

## **Re: Objection-Redevelopment of Greenwich Hospital (Concept Proposal)SSD17-8699**

Please register my objections and concerns regarding the above proposal.

This submission has been based both on the original on-line documents, and the Response to Submissions/Amended Concept documents.

### **Objection to loss of Hospital-zoned land which should be preserved, not used up for non-permitted Seniors Living**

Seniors Living component should be deleted entirely. This Hospital-zoned land is needed to remain used for Hospitals and the ordinarily incidental or ancillary development that is part of a Hospital. Population growth has already seen hospitals such as Royal North Shore Hospital struggling to provide for the current population. Nearby, significant population growth in the tens of thousands is occurring and more growth will occur, increasing demand for essential genuine health services. Although floor area of Seniors Living has been slightly reduced in an effort to fight off one of the grounds of public objection, the fact remains that a significant amount of the land area, floor space, and costs are for seniors living

### **Objection because Seniors Living is not a genuine health service and can go elsewhere on other land.**

Seniors Living does not qualify to be on this site. The proponent has continued in its Response to Submissions to disingenuously attempt to redefine Seniors Living as part of a hospital. It has done this with a clever and misleading marketing ploy, using 'continuum of care' and "serviced" Seniors Living to pretend it is different to a private home where an older person can remain, buying in services from a provider (eg, Hammond at Home or others) and nursing assistance with an aged care package. All 'continuum' means is you have the option to move from your big unit, where just like all units (in fact, all homes, too) you can buy in food, laundry, cleaning and nursing help services. Then, instead of moving into a nursing home/residential aged care of your choice, you get the option of "continuing" on the same site, into their aged care places. So, there's a kind of captive supply for the HammondCare's aged care beds. In reality, the model is no different to what was proposed in their initial concept, and is similar to HammonGrove Miranda, which is independent retirement living, marketed as shown in the below extract from the latter's document:

HammondGrove Miranda offers a truly unique independent living community and high-quality retirement living situated in the heart of Sydney's Sutherland Shire

#### **Built for independence and familiarity**

At HammondGrove Miranda you have access to a number of tailored support and care packages ranging from occasional in-home care to full nursing home level support. At HammondGrove Miranda each, villa and unit has been installed with a 24-hour emergency call system. Our vision is a community that supports and cares for its residents today and into the future.

In fact, the design of the seniors blocks is highly similar to HammondGrove, as in latter's brochure:



There is no evidence that the plan or design of the apartments to prove the claims that the apartments will be able to be used like a nursing home/hospital room. In fact, there is almost no evidence of the layout at all

– no doubt it has been done, just not shown. Apart from inclusion of easy installation of a nurse call button, it is expected that minimal disabled-design bathrooms will be included, because this does not get top income from what HammondCare see as a wealthy clientele, which they need to fund their other activities. by and has sprinkled its message of “integrated”, “ancillary”, “associated”, “continuum”, “hospital style campus” and the like, liberally throughout the documents. But, Seniors Living is not a hospital, nor incidental/ancillary to it, and does not need to be part of a Hospital, and can go elsewhere. Many of the Common Facilities listed under 4.3.5 in EIS are frequently found in hotels, resorts, and other large residential developments, including those which are stand-alone Seniors Living developments.

Flawed Circulation Principles: diagram on p9 of Landscape document for shows that there are NO wheelchair accessible pathways available between the Seniors Living blocks and the Hospital. The only way wheel-chair residents of seniors living can travel accessibly to the hospital is shown between 2 red dots, apparently lifts, which concept is not reflected in the architectural plans. If this is an air-bridge, it will severely detract from the claimed “improved sightlines” visibility of featured Pallister House.

**Objection to idea that non-strata model proposed by HammondCare equates to a non-commercial aim.**

HammondCare imply that because they currently propose not to strata the units, they are somehow not as rapacious or profit-driven as the usual commercial developer. There will be large sums of money paid to HammondCare for each unit, such as in buying a long-term lease, which sums we may assume HammondCare keep, interest free, so it’s a commercial transaction of similar magnitude to buying the unit, its just that there is a different way of accounting. When a resident exits the residency, HammonCare may return this non-interest bearing large sum of money, most likely with some deductions for upgrades, so they “buy back “ the unit and then put it back on the market, no doubt receiving another large interest-free cash injection based on the current market value of similar unit products in the market at large. As well, the units become a kind of cash cow for HammondCare, because the residents may choose to buy certain services from HammondCare, such as meals, laundry and cleaning. The services are not very different to those HammondCare runs in the Hammond at Home program – but delivery distances are much shorter to income to expense ratio will improve. In addition, under Seniors SEPP, the floor space occupied in housing such services is not counted in the FSR so that there is the ability to claim or appear to have a smaller total floor space ratio than in reality, because such preferential exclusions exist in the Seniors SEPP. The same spaces can also be used to provide such home services to off-site residences, giving an even better outcome for the operator.

