

Mayor: Cr K Milne

Councillors: P Allsop

R Byrnes

C Cherry (Deputy Mayor)

R Cooper J Owen W Polglase

Late Agenda

Planning Committee Meeting Thursday 7 November 2019

held at

Council Chambers, Murwillumbah Civic & Cultural Centre, Tumbulgum Road, Murwillumbah commencing at 5.30pm

ENVIRONMENTAL PLANNING AND ASSESSMENT ACT 1979 - Section 4.15 Evaluation

(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
 - (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 Secretary has notified the consent authority that the making of the proposed instrument has been deferred indefinitely or has not been approved), and
 - (iii) any development control plan, and
 - (iiia) any planning agreement that has been entered into under section 7.4, or any draft planning agreement that a developer has offered to enter into under section 7.4, and
 - (iv) the regulations (to the extent that they prescribe matters for the purposes of this paragraph), and
 - (v) any coastal zone management plan (within the meaning of the Coastal Protection Act 1979),

that apply to the land to which the development application relates,

- (b) the likely impacts of that development, including environmental impacts on both the natural and built environments, and social and economic impacts in the locality,
- (c) the suitability of the site for the development,
- (d) any submissions made in accordance with this Act or the regulations, (e) the public interest.

Note. See section 75P(2)(a) for circumstances in which determination of development application to be generally consistent with approved concept plan for a project under Part 3A.

(2) Compliance with non-discretionary development standards—development other than complying development.

If an environmental planning instrument or a regulation contains non-discretionary development standards and development, not being complying development, the subject of a development application complies with those standards, the consent authority:

- (a) is not entitled to take those standards into further consideration in determining the development application, and
- (b) must not refuse the application on the ground that the development does not comply with those standards, and
- (c) must not impose a condition of consent that has the same, or substantially the same, effect as those standards but is more onerous than those standards,

and the discretion of the consent authority under this section and section 4.16 is limited accordingly.

(3) If an environmental planning instrument or a regulation contains non-discretionary development standards and development the subject of a development application does not comply with those standards:

- (a) subsection (2) does not apply and the discretion of the consent authority under this section and section 4.16 is not limited as referred to in that subsection, and
- (b) a provision of an environmental planning instrument that allows flexibility in the application of a development standard may be applied to the non-discretionary development standard.

Note. The application of non-discretionary development standards to complying development is dealt with in section 4.28 (3) and (4).

(3A) Development control plans

If a development control plan contains provisions that relate to the development that is the subject of a development application, the consent authority:

- (a) if those provisions set standards with respect to an aspect of the development and the development application complies with those standards—is not to require more onerous standards with respect to that aspect of the development, and
- (b) if those provisions set standards with respect to an aspect of the development and the development application does not comply with those standards—is to be flexible in applying those provisions and allow reasonable alternative solutions that achieve the objects of those standards for dealing with that aspect of the development, and
- (c) may consider those provisions only in connection with the assessment of that development application.

In this subsection, **standards** include performance criteria.

(4) Consent where an accreditation is in force

A consent authority must not refuse to grant consent to development on the ground that any building product or system relating to the development does not comply with a requirement of the *Building Code of Australia* if the building product or system is accredited in respect of that requirement in accordance with the regulations.

(5) A consent authority and an employee of a consent authority do not incur any liability as a consequence of acting in accordance with subsection (4).

(6) **Definitions**

In this section:

- (a) reference to development extends to include a reference to the building, work, use or land proposed to be erected, carried out, undertaken or subdivided, respectively, pursuant to the grant of consent to a development application, and
- (b) **non-discretionary development standards** means development standards that are identified in an environmental planning instrument or a regulation as non-discretionary development standards.



Items for Consideration of the Planning Committee:

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5	LATE [PR-PC] Development Application DA19/0683 for the Construction of the New Tweed Valley Hospital (NSW Planning & Environment App No. SSD 10353) and DA18/0685.01 Modification to the Concept Plan (NSW Planning & Environment App No. SSD 9575) at Lot 11 DP 1246853 No. 771 Cudgen Road, Cudgen	6

Planning Committee: Thursday 7 November 2019

LATE ITEMS

LATE REPORT FROM THE DIRECTOR PLANNING AND REGULATION

LATE [PR-PC] Development Application DA19/0683 for the Construction of the New Tweed Valley Hospital (NSW Planning & Environment App No. SSD 10353) and DA18/0685.01 Modification to the Concept Plan (NSW Planning & Environment App No. SSD 9575) at Lot 11 DP 1246853 No. 771 Cudgen Road, Cudgen

SUBMITTED BY: Development Assessment and Compliance

mhm



LINKAGE TO INTEGRATED PLANNING AND REPORTING FRAMEWORK:

2 Making decisions with you

2.1 Built Environment

2.1.2 Development Assessment - To assess development applications lodged with Council to achieve quality land use outcomes and to

assist people to understand the development process.

ROLE: Provider

SUMMARY OF REPORT:

On Thursday 3 October 2019 Council received copies of the Stage 2 State Significant Development Main Works and Operation application for Tweed Valley Hospital (SSD10353) with a concurrent modification to the already approved Concept Plan (SSD 9575).

Both applications are on public exhibition between 10 October and 8 November and Council was invited by the NSW Department of Planning, Industry and Environment to provide any commentary on the application by the close of the exhibition period.

The applications is in two distinct parts:

- 1. Modification to the approved Concept Development as described by the applicant:
 - Reconfiguration and provision of additional on-site parking, including a multi-deck car park (based on a maximum planning envelope) in conjunction with consolidated at-grade parking to better service the hospital;
 - Design refinement of the on-site road network, including modifications to support the inclusion of the proposed multi-deck car park;

- Addition of an envelope to accommodate a temporary building for the 'Tweed Valley Skills Centre' which will include:
 - A Prototype and Simulation Suite to inform and verify the detailed design of key clinical spaces for the hospital, and in turn be used as a low-fidelity simulation space for TAFE NSW health education programs;
 - A Skills and Employment Hub a drop-in facility for community and local industry, providing information on training and careers in the construction industry, jobs on the Project and support in developing business capability and tendering for subcontract work packages and supply contracts.
- An increase in the proposed number of hospital beds (day only and overnight beds) from 430 to 499 beds (excluding emergency treatment spaces (46);
- Amendments to the approved maximum planning/building envelopes to accommodate the following design changes to the hospital and health hub:
 - Minor adjustments/refinements to the main hospital envelope (including addition of envelope for central energy plant);
 - Minor adjustments/refinements to the health hub envelope (and removal of reference in the consent to a single building - i.e. to allow for more than one building within the health hub envelope).
- Increase maximum Gross Floor Area (GFA) to approximately 65,050 m2 (GFA, as defined in the Standard Instrument: Principal Local Environmental Plan as at the date of this development submission);
- Relocation/adjustment of the electrical switching station kiosk planning envelope and addition of an approximate envelope for the co-location of backup generators; and
- Amendment to the Landscape Zonal Plan to reflect the detailed landscape design presented in the Stage 2 SSD application.

2. Stage 2 Hospital Delivery – Main Works and Operation

- Construction and Main Hospital Building:
 - Main entry and retail area
 - o Administration
 - Community health
 - o In-Patient units
 - Outpatient clinics and day only units
 - Child and Adolescent Services
 - o Intensive Care Unit
 - Mental Health Unit
 - Maternity Unit and Birthing Suites
 - Renal Dialysis
 - Pathology

- Pharmacy
- Radiation Oncology as part of integrated
- Cancer Care
- Emergency Department
- o Peri operative Services
- Interventional Cardiology
- Medical Imaging
- Mortuary
- o Education, Training, Research
- Back of House services
- Rooftop Helipad
- Construction of support Buildings referred to as the Health Hub containing:
 - Oral Health
 - o Community Health
 - Aboriginal Health
 - Administration
 - o Education, Training and Research
- Internal roads and car parking, including multi-deck parking for staff, patients and visitors;
- Construction of a temporary building for the 'Tweed Valley Skills Centre';
- External road infrastructure upgrades and main site access;
- Environmental and wetland rehabilitation, including rehabilitation of existing farm dam as outlined in the Biodiversity Development Assessment Report (BOAR);
- Site landscaping;
- Signage; and
- Utility and service works.

The application will include 499 beds and 46 emergency treatment spaces.

There are additional components and changes identified in the Stage 2 SSD application that do not form part of the original Concept Proposal. As such, a modification to the approved Concept Proposal (SSD consent 9575) as described above is also sought as part of a separate but concurrent application.

