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Government

Single Assessment Framework (SAF)

Business Case

Tier 1 (over \$50 million or High Risk)

Tier 2 (\$10 million to \$50 million)

Project Name:	HEA CW01 - Canberra Hospital Master Plan – Phase 2 implementation
Total Project Value (estimated):	TBC
Capital Appropriation Requested:	
Project Stage:	Design
Project Value:	
Risk Assessment (high/med/low):	
Proposed Delivery Model:	
Requesting Directorate:	ACT Health
Requesting Minister:	Rachel Stephen-Smith MLA
Business Case Advisors:	N/A

NOTE: This template should be completed using the accompanying SAF Business Case Guidance Notes.

Contact Officers

Contact Officer, Requesting Directorate

Liz Lopa

Reviewing Officer, Major Projects Canberra (MPC):

Reviewing Officer, Treasury:

Sign Offs

Requesting Directorate:

Document in order to proceed

Major Projects Canberra (MPC):

Document in order to proceed – MPC Sign-offs complete

Treasury:

Document in order to proceed – CMTEDD Sign-offs complete

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1. Executive Summary

1.1 Statement of Need

Cabinet has agreed to the Canberra Hospital Master Plan as the guiding approach to reforming the campus's ageing assets over the next 20 years (www.health.act.gov.au/about-our-health-system/planning-future/canberra-hospital-master-plan). Phase 2 of the Master Plan involves the design work and detailed costings on three new buildings: Pathology and two new inpatient buildings, and the associated staging and decanting strategy to ensure ongoing operation of the hospital. These projects are critical to realise the Master Plan, remove risk related to the aged asset base for patients and staff and respond to climate change targets. Modern facilities will improve working conditions for healthcare professionals in addition to enhancing the healing, wellbeing and improved experience for patients, families, and visitors

1.2 Delivery Model

ACTHD, CHS and MPC will commission consultants to undertake the design, scoping and planning work for the items in this business case. As part of this planning work, the delivery models for the construction projects themselves will be considered and finalised.

1.3 Funding Approval Sought

1.3.1. Type of funding sought

- ☐ Feasibility*
- ☒ Concept design
- ☒ Detailed design (note only where D+C has been justified)
- ☒ Full Business Case
- ☐ Delivery/Construction

1.3.2. Cost Estimate



Further information at [Attachment B and C](#)

1.3.3. Payment Stream (PPP/DCMO only)

N/A

1.3.4. Incremental Procurement/Transaction Costs

N/A

1.3.5. Contingencies Included

Contingencies are included in the cost estimates.

1.4 Treasury Budget Summary

Funding Category: *Feasibility Study / Concept or Forward Design / Design / Construction / Plant and Equipment / Information and Communication Technology*

Preliminary Financial Impacts Summary

Financial Impact	2022-23 \$m	2023-24 \$m	2024-25 \$m	2025-26 \$m
Requested Funding				
- Recurrent (GPO / EBT)				
- Capital Injection				
Other Recurrent Impact (not funded)				
- Depreciation				

** Although feasibility studies may be funded through the Capital Works Program, they are expensed in accordance with ACT Treasury's Accounting Policy guideline for capital works. Therefore appropriation for feasibility studies is provided as GPO. For further information: please contact your directorates Strategic Finance area or the Finance and Budgets officer.*

Staffing Impacts Summary

Impact	2022-23	2023-24	2024-25	2024-25
Total Additional FTEs				

2. Project Outline**2.1 Description of the Project****2.1.1. Overview**

This business case proposes to commence works that support five critical projects and associated planning from Phase 1 and one critical project from Phase 2 as identified in the Canberra Hospital Master Plan. The Master Plan provides guidance and advice on dependencies for staging of works. With Cabinet Agreement of the Master Plan in 2021, there are critical timing imperatives to progress the Master Plan, including building demolition, in a way that is complementary to the design teams and construction timeframes of the Canberra Hospital Expansion Clinical Services Building.

2.1.2. Scope of works

The remaining scope of works for Phase 1 which will be completed as part of this business case is as follows:

1. Design and fit-out of the planned 'shell space' inpatient units (64 beds) in the Canberra Hospital Expansion Clinical Services Building;
2. Design work and detailed costings (proof of concept and detailed design) for a Pathology building, proposed to be built on the site of the existing building 6, including;

- a. Demolition of Building 6 and remediation of the site
3. Design work and detailed costings (proof of concept and detailed design) for the Inpatient Building (one of two new buildings to replace the inpatient facilities in Building 1), proposed to be built on the site of the existing Building 4, including:
 - a. planning for demolition of Building 4
4. Public realm and wayfinding upgrades to support integration of the Clinical Services Building with the campus and respond to community feedback through the Master Plan consultation;
5. A staging and decanting strategy to allow patient, staff and teaching partner services to operate during construction of the above projects.

The business case also provides for necessary underpinning work to support these and future projects:

- Planning work on the upgrades needed to essential infrastructure (electrical, communications, gas, water) to facilitate the new buildings (ensuring that future business cases can confidently assure that service capacity available or required, including support for the campus to move away from gas to electricity);
- Project management staff located within CHS to manage and deliver the above projects. These projects provide for significant consultant and contractor management and engagements and cannot be undertaken within current resources available for managing CHS capital infrastructure.
- Funding for a consultant to prepare a Tier 1 business case for the 2024-25 Budget that will seek funding for the construction of the three new buildings, based on the costing work undertaken in the coming 12-18 months.

The scope of works for Phase 2 of the Master Plan, is as follows:

- Design work and detailed costings (proof of concept and detailed design) for the second Inpatient building (the other new building to replace the inpatient facilities in Building 1), proposed to be built on the site of the existing Building 10 including:
 - planning for demolition of Building 10 (the current pathology building)

2.1.3. Scope of services

This business case will commission the preparatory work to provide the detailed scope, costings and timelines sufficient for a Tier 1 business case that seeks funding for the construction, fit out and commissioning of the three new buildings, and enabling works (services upgrades; staging and decanting; project management staff).

2.1.4. Project Assumptions and Dependencies

This business case has the following assumptions and dependencies:

- The project is funded in 2022-23 and 2023-24 to the extent that the proposed timetable for construction (i.e. construction funding is received in the 2024-25 Budget) of new buildings is able to be met;
- The proposed clinical scope can be delivered as planned;
- Budget constraints do not result in major departures from the scope of the planned new builds;
- Agreement is reached with the ANU – the current occupant of building 4 – about a new location for the ANU Medical School;

- The demolition of Building 6 prior to the opening of the CSB significantly decreases the impacts of noise, service interference, dust, asbestos, services isolations and planning reputational risk related to opening of the CSB;
- The critical development pathway has been based on the Master Plan endorsed by Cabinet, which was the subject of thorough internal and external consultation; and
- Agreement is reached with Healthscope (owner of the National Capital Private Hospital) on whether and how it can expand its physical presence on the Canberra Hospital campus – noting this is desirable but not strictly necessary.

Review 1 (MPC): Status of Functional Brief/Output Specification

- A key output of this work will be the development of a Functional Brief. This will be developed in collaboration with, and returned to MPC to complete Section 2.2 later in 2022 subject to the business cases being approved

Sign off that the functional brief/output specifications are sufficiently progressed in order to go to market under the delivery model selected and within the procurement timeline outlined in the business case. Attach the Functional Brief at **Appendix A**.

Review 1 (MPC) Officer Name: _____

Signature: _____

Date: _____

- *This is the first review point for MPC and is an assessment of the status of the functional brief/output specification.*
- *Sign off should only occur if the MPC officer is confident that the functional brief/output specifications are sufficiently progressed in order to go to market under the delivery model selected, and within the procurement timeline outlined in the business case.*
- *Risk workshops and quantification of project risks is mandatory for Tier 1 and 2 projects.*

Disclaimer: This review does not represent an endorsement or agreement by the signing officer as to the contents of the section or a certification that the work was correctly performed.

3. Needs Analysis

☐ Has an Investment Logic Workshop been undertaken?

An ILW has not been undertaken for this Business Case. The agreed Canberra Hospital Master Plan has detailed the clear need for the projects and the benefit to Government.

3.1 Problem

The Canberra Hospital is the largest public hospital and tertiary referral centre in the region. Demand for health services is projected to rapidly increase over the next 15 years and beyond.

Many of the assets at the Canberra Hospital have been operational since the hospital opened in 1973, are not suitable for modern healthcare delivery and are at, or beyond, the end of useful life. As the infrastructure continues to age these buildings are unable to

cater for current services nor future growth and the associated maintenance costs and risks increase.

The Master Plan was agreed by Government to guide the development of the Campus over the next 20 years. This business case supports the implementation of the Master Plan in a timeframe consistent with the operational needs of the campus, including the opening of the CSB and responding to ageing infrastructure requirements.

3.2 Benefits

3.2.1. Benefits to be delivered

The benefits are:

- Future proofing the ACT's health system and the services provided at the Canberra Hospital;
- Avoiding existing buildings becoming inoperable, in particular ensuring floors 3-11 of Building 1 are decommissioned before reaching critical stage of infrastructure deterioration;
- Meeting the increasing demand for health services;
- Reducing the ACT Government emissions and design and construction of sustainable buildings with associated cost benefits;
- Modern facilities to enhance the healing, wellbeing and improved experience for patients, families and better working conditions for healthcare teams;
- Contemporary, resilient and adaptable infrastructure to meet future demands.

3.2.2. Importance of the benefits for Government

Patient, staff and visitor safety – no disruption to clinical service delivery

The Master Plan achieves the redevelopment of aged buildings with little clinical disruption on the operating hospital campus. The Master Plan presents the opportunity to strategically redevelop assets before they fail, risking public health service delivery, patients and staff.

Responding to demand

Without the implementation of the Master Plan, Canberra Hospital will not be able to respond to the rise in demand for healthcare. The campus is crowded and unable to grow further.

Cost Saving

Without implementation of the Master Plan and development of new infrastructure, CHS will have escalating costs associated with maintaining existing ageing infrastructure. Cost savings related to the ongoing maintenance and repair of the ageing asset base can be achieved through the building of new infrastructure that considers the modern and sustainable methods available. This allows the ACT Government to meet the vision for a public health system that is accessible, accountable, and sustainable; and deliver efficiencies in health service delivery to meet future demand.

Sustainability

The Climate Change Strategy commits the Government to a zero-emission health sector by 2040. The Master Plan sets out a pathway for the Canberra Hospital to become zero emission – through the construction of new all-electric buildings or retrofitting existing

buildings to remove gas power. This pathway has commenced with the all-electric Critical Services Building.

