

HEALTH INFRASTRUCTURE

Review of Environmental Factors

Muswellbrook Hospital Redevelopment Stage 3 – Community Health

Prepared by _planning Pty Ltd

March 2024

Version 2 – Final



HI Planning Document Control

Version	Date	Author	Description	Reviewed by	Approved by
12	July 2022	HI	REF Template Revision As updated in part by _planning in March 2024 to address contemporary legislation and HI's revised requirements	RM	RM

Declaration

This Review of Environmental Factors (REF) has been prepared for NSW Health Infrastructure (HI) and assesses the potential environmental impacts which could arise from the proposed alterations and additions, fitout, and operation of the lower ground floor of the Stage 2 Building for Community Health Services at Muswellbrook Hospital at Brentwood Street, Muswellbrook.

This REF has been prepared in accordance with the relevant provisions of *the Environmental Planning and Assessment Act 1979* (EP&A Act), *the Environmental Planning and Assessment Regulation 2021* (EP&A Regulation) and *State Environmental Planning Policy (Transport and Infrastructure) 2021* (TISEPP).

This REF provides a true and fair review of the activity in relation to its likely impact on the environment. It addresses to the fullest extent possible, all the factors listed in section 171(2) of the EP&A Regulation and the *Commonwealth Environmental Protection and Biodiversity Conservation Act 1999* (EPBC ACT).

Based upon the information presented in this REF, it is concluded that, subject to adopting the recommended mitigation measures, it is unlikely there would be any significant environmental impacts associated with the activity. Consequently, an *Environmental Impact Statement* (EIS) is not required.

Declaration	
Author:	Oliver Klein BA MURP MPIA Reg. Planner and REAP (No.10696)
Position:	Director
Company:	_planning Pty Ltd (ABN 25 620 516 583)
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Document Management, Tracking and Revision History

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Appendices

Appendix	Description	Author	Rev/Ref/Date
A	Survey	NSW HNELHD / ADW Johnson	190809-DET-001-A Sheets 1-10 6/4/2022
B	Planning Certificates	Muswellbrook Shire Council	Certificates 23751 and 23752 of 27/2/2024
C	Geotechnical Investigation	JK Geotechnics	34804LFrpt2 dated 25 August 2022
D	Mine Subsidence Assessment	JK Geotechnics	34804LFrpt3 dated 13 October 2022
E	Architectural Design Statement	dwp	Issue E dated 16 February 2024
F	Architectural Drawings	dwp	Site Plan AR-MW-A1042 Rev E
			External Works Overall Key Plan AR-MW-A1100 Rev H
			General Arrangement Plan Lower Ground AR-MW-A1200 Rev X
			Finishes Plan Lower Ground AR-MW-A1600 Rev D
			Reflected Ceiling Plan Lower Ground AR-MW-A1800 Rev E
			Building Elevations AR-MW-A2000 Rev J
			Site Sections AR-MW-A3012 Rev E

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			Site Sections AR-MW-A3013 Rev F
			Exterior Finishes AR-MW-A8200 Rev B
G	ESD Report	Stantec	Issue 5 dated 21 February 2024
	ESD Addendum Letter		Dated 22 February 2024
H	Civil Engineering Plans and Statement	TTW	Civil and Stormwater REF Report - Rev 4 dated February 2024
I	Services Statement and Drawings - Electricity	JHA	Rev B and undated
J	Services Statement – Hydraulic	Warren Smith & Partners	Rev 1 dated 9 February 2024
K	Preliminary Construction Management Plan	HI	24 January 2024
L	Bushfire Advice	Peterson Bushfire	22 March 2022
M	Notification letters	HI	28 November 2023
N	Response to notification	Subsidence Advisory NSW	15 December 2023
O	Review of Environmental Factors Engagement Report	HI	V.01 dated 24 January 2024
P	Traffic Impact Assessment and Construction Traffic Management Plan	Stantec	Rev A dated 22 February 2024
Q	Noise and Vibration Assessment	Acoustic Logic	Construction Noise – Rev 1 dated 22 February 2024 Operational Noise – Rev 0 dated 4 November 2022
R	AHIMS Search Result	NSW Government	12 February 2024
S	Flora and Fauna Assessment	Narla	Final v1.0 dated 24 October 2022
T	Waste Management Plan – Hunter Valley Sector	NSW HNELHD	25 January 2022
U	BCA and DDA Compliance Statement	BM+G	20 February 2024
V	Recommended Mitigation Measures	_planning / HI	12 March 2024

Abbreviations

Abbreviation	Description
AEC	Area of Environmental Concern
AHD	Australian Height Datum
AHIP	Aboriginal Heritage Impact Permit
AHIMs	Aboriginal Heritage Information Management System BC Regulation
AMG	Australian Map Grid
BC Act 2016	Biodiversity Conservation Act 2016
BC Act 2017	Biodiversity Conservation Act 2017
BC Regulation	Biodiversity Conservation Regulation 2017
BAM	Biodiversity Assessment Method
CA	Certifying Authority
CE	Chief Executive
CM Act	Coastal Management Act 2016
CMP	Construction Management Plan
CWC	Connecting with Country
CRA	Conservation Risk Assessment
DPC	Department of Premier and Cabinet
DPE	Department of Planning and Environment
EIS	Environmental Impact Statement
EMP	Environmental Management Plan
EES	Environment, Energy and Science
EPA	Environment Protection Authority
EP&A Act	Environmental Planning and Assessment Act 1979
EP&A Regulation	Environmental Planning and Assessment Regulation 2021
EPBC Act (Cwth)	Environment Protection and Biodiversity Conservation Act 1999
EPI	Environmental Planning Instrument
EPL	Environment Protection License
FM Act	Fisheries Management Act 1994
Ha	Hectares
HHIMS	Historic Heritage Information Management System
HI	Health Infrastructure
LEP	Local Environmental Plan
LGA	Local Government Area
MPS	Multipurpose Service
MNES	Matters of National Environmental Significance

Abbreviation	Description
NPW Act	National Parks and Wildlife Act 1974
NPW Regulation	National Parks and Wildlife Regulation 2009
NPWS	National Parks and Wildlife Service (part of EES)
NT Act (Cth)	Commonwealth Native Title Act 1993
OEH	(Former) Office of Environment and Heritage
PCMP	Preliminary Construction Management Plan
Planning Systems SEPP	State Environmental Planning Policy (Planning Systems) 2021
POEO Act	Protection of the Environment Operations Act 1997
Proponent	NSW Health Infrastructure
REF	Review of Environmental Factors
RF Act	Rural Fires Act 1997
RFS	Rural Fire Service
Resilience and Hazards SEPP	State Environmental Planning Policy (Resilience and Hazards) 2021
SEPP	State Environmental Planning Policy
SIS	Species Impact Statement
TISEPP	State Environmental Planning Policy (Transport and Infrastructure) 2021
WM Act	Water Management Act 2000

Executive Summary

The Proposal

The proposed works involve alterations and additions, fitout, and operation of the lower ground floor of the Stage 2 Building at Muswellbrook Hospital for the relocation of Community Health Services, along with minor associated and ancillary civil engineering works.

A detailed description of the scope of works is set out in Section 3 of this REF.

Need for the Proposal

The driver for the works generally arises from the hospital's Clinical Services Plan (CSP) and the ongoing program of works to upgrade and modernise facilities at the hospital. The subject works support the already approved Stage 3 Redevelopment Early Works which entailed the Operating Suite and CSSD upgrades to meet current and future demand at the Muswellbrook Hospital.

As detailed in the CSP, the need is driven by the requirement for:

- A sustainable health service;
- Equitable access to health services;
- Addressing poorer health outcomes in rural and remote areas; and
- The need for innovation and incorporation of technology to facilitate the delivery of telehealth.

The existing lower ground level shell space has resulted from the recently completed Stage 2 Redevelopment of the hospital. The Stage 2 Redevelopment was approved by HI under a REF on 1 February 2016 (Approval No. 001/2016). The Stage 2 Building has been operational for a number of years.

Community Health Services are presently located within the Weidmann Wing building and the clinical spaces will transfer to the Stage 2 Building. Administration spaces will remain within the Weidmann Wing.

Proposal Objectives

The proposed works support the objectives of continued enhancement of delivery of health services at Muswellbrook Hospital to respond to immediate capacity needs to improve acute and clinical services in line with the CSP.

Consideration has been given to key aspirations and objectives in the development of the proposal and options explored, namely:

- Enhanced functional relationships through contemporary health design;
- Replacement of ageing assets with contemporary infrastructure;
- Continuation of the hospital's role as a district level health facility providing services to meet the needs of the residents of the Muswellbrook and Upper Hunter Region;
- Provision of contemporary models of care and facilitation of efficient and sustainable service delivery in alignment with Government and District-wide policies and guidelines;
- Provision of capacity to meet projected demand and the ability to respond to changes in service demand and new models of care whilst recognising the challenges of a regional hospital; and
- Enhanced environmental sustainability of capital assets, in line with government policy.

Options Considered

It is clear that to do nothing is not a suitable course of action. In planning for the package of works under this REF alternative options were explored in terms of location and configuration of the works in consideration of improved locational, operational, financial or social advantages.

The preferred option as a result of the design process is embodied in the proposed plans and layout. The design has evolved based on the functional needs and consultation with relevant hospital user groups, stakeholders, consultants, Hunter New England Local Health District (HNELHD) and technical review.

Site Details

Muswellbrook Hospital is located at Brentwood Street, Muswellbrook NSW 2333. The whole of the hospital is sited within a number of lots, however the Stage 2 Building and the location of the subject works predominantly spans Lots 28 and 31 of DP 752484. The subject development site is located centrally within the campus – see **Figure 1** further over.

The site of the works presently accommodates undeveloped shell space in the lower ground floor of the Stage 2 Building.

Planning Approval Pathway

Section 4.1 of the EP&A Act states that if an EPI provides that development may be carried out without the need for development consent, a person may carry the development out, in accordance with the EPI, on land to which the provision applies. However, the environmental assessment of the development is required under Part 5 of the Act.

State Environmental Planning Policy (Transport and Infrastructure) 2021 (TISEPP) aims to facilitate the effective delivery of infrastructure across the State. Chapter 2 Division 10 of TISEPP outlines the approval requirements for health service facilities. A “hospital” is defined as a health service facility under this division.

The site is zoned ‘SP2 Infrastructure - Health Service Facilities’ under *Muswellbrook Local Environmental Plan* (LEP) 2009. The SP2 zone is a prescribed zone under the TISEPP.

The proposal involves the alteration of, or addition to, a building that is a health services facility which is classified as development without consent as the proposed activity is consistent with section 2.61(1)(a) of TISEPP.

However, the project becomes an ‘activity’ for the purposes of Part 5 of the EPA Act and is subject to an environmental assessment (REF). The proposal is considered an ‘activity’ in accordance with section 5.1 of the EP&A Act because it involves the carrying out of a work, the demolition of a building or a work, and the use of land, that is not Exempt Development or prohibited under an environmental planning instrument. Accordingly, the works can be undertaken by HI as a public authority as development without consent.

Statutory Consultation

Under section 2.62 notification is triggered to Council and occupiers of adjoining land for a period of 21 days.

As this project once entailed a more significant scope of works (under the Stage 3 Redevelopment) no new notification was considered to be warranted in late 2023 as part of this current REF. Note however, that notification letters were originally issued to these parties with respect to the wider scope on 7 October 2022 (Council) and 11 October 2022 (occupiers of adjoining land). The notification period concluded on 28 October 2022 and 1 November 2022, respectively. Following that notification, no public submissions were received and Council also did not provide a submission.

Further, notification of a refined wider scope was made by letter to Council and the same extent of neighbours around the hospital’s perimeter on 3 August 2023. Again, following this second notification, no public submissions were received and Council also did not provide a submission.

Formal notification is not required under sections 2.10 to 2.14 of the TISEPP. Consultation with Subsidence Advisory NSW was however required under section 2.15(2)(f) of the SEPP as the whole of the Muswellbrook Hospital campus sits within a Mine Subsidence District. No distinction is made with respect to the notification trigger to the scope thresholds of works and any/all works require notification.

Subsidence Advisory NSW was notified of the currently proposed Community Health works by emailed letter dated 28 November 2023 and responded on 15 December 2023.

Subsidence Advisory NSW advised that *... as the proposal is for internal alterations and no structural changes are proposed to the existing building, no mine subsidence design requirements are considered necessary.*

No other notification to agencies was triggered.

Environmental Impacts

The environmental impacts of the works are limited given the internalised nature of the works. The most significant impacts identified to arise relate to construction noise and vibration, and other general construction impacts.

Construction noise is likely to impact a range of internal hospital uses and other external neighbouring land uses including residential and child care uses. Management and mitigation will be applied to limit likely impacts. Construction vibration will be localised to within the subject hospital buildings and management and mitigation will again need to be applied to reduce adverse impacts upon sensitive machinery, equipment, activities and patients within the hospital.

Impacts upon vegetation, biodiversity, heritage, Aboriginal cultural heritage, natural systems including stormwater, and traffic and parking have generally been identified as negligible, low, or neutral. No tree removal arises from the works.

Justification and Conclusion

The proposed fitout and operation of the lower ground floor of the Stage 2 Building for the relocation of Community Health Services at Muswellbrook Hospital at Brentwood Street, Muswellbrook is subject to assessment under Part 5 of the EPA Act. The REF has examined and taken into account to the fullest extent possible all matters affecting, or likely to affect, the environment by reason of the proposed activity.

As discussed in detail in this report, the proposed activity will not result in any significant or long-term impact. The potential impacts identified can be reasonably mitigated and where necessary managed through the adoption of suitable site practices and adherence to accepted industry standards.

As outlined in this REF, the proposed activity can be justified on the following grounds:

- It responds to an existing need within the community;
- It generally complies with, or is consistent with all relevant legislation, plans and policies;
- It has minimal environmental impacts; and
- Adequate mitigation measures have been proposed to address these impacts.

The environmental impacts of the proposal are not likely to be significant and therefore it is not necessary for an EIS to be prepared and approval to be sought for the proposal from the Minister for Planning under Part 5.1 of the EP&A Act. Further, the activity will not significantly affect threatened species, populations, ecological communities or their habitats, and therefore a Species Impact Statement (SIS) and/or Biodiversity Development Assessment Report (BDAR) is not required.

On this basis, it is recommended that HI approve the proposed activity in accordance with Part 5 of the EPA Act and subject to the adoption and implementation of matters outlined in this report.

1. Introduction

NSW Health Infrastructure (HI) proposes this REF in relation to the carrying out of the alterations and additions, fitout, and operation of the lower ground floor of the Stage 2 Building for Community Health Services (the proposal) at Muswellbrook Hospital at Brentwood Street, Muswellbrook (the site) as part of their delivery of infrastructure solutions and services to support the healthcare needs of the NSW communities.

This Review of Environmental Factors (REF) has been prepared by _planning Pty Ltd on behalf of HI to determine the environmental impacts of the proposed activity at site. For the purposes of these works, HI is the proponent and the determining authority under Part 5 of the *Environmental Planning and Assessment Act 1979* (EP&A Act).

The purpose of this REF is to describe the proposal, to document the likely impacts of the proposal on the environment, and to detail protective measures to be implemented to mitigate impacts.

The description of the proposed works and associated environmental impacts have been undertaken in the context of section 171(2) of the *Environmental Planning and Assessment Regulation 2021* (EP&A Regulation) and the Australian Government's *Environment Protection and Biodiversity Conservation Act 1999* (EPBC Act).

The assessment contained within the REF has been prepared having regard to:

- whether the proposed activity is likely to have a significant impact on the environment and therefore the necessity for an EIS to be prepared and approval to be sought from the Minister for Planning and Homes under Part 5.1 of the EP&A Act;
- whether the proposed activity is likely to significantly affect threatened species, populations, ecological communities or their habitats, and therefore require a Species Impact Statement (SIS) and/or Biodiversity Development Assessment Report (BDAR); and
- the potential for the proposal to significantly impact *Matters of National Environmental Significance* (MNES) on Commonwealth land and the need to make a referral to the Australian Government Department of Environment and Energy for a decision by the Commonwealth Minister for the Environment on whether assessment and approval is required under the EPBC Act.

The REF helps to fulfil the requirements of section 5.5 of the EP&A Act, which requires that HI examine, and take into account to the fullest extent possible, all matters affecting, or likely to affect, the environment by reason of the proposed activity.

1.1 Proposal need and Alternatives

Need for the Proposal

The driver for the works generally arises from the hospital's Clinical Services Plan (CSP) and the ongoing program of works to upgrade and modernise facilities at the hospital. The subject works support the already approved Stage 3 Redevelopment Early Works which entailed the Operating Suite and CSSD upgrades to meet current and future demand at the Muswellbrook Hospital.

As detailed in the CSP, the need is driven by the requirement for:

- A sustainable health service;
- Equitable access to health services;
- Addressing poorer health outcomes in rural and remote areas; and
- The need for innovation and incorporation of technology to facilitate the delivery of telehealth.

The existing lower ground level shell space has resulted from the recently completed Stage 2 Redevelopment of the hospital. The Stage 2 Redevelopment was approved by HI under a REF on 1 February 2016 (Approval No. 001/2016). The Stage 2 Building has been operational for a number of years.

The Community Health Services clinical spaces presently located within the Weidmann Wing building will transfer to the Stage 2 Building. Administration spaces will remain within the Weidmann Wing.

Proposal Objectives

The proposed works support the objectives of continued enhancement of delivery of health services at Muswellbrook Hospital to respond to immediate capacity needs to improve acute and clinical services in line with the CSP.

Consideration has been given to key aspirations and objectives in the development of the proposal and options explored, namely:

- Enhanced functional relationships through contemporary health design;
- Replacement of ageing assets with contemporary infrastructure;
- Continuation of the hospital's role as a district level health facility providing services to meet the needs of the residents of the Muswellbrook and Upper Hunter Region;
- Provision of contemporary models of care and facilitation of efficient and sustainable service delivery in alignment with Government and District-wide policies and guidelines;
- Provision of capacity to meet projected demand and the ability to respond to changes in service demand and new models of care whilst recognising the challenges of a regional hospital; and
- Enhanced environmental sustainability of capital assets, in line with government policy.