Comments are due back to the Department by Friday 8 November 2019. The purpose of this report is to provide the elected body with an opportunity to review, edit and endorse a submission to the NSW Department of Planning, Industry and Environment. The draft version of the Council submission is provided at Attachment 1. The main issues raised relate to the following themes:

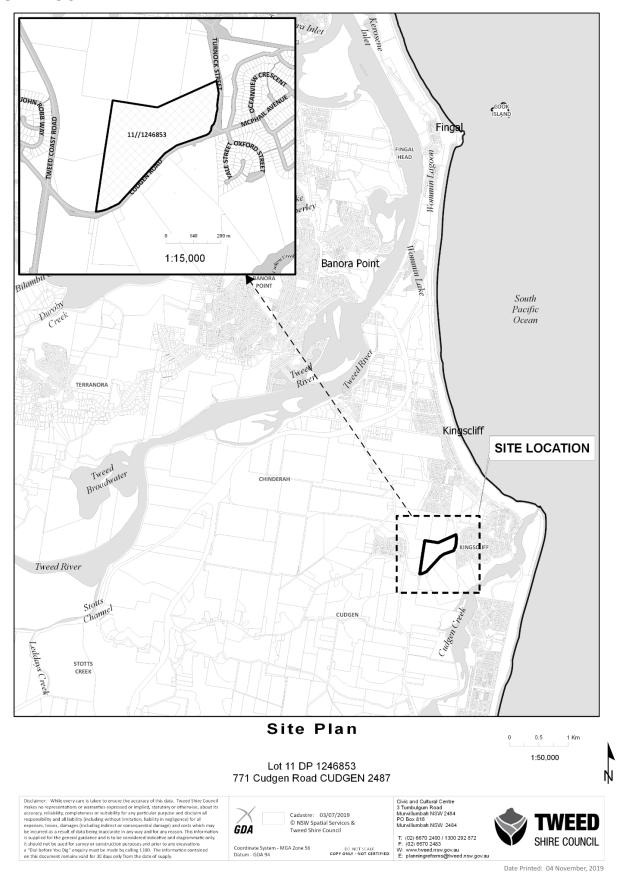
- 1. <u>Water & Sewer Infrastructure Arrangements</u> additional information is needed to rectify some anomalies in the submitted material;
- 2. Road Connections Council requires and will work with the applicant on a Section 138 Roads Act Application to ensure the hospital is serviced by upgraded road frontages with an urban street cross section and associated infrastructure that is suitable for public access opportunities via public transport and good pedestrian and cycle pathways;
- 3. <u>Equal Access Issues</u> Council would like to ensure there are enough drop off zones for carers that would enable carers to park in the drop off zone while they escort patients to the required medical units;
- 4. <u>Stormwater Management</u> some clarification is sought regarding the consistency of various stormwater and integrated water management reports submitted with the application. The applicant will need to demonstrate to the consent authority that onsite facilities will be adequately designed and constructed to meet water quality and quantity objectives. In particular further information is required to ensure discharges from the hospital site onto private land to the north and across Cudgen Road to the south do not create unacceptable adverse impacts or nuisance;
- 5. <u>Urban Design</u> as per previous comments the application could benefit from additional site master planning, a review of the floor plate configuration, a reconsideration of elevation articulation and material finish to better reflect the coastal character of the area. In addition the addition of more pedestrian and cycle pathways through the site could be considered;
- 6. <u>Visual Impact Assessment</u> The site is highly visible and the VIA requires additional work to address the street context, light pollution, the variation to the original Concept Plan, the possibility of additional mitigation measures;
- 7. <u>Heritage Impact The South Sea Islander Walls (Walls 1, 3 and 4) have now been demolished from the site. Generally the range of recommendations in the Interpretation Strategy prepared by Niche dated 23 September 2019 (appendix M Part 4) are supported subject to some additional recommendations as detailed in the submission;</u>
- 8. <u>Agricultural Offset Plan B 28</u> Condition not satisfied no work program established;
- 9. <u>Condition B7 Koala Food Tree's</u> Condition not satisfied amended plans required;
- 10. <u>Environmental Health Matters</u> food premises, aircraft noise, contamination, and public health matters can all be addressed by way of recommended conditions of consent; and
- 11. <u>Building Code of Australia Matters</u> can all be addressed by way of recommended conditions of consent.

The following report is a brief summary of the application for Council's convenience and a brief summary of the main issues within Council's submission.

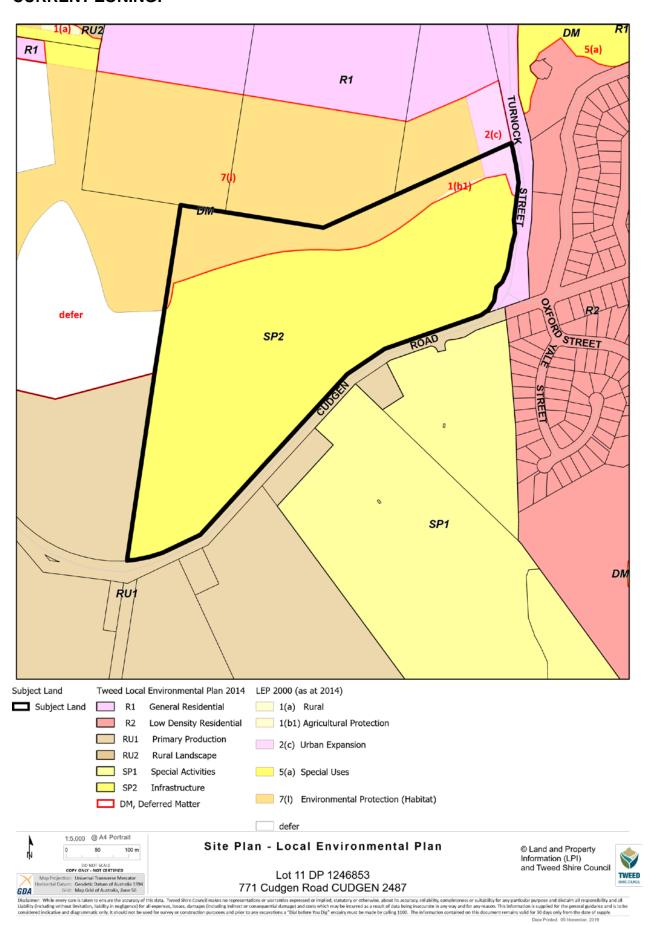
RECOMMENDATION:

That Council in regard to Development Application DA19/0683 for the construction of the new Tweed Valley Hospital (NSW Planning & Environment App No. SSD 10353) and DA18/0685.01 Modification to the Concept Plan (NSW Planning & Environment App No. SSD 9575) at Lot 11 DP 1246853 No. 771 Cudgen Road, Cudgen endorse the Draft Council Submission at Attachment 1.

SITE LOCALITY:



CURRENT ZONING:



AERIAL:





Aerial Photography April 2018

Lot 11 DP 1246853 771 Cudgen Road CUDGEN 2487 © 2018 Imagery - Tweed Shire Council © Cadastre - Tweed Shire Council Boundaries shown should be considered approximate only.

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Planning Committee: Thursday 7 November 2019

REPORT:

Applicant: Health Infrastructure

Owner: Mr Duane J Joyce & Mr Kerry D Prichard

Location: Lot 11 DP 1246853 No. 771 Cudgen Road, Cudgen

Zoning: SP2 Infrastructure Health Services Facility, 1(b1) Agricultural Protection,

2(c) Urban Expansion, 7(l) Environmental Protection (Habitat)

Cost: \$534 million (total project budget allocation)

SUMMARY PROPOSAL (as per the EIS) AND BRIEF SUMMARY OF KEY ISSUES:

Modification to the approved Concept Development:

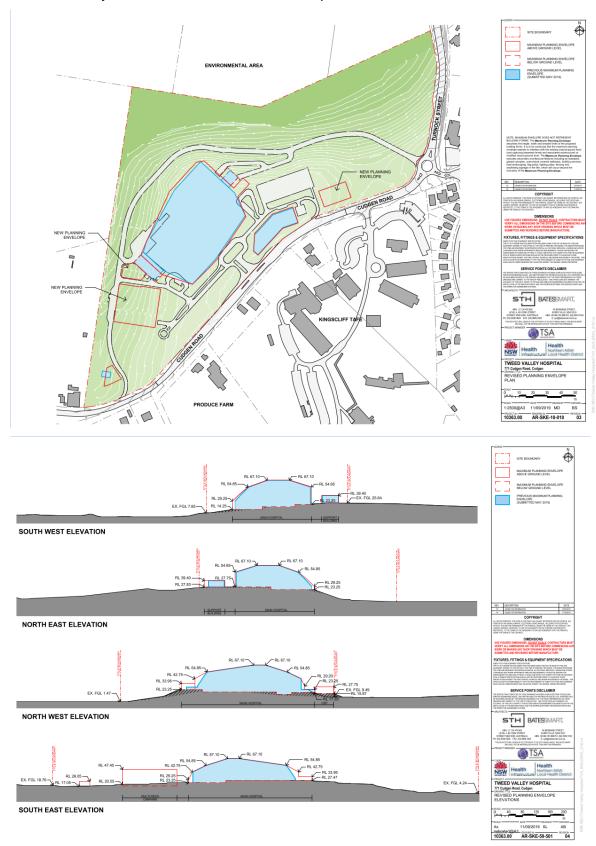
 Reconfiguration and provision of additional on-site parking, including a multi-deck car park (based on a maximum planning envelope) in conjunction with consolidated at-grade parking to better service the hospital;

