all of the work done over decades to build the brand of the region. • Removes the greatest selling point of the region for tourism – the unspoilt nature, sea to 	

#	Issue	Detail	Remedy
		<p>country combination</p> <ul style="list-style-type: none"> • Repurposing the land will have a direct cultural impact on farming and catering/food services in the area. A great deal of work has been done by both Destination Tweed and local Council Business Development to enhance the farming on the plateau and in the region to promote current trends in tourism such as farm to plate. Significant economic and cultural creativity will be lost, as will employment opportunities with a change of the dominant industry from tourism to medical. • Elimination of farmland at the entrance to the Town of Kingscliff will remove the unique selling virtue of Kingscliff, impacting adversely on visitor numbers. The appeal of Kingscliff as an alternative place to visit from Byron Bay and the Gold Coast is that people can 'get away from it all'. This relaxed getaway and atmosphere can only be achieved by maintaining both the coast and the country and by ensuring no precedent is set to alter the height restrictions of the town. • Rezoning will eliminate this combination of coast and country that greets visitors on their entrance to Kingscliff, and the accompanying traffic, noise, parking and light of a nine-storey hospital will destroy the relaxed, healthy and natural image of the town – an image that has been meticulously established to create a niche market for the town over the past decade. 	
6.7.2	c. \$ Value of Tourism	Current numbers on the value of the visitor economy for the Tweed is \$491,000,000 TRA June 2018 Qtr (NVS and IVS survey)	Refer to Destination Tweed – Destination Management Plan for data on tourism, its net worth and value for Tweed
6.7.2	d. Farming - \$ Value and Loss for Farming	<ul style="list-style-type: none"> • Enabling the eventual demise of the Cudgen plateau agricultural sector, with inevitable ancillary health services and associated commerce and residential needs taking up additional farmland in much the same way as the Hospital • The dominant historical industry on the Tweed Coast is farming. • Proponents have highlighted the assets and advantages of the site for their purposes. These assets have multiple applicability's and this is why it was deemed necessary to declare the site and surrounds as protected farmland. The proponents have failed to prove that there is NO other site that cannot either be engineered or adapted at the same or less cost than the current site. • Arguments of costs may be used against standard or similar site comparisons. The SSF removes the argument of cost being a valid argument. The estimated costs of losing of land of declared significance are not calculable and unable to be given a monetary value. • Shade from 9 storey building on farmland – west and south impacting on crop growth and during winter months will impact farming productivity on neighbouring farmland. 	The SEPP should not proceed

#	Issue	Detail	Remedy
6.7.2	<i>e. Tweed Heads – Economic Driver Removed</i>	<ul style="list-style-type: none"> • Impact to existing Tweed Heads economy (will decline around current hospital) • The EIS also makes clear that Tweed heads will be impacted negatively by the removal of the hospital. • Employment in Tweed impacted negatively where the main driver of business and activity is from the hospital. Short term negative impact is conceded in reports with comments that the impact would be ‘better in the long term’. There is no basis, strategy or plan outlined to make it better. • Assessments show a recognised impact on the Tweed locality with no proof of ability to recover, and no plan for how this will happen. 	<p>Study of impact of removal of the major economic driver in Tweed.</p> <p>Fully consulted plan for the rejuvenation of Tweed and transference of jobs before any SEPP should proceed.</p> <p>Must develop a plan for Tweed Heads to mitigate the loss of the single largest economic driver in the area. Plan must be a part of any responsible transition to ensure social and other problems do not eventuate for Tweed Heads.</p>
6.7.2	<i>f. Impacts on Real Estate for Kingscliff & Tweed Heads</i>	<ul style="list-style-type: none"> • Low affordability of real estate in Kingscliff close to the hospital particularly for the aged • Real estate in Tweed Heads close to the hospital is more affordable enabling the aged or economically disadvantage to secure housing at agreeable distance from the hospital if required. 	The SEPP should not proceed
6.7.2	<i>g. Economic Burden Borne By Tweed Residents</i>	<ul style="list-style-type: none"> • The burden of expenses for infrastructure will be borne by Tweed Residents. Tweed Coast Road will require upgrading to disperse the gridlock that will occur with the hugely increased traffic during construction and completion of the proposed development. To cover the cost of infrastructure and road improvements, Tweed Council will need to find funds urgently as the sudden and unconsulted decision has not enabled them to budget for the necessary upgrades in the sudden timeframe. • Funding for the road infrastructure can only be achieved by two tactics: 1. Increasing rates or 2. Cutting back on Tweed Council services or costs. • Despite the project being the responsibility of NSW Health, they will only provide funding for the improvement of approximately 1 kilometre of Cudgen Road immediately in front of the proposed hospital building. NSW Health’s feasible and endorsed plan to upgrade the Tweed Hospital would remove the huge infrastructure burden for Tweed Council, as road infrastructure already exists at the current site. • It is unacceptable that funding for widening and improvements to several kilometres of Tweed Coast Road to enable the entire population of Tweed and Byron to access the hospital at Kingscliff, will be forced to come from Tweed Council. This is ultimately a tax on Tweed residents imposed by NSW Health as Council is forced to increase rates or reduce services to fund the roads. • There will be an inability of local council to offer wider service range for an expanded population due to being left with responsibility for major roads to access the hospital not just within the region but also from Byron Shire. • This expense should not be borne by Tweed ratepayers when infrastructure already exists in Tweed and is another reason why the zoning of state significant farmland should not be changed to accommodate a hospital project. 	The SEPP should not proceed