**63% of HammondCare revenue comes from the combination of residential aged care and home care services (2016) – thus Seniors Living component, as dominant revenue generator, is dominant use on the site.**

While HammondCare say they are a hospital operator - and use this to justify that it is reasonable to have Independent Seniors Living units on the Greenwich site to fund the rebuilding of the hospital - a look at their Annual Reports and financial statements will show that the revenue of the health/hospital part of the business is a minor part of revenue. In 2016 Annual Report, it states only 25% of total revenue, whereas 63% of revenue comes from the combination of residential aged care and home care services. It is worth noting that this 63% of revenue comes from services which can be accommodated in the Seniors Living block component of site operations, so this can be said to be the dominant use on the site.

Extract, p5 of HammondCare’s 2016 Annual Report:

For some time now, HammondCare has had a 'diversified economy' and that is what we will continue to do. What do I mean by a diversified economy? In 2015/16, HammondCare had \$225 million in revenue. Of that around 38 per cent comes from residential aged care, a quarter is from the health and hospitals and another quarter is from home care services.

It is likely, and stated in other reports, that in future as HammondGrove Seniors Living units and villas come onto the market, the proportion of the revenue from these will make up an even greater percentage of total revenue, and hospital/health revenue will make a lesser proportion.

### **Objection because Seniors Living is not suited to this site.**

A Seniors Living development is particularly unsuited to this site, which is on bushfire-prone land, adjacent to environmentally-sensitive E2 land and surrounded by R2 residential. It has poor public transport service, obviously-difficult walking and cycling terrain, a highly-trafficked main road, remoteness from shops and most community facilities which mostly are a 1000m or more distance away, via steep gradients. Multi-unit dwelling is not sympathetic to the desired character and feel of the surrounding areas. Under the SEPP vertical villages clause, the floor area, height and bulk of the seniors living can get even greater if the proponent chooses, because of the circumstances under which such development cannot be refused.

The below image is taken from the initial EIS – the steepness of footpaths has not changed.



Figure 34: View from River Road to Entry Precinct



*A man appears running in Fig 34 View, above, but there are steps in the path, as in photo above right.*

### **The accessible circulation shown for seniors with 1 in 14 gradient is almost non-existent –**

It connects out the front of one Seniors block to bus-stops on opposite sides of River Rd, with these bus stops having no Sunday Service. The path shown beside the south-western access road would have to be cantilevered off the side of the access road, above much lower terrain with a very steep drop on west side, or else (or, as well) it would take up space where much needed tree and shrub planting could be

### **Objection to Visual impact of Excessive Bulk, Scale and Height, Excessive Density and inadequate setbacks to River Rd and edge of Gore Creek valley – this applies to both Seniors Living and the Hospital tower.**

The amended concept's reduction of the height at some edges to Seniors Living blocks and Hospital does not remove the massive blight on the landscape and visual amenity caused by this development. The solution is that the hospital should be redesigned to not be on the highest point of the site, and should be spread over more of the site which removal of the Seniors Living component would facilitate. The Hospital component can then be set back further from River Road, increasing amenity for the surrounding low-rise residential area, and reducing the need to remove so many trees along this edge.

The south-western 7 (and only partly 5) storey Independent Living Seniors apartment block remains in an unacceptable and prominent position very close to the edge of the steep valley side, with views over Gore Creek Reserve and Lane Cove River, to the harbour, as emphasised in the Site Analysis plan. If there are views FROM the building (which the proponent clearly wants to obtain), then there are views TO the building. Some edge or buffer trees are claimed to be planted to provide future screening of the huge development, but these trees will not be able to be grown where they are shown – they are shown growing from either the public Reserve, or from the much lower levels of the south-west corner of the subject site, and even now no trees growing on this area of the site are tall enough to obscure the building there.

The side setbacks to River Rd are still inadequate, and the character of the road streetscape and houses opposite will suffer a huge adverse impact. The high hospital building will be very dominant from River Road and surrounding areas, and would not need to be so high if the same FSR was constructed within a lower



height envelope, over a broader area. Building underground so close to the public River Rd verge, root systems of many trees will be damaged and the trees will ultimately die.

