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P21077 Camperdown Private Hospital Social Impact Statement



1.0 INTRODUCTION

This report has been prepared to provide high level consideration of available evidence to identify potential social impacts arising from the proposal. The approach taken in preparing this report has been aligned with the NSW DPIE Draft Social Impact Assessment Guideline and the themes in the relevant local social impact guideline, *Leichhardt Council SIA guidelines for development applicants*. The Leichhardt and DPIE guidelines both consider similar ranges of social impact types, those being:

- People's way of life how they live, work, play and interact with each other
- Their culture their shared beliefs or customs
- Their **community** its cohesion, stability, character, services and facilities
- The **population** including increases or decreases in population numbers.
- Their political systems the extent to which people can participate in decisions that affect their lives
- Their natural and built environment
- Their health and wellbeing
- Their personal and property rights
- Their fears and aspirations and safety.

1.1 Background

This Social Impact Statement (SIS) has been prepared to accompany a Planning Proposal for an earmarked key site located at 122-130 Pyrmont Bridge Rd and 206 Parramatta Rd in Camperdown. The Planning Proposal for the site is consistent with the strategic objectives set out in the Greater Sydney Commission District Plans, the Camperdown-Ultimo Collaboration Area and Place Study, as well as the Camperdown Precinct within the Parramatta Road Corridor Urban Transformation Strategy. The site is unique in that it is a relatively large land holding that will allow relatively large, flexible floorplates suited to servicing world class health, education, and innovation user groups. The concept design, in particular, has been informed by a large health user group, who (subject to the approval of the rezoning and subsequent development application) will occupy the building, thus acting as a catalyst to realise genuine activation of the precinct. The project intends to ultimately offer world class health, education, and innovation users a place to collaborate, work, innovate and service the community.



Figure 1: Concept rendering of the proposal



Source: BVN Architects (2021)

1.2 The proposal

The planning proposal seeks to amend the Leichhardt Local Environmental Plan (LLEP 2013) by:

- Rezoning the land from IN2 Light Industrial to B5 Business development to facilitate a range of employment and health related uses
- Increasing the FSR from 1:1 to 4:1
- Introducing a maximum building height control of up to 32m or 8 storeys.

The proposed 8-storey development would comprise of:

- Two levels of basement parking for up to approximately 100 car parking spaces
- Ground level comprising retail and medical related uses
- First to seventh floors comprising various medical related uses such as day surgery, dental/radiation/ pathology and rehab units
- Eighth floor comprising consulting suites.

It is noted that the prospective tenant for the proposal specialises in physical and medical rehabilitation and it is therefore understood that services offered on site will be of this nature.

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1.3 The site

The site is located at 122-130 Pyrmont Bridge Road, and 206 Parramatta Road, Annandale (see Figure 2). The site is immediately to the north of the Pyrmont Bridge and Parramatta Road intersection. It is bounded to the east by a three-storey commercial office building. To the north and west there is a combination of residential dwellings and urban service businesses, separated from the site by Cahill and Mathieson streets. To the south, beyond Parramatta Road, there are mixed use residential dwellings and commercial services.

The site currently consists of three, two storey buildings, which contain a mixture of retail businesses, including specialised retailers and bulky goods outlets. The most eastern of the site's constituent lots contains a ground level car park, which is attached to the adjacent bulky retail premises.

Figure 2: The site



1.4 The surrounds

The surrounds are predominantly commercial and light industrial in nature, with a mix of land uses including warehouses and bulky goods that require a large floor area. Surrounding the site, away from the major throughfares, there are heritage buildings ranging from 1800s and accessible open spaces.

In Camperdown it is common to see a row of terrace houses adjoining a light industrial warehouse. Building heights ranging from 1-7 storeys, with no setback, and height transition between buildings can be up to four storeys. It is important to consider the impact of the development on the surrounding buildings, with shadowing and other potential impacts.



The site is located close to several education and health care facilities, including Royal Price Alfred Hospital, TAFE NSW, the University of Notre Dame and the University of Sydney. These locations all form part of the wider Camperdown-Ultimo Collaboration Area, a nationally significant health and education cluster, which has been earmarked for future growth and development under State and regional planning strategies.