3.3 Options Analysis

3.3.1. Strategic Solutions Analysis

Option 1 (preferred):

Implement the Cabinet endorsed Master Plan approach with those projects identified as critical in the Master Plan covered in this business case. This option was extensively tested during the development of the Master Plan and represents the optimal pathway to maintain services and decrease risk associated with ageing infrastructure. In practical terms, work to date has demonstrated there are no further 'interim' solutions available.

There is high confidence in the capacity of the project to expend the projected costs, [REDACTED] of the total costs to be expended through a contract with an existing contractor provider to fit out the Critical Services Building inpatient unit shell space. A further significant portion of the proposed funding is consultant related with no proposed construction. This approach provides CHS, MPC and ACTHD confidence that the supply chain issues experienced through COVID-19 will not impact on the capacity to have the project completed in the identified timeframes.

Option 2:

Fund critical maintenance only – as per the separate business case that CHS has submitted for an annual increase for recurrent BIF funding. Noting that this does not address the substantial risks associated with ageing infrastructure nor provide any extra capacity to meet public health demand.

Option 3:

Do nothing and continue at current levels of R&M and BIF. This presents significant ongoing risk regarding end-of-life infrastructure and ability to deliver contemporary healthcare.

3.3.2. Recommended Strategic Solution

Option 1. This option will deliver the needed Pathology building at a critical juncture of the Canberra Hospital Expansion project, address multiple community wayfinding concerns and ensure sufficient future space for new beds in new buildings. This will allow the decommissioning of the inpatient floors of Building 1 before it becomes inoperable, and sufficient patient and staff capacity for the duration and beyond the life of the Master Plan. This approach aligns with the strategic planning of the Master Plan and recognises the interdependencies of each project.

Options 2 and 3 would not address the ageing infrastructure on the hospital campus, nor provide the capability to provide additional modern IPU capacity. It would not implement the Master Plan as agreed by Cabinet.

3.3.3. Project Solutions Analysis

The solutions outlined in this business case are the result of extensive planning and consultation undertaken during the Master Plan. ACTHD, CHS and MPC, in conjunction with the consultant, explored numerous different options for the campus over the medium- and long-term. In short, the major next steps in this business case are the only option that realises the development of sufficient inpatient space to allow for the timely future decommissioning of Building 1.

3.3.4. Base Case

The base case option does not implement the Master Plan as agreed by Cabinet and is to continue undertaking reactive R&M on existing buildings and continue the existing program of proactive minor upgrades. In 2019, the UMAHA project was funded. This project was intended to extend the life and improve the operational efficiency of existing hospital assets. UMAHA has enabled existing assets to continue providing services. However, even with the increased level of capital funding from UMAHA, buildings at Canberra Hospital are reaching a critical state.

Continuation of the existing capital and BIF upgrade program will not be sufficient to enable the inpatient wards of Building 1 to continue operating beyond 2026. There are no further 'interim' solutions available. UMAHA has served to extend the life of existing assets on the Canberra Hospital campus. However, the buildings are now at a stage where asset upgrades are no longer feasible or cost effective.

3.3.5. Recommended Project Solution

The recommended solution is to fund design of three new buildings and associated enabling works and projects (new staff, staging and decanting strategy, services infrastructure) in line with the agreed Canberra Hospital Master Plan.

3.4 Review 2 (CMTEDD): Needs Analysis

Chief Minister, Treasury and Economic Development Directorate to sign off that a case for the project is present in the business case.

Review 2 (CMTEDD) Officer Name: _____

Signature: _____

Date: _____

- *This is the first review point for CMTEDD and is assessment of the needs analysis.*
- *Sign off should only occur if the CMTEDD officer is confident that the needs analysis is robust, is based on evidence of an Investment Logic Workshop (ILW) has been undertaken (if applicable).*
- *Note that Tier 1 business cases anticipate review and signoff by the Senior Executive.*

Disclaimer: This review does not represent an endorsement or agreement by the signing officer as to the contents of the section or a certification that the work was correctly performed.

4. Cost & Contingency

[illegible]

[REDACTED]

[REDACTED]

[REDACTED]

4.2.2. Delivery Model Contingency

N/A

4.3 Whole of Life

N/A

4.4 Budget / Funding Strategy

[REDACTED]

5. Economic Analysis

5.1 Cost Benefit Analysis (or 5.3 Cost Effectiveness Analysis)

N/A for this stage of the project.

*a cost effectiveness analysis can be undertaken as an alternative, only on agreement by Treasury

5.2 Wider Economic Benefits (*Tier 1 Only*)

[REDACTED]

6. Delivery Model Analysis

6.1 Outline of Key Risks

The projects in this business case are each low risk. The funding sought in this business case for the early design and planning work on Phase 2 of the Master Plan will examine the risks – in terms of cost, constructability, timing and clinical scope for the new buildings

– in detail. These risks, and mitigation strategies, will be presented in the business case for the 2024-25 Budget.

6.2 Commercial Principles

N/A at this stage of the project.

6.3 Delivery Model Assessment

N/A

6.4 Recommended Delivery Model

N/A

6.5 Review 3 (MPC): Delivery Model Selection

Major Projects Canberra (MPC) to sign off that the delivery model selected is appropriate for the project risk profile and value.

Review 3 (MPC) Officer Name: _____

Signature: _____

Date: _____

- *This is the second review point for MPC and is an assessment of the delivery model analysis.*
- *Sign off should only occur if the MPC is confident that the delivery model selected is the most suitable to the project requirements and level of risk.*

Disclaimer: *This review does not represent an endorsement or agreement by the signing officer as to the contents of the section or a certification that the work was correctly performed.*

7. Financial Analysis (PPP and DCMO only) Tier 1 Only

N/A

8. Project Governance

A Project Control Group, led by ACTHD, will be implemented consistent with the Capital Framework. Key members of the Steering Committee will be CHS, MPC and CMTEDD.

9. Stakeholder Engagement Plan (Tier 1 Only)

9.1 Stakeholder Identification

The following key stakeholders are proposed to be consulted during the delivery of this business case:

- Patients – represented by Health Care Consumers Association and other peak groups;
- Canberra Hospital staff;
- Garran residents including Garran Primary School;
- Woden Valley Community Council;
- Australian National University (ANU); and
- National Capital Private Hospital (Healthscope).

9.2 Stakeholder Involvement & Interest

The stakeholders listed in Section 9.1 were involved in extensive consultation about the Canberra Hospital Expansion project and the Master Plan. Internal stakeholders will be consulted on each of the individual projects in this business case, as applicable.

9.3 Stakeholder Engagement Plan

External stakeholders with the exception of ANU and Healthscope will be consulted about the three new buildings in a single consultation process, to ensure these groups are presented with the holistic plan for the coming 1-5 years of development on the hospital campus. A stakeholder engagement plan will be further developed during the production of the Tier 1 business case for the 2024-25 Budget.

10. Advisor Engagement Plan (*Tier 1 Only*)

N/A

11. Timeline

11.1 Project Timetable

11.1.1. Outline

CHS and ACTHD are commencing early planning works to support the demolition of Building 6. [REDACTED] has been identified to engage expert advice to develop a demolition plan (including hazardous materials update) and development application to support the demolition works and timeframes identified in this business case.

The early planning and design work for this Phase 2 of the Master Plan will start in 2022-23. Early design and planning on the three new buildings, and demolition of Building 6, continues into 2023-24. Funding for 2024-25 onwards will be sought in Business Case prepared for the 2024-25 Budget.

Design and fit out of the CSB Inpatient units would be integrated into the construction of the CSB. The expected timeframe for commencement of the construction of the fit out is forecast by Q2 2023, with construction completed mid-2024 to align with construction completion and ahead of the planned “go-live” of the CSB in 2024.

11.1.2. Proposed float

N/A

11.1.3. Project constraints and/or deadlines

The major deadline relating to this business case is the need to have extra inpatient capacity constructed in time to allow the timely decommissioning of Building 1 and the need to provide for new pathology infrastructure. This decommissioning needs to occur as soon as possible due to the condition of the building reaching a critical point of maintenance and utility. To provide this new capacity, construction must start on the three new buildings in 2024-25 given each building will require a build time of 24 months.

Major Projects Canberra advice is that an instruction to proceed will need to be issued to the CSB Contractor (Multiplex) by December 2022 to fit out the two shell spaces. Delivery of funding in this Budget is critical to support the completion of negotiations with Multiplex, and formally confirm the variation to allow design integration and order of long lead time items. This will ensure the fit out is within the existing program for completion of the CSB and will not result in any project delays.

There are already sensitivities with ANU regarding its presence on the Canberra Hospital campus. It had previously proposed a new building at the proposed site of the new pathology building and then on the Yamba Drive car park. Close engagement will be required to ensure that ANU is comfortable with a staged move across the campus, given the education and innovation precinct is a later-stage project for the Master Plan. It is likely that ANU's needs would best be accommodated in the new pathology building, with a space that could either remain in use or be re-purposed when the innovation precinct is delivered.

11.1.4. Project decision points

The 2022-23 Budget is the critical decision point for the implementation of the Master Plan. As noted above (in section 4), and should this business case be supported, a Tier 1 business case will be prepared for consideration in the 2024-25 Budget to seek funding for the detailed design and construction of new Pathology and 2xIPU buildings. This business case will explore the various funding and delivery options for these major construction projects. In order to provide the level of detail needed for the 2024-25 business case, funding is needed in the 2022-23 Budget for the early planning and design work, and subsequent detailed costing analysis.

Should the 2024-25 business case be supported, the construction of the new buildings can proceed on schedule and provide new capacity, to allow the decommissioning of most of Building 1. However, should funding not be received in 2022-23 and 2023-24, ACTHD and CHS will need to consider alternative strategies to cater for the long-term growth of hospital services and the decommissioning of Building 1.

12. Appendices

- Appendix A – Canberra Hospital Master Plan
- Appendix B – Master Plan 2022-23 business case – Wellbeing Impact Assessment
- Appendix C – Master Plan 2022-23 business case - staffing costs
- Appendix D– Master Plan 2022-23 business case – Building 6 demolition costs

CANBERRA HOSPITAL MASTER PLAN 2021–2041



Acknowledgment of Country

ACT Health Directorate acknowledges the Traditional Custodians of the land, the Ngunnawal people. The Directorate respects their continuing culture and connections to the land and the unique contributions they make to the life of this area. It also acknowledges and welcomes Aboriginal and Torres Strait Islander peoples who are part of the community we serve.