Proponent has a financial interest in maximising financial return through opening up views to the ILU's clientele, the result is a highly visible, very large building mass, which will be highly dominant and prominent for a large area of the outlook from numerous properties across the valley, and dominate the skyline of Northwood, Gore Creek Reserve and Oval, and that of parts of Greenwich.

#### **Location of the respite clinic is inappropriate**

The proposed location of the respite clinic on St Vincent's Road is inappropriate for accessibility/parking reasons and would be difficult for outpatients to find. It should be consolidated with other health services and better located for public transport;

#### **Objection on Grounds of Adverse Amenity Impact and Risks and costs to Public Assets:**

Sewer Main, Gore Creek Reserve, Bushwalks, Creek Walls, Playground and picnic area, Bob Campbell Oval Oval and Playground. With increasing population expansion, increasing pressure is placed on outdoor recreation areas which are shrinking in proportion to population. Increased Solid overshadowing by high building masses, leading to turf deterioration, and damage by flooding due to reduction in absorptive surface areas above, are risks which this development will exacerbate. The Oval was underwater in Nov 2018, rock walls and playground edging were washed away and the surface on the north side has remained soggy for most of 2019. Rock falls, falling trees are also risks which will be exacerbated by this intensive development, its siting, hard landscaping, loss of potential for deep soil areas due to underground parking.



***Following 29 Nov 2018 sheet flooding of Oval, Chain-wire fence shows debris-tide line about 300mm high, and fence and stone retaining wall are washed into creek by force of direction of water escape flow.***



***March 2019, storm-eroded rocks lie in creek bed; stone creek wall and playground edge still need repair.***



Sewer- There is an above-ground sewer main pipe line running just 10 m below, and generally parallel to, the south-west boundary of the subject site and crossing the cascades' path. Sewage from descending pipes serving presumably nearby houses and the Hospital site enter into the main. Risk of damage to this sewer main infrastructure due to uphill works, tree root invasion, 350% increase sewage inflow from rock falls, is real, and a costly, possibility. Even once damage to sewer and creek stone walls is repaired at community's cost, bushwalks were closed and areas remained for months, roped off by Sydney Water due to health hazards, and environmental damage to land and water lingers long, such as inappropriate nutrients and soil and rock mobilisation. Photos below show an incident of sewage overflow into Gore Creek on 6 June 2016; the resulting erosion and rock piles have still not been attended to.



*Sheet of sewage flowing into Gore Ck 6/6/2016*



*Sewage overflow into Gore Creek 6 Jun 2016*

### **Objection on Grounds of Environmental damage to Bushland, Soils, Habitat, Waterways, and Stormwater Management**

A natural watercourse runs through the site, diagonally beneath the current River Gum low rise building, fronting River Road , and continuing down the slope to Gore Creek, as shown on Fig 10, p9 of Heritage Impact Assessment Report, Appendix H. A “high cliff” is also shown on Fig 10. A 750 diam concrete drainage pipe, shown most clearly on Appendix I 2 Civil Engineering Plan CC140088E4-1/A as discharging its stormwater load over a 5-6 m high cliff below Stone Headwall on the subject site’s “high cliff” , presumably runs underground in the position where the Civil drawing shows it. Doubtless the stormwater runoff will increase, and even though some may be successfully detained in the OSD tank shown under the western part of the new through-road, the release of stormwater and surplus runoff from the road will have some adverse impacts to highly sensitive areas down the slope, which include leaning trees susceptible to any change in overland flow – whether less or more. Rocks can be pushed downwards, destabilising the landscape, and soil creep is identified as happening constantly, in the Prelim Geotechnical assessment.

