

ATTACHMENT A – SUBMISSIONS TABLE – 24 MEREWETHER STREET AND 8 LINGARD STREET, MEREWETHER

The proposal was placed on public exhibition from Monday 27 June 2022 and Monday 25 July 2022. All landowners in the vicinity of the Lingard Hospital Precinct were notified of the Planning Proposal. A total of 12 submissions were received during the exhibition period.

The table below captures the key matters raised within the submissions received by City of Newcastle (CN) during public exhibition of the Planning Proposal.

Theme	Summary of key matters	Council response
Vehicle traffic	<ul style="list-style-type: none"> ▪ Increase to facility and its capacity will inevitably escalate existing traffic, congestion, service and delivery vehicle movements, rat runs and general disruptions experienced by community. ▪ No detailed traffic management plan or suggestions to improve current and address anticipated concerns. ▪ Heavy vehicle access and main loading off Tye Road and Hopkins Street is inappropriate and needs relocating/resolving. ▪ Reversing trucks not complying with current DA approval. ▪ No consideration of construction traffic impacts and disruptions. ▪ All future DAs should be referred to TfNSW due to anticipated increased traffic. 	<p>The draft precinct specific DCP includes development controls to satisfactorily manage traffic and parking as part of future development applications. The controls will require a Traffic Impact Assessment to be submitted with future development applications to demonstrate that development will not further impact the availability of on-street/local public parking and how traffic and congestion in the surrounding area will be managed.</p> <p>Referrals to TfNSW are required where proposals fit the definition of 'traffic generating development' under the <i>State Environmental Planning Policy (Transport and Infrastructure) 2021</i>.</p>
Traffic safety	<ul style="list-style-type: none"> ▪ Frequent accidents and regular near misses surrounding the site. 	<p>The draft precinct specific DCP includes development controls to satisfactorily manage traffic and parking as part of future development applications. The controls will require a Traffic Impact Assessment to be submitted with future development applications to demonstrate that development will not impact the availability of on-street/local public parking and how traffic and congestion in the surrounding area will be managed. The draft planning agreement</p>

		supports traffic and transport upgrades required to support intensification of the Precinct.
Speeding vehicles	<ul style="list-style-type: none"> ▪ Speeding vehicles observed and noticeable along Lingard Street. 	The draft precinct specific DCP includes development controls to satisfactorily manage traffic and parking as part of future development applications. The controls will require a Traffic Impact Assessment to be submitted with future development applications which will be required to take into consideration factors such as existing and estimated vehicle movements to and from the site. The draft Planning Agreement supports traffic and transport upgrades to improve safety around the area.
Public and active transport	<ul style="list-style-type: none"> ▪ Appreciate encouragement of public and active transport. ▪ Is a good place to cycle with reasonable bus service. ▪ Public and active transport unlikely to be used, particularly by patients. ▪ Noted lack of availability of public transport times. ▪ Pedestrian movements tend to cross Lingard Street more than Merewether Street. 	The draft precinct specific DCP includes controls that will require a Traffic Impact Assessment to be submitted with future development applications. A Traffic Impact Statement required to be provided as part of development applications, will assess the impact and availability of on-street/local public parking and how traffic and congestion in the surrounding area will be managed. The draft planning agreement supports traffic and transport upgrades and has a strong focus on pedestrian amenity
Pedestrian safety	<ul style="list-style-type: none"> ▪ Hazard crossing Lingard and Merewether Streets. ▪ Suggested pedestrian safety solution (island) across Lingard Street along north side of Merewether Street. ▪ Service vehicles entering and reversing along Tye Street create pedestrian hazard (movement pattern for public school and Junction shops). 	The draft precinct specific DCP includes development controls to satisfactorily manage pedestrian safety, particularly at Lingard Street and Merewether Street intersection and from future developments at the Hopkins Street precinct. The draft planning agreement also supports the inclusion of traffic calming measures, additional footpath connections and pedestrian crossings in an effort to improve pedestrian safety and accessibility around the site.
Amenity	<ul style="list-style-type: none"> ▪ Reversing noises of service vehicles impact on amenity of residents. 	The draft precinct specific DCP includes development controls that aim to protect the amenity of adjoining residential dwellings. All future development applications will be required to demonstrate that

