

to.

Coonamble Aboriginal Health Service
Cherie Forgione
48-50 Wingewarra Street
Dubbo, NSW 2830

date.

12.08.2024

reference.

43764-CL01_2

Dear Cherie,

Gilgandra Local Aboriginal Medical Service
72 Miller Street, Gilgandra
Preliminary Parking Summary Report

Reference is made to your request to provide preliminary advice with regards to parking requirements at the proposed medical centre at 72 Miller Street, Gilgandra.

1. Background Information

The proposed development is a relocation of the existing Gilgandra Local Aboriginal Medical Service centre.

1.1 Existing Medical Centre

The existing centre is located at 140 Warren Road, Gilgandra. It has 5x treatment rooms and does not provide any on-site parking. Surveys were conducted at the existing clinic over a two-week period to determine the number of patients and staff present at different times and inform the associated parking demand. The results of these surveys are summarised in Table 1.



Figure 1 Existing Medical Centre at 140 Warren Street
Source: Google Maps (2022)

1.2 Proposed Development

The proposed medical centre is located at 72 Miller Street, Gilgandra and consists of:

- 10x consultation/treatment rooms

- Associated front-of-house reception and waiting areas and back-of-house staff areas, storage and amenities
- A rear carpark with 10x staff parking spaces, 1x accessible space, and loading/ambulance dock
- 1x accessible parking space on the street frontage for patient use
- Approx. 375m² gross floor area (GFA)



Figure 2 Site of Proposed Medical Centre at 72 Miller Street
Source: Google Maps (2024)

2. Gilgandra Shire Council DCP Parking Requirements

From the Gilgandra Shire Council Development Control Plan (2011), Table 14-1, the parking requirement for a health consulting room is prescribed as 3 spaces per consultation or treatment room.

Since the proposed development includes 10 treatment rooms, this gives a requirement of 30 parking spaces.

With the proposed development providing 10 off-street parking spaces for staff, this would leave a shortfall of 20 spaces to be filled with on-street parking.

3. RTA Guide to Traffic Generating Developments

The RTA Guide to Traffic Generating Developments (2002) found high variability in traffic generation between different medical centres and was unable to provide a reliable prediction rate. It does suggest an apparent relationship between peak parking demand and GFA, with one space per 25 m², which in this case gives 15 spaces as the peak parking demand. With 10 proposed spaces at the rear carpark, this would leave a shortfall of 5 spaces to be filled with on-street parking.

The Guide also indicates that the average length of stay was approximately 27 minutes, indicating a high turnover of parking.

The peak trip generation suggested by the Guide is 10.4 vehicles/hour/100m² GFA. For the proposed development, this gives a peak trip generation of 39 vehicles/hour.

4. Trip Generation Surveys

Further to the RTA Guide’s findings above, additional surveys were conducted by RMS and described in the Trip Generation Surveys Medical Centres Analysis Report (2015). Once again, the studies found high variability of results, and some of the surveyed centres operate under very different conditions to the proposed development, including metropolitan environments or much larger service areas. However, the surveys found that the best predictor of parking demand was the number of treatment rooms in the medical centre.

This gives us the ability to estimate the proposed traffic demand based on demand at the existing clinic, by comparing the number of treatment rooms. Since the existing clinic has 5 rooms, and the proposed clinic has 10, we can multiply the observed number of visitors by 2.

Table 1 Summary of Visitors to the Existing and Proposed Medical Centres

| Average number of people present at the centre: | Existing Clinic (Observed) | Proposed Clinic (Predicted) |
|-------------------------------------------------|----------------------------|-----------------------------|
| Staff per day | 5 | 10 |
| Patients during the morning peak (10am-11am) | 5 | 10 |
| Patients during the afternoon peak (2pm-3pm) | 5 | 10 |
| Maximum total demand | 10 | 20 |

Therefore, based on the existing clinic’s parking demand, on average the proposed clinic’s rear carpark would provide sufficient parking for all staff, with up to 10 patients utilising on-street parking.

Furthermore, the existing centre currently operates a courtesy bus which transports approximately 4-5 patients per day. This service will be continued at the proposed centre and reduce the parking demand from patients.

5. National Construction Code

The rate for provision of accessible parking spaces is given by the National Construction Code, Table D3.5. For a clinic not forming part of a hospital, the applicable rate is 1 accessible space for every 50 carparking spaces or part thereof, which is achieved by the proposed carpark arrangement.

6. State Environmental Planning Policy

Since the proposed development has a frontage to Miller Street, being a state classified road, the State Environmental Planning Policy (Transport and Infrastructure) (NSW Government, 2021) (the SEPP) is applicable to determine whether the development is to be referred to Transport for NSW (TfNSW).

With reference to Clause 2.119 (2) of the SEPP:

- (a) Vehicular access is provided by Lower Castlereagh Street, not Miller Street

- (b) The safety, efficiency and ongoing operation of the classified road will not be adversely affected by the development of–
- i. The design of the vehicular access to the land, since the driveway is via Lower Castlereagh Street and not Miller Street
 - ii. The emission of smoke or dust from the development, since this is not associated with the proposed medical centre operation
 - iii. The nature, volume or frequency of vehicles using the classified road to gain access to the land, as assessed under Clause 2.122 below, and
- (c) The development is appropriately located and designed to ameliorate potential traffic noise or vehicle emissions arising from Miller Street, by containing all operations within the building.

With reference to Clause 2.122 (2) of the SEPP:

Since the purpose of the development is not specifically listed, the requirements for “any other purpose” with access to a classified road apply, being 50 or more motor vehicles per hour. From Section 3, the estimated peak traffic generated by the site is 39 vehicles per hour, which is under the threshold. Therefore, referral to TfNSW is not required.

7. Other Factors

While the proposed development does not strictly meet Council’s parking requirements, it is in the best interest of the local community and especially the local Aboriginal community. Additional factors to be considered in assessing the parking shortfall include:

- Provision of additional off-street parking is not feasible on this site, due to the existing building and carpark layouts, and the need to separate back-of-house activities from the public.
- Some patients will access the centre through means other than private vehicle, such as the centre’s courtesy bus or by foot, which will reduce the parking demand from the figures estimated above.
- The central location of the proposed medical centre and activation of the street front will encourage pedestrian activity and benefit nearby businesses.
- Street parking on Miller Street is ample, and the impact of the parking demand and length of stay associated with the proposed medical centre will be negligible. Figure 1 above illustrates the negligible parking demand generated by the existing medical centre while Figure 2 demonstrates the abundance of street parking availability at the proposed site.
- Miller Street is mainly occupied by commercial and retail uses, and additional demand on street parking will not be at the expense of local residents.

Should you have any further enquiries regarding this matter, please contact the undersigned.

Yours faithfully,

BARNSON PTY LTD



Eden Knespal
Civil Engineer