

MR P. DUNCAN: We'll get started. So before we begin, I'd like to acknowledge the traditional owners of the land on which we meet, and I'd like to pay my respect to elders past, present and emerging. Welcome to the meeting today to discuss the concept application for Greenwich Hospital redevelopment, which includes new
5 healthcare and allied health facilities, residential aged care and seniors housing. My name is Peter Duncan and joining me today is my fellow commissioner, Adrian Pilton. Adrian and I have been appointed to the panel to consider this application. Also with us from the Office of the Commission is Lindsey Blecher, and we may have Steve Barry. I think Steve's just come on the line as well. Stephen Barry's
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MR S. BARRY: Yes, I am here.

MR DUNCAN: Thanks, Stephen. In the interest of – and, actually, I'll give you an
15 opportunity to introduce yourselves at this point. Ted, do you want to go forward?

MR T. WEBSTER: Yes. My name's Ted Webster. I'm the open space manager and a landscape architect and I assess all of the DAs and other significant State site plans for council.
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MR DUNCAN: Thank you. Chris.

MR C. SHORTT: Hi everyone. I'm Chris Shortt. I'm a town planner from Lane Cove Council and was involved in the commission for this – for council's
25 submission to the Greenwich Hospital redevelopment throughout the process.

MR DUNCAN: Thank you. Michael.

MR M. MASON: Michael Mason, Lane Cove Council. I'm the executive manager of planning and development.
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MR DUNCAN: Thanks, Michael. In the interest of openness and transparency, and to ensure full capture of information, today's meeting is being recorded and a complete transcript will be produced and made available on the commission's
35 website. This meeting is one part of the commission's decision-making process. It is also taking place at the preliminary stage of the process and will form one of several sources of information upon which the commission will base its decision. It's important for the commissioners to ask questions of attendees and to clarify issues whenever we consider it appropriate. So if you're asked a question and you're
40 not in a position to answer it, please feel free to take the question on notice and provide any information in writing, which we will also make available on the website.

To ensure the accuracy of the transcript, I'd also request that if all members could
45 introduce yourselves before you speak, each time if you can. And all members, please ensure you don't speak over the top of each other. I think we're all well

aware of video conferencing and things these days – too well aware, I guess – but it just makes it easier for the people transcribing the process. But we’ll now begin. Thank you for joining us. And, Chris, we sent a letter through to you with sort of the general areas we’d like to discuss. Do you wish to lead off, based on that agenda?

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MR SHORTT: Sure. Yes, not a problem. I guess – yes, so we’re responding, essentially, to those – you know, I’m Chris. I’m a planner from Lane Cove Council. I should reintroduce myself. So yes, essentially, in the agenda – I can – we can go through it in order in terms of the items that were highlighted, and it sort of comes down to some of the concerns that we’ve sort of raised throughout, you know, responding to the proposal.

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MR DUNCAN: Yes.

15 MR SHORTT: So – yes.

MR DUNCAN: That’d be good. And I probably should also point out that Adrian and I and Lindsey did get an opportunity to meet with the applicant for a site tour last week – I think it was last week, Adrian – and we had at least two of the community members there as well, a group from Greenwich and a group from Northwood. So that site inspection’s notes be – will be on our website.

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MR SHORTT: Okay. Good to know.

25 MR DUNCAN: Thanks. Thank you.

MR SHORTT: I guess, yes, in terms of the strategic context, I can speak and say that the hospital component, we’ve never had an issue with that use given that that is a permitted use under the zoning for – to allow for, you know – to expand that if those existing healthcare facilities, that we – that the zoning envisions for the site, we don’t have an issue with that aspect of it.

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MR MASON: It’s Michael Mason speaking now. As far as the hospital component, council is supportive in principle of the proposal for the redevelopment of the existing hospital and the expansion to allow additional healthcare facilities as they relate to the intended use for the site. And the other issue is that the site is zoned SP special uses hospital, so we acknowledge that and see that as being relevant. What council can’t support, or doesn’t support, is the seniors living component as it is not permissible under the LEP. But we do acknowledge that under the – it is made permissible under the SEPP, so we’ve acknowledged that.