Options Considered

It is clear that to do-nothing is not a suitable course of action. In planning for the package of works under this REF alternative options were explored in terms of location and configuration of the works in consideration of improved locational, operational, financial or social advantages.

The preferred option as a result of the design process is embodied in the proposed plans and layout. The design has evolved based on the functional needs and consultation with relevant hospital user groups, stakeholders, consultants, Hunter New England Local Health District (HNELHD) and technical review.

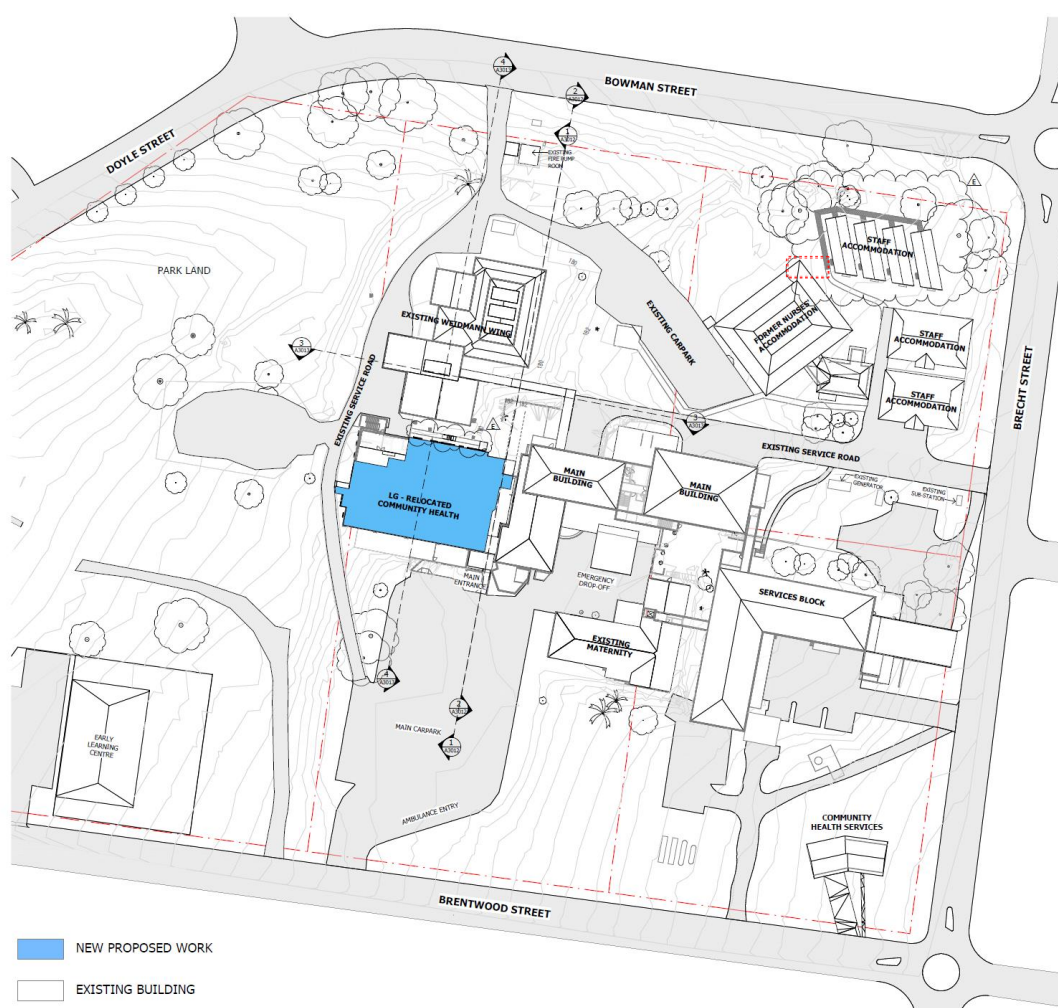


Figure 1 – Location of Stage 3 Community Health works (dwp)

2. Site Analysis and Description

2.1 The Site and Locality

Muswellbrook is located in the upper Hunter Valley some 250km north of Sydney and about 130km north-west of Newcastle. The relevant local government area (LGA) is Muswellbrook Shire Council.

The hospital forms part of the HNELHD which provides a range of public health services to the Hunter, New England and Lower Mid North Coast regions. Muswellbrook is one of some 95 health services facilities within the HNELHD.

The hospital is located at Brentwood Street, Muswellbrook, centrally within the township and is generally bounded by low-rise residential development to the south, east and north-west. To the immediate north of the hospital is the Muswellbrook General Cemetery and adjacent to the immediate south is the Good Start Early Learning Muswellbrook Childcare Centre. See **Figure 2**.

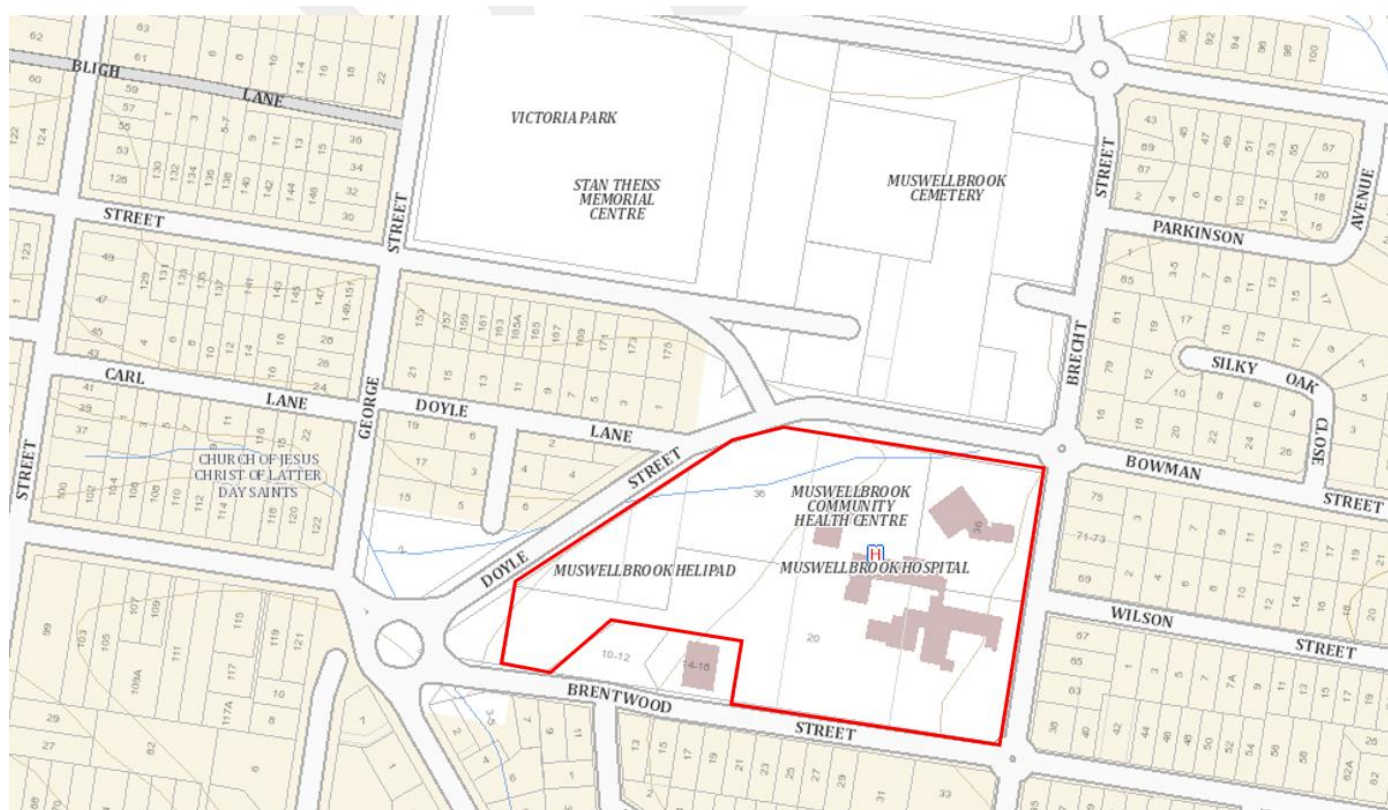


Figure 2 – Location Plan (SixMaps)

The hospital site is bounded by Brentwood Street to the south, Brecht Street to the east, Bowman Street to the north and Doyle Street to the west / north-west – see **Figures 2** and **3**. The hospital site is irregular in shape and comprises a number of lots as follows.

Lot / DP	Use
Lot 25 DP 752484	Existing residual land / hospital grounds
Lot 26 DP 752484	Helipad
Lot 27 DP 752484	Part Stage 2 hospital building and existing residual land / hospital grounds
Lot 28 DP 752484	Part Stage 2 and Main hospital buildings, Weidman Wing and at-grade car park
Lot 29 DP 752484	Part Main hospital building, Former Nurses Accommodation, Staff accommodation buildings and other ancillary buildings
Lot 30 DP 752484	Part Main hospital building, Part Maternity, and Services Block
Lot 31 DP 752484	Part Stage 2 and Main hospital buildings, Part Maternity, and at-grade car park
Lot 300 DP 865487	Part Stage 2 hospital building and existing residual land / hospital grounds



Figure 3 – Aerial photograph showing the Stage 2 Redevelopment under construction and cadastral boundaries (SixMaps)

It is understood that the Health Administration Corporation (HAC) owns the site. The NSW Government Gazette of 12 July 2019 identifies a significant number of NSW hospital sites acquired by HAC for the purposes of the *Health Administration Act 1982* as at that date. This includes all lots and DPs listed above as forming ‘the Muswellbrook District Hospital’. This acquisition has brought together all lots into single HAC ownership.

2.1.1 Existing Development

Muswellbrook Hospital is a 44-bed district-level health facility that predominately provides a range of clinical and non-clinical services including emergency, surgical, maternity and other health services to the Upper Hunter region.

Muswellbrook Hospital has been subject to two recent stages of redevelopment. Stage 1 of the Redevelopment was completed in 2015 which included a new Emergency Department. Stage 2 was completed in 2019 and included new renal and chemotherapy services, improved spaces for medical imaging and pathology collection, refurbished outpatient areas, oral health services, an enhanced space for patients attending Muswellbrook Hospital for day surgery, and improvements to the main entry, reception and admission areas. Stage 2 also provided Lower Ground Level and Level 1 shell space for future fit-out and use. The fit-out and use of the Level 1 shell space was part of the works the subject of the Stage 3 Redevelopment Early Works REF. The fit-out and use of the Lower Ground level shell space is part of the works the subject of this Stage 3 Redevelopment Community Health REF.

Figure 4 shows a recent aerial photograph of the hospital campus and its urban context. The hospital campus’ buildings are identified on the site plan at **Figure 5**. The Stage 2 and Main Buildings are connected at the main pedestrian entrance to the hospital which addresses Brentwood Street and the hospital’s main public carpark.

Figure 6 provides a current aerial photograph consistent with the site plan. Further figures show the main hospital building, including the Stage 2 Redevelopment; the existing shell space on Lower Ground level of the Stage 2 Building, and the existing Weidmann Wing building and other parts of the site subject of the works under this REF.



Figure 4 – Recent aerial photograph of the hospital and environs (Sky View Aerial)

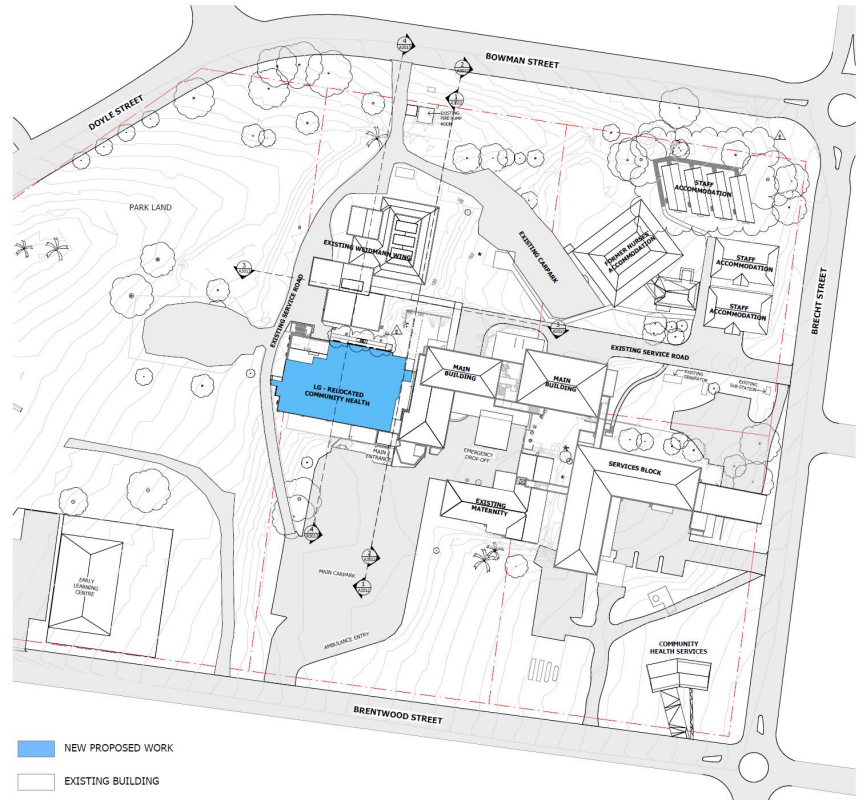


Figure 5 – Site Plan (dwp)



Figure 6 – Recent aerial photograph of the hospital and environs (Sky View Aerial)



Figure 7 - Stage 2 Building (left), the Main Building, and Maternity Block (right) as seen from Brentwood Street



Figure 8 - Stage 2 Building with the lower ground level shell space visible

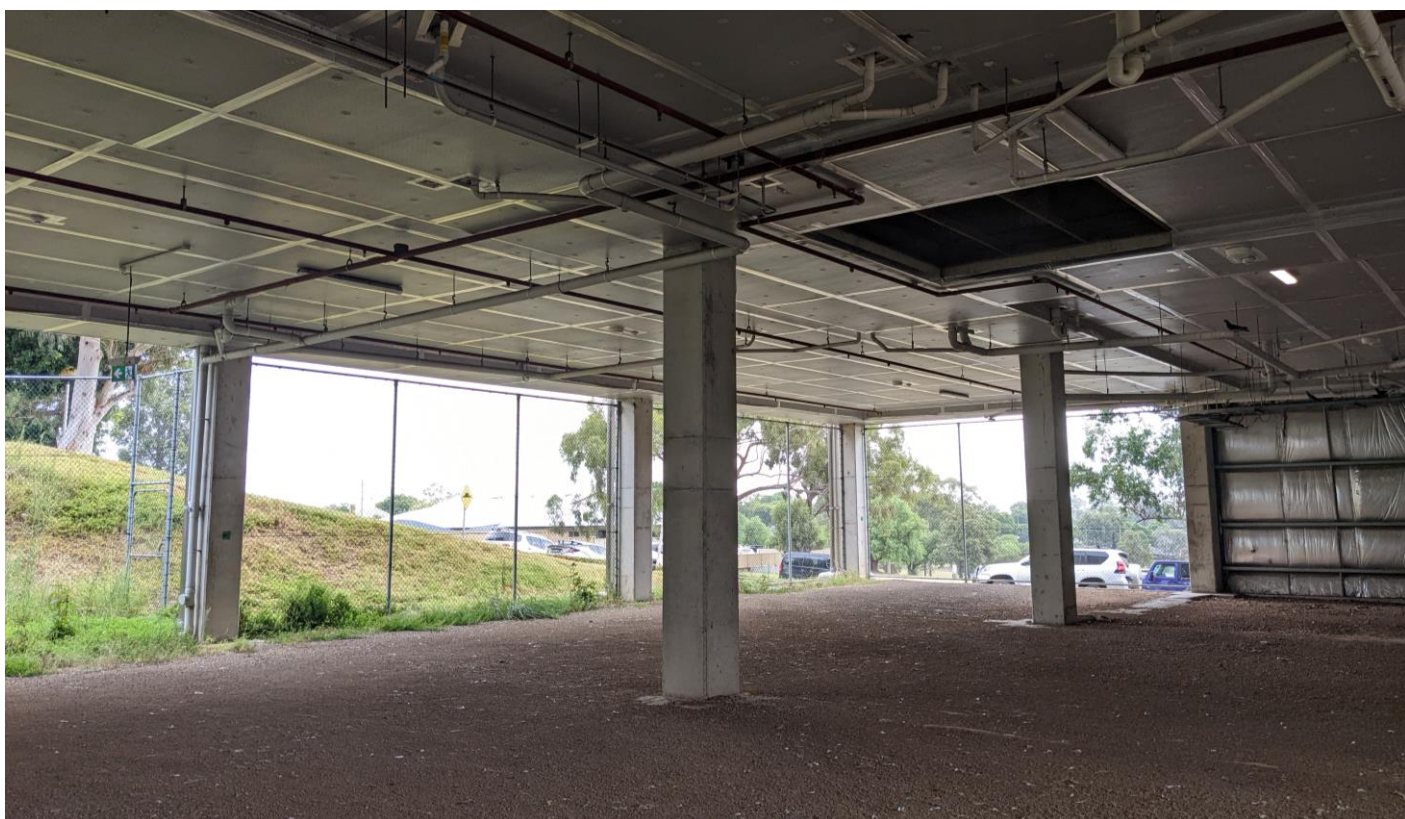


Figure 9 - Stage 2 Building lower ground level shell space from within



Figure 10 – Hospital campus looking east towards the Stage 2 Building, Main Building, and Weidmann Wing building



Figure 11 – Weidmann Wing building in the foreground with the Stage 2 Building and Main Building to the rear



Figure 12 – Aerial view from the north over the hospital campus (Sky View Aerial)

2.1.2 Other Site Elements

Topography

The site (around the nearby existing built elements to the north of the Stage 2 Building) generally falls from east to west with areas to the east and north of the existing Weidmann Wing building at about RL 180m to 182m AHD and areas to the north and west of the building at around RL 176m and 178m AHD.