The multi deck is to the west of the main hospital and will comprise up to 1388 spaces. It will have a maximum height of 47.45m (10 storeys in height). Lowest level RL 16m. Setback 30.4m from the western boundary with a footprint of 69.1m x 74m;

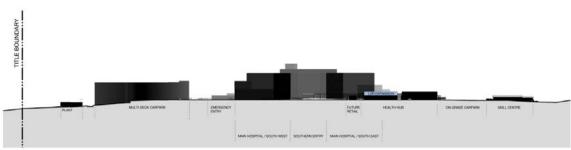
- Design refinement of the on-site road network, including modifications to support the inclusion of the proposed multi-deck car park;
- Addition of an envelope to accommodate a temporary building for the 'Tweed Valley Skills Centre' (max height 30.4m setback 10.9m from Cudgen Road, and 134m from eastern boundary) which will include:
 - A Prototype and Simulation Suite to inform and verify the detailed design of key clinical spaces for the hospital, and in turn be used as a low-fidelity simulation space for TAFE NSW health education programs; and
 - A Skills and Employment Hub a drop-in facility for community and local industry, providing information on training and careers in the construction industry, jobs on the Project and support in developing business capability and tendering for subcontract work packages and supply contracts.
- An increase in the proposed number of hospital beds (day only and overnight beds) from 430 to 499 beds (excluding emergency treatment spaces (46);
- Amendments to the approved maximum planning/building envelopes to accommodate the following design changes to the hospital and health hub:
 - Unchanged maximum height of RL 67.1 including the helipad and plant rooms;
 - Unchanged maximum height of RL 54.85 for the main building mass;
 - Unchanged lowest basement level at RL 14.25;
 - Unchanged level of the entry from Cudgen Road at RL 27.75;
 - The footprint of the proposed modified planning envelope measures approximately 143m x 199m in plan, being marginally larger than the currently approved version (136m x 187m);
 - A marginally reduced minimum setback of approximately 61.4 m from the boundary with Cudgen Road, compared to the currently approved setback of 63.5;

- An additional envelope for a Central Energy Plant between the main hospital building and multi-deck car park is proposed. The maximum envelope for the Central Energy Plant:
 - is setback 32.4 m from the western boundary; and
 - has maximum height of RL 27.75.
- o Minor adjustments/refinements to the health hub envelope parameters include:
 - Unchanged maximum height of RL 39.40;
 - Changed ground level from RL 27.75 to RL 26.60; and
 - A marginally reduced minimum setback of approximately between 8.1m and 12.6m from the boundary with Cudgen Road, compared to the currently approved setback of between 9.3m and 13.3m.
- The SSD 9575 consent preamble and conditions also refer to the health hub as a support building (i.e. singular). It is proposed to amend this wording to remove reference to a single building and allow for more than one building to be developed within the health hub maximum planning envelope.
- Increase maximum Gross Floor Area (GFA) to approximately 65,050 m2 (GFA, as defined in the Standard Instrument: Principal Local Environmental Plan as at the date of this development submission);
 - This is as a result of Stage 2 detailed design and to accommodate expansion of the hospital for additional in-patient units (subject to demand and funding) and expansion of the health hub:
- Relocation/adjustment of the electrical switching station kiosk planning envelope and addition of an approximate envelope for the co-location of backup generators. The electrical switching station kiosk has been relocated further to the east. The high-voltage electrical network for the hospital will be backed by standby diesel high-voltage generators. These generators will operate in the event of a utility supply outage to provide electricity to critical patient care areas. The addition of an approximate planning envelope for the co-location of the backup (emergency) generators with the electrical switching station kiosk has also been included in the modified Concept Proposal. The area will also accommodate a fuel storage/source for the generators. Access and a truck lay-by are included from the service ring road. Further operational details are applicable to and provided in the Stage 2 SSD application;
- Amendment to the Landscape Zonal Plan to reflect the detailed landscape design presented in the Stage 2 SSD application:
 - Reduction of proposed farm landscape to the east of the site, reverting certain zones to low maintenance native landscaping;
 - General modifications to align the landscape design with the Concept Modification site masterplan design;
 - Farm landscape zone reduced and split into new zones named 'Existing Orchard',
 'Community;
 - Garden Opportunity' and 'Therapy Garden Opportunity';
 - Low Maintenance Native Landscape' zone split into 'Hydromulched/drill seeded lawn' and 'Lawn with clusters of native planting';
 - o 30m section of 'Vegetation buffer' extended south to meet western boundary;

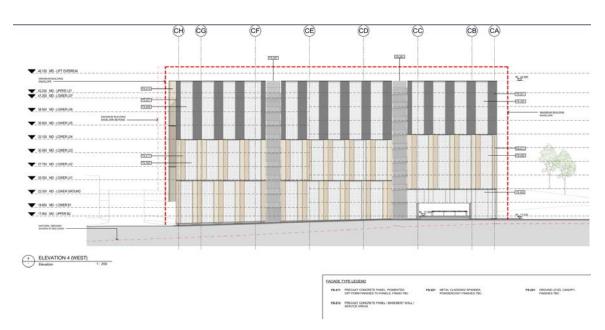
o Pathways down to and north of the loop road removed.











The most significant changes relating to public infrastructure are the amended traffic and access provisions, and the increased number of beds for the facility.

Traffic access changes facilitate better separation of operational and staff vehicles from patient/visitor vehicles, and spread turning movements across the various entries and exits for the site.

Car parking has been increased from 700 spaces under the approval to about 1200 initially, and over 1,500 ultimately via the introduction of a 10 storey multi deck car park. The additional spaces are supported, and address concerns that the original estimates for parking were conservative. The application does not provide anything definitive regarding management of on-site parking (e.g. paid parking or time restrictions) but flag an intent to consider these options to limit long term parking on site and promote public and active transport. Similarly, off-site parking impacts are acknowledged but not explored in depth, other than an intent to provide high quality and convenient parking at the facility which will limit desirability of more remote options. While internal parking management is a matter for Health Infrastructure, potential impacts on surrounding streets will ultimately come back to Council to manage. This would include requirements for parking restrictions, enforcement, complaint handling, and maintenance in surrounding streets. Council would like the opportunity to continue dialogue with the hospital regarding ongoing management of parking issues in the locality, should they eventuate, with a commitment that the hospital will be engaged in solutions.

Increased GFA and patient numbers would normally trigger recalculation of s7.11 Contributions. However the hospital is exempt from contributions, but will carry out external works in kind (under SSD2).

The main element of the modification that Council wants the Department to further investigate is the introduction of the 10 storey multi deck car park on the western side of the development site. This will be the first element of the site for anyone visiting the Hospital from the main Tweed Coast Road and M1 Highway. To date the application has not demonstrated a western photomontage of the multi deck car parking area or suggested sufficient mitigation measures to soften the impact of this structure. The multi-deck car park appears to represent a solution for onsite parking however it could be better incorporated to the site with softer design elements (green walls), an air bridge connecting to the main hospital, and further site consideration for additional covered awnings throughout the site.

The below image is an example of a green wall car park at Manly Vale which could be considered for the multi deck to ensure it is more reflective of the Kingscliff coastal character.



B-Line Commuter Car Park Manly Vale Credits Simon Freeman 2019 C/O Google

From an agricultural perspective the main concern with the multi-deck car park is that it will remove the opportunity to increase the western boundary vegetation buffer should intensive agriculture occur in the future on the parcel to the west. The proponent should be providing some form of additional screening in that side of the car park. The car park itself probably provides some additional screening to the hospital but even users of the car park can be a sensitive receiver. The largest changes from these modifications appear to affect the built form and urban design with two new building envelopes shown below in site plan version and elevation version. The first near Cudgen Road is a smaller building for a skills centre associated with the TAFE NSW and the second is the 10 storey multi deck car park:

Stage 2 – Hospital Construction:

The application will include 499 beds and 46 emergency treatment spaces.

There are additional components and changes identified in the Stage 2 SSD application that do not form part of the original Concept Proposal. As such, a modification to the approved Concept Proposal (SSD consent 9575) as described above is also sought as part of a separate but concurrent application.

