JRPP No	2016STH028	
DA Number	DA-2016/1353	
Local Government Area	Wollongong	
Proposed Development	Alterations and additions to Wollongong Private Hospital	
Street Address	362 and 364 Crown Street Wollongong – Stratum lots 1 and 2 DP 121956	
	15 Urunga Parade Wollongong – Lot D DP 402234	
Applicant/Owner	Erilyan Pty Ltd	
Number of Submissions	Four (public objections)	
Regional Development Criteria (Schedule 4A of the Act)		
List of All Relevant	State Environmental Planning Policies:	
s79C(1)(a) Matters	- SEPP No. 55 – Remediation of Land	
	- SEPP (Infrastructure) 2007	
	- SEPP (State and Regional Development) 2011	
	Local Environmental Planning Policies:	
	 Wollongong Local Environmental Plan 2009 	
	Other Policies	
	 Wollongong Section 94A Development Contributions Plan 2016 	
	List any proposed instrument that is or has been the subject of public consultation under the Act and that has been notified to the consent authority: $s79C(1)(a)(ii)$	
	- draft SEPP (Coastal Management) 2016	
	 draft SEPP (Educational Establishments and Child Care Facilities) 2017 	
	- draft SEPP (Infrastructure) 2016	
	List any relevant development control plan: s79C(1)(a)(iii)	
	- Wollongong Development Control Plan 2009	
	List any relevant planning agreement that has been entered into under section 93F, or any draft planning agreement that a developer has offered to enter into under section 93F: s79C(1)(a)(iv)	
	- No relevant planning agreement.	
	List any coastal zone management plan: s79C(1)(a)(v)	
	 There is no Coastal Zone Management Plan currently applicable to the land 	
	List any relevant regulations: s79C(1)(a)(iv) e.g. Regs 92, 93, 94, 94A	
	- Regulations s79C(1)(a)(iv) Regs 92, 94,	
List all documents	Architectural plans by Health Projects International	
submitted with this report for the panel's	Landscaping plans by Arcadia Landscape Architecture	

consideration	
Recommendation	That the proposal is Refused
Report by	Anne Starr Senior Development Project Officer

Summary of	s79C matters
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Yes

Have all recommendations in relation to relevant s79C matters been summarised in the Executive Summary of the assessment report?

Yes
Yes
Not Applicable
, ppnoable

Have draft conditions been provided to the applicant for comment?

No

Executive Summary

Reason for consideration by Joint Regional Planning Panel

The proposal has been referred to Joint Regional Planning Panel pursuant to schedule 4A of the Environmental Planning and Assessment Act 1979 and State Environmental Planning Policy (State and Regional Development) 2011, as the development is a health services facility with a capital investment value exceeding \$5 million.

Proposal

The proposal is for alterations and additions to the existing Wollongong Private Hospital located at 362-364 Crown Street Wollongong. The alterations involve an expansion of the hospital site into the adjoining western allotment (15 Urunga Parade).

Permissibility

The site is zoned SP1 Special Activities pursuant to Wollongong Local Environmental Plan 2009. The proposal is categorised as a health services facility pursuant to State Environmental Planning Policy (Infrastructure) 2007 and is permissible in the zone with development consent.

Consultation

The proposal was notified in accordance with Council's Notification Policy. Four submissions (objections) have been received which are discussed at section 2.9 of the assessment report.

Main Issues

The main issues are:

- Development departure floor space ratio
- · No additional car parking
- · Urunga Parade pedestrian access/footpath levels
- Privacy impact on 17 Urunga Parade
- · Stormwater disposal
- · Waste Management
- · Relationship with existing stratum allotments on 262-264 Crown Street Wollongong.

Further details/amended plans are required to demonstrate compliance with Council's development policies. In its current form, the development is not supported.

RECOMMENDATION

It is recommended that DA-2016/1353 is refused for the reasons set out in Attachment 6.

1. APPLICATION OVERVIEW

1.1 PLANNING CONTROLS

The following planning controls apply to the development:

State Environmental Planning Policies:

- SEPP No. 55 Remediation of Land
- · SEPP (Infrastructure) 2007
- · SEPP (State and Regional Development) 2011

Local Environmental Planning Policies:

• Wollongong Local Environmental Plan 2009

Development Control Plans:

Wollongong Development Control Plan 2009

Other policies

• Wollongong Section 94A Development Contributions Plan 2016

1.2 PROPOSAL

The development application was lodged on 28 September 2016. Amended plans were submitted on 4 April 2017 and are the subject of this report.

The development comprises alterations to the existing Wollongong Private Hospital, by way of a new building on the adjoining allotment. The building would offer both new and duplicate medical facilities and be attached to the hospital.

The proposal involves:

- · Additional six floors plus basement. The new areas contain:
 - o Urunga Parade pedestrian entry
 - 185m² ground floor retail facilities accessed from Urunga Parade
 - Operating theatre expansion (level 1)
 - Inpatient expansion 20 beds (levels 3 and 4). Two beds removed from existing hospital to facilitate bridgelinks. Total 18 new beds overall.
 - New hyperbaric chamber (lower ground level) with emergency parking space (drop off)
 - Consulting suites expansion (level 6)
 - o New plant and administration areas
 - Pedestrian bridge links to the existing hospital (levels 3 and 4).
- Tree removal
- New gross floor area (GFA) = $2084m^2$ (total hospital site = $20164m^2$)
- Resulting floor space ratio (FSR) = 3.63:1
- No additional car parking

Consolidation of the allotments is required.

