

3 THE RECEIVING ENVIRONMENT

3.1 REGIONAL CONTEXT

The site is located immediately north-west of the St Leonards Railway Station and Town Centre, on the high point of a ridge that is followed by the Pacific Highway.

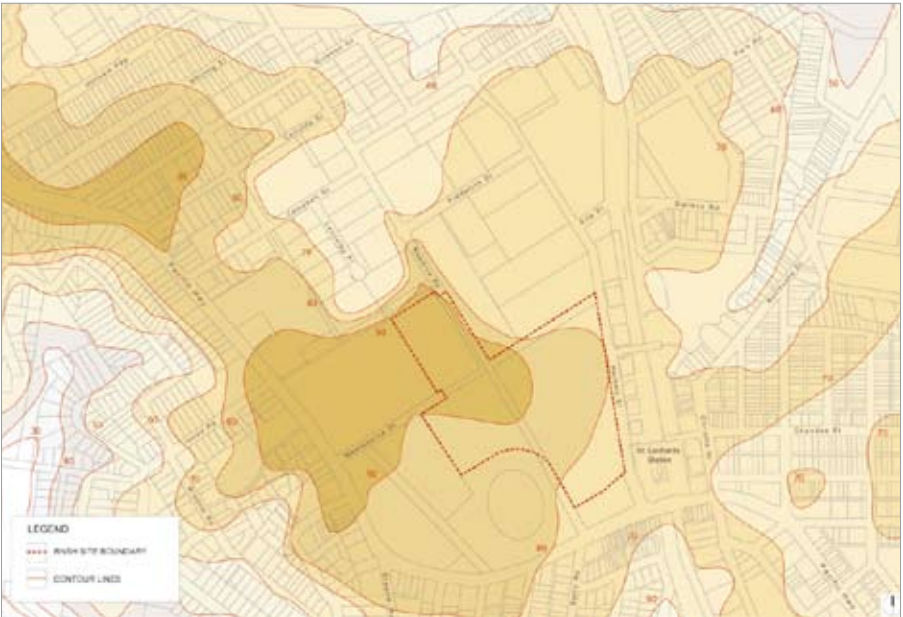


Figure 1: District Topography, prepared by Cox Richardson

It is located within the Willoughby City Council area, but is immediately adjacent to both the Lane Cove and North Sydney Council areas.



Figure 2: LGA Boundaries, prepared by Cox Richardson

It has excellent access to all forms of transport, being located at the Junction of the Pacific Highway and the North Shore Railway Line, only a short distance from the Gore Hill Freeway.



Figure 3: Road and Rail Networks, prepared by Cox Richardson

It is immediately adjacent to Gore Hill Playing Field and Cemetery, and a number of significant passive and active open spaces are located in the vicinity.



Figure 4: Green open space networks, prepared by Cox Richardson

As detailed in Section 8.2.1, the Metro Strategy and the associated Premier’s Innovation Strategy both clearly support the expansion of RNS Hospital as ‘magnet infrastructure’ to drive innovation and economic growth through investment in research and medical knowledge, thereby reinforcing the role of St Leonards in the ‘Global Corridor’ as a ‘specialised centre’ of medical and associated employment.

Between 2001 and 2031, The Metro Strategy targets growth from 25,166 to 33,000 jobs in St Leonards, requiring the creation of an additional 7,834 jobs, with the specialist medical facilities of the RNSH expected to be a significant driver of this growth.

However, the metro Strategy also seeks to ensure that there will be an adequate supply of residential development and encourages large residential populations within and close to centres to support local businesses and generally make centres vibrant and safe. The ‘Inner North’ region has been targeted to grow from 129,256 to 159,000 dwellings over the next 30 years, an increase of 29,744 dwellings, 2000 - 5,000 of which are identified to be in the St Leonards Town Centre.

As detailed at Section 8.2.1, the Draft St Leonards strategy refines the broad recommendations of the Metro Strategy to reflect a place specific analysis of the St Leonards Town Centre. It recognises that the hospital currently creates around 5000 full and part-time jobs, and a significant number of related jobs in the surrounding area. To achieve the 8,000 odd new jobs and the 2,000 – 5,000 new homes that the Metro Strategy targets for the St Leonards Centre over the next 25 years, the Draft St Leonards Strategy suggests that approximately 3,250 jobs and approximately 1,500 residents would be appropriate on the hospital site.

The Draft Strategy recognises that to achieve these targets the Department of Health has been considering the current project. Based upon early versions of the current project, the Draft Strategy anticipated that the site will accommodate about 59,000m² of office space; 6,000m² of research space; 8,000m² of retail space; a 12,000m² ‘medi-hotel’; 16,000m² of nurses accommodation and 67,000m² of new apartments in conjunction with redevelopment of the hospital, creation of a new public street and open space network and retention of heritage buildings and trees. It supports this quantum and mix of uses and encourages shops to serve the local resident and worker population, including convenience shops, potentially a larger supermarket, small-scale speciality shops, banks, bars, cafes and restaurants. This retail activity is encouraged to be located so as to animate key pedestrian routes.

The transport sustainability of centres is at the heart of the Metropolitan Strategy and has underpinned the focus on concentrating development in centres. Through the Metro Strategy the State Government committed itself to ensure that there are sufficient strategic sites available and infrastructure capacity to support identified growth in such centres.

3.2 LOCAL CONTEXT

The site has excellent access to the Sydney CBD. It is located within immediate proximity of St Leonards Railway Station, and lies on several major bus routes. It is within easy walking distance of transportation networks, shops, employment, open space and residential properties. It has convenient access to both the Pacific Highway and the Orbital Motorway (including the Gore Hill Freeway).

The high ridge that underlies St Leonards is reflected in built form and the skyline is an interesting and distinctive feature in the broader landscape, with the railway station marked by the highly visible ‘Forum’ development.

3.3 SURROUNDING PROPERTIES

RNS Hospital is surrounded by a wide variety of land uses, including St Leonards CBD and high density housing to the east; residential development to the south and east; special uses (North Sydney TAFE, Gore Hill Memorial Cemetery and former ABC site) to the west; Gore Hill Park to the immediate south west and the Artarmon industrial area to the north. The current built form provides impediments to public pedestrian and vehicular access through the site, notwithstanding that a number of strong desire lines exist across the site (e.g. from the TAFE to St Leonards Station), and along Reserve Road.