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There are a number of existing and approved seniors developments in and around this site currently, so we don’t see that there’s particularly a need for an additional one. These sites help accommodate the community’s needs for the type of development and are located on sites which permit this type of use, so there’s adequate opportunity to have seniors housing on sites that are more appropriate to what it is. This site particularly is for hospital, and we would see any respite care

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associated with the hospital as being relevant as well. However, a seniors housing development, which is largely a private use, we would see, in principle, as not being in compliance with what the intended use of the land was.

5 MR DUNCAN: Thank you, Michael. Thanks for clarifying that. Do you wish to go further on that or will we keep going?

MR MASON: No, I think that's council's position on the issue.

10 MR DUNCAN: Yes.

MR MASON: Council's also very supportive of the understanding of the Department of Planning with their recommendation to reduce the scale and footprint of some of those uses. We would support that. If the panel is of a mind to approve
15 the application, we would support the reduced scale footprint and bulk of that as recommended by the Department of Planning as well. There are a couple of issues that we think may need to be clarified, particularly in relation to contributions to our 711 plan. We couldn't find any reference to that, so that may or may not be an issue that might need to be clarified at some later stage.

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MR DUNCAN: Okay. Thank you. Adrian, do you have any questions on the scale and bulk issue?

25 MR PILTON: I'd just like – well, does the council have a particular viewpoint on the views from River Road, particularly of the seniors housing and the setbacks and the tree planting and so on along the road?

MR MASON: I might defer to Chris, but – this is Michael Mason speaking – other than our understanding that if – again, if it is to be approved, that seniors housing
30 would be setback further, or no – come no closer than what the existing dwelling house at the frontage is. That's the adjoining dwelling house. I actually suggest it would still need, for amenity reasons, be better located further back than what the minimum setback to River Road would be, purely for amenity reasons for the residents if they are going to be there. So I'd move along those lines. Chris, any
35 other - - -

MR SHORTT: Yes, I – yes, Chris, Shortt, town planner. Just because – yes, I understand there's – the conditions that the department recommended, and they talk
40 about reducing the RL height of the northern building, so the building closest to River Road, to a maximum RL – I think it was proposed at 62.6 up to seven storeys. And then the condition – I think the department recommended reducing to an RL of 56.36, if I'm correct. So
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45 MR PILTON: Correct.

MR SHORTT: Does that essentially translate to a storey coming off and maybe some rooftop plant? I'm sort of trying to visualise what that means. Is it stepped up or is it sort of – I guess, yes, the revised design, we'd have to see what that actually looks like. But it is definitely – I mean, obviously, we're not supportive of those
5 buildings because of their use, but if they are to be, you know, supported, these components, then yes, we'd definitely, I guess, encourage the bulk and scale of these buildings to be reduced so their visual prominence to River Road is reduced. And I see there's the other condition about setting it back slightly to meet the setback of 117 River Road, the single dwelling house. And just looking at the plan, there may
10 be – it doesn't look to be a large difference to what's proposed. You know, it may be even less than a metre. So any further setback, you know, to reduce their bulk and scale would be supported by council. And as well – and the community at Northwood and Greenwich would also – that was a concern from them as well. You're probably well aware of that.

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MR PILTON: Okay. Thank you.

MR DUNCAN: Okay. All right. Thank you. We're – I'm just looking at the plans you're talking about there, Chris. Where you're talking about the – particularly the
20 seniors living on the sort of northern side there near River Road, it's showing an RL of 59.3.

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MR SHORTT: Yes. And my understanding is the condition recommended by the department would reduce the maximum height to 56.36, so - - -

MR PILTON: That's correct.

MR SHORTT: Yes.

30 MR DUNCAN: Okay. Yes. Okay. Thank you. That's good. Do you wish to keep going, Chris?

35 MR SHORTT: I guess, yes – Ted might come into this as well, but obviously when we talk about trees and to be able to – I guess greater setbacks will allow, you know, more vigorous and dense landscaping to hopefully also provide a – like, a visual buffer, a green buffer, from River Road. So, yes, any increased setback would be encouraged from council's perspective.