Accordingly, the site generally is typified by gently undulating areas with a fall from north-east to west and south-west of about 4m. See a survey provided at **Appendix A**.

Vegetation and Flora and Fauna

The site (around the nearby existing built elements to the north of the Stage 2 Building) presently accommodates 23 planted native and exotic trees. These have medium environmental and landscape significance and medium retention value only. No hollows have been identified in relation to these trees.

From a biodiversity standpoint, the trees within the site are broadly described as being 'Planted Exotic/Native Vegetation'. The canopy is comprised of a mixture of exotic and planted native species including *Grevillea robusta*, *Phoenix canariensis*, *Populus spp.*, *Araucaria bidwillii* and *Lophostemon confertus*. Shrubs within this community were a mix of exotic and planted native species including *Senna artemisioides*, *Callistemon viminalis*, *Schefflera arboricola*, *Grevillea spp.* (cultivar), *Agonis flexulosa*, *Pelargonium hortorum*, *Atriplex halimus* and the priority weed *Olea europaea subsp. cuspidata*. The ground layer is a mix of common parkland native and exotic species. Native groundcover species include *Cynodon dactylon* and *Dichondra repens*. Exotic species include *Poa annua*, *Lotus uliginosus*, *Hypochaeris radicata*, *Arctotheca calendula* and *Bidens pilosa*.

As noted, no vegetation is impacted by the proposed Community Health scope.

Transport

The hospital is well supported by the surrounding bus network, with bus stops located on Brentwood Street adjacent to the main entrance to the hospital which service the 412, 415, 418 and 419 local bus routes, with some of these routes providing connection to Muswellbrook Railway Station to the south-west of the site.

Pedestrian paths are provided on the southern side of Brentwood Street and the western side of Brecht Street. Limited cycling infrastructure in the form of shared paths and separated cycle lanes are located near the site other than the shared path on the western side of Brecht Street along the frontage of the site between Brentwood Street and Bowman Street.

Access, Parking and Traffic

Brentwood Street is a local road aligned in an east-west direction along the southern boundary of the hospital. It is a two-way road with one lane in each direction, set within a carriageway of around 11 metres wide. Brentwood Street facilitates access to the main car park for the hospital, the main entrance pick-up and drop-off area and ambulance access to the hospital. An informal access also exists providing connection to the helipad. A crossover is also provided further east of the main car park access which functions as an exit for service vehicles accessing the medical gases for the hospital.

Unrestricted kerbside parking is available on both sides of the road. Brentwood Street has a posted speed limit of 50 kilometres per hour.

Brecht Street is a local road aligned in a north-south direction along the eastern boundary of the hospital. It is a two-way road with one lane in each direction, set within a carriageway of around 11 metres wide. Brecht Street facilitates access to the loading dock and entry to a service road for servicing the medical gases for the hospital. A separate access is also provided further north to the staff accommodation and Emergency Department staff car parking spaces.

Unrestricted kerbside parking is available on both sides of the road. Brecht Street has a posted speed limit of 50 kilometres per hour.

Bowman Street is a local road aligned in an east-west direction along the northern boundary of the site. It is a two-way road with one lane in each direction, set within a carriageway of around 13 metres wide. Bowman Street facilitates access to the staff car park for the hospital and a one-way southbound link road that provides connection to the main car park along the western side of the hospital. The existing Weidmann Wing building is also directly accessed via Bowman Street.

Unrestricted kerbside parking is available on both sides of the road. Bowman Street has a posted speed limit of 50 kilometres per hour.

Stantec (the project's traffic consultant) completed spot counts with respect to traffic movements at the hospital main entrance on Brentwood Street on Wednesday 25 May 2022 from 2:30pm to 3:00pm which corresponded with when peak activity was observed to occur in the hospital main car park and drop-off area. The main car park and ambulance access was observed to generate around 14 vehicle movements during the 30-minute period, with through-traffic volumes on Brentwood Street minor and equating to around 30 vehicle trips (two-way).

Based on this, the main car park at the hospital is estimated to generate around 30 vehicle trips during the hospital peak hour (based on doubling the 30-minute counts). Minimal traffic activity was observed to occur at the other accesses to the hospital on Bowman Street and Brecht Street during this period.

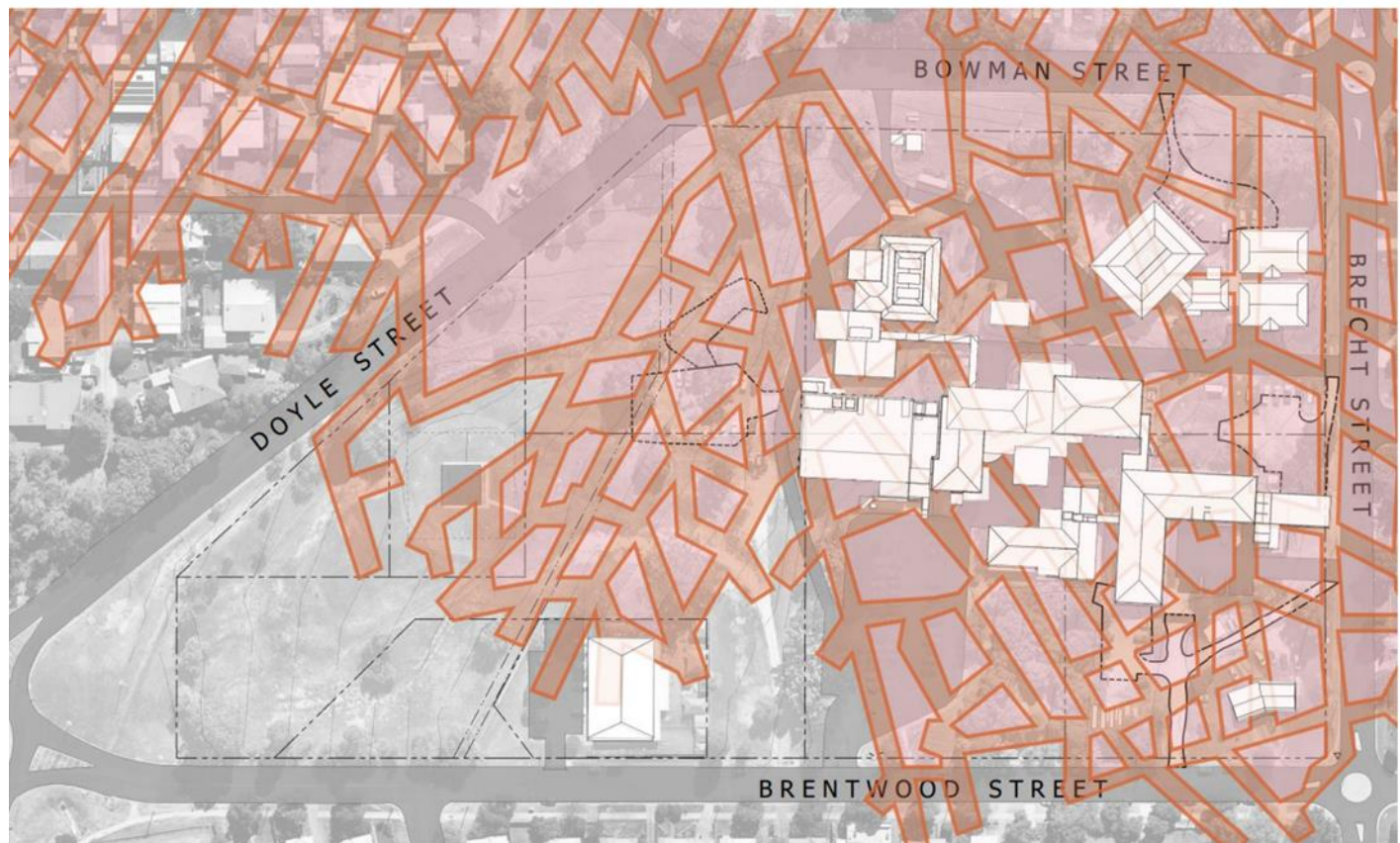
Noting the roads surrounding the hospital are local roads with relatively low traffic volumes throughout the day, key surrounding intersections including the roundabouts at Bowman Street/ Brecht Street; Brecht Street/Brentwood Street; and Brentwood Street/King Street/ Doyle Street/Brook Street all currently operate well with minimal queues and delay throughout the day.

Stantec also completed car parking demand surveys on Wednesday 25 May 2022 for off-street car parking provided at the hospital and on-street along the frontages of the hospital. It is noted that while most of the parking demand was observed to occur off-street on the hospital site, a significant amount of this parking was informal and involved cars parking on unmarked gravel or grassed areas. Overall, the formal and informal areas of parking at the site cater for some 133 vehicles at the peak period of late morning through to mid afternoon on a weekday. Whilst some 242

unrestricted on-street spaces are available around the perimeter of the hospital site, only some 20 spaces on average are generally used. Broadly, the hospital caters for its parking demand on-site.

Bushfire

A check on the NSW Government 'ePlanning Spatial Viewer' by Peterson Bushfire confirms that the hospital property and the lots involved are not affected by the bush fire prone land mapping. The closest mapped bush fire prone land is located over 260 m to the east. A desk-top assessment of the lands surrounding the hospital was also undertaken to assess if there were any bushfire hazards that may be located within 100m of the hospital that were inadvertently not identified on the bush fire prone land map. All surrounding lands to a distance of at least 100m consist of managed properties and roads and do not present a bushfire hazard as defined by 'Planning for Bush Fire Protection 2019'. Assessment and compliance in accordance with 'Planning for Bush Fire Protection 2019' is therefore not required.



LEGEND



Figure 13 – Extent of previous mining activity at and under the hospital (dwp)

2.1.3 Site Considerations and Constraints

Section 10.7 Planning Certificates No. 23751 and 23752 both dated 27 February 2024, spanning the lots subject to these works identify that the site is located within the 'SP2 – Infrastructure (Health Services Facility)' zone under *Muswellbrook Local Environmental Plan 2009*. See the planning certificates at **Appendix B**.

In relation to mine subsidence, **Figure 13** above indicates the extent of former mining activity under and around the hospital leading to the declaration of the land as part of a Mine Subsidence District. See a Geotechnical Assessment at **Appendix C** and a Mine Subsidence Assessment at **Appendix D**.

Table 1: Section 10.7 Planning Certificate

Affectation	Yes	No
Critical habitat		X
Conservation area		X
Item of environmental heritage		X
Affected by section 38 or 39 of the Coastal Management Act 2016 (CM Act)		X
Proclaimed to be in a mine subsidence district	X	
Affected by a road widening or road realignment		X
Affected by a planning agreement		N/A
Affected by a policy that restricts development of land due to the likelihood of landslip		N/A
Affected by bushfire, tidal inundation, subsidence, acid sulphate or any other risk		X
Affected by any acquisition of land provision		X
Biodiversity certified land or subject to any bio-banking agreement or property vegetation plan		X
Significantly contaminated		N/A
Subject to flood related development controls		X

2.2 Surrounding Development

The surrounding locality can be broadly described as being in part a suburbanised low-rise low-density residential area. This is typified by the types of development seen in Brentwood and Brecht Streets as shown in **Figures 14** and **15** over. The locality could also be reasonably described as civic in nature with the hospital dominating this context and this being reinforced with the SP2 – Health Services Facility zone spanning an area greater than the hospital and taking in the adjacent pre-school and the Muswellbrook Cemetery to the north of Bowman / Doyle Streets.

Figure 14 also shows the only nearby heritage item, Birralee - 33 Brentwood Street. Note, the cemetery is also listed as a heritage item. Details are set out later in this REF. The adjacent pre-school is shown in **Figure 16**.

The proposed works are otherwise immediately surrounded by the hospital's Main Building and/or the Stage 2 Building and parts of the hospital campus' grounds.



Figure 14 – Birralee - 33 Brentwood Street



Figure 15 – Typical residential development opposite the hospital on Brecht Street



Figure 16 – Goodstart Early Learning pre-school – 18 Brentwood Street adjacent to the hospital

3. Proposed Activity

3.1 Proposal Overview

In general, the proposed works involve alterations and additions, fitout, and operation of the lower ground floor of the Stage 2 Building for the relocation of Community Health Services, along with minor associated and ancillary civil engineering works. The existing Community Health Services clinical spaces will move from the Weidmann Wing building into this new accommodation, with the Weidmann Wing building retaining the existing administrative functions and spaces of Community Health.

A detailed description is set out further below.

3.1.1 Design Approach

Placemaking and Design

There is limited relevance or scope to address Placemaking and Design in the context of the project's scope. Notwithstanding, dwp has addressed the principles of Placemaking and Design within the project through application of the Government Architect NSW (GANSW) design guides 'Better Placed', 'Greener Places' and 'Connecting with Country/ Designing with Country'. Further the Better Placed - Design Guide for Healthcare and HI's own design guidelines have been very broadly applied – see **Appendix E**.

The design has considered the seven objectives of Better Placed, which include:

- Objective 1 – Better Fit
- Objective 2 – Better Performance
- Objective 3 – Better for Community
- Objective 4 – Better for People
- Objective 5 – Better Working
- Objective 6 – Better Value
- Objective 7 – Better Look and Feel

Better Placed - Design Guide for Healthcare and HI's design guidelines require consideration of the following in the design process:

- Design for Dignity
- Design for Wellbeing
- Design for efficient and flexible delivery of care
- Design for Country
- Design for neighbourhood and surrounding environment
- Design for Connection
- Design for Sustainability

With respect to CPTED principles, dwp has provided a statement within its Design Statement addressing Territoriality; Natural Surveillance and Lighting; and Access Control. Again, see **Appendix E** for a direct design response to CPTED. Architectural drawings are found at **Appendix F**.

Connecting with Country/ Engagement

The relevant traditional land owners / Aboriginal Country on which the hospital sits is governed by the Wanaruah / Wonnarua Aboriginal Land Council.

Based on the Eco Logical Aboriginal Heritage Due Diligence Assessment prepared for this REF, *ethnographic resources attribute the original inhabitants of Muswellbrook to be either the Geawegal (or Keawekal) peoples or Wonnarua peoples. Tindale (1974) describes the boundaries of the Geawegal to extend to Scone in the north, east to Mount Royal and encompassing Aberdeen and Muswellbrook with the Wonnarua inhabiting the Maitland area. Brayshaw (1987) also maps Muswellbrook within Geawegal boundaries and spans from Murrundi in the north and Ravensworth in the south, with the Wonnarua boundary within the valley immediately south of Ravensworth and west to the Goulbourn Valley. Brayshaw (1987) also suggests that Kamilaroi was the dominant cultural influence in the*

Hunter Valley, and that Wonnarua, Geawegal and Worimi were all part of the “Kamilaroi Nation”. Howitt (1904) describes the Geawegal boundaries as within the valley of the Hunter River surrounding Glendon with little interaction with the Aboriginal people of Muswellbrook. While the ethnographic resources are conflicting, the original inhabitants of Muswellbrook were either one of the two groups, or the town may well be within a transitional boundary between the two groups.

With respect to the design process and Connecting with Country, a meeting was held with a range of Aboriginal and health-related representative on-site for a walk over Country on 12 August 2022 with respect to the then wider Stage 3 Redevelopment scope. This included a briefing of the proposed works and design, and the meeting sought invitation to comment upon the design and provide input from a cultural standpoint.

dwp has progressed this (as far as this now relates to the Community Health scope) with addressing such commentary around functionality, cultural awareness around Aboriginal use of spaces, inclusion of artworks, and the colour palette of the façade.

Sustainability

Sustainability principles founded on DGN 58/HI Sustainability Framework have been applied in this project. Stantec, the project's sustainability consultant, has advised as follows.

Under DGN 58/HI Sustainability Framework, the relevant Green Star equivalency target at the design of the project was a minimum of 45 points + 5 points buffer (being 4-star Green Star equivalent) to be achieved by the design in accordance with HI's ESD Evaluation Tool, which is benchmarked to the Green Star Design and As Built v1.3 Submission Guidelines. This benchmark demonstrates “Best Practice” Sustainability through the design, construction and operation. Further, all new buildings will have a mandatory requirement of delivering a 10% improvement in energy on NCC Section J. The current DGN 58 seeks a 60 point target, noting this post-dates the project's design.

The project as designed is able to achieve at least 49 points, thereby generally satisfying the former points target. The 10% improvement in energy on the NCC Section J has also been achieved. The proposed 4-star equivalency pathway has been identified as the most appropriate and feasible response for this project in consultation with the HI Sustainability Advisor noting the internal nature of the Stage 3 works whilst endeavouring to maximise ESD contribution as far as practicable.

In doing so, the project will implement several sustainable design principles which include initiatives designed to mitigate the development's environmental impact across the following areas:

- Management – including reviews of commissioning and tuning, building information and other operational processes.
- Indoor Environment Quality – including high air quality, acoustic/lighting comfort and reduction of indoor pollutants.
- Energy – including improved energy efficiency of the building operations through design and technology.
- Sustainable Transport – access to public transport and sustainable transport options.
- Water Efficiency – reduce potable water demand and potentially utilizing the rainwater.
- Materiality – Considering the whole of life materials and their selection to minimise harm to the environment, including efficiency and construction.
- Ecology - Maintaining ecology through landscaping & on-site environmental management processes during both construction & operation.
- Emissions – minimisation of pollution to the environment.

The Stantec ESD report, including the HI ESD Evaluation Pathway spreadsheet articulating the credit points calculation, is found at **Appendix G**.