Figure 5: Local Context – Land Use & Land Ownership, prepared by Cox Richardson

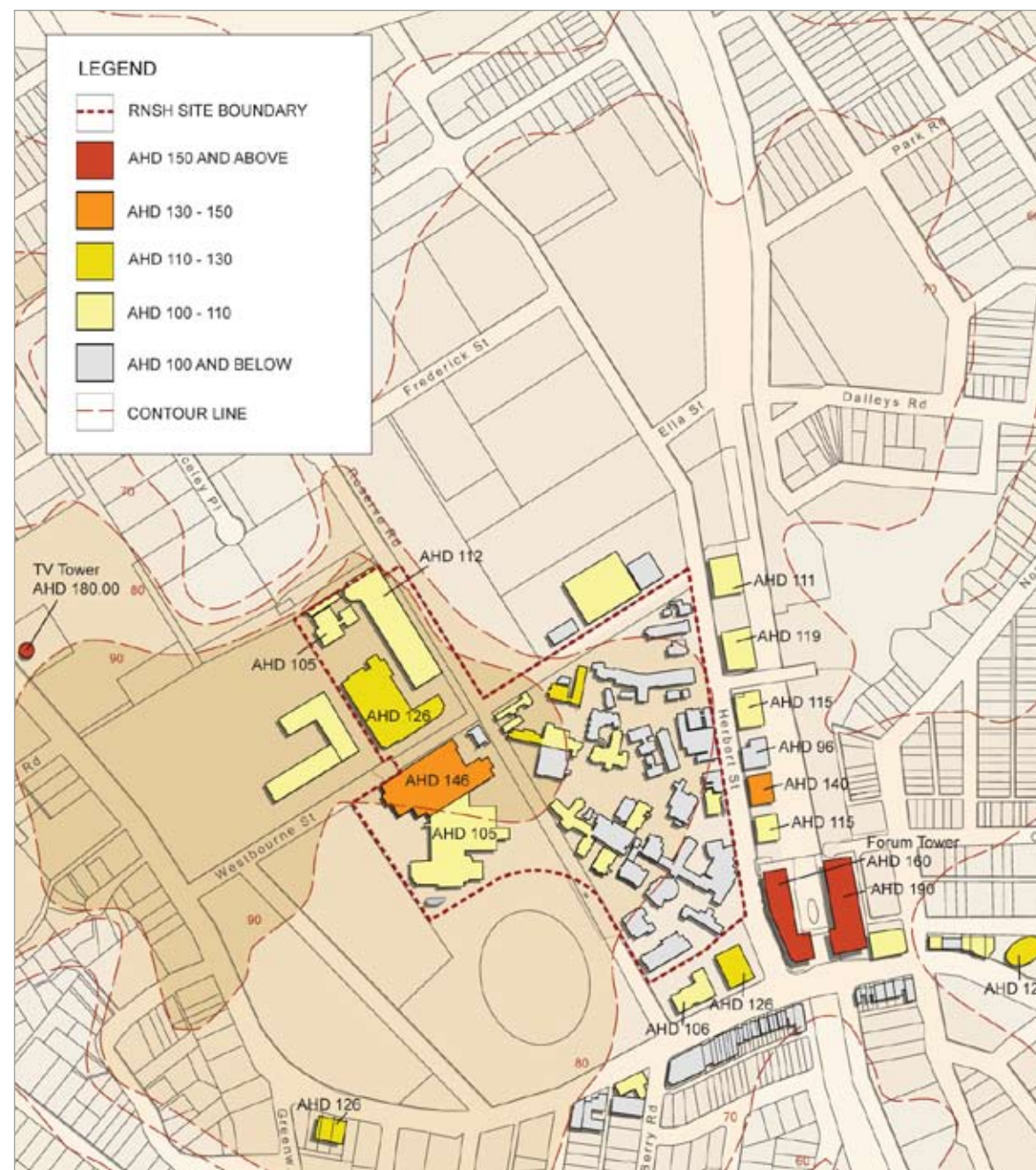


Figure 6: Local Context – Existing Building Heights, prepared by Cox Richardson

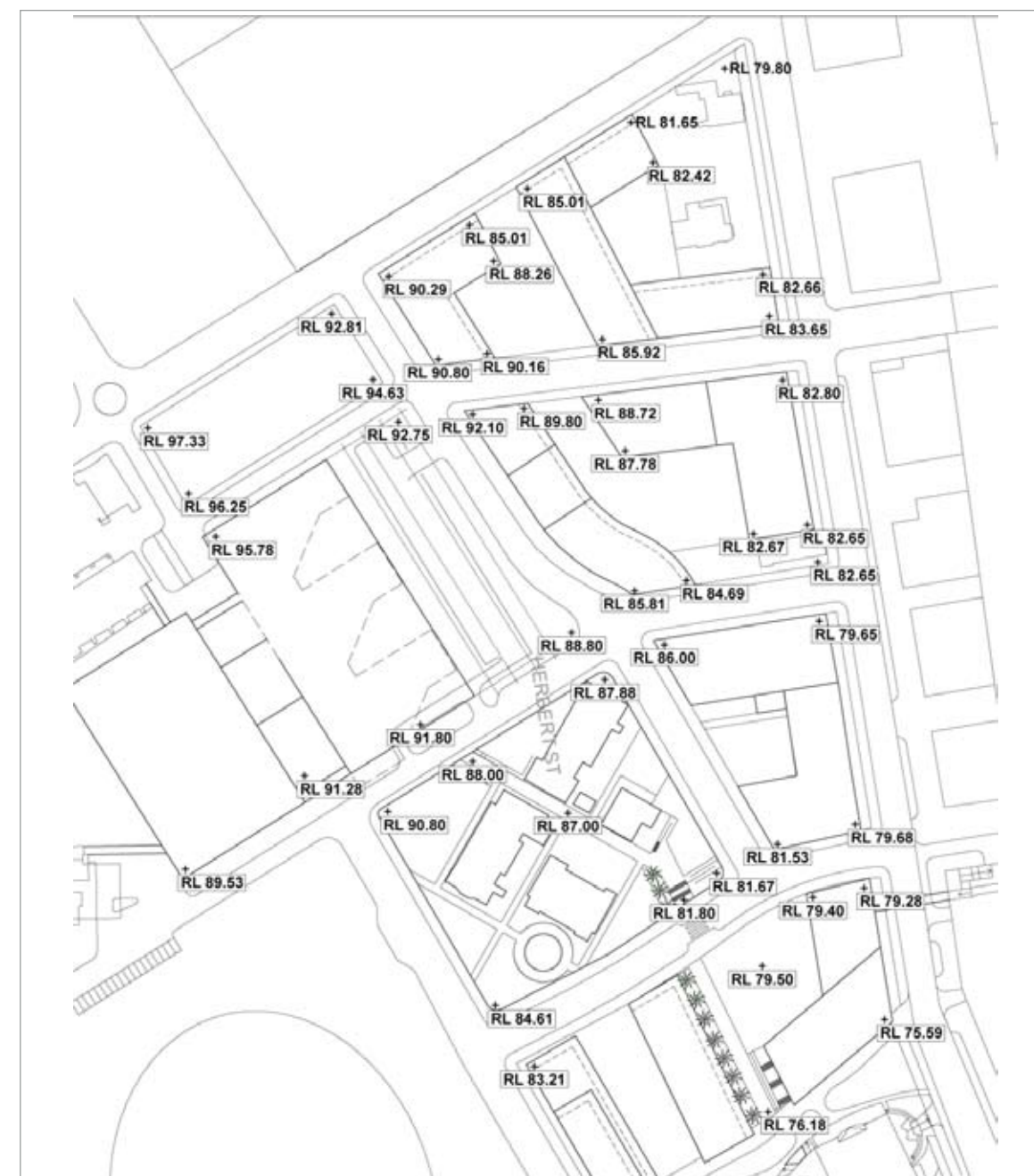


Figure 7: Existing ground levels on the site, prepared by Cox Richardson



Figure 8: Local Context – Existing Buildings, prepared by Cox Richardson

3.4 THE SITE

The site has an area of approximately 13 hectares and is commonly known as the Royal North Shore Hospital Campus. It is owned by North Sydney Central Coast Area Health Service and is legally described as Lot 21 and 22 in DP 863329 and Lot 102 DP 1075748.

The site occupies a prominent ridge to the north of the Pacific Highway, and the main high rise hospital building is a prominent landmark visible from many vantage points in the North Shore.