1.3 BACKGROUND

On 18 April 2011, the Planning Assessment Commission approved construction of Wollongong Private Hospital. The development was a Part 3A Major Project (MP07_0070). Two subsequent modifications have been issued by the Minister (24 September 2013 and 19 November 2013). The approved development description is:

Wollongong Private Hospital, including

Demolition of existing buildings and ancillary structures

8 storey development

3 basement levels of parking for 321 vehicles

New signalised intersection at Crown Street and Staff Street

154 medical, surgical and maternity inpatient beds, operating theatre suites, general practice, diagnostic, clinical and allied health tenancies, specialist medical consulting suites

University teaching centre; and

Ancillary retail tenancy floor space

Modification 1 reduced the required car parking from 321 spaces to 313 spaces, due to a reduction in hospital beds. The consent does not specify the number of spaces required for the hospital proper, as distinct from the consulting suites, retail, and other allied health tenancies. The Colston Budd and Kafes traffic report dated March 2010 submitted with the original MP MP07_0070 development application, identified a minimum 158 spaces required for the hospital.

Modification 2 amended the staging and energy performance of the existing hospital and is not relevant to the proposal.

Stratum subdivision application DA-2014/1431 was approved by Council on 25 May 2015. This created a private hospital allotment (Lot 1) and a consulting suites allotment (Lot 2). The stratum plan has been registered with Land and Property Information NSW. The development consent for the stratum subdivision requires 158 spaces to be preserved for the hospital, in the form of 98 spaces within the hospital allotment (Lot 1) and 60 spaces located on Lot 2, via a positive covenant. Therefore, the remaining 155 spaces (i.e. total 313-158 hospital spaces) would service all other uses apart from the hospital. Strata subdivision of Lot 2 has not occurred.

The private hospital commenced operations in January 2016, managed by Ramsay Health Care.

The proponent initiated an informal meeting with Council on 31 May 2016 to discuss a similar, albeit larger proposal. Council advised it had concerns regarding floor space ratio and lack of car parking, which would need to be addressed in any forthcoming development application.

Customer service actions

There are no outstanding customer service requests that relate to the development.

Appeals

The applicant filed an appeal with the NSW Land E environment Court on 30 May 2017 in respect of a deemed refusal of the development application. The Statement of facts and Contentions was filed with the Court on 22 June 2017 and a Section 34 Conference in respect of the matter is yet to be set down.

1.4 SITE DESCRIPTION

The 5553.09m² site is located at 362 & 364 Crown Street Wollongong and 15 Urunga Parade Wollongong. The title reference for 362-364 Crown Street is Lot 1 and 2 DP 121956 (formerly Lot 1 DP 1191024). The land at 15 Urunga Parade is identified as Lot D DP 402234.

Adjoining development consists of a two storey residential apartment building at 17 Urunga Parade, the existing Wollongong Private Hospital, and a car park and two storey day surgery at 7 Urunga Parade/354-358 Crown Street. The remaining two properties on Urunga Parade to the east of the day surgery are the subject of a current development application for a health services facility (day surgery), to be considered by the Joint Regional Planning Panel.

In a broader context, the neighbourhood is a mix of medical facilities, residential and specialist retail. Wollongong Public Hospital is located on the corner of Crown Street and New Dapto Road. Building heights vary considerably between established residential dwelling houses of 1-2 storeys, 3-4 storey residential apartment buildings and the larger hospitals of around 8 storeys.

The 15 Urunga Parade site itself is relatively flat, with a fall from south to north more pronounced at Urunga Parade. The front boundary sits approximately 1m above kerb level. The existing private hospital allotment has its main entrance on Crown Street, with a rear access to the basement car park provided on Urunga Parade. The loading dock/back of house facilities are located on Urunga Parade and offer little benefit to the streetscape in terms of presentation or public domain treatment. There is no footpath across the existing hospital site. As a medical facility, this outcome is poor. Pedestrians are currently forced to step down into the road (where vehicles may be parked) or negotiate the uneven ground surface to get between the hospital and New Dapto Road.

Property constraints

There are no restrictions on the title for 15 Urunga Parade. The existing hospital allotments contain numerous restrictions associated with servicing, car parking, substation and type of medical use. It is unclear how the proponent would address the existing stratum allotments, with regard to the new building. For example, the new building would be physically attached to Lots 1 and 2 and some areas of Lots 1 and 2 would be accessed by the new facilities.

1.5 CONSULTATION

1.5.1 INTERNAL CONSULTATION

Health Officer

Council's Health Officer has reviewed the application and advised they have no objection, subject to conditions of consent.

Landscape Architect

Council's Landscape Officer has reviewed the application and advised amended plans are required.

Safer Community Action Team (SCAT) Officer

Council's SCAT Officer has reviewed the application and advised they have no objection, subject to conditions of consent.

