

**From:** "Erin Brooks" <ebrooks@urbis.com.au>  
**Sent:** Thu, 18 Jun 2026 21:41:59 +1000  
**To:** "Kate Wilkes" <Kate.Wilkes@townsville.qld.gov.au>; "Development Assessment" <developmentassessment@townsville.qld.gov.au>  
**Cc:** "Rauha Firaq" <rfiraq@urbis.com.au>  
**Subject:** Information Request Response MCU26/0030 - 37 Ingham Rd, West End  
**Attachments:** LTR\_P0064657\_Information Request Response\_V1\_260618.pdf, Appendix A - 26.122r03v02 TRAFFIX Weststate Private Hospital, Townsville - TIS.pdf

Good evening Kate

On behalf of *CHPF South Bunbury Pty Ltd* (the Applicant) and in accordance with Section 13.2 (a) of the *Development Assessment Rules*, please find **attached** our response to the Information Request for MCU26/0030.

The Applicant will now proceed with the required actions to formally commence public notification.

If you have any queries, please do not hesitate to contact either myself or Rauha.

Kind regards,

**Erin Brooks**

*Associate Director*

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for a changing world.



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18 June 2026

The Assessment Manager  
Townsville City Council  
PO Box 1268  
Townsville QLD 4810

**Attention:** Kate Wilkes

**Delivery via email:** [kate.wilkes@townsville.qld.gov.au](mailto:kate.wilkes@townsville.qld.gov.au)

Dear Kate,

## **Response to Information Request – 37 Ingham Road, West End QLD 4810 (Council Ref.: MCU26/0030)**

*Urbis Ltd* continue to act on behalf of *CHPF South Bunbury Pty Ltd* (**the Applicant**) in relation to the abovementioned development application to change the current approval over the site. This correspondence constitutes the Applicant's full response to the information request issued by Council on 12 May 2026 for the development application in accordance with Section 13.2 (a) of the *Development Assessment Rules (DA Rules)*.

This response is accompanied by the following supporting information:

- **Appendix A** – Traffic Impact Statement, prepared by *Traffix*.

Each item from Council's Information Request has been outlined below (*in italics*) along with the respective comments and responses to each item.

### ***Item 1 – Traffic Impact Assessment***

*A new Traffic Impact Assessment (TIA) report certified by an RPEQ is requested in support of the proposed change. The TIA should utilise up-to-date traffic counts and be prepared in accordance with SC6.4.5.2 Traffic impact assessments (TIA) of the Townsville City Plan. The TIA must identify if any upgrades and/or modifications are required to the external road network to accommodate the additional vehicle movements anticipated to be generated by the proposed change.*

#### ***Reason***

*To demonstrate compliance with Performance Outcome PO1 of the Transport, impact, access and parking code.*

#### ***Advice***

- a) The submitted Traffic Impact Statement refers to a previous TIA by Premise (report no. GRI001/R01, revision A dated 15 February 2017), which is over 9 years old at the time of writing. SC6.4.5.2(3)(a)(iv) of the Townsville City Plan states that "any traffic study may also need to be revised if the study is older*

than 2 years and Council determined that the existing conditions have changed enough to invalidate the study results”.

- b) Townsville City Council's Traffic Calibration Model may be used to inform the TIA. The model data can be viewed at the following link: <https://data.gov.au/data/dataset/tcc-traffic-calibration-model-2025>
- c) The proposal would likely trigger the need for a Moderate level TIA report per Table SC6.4.5.2 of the Townsville City Plan.

## Response

In the first instance, the Applicant acknowledges Council's concerns on the potential for additional traffic generation resulting from this Other Change application. We understand that consideration to traffic impacts on the broader network is an important aspect of ensuring the development continues to function safely and efficiently within its context.

