



TRANSCRIPT OF MEETING

RE: GREENWICH HOSPITAL REDEVELOPMENT - DETAILED DESIGN
(SSD-13619238)

GREENWICH HOSPITAL MODIFICATION 1 - AMENDMENTS TO
ENVELOPES AND GFA (SSD-8699-MOD-1)

APPLICANT MEETING

PANEL: MR ADRIAN PILTON (PANEL CHAIR)
MS WENDY LEWIN
PROF ELIZABETH TAYLOR AO

OFFICE OF THE IPC: STEVE BARRY
TAHLIA SEXTON

APPLICANT: KATIE FORMSTON
CHRIS FORRESTER
YOUSHENG LI
ALEX LISNEY

VIRTUAL: IAIN MACFARLANE
JAMES HERON
CAITLIN MASTERS
ANDREW MASTERS

LOCATION: IPC - SUITE 15.02 LEVEL 15,
135 KING STREET, SYDNEY NSW 2000

DATE: 12:00PM – 1:00PM
MONDAY, 22 JANUARY 2024

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<THE MEETING COMMENCED

MR PILTON: Okay. Good morning. I'm sorry. Good afternoon and welcome. Before we begin, I would like to acknowledge the traditional owners of the land in which we meet the Gadigal people of the Eora nation and those of the attendees. And joining us remotely today, I pay my respects to their elders, past and present. Welcome to the meeting today to discuss the Greenwich Hospital redevelopment, detailed design and Greenwich Hospital modification one currently before the Commission for determination. The Applicant, HammondCare, is seeking consent for the design, construction and operation of the Greenwich Hospital and Integrated Health Care Campus, including an 11-storey replacement building, nursing service, seniors living buildings and respite care facility, and the use of Pallister House. My name is Adrian Pilton. I am the chair of this commission panel. I'm joined by my fellow commissioners, Wendy Lewin and Professor Elizabeth Taylor. We're also joined by Tahlia Sexton and Steve Barry from the Office of the Independent Planning Commission. In the interests of openness and transparency, and to ensure the full capture of information, today's meeting is being recorded and the complete transcript will be produced and made available on the Commission's website. This meeting is one part of the Commission's consideration of this matter and will form one of several sources of information upon which the Commission will base its determination. It's important for the commissioners to ask questions of attendees and to clarify issues whenever it is considered appropriate. If you're asked a question and are not in a position to answer, please feel free to take the question on notice and provide any additional information in writing, which we will then put up on our website. I request that all members here today introduce themselves before speaking for the first time, and for all members to ensure that they do not speak over the top of each other to ensure accuracy of the transcript. Will now begin. Over to you.

MR FORRESTER: Thank you very much. So, my name is Chris Forrester. I'm from Ethos Urban. I'm the consultant town planner for the Greenwich Hospital redevelopment. We have a presentation- And who is in control of that? Tahlia, thank you. We might just go to the next slide and we can do some questions. So just before I do move on, I'd just like to acknowledge the Cammeraygal people who are the traditional custodians of land on which the proposal sits. On behalf of the project team, I'd just like to pay our respects to their elders. Past, present and emerging. Next slide please. That's the one. Thank you. So, I have with me here today, and also online key members of the project team to answer any questions that the commission may have. I may just allow everyone to introduce themselves.

MR LI: So, I'm Yousheng Li, I'm also from Ethos Urban, and I'm a colleague of Chris.

MS FORMSTON: Katie Formston. I'm head of design at HammondCare.

MS LISNEY: Alex Lisney, project manager with TSA Management.

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MR FORRESTER: And online we have from Masters. We have Caitlin and sorry, Caitlin Masters and Simon Phillips, and Andrew Masters. Sorry I can't see you on screen there.

5 MR MASTERS: Okay. It's Caitlin and Andrew, Simon won't be attending today.

MR FORRESTER: Thank you. So as for our agenda today, we plan to take you through the background to the project. Some of the key issues that were raised during the assessment, as well as some other issues listed on the IPC's agenda. And then we
10 would like to save some time just at the end to discuss some of the recommended, draft conditions that the Department has put forward. We have some amendments that would like to request of the Commission as well. So, first of all, I'll hand over to Katie Formston, who will provide a background to HammondCare and the project objective.

15 MS FORMSTON: Katie Formston. So, Greenwich, we're pursuing a long-time vision to revitalise the site into an integrated health campus, particularly for seniors with complex care needs. As an organisation, we're an independent Christian charity, been in operation over 90 years. And our ambition there is really to set the global
20 standard of relationship based care. And increase our care for those that others may not or, choose not to or can't care for those people. Moving to the next slide, please. Really the context for this project, is there is an emerging need in the way in which health is being delivered is changing. The building that's on site at the moment has really reached end of life. And we're looking at, really addressing the way health is
25 changing. We've got an ageing population, we've got prolonged, illnesses and really more than I think that complex co-morbidities and those stats there where more than half of people aged 76 and over have five or more chronic health conditions where this this campus is to respond to that need in the area.

30 Next slide, please. Oh, there's this one. I think one of the lessons learned on the project was early on. There was confusion as to what care it would be providing, and that perhaps it was only retirement living, seniors living covers a lot of different development types and really caring care. Greenwich is at the high end of care, so there's 24/7 care on site as opposed to retirement living, which is community based
35 care. Next slide, please. I'll hand over to Chris.