		development will not impact the amenity of adjoining and adjacent residential dwellings.
Availability of on-street car parking	<ul style="list-style-type: none"> ▪ Staff, patients and visitors occupying on-street spaces in lieu of off-street provided by development. ▪ Request more off-street parking be incorporated into the design. ▪ Parking incentives to reduce impact unlikely to be successful. ▪ Increase to facility and its capacity will inevitably decrease on-street parking availability. ▪ Surrounding public uses are in need and deserving of on-street parking. ▪ Any pedestrian link from Tye Road to Merewether Street will reduce on-street parking availability in Hopkins Street. Recommend resident only parking for Hopkins Street. ▪ On-street parking is already overloaded, at capacity, a nightmare and current issue that has not been addressed. ▪ No confidence parking will be addressed upon DA submission. ▪ Construction vehicles will take up further on-street parking spaces. 	<p>The draft precinct specific DCP includes development controls to satisfactorily manage traffic and parking as part of future development applications. The controls will require a Traffic Impact Assessment to be submitted with future development applications to demonstrate that development will not impact the availability of on-street/local public parking and how traffic and congestion in the surrounding area will be managed. The draft planning agreement also supports traffic and transport upgrades.</p> <p>The carparking requirements of the proposed development will be considered as part of the development application process. This will include an assessment against the relevant carparking controls set out in Newcastle Development Control Plan (DCP) 2012.</p> <p>A Construction Management Plan (CMP) will be prepared in relation to the future DAs, to ensure that any impacts from the construction phase are managed to mitigate impacts to adjoining properties. The CMP will adopt recommendations from any technical studies, including the Acoustic and Vibration Assessments and Traffic Assessments, as well as conditions of consent imposed by CN.</p>
Parking infrastructure and initiatives	<ul style="list-style-type: none"> ▪ Free on street parking is more desirable and preferred to the paid parking station. As such, this infrastructure is not used and has had little impact. ▪ Implementation of parking reimbursement scheme not considered effective. 	<p>The draft Lingard Hospital Precinct DCP includes development controls to satisfactorily manage traffic and parking as part of future development applications. The controls requiring initiatives are put in place ensuring off-street car parking will be made available. Other controls have been included requiring off-street car parking is self-managed.</p>

	<ul style="list-style-type: none"> ▪ Disgruntled by option for making parking station available to Townsend Oval users and profiting off parking due to an issue the hospital has caused. 	The carparking requirements of the proposed development will be considered as part of the development application process. This will include an assessment against the relevant carparking controls set out in Newcastle Development Control Plan (DCP) 2012.
Indirect impact/s	<ul style="list-style-type: none"> ▪ Safety and security. ▪ Amenity. ▪ Parking in proximity to home. ▪ Parking offences being committed. 	<p>The draft Lingard Hospital Precinct DCP includes development controls to satisfactorily manage amenity impacts to adjoining residential uses and traffic and parking management.</p> <p>The safety and security requirements of will be considered as part of the development application process. This will include an assessment against the relevant safety and security controls set out in Newcastle Development Control Plan (DCP) 2012.</p>
Rezoning	<ul style="list-style-type: none"> ▪ Current zoning is accepted and suitable as it reflects the residential objectives and intent, provides level of certainty and limitations, and reflects the character and use of space in the suburb. ▪ Responsibility of hospital to do their due diligence at site purchase. R3 zoning existed when site was established and should be retained. 	<p>The Lingard Hospital precinct is currently zoned R3 Medium Density Residential, and the Kingsland Precinct is currently zoned B5 Business Development.</p> <p>The proposed SP2 Infrastructure (Health Services Facilities) zone will enable the continued use and expansion of the Hospital on land that is appropriately zoned for medical use and has supporting planning and development controls. The SP2 zone also better reflects the existing use of the land and secures its future use for health-related employment and activities.</p> <p>The current zoning does not reflect the existing use on the site, nor does it recognise the importance and significance of the existing Hospital given its role in attracting complementary health service facilities and the growing importance of the health services industry in the strategic framework.</p>
Other and indirect impact/s	<ul style="list-style-type: none"> ▪ Building height currently limited by existing residential zoning but rezoning will effectively double the height of the current facility. 	As mentioned, the draft precinct specific DCP includes development controls to satisfactorily manage amenity impacts to adjoining residential uses. Building setbacks have been allocated to the sites to assist in preserving the local character and amenity.