However, it is noted that the nature of this application in an Other Change and therefore should be assessed in the context of the existing development approval (Council Ref.: M117/0007) (**Original Approval**). The Original Approval was supported by a Traffic Impact Assessment which was endorsed by Council. It is also noted that the previous traffic report calculated traffic generation on the total floor area of the hospital rather than the number of hospital beds provided. The proposed addition of 28 hospital beds in this application is understood to be a marginal increase to the approved development over the site, and does not alter the fundamental nature, scale or intensity of the development to the extent that would otherwise trigger the need for a new or updated Traffic impact Assessment. On this basis, the proposed change is unlikely to give rise to any new or worsened traffic impacts or necessitate external road upgrades or infrastructure works.

The originally approved development has been largely constructed on site, including the delivery of most of the works required to the external road network as part of the original conditions of approval. The proposed change maintains the approved 103 car parking pays provided on site, as well as the two access points to the site from O'Brien Street and Ingham Road. The retention of the existing traffic arrangements, access points and operational characteristics are therefore already established and set to function as approved, further supporting the view that a new Traffic Impact Assessment is not warranted in this instance.

The outstanding upgrades to the external road network are on track for completion prior to the commencement of the use, inclusive of the proposed changes outlined by this application. No additional external works are understood to be required as part of the proposed increase to hospital beds within the existing built form.

Accordingly, a new Traffic Impact Assessment is not necessary to assess the proposed Other Change, which can be appropriately determined having regard to the existing approval. This is further supported by a supplementary Traffic Impact Statement prepared by the Applicant's traffic engineers, *Traffix*, included in **Appendix A** of this correspondence.

We trust that this response suitably addresses Council's concerns raised in **Item 1** of the Information Request.

### **Item 2 – Carparking**

*The applicant is requested to provide an updated car parking assessment (within the new TIA) to include the approved Health care services, Shop and Food and Drink Outlet.*

**Reason**

*To demonstrate compliance with Performance Outcome PO17 of the Transport impact, access and parking code and to allow a comprehensive assessment of the anticipated parking demand.*

**Advice**

*As part of the response, the applicant is requested to confirm whether the proposed Shop (Pharmacy) and Health care services (Pathology etc), as mentioned in the application material will be open to the public.*

**Response**

In response to **Item 2** of Council’s Information Request, the Applicant emphasises the intention of the proposed development to function as a holistic facility for healthcare services within Townsville. Specifically, the proposed Shop (Pharmacy) and Health Care Services (Pathology etc.) are intended to serve an ancillary function to the hospital. It is not anticipated that these ancillary aspects will be used independently or attract patronage exclusive of the scope of the approved hospital.

Performance Outcome PO17 of the Transport impact, access and parking code states the following:

**“PO17**

*Provision is made for on-site vehicle parking to:*

- (a) Meet the demand likely to be generated by the development; and*
- (b) Avoid on street parking that would adversely impact on the safety or capacity of the road network or unduly impact on local amenity.”*

The proposed change maintains the approved 103 car parking spaces onsite and is understood to be suitable for the intended use and achieve compliance with Performance Outcome PO17 as follows:

- **Nature of operations** – The previous traffic statement assessed the parking requirement to be 143 parking spaces, based on the rates prescribed by the *Townsville City Plan (City Plan)*, assuming all 100 staff and 20 doctors are on-site simultaneously. The Weststate Private Hospital, however, is intended to operate 24 hours via a 3-shift model. The operational peak of employees at any given time (including during shift overlaps) is a maximum of 70 staff, which has been assessed in the updated Traffic Impact Statement provided in **Appendix A**;
- **Patients and Visitors** – Combined with the expected number of patients and visitors to the site at any given time peaking at 22 during the day shift, the Applicant’s traffic engineers conclude that at no point does the parking demand exceed the available 103 parking spaces (see **Appendix A**). This is also consistent with the operational nature of a hospital, where the majority of patients require overnight accommodation as part of their care; and
- **Traffic Generation** – The anticipated traffic generation by the proposed increase in hospital beds is not expected to result in a significant increase to that already contemplated for the site by previous Traffic Impact Assessments (see **Appendix A**).