Given the recent increase in the points target under DGN 58 both HI and Stantec have revisited the ESD framework. Stantec has advised as follows:

The scope of work for the Muswellbrook Hospital Redevelopment has reduced from a new building to a refurbishment. Health Infrastructure's ESD Evaluation Tool target, as per Design Guidance Note (DGN) 058 Environmentally Sustainable Development, is 60 points. However, the proposed Community Health refurbishment is below \$10M and accordingly receives an exemption on targeting the full 60 points.

Additionally, the proposed Community Health works are within a building which predates the requirements of DGN 058.

This project is targeting as many ESD initiatives as deemed feasible by the scope of works. The initiatives and their respective points are identified in the HI ESD Evaluation Tool appended to this letter.

See this addendum advice also at **Appendix G**.

Additionally, the EP&A Regulation lists four principles of ESD required to be considered in assessing a project:

- The Precautionary Principle
- Intergenerational equity
- Conservation of biological biodiversity and ecological integrity
- Improved valuation and pricing of environmental resources

The precautionary principle is utilised when uncertainty exists about potential environmental impacts. It provides that if there are threats of serious or irreversible environmental damage, lack of scientific certainty should not be used as a reason for postponing measures to prevent environmental degradation. The precautionary principle requires careful consideration and evaluation of potential environmental impacts in order to avoid, wherever practicable, serious or irreversible damage to the environment.

This REF has not identified any serious threat or irreversible damage to the environment and therefore the precautionary principle is not relevant in this case.

Intergenerational equity is concerned with ensuring the health, diversity and productivity of the environment can be maintained or enhanced for the benefit of future generations. The proposal satisfies this by providing a means to providing enhanced and much needed health services for generations to come.

The principle of biological diversity upholds that the conservation of biological diversity and ecological integrity should be a fundamental consideration for any development. The proposal will have no detrimental effect upon this, given the general lack of biodiversity values present on the site and the internalised nature of the works themselves.

The principles of improved valuation and pricing of environmental resources requires consideration of all environmental resources that may be affected by a proposal, including air, water, land and living things. Mitigation measures are included in this REF for avoiding waste and ensuring where possible reuse, recycling and managing waste occurs, as relevant to this relatively minor scope of works.

3.1.2 Proposed Activity

Built Form

The proposed works / activity involves the following:

- The fitout and operation of the lower ground floor of the Stage 2 building for Community Health Services:
 - Community Health Services (clinical spaces) will be relocated from the existing Weidmann Wing building including
 - Reception and clerical space with waiting area with play space
 - Therapy rooms, plaster room, gym and treatment spaces
 - Consultation rooms
 - Interview rooms
 - Audiology testing room
 - Staff and general storerooms, staff room, and several workspaces
 - General storerooms, meeting rooms, kitchenette, waste and cleaner's rooms, utilities and communications spaces
- Minor associated civil engineering works to establish a new egress and evacuation pathway from, and to the north of, the Stage 2 Building's lower ground level.
- New connections to existing rooftop plant to service the Lower Ground Level undercroft area.

The proposed works are shown in **Figures 17-20** over. Architectural drawings are found at **Appendix F**.

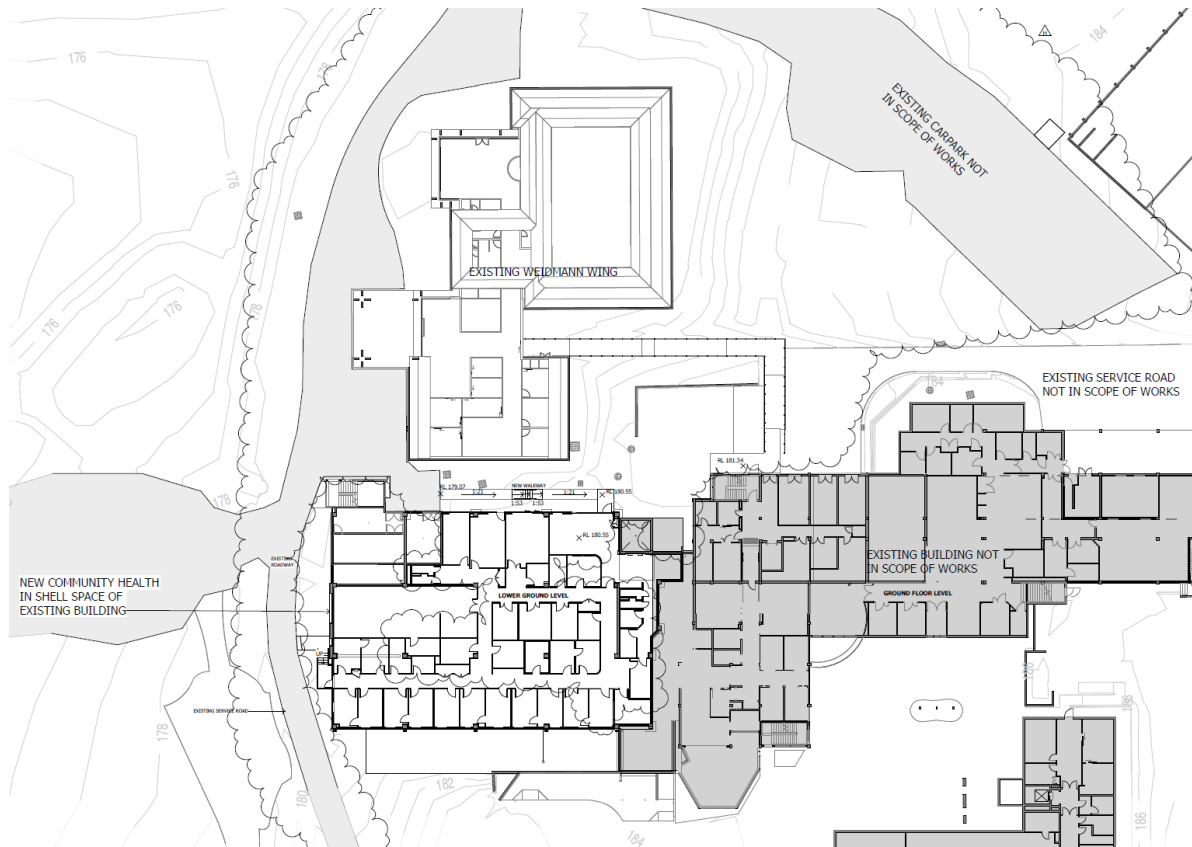


Figure 17 – Location Plan (dwp)

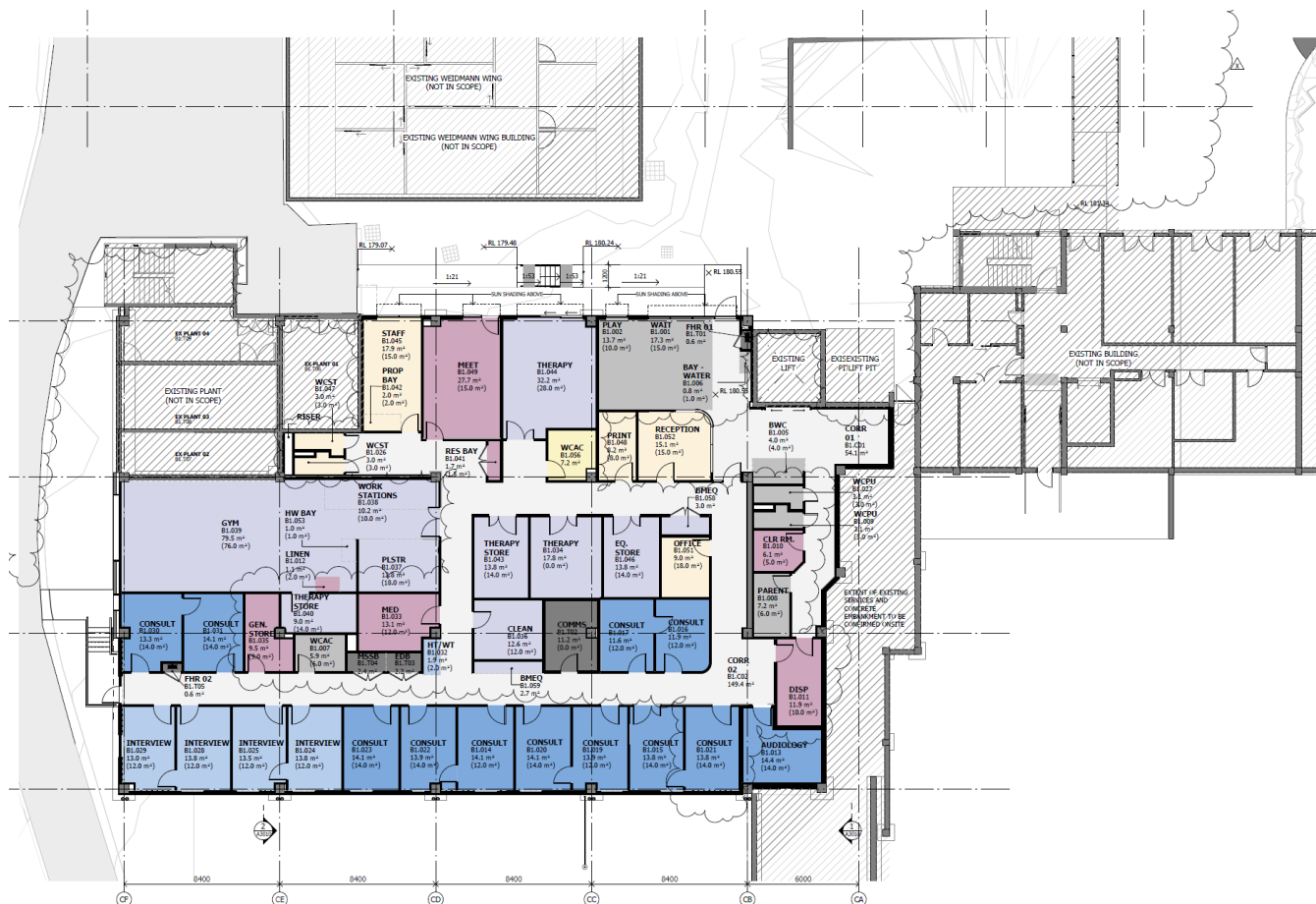


Figure 18 – General Arrangement Plan – Community Health – Lower Ground Floor Stage 2 Building (dwp)

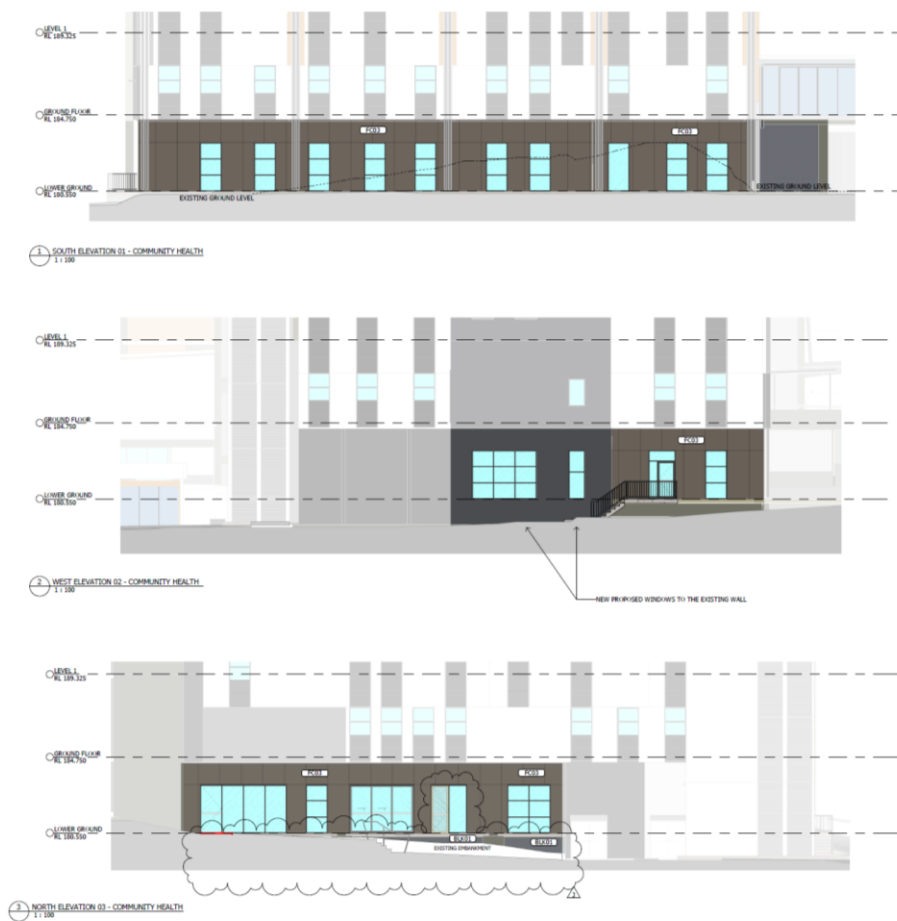


Figure 19 – Elevations – Community Health – Lower Ground Floor Stage 2 Building (dwp)



Figure 20 – Indicative render – Community Health – Lower Ground Floor Stage 2 Building (dwp)

Civil Engineering, Roadworks and Parking

The proposed scope of civil engineering works involves only the establishment of a new access pathway from the new Community Health location along the northern elevation of the Stage 2 Building to its west. This is a BCA requirement. No further civil engineering works arise given the modest and limited focus of the scope of works.

The TTW civil engineering statement and plans are found at **Appendix H**.

No change is proposed to any roadways or to any parking arrangements at the campus.

Tree Removal and Landscaping

The scope of works does not involve any tree removal or any new landscaping.

Utilities

Generally, the works will not result in the need to upgrade or augment any existing utilities and services.

In terms of electricity, JHA advises that presently the entire campus is supplied by an 800kVA Ausgrid kiosk substation which can generate up to 1100A/phase. Based on the most recent electricity bills (Aug 21-Feb 22) received from Muswellbrook Hospital, the existing maximum demand is approximately 650A/phase.

As part of this project after the delivery of these Stage 3 works the total load on that substation is estimated to be in the order of 1028 A/phase. This is still within its current capacity.

JHA has made an application in 2024 to Ausgrid and it has been confirmed that the existing 1000A fuse within the existing substation can be replaced with a 1200A fuse which would enable the campus to retain the existing substation.

Note, with hydraulic (water and sewer) services there are no private and utility infrastructure upgrades anticipated in order to support the Stage 3 Redevelopment. There will be no additional water demand, sewer discharge, or LPG demand arising from this relatively modest proposed scope of works to relocate and replace accommodation for Community Health Services, noting a like for like replacement of systems

The utilities and services statements and drawings are provided at **Appendices I and J**.

3.2 Proposal Need, Options and Alternatives

3.2.1 Strategic Justification

The driver for the works generally arises from the hospital's CSP and the ongoing program of works to upgrade and modernise facilities at the hospital. The subject works support the already approved Stage 3 Redevelopment Early Works which entailed the Operating Suite and CSSD upgrades to meet current and future demand at the Muswellbrook Hospital.

As detailed in the CSP, the need is driven by the requirement for:

- A sustainable health service;
- Equitable access to health services;
- Addressing poorer health outcomes in rural and remote areas; and
- The need for innovation and incorporation of technology to facilitate the delivery of telehealth.

The proposed works support the objectives of continued enhancement of delivery of health services at Muswellbrook Hospital to respond to immediate capacity needs to improve acute and clinical services in line with the CSP.

Consideration has been given to key aspirations and objectives in the development of the proposal and options explored, namely:

- Enhanced functional relationships through contemporary health design;
- Replacement of ageing assets with contemporary infrastructure;
- Continuation of the hospital's role as a district level health facility providing services to meet the needs of the residents of the Muswellbrook and Upper Hunter Region;
- Provision of contemporary models of care and facilitation of efficient and sustainable service delivery in alignment with Government and District-wide policies and guidelines;

- Provision of capacity to meet projected demand and the ability to respond to changes in service demand and new models of care whilst recognising the challenges of a regional hospital; and
- Enhanced environmental sustainability of capital assets, in line with government policy.

3.2.2 Alternatives and Options

It is clear that to do nothing is not a suitable course of action. In planning for the package of works under this REF alternative options were explored in terms of location and configuration of the works in consideration of improved locational, operational, financial or social advantages.

The preferred option as a result of the design process is embodied in the proposed plans and layout. The design has evolved based on the functional needs and consultation with relevant hospital user groups, stakeholders, consultants, Hunter New England Local Health District (HNELHD) and technical review.

3.3 Construction Activities

The works are medium term in duration (up to 6 months) and will be delivered in a single stage.

Table 2: Project Timeframes and Construction Activities

Construction activity	Description
Commencement Date	September 2024 to June 2025
Work Duration / Methodology	As set out above, the project will be delivered in one stage over 6 months.
Work Hours and Duration/Construction	The hours proposed are standard construction hours, that is: Mondays to Fridays: 7:00am to 5:00pm Saturdays: 8:00am to 1:00pm Sundays and Public Holidays: No work.
Workforce/Employment	Approximately 80 workers
Ancillary Facilities	It is envisaged that the Contractor compound and support facilities and areas shall be located within one of the proposed zones shown in the Indicative contractor site establishment plan and options in the preliminary construction management plan. Final location and Site Set-up and Establishment Plan (see also Figure 21 over) will be developed by the Contractor in consultation with stakeholders upon their engagement and prior to commencement of works. This plan will detail the location of amenities, lay down areas and temporary infrastructure needed to undertake the works.
Plant Equipment	Articulated and fixed trucks Excavators with bucket and hydraulic hammer attachments Demolition Saw General power tools
Earthworks	No earthworks are necessitated.
Source and Quantity of Materials	The source and quantity of materials will be identified and procured by the Principal Contractor following their appointment. The quantities are likely to be modest given the modest scope of the works generally.