	<ul style="list-style-type: none"> ▪ Impact residential character and community. ▪ Will set future precedent for other development to emulate. ▪ Acknowledge importance of and access to health care, however rezoning to support private hospital use offers little community benefit (not accessible to all and does not accept emergencies). 	<p>The expansion of the Lingard precinct enables the continuation of elective surgeries, that would otherwise be required to be undertaken in the public system, putting even further pressure on a system that is already over capacity. Private hospitals not only relieve the pressure on the public system by managing the privately insured patient population allowing the public resources to be present for critical and urgent illnesses and treatments, but also provide a valuable support response network for the public sector during periods of immense patient pressure, providing beds for public patients. Further, over the past two years, the private hospitals, including Lingard are providing surgery for public patients on a regular basis, to support the public sector and assist in managing demand, and this assistance will continue into the foreseeable future.</p> <p>Precedent is not a valid planning consideration. Each planning application must be considered on its own merit and facts and circumstances.</p>
Privacy	<ul style="list-style-type: none"> ▪ Impact on visual privacy and private open space. 	The draft precinct specific DCP includes development controls to satisfactorily manage privacy and amenity impacts to adjoining residential uses as part of future development applications.
Solar access	<ul style="list-style-type: none"> ▪ Compromise adequate solar access and daylight. ▪ Overshadowing. 	The draft precinct specific DCP includes development controls to satisfactorily manage solar access and amenity impacts to adjoining residential uses as part of future development applications.
Visual	<ul style="list-style-type: none"> ▪ Little to no consideration to adjoining streetscapes. ▪ Poor aesthetics. ▪ Out of character and not in scale with surrounding development being single/two storey buildings. 	The draft precinct specific DCP includes development controls to satisfactorily manage visual, character and streetscape impacts as part of future development applications.
Wind	<ul style="list-style-type: none"> ▪ Impact on desirable sea breezes. 	The draft precinct specific DCP includes development controls to satisfactorily manage prevailing wind and amenity impacts to adjoining residential uses as part of future development applications.

Amenity	<ul style="list-style-type: none"> ▪ Current development has poor amenity that will be exacerbated. ▪ Overdevelopment. ▪ Protect community and suburban landscape. 	The draft precinct specific DCP includes development controls to satisfactorily manage amenity impacts to adjoining residential uses as part of future development applications.
Other	<ul style="list-style-type: none"> ▪ Will set precedent for development to apply this height across the entire site to meet future demands. ▪ Piecemeal approach. 	<p>Precedent is not a valid planning consideration. Each planning application must be considered on its own merit and facts and circumstances.</p> <p>The draft precinct specific DCP includes robust development controls to ensure that the entire hospital precinct and its surroundings are considered when assessing a development application. Furthermore, the adoption of a Planning Agreement ensures that appropriate infrastructure is in place to support the hospital precincts expansion.</p>
Amenity	<ul style="list-style-type: none"> ▪ Removal of FSR will result in over development of a constrained site. ▪ No limit to density and associated impacts. ▪ Impact on character and amenity of the area. 	The rationale for the proposed removal of the FSR standards and increasing the HOB standards will allow the Hospital to provide facilities in accordance with health-related State legislative standards and obligations. NSW Health stipulates minimum floor space requirements for operating theatres, corridors and support suites that may not be capable of adhering to the Clause 4.4 Floor Space Ratio development standard in the NLEP 2012. Whilst the planning proposal results in the removal of FSR standards, all future development will need to demonstrate that the bulk and scale of the proposed structures does not negatively impact the amenity of adjoining and adjacent residential dwellings.
Infrastructure	<ul style="list-style-type: none"> ▪ Allowing greater FSR puts pressure on infrastructure and will increase stormwater and flooding impacts. 	It is noted that the site is generally flood compatible. All future development applications will need to demonstrate compliance with Clause 5.21 Flood Planning of NLEP 2012.
Indirect impact	<ul style="list-style-type: none"> ▪ Will set future precedent for other development to emulate. 	Precedent is not a valid planning consideration. Each planning application must be considered on its own merit and facts and circumstances.