40 MR DUNCAN: Okay. And I guess comment there, we're talking about the trees. We had a good look around the site. I assume you're supportive of the changes that were made around the Saint Vincents Road end to retain as many trees as possible over that side in that sort of heritage precinct?

45 MR MASON: Michael Mason speaking, and I'll probably be followed very quickly by Ted. I – the reduced amount of trees coming out of that area is concurred with – not only concurred with, we support that. The only issue that we would have is that there is still a loss of tree canopy that is likely to occur. And the replacement of trees

on a one to one basis, while we acknowledge that that is certainly seeking to address the issue, we'd be of the view that a greater replacement value would be appropriate bearing in mind the loss of canopy cover will take some time to replace and come back to what is currently the position.

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I'd also mention that council, in September 2019, declared a climate emergency in recognition of a loss of canopy and habitat generally throughout the Sydney area, and highlight that the district plan calls upon councils to reduce and minimise the extent of canopy loss and increase canopy up to a position of 40 per cent of built upon area for each of the councils – or that was the area that was required by our council. Our council, in doing that, is in the process of putting in place in our DCP a replacement of two to one ratio for loss of tree canopy. And Ted could probably come in on that issue as well.

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15 MR WEBSTER: Yes, Ted Webster, landscape architect for council. Yes, what's not clearly indicated is that there is a one to one – or in addition, one to one. What I have at my disposal, which is on the State's significant development website, was a landscape package by Taylor Brammer Landscape Architects dated the 13th of
20 September 2019, so I'm not clear as to whether that reflects the latest architectural. And it's more of a conceptual design package fabrication type package. So it's not clear to council in any way, shape or form if we're getting a net loss or a net gain in future canopy cover after the proposed trees have a time to grow in. And some of these trees that are slated for removal are old growth trees, or older growth trees anyway, that have been around for tens of years, decades. So if it can be made
25 evident and clear to council that the intention is to provide more than one to one, or with a net gain in canopy, that would be ideal.

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MR DUNCAN: Okay. There is a plan of the existing trees and trees to be removed, which was response to submissions September 2019, in some documents we've got, which are on the website, but we'll check that as we go along. I know at the site inspection there was mention, wasn't there, Adrian, of further landscape architectural work undergoing?

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MR PILTON: They talked about a new landscape architect being brought in. The scheme - - -

MR DUNCAN: So will - - -

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MR PILTON: - - - of fully landscaped drawings I've seen are very, very basic.

MR WEBSTER: Yes, that's right.

MR PILTON: No detail at all.

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MR DUNCAN: So, Ted, we'll note that comment and when we have our discussions with the applicant, we'll see if we can get some further information on that. Okay?

MR WEBSTER: Excellent, thank you.

MR DUNCAN: Chris, I think you're on mute. Chris, you or Mike are on mute, I think.

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MR SHORTT: Hello, can you hear me everyone?

MR PILTON: Yes.

10 MR DUNCAN: I've got you now, yes.

MR SHORTT: Thank you. So just on that Saint Vincents Road woodland where – obviously the original proposal with the villas, the multiple buildings in the area, was amended and yes, we do acknowledge and are happy that that – there was less, sort of, disturbance, less development, in that area. Obviously, now it's – the proposal has the respite clinic centrally located. On a number of occasions, we've put to the department – we have recommended that that respite clinic be relocated to be included within the main medical facility, just to ensure that that woodland – that would mean there wouldn't be any kind of canopy loss in that area, and that would – ideally, that would – that's probably what council would prefer. So that's something that we – yes, we don't – we generally don't support the, you know, buildings in that woodland next to Saint Vincents Road. We think it's a bit unnecessary if that building could have been incorporated into the main, you know, hospital area, and therefore, you know, that would dramatically reduce canopy loss.

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MR MASON: It's Michael Mason speaking as well. Council would also see some benefit in locating the respite clinic within the hospital for just basic integration with hospital issues. It would be more efficient as far as connectivity, efficiency and reduce impacts, as Chris has highlighted, on the tree canopy in the sensitive area around Saint Vincents Street.