1.5 Access

The site has access to frequent bus services along Parramatta Road, providing a direct connection with Central Station, approximately 20 minutes away via bus at 10-minute frequencies throughout the day. The site is not proximate to heavy or light rail, with the nearest railway station being Newtown, approximately 1.3 kilometres to the south. Pyrmont Bridge Road is the primary means of private vehicle access, providing direct access northeast to the Sydney CBD via Pyrmont Bridge Road and southward to the wider south and west via Parramatta Road and the M4.

1.6 Future character

1.6.1 Parramatta Road Corridor Urban Transformation Strategy

The Parramatta Road Corridor Urban Transformation Strategy (PRCUTS) was adopted in 2016 to drive and inform land use planning and development decisions as well as long-term infrastructure delivery programs in the Parramatta Road Corridor. PRCUTS included wide ranging land use planning control changes applied across 12 discreet precincts and surrounding frame areas. The site is located within the Camperdown Precinct, which PRCUTS identifies as an area that is currently "transitioning to a vibrant high-density precinct with a diversity of uses and scale of built form". It highlights the current eclectic nature of the built form in the area, which while promoting a variety of uses, is not the best fit for the identified future character and role of the precinct (below).

PRCUTS envisions that the Camperdown Precinct will become "home to high-quality housing and workplaces right on the edge of the CBD, well connected to the surrounding city, parklands, health and education facilities and focused on a busy and active local centre". It states that the area will be highly urbanised and marked by taller residential and business buildings, with potential for an innovative business and research hub to reflect the area's synergy of health, education, technology and reinvention.

As such, the proposal has the capacity to contribute to the overall activity in the area, as well as contribute towards the desired synergies and agglomeration benefits by providing high quality jobs as well as amenities and services that would be complementary to the Camperdown Precinct's future role. The increased built form would be in line with the character around the core of the precinct, with adjacent future envelopes acting as a 'stepping down' urban design response to the low rise residential across Johnstons Creek to the north.

1.6.2 Camperdown-Ultimo Collaboration Area Place Strategy

The site is situated within the Camperdown-Ultimo Collaboration Area, within the Camperdown Activity Node. The Camperdown-Ultimo Collaboration Area is envisioned to be a national innovation and technology capital, underpinned by knowledge-based industries, technology and, importantly, health care. The proposal has the capacity to support the aims of the place strategy by:

- Protecting surrounding employment areas for health, education, research, innovation and creative industry land uses
- Accommodating ancillary and complementary uses such as health and medical research activities, private
 hospitals, allied health, start-ups, innovation and creative industries, ancillary retail, visitor, carer and
 aged accommodation.

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The Camperdown Activity Node is to be centred Figure 3: Camperdown-Ultimo Collaboration Area Place Strategy

around an agglomeration of medical and research activities, leveraging RPA Hospital, Professor Marie Bashir Mental Health Facility, Chris O'Brien Lifehouse, medical and research institutes and the University of Sydney. The Place Strategy also makes note of a planned biotechnology hub along Pyrmont Bridge Road. The proposed site uses would support the node contribute towards the identified agglomeration benefits.

The Place Strategy also notes an increasing need for health care services, in light of the new residents that will move to the area with surrounding urban renewal projects, notably PRCUTS. The proposal would assist in augmenting existing health care infrastructure (most notably, RPA Hospital, which the strategy notes will require additional capacity), in meeting this demand.



The site and surrounds lie within an area earmarked for significant change in urban form delivering increased density and enhancing Sydney's provision of health, education and employment floorspace. While industrial space is at a premium, it is noted that available spaces in the surrounds, like that on the site are not always fit for contemporary light industrial uses and subsequently have higher vacancy rates. As such the proposal has the potential to deliver a higher and better employment use for the site. The proposal may also stimulate additional industrial and business opportunities associated with the medical field.