The RNS Hospital is a complex site consisting of a wide range of building types, styles and sizes ranging from small Queen Anne style heritage buildings to the multi storey Hospital Building 2.

Vehicular access to the site is from the Pacific Highway to the south and the Gore Hill Freeway to the north. Service vehicle access is available from Herbert Street and the western section of Westbourne Street. A complex internal road network provides vehicular access to the different hospital precincts and buildings.

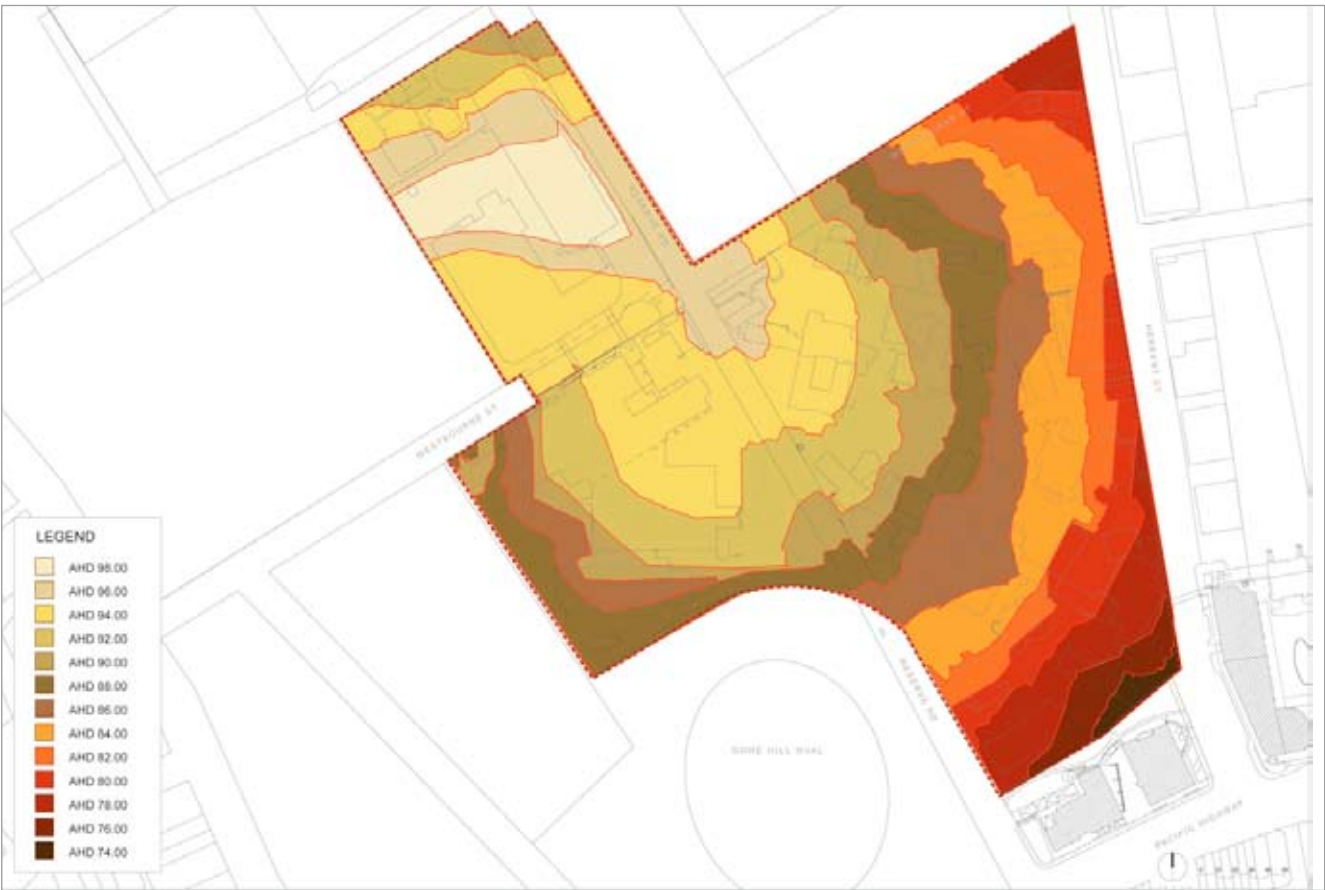


Figure 9: Topography, prepared by Cox

3.4.1 EXISTING HOSPITAL FACILITIES

Hospital facilities on the site comprise of separate public and private hospitals, with the public facilities located to the south of Westbourne Avenue, and the private facilities to the north.