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MR DUNCAN: Okay. I understand. I understand the comment there. Are there other items you want to cover at this stage, Michael, Chris or Ted?

35 MR MASON: The - - -

MR WEBSTER: Michael, just real quickly. I'm just scanning the arborist's report, and it does say – 8.0 Conclusion, page 46 – that 131 trees are nominated for removal and replacement with species in accordance with the associated landscape documentation. So that's what the arborist has called for, is a one to one replacement ratio. So I have found that little bit of information, but that doesn't seem to be reflected in any actual replanting plan that should be prepared by the landscape architects.

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45 MR DUNCAN: Okay. Does that report, Ted, have a date on it? The one that – the arborist's report? I think you're on mute.

MR WEBSTER: Yes prepared 16th of February 2018.

MR DUNCAN: Okay. Yes. Because these landscape plans, or some of these other tree plans, were at the end of last year of '19. Anyway, we'll follow that through.

5 Thanks for that. Michael, is there anything that you want to add at this stage that we haven't covered?

MR MASON: I think the only thing that I need to add is that in our understanding of what the department – they made their recommendations where there were a
10 number of draft consent conditions for your consideration, or for the Minister's consideration. We had agreed, as we discussed and liaised with the department quite extensively in the preparation of those conditions. Council, on failing to be able to see where the contribution condition is, and I – all I'd raise is that if the seniors housing is to be limited or reduced in any way, that our condition would also need to
15 be amended to reduce the section 711 contribution as well. And we'd be available to, obviously, reconfigure those in line with if there is a reduction in either the number or the bedrooms that the seniors housing will generate.

MR DUNCAN: Yes. So currently, council's position is it includes that, but if there
20 was a change, there would be obvious – an obvious amendment to that - - -

MR MASON: Yes, that's - - -

MR DUNCAN: - - - position.
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MR SHORTT: Well, on the – sorry, Chris Shortt, planner. In the draft conditions, maybe we're missing something, but we can't see any condition referencing a development contribution to council. So I'm not sure if it's been omitted or if – so
30 it's something where we might put it in writing for further consideration, because I just – obviously, it's an important one.

MR DUNCAN: Yes, or does it come at a later stage of the application process?

MR PILTON: Yes, in the DA stage.
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MR DUNCAN: Yes.

MR BLECHER: Lindsey Blecher here. Sorry - - -

40 MR SHORTT: Okay, yes.

MR BLECHER: Sorry to interrupt. Yes, it's important to note this is a concept application and some matters will be resolved through the subsequent detailed application.
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MR SHORTT: Okay. Yes. Thank you.

MR DUNCAN: That probably explains that, I think. All right. Adrian, is there anything that you wish to ask at this stage?

5 MR PILTON: I just quickly would like to ask Ted, does the council have a policy about deep soil planting and so on?

MR WEBSTER: Yes, we do, and it's a percentage of the site. This is – I don't know what this one is rated as, because it doesn't fall under ADG or other things. It's – so we have to look that up, but, yes, a certain part of the site would have to be qualified deep soil planting. And it's – that means unencumbered area, nothing below. So no basement carparks or other structures as well.

10 MR PILTON: Do you have a definition of deep soil in the council, as in depth of soil, that is?

15 MR WEBSTER: I believe we do, in our definitions document, yes.

MR PILTON: Could you let – could you forward that information later, please?

20 MR WEBSTER: Yes, sure.

MR DUNCAN: If you could send it to Lindsey, he can get it sent to Adrian and I. That'd be great. Thanks, Ted.

25 MR WEBSTER: Okay. You're welcome.

MR DUNCAN: All right. Well, Adrian, anything more from you?

MR PILTON: Well, just – I'll just maybe ask Ted again about the planting policy. The department – I don't know what branch they're called, the environment something or ESG – have recommended planting groups and so on. Have you had a chance to look at those, the species that they're recommending being used?

MR WEBSTER: I did look at that, but we would probably prefer running that past – we have a bushland division and they're – that's their specialty, plant groupings and so on. But I do acknowledge the fact that they have looked at the different areas and the fact that they probably need different treatments, which we agree with, so that's a positive. And as Lindsey said, this being a concept plan application, that those details could be worked out when it's further along in more detail.