MR FORRESTER: So it's Chris Forrester again from Ethos Urban. So, in terms of the site context, it's in the suburb of Greenwich. The site itself is located about 950m to the south west of Saint Leonards train station. Along River road, which is the
40 primary street frontage for the site. A secondary street frontages to Saint Vincent's Road to the east. The surrounding context is, predominantly, sort of lower density residential developments, detached houses. And we also have, the public school to the north, across River road and Gore Creek Reserve. Running along to the west and south west. So, the site itself, it's large. It's about 3.4 hectares and currently has a five
45 storey, hospital building with various wings spread across that northern frontage. Then we have Pallister House as well, which is a state heritage item. Located in the southern portion of the site. So just hang on to that slide for a moment. As

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background to this application, in November 2020, the IPC approved the concept plan for the site, which set out the planning framework for the development. And so as part of that concept plan, consent that established the uses for the site, and it also established building envelopes, which were set up to essentially deliver an integrated health campus comprising of health service facilities, residential care and seniors housing. So that's spread across a integrated development with up to 11 storey hospital component. And then two seniors housing structures of five and six storeys. There was community interest in the concept plan process itself.

10 And a number of key conditions of consent were, implemented on the on the consent to address some of these concerns. Some of the key ones are on screen there. And that that includes the reduction of the height to the seniors living buildings, to a maximum of five and six stories. That's a reduction of approximately one story. And the intent of that was that the RL's for those buildings match the existing hospital building height. Another one was the protection of tree 167, which is located, where the future hospital building will be along the River road frontage. And also, to ensure at least 86 new trees were planted across the landscape design for the site. The final one were, consideration of detailed design measures, to enhance privacy to our neighbours to the west and south. Next slide please. So essentially what we have in front of us today is the detailed design, construction and use of the development, which is in accordance with the approved concept plan, so includes demolition of all the existing structures, with the exception of Pallister House, and the construction of the new hospital building, the two seniors housing buildings and a respite care building. It's noted that there was a concurrent modification submitted alongside the SSD, which seeks minor amendments to the building envelopes and the GFA. Next slide, please. So just a bit more on that context. So, following the approval of the concept plan in 2020, HammondCare undertook a detailed design review, in context of a number of key drivers since that time.

30 So that includes the concept plan conditions, which I've just run through. Additional community feedback and capturing now in which the way care has evolved, since the outcomes of the Royal Commission into aged care. Covid 19 and then other legislative changes since that time, such as changes to the NCC there. So, as I mentioned, the application was submitted alongside a modification which sought changes reflective of the design review process undertaken. So, the application went on public exhibition soon after being lodged, and it's good to see that only six public submissions were received to that initial consultation period, which compares to 176 submissions received for the original concept plan. So, the significant reduction, since the initial concept plan, was submitted. So, in this respect, the IPC process was only triggered as a result of Council's objection, not for the public objections and their large contention of Council. Was their belief that the seniors housing element is not permissible. However, this was addressed in detail at the concept plan stage. And it's a approved use by that concept plan. There are the main contention which we'll touch on was the increase in GFA and, their view that that would intensify the what they saw as a prohibited use on the site. So, if we go to the next slide, please. So, I'm just going to run through some of these issues which are raised, in the submissions and in the assessment report. I should have said at the start, so apologies if you have

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any questions along the way. We're happy to take those from the team. But also, if you'd like to wait till the end and be followed by you in that regard.

5 Okay. So, as I mentioned, bulk and scale was one of the matters raised by Council.
And in some of those public submissions that said this matter was addressed at the
concept plan stage where the envelopes set up through that concept plan, deemed
what was appropriate in terms of the scale of those envelopes, with particular regard
from views from River road, and also residents from surrounding areas across the
valley which can see the development. The detailed design that's put forward is
10 largely consistent with those approved envelopes. And as I mentioned, there has been
a concurrent modification which seeks to tweak those, so what you're looking at on
screen there, the red areas are which the envelope is proposed to be amended. Then
the green highlight is where previous bits of the envelope have been removed. So, we
can see in terms of the seniors housing components on the left hand side of the
15 screen, there's just minor variations largely to the internal components of the site. So,
all our key setbacks in relation to our Western neighbours, in particular, and the
interface with Pallister House has been maintained. And essentially the driver behind
this change was largely a result of designing these dwellings to class nine C
standards, which promotes HammondCare's continuum of care model. Allowing for
20 the provision of in-house care to patients.

So as Katie mentioned, it's seeking to accommodate those, typically more elderly
patients with co health problems. The hospital itself, which is on the right hand side,
with the label healthcare. It was part of that was reoriented, along River road there.
25 And the additional mass there again is located to the south of the road, so hidden by
the, existing built form- Sorry, the proposed built form, and it was largely Rotated to
address River Road. And the driver behind that was to allow for more legible
corridors and sightlines. In response to best provision of care for dementia patients in
particular. Sorry, one other one and we can talk to it on this one, equally is the driver
30 of the condition of consent. In relation to tree 167, which you can see just below the
River Road label that large tree there. So, the envelope at the podium levels was
amended to avoid impacting on that tree. We can then see this is an extract of the
upper levels of the tower element itself. And we can see there it's just been brought
back from River Road further. So those key setbacks are maintained or improved. Go
35 to the next slide, please.

So in terms of amenity impacts that were raised and addressed through the
assessment, we had view impacts and a visual impact assessment was- Sorry, a
revised visual impact assessment was submitted along with the application, which
40 found that the detailed design is consistent with the concept plan in terms of the
potential impacts of the proposal from key vantage points, we undertook additional
view vantage points from upper Cliff Road, which is across the valley to the
southwest of the site, and then also from the Lane Cove River, which was requested
by the Department of Planning in their concept plan conditions. And so those views
45 it also found that there wouldn't be any significant additional impacts from those.
The views also took into account the changes of the building envelope that I've just
described as well.

