

# FINAL SOCIAL IMPACT ASSESSMENT

Blayney Multi-Purpose Service Wiradjuri Country

Prepared for THE APP GROUP 27 September2023

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I confirm this SIA contains all relevant information and complies with legal and ethical obligations of social impact practitioners, including those set out in the Social Impact Assessment Guidelines for State Significant Project, 2023, prepared by the Department of Planning and Environment.

I further confirm that none of the information contained in the SIA is false or misleading.

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## 1. EXECUTIVE SUMMARY

This Social Impact Assessment (SIA) has been prepared for The APP Group for the proposed Blayney Multi-Purpose Service (MPS) Project at 3 Osman Street, Blayney. The proposal seeks to redevelop the Blayney MPS as a part of the NSW Government's \$97 million Multipurpose Services Program to deliver improved access to health and aged care services for communities in rural and remote NSW.

### Assessing social impacts

A SIA is a specialist technical study which identifies and analyses the potential social impacts and benefits associated with a proposal. Social impacts and benefits are the consequences that people experience when a new project brings change.

The potential impacts and benefits of the proposal are assessed by comparing the magnitude of impact (minimal to transformational) against the likelihood of the impact occurring (very unlikely to almost certain). This risk assessment methodology has been applied from the NSW Department of Planning and Environment (DPE) SIA Guideline: Technical Supplement (2023) and is outlined below (See Section 3.3).

### Potential social impacts

Based on the assessment in this report, the key social impacts of the proposal are:

- Health and wellbeing:
  - Delivery of new and improved regional health services upgrades to the MPS will benefit the health and wellbeing of residents in the Blayney area significantly. The redevelopment will increase the scope and capacity of health services available to its users.
  - Increased quality of aged care accommodation/services within the Blayney MPS which will have a significant benefit to the health and wellbeing of residents through increased quality of care.
  - Benefits to users' experience with the expansion of non-medical services and facilities at the Blayney MPS will have a resultant benefit on users' health and wellbeing by enhancing their overall experience of the MPS.
- Livelihood:
  - Additional job opportunities created as a consequence of the Blayney MPS redevelopment, benefitting the livelihood of the local community, specifically those who could be employed in the construction workforce or as medical staff.

Mitigations and recommendations are provided below to help further manage and improve the potential impacts arising from the proposal.

#### Mitigation, management, and enhancement measures

The following mitigations and management measures are provided to manage the potential impacts from the proposal:

- Ensure delivery of MPS Redevelopment in line with anticipated timeframes.
- Implementation of a wellbeing approach for patients in addition to a medical approach.
- Inclusion of intuitive wayfinding throughout the MPS site.
- Provision of a workforce plan which clearly outlines proposed staffing changes.

#### Recommendations

The following recommendations are provided to further manage the potential impacts from the proposal:

- Maintain clear and efficient communication to ensure that community is aware of which services will be introduced, what they can access, and delivery timeframes.
- Once operational consider specific programs and/or activities which could be hosted at these facilities to benefit users.

## 2. INTRODUCTION

Urbis Pty Ltd (Urbis) was engaged by The APP Group to prepare a SIA for 3 Osman Street, Blayney (the site). The SIA is to inform a redevelopment on site to provide additional health and aged care facilities, including an Inpatient Unit, expanded HealthOne services, and expanded emergency services.

## 2.1. PROJECT OVERVIEW

The Blayney Multipurpose Service (MPS) is a small rural health facility located in the Southern Sector of the Western NSW Local Health District (LHD). It is the first line health provider for people within the Blayney catchment and located in the Blayney Local Government Area (LGA). Major redevelopment of the facility is proposed to meet the current and projected demand for services (Biosis 2023).

The Blayney MPS redevelopment is part of the NSW Government's \$97 million Multipurpose Services Program to deliver improved access to health and aged care services for communities in rural and remote NSW. The Blayney MPS redevelopment project value is around \$40 million.

Blayney MPS currently has 29 beds with a mixture of high care residential beds, inpatient beds and 4 treatment bays within the ED treatment space. It is proposed to undertake major redevelopment of Blayney MPS to meet the current and projected demand for services. The redevelopment will provide:

- Residential aged care, all with single rooms.
- An Inpatient Unit, which will also support palliative and respite care.
- An expanded HealthOne, treatment and inpatient areas.
- Imaging services and expanded emergency services.
- Landscaped courtyards and gardens to create a welcoming and supportive environment for patients, visitors and staff.
- Contemporary working environments for staff.
- New parking.

## 2.2. REPORT PURPOSE AND SCOPE

A SIA is a specialist technical study which identifies and analyses the potential positive and negative social impacts associated with a proposal. It involves a detailed and independent study to scope potential social impacts, identify appropriate mitigation measures and provide recommendations aligned with professional standards and statutory obligations.

According to the DPE's SIA Guideline for State Significant Projects (2023), social impacts are the consequences that people experience when a new project brings change. For the purposes of an SIA, 'people' can be individuals, households, groups, communities, businesses or organisations. These impacts can be considered in eight categories shown in Figure 1 below.

Figure 1 Social Impact Categories



Source: DPE, 2023, SIA Guideline for State Significant Projects

## 2.3. STRUCTURE OF THIS REPORT

This report has seven chapters as summarised below:

- **Chapter 1** provides and executive summary of the report, including methodology, potential social impacts, and recommendations.
- Chapter 2 (this chapter) introduces the proposal, purpose and scope of this report
- Chapter 3 outlines the legislative requirements and methodology applied to complete this SIA.
- **Chapter 4** reviews the key findings and strategic directions from relevant state and local policies, as it relates to the proposal.
- **Chapter 5** provides a social baseline of the study area including the site's locality, social and demographic characteristics, and consultation outcomes.
- Chapter 6 outlines a preliminary assessment of expected and perceived social impacts of the proposal.
- **Chapter 7** assess the significant (moderate to very high impacts) of the proposal, including mitigation and management measures.
- **Chapter 8** concludes the SIA by setting out a summary of the social impacts, recommendations and overall impact assessment.

## 3. METHODOLOGY

This section outlines the methodology to prepare this assessment, with reference to the relevant legislative requirements.