- Construction and Main Hospital Building:
 - Main entry and retail area
 - Administration
 - Community health
 - o In-Patient units
 - Outpatient clinics and day only units

- Child and Adolescent Services
- o Intensive Care Unit
- Mental Health Unit
- Maternity Unit and Birthing Suites
- Renal Dialysis
- Pathology
- o Pharmacy
- Radiation Oncology as part of integrated
- Cancer Care
- Emergency Department
- Peri operative Services
- Interventional Cardiology
- Medical Imaging
- Mortuary
- o Education, Training, Research
- Back of House services
- Rooftop Helipad
- Construction of support Buildings referred to as the Health Hub containing:
 - o Oral Health
 - Community Health
 - Aboriginal Health
 - Administration
 - Education, Training and Research
- Internal roads and car parking, including multi-deck parking for staff, patients and visitors;
- Construction of a temporary building for the 'Tweed Valley Skills Centre';
- External road infrastructure upgrades and main site access;
- Environmental and wetland rehabilitation, including rehabilitation of existing farm dam as outlined in the Biodiversity Development Assessment Report (BOAR);
- Site landscaping;
- Signage; and
- Utility and service works.

The EIS describes the hospital; as follows:

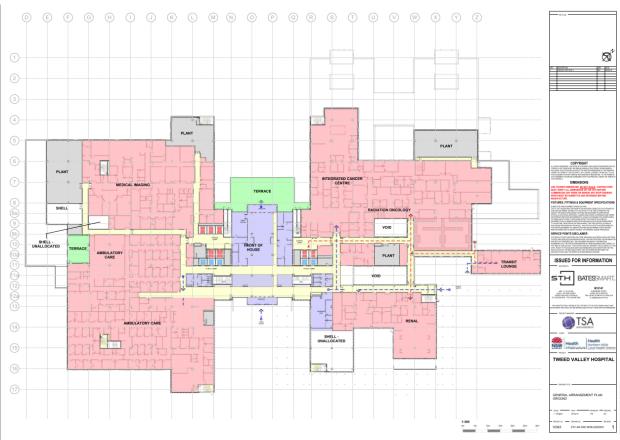
The building form can be characterised by its four-quadrant anchors, supported by a central connective core. The quadrants frame axial corridors which are experienced at all levels of the hospital, being a key public realm spatial ordering and orientation device.

At the base of each quadrant an increased floorplate area supports the clinical services functions. The additional floorplate, where practical, is expressed as a cluster of diverse smaller scaled forms, which have regard for site topography and terrace to the north along the site's ridgeline.

A description of the departments/facilities to be accommodated within the hospital is provided in the below table:

Heenitel	December of Facilities	
Hospital Level	Departments/Facilities	
Level 7	 Helicopter Landing Site (HLS) 	 Clinical Lobby
Level 6	■ Plant	
Level 5	Inpatient Units (including Stage 2B) Shared Staff Workspace/Support Area	Public AmenitiesPlant
Level 4	 Medical and Surgical Inpatient Units Shared Staff Workspace/Support Area 	 Public Amenities Plant
Level 3	Intensive Care Unit Close Observation Unit Cardiac Inpatient Unit Cardiac Outpatient Services Medical Inpatient Unit	 Clinical Information Unit Shared Staff Workspace/Support Area Public Amenities Plant
Level 2	Rehabilitation Services Child and Adolescent Inpatient Unit and Outpatient Services Older Persons Inpatient Unit Central Sterilisation Services Unit	 Shared Staff Workspace/Support Area Public Amenities Plant
Level 1	Perioperative Services Interventional Radiography/Cardiac Catheterisation Birthing Suite Maternity Inpatient Unit	 Special Care Nursery Shared Staff Workspace/Support Area Public Amenities Plant
Ground Level	Main Entrance Front of House/Administration/ Integrated Booking Unit Ambulatory Care Integrated Cancer Services Medical Imaging	Renal Specimen Collection Transit Lounge Public Amenities, Café and Retail Plant
Lower Ground Level	Emergency Satellite Medical Imaging Mental Health Inpatient Unit Community Mental Health (Outpatients) Drug and Alcohol Services Multi-Faith Space	 Pharmacy Pathology Indigenous Meeting Area Fleet Management Public Amenities Security Plant
Basement	Engineering Biomedical Engineering Materials Management (including Loading Dock) Environmental Services Central Equipment Resource Unit	 Food Services Mortuary Basement Staff Hub Central Energy Plant Plant Rooms



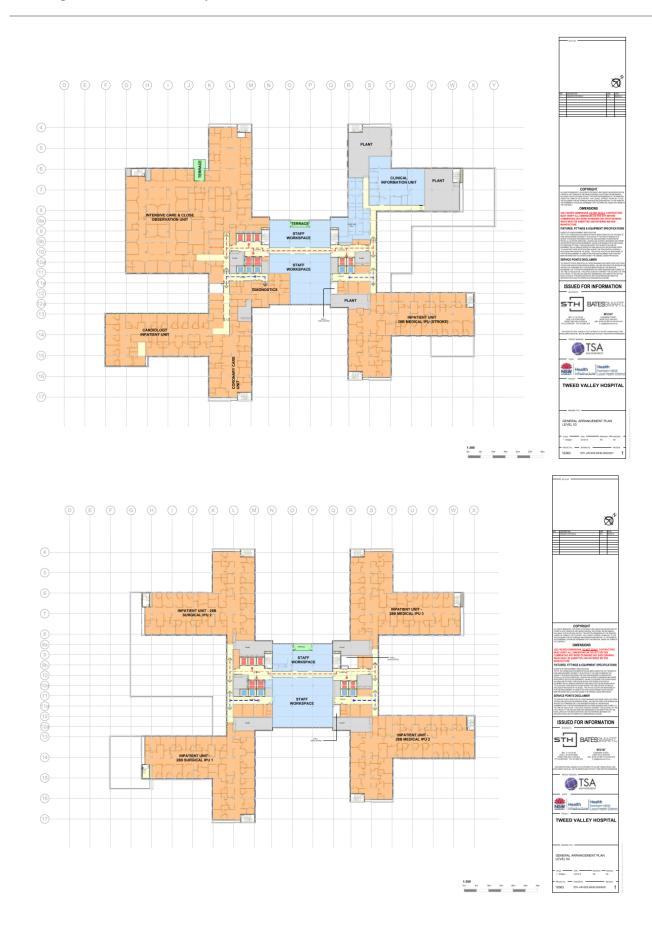


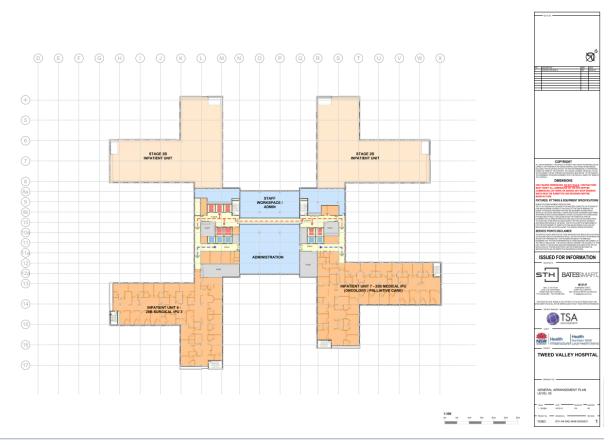


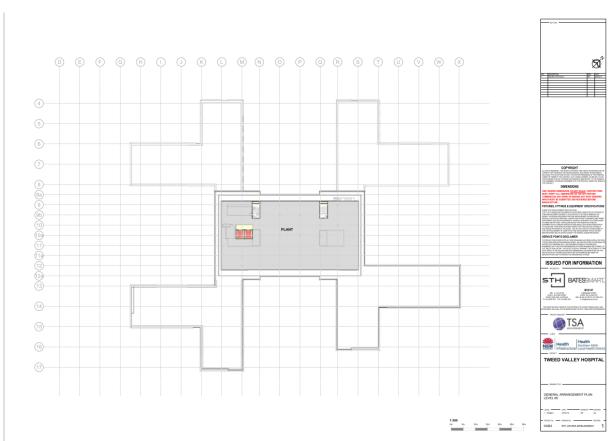
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TSA NSW Health Northern NSW Local Health Di TWEED VALLEY HOSPITAL

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The EIS goes on to describe the materials and finishes as:

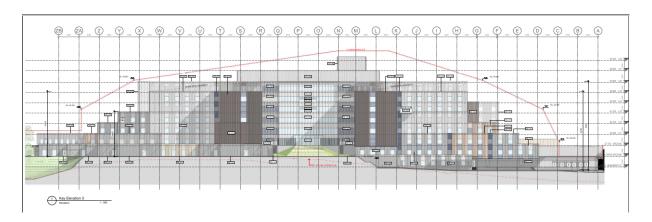
- o An earthy and durable material palette referencing the site;
- The Quadrant Anchors are to be clad in a lightweight metal façade, evoking an agrarian reference to the Australian Landscape. Profile depth variation will be utilised to express architectural hierarchies. Natural warm hue colouration will be adopted;
- The Granular Forms are to be built of precast concrete panel construction. Oxide pigments will introduce a range of warmer hues to connect with the site's earth tones; and
- o The Recessive Core form will adopt a window wall arrangement with combination metal panel and glazed façade. The finishes will be expressed in darker hues.