The changes in controls align with the desired future character and strategic intent for the area as identified in the Place Strategy. The proposed uses align with the broader precinct vision of a world-class bio-tech medical hub. The proposal may help catalyse opportunity to achieve the vision, therefore contributing to significant social and economic benefits for the local and Greater Sydney community.

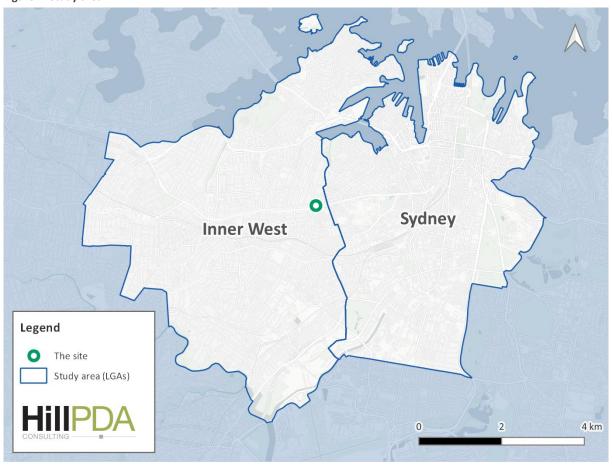


2.0 SOCIAL BASELINE

2.1 Study area

For the purposes of this SIS, the study area has been defined as the Local Government Areas (LGAs) of Inner West Council and the City of Sydney, as shown below in Figure 4. This broader study area has been selected with consideration of a potential local service catchment for a future private hospital.

Figure 4: Study area



Source: HillPDA (2021)

2.2 Social infrastructure

The following section provides an overview of the social infrastructure surrounding the site. This analysis is important as it identifies, not only facilities that workers, residents and visitors may rely on, but also potential land use conflicts. The following types of social infrastructure have been considered:

- Open space and recreation: Including active and passive recreation spaces
- Community and Culture: Libraries and community centres
- Health Care: local medical centres and practicians and hospitals
- Education facilities: Schools, universities, TAFEs





Figure 5: Social infrastructure surrounding the site

Source: ACARA (2020), MySchool Register; DPIE (2021), Places of Interest (GIS layer)

In the immediate vicinity of the site (500 metres), Figure 5 shows that there are over 20 items of identified social infrastructure:

- Eight child care facilities
- Two primary schools (a Public K-6 and a Catholic K-6)
- One special purpose primary school (K-6)
- Two parks: one suburban reserve with passive recreation and shade and a district serving park with a cricket pitch, passive recreation facilities and extensive active recreation facilities available for private hire
- Two community venues/meeting spaces
- One aged care facility.

The map shows that further afield there is a significant volume of existing health care infrastructure located in and around the grounds of Royal Prince Alfred Hospital. It is understood that physical and medical rehabilitation

The closest sensitive receivers that may be affected by activity on site are Bridge Road School, a special purposes primary school approximately 100 metres south east of the site, across Parramatta Road.



2.3 Community profile



At the 2016 Census, the usual resident population of Sydney and Inner West LGAs was **390,409** with an **average household size of 2.2**.



In 2016 the **median age** in the City of Sydney and Inner West LGA was 34, which was much younger than Greater Sydney, with 36 years.

4.3 per cent of people were **aged over 85**, compared to 2 per cent across Greater Sydney. Approximately 30 per cent of the residents were aged between 30 and 44 years old, significantly higher than Greater Sydney (23 per cent).



Approximately 3.4 per cent of residents (13,264) identified as requiring assistance with core activities, compared to 4.9 per cent across Greater Sydney (236,139 residents).



In the City of Sydney and Inner West LGAs in 2016, most households were composed of couple families without children (51.7 per cent of households), which, comparatively, made up only 35.3 per cent of households across Greater Sydney.



In 2016, 28.3 per cent of residents of the City of Sydney and Inner West LGAs had a **bachelor's degree level qualification** or above and 71.6 per cent of people aged over 15 years stated that their **highest level of educational attainment** was Year 12 (or equivalent). In 2016, 60.2 per cent of residents were attending an educational institution, of whom 40.3 per cent were **attending a university or tertiary institution**.