The Public Hospital

The existing Royal North Shore public hospital is both a local and a major Referral/Tertiary Hospital for an area that extends north of Sydney Harbour across the Hawkesbury River to the southern shore of Lake Macquarie and West to Wiseman's Ferry, having a population in excess of 1,110,600 people.

It is also a major teaching and research hospital, and provides state-wide services for burns and spinal injuries. It also has a major emergency department and plays a significant role in the provision of specialist services for the Sydney metropolitan area, particularly in surgical, paediatrics, maternity and community services.

The hospital comprises in excess of 50 buildings scattered across the site, including 7 demountable buildings. However the principal facilities are housed in Building No. 1, Building No. 2 and the Douglas Building.

The Douglas Building is a 6 storey, 9,483m² building housing:

- Emergency
- Maternity.

Building No. 2 is a 13-storey, 54,451m² building housing:

- Main entry, loading, stores, mortuary, records, kitchen, IT, staff accom/facilities, cafeteria, shops
- Ambulatory care, operating theatres, intensive care (ICU), aged care and inpatients
- Pathology, Anaesthetics, pain management, rehabilitation and endoscopy
- Cardiology, spinal, neurosurgery, respiratory, cardiothoracic, orthopaedics, haematology and oncology
- Preoperative/Pre-Admissions and General Surgery

Building No.1 is a 5-storey, 19,515m² building housing:

- Pharmacy, stores, staff facilities and administrative offices
- Emergency and medical imaging
- Ambulatory care clinics and some ambulatory care facilities
- Pathology and biomed

The following smaller buildings are scattered across the site with a total floor area of 52,612m²:

- Chapel
- Rotary Lodge
- Staff Recreation
- Stuart House
- Diabetic Service
- Drug and Alcohol Service
- Lanceley Cottage
- Paediatric
- Vindin House
- Vindin House - North Wing
- Vindin House - South Wing
- Aged Care and Rehabilitation
- Maternity
- Student Accommodation
- Student Accommodation
- Professional Development Centre
- Welcome Laboratory
- Laundry
- Maintenance Offices
- Boiler House
- Maintenance/Facility Planning
- Clinical Teaching Block
- Norman Nock Lecture Theatre
- Kolling Institute
- Wallace Freeborn Institute
- Day Surgery Recovery
- Day Surgery
- Hydrotherapy Pool
- Physiotherapy
- Social Work
- RMO's Quarters
- ANSTO Body Protein
- Orthotics/Dietetics
- CJ Cummins Unit
- Block 4 - North Wing
- Block 4 - East Wing
- Radiotherapy
- Child Care
- BreastScreen Centre
- Gore Hill Research Laboratory
- UTS Clinical Studies
- Centenary Lecture Theatre
- Demountable building-HRU Lab
- Demountable building-D&G Lab
- Demountable building-Activities
- Demountable building
- Demountable building-Kolling Lab
- Demountable-Diabetes Education
- Demountable -Institute for Magnetic Resonance Research

The incremental manner in which these various facilities have developed over some 100 years has resulted in a highly inefficient operational environment and many outdated and inefficient facilities. A Preliminary Hazardous Building Materials Report is included at Appendix 17. This report documents the potential for hazardous materials to occur within the existing buildings.

The Private Hospital

The private hospital has a floor space of 20,013m² comprising 5 hospital floors and 3 basement car parking levels. It accommodates modern operating theatres, radiology, wards and medical suites. A development application is currently before Willoughby City Council for a 8,952m² extension in a similar building form.

3.4.2 HISTORY

The current site was formed historically through cumulative land acquisitions and resumptions. The Archaeological Report prepared by Godden Mackay Logan (see Appendix 5) identifies five areas that generally reflect the history of land acquisition and the related expanding use and role of the hospital. The following is a summary of the sites history provided in the Goddon Mackay Logan report.