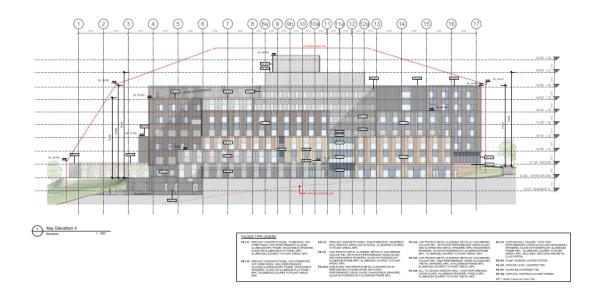


Plate 3.1 Perspective of the Facade and Main Entry



Plate 3.2 Perspective of the Facade and Emergency Entry

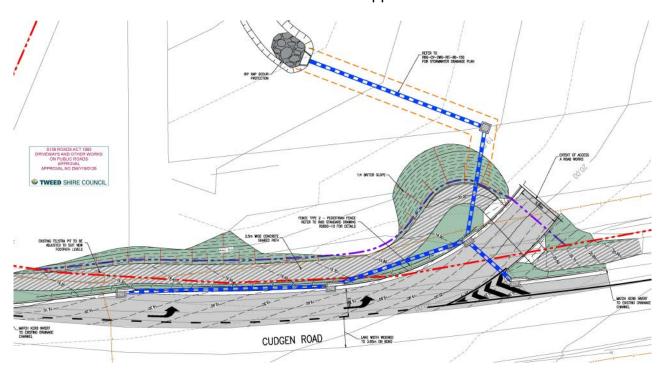




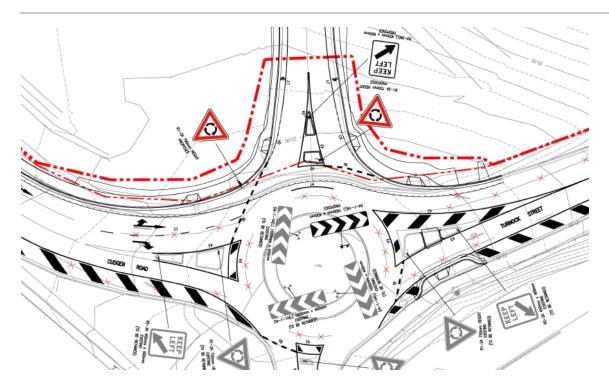
Traffic & Access

There are currently two approvals in place being:

Access A – DWY19/0126 - Proposed access A is a Left-in only from Cudgen Road at the eastern boundary. The access is provided with an Auxiliary Left tum (AUL) treatment. This is proposed to be a limited access only and provides access to the staff car park and dedicated access for ambulances and service vehicles. The approved DWY19/0126 is described below:

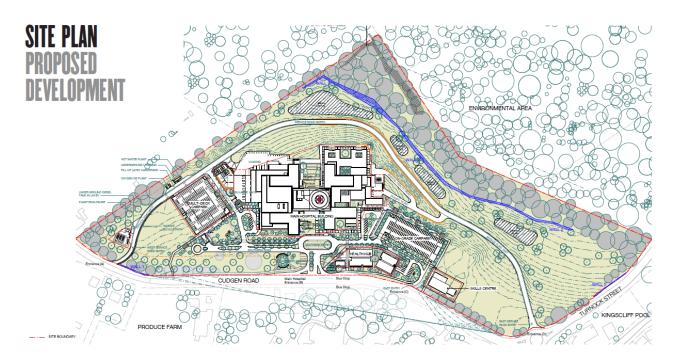


Access D - DWY19/0127 - All movements access to Cudgen Road / Turnock Street in the form of a fourth leg to the existing Turnock Street / Cudgen Road intersection. This access provides access for staff, visitors and service vehicles. The access has been designed as an expansion to the existing roundabout. The approved DWY19/0127 is described below:



Current Stage 2 Proposal

The applicant seeks Council consent to progress Stage 2 works being the detailed design, construction and operation of the Tweed Valley Hospital.



Proposed External Works Access

The Tweed Valley Hospital provides a total of four access locations as follows:

Access A

Proposed access A is a Left-in only from Cudgen Road at the eastern boundary. The access is provided with an Auxiliary Left tum (AUL) treatment. This is proposed to be a limited access

only and provides access to the staff car park and dedicated access for ambulances and service vehicles.

Access A detail engineering design has already been approved for construction under DWY19/0126. Works are scheduled to commence any day.

Access B

Proposed access B is proposed as the sites primary access which provides access for staff, ambulances and visitors. Given the a high level of pedestrian amenity, providing pedestrian connectivity to the westbound bus stop, Kingscliff TAFE and surrounding residential areas the access is proposed to be signalised. The location of the proposed primary access has been dictated by a number of factors which includes the requirement to provide sufficient vegetation buffer from overspray on adjacent farmland and to align with the TAFE frontage to Cudgen Road to allow for a potential future upgrade to a four-leg intersection as part of future expansion or development on the TAFE site.

Council's submission at Attachment 1 recommends a S138 application to be submitted.

Access C

Left-in only from Cudgen Road west of the Kingscliff TAFE access. The access is provided with a short Auxiliary Left turn (AUL(s)) treatment. This access provides access to staff and visitor car parking as well as for more direct access to the transit set-down. The access is important in reducing unnecessary trips on the internal road adjacent the main entry.

Council's submission at Attachment 1 recommends a S138 application to be submitted.

Access D

All movements access to Cudgen Road / Turnock Street in the form of a fourth leg to the existing Turnock Street / Cudgen Road intersection. This access provides access for staff, visitors and service vehicles. The access has been designed as an expansion to the existing roundabout.

Access D detail engineering design has already been approved for construction under DWY19/0127. Works are scheduled to commence any day.

The proposed road upgrades including existing and new intersection works, cater for the proposed development and all accesses and intersections operate within acceptable limits with the exception of the Tweed Coast Road/Cudgen Road intersection. However, the proposed upgrades to this intersection are expected to improve current levels of service.

The increases in right turn traffic movements at the Cudgen Road/Turnock Street roundabout, due to internal reconfiguration, has been modelled and does not significantly affect its level of service.

While parking will be provided at a rate commensurate with Council's DCP A2 and RMS guidelines, the implementation of a paid parking scheme may result in long term parkers, i.e. patients admitted for several days or months, parking on the adjacent street network. This may result in Council demands for timed parking on streets and public car parks in close proximity to the hospital.

Service Vehicle Access is considered appropriate and caters for the design vehicle.

Pedestrian access and alternate transport linkages are considered appropriate.

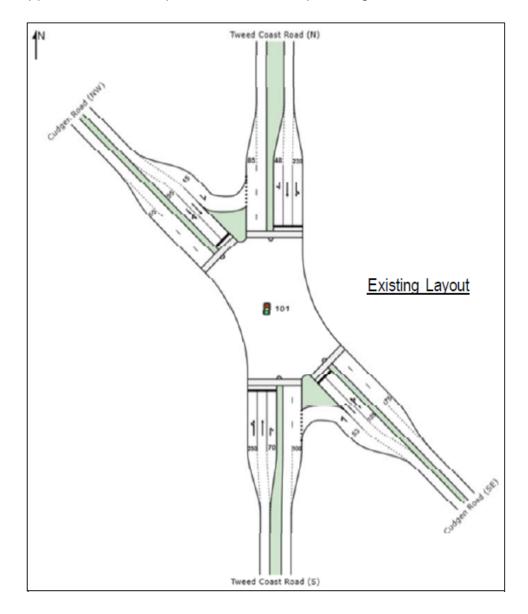
Attachment 1 includes recommended conditions that state:

Any proposed paid parking scheme should be implemented in consultation with Tweed Shire Council to ensure that parking associated with the Tweed Valley Hospital does not adversely impact on adjacent residences or businesses.

All road works are subject to assessment and approval under s138 Roads Act and are to include streetlighting plans complying with AS1158 V4 Category.