## 3.1. LEGISLATION AND GUIDELINES

Section 4.15 of the Environmental and Planning Assessment Act 1979 (EP&A Act) requires the likely impacts of a development in a locality, including social impacts, to be considered and addressed as part of the planning process.

While not a SSDA, and in the absence of local guidelines applicable to the preparation of a SIA from Blayney Shire Council, this assessment has been informed by the Department of Planning and Environment's Social Impact Assessment Guideline (2023) (SIA Guideline).

### 3.2. ASSESSMENT METHODOLOGY OVERVIEW

The following methodology was undertaken to prepare this SIA. The methodology was informed by the guidance contained within the SIA Guideline.

Table 1 SIA Methodology

Background review	Impact scoping	Assessment and reporting
<ul> <li>Desktop site review to understand the local context, surrounding activity and potential social vulnerabilities</li> <li>Review of relevant state and local policies to understand potential implications of the proposal</li> <li>Analysis of relevant data to</li> </ul>	<ul> <li>Review of site plans and technical assessments</li> <li>Identification of impacted groups</li> <li>Initial scoping of impacts.</li> </ul>	<ul> <li>Assessment of significant impacts considering management measures</li> <li>Provision of recommendations to enhance positive impacts, reduce negative impacts and monitor ongoing impacts.</li> </ul>
understand the existing community.		

## 3.3. APPROACH TO ASSESSING SOCIAL IMPACTS

This SIA identifies and analyses the potential social impacts and benefits associated with a proposal. Social impacts and benefits are the consequences that people experience when a new project brings change.

The potential social impacts and benefits of the proposal are assessed by comparing the magnitude of impact against the likelihood of the impact occurring. This risk assessment methodology has been applied from the NSW DPE SIA Guideline: Technical Supplement (2023) and is outlined below.

The likelihood and magnitude levels are determined by subjective and objective components. It considers both individual experiences, community perceptions and technical evaluations.

The likelihood level assesses the probability of the impact occurring impact:

- Almost certain: Definite or almost definitely expected.
- Likely: High probability.
- **Possible:** Medium probability.
- Unlikely: Low probability.
- Very unlikely: Improbable or remote probability.

The level of magnitude assesses the likely significance of the impact and considers several characteristics including:

- Extent: the volume of people expected to be affected and their relative location to the proposal.
- **Duration:** the timeframe and frequency of potential impacts.
- Severity or scale: the degree of change from the existing condition as a result of the impact.
- Intensity or importance: the extent to which people or an environment can adapt to or mitigate the impact, including the value they attach to the matter and their capacity to cope and/or adapt to change.
- Level of concern/interest: the level of interest or concern among the people affected.

Table 2 Social Impact Significance Matrix

	Magnitude level					
		1	2	3	4	5
	Likelihood	Minimal	Minor	Moderate	Major	Transformational
А	Almost Certain	Low	Medium	High	Very High	Very High
В	Likely	Low	Medium	High	High	Very High
С	Possible	Low	Medium	Medium	High	High
D	Unlikely	Low	Low	Medium	Medium	High
Е	Very Unlikely	Low	Low	Low	Medium	Medium

Source: DPE, 2023, SIA Guideline for State Significant Projects: Technical Supplement, p. 13

### 3.4. MITIGATION MEASURES

Social impacts are assessed before and after the implementation of mitigation strategies. Mitigation strategies are designed to reduce negative impacts and enhance positive impacts. Mitigation can take different forms and may be incorporated in the planning, construction, or operational stage of the proposal.

Section 6 of this report assess potential impacts prior to mitigation as part of the impact scoping phase. Impacts which are assessed as moderate or higher are considered significant and included for further assessment in Section 7. The significant impacts are assessed with any planned mitigation to determine the residual impact level.

## 4. POLICY CONTEXT

A review of relevant state and local policies was undertaken to understand the strategic context of the proposed development and any potential impacts. This included the following documents:

- Central West and Orana Regional Plan (The Regional Plan) (2036)
- Regional Economic Development Strategy (REDS) (2018-2022)
- Blayney Shire Council, Local Strategic Planning Statement (LSPS)
- Blayney Shire Council, Community Strategic Plan (CSP) (2022-2032)
- Blayney Shire Council, Settlement Strategy (2020)

A summary of key findings relating to the potential social impacts of the proposal is provided below.

Table 3 Relevant Social Themes from Policy Review

Theme	Summary of findings
Improving access to health services	<ul> <li>The Regional Plan (2036) outlines several of the NSW Government's main investments into the region. This includes funding towards health facilities, such as \$241.3 million for the Dubbo Base Hospital redevelopment, and the establishment of Multi-Purpose Services across the region. These key investments highlight improved health services as a central priority for the region which aligns with the Regional Plan's fourth goal to have dynamic, vibrant and healthy communities.</li> <li>The REDS (2018-2022) aims to leverage the region's strengths as the basis for emerging specialisations, including its healthcare and education infrastructure. For example, the strategy aims to build on the region's specialisation in healthcare through the expansion of existing health services and enhanced retirement village infrastructure.</li> <li>The CSP (2022-3032) identifies the Blayney Multipurpose Facility as a core piece of infrastructure within the region, and as a feature which should continue to grow and improve in the next five years. This is largely due to the predicted</li> </ul>
Supporting local	increase in population and changing demographic needs over the next 20 years. The CSP (2022-2032) also notes that the Blayney Hospital has reached capacity, reinforcing the need for additional investment into surrounding health infrastructure.
Supporting local industries	<ul> <li>The Blayney Shire Settlement Strategy (2020) makes a clear connection between the area's growing industries, such as mining, and the Blayney Shire's changing demographics and housing needs.</li> </ul>
	<ul> <li>More specifically, the Regional Plan (2036) identifies agribusiness, transport and logistics, and mining as the top three economic opportunities within the Blayney LGA. It focuses on supporting key future infrastructure which will benefit these industries, as well as ensuring that the needs of the corresponding population growth will be met. For example, the workers in these industries may have unique health or medical needs, and the population influx will put pressure on existing services in the area.</li> <li>The REDS (2022) aims to develop the region's existing strengths in agriculture, agri-technology, mining, and mining services. This includes a focus of</li> </ul>
	investment into infrastructure projects like rail and roads, as well as a focus on natural resource access to support a sustainable mining sector. These investments will require attention to the impacts which may arise from the