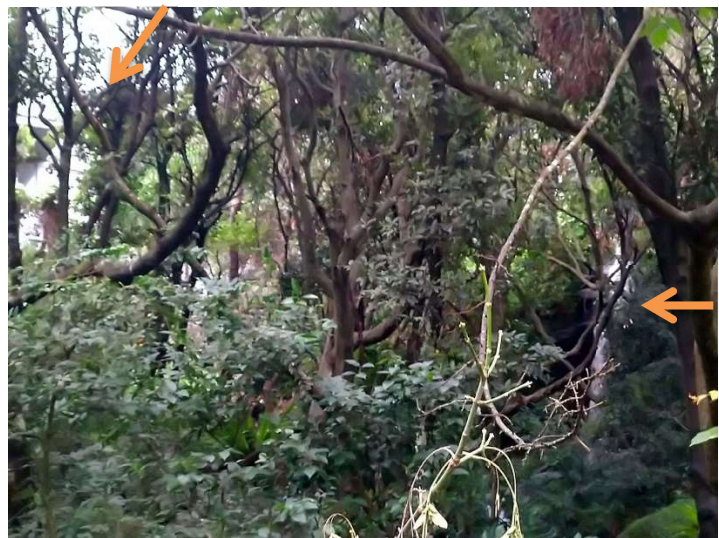


The latter report also mentions contamination of fill with asbestos, and construction work, and work in any fill area will mobilise these contaminants, construction sand and other fine particles, and debris, which will cause downhill damage. Damage will be both to the site itself, which contains quite a lot of dense shrubs and trees, and the E2 bushland and the habitat within both of these. The EIS and response is incorrect when it states that the development will have “negligible impacts” on Riparian lands or E2 bushland, and that the new buildings’ locations will “minimise” direct impact on natural vegetation and habitats. And, how can “protective measures” be implemented to retain the trees below the new road, when the reports have ignored the fact of their very existence, by not surveying them?

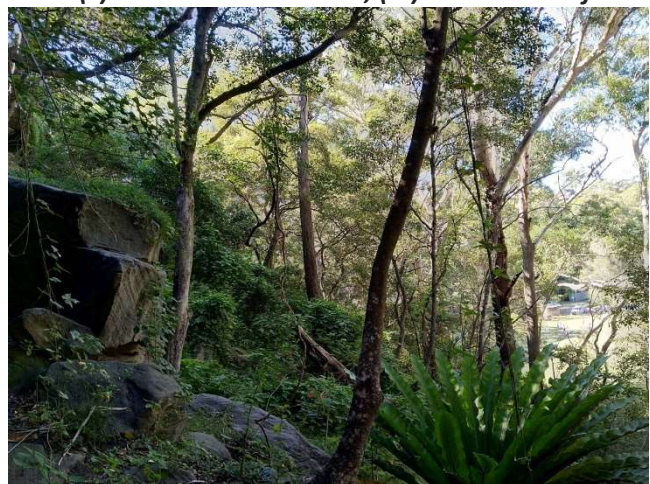
Below photos show the rock cascades below where the 750 diam pipe discharges, and the waterfall above formed by the discharge from the pipe.



*Cascades into creek, after rain, from site*



*Orange arrow(L) shows 119? River Rd; ( R) shows waterfall*



*(L) Part of ‘overhanging cliff’ on s-west of subject site, and ( R) the oval below, as seen from the Reserve*

### **Objection on Grounds of Bushfire Safety**

The Bushfire Assessment recommends bushfire protection construction for the Seniors Living Apartments and café but this has not been applied in the costing for the project. It appears there is being given or offered an “easy way out” of the moral obligation to protect life, by arguing for a 0 degree slope rather than

the actual effective steep downslope which exists, and for classing all bush vegetation on and off the site as rainforest, when it is not. The bush area actually comes closer than is shown by the “protected vegetation” shown in Image 07. It comes to the edge of the new road and the Rest Area, which both are at the top edge of a rise of quite a steep batter or retaining formation. This influences the APZ extent.

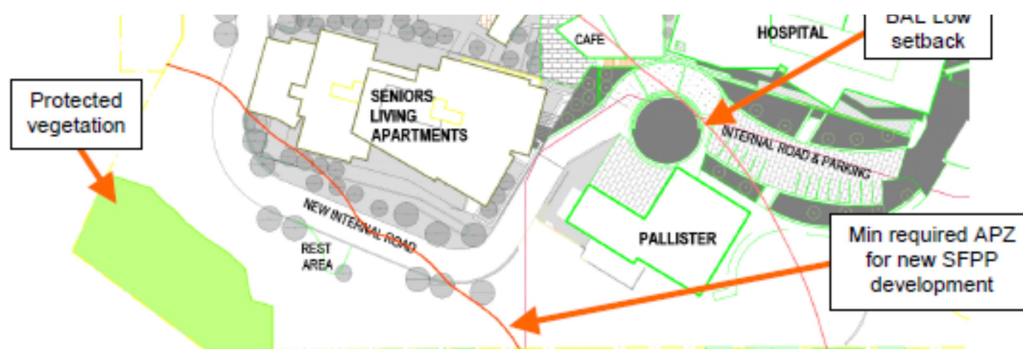


Image 07: Overlay showing protected vegetation (shaded green), minimum required APZ for new SFPP (red line) and BAL Low setback (pink line).

