

16 August 2023

231595 TAA

Colliers
30 Grosvenor Place, 225 George Street
Sydney NSW 2000

Attention: Bonnie Butcher

WYONG HOSPITAL REDEVELOPMENT - STAGE 3

Traffic Impact Statement

Dear Bonnie,

This Traffic Impact Statement has been prepared to accompany a Review of Environmental Factors (REF) to assess the traffic and transport impacts of the proposed works for Wyong Hospital Redevelopment Stage 3.

Proposed Works

The Wyong Hospital Redevelopment Stage 3 Refurbishment works comprises adaptive reuse of the existing decanted spaces within both blocks B and C.

Block B will be refurbished to accommodate the following departments:

- Nunyara Aboriginal Health Unit
- Wyong Women's Centre Clinics
- Medical Staff Workspace
- New South Wales Health Pathology

Block C will be refurbished to accommodate the following departments:

- Expanded Cancer Day Unit
- Carer Support Unit

The traffic impacts generated by the staff and patient numbers associated with the above works have been previously assessed as part of the traffic assessment prepared in 2019 for the State Significant Development Application (SSDA) for the new Clinical Services Building (CSB) at Wyong Hospital, and therefore no further impacts are generated or mitigation measures required as part of these REF works. This assessment is detailed in the following section.

Traffic Assessment for SSDA Works

The approved SSDA (SSD-9536) traffic report references a previous Business Case and parking study prepared by Arup that was undertaken for the redevelopment project. In summary, this study found that the hospital will have a future operational parking demand of approximately 1,262 parking spaces, based on a detailed assessment of staff and patient forecasts for 2026/27 (which includes the staff and patients associated with Stage 3). The detailed parking demand study is attached to the Appendix.

Once the hospital is fully operational, the total formal parking provision across the campus will be 1,220 spaces. As shown in Table 1, this will result in a shortfall of 42 spaces for the future operation in 2026/27.

Table 1: Summary of campus car parking

	Previous Conditions	Existing Conditions	CSB Completion (2020/21)	Fully Operational (2026/27)
Demand	964	946	1,074	1,262
Formal Capacity	838	1,110	1,220	1,220
Surplus / Deficit	- 126	+ 146	+ 146	- 42

The SSDA traffic assessment expects the remaining future (2026/27) campus shortfall is expected to be met through a combination of informal parking, and changes in travel habits over time, as outlined in the following extract from the traffic report:

“It is noted that informal parking is an existing behaviour observed on-site including on grass/informal areas to the northern and eastern perimeters of the site (as discussed in Section 3.7) and is not an introduced impact from the proposed development. This informal demand within the site was shown to be approximately 150 informal spaces as demonstrated in the Arup parking studies.

Furthermore, this full demand will occur over time as the building becomes fully operational (noting an excess of over 140 spaces upon project completion), with opportunities in the interim to reduce parking demands through methods such as sustainable travel initiatives (see Section 5). The provision for boom gates and paid parking has also been shown to be an influencing factor in the reduction of parking demand at similar sites. It is recommended that the CCLHD liaise with Council to monitor on-street parking under future use.

It is noted that the Arup parking study calculates a parking contribution of 829 staff spaces from the overall demand of 1,262 spaces, with a 97% vehicle mode split for staff. Therefore, for every 1% mode shift that can be achieved, staff parking demands shall be reduced by 8-9 spaces. Closure of the anticipated parking deficit would require a 5% change in staff travel behaviour, which is considered realistic and achievable within the 10-year operational timeframe (including changes to travel mode and car-pooling activity).

In summary, the proposed parking capacity is considered acceptable for the site-specific demands and long-term operations of the Hospital.”

Traffic Impact of Stage 3 Works

As outlined in Table 1, on completion of the CSB building (2020/21), which is the current condition at time of writing, the hospital campus will have a formal parking capacity of 1,220 spaces.

Health Infrastructure has confirmed¹ that the forecasts presented in the Business Case for staff and patient numbers for 2026/27 (resulting in a parking demand of 1,262) includes the staff and patients associated with the proposed Stage 3 refurbishment works. Therefore, there are no additional impacts to parking as a result of the Stage 3 works beyond those outlined in the previous SSDA traffic assessment.

Therefore, consistent with the approval of the previous SSDA (SSD-9536) traffic assessment, the campus parking capacity is considered acceptable for the future operations, including the Stage 3 refurbishment works, resulting in only a minor shortfall which would be accommodated through staff travel behaviour change over time.

Construction Traffic

Construction trucks will have good access to the site via the signalised intersection to the southeast, which provides direct access to the Pacific Highway as shown in Figure 1.

¹ Email from Colliers to TTW dated Friday 21st July 2023

The internal road network on the hospital site provides direct access to Block B and C, requiring minimal interaction with other drivers or pedestrians accessing the hospital. Detailed access arrangements will be confirmed when a contractor is appointed.



Figure 1: Construction vehicle access

It is expected that the refurbishment works will not generate large volumes of construction vehicles, and that the internal roads and signalised intersection can suitably accommodate these volumes.

Construction traffic will have no impact to ambulance movements, as ambulance access to the hospital is via Louisiana Road on the western side of the campus, and construction vehicles will be accessing the campus via the Pacific Highway to the east.

Construction worker parking will be accommodated within the car park in the northwest corner of the site (previously part of the Richard Crookes Constructions compound). We have been advised that this car park contains sufficient provision to accommodate the full workforce numbers with no overflow parking on surrounding streets.

Should you require anything further please contact the undersigned.

Yours faithfully,
TTW (NSW) PTY LTD

A handwritten signature in black ink, appearing to read 'E. Cowdery'.

EMMA COWDERY
Traffic Engineer

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Appendix

Table 2: Car Parking Demand Study

Source: Wyong Hospital – Car Parking Supply and Demand (Arup, January 2018)

	Year 2017/18	Project Completion Year 2020/21	Fully Operational Year 2026/27
1. Daily Staff Attendance (75% of FTEs)			
Nurses	599	650	801
Clerical/Misc	340	362	440
Ancillary Medicine/Community	28	30	38
Hotel/Allied	122	132	163
Medical	144	157	194
Medical - Sessional	142	169	222
University	131	143	152
TOTAL Daily Attendance	1506	1643	2010
2. Current Staff Profile			
All day / non shift	40%	40%	40%
Morning shift	24%	24%	24%
Evening shift	24%	24%	24%
Night shift	12%	12%	12%
3. Staff Vehicle Trip Characteristics			
Mode Split			
700-1100 (Day)	97%	97%	97%
1130-630 (Night)	100%	97%	100%
Car Occupancy			
700-1100 (Day)	1.12	1.12	1.12
1130-630 (Night)	1.03	1.03	1.03
4. Visitor/Patient Attendance			
Patients	people/p.a.	people/p.a.	people/p.a.
Outpatients	127,446	131,698	140,633
Inpatients	18,111	23,940	21,767
Emergency	60,789	75,754	98,651
Renal Dialysis	4,816	4,816	4,816
Beds	353	432	480
Assumed occupancy rate	91%	91%	91%
5. Visitor/Patient Vehicle Trip Characteristics*			
Mode Split (%)	95%	95%	95%
Vehicle Occupancy – Patients	1.0	1.0	1.0
Vehicle Occupancy - Visitors	1.5	1.5	1.5
Visitor Car Bed Trips / Day	2.5	2.5	2.5
6. Peak Parking Demand			
Staff Parking	597	666	829
Patient & Visitor Parking	238	263	288
University	75	75	75
Pool Vehicles	54	70	70
Total Parking Demand	964	1074	1262