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1 April 2015

Chair
Sydney West JRPP
23-33 Bridge St
Sydney NSW 2000

Dear Sir/Madam

Re: DA0327/13 – Car Parking

We refer to Kuring-Gai Council's Supplementary Recommendations to Sydney West Joint Regional Planning Panel (**JRPP**).

The Applicants respond to the items identified by Council as follows:

1. <u>The number of car spaces provided for the development does not comply with the requirements of Kuring-Gai Local Centres DCP and the RTA (now RMS) Guide to Traffic Generating developments.</u>

The Applicants rely upon and reiterate the submissions made to JRPP in the URaP-TTW Supplementary Parking Report dated 25 November 2014.

Moreover, the Applicants would wish to draw attention to the circumstance that Council's Supplementary Report to JRPP has incorrectly applied the car parking requirements set out in the Kuring-Gai Local Centres DCP (Volume 3 – Part 2) (**Local Centres DCP**).

This has resulted in Council recommending a significantly inflated parking rate requirement for this development.

Council's Supplementary Report states:

> *On the site, post-development, will be:*
>
> *- 360m2 consulting rooms (medical centre) with 11 day staff*
> *- 64 bed hospital with 14 day staff*
>
> *Parking required under Kuring-Gai Local Centres DCP is:*
>
> *Consulting rooms – 1 space per 25m2 of floor area = 14.4 spaces.*
> *Hospital – 1 space per 3 rooms + 1 space per 2 staff = 28.3 spaces.*
> *TOTAL = 43 spaces*

The Applicants maintain that parking post-development, if assessed pursuant to the Local Centres DCP, is to be determined in accordance with the car parking rates prescribed for <u>a "hospital" and not "hospital" and "medical centre".</u>

It is submitted that post-development, the current outpatient rooms within the heritage item could not properly be characterised as a "medical centre" as the provision of health services will extend to "inpatients" and not to "outpatients only". This is established by having regard to the Dictionary definition of "medical centre" within the Local Centres Plan, as follows:

> ***medical centre*** *means premises that are used for the purpose of providing health services (including preventative care, diagnosis, medical or surgical treatment, counselling or alternative therapies) to out-patients only, where such services are principally provided by health care professionals. It may include the ancillary provision of other health services. Note. Medical centres are a type of health services facility—see the definition of that term in this Dictionary.*

The integration of the use of the heritage item with the proposed development is further described in Appendix 2 of the above URaP-TTW Supplementary Parking Report.

In this respect, the Applicants would wish to note that Council had encouraged in early discussions pertaining to this DA that the use of the heritage item i.e. the current outpatient rooms be integrated if possible with the proposed development.

It is submitted that post-development, the current outpatient rooms would appropriately fall within the definition of "hospital". This is because the outpatient rooms would provide "professional health care services… to people admitted as in-patients (whether or not out-patients are also cared for or treated there)".

Further and in the alternative, the outpatient rooms could also be properly described as an ancillary facility consisting of "health consulting rooms" and utilised for tertiary education and research purposes.

The Dictionary definition of "hospital" within the Local Centres Plan bears this out:

> ***hospital*** *means a building or place used for the purpose of providing professional health care services (such as preventative or convalescent care, diagnosis, medical or surgical treatment, psychiatric care or care for people with disabilities, or counselling services provided by health care professionals) to people admitted as in-patients (whether or not out-patients are also cared for or treated there), and includes ancillary facilities for (or that consist of) any of the following: (a) day surgery, day procedures or health consulting rooms, (b) accommodation for nurses or other health care workers, (c) accommodation for persons receiving health care or for their visitors, (d) shops, kiosks, restaurants or cafes or take-away food and drink premises, (e) patient transport facilities, including helipads, ambulance facilities and car parking, (f) educational purposes or any other health-related use, (g) research purposes (whether or not carried out by hospital staff or health care workers or for commercial purposes), (h) chapels, (i) hospices, (j) mortuaries. Note. Hospitals are a type of health services facility—see the definition of that term in this Dictionary.*

The foregoing discussion demonstrates that Council has impermissibly included in its assessment the parking rates for "medical centres" in circumstances where the current outpatient rooms do not satisfy the Dictionary definition of "medical centre" post-development.

This has resulted in a significant and unjustified inflation of Council's assessment of car parking rates under the Local Centres DCP. This is borne out by the following calculation:

> Hospital – 1 space per 3 rooms (21.33) + 1 space per 2 staff (12.5)
> TOTAL: **33.83** spaces

The Applicants' DA includes provision for 37 car spaces. This figure includes 1 ambulance bay + 1 loading bay.

In addition and for the reasons submitted below, this rate is increased to 39 spaces by including the 2 car spaces leased by the Applicants from the adjacent Church. Moreover, by having regard to the circumstance that the Applicants have recently purchased 744 Pacific Highway, an additional 4 spaces may now be available for the use by its patrons/staff.

The total car spaces provided by the DA is 43. This meets the requirements of the Local Centres DCP.

2. <u>The justification for the variation of the parking controls is not supported by the review of similar uses.</u>

Council has misconstrued our purpose in citing the approved development of South Pacific Private Hospital at Curl Curl.