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GLOSSARY

ACTHD	ACT Health Directorate
CHE	Canberra Hospital Expansion
CHS	Canberra Health Services
CSP	CHS Clinical Services Plan
CSB	Critical Services Building
EPSDD	Environment, Planning and Sustainable Development Directorate
EPT	Executive Planning Team
HCCA	Health Care Consumers Association ACT
MPC	Major Projects Canberra
PCG	Project Control Group
PPT	Project Planning Team
SC	Steering Committee
TCCS	Transport Canberra and City Services
TWHSP	Territory wide Health Services Plan

MINISTER'S FOREWORD



The Canberra Hospital has been an important part of our community for nearly 50 years. As our community grows and changes, so too must this essential facility. Over the last 20 years, there have been many changes at the hospital, including the construction of a specialist Adult Mental Health Unit, Canberra Region Cancer Centre and the Centenary Hospital for Women and Children.

This Canberra Hospital Master Plan is the blueprint for how we will transform the Canberra Hospital over the next 20 years to meet the community's needs into the future. Our vision is for Canberra Hospital to be a world leading, sustainable and welcoming health facility, delivering exceptional healthcare, training and research for our growing region.

The Canberra Hospital Master Plan builds on the ACT Government's nearly \$1.3 billion investments in healthcare infrastructure over the past decade and the Canberra Hospital Expansion project currently underway. The Master Plan incorporates the improvements we are already making and outlines how this work will seamlessly come together into the future.

In setting out a range of modernisations to improve open spaces, parking, public transport access and wayfinding around the Canberra Hospital campus, the Master Plan has user experience at its heart. At the same time, the Plan's guiding principles will ensure our hospital has the capacity to care for our community, provide better integration between services and facilitate innovative approaches that encourage more research and education.

We know the Canberra Hospital is a place where people experience some of the hardest times of their lives, so the Master Plan has a focus on transforming the campus to enhance healing, wellbeing and the experience of patients, carers, families, visitors and healthcare teams.

Following extensive consultation with the community – including pop-up and drop-in sessions, social media conversations, meetings with the ACT's community councils, and discussions with key stakeholder groups and the healthcare workforce – we have captured insights and ideas from a broad range of the campus users. I am confident that this Master Plan is well-considered and reflects what is important to the people who know Canberra Hospital best.

The Master Plan recognises what is working well on the campus and what is valued by the hospital's users, such as the existing trees, spaces to rest, walk and exercise, bushland connections, views to the Brindabellas and incorporation of cultural identity. While the campus needs to grow, it's important to be smart about how we manage this evolution.

Importantly, the ACT Government is commencing work straight away to begin delivering on the Master Plan vision, with the 2021-22 ACT Budget committing funds for a new car park. All future projects on the campus will look to the Master Plan for guidance and direction to ensure they meet the goals for creating a better, more effective hospital campus.

I extend thanks to the many hundreds of Canberrans who took time to contribute to this important project and have helped shape the future of Canberra Hospital. I look forward to working with you to deliver this exciting vision.

Rachel Stephen-Smith, MLA
Minister for Health

EXECUTIVE SUMMARY

The ACT Government's vision is for a public health system in the ACT that is accessible, accountable and sustainable. This vision is supported by a commitment to healthcare that puts patients and their families first, and to providing the right facilities to meet the future health needs of the growing ACT and the surrounding region.



The ACT community is growing and becoming increasingly diverse. Demand for healthcare is growing and the health system is adjusting to delivering care that considers the diversity and complexity of individuals' healthcare needs. Demand for health services is projected to increase rapidly over the next 20 years.

This increased demand is driven by a complex mix of:

- » population growth
- » population aging
- » availability of new medical technology
- » greater prevalence of chronic disease
- » increasing consumer expectations.

The current global COVID-19 pandemic has reinforced the importance of access to contemporary, resilient and adaptable infrastructure. The ACT Government is supporting significant expansion and investment in healthcare services to respond to the community's needs. Major capital investment projects are being planned across Canberra and include the Canberra Hospital Expansion (CHE) project; expansion of the Centenary Hospital for Women and Children and a new hospital on the northside of Canberra. Canberra Hospital is the Territory's tertiary hospital and the Territory's primary healthcare asset servicing the population of the ACT and the surrounding region.

The Territory's record investment in the Canberra Hospital campus (the Campus) has rightly focused development on those areas that are both easily available and presents the least disruption to clinical services. With the commencement of the CHE, an opportunity has arisen to take a holistic approach to future development on the Campus.

Canberra Hospital Master Plan (the Master Plan) is a campus-wide view of the hospital and prepares the hospital campus to continue delivering world-class healthcare to a growing population.

Many of the assets at Canberra Hospital are nearing the end of their useful life, having been operational when the hospital opened in 1973. As the infrastructure ages, costs associated with maintaining it increase significantly and refurbishment will not address future growth in demand, nor deliver efficiencies in health service delivery to support this demand.

The Master Plan outlines a path to transform the Campus over the coming 20 years. Investments need to be staged to deliver modern and efficient healthcare facilities, open space, improved parking and to allow for future growth past the 20-year horizon. It is based on demand data projections, known asset condition, community consultation, healthcare principles and planning principles.

The Master Plan proposes extensive redevelopment of key facilities, while supporting linkages and efficiencies between the Campus's most contemporary assets, improved access and movement networks, increased and better distribution of a public and staff car park and significant improvement and upgrade to the open space network across the Campus. Additionally, the Campus will support improved transport outcomes and future proof the Campus against future demand and redevelopment pressures.

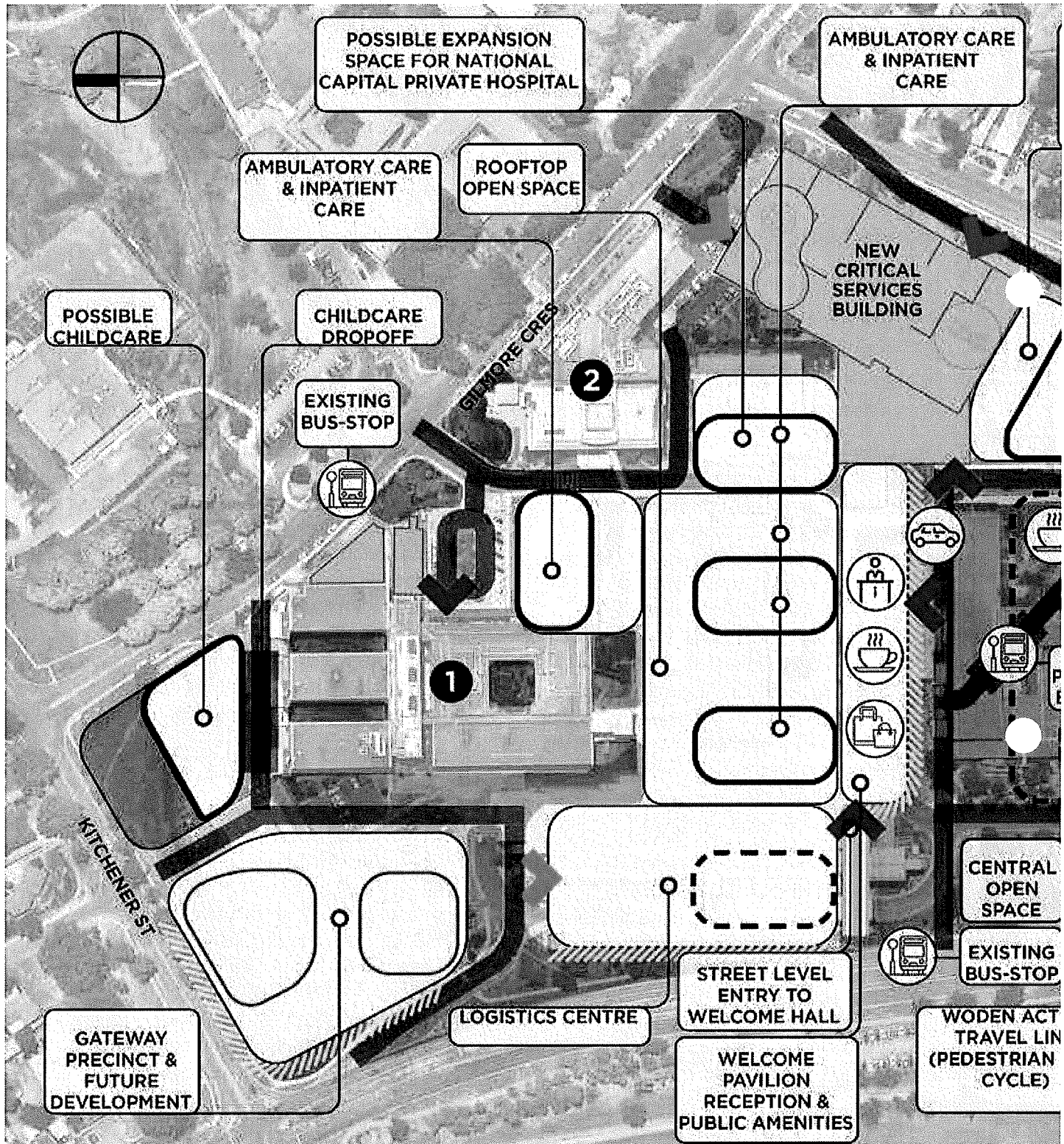
The Master Plan was developed over two years. ACT Health Directorate (ACTHD) and Canberra Health Services (CHS) worked together to develop a Master Plan that reflects good healthcare delivery and planning principles. ACTHD consulted with the community throughout the development of the Master Plan through two phases of consultation. The community provided feedback on what they valued about the Campus and areas for change in the first phase. In the second phase of community engagement they provided feedback on two Master Plan options.