Stormwater Engineer

Council's Stormwater Officer has reviewed the application and advised amended plans are required.

Traffic Engineer

Council's Traffic Officer has reviewed the application and advised they have no objection, subject to conditions of consent.

1.5.2 EXTERNAL CONSULTATION

None required.

2. ENVIRONMENTAL PLANNING AND ASSESSMENT ACT 1979 SECTION 79C ASSESSMENT

(1) Matters for consideration—general

In determining a development application, a consent authority is to take into consideration such of the following matters as are of relevance to the development the subject of the development application:

(a)	the	provisions of:	
	(i)	any environmental planning instrument, and	See section 2.1
	(ii)	any proposed instrument that is or has been the subject of public consultation under this Act and that has been notified to the consent authority (unless the Director-General has notified the consent authority that the making of the proposed instrument has been deferred indefinitely or has not been approved), and	See section 2.2
	(iii)	any development control plan, and	See section 2.3
	(iiia ₎	any planning agreement that has been entered into under section 93F, or any draft planning agreement that a developer has offered to enter into under section 93F, and	See section 2.4
	(iv)	the regulations (to the extent that they prescribe matters for the purposes of this paragraph), that apply to the land to which the development application relates,	See section 2.5
	(v)	any coastal zone management plan (within the meaning of the Coastal Protection Act 1979),	See section 2.6
		that apply to the land to which the development application relates,	
(b)		likely impacts of that development, including environmental impacts on the natural and built environments, and social and economic impacts in	See section 2.7

	the locality,	
(C)	the suitability of the site for the development,	See section 2.8
(d)	any submissions made in accordance with this Act or the regulations,	See section 2.9
(e)	the public interest.	See section 2.10

2.1 SECTION 79C 1(A)(I) ANY ENVIRONMENTAL PLANNING INSTRUMENT

2.1.1 STATE ENVIRONMENTAL PLANNING POLICY NO. 55 - REMEDIATION OF LAND

7 Contamination and remediation to be considered in determining development application

The subject site is zoned for hospital related services and is currently being used for residential purposes. There is no previous history of other uses that could be considered to be potentially contaminating. The site is considered unlikely to be contaminated and is suitable for the proposed development. No concerns are raised in regard to contamination as relates to the intended use of the land and the requirements of clause 7. Therefore the proposal is considered to be consistent with SEPP 55.

2.1.2 STATE ENVIRONMENTAL PLANNING POLICY (INFRASTRUCTURE) 2007

Division 10 Health services facilities

The development is a 'health services facility' as defined in the SEPP. Division 10 (clauses 56-58) relate to health services facilities.

Clause 56 provides the definition:

health services facility means a facility used to provide medical or other services relating to the maintenance or improvement of the health, or the restoration to health, of persons or the prevention of disease in or treatment of injury to persons, and includes the following: (a) day surgeries and medical centres,

- (b) community health service facilities,
- (c) health consulting rooms,
- (d) facilities for the transport of patients, including helipads and ambulance facilities,
- (e) hospitals.

The SP1 Special Activities zone is a prescribed zone for the purpose of the Division.

Clause 57 authorises health services facilities in a prescribed zone with consent.

No other provisions of the Division relate to the development. The Division does not confer any bonuses in the way of floor space ratio, building height etc.

Division 17 Roads and Traffic

Clause 101 Development with frontage to a classified road

Crown Street is a classified road. Matters for consideration under subclause (2) are satisfactory. No change to the existing hospital car parking entry is proposed (existing entry available from Crown Street and Urunga Parade).

Clause 102 Impact of road noise or vibration on non-road development

Not applicable as Crown Street does not have annual average daily traffic volume exceeding 40,000 vehicles (according to RMS traffic volume viewer website). A *Noise Impact Assessment* prepared by Acoustic Logic dated 20 September 2016 has been submitted.

Clause 104 Traffic generating development

The total number of beds resulting from this development would be 167 (149 beds under Mod 1 MP07_0070 existing hospital plus 18 new beds). Referral to RMS is not required.

An Assessment of Traffic and Parking Implications prepared by Transport and Traffic Planning Associates dated September 2016 has been submitted. Council's traffic engineer has considered the impacts upon traffic safety, road congestion and car parking.

2.1.3 STATE ENVIRONMENTAL PLANNING POLICY (STATE AND REGIONAL DEVELOPMENT) 2011

The application is referred to the Joint Regional Planning Panel pursuant to clause 21 of the SEPP. Schedule 4A of the Act classifies development for health services facilities with a capital investment value exceeding \$5 million as regional development.

2.1.4 WOLLONGONG LOCAL ENVIRONMENTAL PLAN 2009

Part 2 Permitted or prohibited development

Clause 2.2 – zoning of land to which Plan applies

The zoning map identifies the land as being zoned SP1 Special Activities.

Clause 2.3 – Zone objectives and land use table

The objectives of the zone are as follows:

1 Objectives of zone

- To provide for special land uses that are not provided for in other zones.
- To provide for sites with special natural characteristics that are not provided for in other zones.
- To facilitate development that is in keeping with the special characteristics of the site or its existing or intended special use, and that minimises any adverse impacts on surrounding land.