Theme	Summary of findings
	changing population or demographic distribution following the growth of these industries.
Increased housing to meet future needs	<ul> <li>The Regional Plan (2036) underlines 'housing choice for seniors' as a key direction for its future investment. More specifically, this priority outlines the need to meet increased demand for appropriate accommodation options for older people, particularly in regional areas.</li> <li>The Blayney Shire Settlement Strategy (2020) identifies several strategies to meet the short- and medium-term housing needs of the changing demographic profile and population growth within Blayney Shire. For instance, it aims to promote housing development which align with the need for affordable and appropriate housing for an ageing population.</li> <li>Priority four of the LSPS aims to provide diverse housing choices which will meet the changing demographics and population needs. This priority suggests that most residential development should be focused on the towns of Blayney and Millthorpe, due to their locations as centres of service and infrastructure growth.</li> </ul>
Creating liveable cities and towns	<ul> <li>The Regional Plan (2036) specifies its priority to 'deliver healthy built environments and better urban design'. This priority aims to ensure the community's cultural, economic and physical wellbeing, as well as create safe, healthy, and socially inclusive places to meet the needs of the future community.</li> <li>The REDS (2022) aims to 'drive tourism growth and enhance the liveability of the region'. To do so, the strategy focuses on existing strengths, such as healthcare, and infrastructure priorities, including greater access, connectivity, and accommodation infrastructure.</li> <li>The Blayney Shire Settlement Strategy (2020) outlines several key priorities to achieve its 'housing vision', including to provide choice to people of all ages, particularly relevant given the ageing population of the area and current housing shortage.</li> <li>The CSP (2022-2023) prioritises access as a key direction for the Blayney Shire Council, stating that 'all people should have fair access to services, resources and opportunities to improve their quality of life'. To achieve this, it aims to maintain and improve public infrastructure and services, such as health and wellbeing services.</li> </ul>

## 5. SOCIAL BASELINE

This section provides a social baseline of the study area including the site's locality, social context, demographic characteristics, engagement outcomes and areas of social influence.

## 5.1. SOCIAL LOCALITY

The Blayney MPS is located at 3 Osman Street, within the suburb of Blayney. The Blayney MPS is situated adjacent to the Blayney District Hospital and the Douglass Hanly Moir Pathology and provides supplementary health services to the local community.

The study area is located within Wiradjuri country, and home to the Wiradjuri people. The area was encountered by European forces in the early 1800s and became populated with Europeans as the gold mining rush drew attention to the Blayney district in the 1850s. The project site was designated for hospital use in 1885 and has been used for this purpose since then.

The current capacity of the Blayney MPS is 29 beds. This includes a mix of high care residential beds, inpatient beds, and treatment bays within the ED.

The site is located next to the Mid Western Highway (A41), which flows through Blayney to connect the towns of Bathurst (North East) and Cowra (South West), and continues to join other main highways leading towards Sydney (East) and towards Wagga Wagga (South West). The largest land use of the area surrounding the MPS is residential, with ample open space including the King George VI Oval and several tennis courts.



Figure 2 Social Context

Source: Urbis

#### Figure 3 Site Photos



Picture 1 MPS from Osman Street



Picture 3 MPS sign from corner of Osman and Mid Western Hwy



Picture 2 MPS entrance from Osman Street



Picture 4 Corner of Osman and A41



Picture 5 MPS from Mid-Western Hwy Source: Google Maps



Picture 6 Lee Roshana Aged Care and view of MPS

## 5.2. GENERAL COMMUNITY PROFILE

A community profile identifies the demographic and social characteristics of a proposal's likely area of social influence. This is an important tool in understanding how a community currently lives and that community's potential capacity to adapt to changes arising from a proposal.

A community profile has been developed for Blayney based on demographic data from:

- Australian Bureau of Statistics (2021) Census of Population and Housing
- Socio-Economic Indexes for Australia (SEIFA), 2016
- DPE (2019) NSW population projections.

The demographic characteristics of Blayney Shire Council LGA (Blayney LGA) and Greater Sydney have been used, where relevant, to provide a comparison.

According to DPIE's Population Projections (2019), Blayney LGA is expected to increase by 539 people in the next 20 years. This growth will account for a total increase of 7.3%, or an annual population increase of 0.35%, increasing from 7,392 people in 2021 to 7,931 people in 2041. Health and medical services within the area must grow in accordance with this changing population and their needs, as discussed in the Section 3 (Planning Context).

In 2021, it is estimated that there are 2,997 people living in the suburb of Blayney. Key characteristics of this community include:

#### An older population

The median age in Blayney is 38, which is notably lower than the median age in Blayney LGA (43), though similar to NSW (38). This suggests that the regional area has an older population compared to NSW, the local area is reflective of the State average.



## High Indigenous representation

Blayney has a high proportion of Aboriginal and/or Torres Strait Islander peoples (8.1%), compared to both Blayney LGA (5.8%) and NSW (3.4%). This proportion is significant when considering the demand and availability of medical services within the area.



## Lower tertiary qualification

Blayney and Blayney LGA have a smaller proportions of people who have obtained a tertiary qualification (19.9% and 15.2% respectively) compared to that of NSW (23.8%).

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#### High health sector employment

The second largest industry of employment in Blayney is Hospitals, which employs 4.4% of people in the suburb. Hospitals are also the second largest industry regionally, employing 4.2% of people in Blayney LGA.



## Fewer people of working age

Blayney is home to a smaller proportion of working-aged people (25-59), at 40.4%, compared to Blayney LGA (41.5%) and NSW (46.6%). Correspondingly, Blayney has a higher proportion of people aged above 70 (14.4%), compared to Blayney LGA (13.9%) and NSW (12.5%).



#### High levels of Disadvantage

According to 2016 SIEFA data, Blayney is ranked within the bottom 20% of Australian suburbs for relative socio-economic advantage and disadvantage. This suggests that the area experiences high levels of disadvantage, particularly regarding economic resources and education, Blayney is ranked in the bottom 10%.