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Overshadowing was raised in a number of submissions, and I think the key thing to note here is not only it was consistent with that approved under the concept plan, but all surrounding dwellings continue to achieve at least three hours of solar access to their habitable rooms and also to at least 50% of their private open space. And that's in accordance with actually Council's DCP controls. And then in relation to privacy, which was another matter raised. Again, the buildings have been set back in accordance with those setbacks of concept plan, which is noted to be greater than minimums required under the apartment design guide. And also, in relation to the western boundary- Greater than the existing hospital building itself. During the assessment process and the response to submissions stage, the seniors housing was reviewed, and additional screening and planters were introduced to all dwellings with a western frontage. To further mitigate any potential overlooking of the neighbours.

15 MR FORRESTOR: That's it, that one.

MR FORRESTER: So, transport and traffic. A new traffic- Transport and traffic report was submitted with the EIS and this remodelled, the potential traffic impacts of the development and any impacts on the surrounding network. It was shown through this process that there wouldn't be any adverse impacts to surrounding intersections, and no issues were raised by transport for New South Wales or Council in this regard. Construction impacts were also considered through the submission of a preliminary traffic construction management plan, and a condition of consent has been imposed for a detailed plan to be prepared prior to construction works occurring. The other thing to note is during the BTS response to submissions process, the staging and the program of the development was revised to reduce the overall duration of the construction program. So, any construction related traffic impacts, the duration of those would be reduced.

30 MR PILTON: But can I just interrupt and ask the question there? The access of River Road. It's only the central one, that LILO intersection, is it?

MR FORRESTER: So, the so the intersect the western intersection. Yes. The western intersection is our, signalised intersection.

35 MR PILTON: Okay, Thank you.

MR FORRESTER: So that's the existing main. Yes, that's right yes.

40 MR PILTON: Thank you.

MR FORRESTER: And the second one there, closer to the River road label. That's the secondary access.

45 MR PILTON: Thank you.

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MR FORRESTER: No problem. So in terms of car parking, it's been provided in excess of the minimum controls of both the senior SEPP requirements and the DCP. I will mention there that in terms of the senior SEPP, we are under the previous senior SEPP, which has since been repealed, and that's because of the savings and transitional provisions associated with the concept plan. So, as I said, parking has provided in excess of the minimum requirements. And that's to accommodate periods where there may be increased demand, such as shift handovers, but also to support adaptability of uses into the future if they were to ever change. So, yes. So, we've spoken a little bit about the access points there. So, utilising the existing access ways- The only other one is Saint Vincent's Road access. That's it there on screen- Outside of the main intersection, signalised intersection. That's it. Is a bus stop. And the access, the pathways to that bus stop will be upgraded where necessary to ensure compliance with the provisions of the SEPP. Only minor works are required to do so, and they've been identified within an access report which was submitted with the application. Another key design intervention that happened during the assessment was the introduction of the shared path through the development. So, one for the, cyclists and pedestrians, and the intent of these was to provide safer and more attractive alternative pathways to the existing River road frontage which currently rather narrow, and offers fairly poor amenity. So that's the frontage along the, the River road. That's it, that's the one.

Moving on to flooding, so flooding was addressed extensively through the assessment process. Flood modelling demonstrated that the risk from overland flow could be managed by the proposed storm water drainage system in place. And that there would be no worsening a flood conditions outside of the site itself. So, to any of the neighbours, the finished floor levels of the development have all been designed above the PMF level. And then a shelter in place strategy has been developed for flood events. This strategy is appropriate for the site given the short duration of flood events. Which is less than one hour and given the site has all necessary services to cater for people to remain on site during these events. All critical infrastructure has their main located outside the flood areas or being designed to so that it is protected in these events as well. Next slide, please. In terms of biodiversity. While the development has largely been situated within the existing developed portions of the site, up to 0.43 hectares of vegetation will be removed and 0.63 hectares of vegetation may experience indirect impacts. So, to mitigate these impacts, the development will seek offsets in the form of credits in accordance with the BTR framework, and that includes 11 ecosystem credits and seven species credits to be obtained. The proposal will then plant 98 additional trees, which is, in excess of the minimum required by the condition of the concept plan. And that's planting across in deep soil areas across the site, as well as further vegetation within planters, terraces and on balconies itself. In addition to this, there'll be sediment erosion and controls will be implemented. Hollows will be relocated and nest boxes. Introduced to the site as well.

In terms of other, issues, raised during the assessment, in relation to developer contributions. There's two components to this one. And one is for the hospital element itself. And both Council and the Department were in agreement that the

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contributions plan provides for an exemption for this hospital use. In terms of the seniors living component of the development. Council were of the opinion that contribution should be levied on this aspect of the development. However, there's an exemption in play from the ministerial direction dated 2007, and essentially that provides an exemption for seniors housing, in accordance with the provisions of the former seniors housing SEPP. And that's for not-for-profit organisations who are a provider of rental housing to tenants. So HammondCare meet those two key requirements to have an exemption from the contributions. And the Department has agreed with that implementation. Other than that, it just wanted to point out, I suppose, that the funding for this project is being provided by HammondCare. So the infrastructure of the new health service facility is being funded by HammondCare at no cost to the public. The nature of the development itself being an integrated health campus and the nature of the residents themselves, mean that demand for public amenities and services ordinarily provided by Council is reduced in this regard, because a lot of those programs and services are provided on site as part of HammondCare core functions.