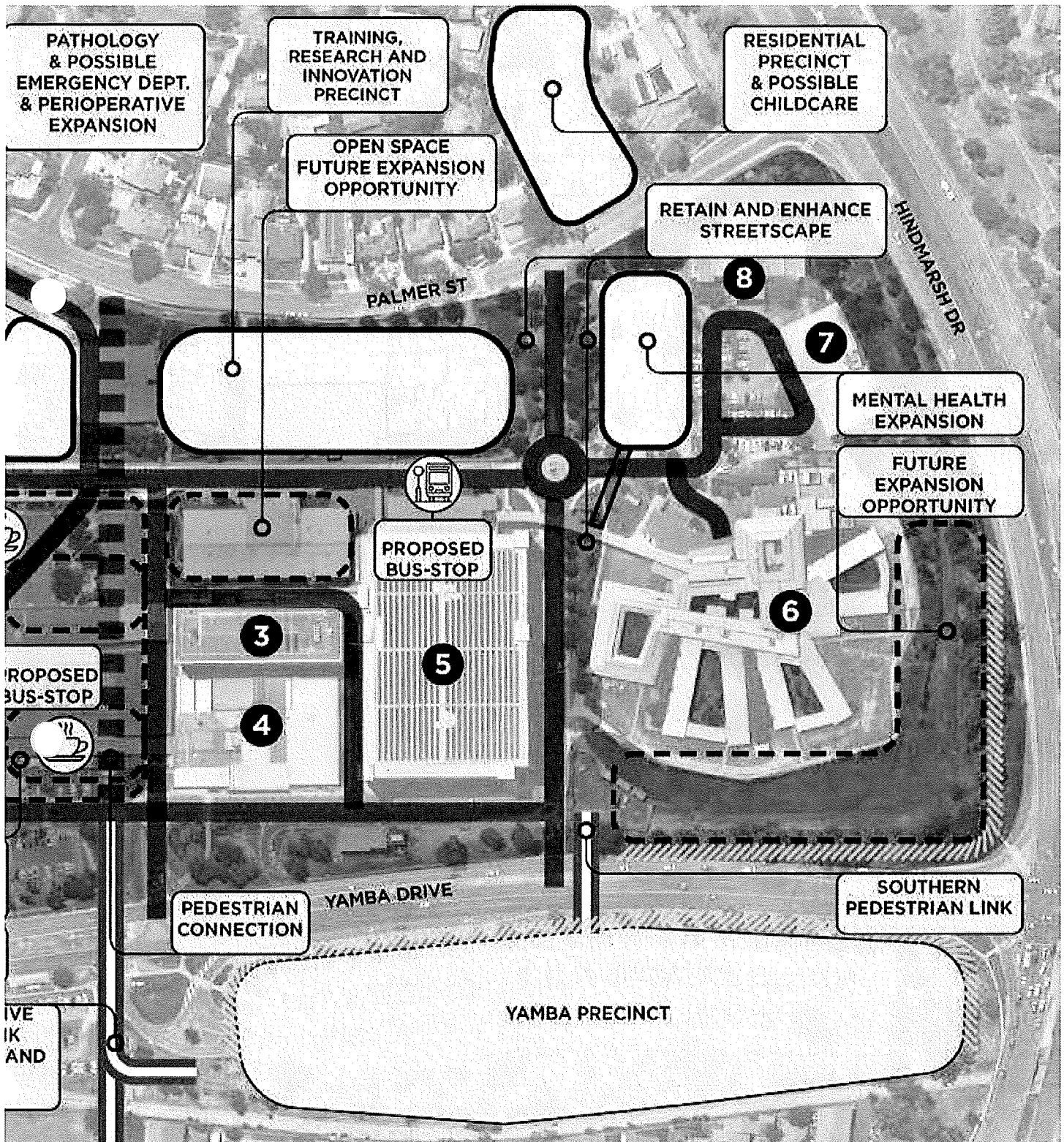
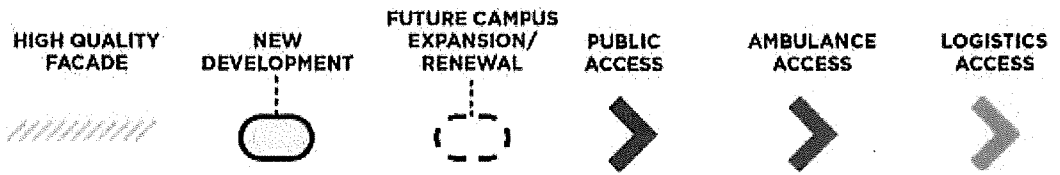
The Master Plan adopted by the ACT Government will inform and guide future planning on the Campus of the Canberra Hospital.

CANBERRA HOSPITAL

MASTERPLAN

- | | |
|---|---------------------------------|
| 1 CENTENARY HOSPITAL FOR WOMEN & CHILDREN | 5 SOUTHERN CARPARK |
| 2 NATIONAL CAPITAL PRIVATE HOSPITAL | 6 ADULT MENTAL HEALTH UNIT |
| 3 REGION CANCER CENTRE | 7 BRINDABELLA SPECIALIST CENTRE |
| 4 RADIATION ONCOLOGY | 8 RED CROSS HOUSE |





INTRODUCTION

From Woden Valley Hospital to Canberra Hospital

Canberra Hospital campus (the Campus) is located on Ngunnawal country. ACTHD acknowledges the Traditional Custodians of the land, the Ngunnawal people. ACTHD respects their continuing culture and connections to the land and the unique contributions they make to the life of this area.

Construction commenced on the Woden Valley Hospital in 1969 with the hospital opening to

patients in 1973. In 1991 services were transferred from the then Royal Canberra Hospital to Woden Valley Hospital, which was subsequently named Canberra Hospital in 1996.

The original Campus consisted of Building 1, Building 2 (kiosk) and Building 3 (inpatients). The main entry was off Yamba Drive and patients and visitors could drive between building 1 and 2, drop off, travel onto Hospital Road, turn around and exit back to Yamba Drive.

Since its opening the Campus has continued to grow, with the construction of over 20 distinct buildings.





Canberra Hospital

Canberra Hospital is Canberra and the region's tertiary teaching hospital which provides trauma services and most major medical and sub speciality services. Services include medical, surgical, emergency, maternity, paediatrics, specialist outpatient clinics, mental health, allied health, sexual health, alcohol and other drug treatment and other clinical support services.

Employment profile

Canberra Hospital is a significant employment hub with Canberra Health Services (CHS) employing over 7000 people (across all their Campuses and activities).

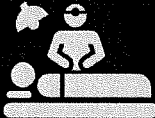
CHS Division	Full-time equivalent	Head count
Allied Health	176.9	216
Clinical Services	4621.9	5294
Finance and Business Intelligence	130.7	141
Infrastructure and Health Support Services	356.6	385
Medical Services	802.1	868
Nursing and Midwifery and Patient Support Services	398.1	489

CHS Division	Full-time equivalent	Head count
Office of the Chief Executive Officer	56.2	59
People and Culture	81.0	90
Quality, Safety, Innovation and Improvement	47.4	51
Special Purpose Account Canberra Hospital	1.1	4
Total	6672	7595

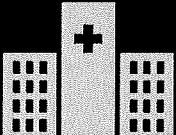
Table 1 Workforce Profile 2019-20 Full-time Equivalent and Headcount by Division/Branch

Canberra Hospital Expansion

In 2021, construction started on the Canberra Hospital's Critical Services Building (the CSB), the largest healthcare infrastructure project undertaken in the Territory's history. The CSB will include:



22
OPERATING THEATRES
IMPROVING ACCESS TO SURGERY



147
EMERGENCY DEPARTMENT SPACES

55
DAY SURGERY BEDS



156
IN-PATIENT BEDS

32
CARDIAC CARE BEDS



60 ICU TREATMENT SPACES



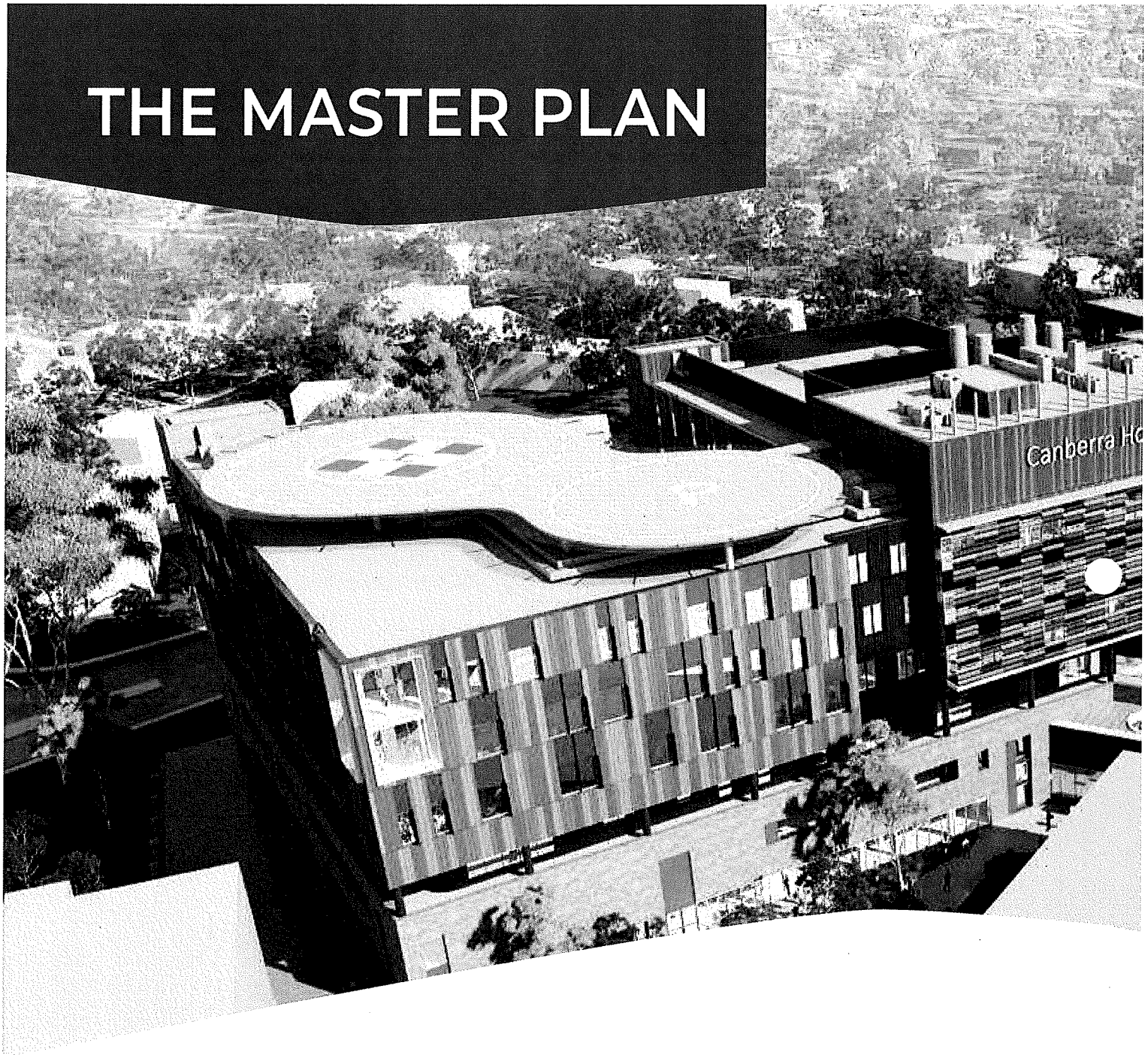
4 INCLUDING PAEDIATRIC ICU BEDS

The Canberra Hospital Expansion will significantly increase the capacity of Canberra Hospital over the coming years and address current and future demand pressures.

CSB will be an integrated building delivered on the Campus. The expansion will seamlessly connect with the other existing services and buildings on the Campus, over time as CSB increases capacity the other buildings and services will need to increase their capacity. This will require refurbishment, expansion, or complete redevelopment. Through this process the Master Plan will guide changes to ensure enhanced visibility, amenity, connection and access to and from CSB.