Construction activity	Description
Traffic Management and Access	<p>A Construction, Pedestrian and Traffic Management Plan will be developed by the Contractor upon their engagement. It is envisaged that construction vehicles will enter the site from Bowman Street and leave via Brentwood Street, with vehicles proceeding to travel onto Brook Street and turning onto New England Highway.</p> <p>Traffic flows and vehicle/pedestrian are a major consideration and pedestrian routes are to be maintained throughout construction. Traffic control personnel will be provided by the Principal Contractor during operating hours, or as advised by the Principal Contractor within their Construction Pedestrian and Traffic Management Plan.</p> <p>Key issues for traffic, pedestrian management during construction to be considered in the Construction, Pedestrian and Traffic Management Plan include but are not limited to:</p> <ul style="list-style-type: none"> • Providing safe access for pedestrians and vehicles accessing the construction site and hospital site • Maintaining access at all times for hospital and stakeholders deliveries • Ensuring maximum safety of site personnel, pedestrians, commuters and drivers. • Managing deliveries to within the site through the existing road within the hospital as agreed with the Project Manager and HNELHD. Relevant management controls to be implemented as required. • Managing truck movements per day with peak movements occurring during material deliveries and weekly skip bin removals each to occur within approved working hours. • Loading and unloading vehicles so that they do not obstruct roads, driveways and paths of egress from surrounding buildings or fire protection equipment. • Restriction of heavy vehicles to arterial and sub-arterial transport routes, subject to a detailed haulage and delivery routes being determined. • Avoidance of the use of suburban streets, as far as practicable. • Implementation of appropriate traffic management procedures, including consultation with Muswellbrook Shire Council. • Encouraging construction personnel to car-pool or efficiently use on-site parking. It is envisaged that parking can be accommodated on site, with access off Bowman Street. The Contractor will not utilise any existing staff/visitor parking spaces currently available to the hospital, contractors and sub-contractors will be encouraged to car share if parking cannot be fully accommodated on site.

A Preliminary Construction Management Plan is included at **Appendix K**. A final Construction Management Plan noting the location of the Contractor Compound will be developed by the Principal Contractor for the project once appointed.

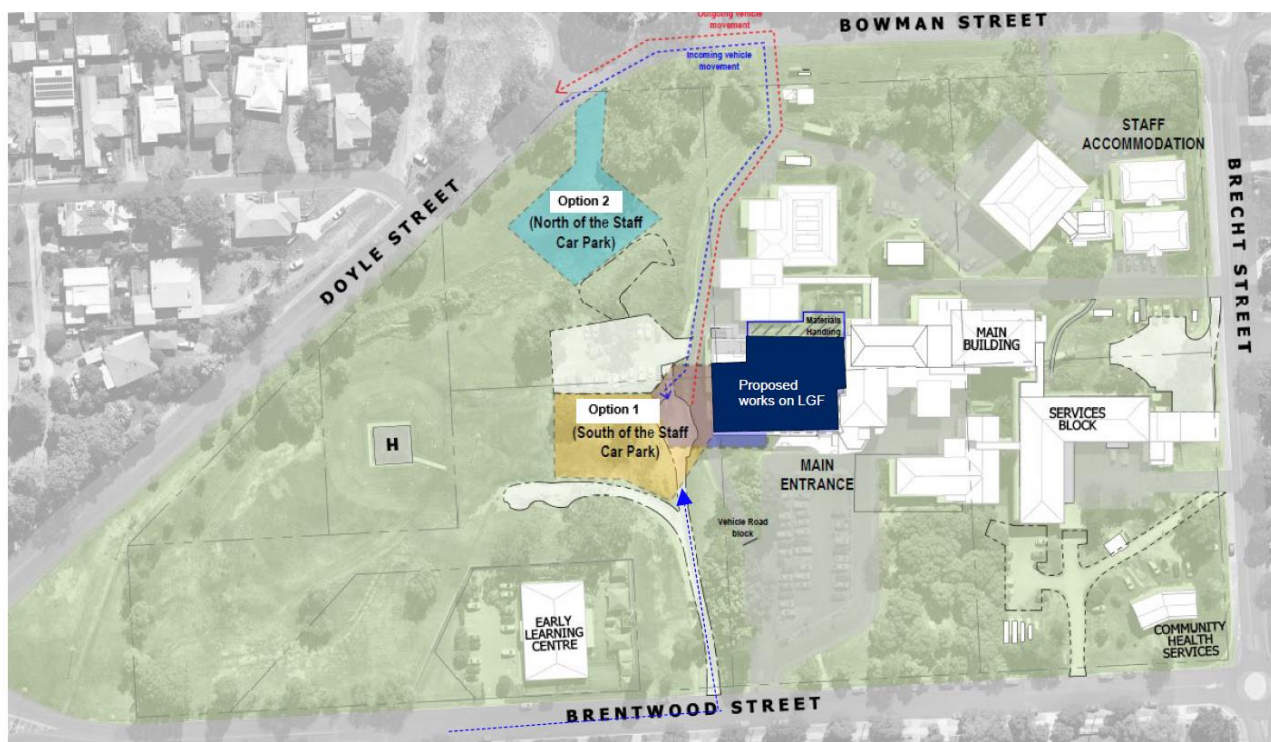


Figure 21 – Indicative contractor site establishment plan and options (dwp and HI)

3.4 Operational Activities

Use

The hospital's use will not change as a result of the proposed works / activity.

The presently vacant lower ground level undercroft area of the Stage 2 Building will become operational as originally envisaged under that building's REF approval. It will accommodate the relocated Community Health Services into a purpose-built fit out with contemporary spaces.

The Weidmann Wing building will remain in-situ, accommodating the remaining administration spaces.

Operation Hours

There will be no change to existing operating hours of the hospital, namely 24 hours per day / 7 days per week.

Staff / Patients

There will be no change to existing staffing / patient levels arising from the proposed works / activity.

Traffic and Parking

No change to parking demand and supply arises from these works. No vehicular access changes result from the works which will have no impact upon traffic movements around the hospital campus.

4. Statutory Framework

4.1 Planning Approval Pathway

Section 4.1 of the EP&A Act states that if an EPI provides that development may be carried out without the need for development consent, a person may carry the development out, in accordance with the EPI, on land to which the provision applies. However, the environmental assessment of the development is required under Part 5 of the Act.

State Environmental Planning Policy (Transport and Infrastructure) 2021 (TISEPP) aims to facilitate the effective delivery of infrastructure across the State. Division 10 of TI SEPP outlines the approval requirements for health service facilities. A “hospital” is defined as a health service facility under this division.

The site is zoned ‘SP2 – Health Services Facilities’ under the *Muswellbrook Local Environmental Plan 2009* – see **Figure 22** below. The SP2 is a prescribed zone under the TISEPP.

The proposal involves alterations and additions to an existing health services facility and ancillary and associated works, all of which are classified as development without consent as proposed activity is consistent with section 2.61(1)(a), as well as section 2.61(2) of TISEPP. The ancillary works are able to be carried out in the same manner through section 2.3(3) of the TISEPP.

Therefore, the proposal is considered an ‘activity’ for the purposes of Part 5 of the EP&A Act and is subject to an environmental assessment (REF). The proposal is considered an ‘activity’ in accordance with section 5.1 of the EP&A Act because it involves the carrying out of a work, the demolition of a building or a work, and the use of land, that is not Exempt Development or prohibited under an environmental planning instrument.

TISEPP consultation is discussed within section 5 of this REF.

Table 3: Description of proposed activities

Division and Section of TISEPP	Description of Works
Section 2.61(1)(a)	Alterations and additions to the existing lower ground floor of the Stage 2 building
Section 2.3(3)	Civil engineering works as ancillary works to construction works

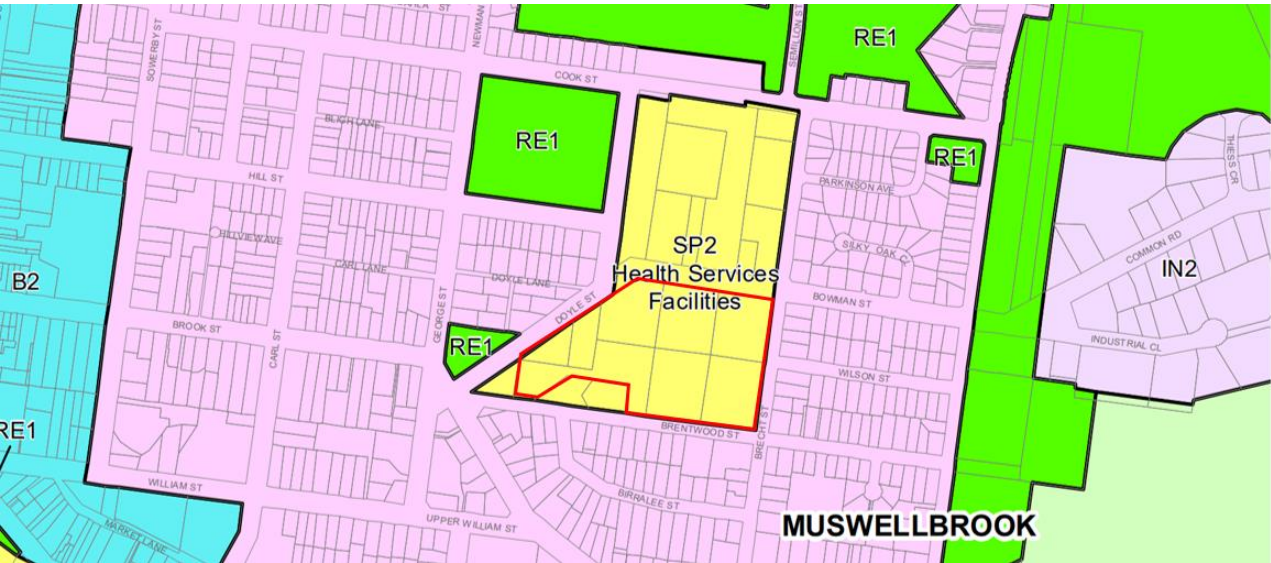


Figure 22 – LEP zoning map

4.2 Environmental Protection and Biodiversity Conservation Act 1999

The provisions of the EPBC Act do not affect the proposal as it is not development that takes place on or affects Commonwealth land or waters. Further, it is not development carried out by a Commonwealth agency, nor does the proposed development affect any matters of national significance. An assessment against the EPBC Act checklist is provided at Table 4.

Table 4: EPBC Checklist

Consideration	Yes/No
The activity will not have any significant impact on a declared World Heritage Property?	No
The activity will not have any significant impact on a National Heritage place?	No
The activity will not have any significant impact on a declared Ramsar wetland?	No
The activity will not have any significant impact on Commonwealth listed threatened species or endangered community?	No
The activity will not have any significant impact on listed migratory species?	No
The activity does not involve nuclear actions?	No
The activity will not have any significant impact on Commonwealth marine areas?	No
The activity will not have any significant impact on Commonwealth land?	No
The activity does not relate to a water resource, a coal seam gas development or large coal mining development?	No

4.3 Environmental Planning and Assessment Act 1979

The proposed activity is consistent with the objectives of the EP&A Act as outlined in the table below.

Table 5: Consideration of the Objects of the EP&A Act

Object	Comment
(a) to promote the social and economic welfare of the community and a better environment by the proper management, development and conservation of the State's natural and other resources,	The works support the efficient and effective operation of Muswellbrook Hospital with new and enhanced facilities. This in turn supports and promotes the general welfare of the community.
(b) to facilitate ecologically sustainable development by integrating relevant economic, environmental and social considerations in decision-making about environmental planning and assessment,	The development's ESD credentials have been considered as part of the design and ongoing operation of the development. See further detailed ESD considerations within this REF.
(c) to promote the orderly and economic use and development of land,	The Community Health Services relocation promotes an orderly and economic use of the site by utilising the existing vacant shell space remaining from the 2019 completion of the Stage 2 Building.
(d) to promote the delivery and maintenance of affordable housing,	N/A
(e) to protect the environment, including the conservation of threatened and other species of native animals and plants, ecological communities and their habitats,	The development / activity does not affect the environment, including threatened and other species of native animals and plants, ecological communities and their habitats in any way.
(f) to promote the sustainable management of built and cultural heritage (including Aboriginal cultural heritage),	N/A – the hospital does not contain any built and cultural heritage (including Aboriginal cultural heritage). The works are within an existing building footprint where assessment of such impacts has previously been carried and found acceptable.
(g) to promote good design and amenity of the built environment,	The design of the Lower Ground Floor infill is one limited by the scope of the project. In essence the proposed façade treatments operate to maintain the existing appearance of the building.

Object	Comment
(h) to promote the proper construction and maintenance of buildings, including the protection of the health and safety of their occupants,	The Community Health Services relocation is in itself concerned with the proper construction and maintenance of buildings, including the protection of the health and safety of their occupants.
(i) to promote the sharing of the responsibility for environmental planning and assessment between the different levels of government in the State,	N/A
(j) to provide increased opportunity for community participation in environmental planning and assessment.	The proposal has been notified on at least 2-3 occasions, garnering no commentary / submissions from either Council or neighbours of the hospital, as set out in Section 5 of this REF. By any measure, ample opportunity for community participation in environmental planning and assessment process has occurred.

Duty to Consider Environmental Impact

Part 5 of the EP&A Act applies to activities that are permissible without consent and are generally carried out by a public authority. Activities under Part 5 of the EP&A Act are assessed and determined by a public authority, referred to as the determining authority. Health Infrastructure is a public authority and is the proponent and determining authority for the proposed works.

For the purpose of satisfying the objects of the EP&A Act relating to the protection and enhancement of the environment, a determining authority, in its consideration of an activity shall, notwithstanding any other provisions of the Act or the provisions of any other Act or of any instrument made under the EP&A Act or any other Act, examine and take into account to the fullest extent possible all matters affecting or likely to affect the environment by reason of that activity (refer to sub-section 1 of section 5.5 of the EP&A Act).

Section 171 of the EP&A Regulation defines the factors which must be considered when assessing the likely impact of an activity on the environment under Part 5 of the EP&A Act. Section 7.1 specifically responds to the factors for consideration under section 171.

Table 6 below demonstrates the effect of the proposed development activity on the matters listed for consideration in sub-section 3 of section 5.5 of the EP&A Act.

Table 6: Matters for consideration under Sub-Section, Section 5.5 of the EP&A Act

Matter for Consideration	Impacts of Activity
Sub-section 3: Without limiting subsection 1, a determining authority shall consider the effect of any activity on any wilderness area (within the meaning of the <i>Wilderness Act 1987</i>) in the locality in which the activity is intended to be carried on.	No effect, as there is no wilderness area (within the meaning of the <i>Wilderness Act 1987</i>) in the locality in which the activity is intended to be carried on.

Note: If a biobanking statement has been issued in respect of a development under Part 7A of the *Threatened Species Conservation Act 1995*, the determining authority is not required to consider the impact of the activity on biodiversity values.

4.4 Environmental Planning and Assessment Regulation 2021

Section 171(2) of the EP&A Regulation provides a list of factors that must be taken into account for an environmental assessment under Part 5 of the EP&A Act. These requirements are considered at section 6.1 of this REF.

4.5 Other NSW Legislation

The following table lists any additional legislation that is required to be considered if it is applicable to the proposed activity.

Table 7: Other Possible Legislative Requirements

Legislation	Comment	Relevant? Yes/No
State Legislation		
<i>Rural Fires Act 1997</i>	The site is not identified on the Bushfire Prone Land Map – see Appendix L .	No
<i>Biodiversity Conservation Act 2016</i>	The Works do not impact upon any critical habitat, threatened species or ecological population or community. No BC Act listed species were identified within the site during the site assessment by Narla in relation to the earlier wider Stage 3 scope, noting also most relevantly, that the works are contained within the same Stage 2 Building footprint as built, with the exception of an access path running parallel with the northern elevation of the building.	No
<i>Water Management Act 2000</i>	The works are not within 40 metres of a watercourse.	No
<i>Contaminated Land Management Act 1997</i>	The site is not listed on the register of contaminated sites.	No
<i>Heritage Act 1977</i>	No impacts on local or state or national heritage arise.	No
<i>Local Government Act 1993</i>	No part of the Local Government Act is triggered.	No.
<i>National Parks and Wildlife Act 1974</i>	An Aboriginal Cultural Heritage Assessment Report (ACHAR), in support of an Aboriginal Heritage Impact Permit (AHIP), is not required due to the existing highly disturbed nature of the site and the modest and internalised nature of the scope of works.	No.
<i>Crown Land Management Act 2016</i>	Not relevant to this REF.	No.
<i>Protection of the Environment Operations Act 1997</i>	An environment protection licence is unlikely to be triggered or required due to the relatively minor scope and duration of the works.	No.
<i>NSW Reconstruction Authority Act 2022</i>	The works respond to the broad requirements of the State Disaster Mitigation Plan (SDMP) under section 38 of the NSW Reconstruction Authority Act, in that the development is designed in response to any disaster event that may occur at the site including flooding, earthquake and the like, noting that hospital campus is not on or near bushfire prone land.	No.
<i>Roads Act 1993</i>	No works to a public road, or pumping of water onto a public road, or involving the connection of a road to a classified road arises.	No
<i>Biosecurity Act 2015</i>	The works do not involve any existing vegetation at the campus, nor new landscaping.	No.
Section 171A of the <i>Environmental Planning and Assessment Regulation 2021</i>	There are no direct impacts to any catchments, as defined for consideration under Section 171A of the EP&A Regulation, including the Hunter River Catchment.	No.
State Legislation Planning Policies		
State Environmental Planning Policy (Biodiversity and Conservation) 2021	Chapter 4 – Koala habitat protection 2021 Part 5 developments are not subject to this chapter. Chapter 6— Bushland in Urban Areas The site does not occur within a LGA listed in schedule 5	No
State Environmental Planning Policy (Sustainable Buildings) 2022	This SEPP, and Chapter 3 in particular, does not apply to Part 5 / REF assessments.	No
State Environmental Planning Policy (Resilience and Hazards) 2021	Chapter 4 – Remediation of Land (former SEPP 55) No remediation works are proposed as the works do not impact the ground below the Stage 2 Building's slab. Minor works are the site's periphery occur, however the Stage 2 Building's construction involved remediation works at that, cleaning up this part of the campus and making the site (and its environs, suitable for the intended (ongoing) hospital use.	Yes Previous remediation work for Stage 2 Building resolved the suitability of the site in this location.