#	Issue	Detail	Remedy
		<ul style="list-style-type: none"> The Tweed region has a large number of pensioners and the aged with demographics showing it has one of the highest percentages in the state for retirees. Raising rates to fund the roads is a particular problem for the aged and pensioners who have a restricted ability to earn more to offset increases, and whose quality of life suffers when the affordability of basic expenses is reduced. 	
6.7.2	<i>h. Contribution of Byron Shire</i>	As the hospital will be the major hospital for both Byron and Tweed residents widening and improvements will need to be undertaken on Tweed Coast Road from both north and southerly directions. Many people accessing the hospital from Byron will travel through either Cabarita (Clothiers Creek Road) or Pottsville to reach the site placing further demands on the wider network of local council roads.	Negotiations for Byron Shire Council to contribute to the network of Roads must occur to ensure that infrastructure access can be improved from both south and north of the hospital and to ensure that Tweed residents are not subsidising the health access of Byron residents.
6.7.3 Employment -			
6.7.3	<i>a. Tourism Job Losses</i>	Tropical Fruit World attracts 70,000 visitors per annum, employs 30 + people and generates millions for the regional economy. Key investments in Agritourism are Husk Distillers, Madura Tea and a swag of highly awarded restaurants based largely in Salt, Kingscliff and Casuarina. Removal of this particular piece of farmland which is the most visible site and positioned at the entry point to the 'Low Key' tourist area, equals irreparable damage to the Tweed tourism industry and the loss of strategic amenity for Kingscliff. Negative impacts on visitor numbers for the Tweed Coast become decreased visitation across the region where restaurants, accommodation providers and niche attractions must reduce employment due to decreased demand.	The SEPP should not proceed
6.7.3	<i>b. Alternate Use v's Unused</i>	Nowhere has it been proven that the chosen site is the ONLY feasible option. In order to override current SEPP as State Significant Farmland this MUST occur. It is not enough to simply show how the site could be adapted to the proponent's purposes. The site has viable current uses as farmland which are an alternative to the function of development into a hospital site. A more feasible site must be one whereby there is no alternate use and therefore no loss of jobs and employment for existing or potential workers.	The SEPP should not proceed

#	Issue	Detail	Remedy
6.7.3	<i>c. Farming Job Losses and the Economy</i>	<ul style="list-style-type: none"> • 4 jobs have been directly lost from the cessation of farming on the site. • The surrounding farming Industry is under threat – both that which is directly opposite the site and the wider plateau. The proponent's assessments repeatedly indicate the intention for expansion of the hospital and an associated medical precinct. The inclusion of support services, education, research and other faculties attached to the hospital will be unable to be accommodated on the site. It is clear that SEPP change will lead to precedent and 'demand' for further land to be developed. • The value of the crops produced as a contribution to the local economy and their multiplier effect is an overlooked aspect of an economic analysis limited to jobs only. 	The SEPP should not proceed
6.7.4 Education -			
6.7.4	<i>a. Impacts of Campus and Medical Precinct on TAFE</i>	<ul style="list-style-type: none"> • The proponents discuss the uniting of TAFE and the hospital to create a medical campus. No evidence of TAFE support or intention has been presented. • Parking at TAFE and the low key nature of the campus will be altered due to hospital patients and visitors seeking free parking. This will impact on student amenity and convenience. • TAFE provides a variety of technical and trades training which are frequently without a medical focus. It is not in the interest of the broad cross section of the community to focus only on one field of training. Opportunities for education and training in a broad scope of subjects are desirable for the skill expansion of the region. 	The SEPP should not proceed
6.7.4	<i>Kingscliff School/High School</i>	Students and teachers of Kingscliff High School will be impacted by traffic and the decreased amenity of the school area.	
6.8 Environmental impacts			
6.8.1		<p>The rezoning of the RU1 land creates a direct threat to adjacent wetlands, fauna, flora through an inappropriate adjacent development including significant koala corridor. There is a significant lack in appropriate assessment of the impacts of this rezoning including:</p> <ul style="list-style-type: none"> • Failure to collect baseline information on threatened species under the EPBC Act including Koalas, Mitchell's Rainforest Snail • Failure to consider impacts of Regional Fauna Corridor fragmentation on threatened species. • Failure to properly understand the impacts to wildlife corridor and wildlife movements in the area. <p>Failure to address the impacts of a development of this nature and scale to sensitive wildlife such as the Stone-Bush Curlew.</p>	Chose a more appropriate site where there is no or minimal direct threat to significant / Threatened species