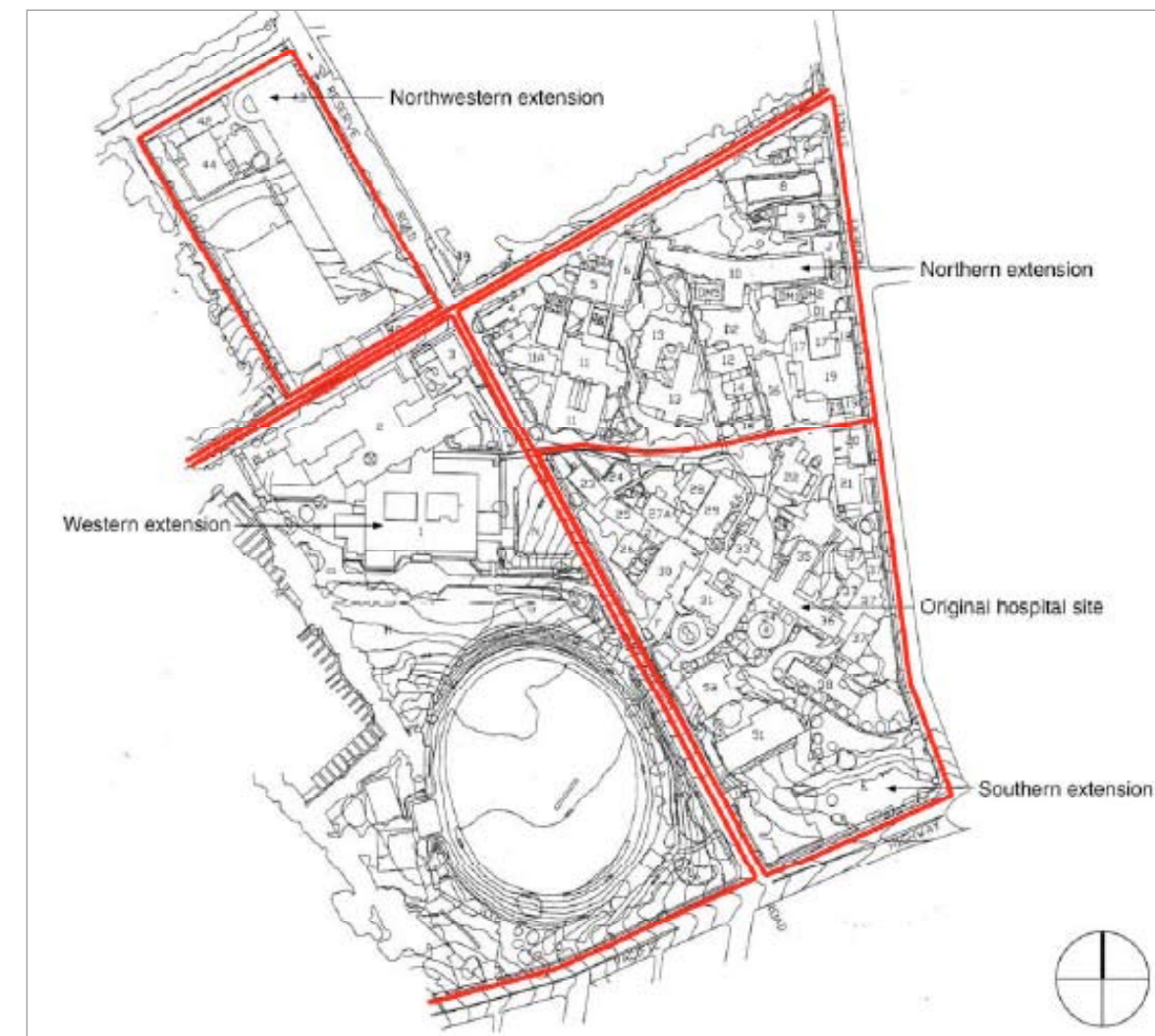


Figure 10: History, Heritage and Archaeology, prepared by Godden Mackay Logan

- *The Original Hospital site*
Originally part of Gore's Farm and then Crown Land until August 1899 when it was reserved for the Hospital site. Land likely to have been unimproved open pasture/trees.
- *The Southern Extension*
Part of a grant to Edward Wollstonecraft, which was eventually subdivided and sold in 1909 to Lanceley, from whom it was resumed for Hospital use in 1912. Likely to have been unimproved/unoccupied land.
- *The Northern Extension*
Originally part of Gore's Farm and then Crown Land. Likely to have been unoccupied and unimproved at the time of subdivision and sale. By 1915, 32 dwellings were constructed on individual lots. A large portion of the Northern Extension was resumed in June 1919 and thereafter the remaining land in this precinct was cumulatively resumed and purchased for Hospital use.
- *The Western Extension*
Originally part of Gore's Farm and then Crown Land. Likely to have been unimproved until 1951.
- *The Northwestern extension*
Part of a grant to James Williamson, Henry Anser and Thomas Jennings. By 1907, the block had been subdivided and sold. By 1930, 21 lots had been improved.

The original hospital site was reserved for hospital use in 1899, and construction of Shervey's design of the Original Hospital occurred from 1902 to 1914. During this time, the Southern Extension precinct was resumed (1912) and added to the original site.

Immediately after World War I, the majority of the Northern Extension was resumed and the cottages on it used for Hospital purposes. Construction of the Outpatients buildings in the Southern Extension occurred in 1921. There was a short hiatus in building activity until 1929 when Vindin House was commenced and construction of more medical facilities occurred during the 1930s, although new construction was limited by the financial constraints of the depression.

Following reorganisation of the Hospital administration in the late 1930s, the hospital was expanded post-World War II. The most visible sign of expansion was the resumption of the Western Extension and the construction of the new Hospital buildings on that land. However, there was also a period of construction on the Original Hospital site and the Northern Extension so that most of the 1901 - 1915 period cottages were demolished and new buildings in-filled much of the open space.

In the period from 1952 to 1974, the Hospital purchased all the lots in the Northwestern Extension and from 1974 and 1978 most of the cottages in this precinct were demolished. A large multi-storey car park was erected by 1994, and the North Shore Private Hospital was erected in 1999.

In the 1970s, but more particularly in the 1980s and 1990s, most of the original and early buildings were extensively refurbished to convert them to new functions. The only early buildings demolished apart from the cottages were the Outpatients Buildings in 2003.

3.4.3 TREES AND LANDSCAPE

The RNS site landscaping has developed over time with a number of layers of planting following the building development stages of the hospital. The plantings are a reflection of species popular at the time and are evidence of contemporary domestic landscape attitudes, particularly of the North Shore area.

No trees on site are listed as part of the Willoughby Local Environmental Plan 1995.

A Tree Heritage Study has been prepared by Taylor Brammer Landscape Architects. (see Appendix 6) It identifies the following six main groups of significant vegetative elements on the site (refer diagram):

- A partial avenue of *Phoenix canariensis* (Canary Island Date Palms) along the boundary between the 'UTS Precinct' and the 'Old Hospital Precinct' in the southern part of the site.
- The trees and palms that make up the landscape curtilage to Building 31.
- A large and established *Ficus macrocarpa* var. 'hilli' to the southeast of the entrance of Building 10 (adjacent to Buildings DM1 and DM2), and to a lesser extent the *Cinnamomum camphor* (same location).
- The remaining vegetative elements of the former avenue planting to Reserve Road
- The lines of *Lophostomen confertus* to Reserve Road and Westbourne Street.
- The groups of *Syncarpia glomulifera* trees immediately northeast of Buildings 28 and 29.



Figure 11: Photographs of significant trees



Figure 12: Tree Heritage Study, prepared by Taylor Brammer Landscape Architects

3.4.4 DRAINAGE

The current hospital site is fully developed, with most of it being impervious surface in its current state. At present, there does not appear to be any storm water detention to the east side of Reserve Road, which drains to the Council's Herbert Street system. Geotechnical investigations indicate that the site is not suitable for groundwater infiltration of storm water.

Council has provided drawings indicating that the Western side of Reserve Road drains to Gore Hill Oval, which acts as a detention system, limiting flows to the Herbert Street system through a piped system and floodway.

Council has indicated that it would not support any reduction in the existing capacity of the storm water system downstream from Herbert St.

3.4.5 TRAFFIC AND TRANSPORT

Existing traffic and transport conditions have been examined by Masson Wilson Twiney. A copy of their report is included at Appendix 7, and is summarised below.