The additions to the existing hospital expand its capacity, and are consistent with the special activities zone. However, aspects of the development would not adequately minimise adverse impacts on the general neighbourhood and adjoining development. These matters of concern include car parking, security and access, waste management and privacy.

The land use table permits the following uses in the zone.

2 Permitted without consent

Building identification signs; Business identification signs

3 Permitted with consent

The purpose shown on the Land Zoning Map, including any development that is ordinarily incidental or ancillary to development for that purpose; Advertising structures; Child care centres; Community facilities; Information and education facilities; Recreation areas; Recreation facilities (indoor); Recreation facilities (major); Recreation facilities (outdoor); Respite day care centres

4 Prohibited

Any development not specified in item 2 or 3

Relevant additional purposes shown on the land use zoning map are:

Wollongong Hospital Precinct: Boarding houses, dwelling houses, food and drink premises, helipads, neighbourhood shops, funeral chapels, funeral homes, hostels, mortuaries, multi dwelling housing, place of public worship, residential flat buildings, seniors housing, and shop top housing.

The proposal is categorised as a 'health services facility' as described below and is permissible via State Environmental Planning Policy (Infrastructure) 2007.

Clause 1.4 Definitions

'Health services facility' is defined:

health services facility means a building or place used to provide medical or other services relating to the maintenance or improvement of the health, or the restoration to health, of persons or the prevention of disease in or treatment of injury to persons, and includes any of the following:

- (a) a medical centre,
- (b) community health service facilities,
- (c) health consulting rooms,
- (d) patient transport facilities, including helipads and ambulance facilities,
- (e) hospital

The Statement of Environmental Effects does not separately discuss the retail tenancy on the ground floor, defining the whole building as a health services facility. No further discussion occurs as to the operation of this tenancy to demonstrate it is ancillary to the hospital.

For clarity, the ground floor 'retail' area could be defined 'food and drink premises'. No general retail is permissible in the zone.

Food and drink premises means premises that are used for the preparation and retail sale of food or drink (or both) for immediate consumption on or off the premises, and includes any of the following:

- (a) a restaurant or cafe,
- (b) take away food and drink premises,
- (c) a pub,
- (d) a small bar.

Note. Food and drink premises are a type of retail premises—see the definition of that term in this Dictionary.

Part 4 Principal development standards

Clause 4.3 Height of buildings

The maximum permitted building height is 32m.

The proposed building height is approximately 27.2m, to the medical suites atop level 6 of the existing hospital and 24.45m to the new floors on 15 Urunga Parade.

Clause 4.4A Floor space ratio - Wollongong city centre

The maximum permitted floor space ratio (FSR) is 3:1.

The combined site area is 5553.09m². The existing hospital site at 282-284 Crown Street has an area of 4984m² and 15 Urunga Parade is 569.09m². These dimensions are taken from the deposited plans, as a detailed survey plan confirming area was not provided.

The existing hospital under Mod 1 has an approved gross floor area of 18,080m². At the time, this equated to a floor space ratio of 3.63:1.

The Summary of Areas submitted with the application details the existing, proposed and resulting floor space. Permitted exclusions for plantroom and circulation have been calculated. The resulting floor space is 20,164m², which on the 5553.09m² site equates to a floor space ratio of 3.63:1.

The development exceeds the permitted FSR for the combined site and therefore a development departure is required by clause 4.6.

Clause 4.6 Exceptions to development standards

A statement pursuant to clause 4.6 has been provided. However, it fails to adequately address matters for Council's consideration under sub-clause 4.

WLEP 2009 clause 4.6 proposed development departure assessment			
Development departure	Clause 4.4A Floor space ratio - Wollongong City Centre		
Is the planning control in question a development standard	Yes		
4.6 (3) Written request submitted	by applicant contains a justification:		
that compliance with the development standard is unreasonable or unnecessary in the circumstances of the case, and	Yes – clause 4.6 development departure statement provided, dated September 2016. The statement identifies the objectives of the standard and pages 4 & 5 discusses whether the standard is unreasonable or unnecessary in the circumstances of the case.		
that there are sufficient environmental planning grounds to justify contravening the development standard.	Yes – page 5 discusses whether there are sufficient grounds to justify contravening the standard.		
4.6 (4) (a) Consent authority is sa	tisfied that:		
the applicant's written request	The applicant's request is based on the following rationale:		
has adequately addressed the matters required to be demonstrated by subclause (3), and	- <i>Objectives:</i> The objectives of the clause 4.4 control relate to size of the site, bulk and scale, availability of infrastructure and intensity of traffic impacts. The additional floor space is reasonable as it is made suitable by the context and character established by the hospital. The existing hospital has a FSR greater than the resulting FSR. There are no unacceptable visual impacts.		
	- Unreasonable or unnecessary: Application of the standard would be unreasonable because the proposed FSR is less than approved FSR and the use is supported by the zoning. No undue material impact on streetscape and surrounding sites and is consistent with existing and desired character for the area. Proposal is highly compatible with established character of the site and its surrounds in terms of built form and land use. Neighbourhood amenity preserved. FSR breach not exacerbated. Proposal will augment the health related use of the site serving the needs of the community. Additional mental health beds will be provided and facilities for medical operations.		
	- Sufficient environmental ground to justify: The increased GFA correlates the approved FSR to the fact that the site has now increased and does not represent an overdevelopment of the previous smaller lot size. The proposal is consistent with underlying objective or purpose of the standard. No adverse visual impact or amenity impact on adjoining sites. Proposal would integrate with existing infrastructure. Compliance with remaining standards achieved. Alternative is to provide facilities offsite, which would reduce efficiencies, sustainability and resources. Strategic policies encourage health related		