It is not really made clear what “protected vegetation “ means. Elsewhere this same vegetation is described as “dense vegetation” or “inaccessible “ vegetation, and still elsewhere, it is claimed in HammondCare literature page “Retaining more trees and protecting tree canopy” (given out at the Info Eve) , that the Riparian and Bushland Zone will be:-

- Open for public access.

How will the above public access be achieved in this “inaccessible” bushland ?

It is questioned whether the assessment of 0 degrees slope - is valid, given that vegetation canopy covers the tops of cliff formations which are claimed to limit spread of fire from the hazard toward the building element and lives to be protected.

Under proper compliance, the through road around the outside of the buildings is required to be a permanently open through road, not the “controlled access” which is marked on some documents, such as the Heritage Assessment when considering impact on Lot 4 Curtilage.

The claims in the Bushfire consultant’s letter 13 Sep 2019, that there is “no requirement for almost the entire site to be maintained as an IPA” rely heavily on this rather vaguely mapped and vaguely defined area of vegetation.

It is not clear in the diagram in bushfire report, where exactly is the “protected” vegetation, and on the other hand, what is it that is intended in the very general Landscape package, for the vegetation which contains trees and shrubs below the internal road? Landscape proposes “new indigenous canopy trees” here, but they are to be in accordance with NSW fire service guidelines – what does that translate into?

It is important to understand this vegetation correctly by accurate recording, especially given the lack of an accurate survey of this area of the site, and the lack of any genuine effort to prepare a proper tree assessment of what vegetation is on this steeper portion of the site.

### **Objection on Grounds of Traffic and Parking adverse Impacts**

The proposal will cause interruption to traffic flows on an already very busy state road. To say that it is all being carefully managed in line with RMS advice is to say that there will be adverse traffic impacts.

A left-in left out central drive, with no through way, will cause increased rat running. In Northwood this can mean vehicles traverse a highly difficult, steep acute angled corner between Arabella St and Northwood Rd. Increased operation of signals at the through road will interrupt traffic flows more often, causing greater delays due to the Doppler-like effect on vehicle speeds. More people in the ILU are expected to need cars , further adding to traffic congestion on River Rd and surrounding street networks. Estimated vehicle movements in/out at signals does not seem high enough.



Parking provided may not be adequate, should expected number of spaces not eventuate during detail design of carparks, or prove inadequate for demand. In addition, manoeuvring of service and delivery do not appear to have adequate space, and may impact parking and through traffic.

Here is an example of the current problems, from a resident of a street running off Gore Street:

*Letter comment to DA56/2018 re Expansion of Greenwich Infants school, opposite hospital*  
*"I am concerned about the loss of the onsite parking. . ....the parking in this area is extremely tight and with the loss of onsite parking, teaching and admin staff will need to park off street. The question is where? already commuters park out any spare spaces .*  
*in Carlotta Street ..... parking there is terrible with commuters starting to arrive from 8am."*

Safety of Infants School children who cross in front of the hospital are also impacted by traffic numbers increasing.

### **Contamination in boreholes and UST should be examined further before proceeding**

The JK Detailed site Investigation 9 Sept 2019 showed that there are higher than acceptable levels of certain contaminants in some of the bore holes and at the UST (underground storage tank) locations, which are on the lower western and southern sides of the site. Such contaminants can be further investigated in some of these places as they are not beneath buildings.. The borehole eg no. 23 and UST is in such positions that they can impact adjacent homes and bushland due to overland flow direction. Investigation should be done now.

### **Consultation**

Consultation with general public during preparation of concept revision was extremely limited, with many people remaining unaware of the amended proposal . Generally, inadequate notice about the Information session in Aug 2019 was given. . It is doubtful that the session did more than serve a minimal consultation purpose, due to its format.

### **Loss of Trees- an ongoing situation, to be made worse by excavation and building of Seniors Living blocks**

It is common on the escarpments of Gore Creek for tree loss or death to occur. This means that the claimed screening of the visual bulk of the new built forms by tree canopy is not reliable. Great openings in canopy can occur at any time, particularly after 2019 high winds which is when these two examples below happened.



*Above +below- 2 trees lost in 2019, east side of Gore Creek*





*Above - Photo of a tall tree which fell over across the Gore Creek playground in Feb 2019, due to gradual rotation of the base of its leaning trunk - as viewed from the top, and viewed from the playground.*

**In summary, the concept is not suitable, the Response to submissions does not adequately address concerns, and the proposal as amended should be rejected.**

Yours sincerely,  
A Northwood Resident.