Legislation	Comment	Relevant? Yes/No
State Environmental Planning Policy (Transport and Infrastructure) 2021	Other than the use of relevant provisions to enable the works via this REF, the activity is not traffic-generating development under section 2.122 and Schedule 3 of the TISEPP and referral / notification to Transport for NSW was not triggered in this instance.	No
Muswellbrook Local Environmental Plan 2009		
Zone	Muswellbrook LEP 2009 zones the hospital campus SP2 – Health Services Facility. The works are consistent with the zone objectives and the works would otherwise be permitted with consent.	Yes
Height of Buildings	A building height control of 13m applies to the hospital site. See Figure 23 . In any case, as the REF process is being applied, the 15m REF height threshold applies in this instance, however this is only applicable to a new building proposed or external alterations and additions to existing buildings that extend the building envelope. The lower ground level undercroft will not result in any extension beyond the 15m threshold and above the existing height of the Stage 2 building. The only buildings exceeding the SEPP height control are understood to be the existing Main Building and Stage 2 Building.	No
Floor Space Ratio	No floor space ratio (FSR) controls apply to the hospital site under the LEP.	No
Heritage	<p>The hospital site is not identified as a heritage item, nor is it located within a heritage conservation area – see Figure 24. The site is also not State item under the State Heritage Register. Under the Commonwealth EPBC Act, it appears no Protected Matters relate to the hospital site, including any National Heritage items.</p> <p>The closest heritage items are as listed below:</p> <ul style="list-style-type: none"> Muswellbrook Cemetery - Bowman and Brecht Streets Lot 7008, DP 1050789 - Local I54 Birrallee - 33 Brentwood Street Lot 101, DP 563612 - Local I55 <p>Conversation Area 'C2' - Muswellbrook Residential Heritage Conservation Area is located to the west of the hospital's western-most boundary.</p>	No

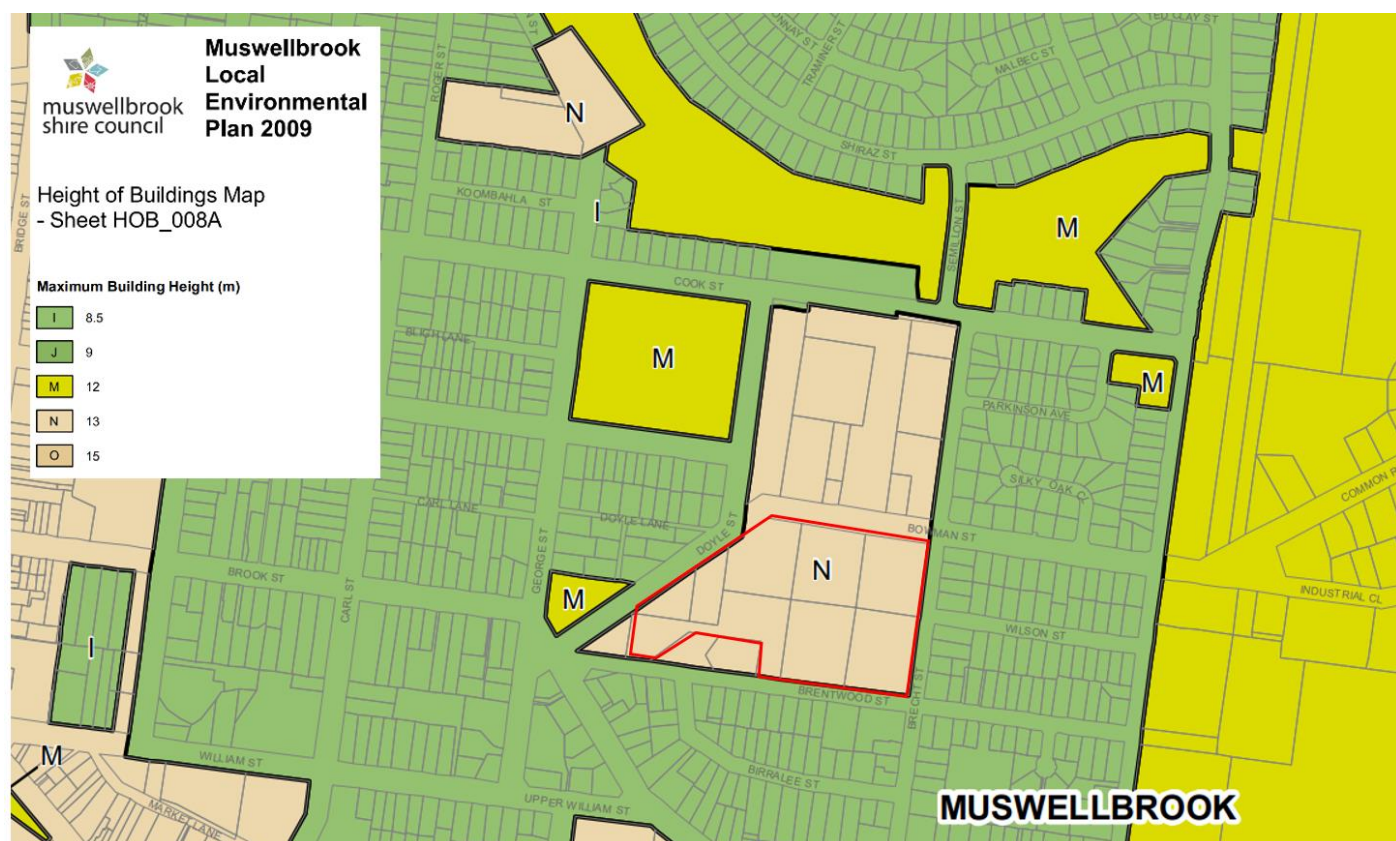


Figure 23 – LEP Height of Buildings map

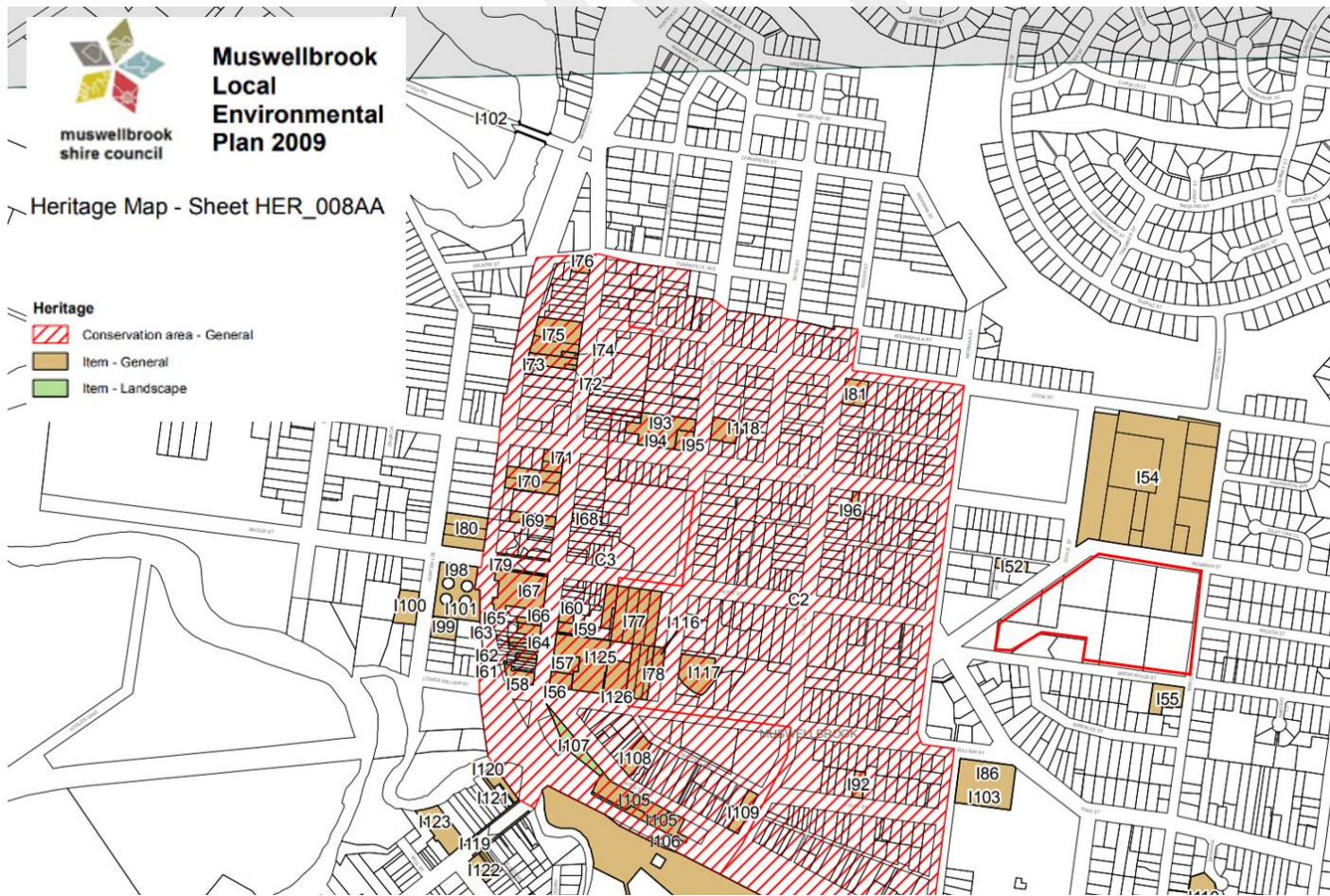


Figure 24 – LEP Heritage map

5. Consultation

Formal notification was triggered with Council, occupiers of adjoining land, and Subsidence Advisory NSW with respect to the subject works. Notification letters issued to Council, occupiers of adjoining land, and Subsidence Advisory NSW.

The REF scope of works was notified for 21 calendar days to the stakeholders outlined in Table 8. The extent of the notification to occupiers of adjoining land is shown in **Figure 25**.

The initial notification (for what was once a wider Stage 3 Redevelopment scope (but which included this REF's scope) commenced on 7 October 2022 in relation to Council and concluded on 28 October 2022. Occupiers of adjoining land were notified via a letterbox drop on 11 October 2022 with this period concluding on 1 November 2022. Following notification, no public submissions were received and Council also did not provide a submission.

A further notification of a refined wider scope (including this REF's scope) was again made by letter to Council and the same extent of neighbours around the hospital's perimeter on 3 August 2023. Again, following notification, no public submissions were received and Council also did not provide a submission. As this project's scope has been notified twice to these parties and garnered no commentary, it was deemed appropriate that no new or further notification for this scope alone was warranted in late 2023.

Table 8: Stakeholders required to be notified

Stakeholder	Relevant Section
Muswellbrook Shire Council	Section 2.62
Subsidence Advisory NSW	Section 2.15(2)(f)
Occupiers of adjoining land	Section 2.62

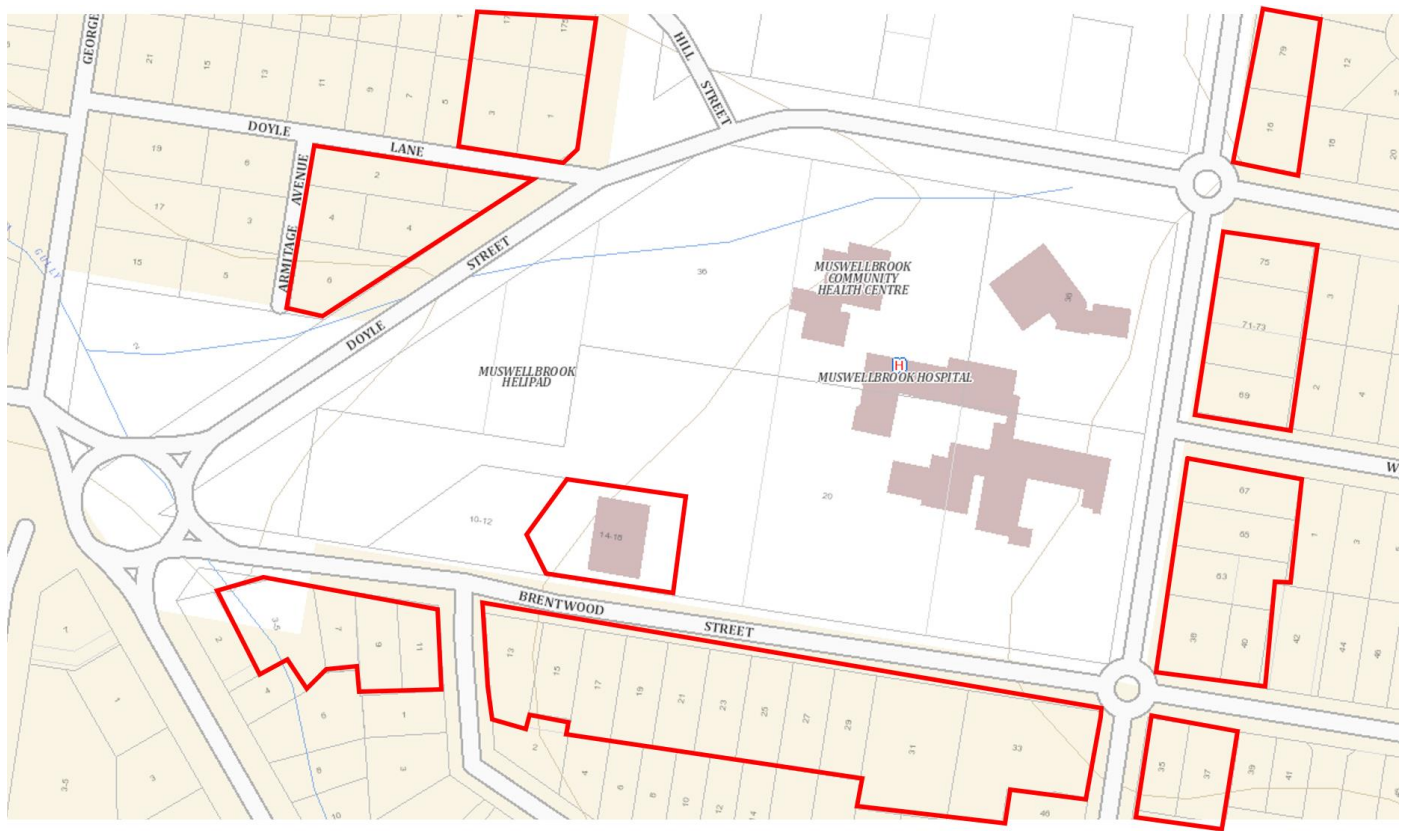


Figure 25 – Extent of neighbour notification (google)

Formal notification is not required under sections 2.10 to 2.14 of the TISEPP. Consultation with Subsidence Advisory NSW was however required under section 2.15(2)(f) of the SEPP as the whole of the Muswellbrook Hospital campus sits within a Mine Subsidence District. No distinction is made with respect to the notification trigger to the scope thresholds of works and any/all works require notification.

Subsidence Advisory NSW was notified on two previous occasions, each time commenting on other matters within the then wider proposed scope of works.

Subsidence Advisory NSW was notified of the currently proposed Community Health works by emailed letter dated 28 November 2023 and responded on 15 December 2023.

Subsidence Advisory NSW advised that *... as the proposal is for internal alterations and no structural changes are proposed to the existing building, no mine subsidence design requirements are considered necessary.*

The recent Subsidence Advisory NSW notification and response is attached at **Appendices M** and **N**.

No other notification to agencies was triggered.

The activity is not traffic-generating development under section 2.122 and Schedule 3 of the TISEPP and referral / notification to Transport for NSW was not triggered in this instance. Further, the hospital is located just outside of the 200km radius of the Siding Spring Observatory forming the NSW Dark Sky Region. Accordingly, notification to the Siding Spring Observatory under section 2.15(2)(d) was also not triggered in this instance. No other agency notification was triggered.

Community and Stakeholder Engagement

The communications and engagement approach for the Stage 3 Redevelopment project focusses on strategically and proactively engaging the community and key stakeholders including staff, health providers, Government agencies, patients, neighbours and surrounding communities – from planning and design through to construction and handover. This included Project User Groups, Staff information sessions, project briefings, media releases, website and newsletter updates. Refer to **Appendix O** for the Engagement Report.

An overview of the community engagement comments received are outlined and responded in the table below.

Community Engagement Activities	Date	Feedback	Project Response
Community information session – Concept Design	June 2022	Is there any additional car parking to be provided on the campus.	No increase in services as this is an asset replacement project resulting in no change to car parking arrangements.
Community email update – Overview of 2022 activities	December 2022	Nil	Nil
Revised Scope change briefing of internal and external stakeholders – Website Update/Email/briefings	July 2023	Ensuring future development opportunities preserved.	Independent architectural review of the master plan undertaken to identify and optimise future development opportunities. Relocation of community health will enable the future realisation of the master plan.
Project briefing – Aboriginal Community and Staff	August 2023	Integration of spaces that support the health, wellbeing and cultural safety of local community.	Maximising the placement of staff and patient areas along the perimeter of the Community Health departmental layout to support connection between people and nature.
Alternate scope change – Community website update and email	November 2023	Nil	Nil

6. Environmental Impact Assessment

6.1 Environmental Planning and Assessment Regulation 2021 – Assessment Considerations

The relevant assessment considerations under Section 171(2) of the EP&A Regulation are provided below.