And finally we have, Pallister House. So, Pallister House is a state heritage item, and it will be used for research, administrative functions to help ensure its ongoing preservation into the future. A conservation management plan has been prepared to guide its ongoing maintenance, and the proposal also aligns with some of those key moves which were identified in the concept plan itself. So that includes enhancing the landscape curtilage around the building, the reinstatement of formal bridle path, ensuring that the interface with the new development complements the setting in terms of both setbacks and the introduction of the landscaping. Also, the basement has also been set back to ensure no construction impacts and risks to Pallister House the house itself. And then the image on the screen there is probably one of the key positives, which again was introduced through the assessment of the concept plan. And that view is from River road, and so you can see the orange roof- It opens up a new sight line. To Pallister House from River Road, which isn't currently available. So, I think that's it in terms of our presentation. So, we're happy to take any questions from the commission.

MR PILTON: Perhaps I could just start, I understand the geology of the site is largely sandstone. I'm just wondering how close to the surface is that and how do you envisage all the excavations would be a noisy process and so on.

MR FORRESTER: In terms of the exact steps, I would have to take that on notice and come back to you. But I'd say in terms of the second half of the question, the preliminary construction management plan has outlined what mitigation measures will take in, response to noise impacts. So, the noise criteria, as with many developments, is exceeded for construction and mitigation measures, such as using acoustic walls and low noise generating equipment where appropriate, has been or part of that plan.

MR PILTON: I'm sort of wondering if it sandstone needs to be blasted out or if it's cut out or whatever. Got anything you can address that?

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MS FORMSTON: I'd only say that we're probably the most- Well, patients will be the closest to the noise source, so we've got a vested interest, to make sure we can do that in the in the best way possible. And it is going to be in the construction management plan. There are methods we can utilise. It's also informed the staging of the project so that we've got, adequate setbacks from the existing operating rooms to the construction.

MR PILTON: Okay. Elizabeth?

PROF TAYLOR: I was interested in the way in which you are conceptualising the ecological, sustainable development aspects of it, because it did appear as though- It was rather light on how you were considering moving forward with that, with a minimalist approach which seemed slightly at odds with your HammondCare sustainability objectives. But you seem to have more nuances on that, in this conversation. So, you are at level four for the hospital and respite care. Is that or for the whole of the site? What are your targets and how do you expect to achieve or optimise what you can achieve?

MS FORMSTON: So just to clarify, that's in relation to the ESD commitments.

PROF TAYLOR: Yes.

MS FORMSTON: Yes. So, there is an ESD report that was submitted as part of the EIS. And we're committed to five-star green star equivalency. We do have further information in this conditions of consent as to why we're not seeking to. What's the word? Certified. Thank you. Certified under that program. We also have a sustainability plan that is aligned with our model of care. That's necessarily a condition of consent for some of the wellness initiatives, including, access to all areas from all floors and, connection with nature.

MR PILTON: I'll just add to that. (crosstalk) in your recommended conditions? Here you've got a four-star minimum four star green rating. You're saying five-star.

MS FORMSTON: Since this application was lodged, we have increased our, commitments. So, there is a bit of a- There's been a bit of a time lapse, but the condition and what was in the ESD report is what we're, I guess, considering today. But in terms of HammondCare's commitments, it's to five-star green star or equivalent and monitored by five star NABERS which means a year of operation. We will then seek certification for five-star ratings.

MS LEWIN: And ongoing, we see that there's monitoring system as part of your, operational overlay?

MS FORMSTON: We think NABERS is probably, best for our model of care in that it's actually based on fact. And we're putting in the required, infrastructure to measure.

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MS LEWIN: Sorry.

5 MS LEWIN: Continue. Oh, no. I've got a number of questions in no particular order of the presentation, but Liz Do you want to continue?

PROF TAYLOR: Yes. Well, just in terms of the seniors living does require six-star. So that you are saying five-star for the whole site.

10 MS FORMSTON: Or I'm sorry, I might have confused things. The ISD report that's out. The initiatives that we've committed to at the time this was lodged. I may have confused it by answering HammondCare's position. So that I would refer to as being what our submission or our application has been for this project in terms of ongoing monitoring. Yes definitely, we're committed to neighbours and to actually measure
15 and report to our members and our residents and patients.

PROF TAYLOR: So that's HammondCare, for this project what are your targets then?

20 MS FORMSTON: Four-star green star equivalency.

PROF TAYLOR: For the whole of the site. So how does that fit with the usual expectation of six star for seniors living under the SEPP expectations, is-

25 MR FORRESTER: That it's.

PROF TAYLOR: Well below. (crosstalk)

MR FORRESTER: That's because the.
30

PROF TAYLOR: Seniors.

MR PILTON: Living SEPP -

35 PROF TAYLOR: Yes, the -

MR FORRESTER: Former seniors-

MS FORMSTON: Former SEPP or the current SEPP.
40

PROF TAYLOR: Current is seven, so the former is six.

MS FORMSTON: I need to take that on notice and speak to our consultant.

45 PROF TAYLOR: Yes. And the trying to work because now you're making it more hospital sort of like or capable of tying in. I was just trying to work out how they all work together. But there was a requirement also, in the original that you would

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provide a statement regarding how the design of future development responded to the CSIRO's projected impacts of climate, in which case taking a minimalist approach didn't appear to be aligned with that expectation. But then with all of the- as you say, that more holistic idea of care means that you've got a number of components and how they sympathetically will all work together to drive that sustainability outcome just wasn't very clear. And then the last part of that is Pallister House. I do appreciate it is an old building you are renovating, but there's going to be a whole lot of people living there that- perhaps there was no statement at all about whether you had any aspirations to include increase the sort of energy, sustainability, aspects of that as a research centre or whatever it's going to be used for. So that holistic planning was very unclear.

MS FORMSTON: Okay. So would you like us to come-

PROF TAYLOR: -I'm happy for you to take it on notice rather than trying to comment now.