THE MASTER PLAN



Canberra Hospital is undergoing significant change, the population of the ACT is growing, consumer expectations for healthcare are changing, the Campus footprint is fully utilised and many of the critical buildings are reaching ages where critical decisions about their next phase of life needs to be considered.



There is currently no holistic overarching planning document guiding the development of the entire Canberra Hospital. Given its importance to the community – now is the perfect time to act and undertake the long-term planning through the Master Plan.



This Master Plan responds to opportunities, addresses the constraints, and details a high-level plan to guide how the Campus can change and transform into the future. The change horizon is 20 years, commencing in 2021 through to 2041.

The Master Plan sets out the development stages and design parameters for future development and investment phases to achieve a functional, collegiate, considered and efficient health Campus. This project will see the Campus evolve into a series of interconnected precincts and will help to break down the boundaries between clinicians, industry and community.

The Master Plan was developed by ACTHD in close consultation with CHS.

The Master Plan was based on a range of inputs, including:

- » data from the draft Territory wide Health Services Plan
- » draft CHS Clinical Services Plan
- » consultation with CHS clinical experts
- » two phases of community and stakeholder consultation
- » strategic planning context and policy
- » Territory Plan rules and reviews
- » clinical mapping data
- » site investigations and analysis
- » best practice clinical guidelines
- » asset condition and age
- » Zero Emissions Strategy.



The Master Plan also was guided by several key objectives. The Master Plan must:

- » deliver the required scope of clinical and non-clinical support services to support the efficient operations of CHE and future expansions
 - » accommodate existing or new services in modern purpose-designed assets by progressively constructing replacement assets, and decanting, decommissioning and demolishing existing Campus assets, where refurbishment is expected to exceed the cost of new replacement assets and yield sub-optimal operational environments
 - » be sufficiently flexible and provide alternative settings for the accommodation of services
- » pending the future definition of each modality scope and the associated Models of Care
 - » optimise the deployment of new assets and the reuse of existing assets where appropriate
 - » create a welcoming, patient and person-centred Campus through the integration of a series of vibrant interconnected internal and open spaces that are universally accessible, integrated, provide respite where required and promote wellbeing for all occupants
 - » ensure that the development pathway supports operational continuity with minimal disruption to day-to-day hospital operations.



TERMS OF REFERENCE

Project Scope

The Master Plan will guide the redevelopment of the Campus over the next 20 years. This will consider and analyse:

- » the proposed service profile provided by the Territory Wide Health Services Plan (TWHSP) and the Canberra Hospital Services Clinical Services Plan (CSP)
- » best practice healthcare service delivery
- » asset condition and age
- » best practice urban design.

While the Master Plan will have a 20-year focus it will make recommendations regarding strategic directions and considerations beyond the life of this document.

The Master Plan takes a patient first approach to healthcare and ensures that the user experience and delivery of healthcare while visiting the Campus is the best experience possible.

The Campus also occupies a significant footprint adjacent to the Woden Town Centre. The Master Plan considers and guides planning to ensure Canberra Hospital is integrated within its urban context to minimise its operational impact and wherever possible enhance the environment for those that live or visit the surrounding area and is nearby to the Garran Local Shopping Centre.

The Master Plan only addresses redevelopment within the existing site and footprint of the hospital and does not contemplate extending the hospital into any area outside the current Campus. Additionally, while the Master Plan guides long term strategic outcome this does not preclude the ongoing operational needs of the hospital not identified within this document. These projects should be considered within the context of the Master Plan. This includes existing works, renovation, refurbishment or expansion projects.

Methodology

The Master Plan was developed as outlined diagram 1.

Canberra Hospital Master Plan				
2019	2020	2021	2022–2041+	
Decision to develop Master Plan	Planning and Place review	Community engagement Phase 1	Community engagement Phase 2	Implementation
Project establishment	• asset assessment • site analysis • place review • traffic and access reviews	• values and areas for improvement	• Feedback on options	
Principles framework	Future requirements analysis • demand analysis • commercial considerations • training requirements • medical advancement	Master Plan options • Two options that address inputs	Government consideration of Master Plan • Government select and endorse final option	

Figure 1 Methodology

The Master Plan development pathway occurred through an Executive Planning Team, (EPT), Project Control Group (PCG) and a Steering Committee (SC) led by ACTHD, and included representatives from CHS. The project planning team (PPT) provided the conduit to the broader Canberra Hospital and CHS workforce, Executive, and Board. The study was prosecuted through a series of EPT workshops, PCG and SC meetings where the PPT presented study collateral to the respective delegates.

This process provided an opportunity for concepts and ideas to be debated, critical feedback provided and responses by the PPT re-presented. Through a qualitative process of interrogation and review of the evolving design concepts, the EPT, PCG and SC delegates identified preferred master planning strategies and options to identify a preferred development outcome.

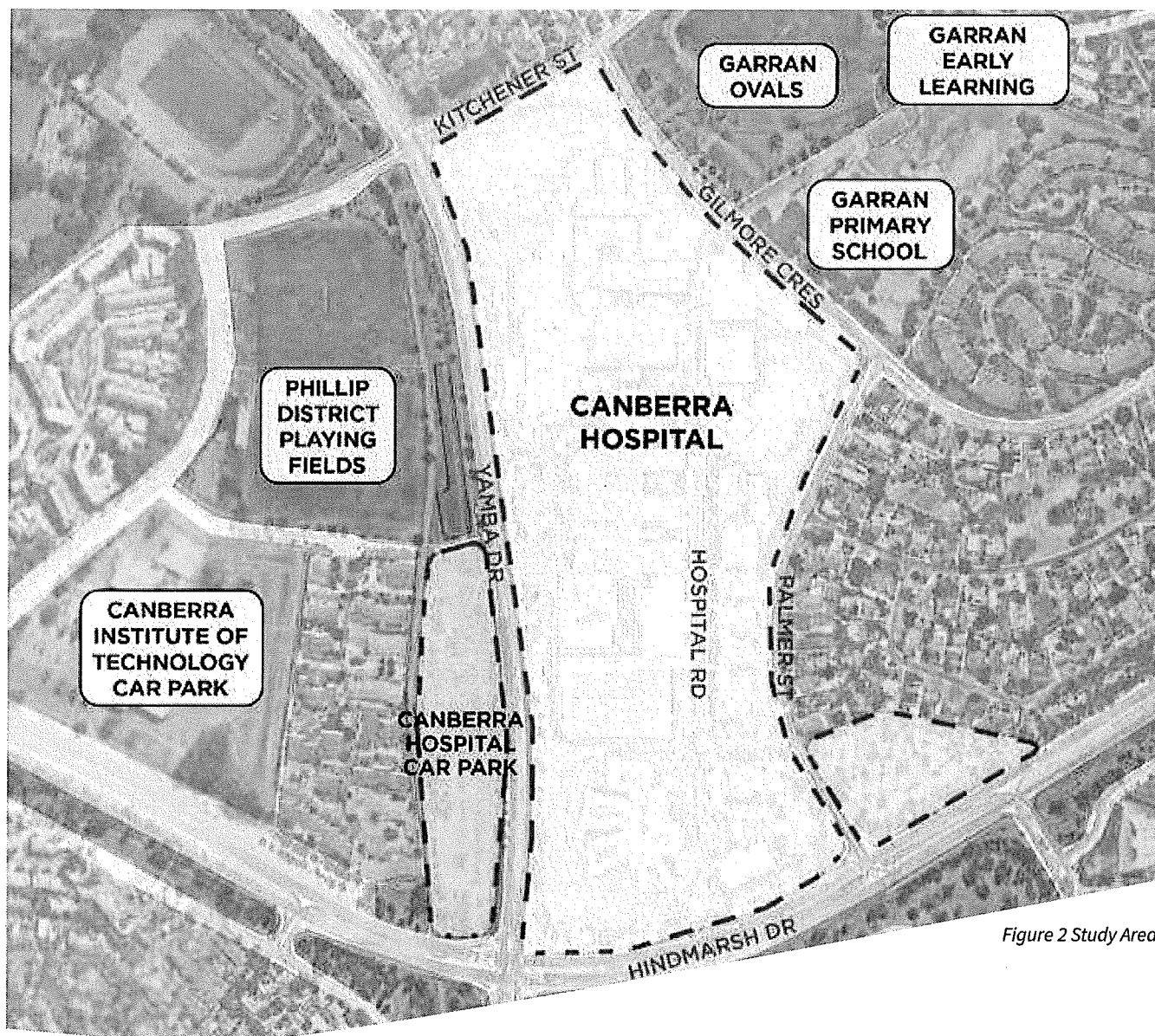


Figure 2 Study Area

Campus Location

The Canberra Hospital Master Plan study area (the Campus) is framed by Hindmarsh Drive, Yamba Drive, Kitchener Street, Gilmore Crescent and Palmer Street. The study area equates to a total of 216,848 m² (21.7 ha), displayed in Figure 2. Beyond this, the Master Plan considers the broader influence and relationship of the Campus to Garran, including the Garran Primary School, and across Phillip to the Woden Town Centre to ensure full and appropriate consideration for the entire affected area.

Note: that while block 7 and 8 Section 53 are included within the study area for consideration they are Crown leases not owned by Canberra Health Services.

The Campus consists of:

Campus Proper (Section 53)

Block 1 Section 53 Garran	147,509m ²
Block 4 Section 53 Garran	3,681m ²
Block 7 Section 53	4,560m ²
Block 8 Section 53	3,704 m ²
Block 10 Section 53 Garran	19,011m ²
Block 12, Section 53	395m ²
Block 9 Section 53 Garran	7,383m ²

Yamba Drive Site

Block 7 Section 1 Phillip	22,573m ²
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Gaunt Place

Block 25 Section 31 Garran	8,032m ²
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Note: Total Study Area Size: 216,848 m²

Context

While the Campus is predominantly located in the suburb of Garran it is important to understand and consider the relationship with Woden Town Centre and the more broadly within Canberra and the region.

Canberra Hospital is accessed from Hindmarsh Drive or Yamba Drive which connects to the Monaro Highway and the Tuggeranong Parkway to provide access from Canberra and the surrounding region.

The areas around the Campus feature a variety of uses including Garran Primary School, the Garran Shops, low and medium density homes, Phillip District Playing Fields, Woden Park Athletic and Garran Oval.