## Relative linguistic homogeneity

In Blayney, 2.6% of households speak a language other than English at home. These include Urdu, Dutch, Thai, Filipino, and Cantonese. This proportion is similar to that of Blayney LGA (3.0%), significantly lower than across NSW (29.5%). Regarding migration, 9.7% of Blayney's population was born overseas, compared to 13% in Blayney LGA, and 34.6% in NSW.



#### Levels of homelessness

In 2021, there were 6 people identified as experiencing homeless living in the Blayney LGA (0.08%), including an additional 18 people living in crowded dwellings, and 6 people who are marginally housed in caravan parks. This proportion marks a notable decrease from 17 people identified as homeless in Blayney LGA in 2016. However, this data may be influenced by the impact of COVID-19.

### **Key implications**

- The higher median age of Blayney LGA and the higher proportion of elderly people in both Blayney and Blayney LGA indicates that health and medical services are of importance within the regional area. In particular, the MPS's provision of residential aged care and expanded medical services will greatly improve the access of elderly and vulnerable peoples within the regional area.
- The area is also home to a smaller proportion of people who have attained a tertiary qualification, though has strong employment within the healthcare industry. Recognising this, the expansion of the Blayney MPS may also provide employment and economic benefits to the community, such as potential training and/or teaching programs, or partnerships with educational institutions.
- Blayney's high proportion of Aboriginal and/or Torres Strait Islander peoples may indicate that the area has a higher demand for particular health services and medical facilities. As demonstrated by the Closing the Gap report (2020), Aboriginal and/or Torres Strait Islander people experience disproportionate levels of difficulty in accessing health and educational services. This, in addition to the high levels of disadvantage across the area's broader population, suggests that greater access to health services would benefit the community significantly. Priority 2 of the Blayney MPS Clinical Service Plan (CSP) focuses on strategies to ensure meaningful gains in Aboriginal health, such as improving access to health services for Aboriginal people in the Blayney Catchment area.
- Despite the low levels of diversity and multiculturalism in the area, these populations can be particularly
  vulnerable to experiencing poorer health outcomes, or may face additional barriers to accessing health
  services. This is also applicable to people experiencing homelessness, or people who are marginally
  housed, as they may experience additional difficulty and challenges pertaining to health.

## 5.3. HEALTH AND WELLBEING

To better comprehend the demand for health and medical services within the area, an analysis of health data has been completed using:

- HealthStats NSW (2021)
- Australian Institute of Health and Welfare (AIHW)

Health data is only available at the Local Government Administration (LGA) level, of which Blayney is located within the Blayney Shire LGA.

#### Aboriginal Health

Blayney LGA has a higher rate of cardiovascular disease hospitalisations per 100,000 Aboriginal people (1849.0) than across NSW (1609.6). Blayney LGA also has a higher rate of diabetes hospitalisations per 100,000 Aboriginal people (189.3) than in NSW (153.8).



#### **Smoking and Asthma**

Blayney LGA has a slightly higher rate of smoking attributable hospitalisations per 100,000 people than NSW (632.9, 591.9). However, Blayney LGA has a lower rate of asthma hospitalisations per 100,000 people compared to NSW (109.8, 131.7).



#### Overweight and Obesity

Blayney LGA has a significantly higher rate of overweight and obesity attributable hospitalisations per 100,000 people (2432.4) than across NSW (730.0). The rate of overweight and obesity attributable deaths per 100,000 people in Blayney LGA is also higher (at 46.1) than in NSW (39.7).



#### **Mental Health**

Blayney LGA also has a higher rate of intentional self-harm hospitalisations per 100,000 people (104.7) than in NSW (90.7). However, Blayney LGA has a lower rate of alcohol attributable hospitalisations (401.7) than NSW (527.0).



#### Presentations to emergency department

In 2021-22, there were approximately 1,036 presentations to the Blayney MPS ED. This included 97 requiring emergency care, 362 for non-urgent care, less than 5 for resuscitation, 408 for semi-urgent care, and 266 requiring urgent care.



## Local and regional user distribution

According to the Blayney MPS CSP, in 2015/16 people living in the Blayney LGA accounted for 69.4 % of Blayney MPS inpatient admissions. This reveals that 30% of users of the Blayney MPS live beyond the LGA, in surrounding regional areas. Only 1.5% live outside the LHD.

### 5.3.1. Key Implications

- The data above corroborates with the findings in Section 4.2, that the area may have increased demand for services due to a higher proportion of vulnerable peoples, including Aboriginal and/or Torres Strait Islander peoples, people of high socio-economic disadvantage, non-English speaking households, and homeless or marginally housed people. For example, homeless people may drive up the number of ED presentations due to a lack of referral to community services following treatment, such as to social housing (Moore, G., Gerdtz, M., Hepworth, G., Manias, E., 2010).
- Across the broader Blayney LGA population, higher rates of smoking attributable hospitalisations, overweight and obesity hospitalisations, and intentional self-harm hospitalisations indicates that the local community experiences a significant level of health challenges, and thus demonstrates the need for increased access to relevant services.
- The Blayney MPS catchment area is primarily the Blayney LGA, with the remaining residents residing within the Western LHD. As only 1.5% of visitors reside outside the LHD, this can be determined as the main area of social influence.

### 5.4. CRIME AND SAFETY

As part of the community profile, data from the NSW Bureau of Crime Statistics and Research was also analysed to understand the crime and safety context around the site.

In the year October 2021 to September 2022, crime rates per 100,000 people indicate that the suburb of Blayney has higher levels of certain crime categories compared to NSW. Key findings relevant to this assessment include:

- Robbery incidents: 58.7 (compared with NSW at 20.5)
- Sexual offences: 205.3 (compared with NSW at 183.2)
- Theft incidents: 2141.4 (compared with NSW at 2101)
- Malicious damage to property incidents: 704 (compared with NSW at 596.8). The centre of Blayney is ranked as a low density hotspot.
- Disorderly conduct incidents: 440 (compared with NSW at 214.1)

These rates indicate that there is a higher occurrence of certain crimes within Blayney than across NSW, which may contribute to greater demand on local health and medical facilities.