#	Issue	Detail	Remedy
Conclusion			
		<p>Within this submission the Relocate Group presented technical evidence and community sentiment in objection to the proposed amendment of the Tweed Local Environment Plan 2014. We reject the Proposed State Environmental Planning Policy – Tweed Valley Hospital and contend that overwhelming and irrefutable substantiation justifies the amendment NOT proceeding. It is our firm belief that changing the RU1 Primary Production and R1 General Residential Zoning at Lot 771 Cudgen Road, Cudgen. (Part Lot 102 DP870722) to SP2 Infrastructure (Health Services Facility) will result in the rare pocket of State Significant Farmland located on the Cudgen Plateau being violated. Furthermore, the arguments presented show consistent flaws, omissions and inaccuracies in the planning for the hospital and an absolute failure to ensure the communities the hospital will serve, are not disadvantaged or damaged by its location on state significant farmland in Cudgen. We urge the Minister to heed the arguments presented against the SEPP so that the community of Tweed can refocus promptly on agreeing to a suitable upgrade or appropriate new site that will address essential health care needs in the Tweed region.</p> <p>Having examined both the Environmental Impact Statements and noted the Explanation of Intended Effect in the brief exhibition period, numerous failures have been evident in the presentations by the proponent. These have been outlined in this response and attached appendices. They form the basis of our arguments against hospital development and rezoning any part of the proposed site and are listed below. The information provided to justify the need for the SEPP is flawed in the following ways:</p> <p>Omission - left out or incomplete data. Examples include heritage data that must by law be collected left out of reports due to insufficient time, or the withholding of procedural documentation regarding the contents of community consultations.</p> <p>Incorrect interpretation - lack of understanding of the area or incorrect assumptions. Generalised data that demonstrates no intimate knowledge of the area/specialty when applied to the particular circumstances in Tweed and on SSF. For example, plans for the hospital above the PMF that have not taken into account the necessary supporting structures for the building to continue to operate at any length of time in a major flood event making the raised location of no value and being unable to fit on the buildable land parcel with all of the other required constructions.</p> <p>Failure to coordinate and cross reference between requirements in other assessments, making plans incompatible with legislation or characteristics that must be observed because of legislation. Example includes complete irregularity in plan drawings between fire hazard and spray drift buffers meaning that plans do not abide by recommended requirements outlined by consultants, and show that the site with its restrictions cannot accommodate the developments required.</p> <p>Failure to address proven or expected detrimental outcomes from activities, such as irreparable or unacceptable damage to the environment, economics and employment. The proposed site generates income both directly and indirectly. Indirect means were not acknowledged and completely ignored. To build on SSF creates a huge net loss as compared to other feasible sites where there are no losses.</p> <p>Cost shifting creating a massive burden for the local people due to necessary infrastructure supports e.g., roads.</p> <p>Failure to understand the clear needs of diverse and/or disadvantaged communities. Lack of recognition that building ‘bigger’ fails to align development with community vision and needs, or to support the health of the average person in the community (not just the users of the service). The plans do not integrate seamlessly to address disadvantage, the vulnerable and most in need, economics, future employment, or a range of other issues.</p> <p>It is clear from the Environmental Impact Study that this decision has far reaching consequences for state significant farmland. Documented forward planning and directions reveal that the site will not be adequate to accommodate required structures, parking, transport drop off areas, plant and equipment, and additional services. Diagrams already show that the concept is not only for one large building but numerous. The classification of the farmland as state significant implies a duty to protect it and the abutting wetlands, and this alone is an indicator that the SEPP must not proceed.</p>	

#	Issue	Detail	Remedy
		<p>Kingscliff will be overwhelmed by the development and the town will be dominated by the hospital and other buildings that are at complete odds with the character of the town. Tweed Heads will lose its main economic driver and the central infrastructure that has attracted the aged and disadvantaged populations who wish to live nearby.</p> <p>If the necessity to save significant farmland in a time of severe drought is not impetus enough to reject the SEPP and to ensure farm land is not whittled away under the premise 'it is just a little bit', then there is still significant work to be done by the proponent. They must show justification for the site by proving no other feasible option exists and this includes discontinuing the selection of only 'as is' sites and expanding to include those sites that can be engineered to meet criteria. Arguments against costs associated with engineering have already been dismissed by the preliminary work on the proposed site in regards to the engineering that will be required to cope with the underlying rock. Similarly, if discounting the preservation of state significant land as a sufficient argument, then there is a significant amount of required data to be collected before the proponent's data is adequate enough to inform a decision. The types of data collection and actions that must occur prior to decision include, but are not limited to:</p> <ul style="list-style-type: none"> • Studies to be completed or performed e.g., Consultation with the South Sea Islander Community in regards to heritage and history on the site. • Relevant information to be provided e.g., Validated questions used in community consultation to establish the validity of reported results • Negotiations to occur e.g., Between councils (Byron and Tweed) for infrastructure to ensure equitable cost distribution, and to eliminate any shifting of costs • Establish clearer plans regarding the order of works to be undertaken to ensure transparent allocation of budgets, and the minimising of transport disruptions, traffic and roads. • Using IAP2's public participation spectrum, the community to participate at the empowerment end of the spectrum - being valid partners and instigators of decisions, and not being submissive receivers of information and others decisions. The people of Tweed have a history and experience of being involved in determining their future. We hope we can turn into the 'poster people' for meaningful community participation. Health Infrastructure and NSW Health are invited to work with us, for without us there is no community to serve. <p>Having summarised our arguments, we highlight two factors of the process to meet the Tweeds illness care needs that demand attention. Had they been widely considered, evaluated and put into practice in initial stages, the process would undoubtedly been further progressed and embraced by this time:</p> <ol style="list-style-type: none"> 1. Residents of Tweed reserve and deserve their right to participate in their own self-determination. This is their democratic and lawful entitlement and leads to engaged, vibrant and better communities. Community participation and consultations may create a longer process and raise issues, that for expedience and simplicities sake proponents may prefer didn't happen. Generally, the approach of partnering with the community reduces time required, rather than extend it. But a seat at the table of self-determination makes communities stronger, wiser, and ultimately gives the greatest chance of success and resilience - because nobody knows what it's like to live in a community better than its residents. Having a vision for their home, town, region, state, country and world and participating in achieving that dream is what makes change happen - it's easy to lose sight of this. 2. The play off between a rare and important environment - recognised and duly documented as being of state significance - against a state significant development should never be allowed to happen. We should not be writing this submission. Our elected representatives are gifted the responsibility of ensuring that we protect our natural treasures not less than, but equally to, the human-made monuments and developments that are intended to serve the purpose of making the living of our lives somehow 	