Massing	<ul style="list-style-type: none"> ▪ No confidence bulk and scale will be managed through building envelope controls. ▪ Building mass out of scale and context with surrounding residential area. 	The draft precinct specific DCP includes development controls to satisfactorily manage built form, massing, visual appearance, materials and context as part of future development applications.
Construction	<ul style="list-style-type: none"> ▪ Noise pollution on residential amenity. ▪ Concern construction will be granted 24 hour work permit. 	<p>A Construction Management Plan (CMP) will be prepared in relation to the future DAs, to ensure that any impacts from the construction phase are managed to mitigate impacts to adjoining properties. The CMP will adopt recommendations from any technical studies, including the Acoustic and Vibration Assessments and Traffic Assessments, as well as conditions of consent imposed by CN.</p> <p>Construction site operators, owner-builders and public authority developments must comply with noise-restriction regulations under the <i>Protection of the Environment Operations Act 1997</i>. Any development consent issued will include CN's standard conditions of development that restricts construction works to the following times:</p> <ul style="list-style-type: none"> • Monday to Friday, 7:00 am to 6:00 pm; and • Saturday 8:00 am to 1:00 pm <p>No noise from construction/demolition work is to be generated on Sundays or public holidays.</p>
Operation	<ul style="list-style-type: none"> ▪ Noise from air condition unit reducing amenity, sleep, wellbeing. ▪ Disturbance caused because of land use differences. ▪ Servicing and waste collection create impacts. ▪ Site utilised at all times of day and night. 	<p>NDCP 2012 requires that all noise generating equipment such as air conditioning units, swimming pool filters, fixed vacuum systems and driveway entry shutters are designed to protect the acoustic privacy of residents and neighbours. All such noise generating equipment must be acoustically screened. The location and potential impact of such noise generating equipment will be determined at the Development Assessment stage.</p> <p>The <i>Protection of the Environment Operations Act 1997</i> (POEO Act) and the Protection of the Environment Operations (Noise Control) Regulation 2008 (Noise Control Regulation) provide the main legal framework and basis for managing unacceptable noise.</p>

		<p>The draft precinct specific DCP includes development controls allocates preferred locations for servicing and waste collection from the hospital precinct.</p> <p>Appropriate mitigation measures will also be introduced during operation. This will be determined through a Noise Impact Assessment which will be submitted as part of future development applications.</p> <p>It is noted that the through link from Tye Road to Merewether Street, for loading and servicing, is likely to present opportunities to further internalise operational facilities.</p>
Heritage interpretation	<ul style="list-style-type: none"> ▪ Underwhelming and tokenistic heritage interpretation response (colours and photos/plans in the hallway). 	<p>The draft precinct specific DCP includes development controls to satisfactorily manage heritage interpretation appropriate to the heritage significance as part of future development applications.</p>
Site suitability	<ul style="list-style-type: none"> ▪ Consideration of an alternate site should have occurred initially. ▪ Site has been outgrown and is not suitable for intensification. ▪ The continued expansion and increase in scale into a large multi-block, multi-storey private hospital precinct and its associated negative impacts is not appropriate in this location. 	<p>The Greater Newcastle Metropolitan Plan 2036 (GNMP) was released in 2018 to implement the vision set in the Hunter Regional Plan 2036; for the Hunter to be the leading regional economy in Australia with a vibrant new metropolitan city at its heart. The GNMP sets out four outcomes to be achieved, which comprise various strategies and actions.</p> <p>The Planning Proposal is consistent with <i>Outcome 1 - Create a workforce skilled and ready for the new economy</i>, and <i>Strategy 4 - Grow health precincts and connect the health network</i>.</p> <p>The GNMP recognises the role of the private health sector alongside Hunter New England Health in providing the necessary health infrastructure to serve the growing Hunter Region. The GNMP encourages all new major health facilities to be located within strategic centres or existing major health precincts. The Planning Proposal is in accordance with this strategy, as the Lingard Hospital Precinct has been identified within the GNMP as a “Major Health Precinct in Greater Newcastle”</p>

		<p>The draft Planning Agreement will ensure that required infrastructure upgrades accompany the expansion of the Lingard Hospital Precinct to ensure that the proposal protects the safety of pedestrians and improves pedestrian connectivity to and from the precinct.</p> <p>The numerical standard under Clause 4.3 Height of Buildings of NLEP 2012 is not an expectation for all structures on a site but in fact a maximum standard for structures. Whilst the planning proposal will allow for structures at the Lingard Hospital precinct to build to 18m, all future development applications will need to demonstrate compliance with the development controls within the draft precinct specific DCP and the overall objectives of Clause 4.3 which are:</p> <p><i>"(a) to ensure the scale of development makes a positive contribution towards the desired built form, consistent with the established centres hierarchy,</i></p> <p><i>(b) to allow reasonable daylight access to all developments and the public domain."</i></p>
Landscaping	<ul style="list-style-type: none"> ▪ Poor landscaping outcome anticipated. ▪ Acknowledge intent to retain trees and improve green. ▪ Trees retained are of no significant visual, environmental or ornamental benefit. 	<p>The Public Domain Improvement Plan identifies the improvement of the Kingsland Precinct frontage as part of the Master plan. This will involve additional street trees, improvements to the façade treatments, heritage interpretations and public seating.</p> <p>The draft precinct specific DCP includes development controls to satisfactorily manage landscaping and amenity impacts as part of future development applications.</p>
Urban design	<ul style="list-style-type: none"> ▪ No confidence that design and public realm will maximise quality and mitigate impacts. 	<p>The draft precinct specific DCP includes development controls that aim to ensure new development within the hospital precinct displays a balanced composition of elements including solid and void, fenestration, signage integration, as well as an appropriate scale and proportion to the streetscape. There is a section in the draft Lingard Hospital Precinct DCP which requires development applications to have regard to preserving residential amenity.</p>