### 5.5. AREAS OF SOCIAL INFLUENCE

Considering the outcomes from the social baseline, the area of social influence is considered to be the immediate context, Blayney Shire LGA and the Western NSW Local Health District. Within the areas of social influence, the following individuals and communities are likely to be impacted by the proposal:

- local community, particularly vulnerable groups such as any elderly, disabled homeless, Aboriginal and/or Torres Strait Islander, or non-English speaking households;
- current patients and staff at the MPS;
- upcoming health professionals in the regional area; and
- surrounding hospitals of Bathurst and Orange.

### 5.6. IMPLICATIONS FOR THE PROPOSAL

The Blayney MPS is designed to provide general inpatient medical services, residential aged services, and ambulatory and emergency care services, However, any patients requiring care above the level available at Blayney MPS are often transferred to the Bathurst (38kms from Blayney) or Orange (40kms from Blayney) hospitals. For example, inpatient surgical/procedural, paediatric and maternity care are not available at the Blayney MPS. As such, the increased accessibility and capacity of health services at Blayney MPS will also have an indirect impact on these hospitals.

Given the high proportion of Aboriginal and/or Torres Strait Islander peoples residing in the local area, the recognition of Aboriginal heritage and culture and engagement with Aboriginal communities throughout the redevelopment of the site may help to ensure their needs are adequately met.

While we may recommend that the Blayney MPS acquire new/additional staff or implement new training/education pathways, this is dependent on both the supply of health/medical professionals in the area, as well as the funding and capacity of the MPS after upgrades have been completed.

Several of the upgrades to the MPS are intended to improve the overall experience of both staff and patients while at the MPS, in addition to expanded health facilities. For example, the addition of new wayfinding and signage could greatly assist anyone unfamiliar with the MPS, such as migrants or non-English speakers.

## 6. EXPECTED AND PERCEIVED IMPACTS

As a consequence to this proposal there will be direct and indirect social impacts and benefits to the community. This SIA has assessed the expected and perceived impacts which are considered to have the most material impact on the community.

The following section outlines the impact scoping considerations which were used to inform the determination of significant social impacts. These impacts have been informed by the contextual information outlined in Sections 1 - 4 of this SIA and have been assessed against the SIA criteria described in Section 3.

## 6.1. NEUTRAL TO LOW IMPACTS

This section outlines the social impacts considered to have a neutral to low impact on the community. These are not considered to have a significant impact on the community and are not included for further assessment.

Table 4 Initial Scoping of neutral to Low Impacts

Potential impact	Social impact category	Impact assessment summary
Disrupted access to existing health services during construction	Accessibility	The construction of new buildings and/or parking may have an adverse impact on the groups who regularly use and access the MPS facilities. The Traffic and Parking Impact Assessment (TIA) outlines the lack of public transport available surrounding the MPS, as the closest bus and train services are located more than a kilometre to the north. As such, all user groups are assumed to drive to the MPS, either via private car or ambulance. The TIA outlines three stages of construction, each of which have separate potential traffic impacts and adjustments. During Stage 1, the construction of the new Residential Aged Care (RAC) and Inpatient Unit (IPU) will require the demolition of existing fleet parking and staff only parking. This loss of parking will be partially offset by a temporary car park, proving 10 car spaces. Stage 2 mainly affects the access routes of ambulances, transferred to Queen Street. Stage 3 involves the demolition of remaining building, and construction of the new carpark. Regarding the management of traffic during construction, a Construction Traffic Management Plan (CTMP) will be designed to minimise traffic, transport, and parking impacts during the construction staged of the project. Recognising the protocols of the CTMP, the project will cause minimal disruption to the access to the MPS during construction, and hence have a neutral to low impact on groups who regularly frequent the MPS.
Disrupted access to existing health services during operation	Accessibility	The TIA states that due to the increased staffing roster and expansion of facilities, there will be a marginal increase of approximately 12 vehicle trips during peak periods. The impact of this increase is deemed as 'negligible'. The peak parking demand once the new facilities are operational is expected to be 60, which will be catered for by the provision of 64 parking spaces. This change is hence deemed negligible.

Potential impact	Social impact category	Impact assessment summary
Parking related impacts on residents	Way of life	Due to the changes to parking for the MPS, during both construction and operation, surrounding residents may experience impacts to their ability to find available parking. The TIA deems the overall change to parking demand and provision as negligible, however this assumes that the surrounding street parking is available for MPS use. It is possible that the existing demand renders surrounding street parking as busy and unavailable for residents, hence any changes may disproportionately impact this group. However, due to the provision of additional spaces by the Blayney MPS upgrades, there will be minimal change to the current availability of parking for residents, and hence the impact on resident's use of surrounding parking will be negligible.
Noise disturbance during construction	Surroundings	General noise during construction may impact the amenity of patients and staff, surrounding homes, or nearby businesses. The Noise Impact Assessment (NIA) undertook noise level monitoring at 4 locations within and surrounding the project site. From this, the NIA found that the main source of external noise is the traffic movements from the Mid-Western Highway (A41), which measured at 58dB(A)L during the daytime, and 52dB(A)L at night. Both measurements are above the acceptable internal noise level criteria of a bedroom at night (35dB(A)L) and a bedroom during the day (40dB(A)L). To mitigate these exceedances, the NIA recommends several construction measures to comply with the project noise objectives, including glazed windows and doors (of a certain type and quality), and an external light weight roof construction on the Blayney MPS. The NIA also notes that the new carpark will alter noise levels by less than 2dB(A), representing a negligible increase. Regarding the amenity noise level at residential receivers, all project amenity noise levels are below the recommended noise levels during the day, evening, and night. Regardless, the NIA recommends that routine deliveries to site should be scheduled between the hours of 7am and 10pm, to minimise the potential for sleep disturbance impacts to surrounding residents. Section 8 of the NIA assesses the potential future vibration impacts from construction/operational uses of the hospital site and finds that the adjacent Mid-Western Highway was identified as the highest potential source of vibration, but that no perceptible levels of vibration were identified. To mitigate any potential vibration impacts, the NIA recommends the implementation of lower impact work methods/technologies, the avoidance of carelessly dropping construction materials, and that in the event of a vibration complain sample measurements should be undertaken.