#	Issue	Detail	Remedy
		<p>better. Farmlands at Cudgen do that.</p> <p>The Relocate Group and our community believe we can find solutions where our environment, our health, and our prosperity are all supported, all win, without a whole subset of our neighbours being the loser. This hospital can, must, will, go ahead. But we implore, NOT on STATE SIGNIFICANT FARMLAND. The SEPP should not proceed.</p>	

Appendix 1 The Utility of State Significant farmland on Cudgen Plateau

The reason the Cudgen plateau has been granted SSF protection is because of the soil, climate, rainfall and plentiful water available for irrigation. Just because a block is steep does not negate its status. Tree crops or grazing are just two options if cultivation is not desirable. Arguments that rich well watered food-producing soils may at one short moment in time be valued lower than market values for urban real estate, are the very reason that Farmland Protection is in place. The rules prevent permanent destruction of good farmland for short-term windfall profit, in order to preserve Intergenerational Equity. This is a prime example, because,

- The hospital will create the same job opportunities if it is relocated to a more appropriate site and leaving Cudgen and Kingscliff to expand their combined agricultural and tourism industries.
- The industry standard is now once every 2 years with many growers reducing that to 18 months using new disease resistant varieties and removing all crop residues after harvest.
- The potential to better utilize some areas of the plateau is not an excuse to destroy a section that is currently being used. Every hectare is state significant.
- The demographic of Cudgen farmers shows the potential of every hectare and the need to preserve it. 310 hectares of the plateau is farmed by farmers in their 20's, 30's and 40's. These young farmers are drawn to the industry because of the reliable income that comes with farming on such fertile soil in such a mild frost-free climate with regular rainfall and plentiful irrigation water.
- The potential for rural land use conflict will be greatly increased. Recent studies have shown that most conflict occurs between farmers and new residents or industries moving into rural areas. It has also revealed that in most cases the farmer was complying with the law. It stands to reason that a hospital of this size with 2000 people movements a day will create conflict when the farmer is most likely doing no wrong. For example, slow moving agricultural equipment may cause issues on roads with citizens or paramedics rushing to hospital in an emergency situation.
- The Cudgen sweet potato industry alone is a \$10 million industry. The soil and climate allow a huge variety of crops to be grown year round so the area can capitalize on whatever produce is popular at the time. A growing Ag/tourism industry is also capitalizing on the proximity to the Gold Coast and Byron. The proximity to large populations allows for farmers to capture retail dollars and also fill voids nationally when climates are not favourable in other regions. This industry needs its protection status to be honoured so it can keep expanding bringing more money into the shire creating prosperity and job diversity.
- The Cudgen plateau has been under pressure from incorrect development for decades. There are still a few landowners actively attempting to have their blocks rezoned for a very significant financial windfall. If this proposal is allowed to proceed, they will have renewed passion to push ahead. To relocate this proposal will send a clear message that the years of work done and the resulting protection placed on this land is solid. When 10 million hectares of arable land is lost every year world-wide. We need to save every hectare we can especially the most productive areas.
- Farmer on Reardons Road Cudgen grows avocado trees on his steep blocks with no irrigation, fertilizer or spray inputs with equal to industry average yields - make it noted the property in question constitutes 2.4% of Cudgen's SSF and ignore claims of only 0.9% due to slope.
- The available land for sweet potato production is noted as 5.62 hectares per annum instead of the 3.75 hectares stated.
- The department of Premier and Cabinet is currently working with the agricultural industry in the region to improve utilization of farmland - Save the SSF on the chosen site to encourage better utilization of the plateau and discourage pro development land bankers from buying farmland with the intent to rezone it for a substantial profit.
- Half of these young farmers have purchased blocks in the last 10 years paying upwards of \$90000/Ha and will continue to if land is available. While most rural areas struggle to keep young people on the land we just need more land to grow. - Save all SSF on Cudgen plateau to allow this prosperous industry to grow.
- The studies have been conducted by Dr. Andy Goodall of the University of Technology Sydney for NSW DPI for their Right to Farm policy conducted from 2015 to 2018. - As the study has also found the best way to prevent rural land use conflict is at the planning stage by not approving inappropriate development applications in rural areas we would suggest the hospital be relocated to a more appropriate site.