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40 MR PILTON: Okay. Thank you.

MR DUNCAN: Thanks.

45 MR MASON: Michael Mason from council calling. Just one aspect I'd like to raise in relation to trees, and that is the Department of Planning, and I think also their landscape plan, indicated that they are seeking to retain the significant fig tree. It's

substantial within the site and has some relevance from a heritage viewpoint. I think it's tree numbered 167. I'm not sure on that.

MR PILTON: That's correct.

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MR MASON: Council fully supports the view of keeping that tree and its significant as well. Other issues unrelated to landscaping, perhaps the heritage aspects. I know the amended plans, or the amended concept plan, includes having a greater opportunity to view Pallister House from River Road. That's fully supported by council as well. We see that the value of heritage buildings being able to be seen from the public area as well, and we fully support that.

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MR DUNCAN: That's good. That's good, Michael. Thank you. And both of those items, for your information, were brought up by the applicant at the – on the site tour, the retention of the tree and the opening up of the views from River Road. All right. Lindsey, do you have anything that you wish to raise at this point?

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MR BLECHER: Yes, just a quick question. Lindsey Blecher here. Just wondering what the council's views on transport, accessibility of the site are, and perhaps the level of car parking proposed as well.

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MR MASON: Yes, the River Road is a problematic site. It's a very heavily used road. It also has a designation by the RTA. So the existing light system that is currently there, I would see as remaining and may need to have some review as to just what that configuration of timing is there. So that's the only comment that I'd make. Council did work with the Department of Planning on fine tuning some of the traffic management for that site. There will be a need to very closely monitor and manage construction management through the site, particularly if the hospital is going to remain open and available. That'll be problematic and a detailed discussion and site management, traffic management plan will be required as far as that's concerned, but I think they're covered off in the scheme of conditions.

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MR DUNCAN: Yes. And I understand there's further traffic work to occur as well, which we'll find out more from the department about. Okay.

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MR WEBSTER: Ted Webster, landscape architect. Just for the transcript, I found our definition of deep soil zones. It reads:

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They are areas of natural ground with relatively natural soil profiles retained within a development. Buildings, basements, car parks, swimming pools, tennis courts, patios and decks, and impervious surfaces such as paved areas, driveways, car parking and roofed areas, are not included as part of the deep soil zone.

45 So – and I can send that along.

MR PILTON: Okay. Thanks, Ted.

MR WEBSTER: You're welcome.

MR DUNCAN: Thank you. Well, if there's no further points at this stage, I think we can wrap up. Just one final round: anybody else want to raise anything?

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MR PILTON: Nothing from me.

MR MASON: Michael Mason speaking, just very briefly, about the council's view. The council fully supports the expansion and the upgrade of the hospital. I think it's a vital public service that has been there for many years and hopefully can continue. Council fully supports that. The only issue that council does have against the development is the seniors living. There are seniors living opportunities in and around this site, and I would expect that the number of seniors living and aged care facilities in close proximity to this area will probably help service the hospital as far as its clinic is concerned. And whether that be by day visits or otherwise, I would see that being a vital link. And this hospital will, I think, continue to provide that service, not only for the existing, but for future residents that are going to be nearing their final – or their later years.

MR DUNCAN: Okay. Thanks, Michael. Yes, we understand the point that you – the council has. At this stage, I think we've got everything we need. Thanks for being available today, all three of you: Michael, Chris and Ted. If we need to, Lindsey can come back to you, either through the department, and we can ask some further questions. But we have the department later today, applicant next week, and then, Lindsey, I think it's Thursday week, isn't it, that we have the public meeting?

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MR MASON: Okay. No, that's fine. We'll be available and happy to respond to anything.

MR DUNCAN: Okay. Thanks very much, Michael. Thanks everybody, and we'll talk again soon, I hope. Bye bye.

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MR WEBSTER: Thank you.

MR MASON: Thank you to the panel for meeting with us.

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MR SHORTT: Thank you.

MR DUNCAN: Thank you. Bye bye.

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[12.33 pm]