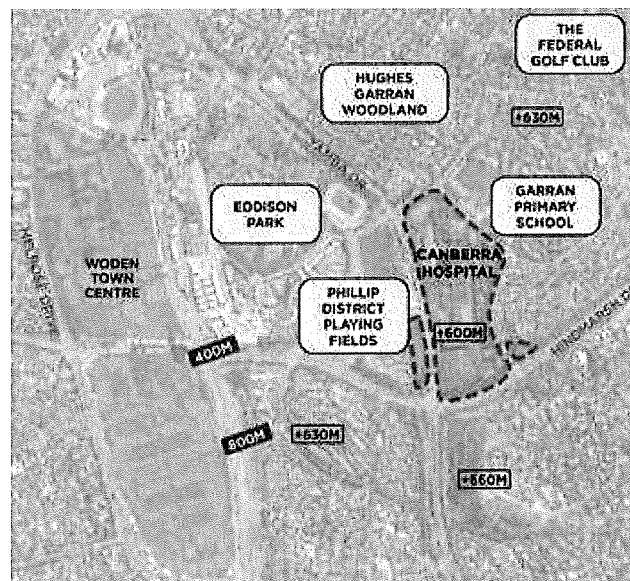


Figure 3 Campus Context

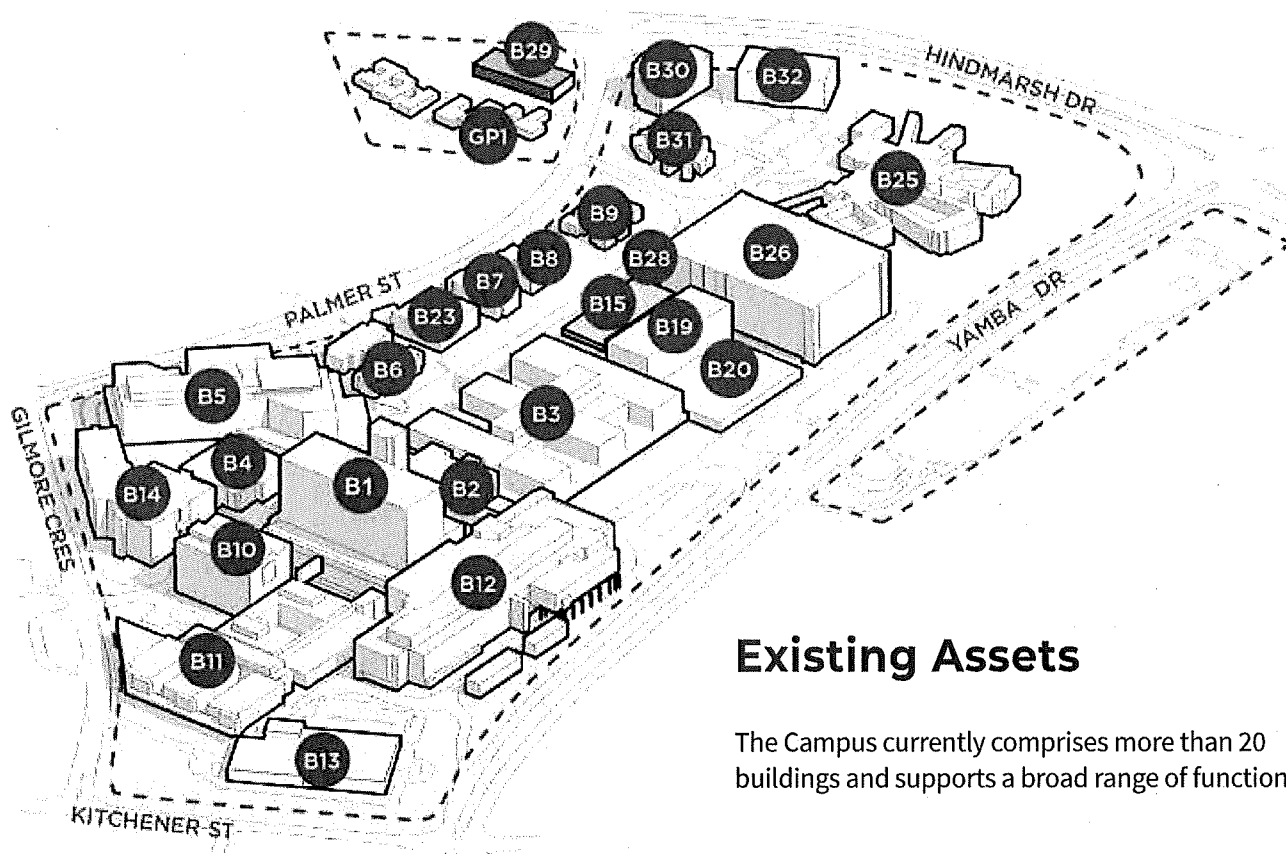


Figure 4 Existing Assets

Existing Assets

The Campus currently comprises more than 20 buildings and supports a broad range of functions.

Role and function

The ACT population is growing and ageing. Canberra Hospital provides general and tertiary acute public healthcare to the ACT and the surrounding NSW region. It is the largest public hospital and tertiary referral centre in the region. It provides care to more than 500,000 people within a total population base of approximately 896,880 including the catchment of regional NSW areas. The range of services includes acute inpatients and day services, outpatient services, women's and children's services and pathology.

Clinical Services

Canberra Hospital provides a comprehensive range of general and specialist services across key medical and healthcare disciplines. It has the largest emergency department in the ACT; an intensive care unit, outpatient services, women's and children's services, medical imaging and pathology services, with strong links to community-based services that provide continuity of care for patients. Canberra Hospital is also the principal teaching hospital in the Territory, in partnership with the Australian National University (ANU), Australian Catholic University (ACU), Canberra Institute of Technology (CIT) and the University of Canberra (UC).

Strategic Context

The Canberra Hospital Master Plan exists within the broader Strategic Planning context for the ACT. It is consistent with the objectives of the following strategic documents:

- » ACT Wellbeing Framework, 2020
- » ACT Planning Strategy, 2018
- » ACT Transport Strategy, 2018
- » ACT Climate Change Strategy 2019–2025.

ACT Wellbeing Framework 2020

Released in 2020, the ACT Wellbeing Framework aims to capture and measure a holistic picture of the quality of life for many Canberrans. It does so by augmenting economic indicators with important measures of social progress. One of the indicators is health.

The Master Plan will deliver a hospital campus that will continue to meet the needs of the community into the future in a way that is patient centred, accessible and improves the design to create a sense of place for patients, staff and family.

Wellbeing will be a central consideration of the design and delivery of each element of the Master Plan.

ACT Planning Strategy 2018

The Planning Strategy outlines a vision of a city that is sustainable, competitive and equitable that respects Canberra as a city in the landscape and the National Capital while being responsive to the future and resilient to change. To achieve this vision there are key themes and actions under each. The themes are:

- » compact and efficient
- » diverse
- » sustainable and resilient
- » liveable
- » accessible.

The Master Plan will progress the delivery of the vision and themes of the ACT Planning Strategy. The Campus has grown crowded and difficult to access and navigate. This Master Plan will deliver a hospital campus that is easier to navigate, better responds to its location in the Woden Valley, maximises views for patients to the surrounding environment, is more climate resilient and is more accessible and connected including through public transport links.

ACT Transport Strategy 2020

The ACT Transport Strategy outlines the strategic planning context for how Canberrans will move around the region. The Master Plan has ensured all transport and movement reflects the proposed networks and modes advocated for within the Transport Strategy. Importantly, it shows how the Campus connects to the Woden Town Centre and light rail network.

ACT Climate Change Strategy 2019–2025

The ACT is a global leader on climate action. We are working towards net zero emissions by 2045. The Canberra Hospital Master Plan will contribute to this goal by shifting buildings off natural gas and improving the climate-appropriateness of our buildings. This includes making them more resilient to climate events like the bushfires in 2019–20 and the hailstorm of 2020. The Master Plan will also provide an opportunity to introduce more green and open space into the campus. This will replace existing hard landscapes and the built environment of the Campus with plant life. This will improve the amenity of the campus for patients, visitors and staff and will also reduce and mitigate heat island effects.



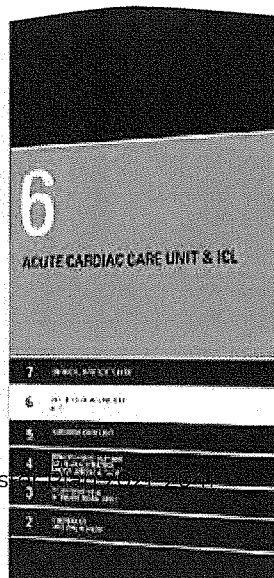
MASTER PLAN DEVELOPMENT

The Master Plan provides a development pathway for the health infrastructure required to meet the needs of the current and projected population in future so that they are in context appropriate, timely, effective and sustainable.

The demand for health services by the community is projected to experience a rapid increase over the next 15 years, and beyond.

This increased demand is driven by a complex mix of:

- » population growth
- » population ageing
- » availability of increased medical technology
- » greater prevalence of chronic disease
- » increasing consumer expectations.





The ACT Government is currently supporting significant expansion and investment in healthcare services to respond to the community's needs. Over the past decade and to 2024 there has been over a billion dollars invested in the campus including:

- a. the Canberra Hospital Expansion (CHE)
- b. the development of the Centenary Hospital for Women and Children Hospital (CHWC)
- c. the Adult Mental Health Unit
- d. the expansion of the Intensive Care Unit (ICU)
- e. construction of a 28-bed oncology and radiation oncology cancer centre
- f. over \$90 million in the Upgrading and Maintaining Health Assets (UMAHA) program

The Clinical Services Building (CSB) being constructed as part of the CHE is set to open in 2024 and will see the addition of 22 new operating theatres, a new and larger Emergency Department (ED) and additional ICU beds as well as new Inpatient Units (IPUs). The Government is also currently delivering an expansion to the CHWC.

To ensure that the clinical and logistical operations of the Campus receive the full benefit realisation of the current and future capital investment projects, it is necessary for a Master Plan to be developed that identifies any interface issues to the existing operations resulting from development and to synthesise these functional requirements into a consolidated plan – the Canberra Hospital Master Plan.

The Master Plan provides the strategic planning framework for how the Campus will change into the future.

CONSULTATION AND ENGAGEMENT

Consultation Framework

Community and stakeholder consultation was undertaken across the ACT and region to support and inform the development of the Master Plan. This saw engagement and consultation for more than three months in 2021 and included consultation with:

- » Canberra Hospital workforce
- » Canberra Community Councils
- » key stakeholders involved in the operation of Canberra Hospital
- » ACT Government directorates, agencies and authorities.