MR FORRESTER: And, yes, I do have a response. Because yes I guess not only the seniors SEPP, has been repealed and replaced, but we also had an introduction of a new sustainability SEPP. So, we'll come back to you with how that relates to our proposal, if that would be helpful.

MR PILTON: Can I ask a more prosaic question? We're trying to find on the plans the end of journey facilities, bicycle storage and all that kind of- we can't find it, maybe because our plans are very small scale, but perhaps someone could tell us where it is.

MS FORMSTON: Level one.

MS LISNEY: Yes. I was going to.

MS FORMSTON: Just clarify end of journey, as in, our staff?

MR PILTON: Yes, Staff. Bicycles. Sorry, not finding the mortuary.

PROF TAYLOR: Which goes to on your lower level where the mortuary is just in terms of labelling, which gave us a bit of a laugh. We've got an area called Resident Storage. (crosstalk) anyway, that's near the mortuary.

MR PILTON: We can't still can't say the bicycle.

MS FORMSTON: Maybe we could ask, our architecture online to bring up the plan and point to the end of-

MR PILTON: Or maybe you can answer it on notice. It's just a simple question, but very small scale, very hard to read. Level one, I don't know if I can see it.

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MS MASTERS: Caitlin from Masters Architecture here. So it is located on level one. It's on the far eastern side, of the health plan. We can follow up with a more detailed plan to show where that's located following the meeting.

5 MR PILTON: That'd be useful. Thanks, Caitlin.

MS LEWIN: Thanks very much. So I've got a few short questions. One that may be a bit longer. We understand you're providing. Excess numbers of parking spaces. We also understand that currently or in the past, the school has sometimes used your
10 parking spaces at peak times for services or for parents. Do you have any plans for that to be an ongoing- I suppose, an agreement to allow That to happen? Is there some conversation at this point in time lead to an agreement?

MS FORMSTON: I've had conversations with the school throughout the concept and
15 the detailed. We would actually would encourage parents to be able to drop off and come and use the cafe. And for us, activating the site is really important to keeping our patients and residents connected and within the community. It will be managed parking as we're not so concerned about our mums and dads dropping off. At that short turn use we do experience, probably some longer tum use of the car park and
20 that is that would be our park management system would seek to address. But there will be a period of free parking so you can come and either drop someone off, pick someone up. And there will be other mechanisms in place. The parking isn't intended to be a business model, but the management is there to, prevent that longer term use of the site as a car park. Others who are either walking to the station to go into the
25 city, or some of, the immediate neighbours who tend to park there permanently.

MS LEWIN: The short turn. Community charges are a slightly more detailed question, to do with the landscape proposal for the green roofs. We're not quite, clear on how that proposal is being developed. And together with that. Valuable
30 takeaways, are quite extensive. And that would lead to us trying to understand at this point in time, maintenance requirements, which are quite specific to, and also whether you're providing, battery storage or are you expecting grid. Just-

MS FORMSTON: I can probably answer the second one first. At this stage are we
35 are making provision for batteries in the future that they could be added. But at this stage, given the extent of roof, we won't be exceeding, we won't be generating more power than what we use.

MS LEWIN: And what is the capacity, right? What is targeted?
40

MS FORMSTON: But when we will come back to. But at this stage, I'm across all of our portfolio. We're targeting maximum that our roof will deliver. The process of rolling it across all sites, new and existing.

45 MS LEWIN: So we will go to the landscaping and the substrate, which is something that we were trying to get more information on.

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MR PILTON: I was just looking at the drawings earlier. But I'm not quite sure I understand the system. I've never heard of the particular system for the roof. Landscaping, perhaps you might take us on notice and just show what it means. It seems a very thin layer, and I'm wondering how that can cope with, you know, exposure to the sunlight and atmosphere and so on. Will it dry out? How is it irrigated? How is it maintained? What sort of planting is?

MS FORMSTON: Unfortunately, our landscape architect was intended to be online. James? Yes.

MR HERON: I am here. Katie.

MS FORMSTON: Oh, fantastic James. Sorry I couldn't see you on the screen. Yes, but could you perhaps respond?

MR HERON: No, it is a commercial system which is widely used on roof. And there is a project in Barangaroo, very similar to what is proposed here, that has been in existence for about 3 or 4 years. The planting is provided with enough soil depth, so that it, is viable for a decent period of time. The soil is basically there to anchor the plants down and to hold nutrient, and provide plenty of pore space that moisture can accumulate. This system has a small reservoir in the bottom, which is combined with the drainage cell, and that maintains moisture for a period of several days in the soil regime. And there is irrigation provided so that in a longer period, the plants- the soil regime does not dry out, to the point that it's detrimental to the plants. However, all of the plants are selected for their ability to survive drought- through drought periods. And their drought tolerance is one of the key criteria to their selection.

MS LEWIN: Is it trafficable?

MR HERON: Yes you can walk on- walk over it. The plants are, hardy enough that you can traffic across there so that the service ability of the solar PV and any other equipment up on the roof is manageable.

MS LEWIN: It's all tied together. Okay.

MR PILTON: Thank you.

PROF TAYLOR: So can I just ask a further question on that. Have you analysed that in terms of, the CSIRO projected impacts of increasing heat and extended drought and things? That's the system in place for 3 to 4 years. It's not got a long history then on its capacity to be sustainable yet or so what have you done any of that analysis on its. Future proofing.

MR HERON: The future proofing. Well, with climate change, there's only so much we can do. Until we kind of get empirical data. As to what that is going to be in this particular microclimate. The plants that have been selected are those that are most durable and, tolerant of, drying out, high sun solar, solar infiltration levels. And I

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believe that the, we are there is an R value that is gained by having the insulation of plants and soil on the roof and, We're with. You know, that's part of the justification for having this up there. There's also research that shows that having planting underneath solar panels is actually beneficial because it keeps them at the optimal, operating temperature range. So, you know, we've done we've done what we can and the project in Barangaroo is there is a test example and the results coming out of that are highly positive.