In the City of Sydney and Inner West LGAs, 66 per cent of residents reported being in the labour force in the week before Census night. Of those residents in the labour force, 5.5 per cent were **unemployed**.

More City of Sydney and Inner West LGA residents worked in **professional, scientific and technical services** than any other industry in 2016 (16 per cent). Other common industries were **health care and accommodation services** (10 per cent) and **education and training** (9 per cent).



On the day of the 2016 Census, 35.8 per cent of people travelled to work via car as a driver within the Inner West and City of Sydney LGA in comparison to Greater Sydney which most people travelling to work in a car as driver (56.6 per cent).



In 2016, 24 per cent of households reported an **income of \$3,000** or **more per week**, compared to 23.6 per cent in Greater Sydney. In the same period, 7.4 per cent of households reported a weekly income of \$650 to \$800, compared to 10.9 per cent in Greater Sydney.



The site is located within an SA1 with relatively low levels of disadvantage, ranking within the 20 per cent least disadvantaged SA1s nationally on the SEIFA Index of Relative Social Disadvantage. The SA1 is within the 10 per cent most advantaged SA1s nationally on the Index of Relative Social Advantage and Disadvantage.

Source: ABS Community Profiles (2016), ABS QuickStats (2016), ABS SEIFA indexes (2016).

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2.3.1 Demographic insight

- Overall, the Inner West LGA and City of Sydney have a younger median age (34) than Greater Sydney (36). The younger study area demographic is most pronounced in the young workforce service age group (25 to 34 years), which is a significantly higher proportion of the population (27 per cent) than Greater Sydney (16 per cent). This would indicate higher numbers of residents potentially engaged in study or young professional roles.
- Conversely, there is a lower proportion of older residents, with 10 per cent of residents aged 65 or older, compared to 14 per cent across Greater Sydney, potentially meaning there would be lower demand for specialised health services for older residents (e.g. palliative care).
- The significantly lower proportion of family households within the study area (54 per cent) compared to Greater Sydney (74 per cent) is primarily a result of a significantly higher volume of lone person (33 versus 22 per cent) and group households (13 per cent versus 5 per cent). Of the family dwellings, approximately 52 per cent were couples without children, which is a far more significant proportion of Greater Sydney (33 per cent). This indicates significant numbers of younger professionals without children, either living as family couples, or in lone or group households.
- The study area has generally better rates of employment, recording an unemployment rate of 5.5 per cent and a labour force participation rate of 66 per cent, both higher than Greater Sydney which recorded 6 per cent and 61 per cent rates, respectively. This may be indicative of better educated resident and/or better access to employment.
- Most employed residents within the study area worked in roles requiring higher levels of education and technical skill compared to the Greater Sydney average, with professionals (38 per cent) and managers (17 per cent) making up the largest two groups, both in significantly higher proportions than Greater Sydney (27 and 14 per cent, respectively).
- More study area residents worked in professional, scientific and technical roles (16 per cent, compared to 10 per cent across Greater Sydney). Health care and social assistance employed a slightly lower proportion of residents than the Greater Sydney average, with 10 per cent employed in such roles, compared to 12 per cent. The higher proportion of professionals and residents in related skilled occupations would benefit more from a private hospital, which would likely employ a higher proportion of white collar and technical staff. It may also indicate a higher proportion of shift workers in the surrounding residential dwellings who are potentially more sensitive to construction during standard business hours.
- The higher proportion of residents who prefer to travel to work via means other than a private vehicle would benefit from the location of more employment opportunities and services in the vicinity.



3.0 EXPECTED AND PERCEIVED IMPACTS

This section seeks to scope potential social impacts, whether expected or perceived, based on the findings of the previous chapters. Social impacts can involve changes to:

- Way of life
- Community
- Access to and use of infrastructure, services and facilities
- Culture
- Health and wellbeing
- Surroundings
- Personal and property rights
- Decision making systems
- Fears and aspirations.

For this statement, potential impacts arising from the construction and operation of the proposal have been scoped below.