To ensure effective and authentic consultation, a consultation framework was developed to engage with the stakeholders to allow meaningful input to the development of the Master Plan. This was prepared in the context of the high level of community interest in projects associated with Canberra Hospital. It adopted the following principles:

- » provide opportunities for community input to both the development of the overarching design principles and aspirations as well as the Master Plan options
- » provide those most impacted (near neighbours, Woden community and Campus users) the opportunity to have their say and provide input through existing CHE reference groups and individual stakeholder meetings as required
- » extend beyond the near neighbours and Woden community to encourage feedback from across Canberra and the region, and ensure we have the views of users of the Campus that are not typically engaged
- » adopt a grass-roots 'conversation' based engagement, to allow those contributing to be individually heard

- » provide timely consultation outcomes to inform the planning and design and therefore meaningfully impact the development of the Master Plan
- » provide timely advice back to the community on what has been heard and how it will influence the development of the Master Plan

A broad range of forums were established to meet with the community and stakeholders, wherein inputs were sought, design collateral was presented and feedback gathered. These were delivered in a two-phase consultation detailed below.

Community Consultation Phase 1 – Information gathering

The public was invited to provide feedback on the existing challenges and aspirations for the Campus as they saw them. This allowed the Government to gain an in-depth understanding of the 'values' associated with Canberra Hospital Campus—what the community and campus users believe is important to keep or foster about the Campus and what they believe needs to change.

Community Consultation Phase 2 – Master Plan Options

The public was invited to provide feedback on two Master Plan options. This allowed the community and stakeholders to interrogate and unpack the Master Plan options and discuss the features they thought worked or could be improved.

Community Consultation Phase 1 Findings

Phase 1 focused on gaining an understating of the 'values' associated with Canberra Hospital Campus—what the community and campus users believe is important to keep or foster about the Campus and what they believe needed to change. It also reflected and sought more details on those topics heard from the community in previous consultations.

The major feedback themes which emerged were:

Access, accessibility, and connectivity

1. Access, accessibility and connectivity were primary considerations for almost all audiences from whom we received feedback.
2. Concerns were raised about how easily people can access the Campus by car and public transport, their ability to move around the Campus and/or between and within buildings, and the feedback focused on wanting design solutions that improve these elements on Campus.
3. Wayfinding on Campus was another commonly raised issue under this theme with people wanting more intuitive design on Campus and more effective signage.
4. Clinical services and public and staff amenities.
5. Much of the feedback received related to detailed design and development to support medical service upgrades and provision of public and staff amenities like waiting areas, lounge space, tea rooms, and a smoking area on Campus.

Carparking

6. Feedback indicated strong support for carparking to be a key consideration in the development of the Master Plan—carparking issues were the single most recurrent issues raised at community engagement events and online.
7. Issues related to carparking included parking availability, disabled parking, parking location, parking design, parking proximity to services and more.

Safety, security and OHS

8. Safety and security on Campus was another clear theme to emerge from consultation feedback. There was a strong desire voiced to have design elements incorporated in the Master Plan to create a safer Campus on which visitors and staff may feel secure.

Outdoor space

9. Green space with usable outdoor areas to promote respite and recuperation was another very strong theme of consultation. It was also suggested that the green space should be visible from within the hospital buildings.
10. Childrens' play areas and a defined smoking area were also covered in feedback on outdoor space.

Community Consultation Phase 2 Findings

During Phase 2, two Master Plan options were presented to the community and feedback provided during the first phase.

Consultation on the Master Plan options asked the community to consider the options presented and provide their feedback. Respondents were encouraged to provide feedback overall against the options or on the individual elements relating to the feedback themes from the Phase 1 consultation. A narrative was developed for each element explaining how it is responded to in the options presented. These elements were:

- » carparking – parking availability, disabled parking, parking location, parking design and more
- » access, accessibility, and connectivity – how easily people can access the Campus by car and public transport, ability to move around the Campus and between buildings/within buildings, wayfinding on Campus and more
- » clinical services and public amenities – the need for the design to enable first class clinical services and excellent quality public amenities including food options and more
- » safety and security – the physical layout of the Campus that will improve safety and the confidence of people on Campus that they are safe
- » high quality staff attraction and retention – making Canberra Hospital Campus appealing to staff to attract high quality staff in a competitive domestic and international healthcare market
- » technology and sustainability – how planning allows for the application of emerging and future technologies in autonomous vehicles, smart buildings, power sources, touch free entry, facial recognition etc.
- » outdoor/green space – all options contain a central open space at the heart of the Campus to promote respite and recuperation

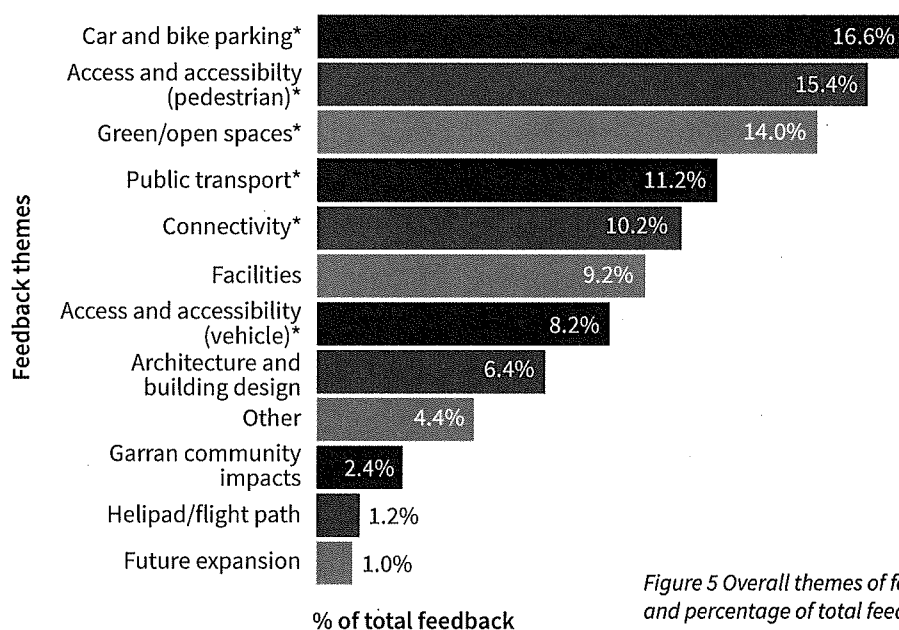


Figure 5 Overall themes of feedback received and percentage of total feedback

* indicates a theme that directly relates to an element that feedback was requested on

Respondents were asked for feedback on individual elements of the Master Plan that they preferred. They were not asked for which option they preferred overall. However, just over a third of respondents indicated a preference. These were close to being evenly split between Option 1 and 2.

Where feedback was received as to a stronger element of an option this has informed the development of the final Master Plan.

1. Overall, the consultation and engagement has proved to be one of the largest undertaken in the Territory and included:

- a YourSay campaign including a total of over 6,000 views
- 11 meetings with the ACT's community councils
- Phase 2 had six pop-up sessions in six locations and six drop-in sessions for the community to visit and comment on the plan
- 2,800 flyers distributed to local residents and door knocking of close residents over both phases of consultation
- over 1800 pieces of feedback received from members of the public
- over 50 direct engagement and one-on-one meetings, including with:
 - the CHE Local Community Reference Group
 - the Healthcare Consumers' Association
 - the Aboriginal and Torres Strait Islander Consumer Reference Group; Elected Body and United Ngunnawal Elders Council
 - the Disability Reference Group
 - Garran Primary School, including the P&C
 - Unions including the Community and Public Sector Union (CPSU); the Australian Nursing and Midwifery Federation; Australian Salaried Medical

Officers Federation; Professionals Australia; the Health Services Union and the United Services Union.

- The Woden Valley childcare centre on campus
- Ronald McDonald House
- National Capital Private Hospital
- various departments and staffing units at the Hospital
- all ACT tertiary education institutions.

SITE INVESTIGATION AND ANALYSIS

The Campus is a complex brownfield site. A thorough understanding of the Campus's current opportunities and challenges is required. This includes consideration of statutory planning controls, services, traffic, parking demand, urban design analysis, topography and climate. The findings of site investigation and analysis have contributed to the planning and design recommendations found within the the Master Plan.

SERVICE PLANNING

To plan effective and efficient infrastructure we need to understand what the role and function of the infrastructure will be. The Master Plan has been informed by ACT Health and Canberra Health Service's planning, including:

- » the draft Territory wide Health Services Plan
- » the draft Canberra Health Services' Clinical Services Plan.

Territory Wide Health Services Planning (TwHSP)

The ACT Government delivers healthcare across a range of service providers, partners and settings. The Territory wide Health Services Plan (TwHSP) takes a territory-wide view of the health services in the ACT. It outlines the current levels of demand and corresponding supply of services. It then predicts and plans for growth and change over the future.

These projections are essential for infrastructure planning, it means that we are building the facilities now ready for our community when they need it.

The draft plan outlines that over the next five to 10 years, the focus on service redesign and redevelopment will be:

- » improved integration across the health system, to support transitions of care
- » optimising where services are delivered based on our role as local, Territory and regional healthcare provider
- » strengthening core services
- » focused improvement across key areas of service demand and reform.

The Territory wide Health Services Plan takes into consideration the following planning context.

- » Demographics, including:
 - population and ageing
 - Aboriginal and Torres Strait Islander peoples
 - people with disability
 - people with chronic conditions.
- » Burden of disease, including mental health.

» Risk factors, including:

- physical inactivity
- excess body weight
- alcohol consumption
- tobacco use
- other drugs
- dietary risks.

» Determinants of Health

- socio-economic profile
- employment and income
- education
- housing and homelessness
- climate change.

The data developed in this context has been used to inform the Master Plan, specifically the role Canberra Hospital plays in the Territory-wide provision of healthcare.

For example, this plan provides essential detail on how much inpatient activity is set to grow in which clinical area out to 2037.

These plans have provided underlying data which has informed the development of the Master Plan. In using this robust basis, the Master Plan is more than able to deliver the required infrastructure to meet the future health needs of the community.