10 PROF TAYLOR: Thank you.

MR PILTON: Could you direct us, perhaps to which building? That is at Barangaroo.

15 MR HERON: We could. Yes, send you a link through.

MR PILTON: Be terrific. Thank you. Anymore on that?

MS LEWIN: No. Go to the ground.

20 MR PILTON: Go to the ground, yes. Can I ask- I'm a bit confused. Just the deep soil planting is said to be something like 46.5% of the site area. I'm just wondering how that that gets calculated. I'm assuming some of that is just virgin soil, as it were, on site, which isn't necessarily deep soil. But is there a drawing somewhere that shows us new deep soil as being planted?

25 MR HERON: And so the virtue of the site is that most of the building work is actually occurring over existing buildings or on highly disturbed land. And the perimeter, existing vegetation is being retained. That's where a lot of the deep soil, comes from. And then, there will be areas where, backfill up against the buildings, will be occurring. But that's only marginal. So most of most of the deep soil will be existing deep soil that's been retained on the site.

MR PILTON: So it's not really deep soil.

35 MR HERON: It is. It's deep. It's as deep as the sandstone.

MR PILTON: That's what I mean. I don't know how others.

40 MR HERON: Well, hang on. That's-

MR PILTON: (crosstalk) Is that soil profile somewhere in the EIS, that shows how deep the soil is and how deep the sandstone is -

MR HERON: You know -

45 MR PILTON: How deep -

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MR HERON: We can't change the fact that there is sandstone underneath the soil.

MR PILTON: No, I agree with that. But I'm just wondering how you get 46.5% of the site. I don't think it's a real figure. That's not deep soil, that's existing soil. That might be an inarguable point.

MS FORMSTON: Maybe we respond to that one. Take that on notice.

MR PILTON: If you could. There's another figure that says the public domain has got 14,000m², which is 41%. So I'm wondering what's what and where.

MS FORMSTON: Perhaps if you have a diagram, it's useful.

MR PILTON: Like for example, on Wahroonga there was a plan that showed yes, this is deep soil and so on.

MS FORMSTON: Yep. That would-

MR PILTON: Clarified, thank you. What about public transport and so on, and staff coming in on overnight shifts and so on. How will they be accommodated? Obviously there's no buses at that time of night. So are they all intended to drive in or-

MS FORMSTON: Three shifts a day? Plus administrative staff. So there's a it's quite a, regular movement of staff. A lot of- a majority of our staff do take public transport. So whether that's to the, Wollstonecraft or, Saint Leonard's Station and walk down and you often see them walking down the bridle path. The car parking on site has accommodated those periods where there is two shifts in a handover. So at the moment we don't experience any impacts as a result of staff movements. And we don't expect that in the proposal either.

MR PILTON: And for the. So the residents, seniors, residents, is a sort of somewhere I've seen stuff about a bus on Sundays and all that kind of stuff. Does HammondCare intend to have a private bus service or something to run people to the town centre?

MS FORMSTON: Not this- We don't at this stage propose a bus. We do provide transport services.

MR PILTON: So what does that mean?

MS FORMSTON: That means we will- Our concierge will facilitate transport for our seniors living resident. Should they -

MR PILTON: Call an Uber or something?

MS FORMSTON: It could be that, or it could be our own. We do have small vehicles.

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MR PILTON: Okay, thank you.

5 MS FORMSTON: I think we've also made comment on this. And we're going to raise this where we- Chris, in one of the conditions coming up.

10 MR FORRESTER: But transport on Sundays, yes. So there's currently a condition of consent which requires transport to be provided on the Sunday. That's because the rest of the days, it has adequately serviced by the existing bus routes. To meet those requirements.

PROF TAYLOR: So did that answer what's happening on Sunday?

15 MR FORRESTER: On Sundays themselves. So, there's currently a condition of consent which requires a- I can't remember the actual wording, but it requires a transport service to be provided by HammondCare on the Sunday. Because that's Sunday is the only day where there isn't an existing bus route. If that was changed in the future, if a public bus route would become available on the Sunday, that requirement would obviously go away.

20 MR PILTON: I think, does the bus- Public bus service finish at six that I read that somewhere?

25 MR FORRESTER: I've just got here. There seems to be services that go till 9:59 p.m. per route 261. And that's the that's the bus stop that goes straight outside the-.

MR PILTON: Thank you.

30 PROF TAYLOR: No, I'm just interested because I do happen to know the profile of the area as I live there and everyone talking about you just walk to Wollstonecraft Station. I don't know whether anyone seen the hill you have to go over. That's probably a misdirection statement to say you just potter along to Wollstonecraft Station because what would be the incline there? It would be significant. I mean, cars almost can't get people walking.

35 MS FORMSTON: Sorry. I think we've got maybe- the question previously was about staff.

40 PROF TAYLOR: Yes, I am talking both. Yes. (crosstalk)

PROF TAYLOR: I mean even staff at three shifts. So what are you talking about? Walking to the station at 8 or 9:00. I know you're having no, problems now, but that's not necessarily a rationale for continuing Same.

45 MS FORMSTON: I'm happy to happy to discuss that. Yes, absolutely. So we have put a-

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PROF TAYLOR: Statement about.

MS FORMSTON: In the traffic report. There is some comments about operations. I'm happy to take that further. Should that be required.

5

MR PILTON: I think it'll be useful to get a statement on that. Thank you.

PROF TAYLOR: -Would be appreciated.