External Works Tweed Coast Road/Cudgen Road Intersection

The application includes the following upgrades to the intersection with Tweed Coast Road in order to cater for increased turning movements to service the hospital as detailed in the applicant's Traffic Impact Assessment report. Figure 5.2 below demonstrates these works:



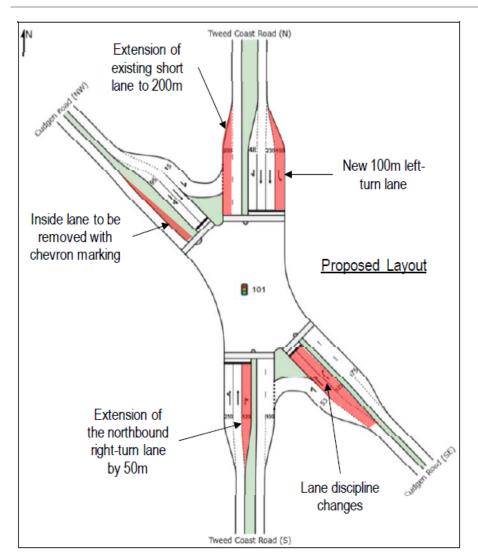


Figure 5.2: Tweed Coast Road / Cudgen Road – Upgrade Works

The proposed intersection upgrades are generally acceptable, given they were initially proposed as part of Council's Tweed Road Development Strategy.

Health Infrastructure proposes to carry out the intersection upgrade as "works in kind" given the hospital development is exempt from Section 7.11 contributions.

At a meeting held between Council staff and the hospital project team on 21 October 2019, the potential to undertake additional infrastructure works at this intersection in conjunction with the hospital works was discussed. A 500mm sewer rising main is required through the intersection to connect the future Kings Forest development to the south to the Chinderah Waste Water Treatment Plant to the north. A significant upgrade to a transverse stormwater drain north of the intersection is also required, and has been discussed with consultants for Gales Holdings to facilitate residential development in Cudgen/West Kingscliff.

A formal approach will be made to Health Infrastructure, however it has also been included as part of Council's submission. Cooperation between the parties now will assist in avoiding considerable disruption to access to the hospital in the future, and may save costs.

External Works Pedestrians / Footpaths / Cycleway

An existing off-road shared path runs along the Project Site frontage of Cudgen Road (view photo 1 below). The pathway connects to residential areas west of Tweed Coast Road and to Kingscliff in the east.



Photo 1 – existing footpath Cudgen Road

The existing footpath network for shared off road cycleway and pedestrian footpath is demonstrated below:

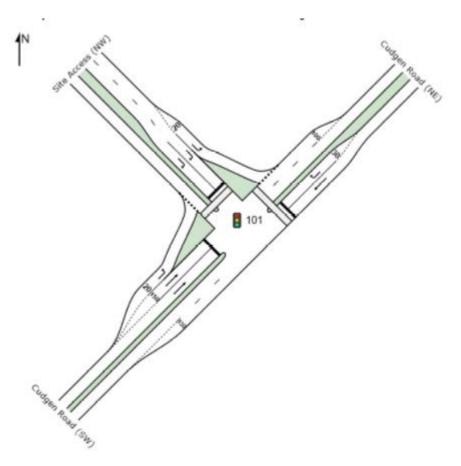


Source: Tweed Shire Council Cycleways and Footpaths 2017

While specific pedestrian volumes associated with the hospital are not known, the proposed hospital will generate a significant increase in pedestrian demand including the demand for crossing Cudgen Road. The demand for crossing is generated by the westbound bus stop (noting the proposed new bus stop will located in close proximity to the intersection, the eastbound bus stop (for pedestrians crossing from the opposite residential developments and

Kingscliff TAFE) and by the residential areas to the east of the Project Site. Consideration has also been given to the expected increase in "slow walkers' associated with a hospital including the elderly and people with disabilities who require larger gaps in traffic to safely cross.

The proposal for providing pedestrian improvements include a new signalised pedestrian crossing as part of the signalised access intersection crossing across Cudgen Road. The proposed crossing would provide pedestrian safety and amenity for existing pedestrians and new pedestrians generated by the Project. The proposed layout is indicated below:



A new pedestrian connection is proposed on the southern side of Cudgen Road near the existing TAFE access, connecting the existing footpath with the new westbound bus stop and the new signalised access intersection.

The above works are to be done as part of the external works \$138 application.

Traffic Generation / Assessment

As part of the traffic assessment undertaken for Stage 1, a number of capacity upgrades and operational improvements were identified at the Tweed Coast Road / Cudgen Road intersection. These upgrade works were reflected in Schedule 2 Conditions of Consent Part A2 (Drawings C331 and C332 prepared by Bonacci) and Part B Conditions to be satisfied in Future Development Application(s) Part B22(c). The upgrades works are detailed as follows:

- addition of a 100m southbound left-tum lane on Tweed Coast Road;
- phase sequence change to allow the southbound left-turn to overlap with the westbound right-turn (i.e. possible with the provision of a dedicated southbound left-turn lane);

- lane discipline change for the two approach lanes on the south-eastern approach:
- Change of the left through lane to a through and right lane;
- Change of the right through and right lane to a right only lane;
- extension of the northbound departure lane from approximately 85m to approximately 200m; and
- conversion of the north-western leg departure to a single lane (no physical changes. i.e. through provision of chevron line marking). With the lane discipline changes on the south-eastern approach, there is only one lane travelling through to the north-western departure lane.

The following additional upgrade works has been identified as part of this assessment. This includes:

 extension of the northbound right-tum on Tweed Coast Road (i.e. on the southern leg) by approximately 50m (increasing the total length from approximately 95m to approximately 145m).

Attachment 1 contains a recommended condition to be provided for a S138 application to be submitted for the above intersection works.

Water & Sewer Infrastructure

The review of the water and sewer documentation has resulted in the following information needed to be clarified which has been sought in Attachment 1:

- The EIS document refers to 499 beds seeking an exemption of the additional 46 emergency treatment beds from loading calculations (transport & water and wastewater). However Appendix R uses the combined figure of 545 beds which includes the additional emergency treatment beds. Please advise what loading the emergency treatment beds will generate.
- Despite loadings for the proposed skills centre being temporary, the water and wastewater loadings from this use shall be estimated. Further information is required to outline to Council how the developer proposes to discharge to Council's sewerage system during this staging/ construction period;
- Errors have been made within the water and wastewater loading estimates in Appendix R. The EP to ET ratio has not been considered within the average dry weather flow (ADWF) calculations, which has led to an underestimation of flows provided within the report;
- Despite proposing a gravity sewerage system internally within the hospital lot, the developer has not provided peak wet weather flow (PWWF) estimates. Industry and Council standards require that PWWF calculations are is provided as part of the assessment within Appendix R;
- The 24 hour AWDF emergency storage of 200kL at the sewer pumping station outlined in Appendix R is insufficient due to the incorrect calculations outlined above;
- The Water demand load estimate is incorrect EP to ET ratio has not been considered Appendix R and are underestimated this needs to be updated;
- Water Storage tanks may be undersized as a result of the underestimated water demand and should be reviewed and updated in Appendix R;
 - o The Plans and Drawings in Appendix B (Part 5) shall update the connection shown to the Council sewer rising main to include a boundary kit at the

- Hospital property boundary and a connection to Council standards within the road reserve; and
- As outlined within Stage 1 approvals, prior to any approval being issued for connection to Council's water and wastewater infrastructure, an agreement to provide services is to be in place. The agreement will address the conditions under which the applicant may connect to and use Council provided water supply and sewerage services and any fees to be paid by the proponent to Council or any works to be done by the proponent to satisfy Council's requirements. This requirement is recommended to stand as a condition of consent for Stage 2.

Site Master Planning

Whilst it is acknowledge the development application is limited to the proposed building and site configuration as documented in the application, reference is made to previous TSC comments made (SEARS, DA Stage 01) highlighting the need to master plan the entire hospital site. Whilst it is recognised that the *Architectural and Urban Design Report* includes a section on potential future stages, a whole of site master plan as part of a development application would provide a greater degree of certainty in terms of the ultimate site road and pedestrian network and future development blocks particularly across the eastern side of the site and configuration and interrelationship of different land uses within this health precinct more holistically. Importantly this would also provide an understanding of how the hospital site will integrate with the surrounding urban fabric including TAFE and low density residential on the opposite side of Cudgen Road.

Recommendation:

That a holistic and hospital site master plan should be prepared which nominates future development stages and demonstrates how the overarching site configuration:

- Has been designed as an extension of the existing urban structure (rather than separate from) to consider ultimate road and pedestrian networks, development blocks, activity nodes, connections, areas of public domain, landscape corridors, legible access and egress points that will inform current and future stages of development across the site.
- Acknowledges the surrounding land use interfaces and nominate appropriate building form and envelopes which will be of a compatible scale with regard to character and view sharing.
- Identifies opportunities for street edge and interface land uses which will have mutual benefits for the hospital and surrounding residential and education precinct catchment. This may include ease of access to small retail convenience stores, pharmacy, food and beverage outlets and public domain areas which may service hospital users as well as the TAFE and immediate residential areas within the hospitals walkable catchment.

Site planning and floor plate configuration

The submitted design report alludes to site and building planning being ordered largely around the creation of strong visual (and physical) connections across the site and from the building to the surrounding landscape and views beyond. However based on the submitted site and

floor plans the central north facing axis appears to be the only strong physical and visual axis that has been established.