	development.
	WCC comment
	 Unreasonable or unnecessary: The applicant discusses why unreasonable and does not discuss why unnecessary. The argument that the FSR will be no worse than current ignores the obvious visual and amenity impact of the new building form. The new building would not be perceived by the neighbourhood as FSR, but rather as physical floor space, to be viewed everyday and lived next to every day. If a complying FSR of 3:1 was to be provided for the existing hospital only, all the land obtained at 15 Urunga Parade would be needed plus more. On a combined site of the hospital plus 15 Urunga Parade, the resulting FSR of the existing hospital (excluding the proposed building expansion) would be 3.2:1. The claim that mental health beds will be provided is not verified. The existing character of the site and surrounding area comprises the single storey dwelling house to be demolished and the existing apartment building at 17 Urunga Parade. The 24m building height has not been adequately discussed in relation to lower scale adjoining development, only the hospital.
	- Sufficient grounds to justify standard. The applicant doesn't address the actual GFA proposed on 15 Urunga Parade as distinct from the combined site. As the bulk of the new GFA is located on 15 Urunga Parade, that would be a stronger test of suitability with adjoining development. The majority of the western elevation will not significantly impact upon 17 Urunga Parade, however the ground floor walkway could result in noise, amenity and privacy impacts. Further refinement of this area is needed before Council could conclude the development would not adversely impact upon privacy or amenity. The new building is designed to expand the existing hospital, and certain functional areas of the hospital will be borrowed by the new building e.g. car parking, waste disposal and access to operating suites etc. However, the application has not adequately explored the integration of these areas nor addressed the existing stratum arrangement.
	The statement and proposal does not allow Council to be satisfied of the matters listed in subclause 4.
the proposed development will be in the public interest because it is consistent with the objectives of the particular standard and the objectives for development within the zone in which the development is proposed to be carried out, and	 WCC comment There is a generic public benefit in maintaining the FSR standard, however in certain circumstances non-compliance may be appropriate. As noted, the existing hospital was approved with a FSR that would require consolidation with two further properties to result in a complying 3:1 today. However, the form of the additional GFA has a direct bearing on the objectives of the control. Where is the GFA? How tall? What does it adjoin? Is it supported by adequate services? In this case, a satisfactory response has not been achieved. The new GFA is of an acceptable height, and setbacks comply with WDCP 2009. However, the new building would adjoin an existing residential apartment and this interface has not been adequately managed. In part, this could be due to a lack of information regard operating of the new building, but in the absence of operational controls or certainty provided by the proponent, this interface has the potential to erode quality of

	life for the adjoining residents. In terms of being self-sufficient, the development does not propose an increase to waste management or car parking.
	- In its current form, the proposal does not amend the Urunga Parade public domain as requested, and pedestrian access across the site remains poor. Relying on waste disposal areas in the existing hospital has the potential to require more frequent servicing and manual transport of waste that is difficult or needs to be made out of hours. Failure to provide car parking for the proposed new floor area is not supported.
	Compliance with the development standard is consistent with the aims of the policy. It has not been demonstrated that compliance with the development standard would hinder the attainment of the objectives specified in section 5 of the EP&A Act.
	In the application's current form, there is a public benefit to maintaining the standard.
the concurrence of the Secretary has been obtained.	Council has delegation.

Part 5 Miscellaneous provisions

Clause 5.10 Heritage conservation

The potential impact upon the dwelling located at 366 Crown Street Wollongong has been considered. The property is an item of local heritage significance (item 6243) under WLEP 2009. A *Statement of Heritage Impact* prepared by NBRS & Partners dated September 2016 has been submitted.

Council's heritage officer has no objection to the development.

Part 7 Local provisions – general

Clause 7.1 Public utility infrastructure

Both the existing hospital and dwelling house are serviced by electricity, water and sewage services. Approval from the relevant authorities would be required for connection to the new additions.

Clause 7.6 Earthworks

The proposal comprises lower ground excavation. The earthworks are not expected to have a detrimental impact on environmental functions and processes, neighbouring uses or heritage items and features of the surrounding land. Standard dilapidation reports pre- and post-construction should be obtained.

Clause 7.18 Design excellence in Wollongong city centre and at key sites

The proposal is considered to be consistent with the majority of the provisions for design excellence as follows:

- The site is suitable for the development
- The use is compatible with the existing and likely future uses in the locality
- · There are no unacceptable heritage impacts
- The proposal is not expected to result in any adverse environmental impacts.

However, the proposal is unsatisfactory with regard to access, servicing and parking and impacts upon the public domain.

Part 8 Local provisions—Wollongong city centre

<u>Clause 8.1 Objectives for development in Wollongong city centre</u> The development is consistent with these objectives. <u>Clause 8.2 Wollongong city centre – land to which this Part applies</u>

The land is located within the Wollongong City Centre.