Appendix 2 Buffer Zone Conflicts

TWEED VALLEY HOSPITAL EIS and Part 5 Activities

The site is severely compromised by overlapping buffer zones, which protect a number of environmental values and manage risks.

The four (4) in question are Bushfire APZ, Land Use Conflict Agricultural Spray & Dust Buffers, EPBC Threatened Species Buffers and Coastal Wetland Buffers.

The northern site boundary lies within a designated wetland protected under the Coastal Management SEPP. The SEPP prescribes a proximity buffer not to be disturbed unless it can be demonstrated it will have insignificant environmental impact. As the NPWS policy recommendations under the Commonwealth EPBC Act specifically require a 50m protective buffer to the designated wetland habitat of the threatened species “Mitchells Rainforest Snail” and that snail has been reported at numerous locations in this wetland, this buffer cannot be disturbed. The proposal to excavate the entire buffer zone within the site for Water Quality Management Ponds is therefore likely to be illegal.

The ponds must be relocated out of the wetland proximity zone.

Furthermore the SEPP if implemented should not include the proximity buffer.

NOTES on EPBC Act

The attached pages describe the proposed destruction of a “wetland proximity zone” as part of the Tweed valley Hospital Project. The Applicant (HI NSW) intends to excavate along the entire common boundary to convert the land to permanent Water Quality Management Ponds, a retaining wall & other structures intended to manage runoff from the Hospital site. These are shown on the attached diagrams.

The use of this zone for development is prohibited by NSW law (SEPP) without demonstration of zero impact on the adjoining habitat and dependent species.

The wetland is a key identified habitat for a scheduled species under the EPBC Act – Mitchell’s rainforest snail, (and also the Wallum froglet.)

It will be requested that the Commonwealth intervene to prevent this work commencing pending a comprehensive environmental & species impact statement from the applicant (HI NSW), demonstrating zero impact.

RELATED EIS APPENDICES

- D (Trees & Landscape);
- J (Land Use Conflict);
- T (Water management) &
- V (Bushfire)
- Civil Works

All generate requirements for BUFFER ZONES on the Hospital curtilage.

Appendix V (Bushfire)

Figure 5 “A 50m wide setback (APZ) from the classified vegetation edge within the Project Site to the proposed building will be required (note the APZ provisions in the Pre- Release PBP 2018 are considerably different and require a 67m wide APZ for Forested Wetlands - Coastal Swamp Forest)”

Refer to s. 3.2.5 for discussion on APZ requirements under the Pre-Release PBP 2018, which are greater than current PBP 2006 requirements. Notably the increased APZ has also been reflected in the Masterplan design shown on Appendix A

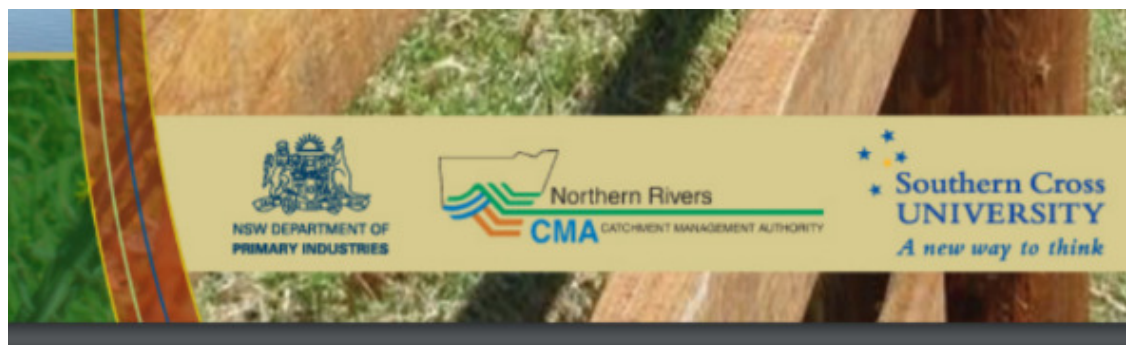
The building is provided with an APZ in accordance with Table A1.12.1 (Appendix 1). In accordance with the Classified vegetation being Coastal Swamp Forest on flat land, Table A1.12.1 prescribes a 67m wide APZ. The proposed hospital is currently being designed to meet the increased APZ, as shown in the Masterplan (appendix A). Notably, however a key change is the way the APZ is measured. The Pre-Release PBP 2018 requires the APZ to be taken from the canopy rather than the base of the trees as per BBP 2006.