Whilst this strong north-south formal entry axis has been strongly incorporated, there is less legible east-west access along public entry corridors. The corridors currently appear to be internalised, not adjoining any landscape courtyards and thereby with no access to natural light or way points to break the relatively long circulation routes. To enhance the physical and legible connection between the car park and main hospital there is opportunity to include a sky-bridge connection.

In relation to the hospital floor plate configurations, due to the depth of the lower levels, lack of larger internal courtyards or light wells only a relative small proportion of floor areas would have access to natural light and views. It is however conceded that there are substantial components of a hospitals operational program which are more conducive to or require internalised spaces.

The quadrant floor plate configuration of the upper levels would open up floor plates to multiple view and natural light opportunities, there is also a significant western and south western elevation surface area which would be subject to significant heat load. The relative flat elevation finish would provide little shading opportunity.

It is also noted that on some floor plates (ground, level 02, level 03) service plant areas have been nominated to the north / north-eastern edges of the building which would have the optimum opportunities for solar aspect and views towards the ocean.

Recommendation:

- Incorporation of additional opportunities to open up visual and physical connections across the site and buildings floor plates to the surrounding landscape and views in keeping with the original design intent;
- Create more legible east-west axis for pedestrian circulation considering width of circulation, height/volume, integration of landscape and natural light along its route(s);
- Consider the incorporation of a sky-bridge link between the car park and main hospital building;
- Review floor plate configurations to incorporate greater opportunities for courtyards and light wells which will draw in natural light and ventilation opportunities as well as open up more external and internal views; and
- Review location of service plant areas which currently on some floors would occupy the best access to views and solar orientation.

Built form and Design Response

The submitted *Architectural and Urban Design Report* discusses the design response drawing influence from the regions rich agrarian tradition and connection to place and land.

However, rather than pursuing a more landscaped style campus configuration, the proposed hospital presents as a more compact and vertical floor plate configuration in a four-quadrant arrangement which would total 9 storeys. In this regard it is noted that the proposed building

envelope would now exceed the proposed building envelope by way of height and as nominated as part of SSD Stage 1 proposal and approval.

Given the more compact tower configuration, the proposed massing presents as a series of intersecting and stacked volumes (refer submitted renders and elevations). These volumes are in turn articulated with materials which are predominantly set out in a strong vertical alignment. With little horizontal or 'landscape' reference across the buildings elevations, the combination of the proposed stacked volumes, verticality of materials and no capping roof form accentuates the buildings overall visual perception of height, scale and mass. This in turn presents the building as a 'heavier' volumetric form and one which could be interpreted as having a more distinct urban rather than regional north coastal character.

It is also noted that apart from some reduced landscaped courtyards on the ground floor the overall design has moved away from incorporating external areas, and landscaped terraces at the upper level. Incorporation of landscape areas vertically would serve to improve the overall amenity of the various hospital users in alignment with the proponent's original biophilic design intent. Integration of larger eternal and landscaped areas across upper levels would also serve to soften the buildings elevations and more strongly articulate the integration of built form and landscape. This would significantly improve contextualising the building with its Kingscliff coastal subtropical context.

Given the multi-storey car park will be the first building element which is view when approaching the site from Tweed Coast Road, it would be helpful to appraise a photomontage from this aspect. Ion terms of the other provided montages, it would also be useful if they were more contextualised with base locational photographs to get a greater sense of scale and relationship to streetscape. For example the view point for the buildings main front render would be from within the front setback of the TAFE campus.

In terms of building finishes and materials it will also be important to maintain design intent and consistency between approved elevations and material palette and how the building progresses to construction stages. Images attached below of the Northern Beaches Hospital illustrate that submitted photomontages and nomination of building materials at development application stage can be substantially value managed to the point of the overall building form and material palette being substantially different.

Recommendation:

There is an opportunity to explore architectural forms and material finishes to be more reflective of the Kingscliff coastal subtropical context. This could include:

- Greater diversity in elevation articulation and material finish. This could include more layered and or screened elevations relating to solar orientation aimed at reducing heat loads on elevations which would also introduce an additional layer of design detail;
- Exploration of a stronger horizontal rather than vertical elevation composition to further break down the buildings overall mass, scale and height and more fully explore the topographic and landscape relationship between the site and building. This could include cantilevering floor plate edges to create shaded overhangs and further articulation of the glazed facades transom and mullion configuration;

- Revisiting previous ideas of integrating external landscape terrace and large balcony areas to upper floor areas to improve hospital user amenity and soften the buildings overall volumetric form and elevations;
- Updating photomontages with locational photographs to give a greater sense of scale and relationship between the building form, material finish, site and streetscape; and
- Include a montage of the western approach to include the multi-story car park and any landscape screening proposed.



Proposed Tweed Valley Hospital: Presents as a series of stacked volumes with strong vertical alignment of elevation and materials which accentuates overall height, mass and scale. This could be interpreted as having a 'heavy' visual presentation and not overly reflective of the subtropical coastal character.



Reference Image: Sunshine Coast Hospital – The layered and shaded elevations combined with stronger horizontal planes and floor plate overhangs, material diversity and use of colour presents as a more articulated building form with a sub-tropical character.





Reference Image: Northern Beaches Hospital – Montages presented as part of concept and development application stages alludes to a material diversity and strong integration of land scape (above image) however the built form outcome (bottom image) represents a departure from original material and building form concepts. It will be imperative to maintain design integrity of approved building materials and details of the Tweed Valley Hospital throughout the approvals and construction process.

Pedestrian and cycle pathways

It is acknowledged the *Architectural and Urban Design Report* presents an overlay of pedestrian as well as vehicular circulation however proportionally the site plan is substantially more car centric than pedestrian orientated. This is most evident with the concentrated vehicular access point off Cudgen Road which is also the public transport drop-off and main pedestrian access point. Pedestrian routes in this regard are less direct (longer), often needing to cross multiple roads and mostly uncovered.

Apart from the entry courtyard and the northern courtyard there are few other public domain spaces of varying scales and functions for the use by patients, visitors, hospital staff as well as surrounding land uses including TAFE. Rather than being located along circulation paths between the car parking areas and hospital these should be in higher amenity areas as places of retreat and relaxation to enjoy view and aspect.

It is also important to consider passive movement and ease of access for users beyond the site. This will include ensuring safe and legible access between the hospital and TAFE as well as between the hospital and existing town centre. This would necessitate the construction of a pathway fronting Cudgen Road and in Part Turnock Street.

Recommendation:

- That additional public domain areas be included within the site plan as high outdoor amenity areas of retreat and relaxation to enjoy view and aspect;
- Consider all pathways linking car parks to the main building to be covered walkways; and
- In addition to internal pedestrian and cycle routes, a pedestrian and cycle pathway should extend across the length of the sites Cudgen Road and in part Turnock Street frontage. This would then connect the hospital's passive movement network into Council's broader pathway network thereby linking the hospital site with the existing town centre. This is a key strategy within the draft Kingscliff Locality Plan and Development Control Plan.

Visual Impact Assessment (VIA)

The VIA makes reference to a suite of visual impact methodologies however settles on a highly technical method for placing accurately measured rendered images of the proposed development into photomontages, with the intent of giving the most realistic visual representation of the proposal when viewed from a certain location.

The complexity of development of the photomontages presented in the VIA is commended, and it is noted that this methodology is being considered by the Land and Environment Court as the preferred methodology for assessing visual impact. However, the complexity and accuracy of such photomontages are only as useful as the appropriateness of the viewing locations from which they are presented, and the methodology used to determine what level of impact the visualisation represents.

The VIA states that it draws on a range of key documents, however settles on a numerical analysis of the percentage of view loss and measuring visual sensitivity via distance of viewing location from proposal as the key considerations in determining 'visual impact'. It provides limited qualitative analysis of the specific visual elements of the existing visual environment or the proposed development for each viewing location for which a photomontage was created.

It is noted that whilst the VIA identifies the Draft Tweed Scenic Landscape Strategy (dSLS) within its list of guiding methodologies, nowhere within the remainder of the document is the qualitative methodology for describing level of visual impact, or the Priority Viewing locations identified within the dSLS specifically addressed. "Landmark views from the western side of Kingscliff, across the proposed site, to Mount Warning and the distant hinterland and mountain ranges" are noted with reference to the dSLS as representing the most valuable views. Page 17 of the VIA openly demonstrates that distant views to Wollumbin (which are highly significant in visual value) are interrupted or removed from multiple locations along McPhail Avenue and Oceanview Crescent.

The VIA refers to 'street context' as being a frame of reference for viewing the development from adjoining pedestrian spaces, nearby buildings and public spaces within the same street. It states this frame of reference is composed of 'low density residential nestled within parcels of open space' and 'a mixture of retirement parks and residential development occupy the immediate surrounds', and describes it as 'urban context'. This fails to identify and address the immediately adjoining highly characteristic farmland and the large education facility (TAFE) which are fundamental in forming the primary character context of the immediate area, particularly when entering the Kingscliff locality from Tweed Coast Road, far beyond any 'retirement or residential' urban forms.