The principle to be derived from this case study is that Warringah Council and Sydney East Joint Regional Planning concurred that it was more appropriate for parking provision for the subject mental health development to be assessed not as a "hospital" but according to a "convalescent home" under the definition of the Roads & Maritime Services (**RMS**) Guide to Traffic Generating Developments (**the RMS Guide**).

Pertinently, this resulted in a greatly reduced parking provision requirement to provide car parking spaces for visitors of 1 space per 10 beds. The determination, which attributed the subject mental health development to a "convalescent home", was not predicated on the availability or otherwise of "on street" parking as suggested by Council.

The South Pacific Private Hospital case study reinforces the Applicants' submission that there are fewer visitors to mental health hospitals compared with general medical or surgical hospitals and that this circumstance must be taken into consideration when assessing the parking demand for a mental health hospital development.

Of significance, Council has now accepted that as per the Appendix A letter attached to the URaP TTW Supplementary Parking Report, there is a low number of visitors to the facility and that patients are not permitted to drive.

However Council has further commented that, "patients need to be dropped off as well as picked up for their home visits later in their stay, which means that on-site parking is required for the carers rather than patients".

In response, the Applicants would wish to clarify that "drop off, pick up" means exactly that. All patients are mobile and do not require the physical escort of carers either to/from the hospital entrance or wards.

It is noted that no submission in opposition is made by Council in respect to the further matters raised in the URaP-TTW Supplementary Parking Report including:

- *The Lawson Clinic's development site has much greater accessibility to public transport than South Pacific Private Hospital which is situated on the Northern Beaches of Sydney.*

- *Similar facilities such as Northside Clinic Greenwich, North Side Clinic Cremorne and The Sydney Clinic Bronte provide no off street parking for their visitors/patrons.*

- *Recently, URaP has been commissioned by RMS to develop car parking and vehicular trip generation rate for hospitals as part of the RMS Guide. It is also understood that RMS is currently investigating to update the RMS Guide with a view to making a clear distinction between "hospitals" and "mental health facilities".*

3. *A reduction in the number of car spaces is not consistent with the promotion of visitation described in the original application documentation and that the existing Lawson Clinic premises leases two car spaces in an adjacent site.*

At the JRPP hearing on 11 September 2014, the Applicants confirmed that two car spaces were leased from the adjacent Church. The Applicants articulated that at one point, a small number of patients were parking on Church premises.

Although the Applicants took appropriate steps to notify all patients, verbally and in writing that parking on Church grounds was not permitted, the Applicants chose to act in good faith and do the right thing by their neighbour.

In this context, the Applicants leased two car spaces to compensate the Church for the odd occasion a patient may, against the Applicants' directions, park on the grounds of the Church.

The provision of the two additional car spaces was not included in the total car spaces to be provided for the site. The Applicants would wish to include those two additional car spaces.

The issue of visitation has been addressed above with Council having now conceded that there are a low number of visitors to the facility.

Points of Consideration:

Council's DCP under Health and Community Services provides a rate of 1 car parking spaces per 40sqm of GFA for "Health Consulting Rooms". This rate would be more appropriate to utilise for this type of facility considering the nature of its activities and low car parking turnover. The application of this would result in the following:

Hospital – 1 space per 3 rooms (21.33) + 1 space per 2 staff (7)
Health Consulting Rooms: 360sqm/40sqm = 9 car parking spaces
TOTAL: **37.3** spaces

It is important to note that the application of 360m2 of GFA for a "medical centre" would be unjustified considering that not all the areas are effectively utilised due to the heritage characteristics of the building. Furthermore, the Applicants have advised Council on numerous occasions that the functions of this facility are not similar to a medical centre.

Other matters

In response to the further matters identified by Council, the Applicants submit:

Mother & baby unit (daily visitors expected)

In relation to visitations, the Applicants rely upon the URaP-TTW Supplementary Parking Report.

After reviewing the policies recently developed as part of the hospital accreditation process, the Applicants confirm that visitations expected to the facility are not anticipated to be any different merely because of the presence of a mother & baby unit consisting of no more than 9 beds.

The Applicants would wish to draw to Council's attention that this unit is not a maternity ward.

Trainees & medical students

The ability to accommodate students / trainees is restricted by the significant confidentiality requirements which apply to mental health settings.

It is proposed to accommodate approximately 1 or 2 students / trainees per day.

It is anticipated that each student / trainee will be allocated to the hospital for no more than 1 day each week. There would be no students during UNSW student holidays which account for approximately 4 months of the calendar year. The 2015 UNSW Academic Calendar confirms the length of each academic semester:

- Semester 1: 2 March – 29 June, 2015
- Semester 2: 27 July – 24 November, 2015

All students / trainees will be required to arrive / depart by public transport.

Conclusion

The car parking demand for the development has been substantiated in a range of 33 to 37 spaces by utilising Council's Local Centres DCP car parking rates. The development provides a total of 43 spaces including an ambulance bay.

Therefore, the required car parking demand per Council's Local Centres DCP has been met.

However, it should be noted that the current State and National transport policies are aimed to promote active and public transport use by restricting car parking provision.

Yours sincerely,

Dr Kam Tara
Director,
URaP-TTW Pty Ltd