Table 1: Identified potential social impacts

Impact category	Potential impact characteristic
Way of life	 Potential disruption to road and pedestrian traffic on Pyrmont Bridge Road during construction, potentially impacting surrounding residents, businesses and road users Loss of access to existing bulky goods retailers on site for surrounding community, requiring regular customers to potentially travel further for the previously provided services Improved convenience and amenity from the provision of additional health care facilities, particularly specialist facilities (x-ray, hydrotherapy, pharmacy) Increased demand for local social infrastructure from new workers on site during operation may affect access and availability.
Community	 Increased employment opportunities associated with construction and operation may provide opportunities for greater social cohesion Additional amenities to be provided on site (health infrastructure, associated café/retail) may improve social cohesion Concern from some community that may be against the area transitioning in line with the strategic planning intent.
Accessibility	 Potential congestion on surrounding road and main road networks from increased traffic during construction and operation due to main road interface Potential disruption to pedestrian and road access to properties on Cahill and Mathieson streets during construction Potential disruption to pedestrian thoroughfare along site boundary with Pyrmont Bridge Road during construction (possible change in route, possible loss or reduction in quality of footpath adjacent to busy road) Improved accessibility to health infrastructure for workers and residents over a wide catchment, with further potential benefits through agglomeration effects with nearby health and education services Potential long-term congestion impacts for residents and businesses on Mathieson Street and Cahill Street arising from vehicles accessing site (visitors, employees, deliveries).
Culture	 It is not foreseeable that any surrounding heritage items would be affected by the proposal.
Health and wellbeing	 Significant improvement to health and wellbeing to workers and residents over a wide catchment through added health care capacity in area, offered in a way that is complementary to existing health care infrastructure Loss of employment potentially increasing stress and anxiety for existing employees Health and well-being benefits associated with delivering more jobs close to residential

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Impact category	Potential impact characteristic	
	 Potential impacts arising from construction activity, which may particularly affect nearby sensitive receivers, including residences and businesses operating to the north and west of the site Improvements to health and wellbeing through additional employment opportunities on site, particularly for professionals and managers. 	
Surroundings	 Decreased amenity and aesthetic value during construction (dust, hoarding/scaffolding) Visual amenity benefits from the renewal of the area from older lower rise industrial to a revitalised mixed use employment and residential site that may help catalyse further investment and renewal Increase in development bulk and scale on site may result in overshadowing of some of the lower rise buildings, however this will change as the area transitions Improved safety for residents, workers and visitors through additional active frontages (Pyrmont Bridge Road and Mathieson Street) passive surveillance on Mathieson Street may result in Agglomeration and supply chain benefits associated with the catalysation of the bio-tech precinct. 	
Livelihoods	 Improvement in economic activity from increased employment on site during construction and operation Improved availability of jobs for professionals and related technical specialists over existing site use Additional expenditure from additional workers on site during construction and operation Potential loss of employment for workers currently employed at businesses on site Impacts of cost to existing businesses on site to relocate and re-establish elsewhere Potential disruption to and resulting loss of business for adjacent commercial and retail premises Supply chain benefits to surrounding businesses, who may relocate to the area and surrounds with agglomeration of services and medical land uses (e.g. medical manufacturing) Expenditure benefits to surrounding businesses from workers on site during construction and operation. 	
Decision-making systems	 Stakeholders affected by proposed works and activities (surrounding residents and businesses; staff and students at nearby school) may feel unable to influence the project and may come forward with queries or concerns about potential impacts. 	