No consideration has been given to light pollution or visual impact on night / dark sky views, particularly from elevated locations in Kingscliff, Cudgen and surrounding areas that have a clear view of the proposal and sky view loss.

The VIA concludes:

- the scale, built form and planning of the proposed development provides a
 respectful response to the site and surrounds, whilst remaining within the
 designated volumetric and height limits controls defined in Stage 1 Concept
 Proposal (question as to the validity of statement's such as this when modifications
 to the Concept Proposal are forthcoming, and further modifications could be
 proposed);
- From the roads and streetscapes it is clear that the proposed development, because of its lower elevation and proposed landscaping will not have an impact on significant views from within the local area;
- From high points including Kingscliff and Cudgen middle and distant views to the west and to the mountains in the distance will be impacted from a small number of locations;
- The proposed development is consistent with the aims and objectives of the TLEP because it is a suitable development for the area and the quality of the development is compatible with the primary function of the zone;
- Mitigation of visual impact will be achieved through:

- "use of 'appropriate materials of natural hues and non -reflective", (the concept shows a significant proportion of each elevation is glass, which is considered highly reflective at certain times of the day); and
- o "native vegetation and landscaped retaining walls to north and west of site" (the proposed building 9 storeys in height, which 'ground level' landscaping will do little to screen. Opportunity exists to include / incorporate green walls / landscaping at elevation).

The VIA states that 'because of its lower elevation and proposed landscaping will not have impact on significant views from within the local area", however contradicts itself by also clearly identifying that distant views to Wollumbin (which are highly significant in visual value) are interrupted or removed from multiple residential properties along McPhail Avenue and Oceanview Crescent.

Previous comments provided to the initial concept plan that remain valid include:

The assessment of affected views and viewers (visually sensitive receivers) is for the most part limited to locations within a local fore-ground viewing catchment 12 to 1000m from the development site. The assessment does not comprehensively consider affected views from or viewers of more distant, elevated or highly accessible viewing locations with mid-ground or background views of the site. These locations include highly trafficked tourist lookouts and destinations; and places of interest that are identified as having significance to the local community, or to the regional tourism economy as assets promoted as part of "Australia's Green Cauldron" within the National Landscapes Program. One distant view from Terranora Road (4.7km) is included however is a poor example with highly restricted view field that is not representative of the more scenic views available from Terranora Road.

The visual quality assessment of both the existing views and those impacted by the proposed development have been derived based on a consultant's subjective assessment of change impacts on visual elements, but do not factor affected viewers' perceptions or preferences. Best practice Visual Impact Assessment of proposed developments of this scale and potential visual alteration typically include early consultation with affected viewers on their likes and dislikes to ensure visual impact mitigation and management options effectively respond to community and viewer priorities in the early concept design stages.

Council is recommending that:

- More detailed consideration of the key landscape character elements of each viewing location and qualitative discussion around the visual impact on those elements from each of the identified viewing locations;
- Consideration of light pollution and visual impact on night time views;
- Incorporation of green elements into the building design, on the vertical planes, such as landscaped terraces, vertical gardens or other elements that soften the appearance of the overall development, and are more aligned with the subtropical architectural designs expected in this area;
- Consideration of the visual impact on views from intersections on Kingscliff Hill
 where vehicles are stopped at give way or stop signs and have full view of the
 development sit. These are key publically accessible and moderately trafficked

- viewing locations with significant and highly valued views of Wollumbin (Mt Warning);
- Engage with affected viewers to consult on their visual quality values, and identify their preferences for specific visual elements as seen in the existing view and the conceptual view including the proposed development. This should comprise the following matters;
- Information sessions and discussion of the development site / area and the nature of the proposal with affected landholders and community;
- Confirmation of which viewpoints are considered important by affected viewers and validation of their viewsheds:
- Capture community values about scenic qualities that is, the landscape features and visual elements that viewers prefer (like / dislike); and
- Provision of photomontages generated from each viewing point to facilitate an understanding and discussion of potential visual impacts of the proposed development.

Heritage Assessment

The plans and drawings set and the suite of Appendix M Heritage Assessment documents have been reviewed, within the context of the current approvals, and comprising:

- Historic Heritage Assessment by Niche Environment and Heritage, dated 23 September 2019;
- Appendix B Heritage Consultation communication by Niche Environment and Heritage;
- Heritage Archival Recording by Niche Environment and Heritage, dated 23 September 2019; and
- Interpretation Strategy by Niche Environment and Heritage, dated 23 September 2019.



- This drawing and others nominate a new retaining wall in the vicinity of Wall 5 and over the length of Wall 1; and
- Given Walls 3 and 4 are now demolished and a retaining wall is to replace dry stone wall 1, it is requested that given the significance of the walls to the South Sea Islander (SSI) Community, the access to the visibility of the wall on Cudgen Road, and the distance from construction work, that action be taken to retain wall 1* and should a retaining wall be required that it be built behind the existing dry stone wall, preserving this wall insitu. It is considered that this better reflects Principle 3 of the ICOMOS ENAME Interpretation Principles, given the loss of walls 3 and 4.
 - * NOTE: the above statement was written before Wall1 was demolished

Heritage Archival Recording by Niche dated 23 September 2019 (Appendix M Part 2)

- The project name on page 11 Photographic Catalogues Sheet is #3641 Mountbatten Stone Chapel. This appears to be incorrect as it should be Tweed Valley Hospital; and
- Suggest that a copy of all Heritage Assessments be provided to the Tweed Regional Museum and the representative South Sea Islander communities.

Interpretation Strategy by Niche dated 23 September 2019 (Appendix M Part 4)

One of the key objectives of the Interpretive Strategy is relocating those dry stone
wall within the footprint of the building into high traffic civic spaces. As noted above
retaining wall 1 insitu would be both visible and appropriate. It would also better
reflect the significance "in place" for the SSI community;

- Generally the range of recommendations are supported, particularly the digital and audio interpretation recommendations; and
- Suggest that local SSI artists (and community) be engaged to assist in the development of the interpretation material in a culturally appropriate manner.

Council has included the following in Council's Attachment 1 Submission:

- 1. Dry stone Wall 1 be retained insitu and made sound with extracted dry stone wall material from walls 3 and 4 and that any new retaining wall is constructed behind the dry stone wall.
 - * NOTE: the above statement was written before Wall1 was demolished.
- 2. Local South Sea Islander artists be engaged to assist in the development of the interpretation material in a culturally appropriate manner.
- 3. All copies of Heritage Assessments and the Archival Recording be provided to the South Sea Islander Community representative groups and copies provided to the Tweed Regional Museum.

The Attachment 1 Submission goes on to discuss the more minor matters, most of which, can be addressed with additional information and or through the application of conditions of consent. For further details please see Attachment 1.

- Agricultural Offset Plan B 28 Condition not satisfied no work program established;
- Condition B7 Koala Food Tree's Condition not satisfied amended plans required;
- Environmental Health Matters food premises, aircraft noise, contamination, and public health matters can all be addressed by way of recommended conditions of consent; and
- Building Code of Australia Matters can all be addressed by way of recommended conditions of consent.

OPTIONS:

- That Council in regard to Development Application DA19/0683 for the construction of the new Tweed Valley Hospital (NSW Planning & Environment App No. SSD 10353) and Modification to the Concept Plan (NSW Planning & Environment App No. SSD 9575) at Lot 11 DP 1246853; No. 771 Cudgen Road CUDGEN endorse the Draft Council Submission at Attachment 1; or
- That Council in regard to Development Application DA19/0683 for the construction of the new Tweed Valley Hospital (NSW Planning & Environment App No. SSD 10353) and Modification to the Concept Plan (NSW Planning & Environment App No. SSD 9575) at Lot 11 DP 1246853; No. 771 Cudgen Road CUDGEN amend the Draft Council Submission at Attachment 1.

Option 1 is recommended.

CONCLUSION:

This report and Attachment 1 is intended to offer the NSW Department of Planning a brief list of matters that Council believes requires further consideration before a determination of the application is made.

COUNCIL IMPLICATIONS:

a. Policy:

Corporate Policy Not Applicable

b. Budget/Long Term Financial Plan:

Not Applicable.

c. Legal:

Not Applicable.

d. Communication/Engagement:

Not Applicable.

UNDER SEPARATE COVER/FURTHER INFORMATION:

Attachment 1.

TSC Draft Submission to the NSW Department Planning & Environment on DA19/0683 which relates to the Stage 2 SSD EIS for the Construction of the new Tweed Valley Hospital and DA18/0685.01 MOD 2 to the Concept Plan for SSD Stage 1 (ECM 6130354)