The “Land use Conflict” appendix proposes additional planting against the Hospital buildings in lieu of the buffers to protect patients and staff from pesticide drift and blown dust from open fields. It nominates hospitals as particularly vulnerable to airborne toxins.

The report recommends banks of dense vegetation 30m wide on the southern boundary and 10m wide on the western and SW boundaries.

No APZ has been recognized for these dense fuel zones. Nor has the Landscape plan included them.

The Living and Working in Rural Areas Handbook (Department of Primary Industries et.al 2007) denotes a number of recommended buffer distances to residential areas as described below:



Living and Working in Rural Areas

A handbook for managing
land use conflict issues
on the NSW North Coast

Living and Working in Rural Areas

A handbook for managing land use conflict issues on the NSW North Coast

Rob Learmonth, Rik Whitehead, Bill Boyd, Stephen Fletcher

An initiative and product of the Centre for Coastal Agricultural Landscapes – an alliance established by Southern Cross University (SCU) and the NSW Department of Primary Industries (NSW DPI) – in partnership with the Northern Rivers Catchment Management Authority. Funded by the Natural Heritage Trust.

© State of New South Wales 2007

- 300 metres from State and regionally significant farmland;
- 100 metres to wetlands;
- 50 metres to native vegetation/habitat;
- 50 metres to minor waterways;
- 300 metres to sugar cane, cropping and horticulture;
- 200 metres to greenhouse and controlled environment horticulture.

Table 6: Recommended minimum buffers (metres) for primary industries

(NB: The desirable buffer in the circumstances will be the separation distance and conflict avoidance strategy that protects: community amenity, environmental assets, the carrying out of legitimate rural activities in rural areas and the use of important natural resources.)

	Residential areas & urban development	Rural dwellings	Education facilities & pre-schools	Rural tourist accommodation	Watercourses & wetlands	Bores & wells	Potable water supply/ catchment	Property boundary	Roads
Piggeries¹									
Housing & waste storage	1000	500	1000	500	100	SSD	800	100	100
Waste utilisation area	500	250	250	250	100	SSD	800	20	20
Feedlots²									
Yards & waste storage	1000	500	1000	1000	100	SSD	800	100	100
Waste utilisation area	500	250	250	250	100	SSD	800	20	20
Poultry³									
Sheds & waste storage	1000	500	1000	500	100	SSD	800	100	100
Waste utilisation area	500	250	250	250	100	SSD	800	20	20
Dairies⁴									
Sheds & waste storage	500	250	250	250	100	SSD	800	100	100
Waste utilisation area	500	250	250	250	100	SSD	800	20	20
Rabbits⁵									
Wet shed, ponds & irrig.	300	150	150	150	100	SSD	800	50	50
Dry shed	120	60	120	60	100	SSD	800	20	20
Other intensive livestock operations⁶									
	500	300	500	300	100	SSD	800	100	100
Grazing of stock									
	50	50	50	50	BMP	SSD	BMP	NAI	BMP
Sugar cane, cropping & horticulture									
	300	200	200	200	BMP	SSD	BMP	NAI	BMP

Based on the proximity of the existing vegetable cropping to the south of the proposed Tweed Valley Hospital we recommend a series of vegetated buffers to provide an effective safeguard to spray drift.