3.1 Potential impact prediction and mitigation strategies

The following are mitigation strategies for the above impacts that should be considered as part of the detailed design phase:

- Preparation and implementation of a construction management plan to effectively mitigate potential amenity, health and wellbeing impacts arising from construction. This plan will coordinate vehicle movements, approved construction activities and times, as well as appropriate management strategies for managing any potentially hazardous or disruptive building materials (e.g. throws over exposed dusty materials, hoarding locations, construction noise management strategies). The plan should also include strategies to maintain access to surrounding properties and preserve pedestrian accessibility along site boundaries during construction
- Preparation of a noise management plan to devise design mitigation strategies to minimise impacts to surrounding residents and businesses during operation. These would be calibrated to comply with relevant noise control standards and may include strategies like management of activities on site to certain hours or building design noise mitigation solutions
- Preparation of light spill maps and appropriate design mitigations to mitigate light pollution impacts to surrounding residents, particularly at night
- Preparation of a traffic and transport impact assessment and management plan to ensure that road, public transport and pedestrian network function is not adversely affected by the proposal, particularly with reference to the performance of the intersection of Pyrmont Bridge Road and Parramatta Road, which is a major east-west thoroughfare. Appropriate contributions to local roads and transport may be considered to mitigate impact. A Green Travel Plan may also be considered to further minimise

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- congestion impacts through encouraging modal shift amongst employees and visitors to the site to active or public transport, which could also deliver health and wellbeing benefits for visitors and staff onsite
- Implementation of a community engagement strategy to ensure that surrounding businesses and residents are afforded input into the proposal from an early stage. This should include strategies for engaging with surrounding residents and businesses on Cahill and Mathieson Streets, adjacent businesses on Pyrmont Bridge Road and nearby potential sensitive receivers, most notably the Bridge Road School. This would include the identification of stakeholders to be engaged, the nominated engagement approaches for each group and relevant activities that would be trigger points for contact. The strategy would identify a nominated point of contact and a transparent process for the resolution of questions or issues.

4.0 CONCLUSION

This report has been prepared to accompany a Planning Proposal to enable the construction of a private hospital at an earmarked key site located at 122-130 Pyrmont Bridge Rd and 206 Parramatta Rd in Camperdown. The report provides a high level consideration of the site and surrounds, including an overview of nearby social infrastructure, potential sensitive receivers and salient demographic characteristics of the wider community.

The site is located in a transitioning urban area, identified for higher density mixed use development with a focus on knowledge-based industries, technology and, importantly, health care. The proposal to enable opportunity for a health care facility would be in keeping with the strategic intent for the area as outlined in PRCUTS and Camperdown-Ultimo Collaboration Area Place Strategy.

An additional and substantial health care offering, in the form of a specialist private hospital, would complement the vision for the area and create social benefits through improved access to services, a diversity of employment opportunities and the agglomeration benefits of catalysing the health and education precinct. While it does result in a loss of typical industrial land, which may cause some community concern, the proposed change would potentially stimulate broader industrial supply chain benefits in the surrounding area that can leverage off the new establishment.

The location of the site on a major arterial road and the type of surrounding receivers, may result in some negative, but manageable, impacts during construction. A range of management and mitigation strategies are proposed for further consideration at the detailed design phase. Subject to the particulars of the detailed design, a comprehensive review of social impacts may also be required at the DA phase. With appropriate mitigations in place the proposal would yield significant benefits to the surrounding area as a higher and better land use over existing site uses. Moreover, the proposal responds favourably to the future character envisioned under the Camperdown-Ultimo Collaboration Area Place Strategy and the PRCUTS Camperdown Precinct and Frame Area, contributing towards the establishment of a world class medical, research and education cluster.

The proposed planning control changes, to facilitate a specialist private hospital, would deliver long term benefits to the socio-economic environment. The adoption of mitigation strategies proposed above would effectively manage any potential impacts and maximise the potential benefits to the local and wider community.

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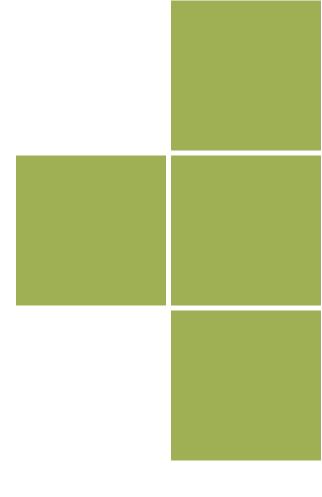
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Appendix 10 - Social Impact Statement





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