Roads

The RNSH campus is bound by Westbourne Street to the north, Pacific Highway to the south, Herbert Street to the east and Reserve Road to the west. Direct access to the main hospital building and the Emergency Department is provided from Pacific Highway via Reserve Road and access to the multi-storey car park is provided from Reserve Road. The Gore Hill Oval, Gore Hill Cemetery and TAFE are all located adjacent to the hospital.

Pacific Highway is a busy arterial route that connects St Leonards with North Sydney and Epping and also provides access to the Warringah Freeway at Gore Hill and Falcon Street. Limited access to the freeway is provided via Herbert Street, which also links St. Leonards and Artarmon. Westbourne Street currently dead ends at Reserve Road, and therefore only provides access to the Private Hospital, the multi-storey car park and TAFE. Reserve Road dead ends at Westbourne Street and provides access to surface car parking lots north of the Oval, dispersed hospital buildings in the eastern section of the site and the main hospital building. It also functions as the access route for buses to the front door of the hospital.



Figure 13: Road network & public transport networks, prepared by Cox Richardson

Willoughby City Council in its Section 94 plan for the St. Leonards Station area includes a proposed road link from the western end of Chandos Street to Herbert Street via the existing road bridge over the railway, a short distance to the south of the alignment of Westbourne Street. Willoughby City Council has verbally advised that the need for this bridge is expected to be diminished by virtue of

the construction of works relating to the Lane Cove Tunnel including north facing ramps from Falcon Street onto the Warringah Freeway. These would reduce the need for Mosman and North Sydney traffic to use Chandos Street to access the Willoughby side of St. Leonards. In view of this the Council is not pressing construction of the Chandos Street to Herbert Street connection. Thus while initial analysis for the hospital was conducted assuming that this link would be constructed, the Transport Report examines the situation without the link. The absence of the link provides the most severe test for other roads in the area.



Figure 14: Local Context – Road Access, prepared by Cox Richardson

Parking

The total existing parking provision at RNSH is about 2,410 spaces. The main car park is the multistorey car park located off Reserve Road, north of Westbourne Street, and this provides about 1,500 spaces. The remaining spaces are primarily located in several small surface car parking areas dispersed throughout the campus. These include 267 staff designated spaces, 598 for patients/visitors, 34 disabled parking spaces and 9 ambulance bays.

The Northern Sydney Central Health Service previously estimated low and high growth levels in staff numbers. The peak accumulation of staff on the site at any one time for the low growth scenario is 2,625 and the high growth is 2,720. This results in a total car parking demand of between 2,545 and 2,620 for the hospital and its ancillary facilities. This analysis did not allow for the beneficial effects of potential increased public transport linkages and thus provides an upper band for potential hospital parking needs.

Traffic Generation / Mode Split

Traffic counts conducted at intersections accessing the hospital show that the hospital currently generates approximately 1,030 vehicle trips in and 330 trips out in the AM peak and 525 trips in and 935 trips out in the PM peak. The site is thus a significant generator of traffic.

A travel survey (TEF) was conducted in May 2005 of staff of RNSH. The TEF report stated that the response equated to approximately 33% of peak staff accumulation during the day, which is about 2,323 people. Additionally, it was found that the survey showed a clear majority of staff arrived by car, most driving themselves. It also found that Visiting Medical Officers, doctors and nurses are the most likely to drive and cleaning and administration staff the least likely to drive. The train was the next most popular form of mode followed by the bus.

Intersection Performance

The intersections surrounding the site were analysed using the SCATES intersection analysis program, in accordance with normal RTA traffic analysis requirements. SCATES determines the average delay encountered by vehicles and the level of service provided. All intersections were found to operate satisfactorily at Level of Service (LOS) B or better, except at Pacific Highway/Greenwich Road, which operates at LOS F in the AM peak and D in the PM peak. The Pacific Highway/Greenwich Road intersection experiences delays due to the shortness of the separate right turn bay in Pacific Highway that serves southbound vehicles turning right into Greenwich Road.

Public Transport

RNSH is directly serviced by Bus Route 144. However several other services are available just a short walking distance away on Pacific Highway at St. Leonards Station or west of Reserve Road for eastbound services and between Reserve Road and Herbert Street for westbound services. The existing bus stop at the hospital is located close to the main hospital building at the roundabout at the northern end of Reserve Road.

St. Leonards Station provides direct rail services to the northern suburbs, the Sydney CBD and the western suburbs, and is only a short walking distance from the hospital. The minimum peak hour frequency is 3 minutes.

The Chatswood to Epping Line is due for completion in 2008, which will increase the number of trains serving St Leonards. In the longer term future rail services at St. Leonards will be significantly improved. The expansion of the North West Rail line is expected to be completed after 2017. The project includes a 9 kilometre tunnel from Central to St. Leonards, under the CBD and Sydney Harbour, extra tracks between St Leonards and Chatswood and will create the capacity for an additional 12,000 rail passengers daily. The new line also includes an extension to Rouse Hill via Castle Hill, thus providing rail connections to several new destinations.

A pedestrian overbridge provides a route to the station across Herbert Street. However there is currently no direct access into the hospital grounds from the bridge.

Pedestrians and Cyclists

Because of the significant number of pedestrian movements between the various hospital buildings, St. Leonards Station and the TAFE, Reserve Road functions as a main pedestrian travel route. To assist these movements three zebra crossings have been provided along Reserve Road between Pacific Highway and the main hospital building. The car parking ticket booth along Reserve Road also helps by slowing traffic and creating gaps in the traffic and enables pedestrians to cross.

The dispersed nature of the buildings along the eastern boundary of the site affords permeability that enables pedestrian access. However there is not a strong formal pedestrian route. Signalised pedestrian crossings are provided at the Pacific Highway intersections with Reserve Road and Herbert Street, providing a safe crossing to the station, bus stops and local shops. The pedestrian bridge is an alternative route to/from the station across Herbert Street. Walking tracks are provided around the Oval and through the Gore Hill Cemetery as alternative routes to Pacific Highway.

A number of regional and inter-district cycle routes pass near the site. However, while a route provides access to St Leonards from the east, this route does not continue through or around the site, and no formal cycle route serves the hospital, adjacent TAFE or the range of employment activities within the Artarmon Industrial area. The closest bicycle path is an on-road cycle path provided along Atchison Street between St. Leonards Station and Crows Nest which feeds to/from West Street. North Sydney Council proposes an on-road cycle path on Oxley Street that will connect with the Atchison Street path. Other cycling routes in the area are located almost parallel with the Gore Hill Freeway and along Greenwich Road.