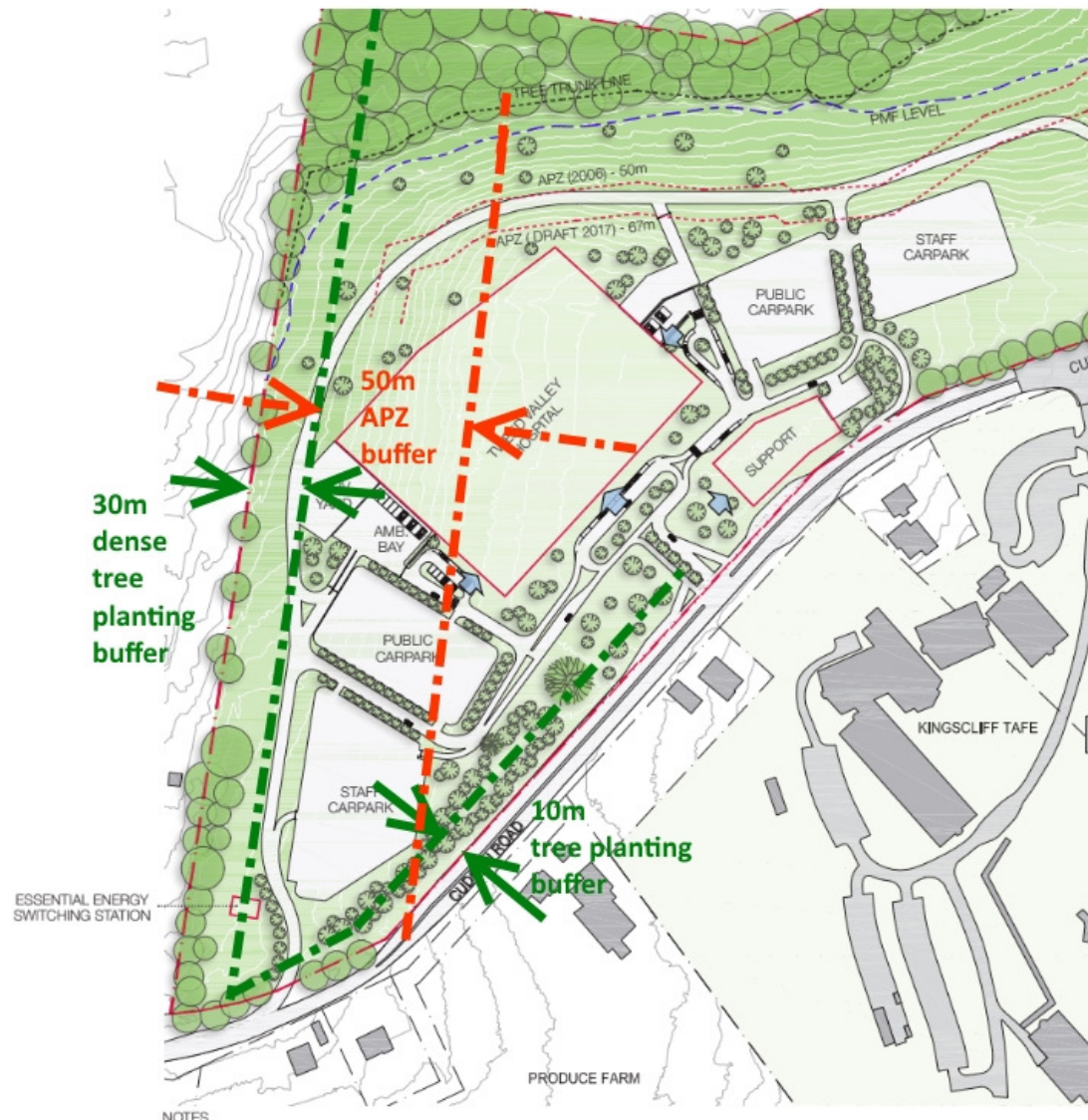
1. A vegetated buffer based on the following criteria is to be installed on the Project Site along the southern boundary:

- contain random plantings of a variety of tree and shrub species of differing growth habits, at spacings of 4–5 m for a minimum width of 30 m. foliage is from the base to the crown;
- include species which are fast growing and hardy; and
- have a mature tree height at least 3m;

2. Supplementary plantings are to be installed between the existing row of mixed trees and shrubs on the western and south-western boundary of the Project Site

based on the following criteria to form an improved vegetative screen:

- contain random plantings of a variety of tree and shrub species of differing growth habits, at spacings of 2–3 m for a minimum width of 10 m;



The Land Use Conflict Appendix declines to utilize the recommended buffers, proposing instead a narrow vegetation buffer to a height of 3m. (one storey), and requiring balconies and openings not to address the south and west site boundaries.

Given that the hospital is to be 9 storeys. it is difficult to comprehend how that buffer will prevent the impact of spray drift.

The imposition of the correct APZ buffers seriously conflicts with the current building footprint proposals.

MITCHELLS RAINFOREST SNAIL

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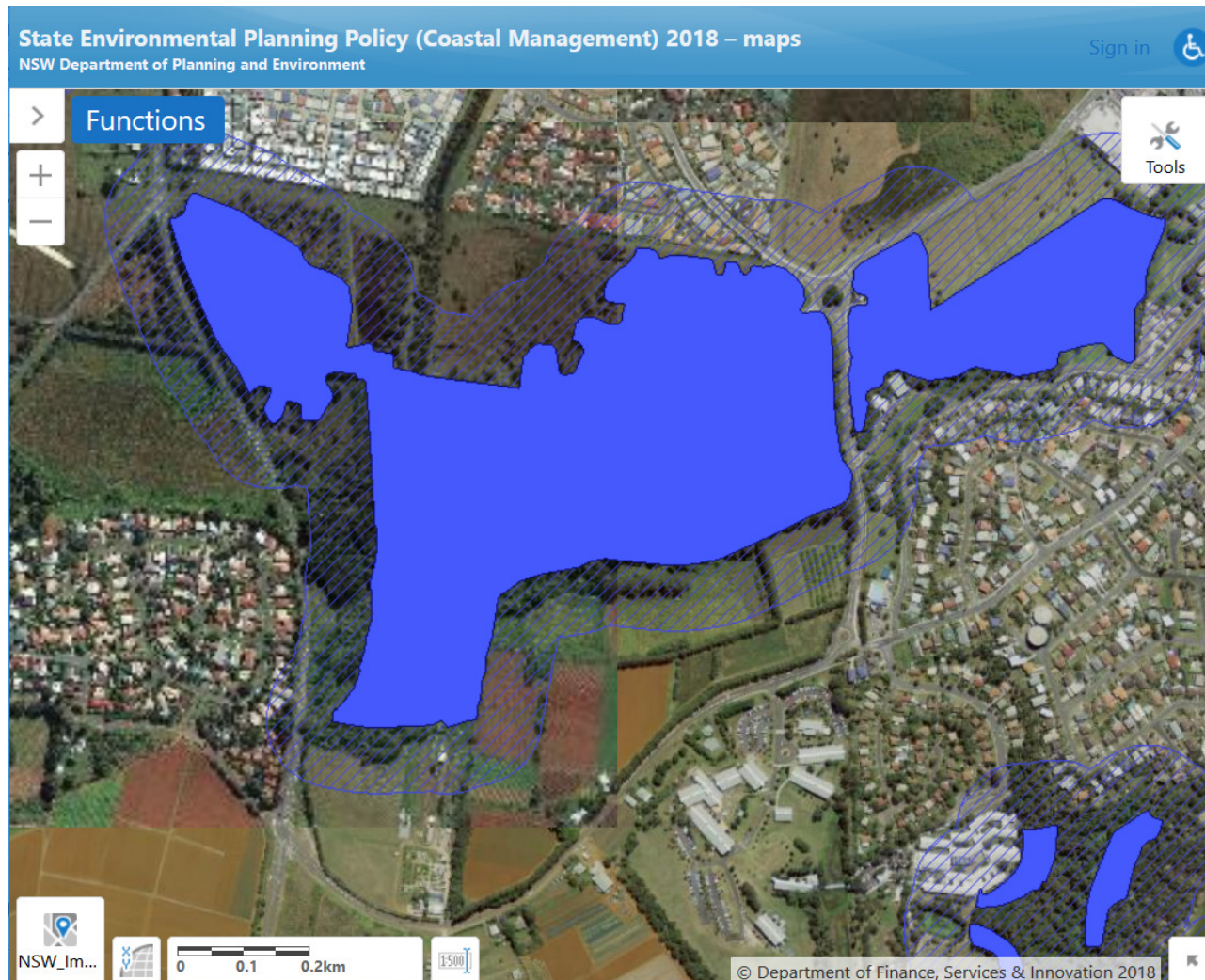
NSW National Parks and Wildlife Service, July 2001
ISBN 0 731 6298 5