Table 9: Summary of Environmental Factors Reviewed in Relation to the Activity

Relevant Consideration	Response/Assessment		
a) Any environmental impact on a community	<p>The proposal will have a generally positive and ongoing impact on the health services provided by the hospital for the community of Muswellbrook and the broader Hunter Region.</p> <p>From an environmental standpoint the project enables the fitout and use of part of the Stage 2 Building as originally envisaged in its approval process. The project makes renewed best use of the hospital campus' capacity to provide enhanced services without significant and long-term impact upon neighbours.</p> <p>During construction, a minor increase in trucks and construction operations may have a noise impact, however this will be managed and mitigated through appropriate measures during works.</p>	-ve	Short term traffic and noise impacts during construction
		Nil	
		+ve	Long term once operational
(b) Transformation of a locality	As the works will sit within the footprint of the Stage 2 building there will not be a change to the nature of the locality. The hospital's scale, function, and appearance will generally remain the same.	-ve	
		Nil	X
		+ve	
(c) Any environmental impact on the ecosystem of the locality	The proposal will result in no loss of trees and no offsetting or replacement trees will be required. The works have no environmental impact on the ecosystem of the locality.	-ve	
		Nil	X
		+ve	
d) Any reduction of the aesthetic, recreational, scientific or other environmental quality or value of a locality.	There will be no reduction of the aesthetic, recreational, scientific or other environmental quality or value of a locality. The works are confined to existing developed and disturbed areas of the hospital campus and in areas set back from other adjoining land uses.	-ve	
		Nil	X
		+ve	
e) Any effect on locality, place or building having aesthetic, anthropological, archaeological, architectural, cultural, historical, scientific, or social significance or other special value for present or future generations.	The proposal will not have any adverse effect on locality, place or building having aesthetic, anthropological, archaeological, architectural, cultural, historical, scientific, or social significance or other special value for present or future generations.	-ve	
		Nil	X
		+ve	
(f) Any impact on the habitat of protected fauna (within the meaning of the National Parks and Wildlife Act 1974)	No protected fauna (within the meaning of the National Parks and Wildlife Act 1974) will be impacted by the proposal given the urban and disturbed context of the hospital campus and the nature of the works.	-ve	
		Nil	X
		+ve	
(g) Any endangering of any species of animal, plant or other form of life, whether living on land, in water or in the air.	The proposal will not endanger any species or animal or plant as no works occur outside of the Stage 2 building footprint other than a short concrete access path parallel to the length of the Stage 2 building's extent at the undercroft, and within an already disturbed and turfed area of the campus.	-ve	
		Nil	X
		+ve	
(h) Any long term impacts on the environment	There will be no long-term or permanent adverse or negative impact on the natural or man-made environment as a result of the operation of the development.	-ve	
		Nil	X

Relevant Consideration	Response/Assessment	
		+ve
(i) Any degradation of the quality of the environment	The proposal will not reduce the quality of the natural environment, noting no vegetation or trees are impacted or lost.	-ve
		Nil X
		+ve
j) Any risk of safety of the environment	There will be no risk to the safety of the environment as a result of the proposal.	-ve
		Nil X
		+ve
(k) Any reduction in the range of beneficial uses of the environment	There will be no reduction in the range of beneficial uses of the environment as a result of the proposal.	-ve
		Nil X
		+ve
(l) Any pollution of the environment	Indirectly, under the then applicable DGN 058 the new building will improve the campus' existing ESD credentials and result in an at-least 4-star Green Star equivalent development which also improves upon the BCA's Section J ESD requirements by at least 10% and any concomitant pollution-generating activities related to energy production and usage, transportation, and other production of building materials.	-ve X
		Nil
		+ve
(m) Any environmental problems associated with the disposal of waste	The works generally result in demolition and remediation related waste (of which only a small portion is standard hazardous or contaminated materials) for which routine waste classification and removal and disposal methods will be employed. Ongoing clinical and hospital waste will be addressed through currently employed contemporary waste handling methods.	-ve
		Nil X
		+ve
n) Any increased demand on resources (natural or otherwise) that are, or are likely to become, in short supply	The proposal will not result in increased demand on resources (natural or otherwise) that are, or are likely to become, in short supply, noting that under DGN 058 the new building will improve the campus' existing ESD credentials and result in an at-least 4-star Green Star equivalent development which also improves upon the BCA's Section J ESD requirements by at least 10%.	-ve X
		Nil
		+ve
(o) Any cumulative environmental effects with other existing or likely future activities.	See further detailed discussion below. Only modest forms of development have been approved in the immediate vicinity of the hospital with the timing and scale of development unlikely to impact the environment should these works be carried out concurrently.	-ve
		Nil X
		+ve
(p) Any impact on coastal processes and coastal hazards, including those under projected climate change conditions.	N/A – the site is well removed from coastal areas of NSW.	-ve
		Nil X
		+ve
q) Applicable local strategic planning statements, regional strategic plans or district strategic plans made under the Act, Division 3.1	The draft updated Regional Plan 2041 / Hunter Regional Plan 2036 The draft Hunter Regional Plan 2041 was on public exhibition from 6 December 2021 until 4 March 2022. The exhibition was a key part of the plan's first 5-year review. The Hunter Regional Plan is the 20-year strategic planning blueprint to ensure a sustainable future and the ongoing prosperity of the Hunter's vibrant and connected communities. The 3036 vision acknowledges the opportunities provided by natural resources and strong communities and sets the following regionally focused goals: <ul style="list-style-type: none"> A strong and dynamic regional economy A healthy environment with pristine waterways Strong infrastructure and transport networks for a connected future Attractive and thriving communities Given the nature of the works it is unlikely to affect the community in a way that is contrary to any of the higher level vision, objectives or actions of the plan.	-ve X
		Nil
		+ve

Relevant Consideration	Response/Assessment
	<p>The works reinforce and support the provision of health services in the LGA and the health of the LGA.</p> <p>Muswellbrook Local Strategic Planning Statement (LSPS)</p> <p>This was not able to be located on Council's webpage.</p> <p>Local strategic planning statements (LSPS) set out</p> <ul style="list-style-type: none"> the 20-year vision for land use in the local area the special characteristics which contribute to local identity shared community values to be maintained and enhanced how growth and change will be managed into the future. <p>LSPS show how Councils' visions give effect to the regional or district plan, based on local characteristics and opportunities, and the councils' own priorities in the community strategic plans they prepare under local government legislation.</p> <p>Again, given the nature of the works it is unlikely to affect the community in a way that is contrary to any of the higher level vision, objectives or actions of the plan.</p> <p>The works reinforce and support the provision of health services in the LGA and the health of the LGA.</p>

6.2 Identification of Issues

6.2.1 Traffic, Access and Parking

Questions to consider	Yes	No
Will the works affect traffic or access on any local or regional roads?		X
Will the works disrupt access to private properties?		X
Are there likely to be any difficulties associated with site access?		X
Are the works located in an area that may be highly sensitive to movement of vehicles or machinery to and from the work site (i.e. schools, quiet streets)?	X	
Will full or partial road closures be required?		X
Will the proposal result in a loss of onsite car parking?		X
Is there onsite parking for construction workers?	X (although this is not HI policy)	

Stantec has prepared a Transport Impact Assessment with respect to the proposal, including a preliminary construction Traffic Management Plan (see **Appendix P**). Broadly, with respect to traffic movements at the hospital's main entrance, the main car park and ambulance access generates around 14 vehicle movements during a 30-minute period, with through traffic volumes on Brentwood Street minor and equating to around 30 vehicle trips (two-way).

Based on this, the main car park at the hospital is estimated to generate around 30 vehicle trips during the hospital peak hour (based on doubling the 30-minute counts). Minimal traffic activity was observed by Stantec to occur at the other accesses to the hospital on Bowman Street and Brecht Street during this period.

Noting the roads surrounding the hospital are local roads with relatively low traffic volumes throughout the day, key surrounding intersections including the roundabouts at Bowman Street/ Brecht Street; Brecht Street/Brentwood Street; and Brentwood Street/King Street/ Doyle Street/Brook Street all currently operate well with minimal queues and delay throughout the day.

Given there is no anticipated increase in bed or staffing numbers from existing conditions, the Stage 3 Redevelopment – Community Health is not anticipated to result in an increase in parking demand or traffic generation for the site. As there is no increase in traffic generation expected for the site, Stantec advises that the proposal does not warrant any traffic modelling assessment.

As identified in the previous section of this REF, the activity is not traffic-generating development under section 2.122 and Schedule 3 of the TISEPP and referral / notification to Transport for NSW was not triggered in this instance.

The hospital's formal and informal areas of parking at the site cater for some 133 vehicles at the peak period of late morning through to mid afternoon on a weekday. Whilst some 242 unrestricted on-street spaces are available around the perimeter of the hospital site, only some 20 spaces on average are generally used. Broadly, the hospital caters for its parking demand on-site. Again, with no increase in beds, or increase in patient numbers expected, as well as staff numbers, no change in parking demand and required supply arises.

As noted in Section 3, a Construction Traffic Management Plan will be developed by the Contractor upon their engagement. It is envisaged that construction vehicles will enter from Bowman Street and exit via Brentwood Street, with vehicles proceeding onto Brook Street and turning onto New England Highway. This route splits access past the adjacent pre-school and residential neighbours and will limit any direct impacts in choosing a singular option.

Deliveries to within the site will be managed through the existing road within the hospital as agreed with the Project Manager and HNELHD. Relevant management controls to be implemented as required.

During the construction works there will be minimal truck movements per day with peak movements occurring during material deliveries and weekly skip bin removals. Materials will be staged and stored in such a way to promote a clear and safe work site. At all times, materials are to be stored safely within the work area or site compound. While loading and unloading vehicles, it will be clearly stated that vehicles must not obstruct roads, driveways and paths of egress from surrounding buildings or fire protection equipment.

Detailed haulage and delivery routes are yet to be determined, however, as a general principle, heavy vehicles will be restricted to arterial and sub-arterial transport routes. Use of suburban streets will be avoided as far as practicable.

Appropriate traffic management procedures will be implemented and include consultation with Muswellbrook Shire Council.

As detailed in the Preliminary Construction Management Plan prepared by HI and included in **Appendix K**, prior to any construction works occurring the Principal Contractor will develop a detailed Construction Pedestrian and Traffic Management Plan which will detail how traffic, pedestrians and commuters will be managed during construction. It is envisioned that some parking can be accommodated on site adjacent to the Contractor compound, with access off Bowman Street. The Contractor will not utilise any existing staff/visitor parking spaces currently available to the hospital, contractors and sub-contractors will be encourage to car share if parking cannot be fully accommodated on site.

6.2.2 Noise and Vibration

Questions to consider	Yes	No
Are there residential properties or other sensitive land uses or areas that may be affected by noise from the proposal during construction? (i.e. schools, nursing homes, residential areas or native fauna populations)?	X	
Will any receivers be affected by noise for greater than three weeks?	X	
Are there sensitive land uses or areas that may be affected by noise from the proposal during operation?		X
Will the works be undertaken outside of standard working hours? Monday – Friday: 7am to 6pm Saturday: 8am to 1pm Sunday and public holidays: no work		X
Will the works result in vibration being experienced by any surrounding properties or infrastructure?		X Unlikely (only hospital uses)

Acoustic Logic has prepared a construction noise and vibration impact assessment as well as an operational noise impact assessment based on background noise data collection and consideration of relevant guidelines and standards

(see both at **Appendix Q**). It considered noise and vibration affectation upon hospital and adjacent sensitive external land uses. These included receivers as follows:

- Receiver 1 (R1) – Level 1 of the Stage 2 and Main Hospital Buildings
- Receiver 2 (R2) – Ground Level of the Stage 2 and Main Hospital Buildings
- Receiver 3 (R3) – Brentwood Street residential uses
- Receiver 4 (R4) – Commercial premises / take-away food shop on Brentwood Street
- Receiver 5 (R5) – Brecht Street residential uses
- Receiver 6 (R6) – Adjacent pre-school
- Receiver 7 (R7) – Doyle / Hill Street residential uses

Construction Noise and Vibration

Based on the likely / assumed plant and equipment, the scope of works, and current works methodology, Acoustic Logic has concluded the following exceedances of the relevant noise standards (Noise Management Level) is likely to occur with the use of the following equipment.

- R1 – Use of Excavator with Hydraulic hammer attachment, piling rig, demolition saws and the builder's hoist
- R2 - Use of Excavator with Hydraulic hammer attachment, piling rig, demolition saws and the builder's hoist
- R3 – Use of Excavator with Hydraulic hammer attachment, piling rig, Concrete truck and concrete pump, demolition saws, diesel crane, and the builder's hoist
- R4 – No exceedances
- R5 – Use of Excavator with Hydraulic hammer attachment, piling rig, Concrete truck and concrete pump, demolition saws, diesel crane, and the builder's hoist
- R6 – Use of excavator with hydraulic attachment and demolition saw to the outdoor play area only, with no impacts to the internal activity area, but impact from the use of excavator with hydraulic attachment and demolition saw to the internal sleeping areas. (Note the pre-school is unaffected by Saturday work as it is closed Saturdays).
- R7 - Use of Excavator with Hydraulic hammer attachment, piling rig, Concrete truck and concrete pump, demolition saws, diesel crane, and the builder's hoist

It is expected that no external properties would be affected by vibration, however, uses internal to the Stage 2 and Main buildings would likely be impacted by core drilling and hammer drilling activities only.

Management and/or mitigation measures to be applied are set out in full in the assessment, however, these would involve the following:

Noise

Site Specific Recommendations:

- Notification
- Respite periods for high noise generating works
- Vehicle noise
- Equipment selection and maintenance
- Noise reduction practices
- Use of non-tonal beepers on equipment and vehicles

Use of acoustic barriers

Silencing devices

Materials handling practices

Treatment of specific equipment

Establishment of site practices

Noise monitoring (data collection and results monitoring)

Vibration

Vibration monitoring (data collection and results monitoring)

Generally

Overall, effective and direct communication with affected parties should be established and a complaints handling process be employed, consistent with the Acoustic Logic recommendations.

Operational Noise

Acoustic Logic has prepared an Operational Noise Impact Assessment (also at **Appendix P**), for the then wider project. The operational impacts of the development will be limited to the operation of plant and equipment, noting that helicopter and vehicular traffic movements are expected to remain the same as a result of the Stage 3 Redevelopment.

Acoustic Logic has identified the following noise emission targets based on the NSW EPA – Noise Policy for Industry (NPfI) 2017 with reference to the same sensitive receivers referred to earlier.

Table 5 – Project Noise Trigger Levels

Source	Receiver Catchment	Period	PNTL dB(A)	
			L _{eq}	L _{max}
Plant and Site Activity	R3, R5 & R7 Residential Receivers	Day	44	-
		Evening	42	-
		Night	38	52
	R1 & R2 Remaining departments of Muswellbrook Hospital (Hospital Ward)	Worst Hour	50*	-
	R6 'Goodstart Early Learning Muswellbrook' child care centre	Worst Hour	35 (internal)	-
	R4 Commercial	When in use	63	-

* The building is air conditioned and if the external criterion is achieved the internal noise level will comply.

As is typical at this stage of a project, the augmented mechanical plant to service the relocated Community Health Services into the Stage 2 building is not yet specified, designed or known. The details of the plant and equipment will be resolved at certification and can be made to meet the above targets. Accordingly, the above will be achievable through a range of noise mitigating measures such as placement of relevant plant within dedicated plant rooms; ensuring plant operates at reduces levels during off-peak periods such as night time; installation of Vibramats between rigid connection points of slab and plant; use of lined insulated ducting; use of silencers on exhaust fans; shielding; positioning, and the like.

The elevated / perched nature of the building compared to existing plant on, or associated with, the Stage 2 Building coupled with distances from the sensitive receivers to the plant will act as natural noise attenuation coupled with any noise suppressing treatments.

Notwithstanding, and based on the above, a detailed construction noise and vibration management plan, in alignment with Acoustic Logic's recommendations will be required prior to the commencement of the works.

6.2.3 Air Quality and Energy

Questions to consider	Yes	No
Could the works result in dust generation?	X	
Could the works generate odours (during construction or operation)	X (construction)	

Will the works involve the use of fuel-driven heavy machinery or equipment?	X
Are the works located in an area or adjacent to land uses (e.g. schools, nursing homes) that may be highly sensitive to dust, odours, or emissions?	X (pre-school)

Based on the preliminary Construction Management Plan, dust generation is anticipated and shall be managed through:

- Erection of hoardings and shade cloth around the site works;
- Covering of all haulage trucks with tarpaulins,
- Monitoring of weather conditions (including wind)
- Installation of shaker grid, wheel wash facilities, hosing of egressing trucks to prevent tracking of soil onto roadways outside of the site,
- Daily cleaning regime which shall be managed by the Contractor

The appointed contractor shall be responsible for developing a project specific dust prevention and management plan which shall form part of an Air Quality Management Plan for the works.

Air Quality Management Plan shall take into consideration and address any requirements associated with AHFG Part D – Infection Prevention and Control that may triggered by the construction. It is also expected that odour problems will be minimal. All plant and machinery involved in the works will be regularly serviced and checked for exhaust emissions.

Standard air quality mitigations measures are recommended.

6.2.4 Soils and Geology

Questions to consider	Yes	No
Will the works require land disturbance?		X
Are the works within a landslip area?		X
Are the works within an area of high erosion potential?		X
Could the works disturb any natural cliff features, rock outcrops or rock shelves?		X
Will the works result in permanent changes to surface slope or topography?		X
Are there acid sulphate soils within or immediately adjacent to the boundaries of the work area? And could the works result in the disturbance of acid sulphate soils?		X
Are the works within an area affected by salinity?		X
Is there potential for the works to encounter any contaminated material?		X

As identified earlier, from a geotechnical perspective the site is located within a Mine Subsidence district and extensive consultation with Subsidence Advisory NSW has occurred in relation to the design and structural details of the works across its various phases. Subsidence Advisory NSW has advised ... *as the proposal is for internal alterations and no structural changes are proposed to the existing building, no mine subsidence design requirements are considered necessary.*

No earthworks and cutting or filling result, however only minor regrading of the area to the northern elevation of the Stage 2 building undercroft will result in order to provide for a necessary access pathway in this location.