10 MR FORRESTER: We have the requirement for a green travel plan as well. So whether that's initiatives to encourage carpooling and the like, that will also be a requirement.

15 PROF TAYLOR: That's very conscious of the fact that that is the segment of the community that has difficulty with toll paying and things like that. So reliance on cars is likely to be a significant issue into the future as well. So well worth a look. Thank you.

20 MR PILTON: Can I just change the subject and ask- But the proportion of affordable housing, if there is any within the seniors living. Yes.

MS FORMSTON: Yes. So, we currently all our we have a policy internally that we have a minimum of 10% affordable, at any point in time.

25 MR PILTON: We'll cover this then. Yes thank you.

PROF TAYLOR: It's probably worth saying that somewhere.

30 MS FORMSTON: That is in one of our RFI's-

MR FORRESTER: (crosstalk) So yes. And the difference is it's not a requirement under the SEPP for this development, unlike the Wahroonga development because we're not relying on the vertical village's provisions. However, as Katie just said, as a HammondCare policy, they do provide it.

35

MS LEWIN: Is that something you can confirm in writing?

MS FORMSTON: Certainly.

40 PROF TAYLOR: I suppose we're coming from the point of view that the, the fact that this was the seniors living was a point of issue because it is not part of what was required. So, any advice that you can give around how you are fitting within expectations of society around these issues rather than 'I don't have to do it because' is perhaps a different messaging understanding.

45

MS FORMSTON: And there was, I guess this this topic was explored quite extensively in the concept, application. And that was supported by market research

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and the emerging again- that this change in how health is being delivered and people wanting a continuum of care into their apartment for episodes of care rather than 24/7 residential care. So, would be happy to recirculate the background to what service seniors living is, and what support is being provided to those residents
5 because it isn't-

PROF TAYLOR: I don't think we were trying to revisit that at all - I'm speaking for myself. Really.

10 MS LEWIN: Back to the landscape and overland stormwater management. So probably to the landscape consultant. Could you describe how the swales to the south southern boundary would operate under intense storm events? And whether there is an area which has been set aside, I suppose, or described for stormwater retention, or are there progressively down the site elements that calls for stormwater, to be slowed
15 or detained in some way?

MR HERON: Yes. The area to the south. The amount of runoff it's receiving will be reduced because of the work to the turning circle in front of Pallister House, and the new roadworks along the western side of Pallister House will reduce the runoff that's
20 currently receiving. The swales are there to redirect the water away from the southern boundary and take it into areas where it can infiltrate and also slow the, velocity of the water. Remembering that we are reducing the amount of sheet flow water that's actually going into those areas, there are some drainage catchments at the termination of those swales and infiltration areas to cope with that.

25 MS LEWIN: Okay. So you're trying to direct it towards the creek, is that right? Or simply detain it so that it dissipates more generally?

MS FORMSTON: So the water that is collected on a hard surface will be collected
30 and drained.

MR PILTON: So no retarding devices or storage?

35 MS FORMSTON: No detention systems.

MR PILTON: Not required. Okay.

MS FORMSTON: So I think as James has reiterated, the amount of overland flow will decrease because we're putting in stormwater systems to collect water off the
40 hard surfaces, particularly the informal car parks and the turning circle outside Pallister is currently undrained. That will be as part of the proposal rectified, and the if you're referring to the swales along the southern boundary there to support a row of hedges at the request of our neighbours there, and water I would say east of looking at the contour is there east of Pallister will continue to go east into that large
45 area along Saint Vincent's Road, which, as James has said, enables- The word permeability, James?

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MR HERON: Right. So the, the grasslands and shrubs through the will be, infiltrating. And there is a, stormwater system at the bottom of the hill to pick up anything.

5 MR PILTON: Yes.

PROF TAYLOR: So you're not considering recycling the water for gardening.

10 MS FORMSTON: James, want to respond to the recycle the water storage and recycling.

MR HERON: No. The water recycling will be coming off the roof where it is easier and more controlled to catch. Trying to pick up stormwater flow like that would require intensive civil work to pipe it back into a collection basin and then move that
15 from the low points in the site back up to the higher points where it would be used or stored. So we're basically relying on the, the runoff from the roofs of the buildings.

MR PILTON: Is that water runoff from the roofs and being stored for recirculation. I'm just wondering where.
20

MR HERON: So off the health and the seniors living buildings. And there is a tank located between the two, which is where it would be stored. It's almost at the high point of the site.

25 MR PILTON: Perhaps you could just point it out in your response where it is the volume. Just out of interest what's happening to the old swimming pool? It's still there.

MS FORMSTON: It's still there and James, do you want to respond to this? The
30 swimming pool?

MR HERON: Yes. The intention is that it would be collecting some of the water from, Pallister House, which would be stored within a bladder within the old pool. And a deck over the top of the pool would be utilised as a plant nursery where
35 indigenous plants found on the site could be cultivated for replanting throughout the site to get the residents and the local community involved in a rehabilitation program. And used for other gardening activities in that location.

MR PILTON: Thank you. Any more questions, Elizabeth? Oh, do you want to go to
40 the conditions before we wrap up? It's just forgotten. That's okay. Sorry. That's all right.

MR FORRESTER: Right. So, the first condition is condition B14. And this relates to that access path between the site and the bus stop. And essentially, there's currently a
45 requirement for us to go back and consult further with Council on this issue. However we think it's unnecessary because the scope of the works required to ensure accessibility to that bus stop- It's already clearly defined in the application through

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the accessibility report, which is referenced in that condition. Then the works themselves will be subject to a section one three eight certificate through Council. So we believe this provides a appropriate level of consultation with them through that existing process, as essentially we feel that the matter has already been addressed through the assessment and there's no need to consult further post determination.