2.2 SECTION 79C 1(A)(II) ANY PROPOSED INSTRUMENT

Draft State Environmental Planning Policy (Coastal Management) 2016

A draft SEPP and associated maps was open for public consultation during November 2016 (exhibition ended 23 December 2016), with submissions accepted up until 20 January 2017. The exhibition also included a draft section 117 Ministerial direction and a draft Standard Instrument (Local Environmental Plans) Amendment (Coastal Management) Order.

The draft Coastal Management SEPP, accompanying documents and map viewer, factsheets and community information session details can all be accessed at: www.planning.nsw.gov.au/CoastalReform.

The real impact relates to certain development controls/ permissibility within the management zones of the maps and relationship to future changes to the standard instrument clause 5.5.

The draft maps identified the site does is not within any area mapped in the draft SEPP.

Draft State Environmental Planning Policy (Educational Establishments and Child Care) 2017

The draft SEPP was exhibited 3 February 2017-7 April 2017. The draft policy relates to development of new schools, TAFE, universities and child care centres and alterations to existing facilities. Provisions of the proposed SEPP are not relevant to the proposal.

Draft State Environmental Planning Policy (Infrastructure) 2016

The draft SEPP was exhibited 3 February 2017-7 April 2017. The daft policy relates to health services facilities and introduces new complying development provisions, allows some exempt development for private operators, expands the range of public authority development, and amends the definition of health services facilities to be consistent with the standard instrument definition. Provisions of the proposed SEPP are not relevant to the proposal.

2.3 SECTION 79C 1(A)(III) ANY DEVELOPMENT CONTROL PLAN

2.3.1 WOLLONGONG DEVELOPMENT CONTROL PLAN 2009

CHAPTER D13 – WOLLONGONG CITY CENTRE

The site is located within the Wollongong City Centre, as defined in WLEP 2009 and WDCP 2009. Chapter D13 applies to the development and prevails over other parts of the DCP where there is any inconsistency. Relevant provisions are addressed in Attachment 5.

Non-compliances relate to car parking, pedestrian access and mobility, public domain treatment and waste and recycling.

CHAPTER E1: ACCESS FOR PEOPLE WITH A DISABILITY

Disabled access is available to the new floor area from Urunga Parade however persons would be required to access the lower ground via the ramp and the use the lifts to gain entry to the ground floor or upper levels.

Compliance with federal legislation including the Building Code of Australia and Disability Discrimination Act is required.

CHAPTER E2: CRIME PREVENTION THROUGH ENVIRONMENTAL DESIGN

No details have been provided as to lighting, hours of operation of the retail areas, method of securing the lifts and building, visitor and staff circulation, and access to the existing car parking levels. These details are required. No additional signage is proposed, however would be required to identify the proposed uses.

CHAPTER E3: CAR PARKING, ACCESS, SERVICING/LOADING FACILITIES AND TRAFFIC MANAGEMENT

Lack of on-street car parking is a recurring matter raised in submissions. Anecdotally, this appears due to parking demand by staff and visitors to the existing public and private hospitals.

Modification 1 of MP07-007 reduced the required number of car parking spaces to 313 for the entire hospital building. As noted earlier, the original traffic study submitted with the hospital major project identified 158 car scapes required to service the hospital. These spaces were preserved in the stratum subdivisionDA-2014/1431. The remaining spaces were permitted to service the consulting suites, retail and allied health tenancies.

The Assessment of Traffic and Parking Implications prepared by Transport and Traffic Planning Associates under the subject application provides the rationale for not providing any additional car parking spaces for the new building. It states that the major project required 284 spaces to be provided, and despite this, 319 were constructed, which is incorrect. They maintain this results in a surplus of 35 spaces (to whom these would be available is not discussed). The report goes on to determine the parking rate for the individual components of the new building as 9 for the IPU beds, 5 for the consulting suites and 3 for the retail. The hyperbaric chamber is omitted. These figures contrast with Council's Chapter E3 DCP rates, which are detailed in the table below.

Proposed use	Proposed size	Rate	Total required
Retail	185m ²	1/25m ²	7.4 (7) spaces
Hospital	Operating theatre 550m ² Level 1	1 space per medical practitioner plus 1 space per 2 employees plus 1 space per 2 beds	No details provided as to practitioner or staff numbers
	IPU 18 beds Levels 3 & 4	1 space per medical practitioner plus 1 space per 2 employees plus 1 space per 2 beds	No details provided as to practitioner or staff numbers
	Hyperbaric tenancy 184m ² Lower ground	1 space per medical practitioner plus 1 space per 2 employees plus 1 space per 2 beds	No details provided as to practitioner or staff numbers
Medical suites	2 x suites (total 220m ²) <i>Level 6</i>	4 car parking spaces per consulting room plus 1 car parking space per 3 employees	•

In its current form, the proposal would be deficient of all the required spaces for the expansion. An adequate case has not been made for a reduced rate or exemption. A voluntary planning agreement has not been offered by the applicant.