Figure 16: Pedestrian Links, prepared by Cox Richardson

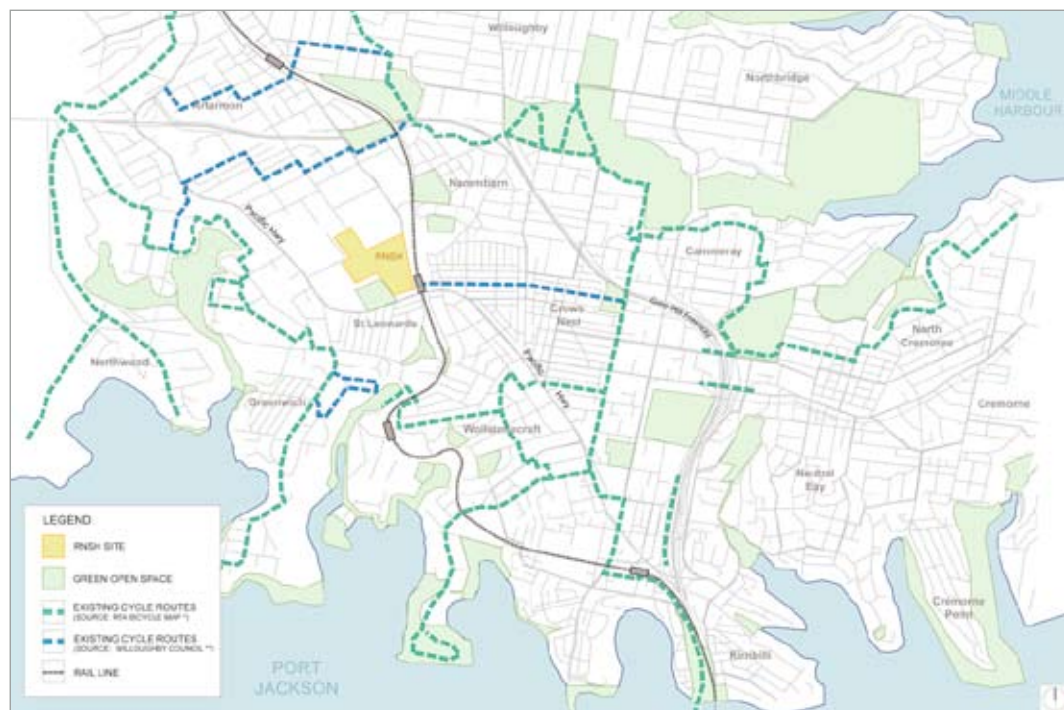


Figure 15: Cycle Routes, prepared by Cox Richardson

3.5 EP&A ACT AND RELEVANT ENVIRONMENTAL PLANNING INSTRUMENTS

EP&A Act

Part 3A of the EP&A Act 1979 provides an assessment and approval regime specifically tailored for major infrastructure and other projects of state significance, for which the Minister for Planning is the approval authority. The provisions of Part 3A apply to major projects where the Minister has made a declaration relating to the specific development or a class of developments to which that project belongs.

Part 3A of the Act came into force on 1 August 2005. It established new assessment procedures for various forms of 'major development' of state or regional significance. Such significance can be established in a number of ways, including various types of listing under State Environmental Planning Policy (Major Projects). Part 3A establishes a separate legal regime for the assessment of Major Projects, for which The Minister is the approval authority, and which includes the provision of 'Concept Plan' approval, whereby the broad planning parameters of a project can be approved prior to separate application for the detailed aspects of a project.

3.5.1 STATE ENVIRONMENTAL PLANNING POLICIES

State Environmental Planning Policy (Major Projects)

State Environmental Planning Policy (Major Project) came into affect on 25 May 2005 and was subsequently amended on 31 October 2005. This SEPP defines 'Major Projects' for which the Minister of Planning is the approval authority, including categories of development listed at Schedule 1, which includes Group 7 - Health and Public Service Facilities – Hospitals. The hospital components of the project clearly conform to the Group 7 class of development. In view of the scale of envisaged retail, residential and/or office development, its immediate proximity to St Leonards Railway Station and its resultant major contribution to the transit oriented development principles of the Metro Strategy, these aspects of the project also conform to the Group 5 Construction Projects class of Major Projects.

In the past, when the Minister sought to develop a new planning regime on a major site, a site specific regional environmental plan or SEPP had to be made. Under the provisions of the Major Projects SEPP, the Minister can amend the SEPP to add the site to Schedule 3.

To be listed in Schedule 3, a project must be of State or regional planning significance because of its social, economic or environmental characteristics. When considering whether a site can be categorised as being of State significance, the Minister must consider whether the site meets one or more of the following criteria:

- (a) *be of regional or state importance because it is in an identified strategic location (in a State or regional strategy), its importance to a particular industry sector, or its employment, infrastructure, service delivery or redevelopment significance in achieving government policy objectives; or*
- (b) *be of regional or state environmental conservation or natural resource importance in achieving State or regional objectives. For example protecting sensitive wetlands or coastal areas; or*

(c) *be of regional or state importance in terms of amenity, cultural, heritage, or historical significance in achieving State or regional objectives. For example sensitive redevelopment of heritage precincts; or*

(d) *need alternative planning or consent arrangements where:*

- (i) *added transparency is required because of potential conflicting interests*
- (ii) *more than one local council is likely to be affected.*

The planning provisions contained in a Schedule 3 listing may relate to:

- zoning and permitted land uses possibly accompanied by a map with layout of subsequent land
- uses on the site
- performance criteria applying to different types of development
- list of exempt or complying development with any relevant performance criteria
- list of any State significant development to be determined by the Minister and/or local development to be determined by council.

The Minister has declared the project a 'Major Project' (see Appendix 1) and advised in writing that he is prepared to consider a specific listing of the project under Schedule 3, subject to consideration of a range of specific criteria (see Appendix 2). A formal application for Schedule 3 listing has been separately made (see Appendix 3). The proposed listing, is summarised at Section 7.14.

State Environmental Planning Policy 55 – Remediation of Land

SEPP 55 states that land must not be rezoned or developed unless contamination has been considered and, where relevant, land has been appropriately remediated.

State Environmental Planning Policy 11 – Traffic Generating Developments

SEPP 11 aims to ensure that the Roads and Traffic Authority is made aware of and is given an opportunity to make representations in respect of certain types of development referred to in Schedule 1 or 2 of the SEPP.