Outcome

Increased knowledge of current distribution of habitat and populations of Mitchell's Rainforest Snail, monitoring of species' status and collection of additional information to assist in the conservation and management of the species. Note: Actions 1 to 5 may be undertaken in coordination as a single project.

12.2 Protection of extant populations and habitat

7. State and local government authorities and community groups with responsibilities relevant to the protection of Mitchell's Rainforest Snail and its habitat will be made aware and kept informed by the NPWS of the species' conservation requirements and the location of known populations and potential habitat. Relevant authorities are identified in Table 3. ([Objective 4](#) / [Performance criterion 4](#)).
8. NPWS will work in cooperation with Tweed, Byron and Ballina Shire Councils to produce maps showing areas of potential habitat for Mitchell's Rainforest Snail to assist with land management and environmental planning and assessment matters. Map derivation is to include occurrence of lowland floodplain rainforest and swamp sclerophyll forest remnants, coastal wetlands, basaltic-derived alluvium, and recent records and historical distribution of Mitchell's Rainforest Snail. ([Objectives 1, 2 and 4](#) / [Performance criteria 1, 2 and 4](#)).
9. It is unlikely that the above mapping will identify all areas of potential habitat, particularly small areas of habitat. Recommendation will be made by the NPWS that identified potential habitat (action 8 above), all lowland rainforest and swamp sclerophyll forest remnants and vegetated areas within 50 m of SEPP No. 14 Coastal Wetlands in Tweed, Byron and Ballina Shires be protected from clearing or development in the relevant Local Environmental Plans and Regional Vegetation Management Plans. ([Objectives 1 and 4](#) / [Performance criteria 1 and 4](#)).



11 Development on land in proximity to coastal wetlands or littoral rainforest

Note. The Coastal Wetlands and Littoral Rainforests Area Map identifies certain land that is inside the coastal wetlands and littoral rainforests area as “proximity area for coastal wetlands” or “proximity area for littoral rainforest” or both.

- (1) Development consent must not be granted to development on land identified as “proximity area for coastal wetlands” or “proximity area for littoral rainforest” on the Coastal Wetlands and Littoral Rainforests Area Map unless the consent authority is satisfied that the proposed development will not significantly impact on:
 - (a) the biophysical, hydrological or ecological integrity of the adjacent coastal wetland or littoral rainforest, or
 - (b) the quantity and quality of surface and ground water flows to and from the adjacent coastal wetland or littoral rainforest.

Note that almost the entire southern “proximity area” buffer is proposed to be excavated for WQM ponds, (see figure 4.2 below) with the edge also utilized for retaining walls required for site leveling. – part of a Part 5 Application exempt from the EIS considerations in the DA. Unless proper research has been conducted on its impact on the Mitchell RF Snail habitat, it would seem to be a clear breach of the Coastal SEPP and of the Commonwealth *Environment Protection and Biodiversity Conservation Act* 1999



LEGEND

- Project site
- Lot boundary
- Proximity area for coastal wetland
- Coastal wetland

The Stage 1 works for the site are shown in [Figure 4-2](#) below; Note the basins were constructed as part of Preliminary works:



Figure 4-2: General Earthworks Plan