The operational peak demand anticipated for the site requires approximately 65 parking spaces, resulting in a consistent surplus of approximately 13 spaces at any given point. The proposed 103 car parking spaces

maintained by this current application therefore achieves compliance with the relevant requirements of Performance Outcome PO17.

We trust that this response suitably addresses Council's concerns raised in **Item 2** of the Information Request.

### **Summary**

This correspondence constitutes the total extent of the Applicant's response to the information request made by Council in accordance with section 13.2(a) of the DA Rules. We ask that Council progress the assessment of the application on that basis.

If you have any questions regarding the above or attached material, please do not hesitate to contact the undersigned or **Rauha Firaq** (Consultant) on (07) 3007 3800.

Yours sincerely,

A handwritten signature in black ink, appearing to read "Erin Brooks". The signature is stylized and cursive.

Erin Brooks  
Associate Director  
+61 7 3007 3514  
ebrooks@urbis.com.au

# **Appendix A – Traffic Impact Statement**

Reference: 26.122r03v02

17 June 2026

Centuria Property Fund Limited  
Level 41, Chifley Tower, 2 Chifley Square  
Sydney NSW 2000

Attention: Sai Sooriakumar, Assistant Development Manager

**Re: Weststate Private Hospital, Townsville – Proposed Increase in Bed Capacity  
Traffic Impact Statement**

Dear Sai,

TRAFFIX has been commissioned to assess the traffic and parking impacts in support of a Development Application (DA) for the proposed increase in bed capacity at the approved Weststate Private Hospital located on the northwest corner of Ingham Road / Sturt Street intersection. The proposed development seeks approval to reconfigure level 4 of the building to accommodate 28 additional beds. The subject site is located within the Townsville City Council (TCC) Local Government Area and has been assessed under that Council's controls.

This statement documents the findings of our investigations and should be read in the context of the accompanying Planning Report, prepared separately.

## ➤ Current Development Status

Council approved the original application by way of Decision Notice on 20 December 2017 (Council Ref.: MI17/0007 and AP18/0001.02). The approval was subsequently appealed by a submitter. The appeal was dismissed via Planning and Environment Court Judgement on 27 February 2020, with the application being ultimately approved via Consent Order (P&E Court Ref.: 13/18). Shortly after, minor changes to the development approval were approved by way of Consent Order via Planning and Environment Court Judgement dated 19 January 2021 (P&E Court Ref.: 176/20) and 11 December 2023 (P&E Court Ref.: 155/23).

The approval involves the construction of a multidisciplinary hospital providing an entry foyer, food services, radiology, PACU, theatres, recovery, CSD, day unit, admissions, administration, cath labs, cardiology consulting, 22 IPU beds, and 4 ICU/CCU bays. Central to the upgrade also includes refurbishment of an existing heritage building which aims to provide ancillary services to the main development including but not limited to administration, back of house, consulting, pharmacy, pathology, staff education, research, staff, and dining lounge.

It is further understood that construction works has commenced on site and the approved development is currently mostly complete and close to occupation.

➤ **Description of Proposed Development**

A detailed description of the proposed development is provided in the accompanying Planning Report prepared separately.

In summary, the application seeks approval to reconfigure level 4 of the building to accommodate 28 additional beds, increasing the total bed capacity from 22 to 50. The proposal will also result in an up to 70 hospital staff at any one time with up to 30 nursing staff, 25 support staff and 16 doctors between 7am and 3pm as shown in **Table 1** below. All previously approved ancillary services to the main development will also remain unchanged.