State Environmental Planning Policy 8 – Surplus Public Land

SEPP 8 aims to promote and co-ordinate the orderly and economic use of land in public ownership which is no longer required for the public purpose and is otherwise surplus to public needs. It makes the Minister the consent authority for such development.

Draft SEPP 66 – Integration of Land Use and Transport

The Draft SEPP states that the consent authority must consider whether the future development of the site helps integrate land use and transport, and minimises the need to travel by private car.

Willoughby Local Environmental Plan 1995 (WLEP 1995)

The entire site, including all internal access roads, except for the southern end of Reserve Road, which is unzoned, are currently zoned 5 (a) - Special Uses "A" Zone under the provisions of the Willoughby Local Environmental Plan 1995 (WLEP 1995). The specific objective stated for the 5(a) zone is:

"To identify land to be used for particular public or community purposes"

The specific purpose noted on the map is 'Hospital'.

In addition to 'exempt development', which is permissible without consent, development for the following purposes may be carried out in the 5(a) zone, but only with development consent:

- the particular land use indicated by red lettering on the map (i.e. 'Hospital')
- commercial operation of school facilities and sites
- community facilities
- community use of schools and recreation facilities
- drainage
- roads
- recreation areas
- recreation facilities
- utility installations

All other development is prohibited.

Pursuant to Clause 4 of the Model Provision 1980, which is adopted by WLEP 1995:

"hospital means a building or place (other than an institution) used for the purpose of providing professional health care services (such as preventative or convalescent care, diagnosis, medical or surgical treatment, care for people with developmental disabilities, psychiatric care or counseling and 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:

- (a) *ancillary facilities for the accommodation of nurses or other health care workers, ancillary shops or refreshment rooms and ancillary accommodation for persons receiving health care or for their visitors, and*
- (b) *facilities situated in the building or at the place and used for educational or research purposes, whether or not they are used only by hospital staff or health care workers, and whether or not any such use is a commercial use."*

In relation to unzoned roads, WLEP 1995 adopts Clause 14 of the EP&A Model provisions, which provide that consent may be granted by Council for development which may be carried out on land adjoining that road. This effectively includes adjacent roads, such as the southern end of Reserve Road, within the 5(a) zone.

In addition to the zoning issues WLEP 1995 contains a number of controls that may have implications for a proposed hospital facility and are summarised below:

- Clause 11 – Subdivision of land requires development consent.
- Clause 13c – The objective of this clause is the preservation and management of trees and bushland vegetation within the City of Willoughby. This clause allows Council to make a tree or bushland preservation order.
- Clause 13D – Consideration must be given to whether the proposed development will cause loss of views, loss of privacy or a reduction of sunlight to the living areas or principal open space recreation areas.
- Clauses 56-62 – Heritage items and development in the vicinity of heritage items. Consent is required for development on land that is affected by heritage items and consideration must be given to the heritage significance of the item concerned and its setting.



Figure 17: Composite zoning plan of Willoughby LEP 1995, North Sydney LEP 2001 and Lane Cove LEP 1987, prepared by Cox Richardson

3.5.2 OTHER RELEVANT STATUTORY MATTERS

Draft LEP Template

On the 31st of March 2006 the NSW Government gazetted the Standard Instrument (Local Environmental Plans) Order 2006. The standard instrument sets out a template for the preparation of new LEPs in NSW using a standard set of zones, provisions and definitions. This requires all councils to prepare a new principal LEP for their local government area using the standard instrument within the next five years. Willoughby City Council is required to have a standard LEP within three years.

The Minister for Planning has indicated that the RNSH site is a major project and will consider a request to list it as a State Significant Site under Schedule 3 of the Major Projects SEPP 2005. As such when Willoughby prepare their standard LEP the zoning will need to be consistent with any state significant listing under Schedule 3.

117 Directions

Section 117 of the EP & A Act allows the Minister for Planning to issue Section 117 Directions which can be used to guide specific issues which must be considered and incorporated by Councils in LEP development and strategic planning documents. These directions allow the Minister for Planning to manage or control certain issues that arise. Section 117 directions do not apply directly to development, but are implemented through local Councils.

The following directions are relevant to the RNSH project.

Direction No. 3 – Business Zones direction applies when a council prepares a draft LEP that creates, removes or alters a Business Zone boundary or a Business Zone provision.

It provides that Councils should not alter the location of existing zonings, alter the area of existing zonings, or create, remove or alter provisions applying to land zoned for Business that will result in a reduction of potential floor space area.

Direction No. 17 – Integrating Land Use and Transport direction applies when a council prepares a draft LEP that creates, removes or alters a zone or a provision relating to urban land, such as for residential, business or industrial purposes.

It provides that a draft LEP shall locate zones for urban purposes and include provisions that give effect to and are consistent with the aims, objectives and principles of Improving Transport Choice – guidelines for planning and development (DUAP 2001), and The Right Place for Business and Services – Planning Policy (DUAP 2001).

Direction No. 21 – Residential Zones direction applies when a council prepares a draft LEP that creates, removes or alters a Residential Zone boundary or a Residential Zone provision. This direction ensures the orderly and economic use or development of residential land. It requires that:

- Draft local environmental plans shall contain a requirement that residential development is not permitted until land is adequately serviced with water and sewerage.

- Draft local environmental plans shall retain existing provisions enabling a dwelling house to be erected on an existing allotment.
- Draft local environmental plans which zone land for residential purposes shall not contain provisions which will reduce the permissible residential density on any land to which the plan applies, and shall provide for a variety of housing forms and increase the permissible residential density on the land.
- Draft local environmental plans in the Sydney region shall retain provisions to allow dual occupancy of dwelling houses.

This ensures the orderly and economic use or development of residential land.

Direction No. 26 – Special Area Zones and Recreation Zones direction applies when a council prepares a draft LEP that creates, alters or removes a zoning or provision for any public purpose. It requires that:

- A draft Local Environmental Plan shall not create, alter or reduce existing reservations or zonings of land for public open space without the approval of the relevant public authority and the Director-General.

This ultimately aims to:

- Facilitate the provision of public services and facilities by ensuring land for public purposes.
- Provide for the creation of zones and reservations for public purposes.
- Provide for land to be acquired by the Crown or any public authority when requested by that agency.