Potential impact	Social impact category	Impact assessment summary
		With the aforementioned mitigations in place, including current architectural layouts and vibration related mitigations, the NIA concludes that the proposal will be able to achieve all relevant acoustic requirements of key guidelines. As such, any noise disturbance impacts during construction will be negligible or low.
Provision of educational or training pathways	Livelihood	The potential for the upgraded MPS to be used for training purposes would benefit any locals wanting to upskill, or who are unemployed or underemployed. The MPS currently employs a clinical nurse educator (employed for eight hours a week) who provides nursing education within the MPS. The Blayney MPS Workforce Plan states that student training is provided as much as possible, and ensures that students are provided with education, mentoring, and a buddy system when at Blayney (WFP, Section 3.2.2).
		However, the Blayney MPS Clinical Services Plan (2018-2028) notes that there is no designated education room in the facility, and that there should be a priority upon ongoing nurses education/training, particularly in key areas like generalist nursing, gerontology, palliative care, and rehabilitation.
		The Australian Government's 'Educating the Nurse of the Future' Report (2019) highlights a disjoint between workforce planning and education, such as the number of graduating nursing students and the lack of jobs available to them. The potential for the Blayney MPS to provide some of these entry level positions may be valuable for NSW.
		Given the potential for additional educational opportunities, yet recognising the scale and funding of the MPS, this impact is anticipated to be low or negligible.
Loss of, or damage to, trees on site	Surroundings	The Preliminary Tree Assessment (Creative Planning Solutions 2022) assesses the significance and retention values associated with trees on the project site, particularly how they contribute to the immediate and local landscape character and amenity. Of the 60 trees identified on the site, 22 were assessed as having a 'high' retention value and were prioritised as a recommendation for the project to preserve. The Arboricultural Impact Assessment (AIA) (Creative Planning Solutions 2023) provides further evaluation of the 60 trees located on and adjoining the project site. Based on this assessment, the AIA recommends that 27 trees are removed, while the remaining 32 trees are retained and protected. One tree is considered to be of significant sentimental value, and hence is recommended to transplant the tree from its current location. Despite the report's assessment that 27 trees do not hold any 'retention value', the loss of trees may result in a loss of amenity on the site, particularly given the aesthetic value held by patients, workers, and surrounding community members and residents. However,

Potential impact	Social impact category	Impact assessment summary
		as those trees deemed as having 'retention value' will remain, this impact will be low.
Impacts to the heritage, or connection of Aboriginal communities to the area	Culture	The Aboriginal Due Diligence Assessment (ADDA) (Biosis 2022), recommends that no further archaeological work is required, as the study area is assessed as having low archaeological potential. The ADDA also outlines specific actions should any Aboriginal objects be found during the project, as well as if any Aboriginal remains are located on the site. This impact would potentially affect the local Aboriginal and/or Torres Strait Islander population. The Statement of Heritage Impact (SoHI) notes the historical value of the site as a community hospital to the surrounding community, though it states that the site is not a heritage item. There are four houses nearby which are identified as local heritage items, however the SoHI states that there will be no change in views and that there would be no negligible impact on the heritage value of nearby heritage items. As such, the impacts of the development are deemed as 'minor' and 'acceptable'. The SoHI also outlines several considerations for ensuring the site retains its significance as a part of the surrounding community infrastructure, including interpretative signage, landscape design, highlighting the original location, form and use of the Cottage Hospital, the historic role of the hospital/MPS in Blayney, and to salvage and provide context to the original opening stone tablet, subsequent plaques, and other material. As the site has been assessed as having low archaeological potential, and as the impacts to any heritage items are assessed as 'minor' and 'acceptable' or low.

## 6.2. MODERATE TO HIGH IMPACTS

Section 6 outlines the social impacts which were identified in preliminary scoping as likely to be moderate to high. These impacts are considered significant and are included for further assessment in Section 7 of this report.

Potential impact	Social impact category	Potentially impacted groups	Preliminary assessment
Increased access to health facilities	Health and wellbeing	Local community, regional community (especially vulnerable peoples)	Following the upgrades to the Blayney MPS, the scope and capacity of health services available to its users will be greatly expanded. This is significant for the local area and wider regional users due to the levels of existing health challenges, and the area's aging population, as demonstrated by Section 4 (Social Baseline).
Increased quality of affordable and accessible accommodation for aged care	Health and wellbeing, way of life	Elderly population	As highlighted by Section 3 (Policy Context), aged care is one of the region's key priorities as the community's demographics and housing needs change. These upgrades to the internal quality of rooms and quality of care available are hence significant for the local community.
Improvements to the experience of users	Health and wellbeing	All staff and patients	In addition to a greater scope and capacity of health services, the upgrades and expanded services of the MPS will also benefit the overall experience of users and staff.
Provision of job opportunities	Livelihood	Local community, regional medical staff	Jobs will be required for the construction of new buildings, as well as for healthcare professionals to serve the updated facilities. This provision of additional jobs will benefit the construction workforce and healthcare workers.

Table 5 Initial Scoping of Moderate to High Impacts

## 7. ASSESSMENT OF SIGNIFICANT IMPACTS

The following section provides a detailed assessment of the significant social impacts of the proposal, as identified in Section 6. The significant impacts are assessed with any planned mitigation measures to determine the residual impact level. The assessment process used to determine each impact level is described in Section 3.

### 7.1. HEALTH AND WELLBEING RELATED TO INCREASED ACCESS TO HEALTH FACILITIES

#### **Description of impact**

The health and wellbeing of the local community will be greatly benefitted by the increased scope and capacity of health services at the Blayney MPS following the project upgrades. The upgrades to the MPS will improve the accessibility of health services for all users, including regional users, as well as the quality and levels of care which can be provided by the MPS.

#### **Current environment**

Section 4 (Social Baseline) highlighted the existing vulnerabilities experienced by Blayney's population, including an ageing population and high rates of existing health issues. The upgrades to the Blayney MPS are hence significant for the local area's current and future needs, as outlined in Section 3 (Policy Context).

#### Impact of the proposal

The Clinical Services Plan (CSP) outlines several upgrades to improve the accessibility of health facilities, including an additional three inpatient beds for the provision of acute/subacute, palliative and respite care, as well as expanded general car parking and the inclusion of accessible covered vehicular 'drop off' zones for both the main MPS entry and HealthOne entry.