**Table 1 – DCP Car Parking Rate and Provisions**

Type	Day Shift (7am-3pm)	Evening Shift (3pm-11pm)	Night Shift (11pm-7am)
Nursing Staff	27 – 30	16 – 22	10 – 11
Support Staff	25	7	2
<b>Total Staff</b>	<b>52 – 54</b>	<b>23 – 29</b>	<b>12 – 13</b>
Doctors	12-16	4 – 7	0 – 1
<b>Total On-Site</b>	<b>64 – 70</b>	<b>27 – 36</b>	<b>12 – 14</b>

All off-street car parking areas, vehicular access arrangements, and loading and servicing provisions are to remain in accordance with the current approval.

➤ **Car Parking Requirements**

The statutory car parking requirements applicable to the subject development have been established with reference to the Traffic and Transport Impact Assessment prepared by Calibre (herein referred to as 'Calibre TIA'), as endorsed by the court (No. 155 of 2023) and are consistent with the current Townsville City Plan (Version 2025/01). A summary of the applicable statutory car parking requirements for the modified development is set out in **Table 2**.

**Table 2 – DCP Car Parking Rate and Provisions**

Type	Approved	TCC Provision Rate	Parking Required	Proposed Provision
Public	50 beds	1 per 4 beds	13	103
Staff	54 staff	2 per 3 staff	36	
Doctors	16 doctors	1 per doctor	16	
<b>Total:</b>			<b>65</b>	<b>103</b>

It can be seen from **Table 2** that the proposed development is nominally required to provide a total of 65 car parking spaces. In response, the development will retain the approved provision of 103 car parking spaces, thereby satisfying TCC parking requirements.

It is also noted that the site is conveniently located within approximately 350 metres of bi-directional bus stops at the Ingham Road–Church Street intersection and is well serviced by existing pedestrian and cycling infrastructure. This provides staff and visitors with a range of convenient travel options in addition to private vehicle use.

## ➤ Traffic Impacts

The traffic generation for the 2020 approved development was assessed in the Traffic Impact Assessment prepared by UDP (herein referred to as the 'UDP TIA'), dated 15 February 2017. The report determined the following traffic generation across the three (3) peak periods:

- 136 vehicle trips per hour during the morning peak hour;
- 200 vehicle trips per hour during the site peak hour; and,
- 167 vehicle trips per hour during the evening peak hour.

It is noted these rates were based on the development gross floor area rather than the number of beds and therefore with no increase in GFA the above rates would not increase. The above rates were modelled in SIDRA for each of the peak periods and the development was subsequently approved. As such, the impacts are considered supportable based on the previous approval.

For the 2023 approval Calibre TIA re-examined the traffic generation data for nine (9) hospital sites with less than 200 beds, and identified the following average trip generation rate in Section 5.4 of the report as endorsed by the court (No. 155 of 2023):

- AM Peak Hour: 2.78 peak hour vehicle trips per hospital bed; and,
- PM Peak Hour: 1.02 peak hour vehicle trips per hospital bed.

Application of the above trip rate to the proposed 50 hospital beds in total (+28) outlined in the development proposal will result in the following traffic generation estimate:

- AM Peak Hour: 139 vehicle trips per hour; and,
- PM Peak Hour: 51 vehicle trips per hour.

As such, the projected increase in traffic generation associated with the proposed development has already been adequately assessed in the UDP TIA.

On the basis of the previous assessments and noting the court's prior endorsement of the current development approval for 22 hospital beds, the proposed development with 50 beds is expected to operate satisfactorily and in accordance with its current development consent. Therefore, the increase provision of beds does not necessitate any further upgrades to the surrounding road network from the current approval.

## ➤ Conclusion

On the basis of the above, the proposed increase in bed capacity at the approved Weststate Private Hospital from 22 beds to 50 beds in our view is considered supportable for a traffic engineering perspective.

We trust the above is of assistance and request that you contact the undersigned should you have any queries or require any further information. In the event that any concerns remain, we request an opportunity to discuss these with Council officers prior to any determination being made.

Yours faithfully,

**Traffix**



Hayden Dimitrovski  
**Senior Engineer**