Public space	<ul style="list-style-type: none"> ▪ Limited vision and regard for the creation of attractive, welcoming, inclusive and quality public space. ▪ Adverse to utilising public land to accommodate proposed footbridge for private purposes. 	<p>The draft precinct specific DCP includes development controls to satisfactorily manage public domain and improving amenity as part of future development applications.</p> <p>Development Application DA2021/01236 proposing the development of a pedestrian footbridge has not yet been determined. The Planning Proposal nor draft Lingard Hospital Precinct DCP make reference to a pedestrian footbridge.</p>
Change	<ul style="list-style-type: none"> ▪ Deteriorating landscape and sense of place as humble, suburban, residential, family-oriented community and neighbourhood being industrialised, institutionalised and dominated by businesses. ▪ Current and previous planning regime gave level of assurance with regard to impact certainty. ▪ Over reach and over development of site for private not community nature. ▪ Impact on residential lifestyle and amenity being constantly eroded. 	<p>The site and adjoining sites are located within close proximity to The Junction Business Precinct and Newcastle CBD. Section 6.13 of NDCP 2012 identifies the sites surrounding the hospital precinct as a 'substantial growth precinct', indicating increased densities are expected within this area due to its close proximity to centres and a range of services. This is further supported by the allocation of R3 Medium Density Residential zoning, a FSR of 0.9:1 and a maximum building height of 10m. Therefore, higher density development is to be expected.</p> <p>The R3 Medium Density Residential zone and the B4 Mixed use zone both permit 'Health Services Facilities'. The proposed SP2 Infrastructure (Health Services Facilities) zone will enable the continued use and expansion of the Hospital precinct on land that is appropriately zoned for medical use and has supporting development controls. The SP2 zone better reflects the existing use of the land and secures its future use for health-related employment and activities.</p> <p>The numerical standard under Clause 4.3 Height of Buildings of NLEP 2012 is not an expectation for all structures on a site but in fact a maximum standard for structures. Whilst the planning proposal will allow for structures at the Lingard Hospital precinct to build to 18m, all future development applications will need to demonstrate compliance with the development controls within the draft Lingard</p>

		<p>Hospital Precinct DCP and the overall objectives of Clause 4.3 which are:</p> <p><i>"(a) to ensure the scale of development makes a positive contribution towards the desired built form, consistent with the established centres hierarchy,</i></p> <p><i>(b) to allow reasonable daylight access to all developments and the public domain."</i></p> <p>The hospital precinct and surrounding land uses are located within proximity to a number of business uses operating within the B4 Mixed Use zone. The draft Planning Agreement aims to deliver transport upgrades and connections, with a focus on pedestrian and vehicle movements and public domain upgrades. The draft Planning Agreement is required to be considered with any future development application lodged.</p>
Public interest	<ul style="list-style-type: none"> ▪ Doesn't benefit the public as services are private. ▪ Existing negative impact on neighbourhood to be worsened. ▪ Economic benefits are not realised by a local or even national company. ▪ Accepting of expansion but not at the expense of residents. ▪ Residents were here well before the hospital. ▪ Additional demand and impact on local infrastructure and facilities. 	<p>The Planning Proposal will provide a number of significant public benefits to the community, including:</p> <ul style="list-style-type: none"> • Future development will result in an expansion to the variety of high quality health services on offer at the region's leading private hospital, especially to the ageing population. This future expansion will enhance this much needed service sector as Newcastle continues to undergo growth and transformation. • Employment will be generated in the expanding health sector, thereby providing ongoing economic and social benefits. • Future development will create a landmark that is identifiable and consistent with leading contemporary hospitals making it a centre of excellence thereby attracting further leading surgeons and specialist to the area. <p>The draft Planning Agreement is to deliver transport upgrades and connections, with a focus on pedestrian and vehicle movements and public domain upgrades. The draft Planning Agreement is required to be considered with any future development application lodged.</p>