CHAPTER E6: LANDSCAPING

A landscape plan has been provided by Arcadia Landscape Architecture. It is generally acceptable in terms of its treatment of the 15 Urunga Parade land, however required improvements to the hospital site on Urunga Parade have not been shown on the plan.

CHAPTER E7: WASTE MANAGEMENT

The Statement of Environmental Effects notes that waste and recycling would be absorbed into the existing hospital. The hospital waste and loading areas are located behind the Urunga Parade loading dock. It is unclear what waste would be generated by the new additions and whether the existing waste areas have additional capacity to service the new building. The method of transporting waste to the existing hospital waste area has not been clarified. For example, it appears the ground floor retail tenancy would have to carry waste via Urunga Parade to access the loading dock on foot, and then proceed past any vehicles in the dock to the disposal room. Further details are required.

A site waste minimisation and management plan has been provided, adequately detailing disposal of construction waste.

CHAPTER E11 HERITAGE CONSERVATION

The property at 366 Crown Street (directly adjoining the existing hospital) is listed as an item of local heritage significance. A Statement of Heritage Impact was provided and reviewed by Council's heritage officer. They advised they have no objection to the development.

CHAPTER E14 STORMWATER MANAGEMENT

Concept drainage plans have been provided and reviewed by Council's stormwater engineer. Several matters of concern remain.

CHAPTER E17 PRESERVATION AND MANAGEMENT OF TREES AND VEGETATION

The Statement of Environmental Effects advises that no tree removal is proposed, and this is reaffirmed by the landscape plan. However, an existing tree located in the rear of 15 Urunga Parade would be located within the new building footprint and removal would be required. An amended landscape plan is required.

CHAPTER E19 EARTHWORKS (LAND RESHAPING WORKS)

Excavation to facilitate a lower ground level is proposed. Geotechnical assessment was carried out in reaction to the existing hospital which has a greater depth. No additional geotechnical concerns are anticipated.

CHAPTER E21 DEMOLITION AND ASBESTOS MANAGEMENT

Demolition of the existing dwelling house is proposed. Standard conditions could be imposed regarding asbestos removal.

CHAPTER E22 SOIL EROSION AND SEDIMENT CONTROL

Conditions of consent could be imposed in regard to appropriate sediment and erosion control measures to be in place during works.

2.3.2 WOLLONGONG SECTION 94A DEVELOPMENT CONTRIBUTIONS PLAN (2015)

The estimated cost of works is \$18,483,485.00, which has been detailed in a quantity surveyors report by Donald Cant Watts and Corke dated 12 August 2016. A levy of 1% is applicable under this plan.

2.4 SECTION 79C 1(A)(IIIA) ANY PLANNING AGREEMENT THAT HAS BEEN ENTERED INTO UNDER SECTION 93F, OR ANY DRAFT PLANNING AGREEMENT THAT A DEVELOPER HAS OFFERED TO ENTER INTO UNDER SECTION 93F

There are no planning agreements entered into or any draft agreement offered to enter into under S93F which affect the development.

2.5 SECTION 79C 1(A)(IV) THE REGULATIONS (TO THE EXTENT THAT THEY PRESCRIBE MATTERS FOR THE PURPOSES OF THIS PARAGRAPH)

<u>92</u> What additional matters must a consent authority take into consideration in determining a development application?

Demolition is proposed. Conditions of consent could be applied regarding safe demolition practice and disposal of building waste.

94 Consent authority may require buildings to be upgraded

A Building Code of Australia report has been prepared by McKenzie Group dated 29 August 2016. This report addresses compliance requirements of the BCA, including fire engineering.

2.6 SECTION 79C 1(A)(V) ANY COASTAL ZONE MANAGEMENT PLAN (WITHIN THE MEANING OF THE COASTAL PROTECTION ACT

Not applicable - the land is not located within the NSW coastal zone.

2.7 SECTION 79C 1(B) THE LIKELY IMPACTS OF DEVELOPMENT

In its current form, the development would have unsatisfactory impacts with regard to the following:

- Access, transport and traffic lack of additional car parking.
- Public domain poor footpath treatment in Urunga Parade.
- Waste management unclear if existing hospital has capacity to accommodate waste from the new building. Unclear how waste would be transported to the existing hospital waste area.
- Safety, security and crime prevention unclear what areas would be secured, hours of operation of retail and medical suites, access to car parking areas.
- Site design and internal design building accessibility, public area circulation between new building and existing hospital.

2.8 SECTION 79C 1(C) THE SUITABILITY OF THE SITE FOR DEVELOPMENT

Does the proposal fit in the locality?

The proposal as submitted is not considered appropriate with regard to the zoning of the site and is expected to have negative impacts on the amenity of the locality or adjoining developments.

There are site constraints that would make the proposal difficult to realise.

2.9 SECTION 79C 1(D) ANY SUBMISSIONS MADE IN ACCORDANCE WITH THIS ACT OR THE REGULATIONS

The application was notified to neighbouring properties in accordance with WDCP 2009 Appendix 1: Public Notification and Advertising. Submissions were invited 26 October 2016-17 November 2016. Four submissions have been received and the issues identified are discussed below.