MR PILTON: Thank you.

MR FORRESTER: In terms of conditions C11 and C16 on screen there. We touched on, this one earlier in answering your response, to the ESD requirements. And so the Department has inserted a provision B, which essentially allows for an alternate ESD certification process to be approved by the planning secretary. Again, we've already put forward the alternate ESD process as part of the application, which is identified in the ESD report and the ESD report identifies all initiatives that we need to impose in order to achieve the ESD targets which have been set. So just in the interests of efficiency, we believe it'd be appropriate for an independent ESD consultant to certify that those, initiatives will be put in place, prior to.

MR PILTON: Understood. Thank you.

PROF TAYLOR: At 4 star level?

MR FORRESTER: As per the requirements of the condition. Yes. Conditions B3 and E5- Again, we've touched on this one but it's in relation to the BASIX requirements, and so the as you're aware, the proposal has been built to the class nine C standards and section J is the most relevant sustainability benchmark for these buildings. BASIX is really only traditionally applicable to class one, two and four buildings, but we were required to get the BASIX certificate as a result of the sustainability step, which captures the seniors housing use. So we ended up in a situation where we had sort of two sustainability measures. We wanted to add wording to that condition to provide clarity to the certifier that if there is any misalignment between the requirements of the section J and the BASIX that the section J would prevail. As this is typically the higher standard and more appropriate to the class nine C building topology.

MR PILTON: Understood. Thank you.

PROF TAYLOR: So if that wording was slightly changed to say that the higher requirement would prevail, you would be comfortable with that- Of the two.

MR FORRESTER: The high requirement of the BASIX and the section J.

MS FORMSTON: Let's try to give it an example.

PROF TAYLOR: Just in case. Yes.

MR PILTON: We'll think about it?

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MR FORRESTER: It's more about yes, potential inconsistency. So, if we could, have a think about maybe alternate wording around those lines and just consult with our ESD and project certifier just to make sure we get that right.

5

MR PILTON: Okay.

MR FORRESTER: I think the next two, C 27 and C 30, we just wanted minor amendments to facilitate the staging, and we understood that this one- these two were in agreed with the Department. I think they may have just been missed off the final drafting. And yes, I understand no issues have been raised with those two.

10

MR PILTON: Okay.

MR FORRESTER: Conditions E12 and E13. This relates to visual privacy to our neighbouring properties, particularly to the west. And again, we just believe that this matter was raised on numerous times throughout the assessment of the application. And appropriate design interventions have already been made in terms of our larger setbacks. Well in excess of any requirement, the facade treatments which are introduced at the response to submission stage and the landscaping. We just feel that going back to the community again, following determination of the application is an onerous requirement. And again, we just don't want to cause delays to the construction process.

20

MR PILTON: Okay.

MR FORRESTER: And finally, condition A37 was just following our review of the draft conditions. And essentially it requires a change of use to convert the seniors housing to other uses, and it references the hospital use. I believe that's the case anyway. And again, the seniors housing buildings have been built to the class nine standards. Not a class nine A, which is a hospital, and so hospitals can't typically be delivered under that class nine C standard. Therefore, we just think the conditions are a bit redundant and we just don't want it to inadvertently limit the effectiveness of HammondCare's continuum of care model, whereby health- I won't say health services to confine with the planning land use, but you know, health uses would maybe be delivered within dwellings.

30

35

MR PILTON: Okay.

MR FORRESTER: That was it. Thank you very much for your consideration of those matters.

40

PROF TAYLOR: Just sorry- that visual privacy bit is going to be relying on planter boxes and things like that, particularly in the residences. And if you've got a whole lot of frail elderly people looking after planter boxes then their utility for visual, screening, maybe- have you got a gardener or a-

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MR FORRESTER: I imagine there's a-

5 PROF TAYLOR: Is that going to be all done under a consolidated or sort of centralised care system for all of those planter boxes? Having seen so many dead planter boxes.

MR PILTON: Can I just ask the landscape architect? Are all those planter boxes irrigated?

10 MR HERON: They are. Each building has a centralised, delivery system. It's using potable water because we don't want to have recycled water coming up through the building in case there's a risk of contamination or a mix up. And then on each floor, there are individual deliveries to the terraces on the outside edges.

15 PROF TAYLOR: But I mean, that could be doing weeds rather than plants if it's not brought through a program-

MR HERON: -Yes, but there's a vested interest by HammondCare to maintain this, considering that most of their residences are looking out onto it, and the value is
20 diminished by not caring for that landscape.

PROF TAYLOR: Sure, thank you.

MR PILTON: Thank you. One final question from me, going back a bit. What's the
25 proposal about electric vehicle charging and so on, if any.

MS FORMSTON: Yes. There is a commitment to 5%, and it's, located in the outdoor accessible car parks along the western external road. Until such time as we can get some clarity on the fire brigade's position on chargers in the basement.
30

MR PILTON: Good idea. (crosstalk)

MS LEWIN: Yes. Concerned about that too. Yes, ventilation access and so on
35 absolutely.

MR PILTON: Well, I don't have any more questions. Elizabeth? No. Wendy? Thank you very much for coming in. That was a good session, I thought. We'll wait for your response. It'll be good to get it by- in the next week.

40 MS SEXTON: Yes. We'll send a formal letter with all the questions on notice.

MS FORMSTON: That would be great.

MR FORRESTER: Appreciate it.
45

MR PILTON: See you on Thursday.

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MR FORRESTER: Thursday will do.

MR PILTON: Thank you very much.

5 MS FORMSTON: Thank you for your time.

<THE MEETING CONCLUDED

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