Regarding the practical access to the MPS, the Traffic and Parking Impact Assessment (TIA) states that the MPS currently has 54 parking spaces, including street parking. The redevelopment of the MPS will construct a new driveway for HRVs and ambulances, and increase the long-term parking supply to 59 spaces, including two compliant accessible parking spaces.

Mitigation, management, and e measures	enhancement	SIA recommend	dations
<ul> <li>Ensure delivery of MPS Redevelopment in line with anticipated timeframes.</li> </ul>		<ul> <li>Maintain clear and efficient communication to ensure that community is aware of which services will be introduced, what they can access, and delivery timeframes.</li> </ul>	
Residual impact (considering management measures)			
Likelihood: Almost certain	Magnitude: Major		Resultant impact: Very high

Due to the demonstrated existing need for expanded health services, and the health and wellbeing benefits which the MPS will provide, the upgrades to the MPS can be assessed as 'almost certain', and of a 'major' magnitude, resulting in an overall benefit assessment as 'very high'.

# 7.2. HEALTH AND WELLBEING RELATED TO INCREASED QUALITY OF AFFORDABLE AND APPROPRIATE AGED CARE

#### **Description of impact**

The upgraded residential aged care (RAC) facility within the Blayney MPS will provide a notable benefit to the health and wellbeing of residents through increased quality of affordable and appropriate aged care in the area. This project outcome will benefit the elderly proportion of the local population by improving the quality and experience of residents in RAC.

#### **Current environment**

As highlighted by Section 3 of this report, aged care is one of the region's key priorities in future years, particularly as the community's demographics and housing needs change. The social baseline (Section 5 of this report) highlights that Blayney LGA is expected to increase by 539 people in the next 20 years, accounting for a total population increase of 7.3%. Further, the suburb of Blayney has a higher proportion of people aged above 70 (14.4%), compared to Blayney LGA (13.9%) and NSW (12.5%), indicating that future growth will correlate with a greater number of elderly people. The Clinical Services Plan (CSP) outlines how existing bed occupancy has been consistently high (above 94%), with a daily average of 19 occupied beds and a large waiting list (16 in 2018). There is currently only one other aged care facility in Blayney (Lee Roshana Care) which accommodates 26 residents.

To meet future needs, the CSP recommends that the Blayney MPS provide a designated four-bed transitional aged care zone with close access to supportive infrastructure, an additional ten residential aged care beds, expanded ambulatory care services (from two beds to four beds), and the expansion of several communal areas to accommodate additional aged care residents. The Blayney MPS currently provides 20 RAC spaces, and will not provide any additional spaces as part of the upgrade to the RAC facility.

#### Impact of the proposal

Although the Blayney MPS will not provide any additional RAC spaces, the upgrades to the MPS, including the RAC facility, will provide an increased quality of care for residents in the aged care accommodation, through enhanced spaces and internal design, as well as through the increased availability of broader services which will be provided by the Blayney MPS upgrades. The new RAC will be constructed in Stage 1 of the development, with residents moving to the new facility before the existing RAC is demolished in Stage 2 of the construction. As such, there will be minimal disruption to existing residents and patients during construction.

Mitigation, management, and enhancement measures		SIA recommendations	
• Nil		Nil	
Residual impact (considering management measures)			
Likelihood: Almost certain	Magnitude: Minor		Resultant impact: Medium
The improved eventity of event events in the event of the extension of the event of the will be used to be a factor of			

The increased quality of aged care provision is assessed as 'almost certain', which will have a 'minor' magnitude given the health and wellbeing benefits it will provide for a small number of elderly people. As such, the overall benefit assessment is ranked as 'medium'.

### 7.4. HEALTH AND WELLBEING RELATED TO BENEFITS TO USERS' EXPERIENCE

#### **Description of impact**

The upgrade to features such as wayfinding signage, prayer/quiet rooms, or staff meal and utility rooms will ultimately enhance the overall health and wellbeing experience of users' while visiting, staying, working or waiting at the Blayney MPS. The expansion of these non-medical services and facilities will have a resultant benefit on users' health and wellbeing, such as reduced levels of stress and anxiety.

#### **Current environment**

Research has shown that healthcare facility interior features can have a significant influence on users' relationship between stress and wayfinding (Fei Qi, 2022). For instance, poor wayfinding features often leads to a frustrating or stressful user experience, while the addition of elements such as window views or landmarks can provide a better sense of orientation and less spatial anxiety (Fei Qi, 2022).

A literature review by Salonen et al. (2013) also reveals that the physical environments of healthcare facilities need to create a 'healing' and 'psychologically supportive' environment that supports the ability of patients and staff to 'cope with the stress that accompanies illness' (p.4). The specific features of indoor environments which were found to affect health and wellbeing included family areas, areas for staff, and the visual environment (including lighting, exposure to nature, and artwork). For example, the provision of a family area was found to enhance social interaction and increase support from family and visitors, as well as reduce patient falls as they could be assisted while getting in and out of bed (p.7). Similarly, the provision of areas for healthcare staff to 'relax, replenish, network, and communicate with colleagues' was found to increase staff communication, information sharing and teamwork (p.8).

Recognising this, the MPS required upgrades to its non-medical facilities, such as those used by staff or visitors as well as those residing or receiving treatment at the MPS. These upgrades would also work to service the aged care accommodation and an increasing number of staff in future years.

#### Impact of the proposal

The expanded services of the MPS will also benefit the overall experience of users and staff. For example, upgrades include a well-equipped gymnasium and therapy room, the expansion of existing communal areas (such as the dining/lounge area and diversional therapy activity room), a prayer/quiet room, and improvement to wayfinding signage. Specifically for staff, there will also be upgrades to the kitchen and staff meal room, utility room, and equipment/storage rooms.