Social	<ul style="list-style-type: none"> ▪ Dealings with hospital management in trying to resolve issues. 	The draft precinct specific DCP and draft Planning Agreement aims to capture public works/domain upgrades for the Hospital Precinct and its surrounds.
Sustainability	<ul style="list-style-type: none"> ▪ The development should commit to rather than 'consider' water sensitive urban design. 	The inclusion of Water Sensitive Urban Design (WSUD) is enforced through minimum on-site storage and discharge quality targets set out in NDCP 2012.
Flooding	<ul style="list-style-type: none"> ▪ The development should commit to rather than 'consider' flooding impacts. ▪ Concerns expansion will exacerbate flood incidence and severity in surrounding area, particularly to the south-east of the hospital. 	<p>The Planning Proposal was submitted with a Flood Assessment Report prepared by Northrop. As noted in the report, the proposal does not seek to alter the ground floor arrangement and as such is not expected to significantly impact other properties from a flooding perspective. Furthermore, the Hopkins Precinct is not part of the Planning Proposal.</p> <p>It was concluded from the assessment it is feasible to implement the requirements of the Ministerial Directions for Flooding and CN's LEP and DCP floodplain management requirements in the future design of the site. Any future Development Application will be required to demonstrate compliance with these requirements.</p>
Newcastle 2040 Community Strategic Plan	<ul style="list-style-type: none"> ▪ No alignment and evidence it will enrich neighbourhoods and places or enhance safe, active and linked movement across the city. 	In accordance with the Greater Newcastle Metropolitan Plan 2036, the proposal represents an opportunity to upgrade an existing health precinct to meet the growing demand for health services. The draft Planning Agreement aims to deliver transport upgrades and connections, with a focus on pedestrian and vehicle movements and public domain upgrades.
Newcastle Local Housing Strategy	<ul style="list-style-type: none"> ▪ Contradicts Newcastle Local Housing Strategy by decreasing residential zoned land and displacing dwellings. 	The Planning Proposal aims to rezone R3 Medium Density Residential zoned land at 23 Merewether Street to SP2 Infrastructure (Health Service Facilities), thereby reducing the amount of land zoned for residential use. However, the land at 23 Merewether Street is currently used for the purposes of a 'Health Services Facilities (Hospital)', and the rezoning of the land will not result in a net loss of housing. Moreover, the loss of residential zoned land due to the proposed rezoning is not anticipated to affect CN's capacity to meet projected housing demand.

Masterplan	<ul style="list-style-type: none"> ▪ No masterplan or wholistic approach to land use conflict and impacts. ▪ Development has evolved in an incremental and unplanned manner resulting in cumulative amenity impacts on the surrounding residential and mixed-use area. ▪ Inadequate management and addressing of impacts demonstrate development further intensification is not appropriate in this location. 	<p>The draft precinct specific DCP includes robust development controls to ensure that the entire hospital precinct and its surroundings are considered when assessing a development application which will assist in preventing a piecemeal approach. Furthermore, the adoption of a Planning Agreement ensures that appropriate infrastructure is in place to support the hospital precincts expansion.</p>
General	<ul style="list-style-type: none"> ▪ Piecemeal approach to evolution of the use. ▪ Do not defer addressing potential impacts (such as traffic, increase noise from deliveries, flooding, flora and fauna, overshadowing) to DA stage – address as part of the planning proposal. ▪ Strategic parking approach is an oversight and needs to be further explored. 	<p>The draft precinct specific DCP includes robust development controls to ensure that the entire hospital precinct and its surroundings are considered when assessing a development application which will assist in preventing a piecemeal approach. Furthermore, the adoption of a Planning Agreement ensures that appropriate infrastructure is in place to support the hospital precincts expansion.</p> <p>The Planning Proposal is accompanied by a draft precinct specific DCP which includes development controls that aim to improve outcomes for car parking, traffic, connectivity to the Hospital Precinct and bulk and scale. The draft precinct specific DCP and accompanying Planning Agreement capture public works/ domain upgrades for the hospital precinct and its surroundings.</p> <p>The draft precinct specific DCP includes development controls to ensure that car parking on the site will be appropriately manages and accessible.</p>
Do not Support / object		