Table 1: Submissions

Concern	Comment	
Noise during construction	Construction methods include compliance with EPA Industrial Noise Policy could be	
Residents experienced noise when hospital first built. Don't want to go through it again.	resolved via standard consent conditions.	
The EPA 'Interim Noise Construction' document says sensitive land uses should be identified in the application. The building at 17 Urunga Parade has not been noted.		
Noise after construction	This is considered to be an ongoing	
After the hospital was completed residents were subjected to unacceptable noise, which was high frequency and evident outside the hospital at the southern end. Hospital staff and security inspected and issue was reported to acoustic experts. Issue resolved after eight months.	management issue.	
Traffic and parking	Traffic and parking has been discussed	
The reason car parking in the hospital is underutilised is because of exorbitant cost. Staff and visitors park instead on Urunga Parade.	earlier in this report.	
During construction of the hospital, tradespeople would park on the street before 7am and a coffee van was parked in front of my residence, well before 7am. I picked up numerous coffee cups disposed on my driveway.		
On many Sunday nights I find difficulty placing my bins on the street because Urunga Parade parking spots are used by hospital visitors and staff.		
My visitors have to park several hundred metres away in side streets because Urunga Parade has no available parking sites.		
With the new extensions, parking will surely become worse.		
Two hour limits on parking are rarely enforced.		
Silica Dust		
Workcover emphasises need to manage risks		

Concern	Comment	
During construction of the hospital, this issue was largely neglected. Dust covered our cars. Wetting was carried out intermittently in response to complaints.		
Radioactive/radiation pollution	This is considered to be an ongoing	
Disposal of surgical specimens is a serious issue. There is a background risk of radioactive and radiation leakage. Building surgical hospitals so close to residential apartments is not best practice. If surgical specimens are disposed of on site by incineration, that would magnify our concerns of becoming exposed to dangerous materials.	via conditions of consent.	
Vibration and possible structural issues	Pre-and post-construction dilapidation reports	
Possibility of structural damage to 17 Urunga Parade during construction. I am unaware whether the new builders have plans to prepare a pre-dilapidation report.	would be required if the development application is approved.	
Privacy	The proposed retail tenancy, with possible	
Residents of 17 Urunga Parade will experience an unacceptable loss of privacy when the new extension is finished. My own unit has a small parcel of land attached. I bought the unit in part for the private backyard.	café and walkway has the potential to impact upon privacy of 17 Urunga Parade. The walkway occurs approximately 3m above street level. The proposed retaining wall or the boundary appears to be RL43.78, where the floor level is RL 43.70. This wall would therefore not provide a visual separation between the public areas and the adjoining apartment building. No landscaping is proposed on this boundary. Amended plans are required demonstrating improved separation between the walkway and 15 Urunga Parade.	
Overdevelopment of the site	The development proposes a floor space	
No objector details specified.	ratio in excess of 3:1, which is the maximum set by WLEP 2009. A cl. 4.6 statement has been provided and is discussed above	
Floor space ratio	As above.	
No objector details specified.		
Adverse impact on streetscape	Architecturally the upper levels of th	
No objector details specified.	extension are compatible with the existing hospital. The ground and lower ground level can be improved.	
Conflict between pedestrians and vehicles	The existing footpath treatment is poor in this location and amended plans are required showing pram ramps for the full length of the Urunga Parade site frontage.	
Proposed use	Specific medical use not a matter for	
The project does not add any value to the services required by Wollongong residents. It isan unproven therapeutic modality mainly utilised in plastic surgery proceduresWollongong needs other more appropriate surgical services (e.g. cardiothoracics).	consideration under s.79C. WLEP 2009 and SEPP (Infrastructure) 2007 allow a wide range of medical uses on the land.	

Concern	Comment
Loss of income Construction will affect my livelihood from renting my place in the future or whether I decide to find buyers	Noted, but not a matter for consideration under s.79C.
Solutions Install sound barrier or compensate or relocate adjoining residents during construction.	This could be addressed via conditions of consent.

Submissions from public authorities

Nil

2.10 SECTION 79C 1(E) THE PUBLIC INTEREST

In its current form, the application would have unreasonable impacts on the amenity of the locality. It is considered inappropriate with regard to the relationship with adjoining development and treatment of the public domain. The floor space ratio development standard departure is not supported.

Refusal of the application is consistent with the public interest.

2. CONCLUSION

This application has been assessed having regard to Section 79C(1) of the Environmental Planning and Assessment Act 1979, the provisions of Wollongong Local Environmental Plan 2009 (WLEP 2009), relevant State Environmental Planning Policies, and Council Development Control Plans and policies.

The proposed health services facility is permissible with Council's consent. A development departure to floor space ratio is proposed, however has not been adequately justified.

The submissions have been considered and aspects of the development require refinement, and in its current form, the development is likely to result in adverse impacts on the amenity of the surrounding area.

3. RECOMMENDATION

It is recommended that in its current form, the proposed development be refused, for the draft reasons detailed in Attachment 6.

ATTACHMENTS

- 1. Aerial Photograph
- 2. Zoning Map Wollongong Local Environmental Plan 2009
- 3. Proposed plans
- 4. WLEP 2009 clause 4.6 development departure written request
- 5. Compliance table
- 6. Draft reasons for refusal