Mitigation, management, and enhancement measures		SIA recommendations	
<ul> <li>Implementation of a wellbeing approach for patients in addition to a medical approach.</li> <li>Inclusion of intuitive wayfinding throughout the MPS site.</li> <li>Residual impact (considering management meas</li> </ul>		<ul> <li>Once operational consider specific programs and/or activities which could be hosted at these facilities to benefit users.</li> </ul>	
Likelihood: Possible	Magnitude: Minor		Resultant impact: Medium
The upgrades to the non-medical patients using the services of the I and overall benefit assessment of	Blayney MPS, the I		5

## 7.6. PROVISION OF JOB OPPORTUNITIES

#### **Description of impact**

To complete the Blayney MPS upgrades, jobs will be required for the construction of new buildings, as well as for healthcare professionals to serve the increased capacity of the updated facilities. These additional jobs will benefit the livelihood of construction workforce and healthcare workers.

#### **Current environment**

The Clinical Services Plan (2018-2028) identifies a lack of medical officer presence in the emergency care unit at the MPS, which may impact service delivery. For example, it suggests that at least four residential medical practitioners would be required in Blayney to sustain an on-call emergency service. This is one example of an area where the MPS would benefit from increasing its staff and providing additional job opportunities to medical professionals.

#### Impact of the proposal

The Blayney MPS Work Force Plan (2022) states that the current FTE (Full Time Equivalent) is 36.84, with an additional 3.26 FTE visiting staff. The Work Force Plan projects a staff FTE of 53.56 by 3032, and an additional 0.16 FTE from visiting staff. This translates to an increase of approximately 14 staff on site during the peak period (when morning and afternoon shifts are both present). The Work Force Plan (2022) identifies several workforce related gaps in service, including visiting allied health services such as physiotherapy and occupational therapy for outpatients, adult dental services, and counselling services (WFP, Section 3.2). More specifically, this includes:

- An increase of 5.04 FTE for inpatient nursing
- A small increase in Allied Health Assistant hours
- An additional 1.47 FTE for Registered Nurses Ambulatory care
- Additional management hours due to increased bed and staffing
- Increased security in order to provide 24/7 cover
- Increased hours to cleaning and catering profile allocations
- Small increases in the Non-Blayney profile for Occupational Therapy and Physiotherapy outreach services.

These staff members will be accommodated by the expanded facilities of the MPS, hence enabling the MPS to provide extended and advanced health services.

Mitigation, management, and enhancement measures		SIA recommendations	
<ul> <li>Provision of a workforce plan which clearly outlines proposed staffing changes.</li> <li>Residual impact (considering management meas</li> </ul>		No additional recommendations	
······································			
Likelihood: Likely	Magnitude: Minor		Resultant impact: Medium
Given the provision of some jobs during construction, and the levels of anticipated growth of the MPS staff following the redevelopment, this impact is 'likely' to benefit the livelihood of construction or medical			

workers, on a 'minor' scale, hence overall assessed as a 'medium' impact.

## 8. CONCLUSION

This SIA has been undertaken to assess the potential social impacts arising from the Blayney MPS at 3 Osman Street, Blayney.

Based on the assessment in this report, the key social impacts of this proposal are:

- Health and wellbeing:
  - Delivery of new and improved regional health services upgrades to the MPS will benefit the health and wellbeing of residents in the Blayney area significantly. The redevelopment will increase the scope and capacity of health services available to its users.
  - Increased quality of aged care accommodation/services within the Blayney MPS which will have a significant benefit to the health and wellbeing of residents through increased quality of care.
  - Benefits to users' experience with the expansion of non-medical services and facilities at the Blayney MPS will have a resultant benefit on users' health and wellbeing by enhancing their overall experience of the MPS.
- Livelihood:
  - Provision of job opportunities with additional jobs created as a consequence of the Blayney MPS redevelopment, benefitting the livelihood of the local community, specifically those who could be employed in the construction workforce or as medical staff.

### 8.1. RECOMMENDATIONS

The following recommendations are provided to further manage the potential impacts from the proposal:

- Maintain clear and efficient communication to ensure that community is aware of which services will be introduced, what they can access, and delivery timeframes.
- Once operational consider specific programs and/or activities which could be hosted at these facilities to benefit users.

## REFERENCES

This SIA has been informed by a range of data sources, information and technical studies. The following data sources have been used:

#### Demographic, crime and health data

Australian Bureau of Statistics, Census of Population and Housing, 2021, Greater Sydney, Blayney Shire LGA (SA3) and Blayney (SA2) data.

Australian Curriculum, Assessment and Reporting Authority, 2021, School enrolment data.

Bureau of Crime Statistics and Research, Blayney, Blayney Shire LGA and NSW hotspot maps and crime rates.

Department of Planning, Industry and Environment, 2019, NSW population projections.

Healthstats NSW, Blayney Shire LGA.

Australian Institute of Health and Welfare (AIHW),

Profile id. Blayney community profile.

#### **Policy documents**

Central West and Orana Regional Plan (2036).

Regional Economic Development Strategy (REDS) (2018-2022).

Blayney Shire Council, Local Strategic Planning Statement (LSPS).

Blayney Shire Council, Community Strategic Plan (CSP) (2022-2032).

Blayney Shire Council, Settlement Strategy (2020).

NSW Department of Planning, Industry and Environment (2021), Social Impact Assessment Guideline: State significant projects.

International Association for Impact Assessment (2015), Social Impact Assessment: Guidance for assessing and managing the social impacts of projects.

#### **Technical studies**

Acoustic Logic 2023, Noise Impact Assessment (NIA).

Biosis 2022, Aboriginal Due Diligence Assessment (ADDA), APP Corporation Pty Ltd.

Biosis 2023, Blayney Multipurpose Services Redevelopment: Statement of Heritage Impact.

Creative Planning Solutions (CPS) 2022, Preliminary Tree Assessment Report, Health Infrastructure NSW.

Creative Planning Solutions (CPS) 2023, Arboricultural Impact Assessment (AIA).

NSW Government 2023, Blayney Hospital Redevelopment project: Workforce Plan.

SCT Consulting 2023, Traffic and Parking Impact Assessment, Health Infrastructure NSW.

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Moore, G., Gerdtz, M. F., Hepworth, G., & Manias, E. (2011). Homelessness: patterns of emergency department use and risk factors for re-presentation. *Emergency Medicine Journal : EMJ*, *28*(5), 422–427. https://doi.org/10.1136/emj.2009.087239

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