During works, a sediment and erosion control plan will be in place to manage any run-off that may occur due to inclement weather. This is included as part of the Civil Engineering drawing set provided at **Appendix H**. Contamination is addressed in Section 6.2.13 further below.

6.2.5 Hydrology, Flooding and Water Quality

Questions to consider	Yes	No
Are the works located near a natural watercourse?		X
Are the works located within a floodplain?		X
Will the works intercept groundwater?		X
Will a licence under the <i>Water Act 1912</i> or the <i>Water Management Act 2000</i> be required?		X

The works are internal and well removed from the only watercourse running through the hospital campus near its northern boundary and towards the helipad to the campus' west.

In terms of water quality or quantity modelling is not warranted in relation to these works given their relatively minor nature, and contextually internalised nature.

6.2.6 Visual Amenity

Questions to consider	Yes	No
Are the works visible from residential properties, or other land uses that may be sensitive to visual impacts?	X (partially to the east and from the north-west)	
Will the works be visible from the public domain?	X	
Are the works located in areas of high scenic value?		X
Will the works involve night work requiring lighting?		X

The works will be visible from various locations, however given relative distances, be largely indiscernible as a result of the works being infill of the undercroft area.

The neighbouring context and existing built form at the hospital is best described by **Figures 4, 6, 10 and 12** earlier in this REF. No further mitigation measures are considered relevant or necessary with respect to visual amenity impacts.

6.2.7 Aboriginal Heritage

Questions to consider	Yes	No
Will the activity disturb the ground surface or any culturally modified trees?		X
Are there any known items of Aboriginal heritage located in the works area or in the vicinity of the works area (e.g. previous studies or reports from related projects)?		X
Are there any other sources of information that indicate Aboriginal objects are likely to be present in the area (e.g. previous studies or reports from related projects)?		X
Will the works occur in the location of one or more of these landscape features and is on land not previously disturbed? <ul style="list-style-type: none"> • Within 200m of waters. • Located within a sand dune system. • Located on a ridge top, ridge line or headland. • Located within 200m below, or above a cliff face. • Within 20m of, or in a cave, rock shelter or a cave mouth 		X
If Aboriginal objects or landscape features are present, can impacts be avoided?		N/A
If the above steps indicate that there remains a risk of harm or disturbance, has a desktop assessment and visual inspection been undertaken?		N/A

Questions to consider	Yes	No
Is the activity likely to affect wild resources or access to these resources, which are used or valued by the Aboriginal community?		X
Is the activity likely to affect the cultural value or significance of the site?		X

A basic AHIMS Search carried out by _planning Pty Ltd on 12 February 2024 indicates that there are no Aboriginal sites recorded in or near the Muswellbrook Hospital campus. Similarly, no Aboriginal places have been declared in or near the Muswellbrook Hospital campus – see **Appendix R**.

Notwithstanding, and despite how remote the probability, in recognition that Aboriginal objects are protected under the NPW Act regardless of whether they are registered on AHIMS or not, if suspected Aboriginal objects, such as stone artefacts, are located during future works, works must cease in the affected area and an archaeologist called in to assess the finds. If the finds are found to be Aboriginal objects, Heritage NSW must be notified under section 89A of the NPW Act. Appropriate management and avoidance or approval under a section 90 AHIP should then be sought if Aboriginal objects are to be moved or harmed.

In the extremely unlikely event that human remains are found, works should immediately cease, and the NSW Police should be contacted. If the remains are suspected to be Aboriginal, Heritage NSW may also be contacted at this time to assist in determining appropriate management.

6.2.8 Non-Aboriginal Heritage

Questions to consider	Yes	No
Are there any heritage items listed on the following registers within or in the vicinity of the work area? NSW heritage database (includes section 170 and local items) Commonwealth EPBC heritage list?		X
Will works occur in areas that may have archaeological remains?		X
Is the demolition of any heritage occurring?		X

As noted earlier, the hospital site is not identified as a heritage item, nor is it located within a heritage conservation area – see **Figure 24**. The site is also not a State item under the State Heritage Register and is not listed by NSW Health on its s170 Register.

Under the Commonwealth EPBC Act, it appears no Protected Matters relate to the hospital site, including any National Heritage items.

The closest heritage items are as listed below:

- Muswellbrook Cemetery - Bowman and Brecht Streets Lot 7008, DP 1050789 Local I54
- Birralee - 33 Brentwood Street Lot 101, DP 563612 Local I55

Conversation Area ‘C2’ - Muswellbrook Residential Heritage Conservation Area is located to the west of the hospital’s western-most boundary.

As is common on all HI projects, the following mitigation measures apply to the proposed works:

- A standard unexpected finds process should be adopted during works associated with the proposal: An ‘unexpected heritage find’ can be defined as any unanticipated archaeological discovery, that has not been previously assessed or is not covered by an existing approval under the Heritage Act 1977 (Heritage Act) or National Parks and Wildlife Act 1974 (NPW Act). These discoveries are categorised as either:
 - Aboriginal objects (archaeological remains, i.e. stone tools);
 - Historic (non-Aboriginal) heritage items such as archaeological remains. (i.e. artefacts or moveable objects)
 - Human skeletal remains (reportable deaths, Aboriginal objects, or relics).
- Should any unexpected heritage find be uncovered during any future excavation works, the following procedure must be adhered to:

- Stop all work in the immediate area of the item and notify the Project Manager.
 - Establish a 'no-go zone' around the item. Use high visibility fencing, where practical. Inform all site personnel about the no-go zone.
 - No work is to be undertaken within this zone until further investigations are completed.
 - Engage a suitably qualified and experienced Archaeologist to assess the finds.
 - The Heritage Council must be notified if the finds are of local or state significance. Additional approvals will be required before works can recommence on site.
 - If the item is assessed as not a 'relic', a 'heritage item' or an 'Aboriginal object' by the Archaeologist, works can proceed with advice provided in writing.
- Should any unexpected human skeletal remains be uncovered during future excavation works, the following procedure must be adhered to:
 - Do not further disturb or move the remains;
 - Immediately cease all work at the particular location;
 - Notify NSW Police;
 - Notify Heritage NSW Environment Line on 131 555 as soon as practicable and provide available details of the remains and their location; and
 - Not recommence any work at the particular location unless authorised in writing by Heritage NSW.

6.2.9 Ecology

Questions to consider	Yes	No
Could the works affect any <i>Environmental Protection and Biodiversity Conservation Act 1999 (Cth)</i> listed threatened species, ecological community or migratory species?		X
Is it likely that the activity will have a significant impact in accordance with the <i>Biodiversity Conservation Act (2016)</i> ? In order to determine if there is a significant impact, the REF report must address the relevant requirements of Section 7.2 of the BC Act: <ul style="list-style-type: none"> • Section 7.2 (a) – Test for significant impact in accordance with section 7.3 of the BC Act. • Section 7.2 (c) – it is carried out in a declared area of outstanding biodiversity value. 		X
Could the works affect a National Park or reserve administered by EES?		X
Is there any important vegetation or habitat (i.e. Biodiversity and Conservation SEPP) within or adjacent to the work area?		X
Could the works impact on any aquatic flora or habitat (i.e. seagrasses, mangroves)?		X
Are there any noxious or environmental weeds present within the work area?		X
Will clearing of native vegetation be required?		X

Narla prepared a Flora and Fauna Assessment Report in relation to the previous wider scope of works (see **Appendix S**) in order to assess any potential impacts associated with the proposed activity on terrestrial ecology (biodiversity), particularly threatened species, populations and ecological communities listed under the *Biodiversity Conservation Act 2016* (BC Act). A Test of Significance (5-part Test) was undertaken in accordance with the BC Act to assess potential impacts from the proposed activity on BC Act listed threatened ecological communities

The report also recommends appropriate measures to mitigate any potential impacts in line with all relevant State Environmental Planning Policies (SEPPs) and local government plans.

In general, Narla found (as now in part summarised to meet the Community Health Services scope):

- The wider site (to the north of the Stage 2 Building) to be categorised as Planted Exotic / Native Vegetation.
- No threatened flora were identified at the time of the site assessment.
- Owing to the degraded nature of the site it was deemed unlikely that the proposed activity will have a significant impact on listed flora species. Therefore, no further assessment of impacts pursuant to the BC Act (e.g. Biodiversity Development Assessment Report (BDAR)) and/or EPBC Act Referral to Commonwealth will be required.

- Based on unsuitable habitat, geographic distribution and/or the small scale of the proposed activity, it was determined that the proposed works are unlikely to significantly impact upon any potentially occurring BC Act or EPBC Act listed threatened fauna species.
- The proposed wider activity will have low impacts to potential foraging habitat and negligible impacts to potential breeding habitat for these species given their migratory nature. In the unlikely event that these species forage within the subject site, the proposed removal of vegetation will have low impacts to foraging habitat given the large areas of suitable foraging habitat in the surrounding area and in their migratory range. No anticipated net loss of breeding habitat is expected as these species do not breed within or in close proximity of the subject site. As such, the proposed activity is unlikely to a significant impact on these species; therefore, a Referral to Commonwealth pursuant to the EPBC Act should not be required.

Whilst Narla does not make the comment that no Species Impact Statement requirement arises, in this circumstance it is clear that the infill, fit out and operation of the Stage 2 building undercroft will have not impact upon any animals or plants, and consequently no impact upon any threatened species at the hospital. This is because of the building's existing condition and existence upon the site and the works merely formalising the accommodation of this level of the building as anticipated under its earlier REF approval.

6.2.10 Bushfire

Questions to consider	Yes	No
Are the works located on bushfire prone land?		X
Do the works include bushfire hazard reduction work?		X
Is the work consistent with a bush fire risk management plan within the meaning of the <i>Rural Fires Act 1997</i> (RF Act) that applies to the area or locality in which the activity is proposed to be carried out?		N/A

A bushfire assessment has been prepared by Peterson Bushfire which has concluded that the hospital campus is not bushfire prone land. A desk-top assessment of the lands surrounding the hospital was also undertaken to assess if there were any bushfire hazards that may be located within 100 m of the hospital that were inadvertently not identified on the bush fire prone land map. All surrounding lands to a distance of at least 100m consist of managed properties and roads and do not present a bushfire hazard as defined by 'Planning for Bush Fire Protection 2019'. Assessment and compliance in accordance with 'Planning for Bush Fire Protection 2019' is therefore not required.– see **Appendix L**.

6.2.11 Land Uses and Services

Questions to consider	Yes	No
Will the works result in a loss of, or permanent disruption of an existing land use?		X
Will the works involve the installation of structures or services that may be perceived as objectionable or nuisance?		X
Will the works impact on, or be in the vicinity of other services?		X

6.2.12 Waste Generation

Questions to consider	Yes	No
Will the works result in the generation of non-hazardous waste?	X	
Will the works result in the generation of hazardous waste?		X
Will the works result in the generation of wastewater requiring off-site disposal?		X

The works do not result any new or significant increase in waste generation, including hazardous waste. See further discussion below with respect to any hazardous building materials related to the scope of works.

A range of construction waste volumes will be generated across the three phases of works. As noted in the Preliminary Construction Management Plan at **Appendix K**, the Principal Contractor will be required to recycle and reuse materials, where possible. The Contractor will be required to arrange for the sorting and recycling of waste materials

and packaging to ensure maximum recycling is achieved. The Contractor will be committed to achieving compliance with the EPA guidelines.

Notwithstanding, HNELHD's standard waste handling guidelines are applied in relation to operational waste – see **Appendix T**.

6.2.13 Hazardous Materials and Contamination

Questions to consider	Yes	No
Is there potential for the works to encounter any contaminated material?		X
Will the works involve the disturbance or removal of asbestos?		X
Is the work site located on land that is known to be or is potentially contaminated?		X
Will the works require a Hazardous Materials Assessment?		X
Is a Remediation Action Plan required?		X
Is the work category 2 works under Resilience and Hazards SEPP?		N/A

From a hazardous building materials perspective, the lower ground level undercroft has been retained in a crude cold shell finish exposed to the elements, other than for cyclone / interlocking fencing securing the premises. The building is as left upon its completion in 2019. There is no likelihood for any of the typically surveyed hazardous building materials to occur within the scope of the works.

Again, as the existing slab is not to be broken in providing for Community Health Services there is little or no likelihood for any site-based contaminants to be uncovered. This includes the short and minor extent of access pathway works along the building's northern alignment. The Stage 2 building REF addressed contamination and remediation at that time and those works under and in the environs of the building are now long completed. The portion of the works within the undercroft of the Stage 2 Building do not require any further remediation. The development of the Stage 2 Building was subject to remediation works at the site. Asbestos was discovered within the footprint of the proposed building at that time. This was cleaned-up with WSP providing a Clearance Certificate for Asbestos Removal in February 2018.

Notwithstanding, in the remote circumstance, an unexpected finds protocol is applied from both a hazardous building materials and in-ground contamination perspective.

6.2.14 Community Impact/ Social Impact

Questions to consider	Yes	No
Is the activity likely to affect community services or infrastructure?		X
Does the activity affect sites of importance to local or the broader community for their recreational or other values or access to these sites?		X
Is the activity likely to affect economic factors, including employment numbers or industry value?		X
Is the activity likely to have an impact on the safety of the community?		X
Will the activity affect the visual or scenic landscape? This should include consideration of any permanent or temporary signage.		X
Is the activity likely to cause noise, pollution, visual impact, loss of privacy, glare or overshadowing to members of the community, particularly adjoining landowners?		X

A detailed Social Impact Assessment/ Statement is not deemed to be required in this instance given the overall positive impacts the works / activity will have upon the broader Muswellbrook (and Hunter) communities and region. The works relocate and update existing accommodation within the hospital, as envisaged by the earlier Stage 2 building REF.

6.2.15 Cumulative Impact

Questions to consider	Yes	No
Has there been any other development approved within 500m of the site?	X	
Will there be significant impacts (for example, including but not limited to, construction traffic impacts) from other development approved or currently under construction within 500m of the site?		X

Based on Council’s DA tracker there are five DAs or modifications to a DA in proximity of the hospital that are approved in the last 5 years (but yet to lapse), have been completed, or have recently been lodged. These include the following:

- 34 Brecht St, Muswellbrook 2333 NSW - Ancillary Development – Shed
- 67 Brecht St, Muswellbrook 2333 NSW - Dwelling Alterations and Additions and Ancillary Development – Shed
- 33 Brecht St, Muswellbrook 2333 NSW – Garage
- 55 Brentwood St, Muswellbrook 2333 NSW – Dwelling Alterations and Additions
- 62 Brentwood St, Muswellbrook 2333 NSW - Single Storey Dwelling and Detached Secondary dwelling

None of these, combined with the subject works, are of any scale to be considered to have major or disruptive cumulative impacts upon the community should the works be carried out concurrently.

A review of the DPIE State Significant Project’s register reveals the vast majority of projects in Muswellbrook relate to ongoing coal mining and other resources activities that are remote from the hospital. A recent SSD for the Pacific Brook Christian School on Maitland Street is also remote from the site.

In addition to environmental factors, other matters considered in the preparation of this REF include BCA and DDA compliance.

BCA / DDA Compliance

BM+G has prepared a BCA and DDA Compliance Statement with respect to this scope of works (see **Appendix U**). The statement confirms that BM+G have undertaken a review of the architectural plans for the third stage of the redevelopment of Muswellbrook Hospital building against the deemed-to-satisfy provisions of the Building Code of Australia 2022 and the Disability (Access to Premises – Buildings) Standards 2010.

BM+G advises that it is (their) experience that such compliance matters raised in this report are not uncommon for a development of this nature and that they can be readily addressed at the Crown Certificate stage. In this instance, (they) are of the opinion that any amendments required to the design documentation in order to comply with the BCA can be addressed in the preparation of the detailed documentation for Crown Certificate without giving rise to significant changes to the proposal as submitted for REF. BM+G considers that the proposed development can readily achieve compliance with the relevant provisions of the BCA and Access to Premises - Buildings.

7. Summary of Mitigation Measures

Mitigation measures are to be implemented for the proposal to reduce impacts on the environment. The mitigation measures are provided at **Appendix V**.

7.1 Summary of Impacts

Based on the identification of potential issues, and an assessment of the nature and extent of the impacts of the proposed development, it is determined that:

- The extent and nature of potential impacts are low in impact, and will not have significant adverse effects on the locality, community and the environment;
- Potential impacts can be appropriately mitigated or managed to ensure that there is minimal effect on the locality, community; and
- Given the above, it is determined that an EIS is not required for the proposed development activity.

8. Justification and Conclusion

The proposed alterations and additions, fitout, and operation of the lower ground floor of the Stage 2 Building for Community Health Services at Muswellbrook Hospital at Brentwood Street, Muswellbrook is subject to assessment under Part 5 of the EP&A Act. The REF has examined and taken into account to the fullest extent possible all matters affecting, or likely to affect, the environment by reason of the proposed activity.

As discussed in detail in this report, the proposal will not result in any significant or long-term impact. The potential impacts identified can be reasonably mitigated and where necessary managed through the adoption of suitable site practices and adherence to accepted industry standards.

As outlined in this REF, the proposed activity can be justified on the following grounds:

- It responds to an existing need within the community;
- It generally complies with, or is consistent with all relevant legislation, plans and policies;
- It has minimal environmental impacts; and
- Adequate mitigation measures have been proposed to address these impacts.

The environmental impacts of the proposal are not likely to be significant and therefore it is not necessary for an EIS to be prepared and approval to be sought for the proposal from the Minister for Planning under Part 5.1 of the EP&A Act. Further, the activity will not significantly affect threatened species, populations, ecological communities or their habitats, and therefore a Species Impact Statement (SIS) and/or Biodiversity Development Assessment Report (BDAR) is not required.

On this basis, it is recommended that HI approve the proposed activity in accordance with Part 5 of the EPA Act and subject to the adoption and implementation of matters outlined in this report.