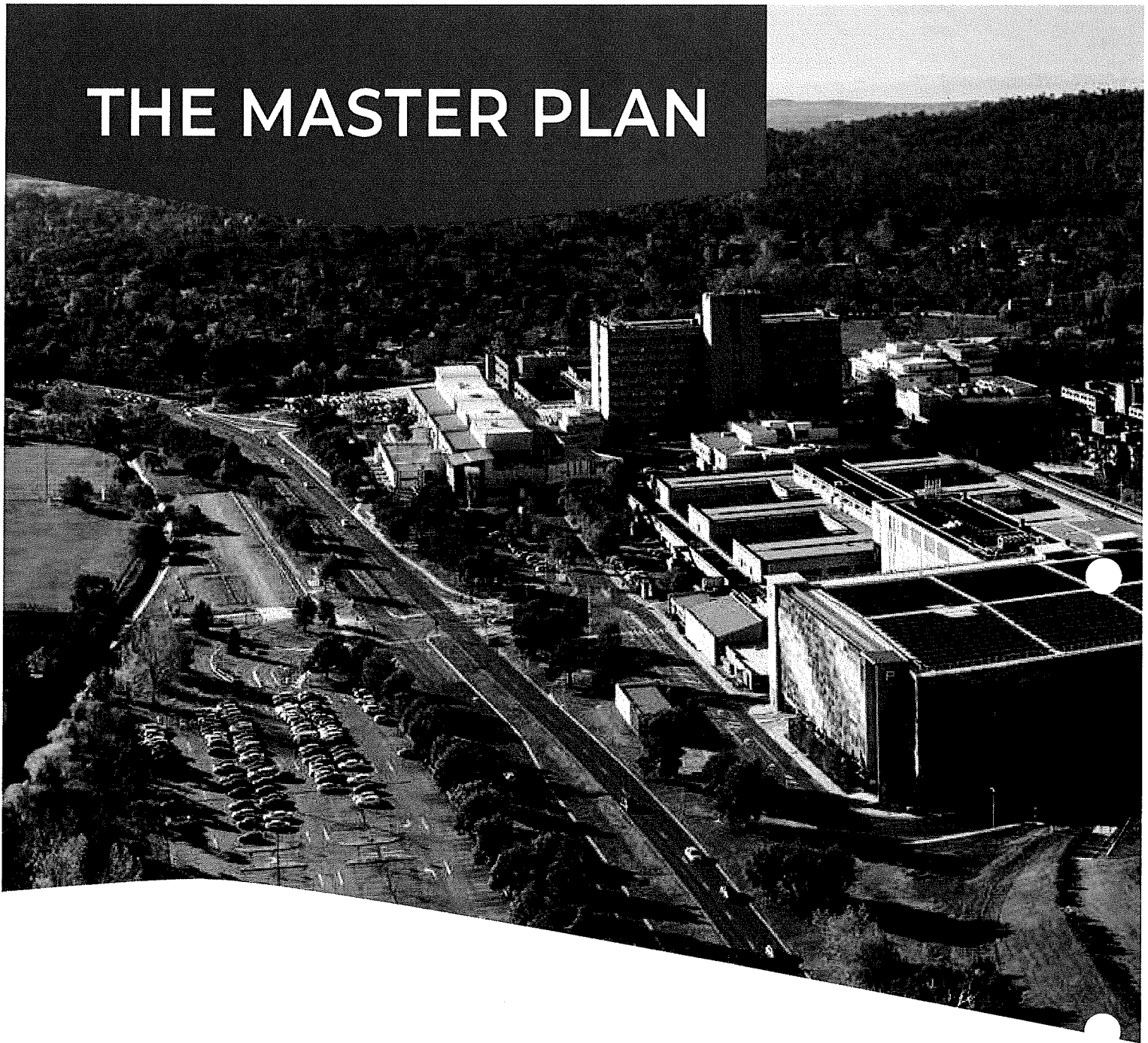
CHS Clinical Service Plan

The Clinical Services Plan considers the operational context of the health services. The five strategies of the Plan are:

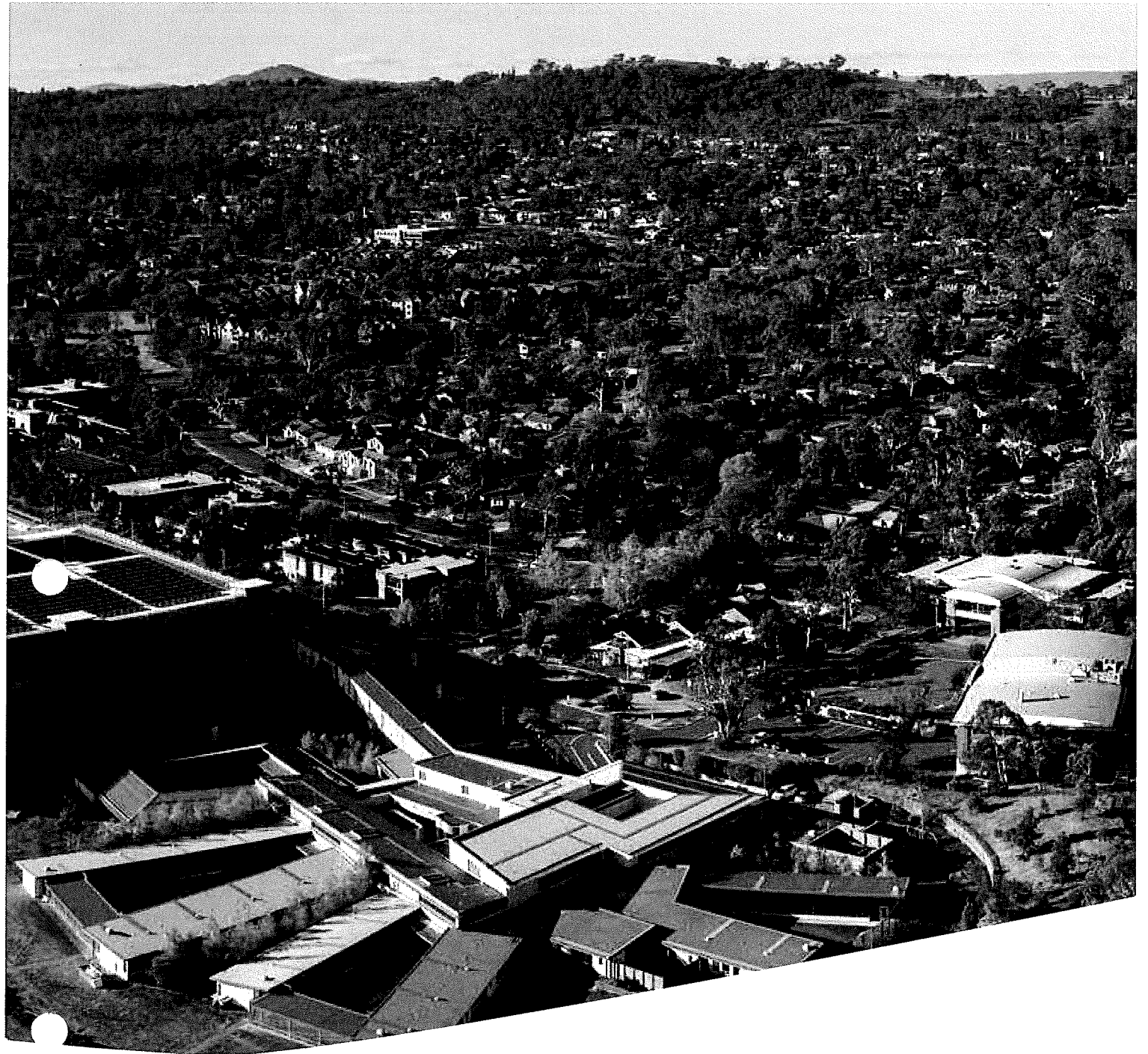
- » optimising our services in line with community need
- » early intervention and proactive care
- » integration across care continuum and adjacent sectors
- » workforce empowerment and sustainability
- » embracing innovation, technology and data.

This plan looks to address specific service demand pressures such as ED waiting times and elective surgery waiting times. It assesses patient pathways, models of care and adequacy of infrastructure and other service requirements.

THE MASTER PLAN



The Master Plan provides a pathway for the next 20 years of redevelopment and guides comprehensive improvements across the Campus. The Master Plan identifies opportunities and advocates for a user-focused Campus which supports a broad range of requirements. The implementation of the Master Plan will see improved functionality, the provision of



high-quality facilities which will meet growth, improved access and amenity and enhance the surrounding areas of Garran and the Woden Town Centre. The redevelopment of the Campus is a unique opportunity to not only improve infrastructure and to improve service delivery but to improve the healthcare experience and journey holistically.

Vision

Canberra Hospital will be a world leading, sustainable and welcoming environment supporting the best healthcare in the region.

Guiding Themes and Principles

The Master Plan has been informed by a range of factors including service planning, asset condition and age, expert design and clinical advice, stakeholder engagement and community consultation. These have informed a range of guiding themes and principles.

Precincts	To achieve a high quality, compact and efficient Campus design, the Master Plan takes a precinct approach forming Functional Service Precincts. This supports the concentration of symbiotic facilities to provide better access across a range of services. The arrangement of the Campus into precincts will support the functional relationships of services and their proximity to one another.
Public Realm	To ensure the Campus is easy to navigate, pleasant and welcoming, the Master Plan ensures that the urban design and open spaces across the Campus are fully considered to support all users and enhance their experience. This includes the design building form and interfaces, providing a portfolio of open spaces based on users' diverse and dynamic needs, streetscapes to reflect their role as both places and movement corridors.
Transport & Connectivity	Supporting a more compact, walkable and liveable city, the Campus will provide improved access and connectivity through improved streets, pedestrian and cycle paths, public transport, and supply distribution routes. The Master Plan also ensures appropriate levels and locations of car parking, minimising travel distances.
Infrastructure	The Master Plan coordinates site services and supporting infrastructure to ensure they are expandable, flexible and resilient so that future growth of the Campus can be readily accommodated with minimal intervention.
Collaboration	The Master Plan identifies opportunities for compatible commercial activities and private and allied health service delivery which enhance health outcomes and amenity.

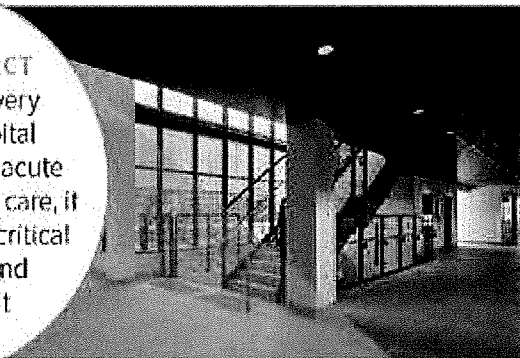
Community	The redevelopment of the Campus will impact all Canberrans, the Master Plan ensures each step of the implementation takes the community on the journey.
Sustainability	The Master Plan maps the Campus's transition to net zero emissions by 2040. Additionally, the Master Plan provides opportunities to reach and exceed canopy cover targets, water management and reduce environmental impacts to surrounding areas.
Culture	Canberra Hospital is a place of healing. As part of that healing, the redevelopment of the Campus offers the opportunity for further reconciliation and acknowledgment of Ngannawal country through the interweaving of culture through the built environment. The Master Plan ensures this is part of the design process and a key outcome for a number of projects.
Patient Experience	The Campus will provide high-quality physical environments that promote the quality of patient care that is accessible, safe and human-centered. The Campus will take a holistic approach to healthcare – one that takes the healing environments into consideration. While patient care remains the primary objective, equal care is taken to provide suitable and appropriate infrastructure to support their needs.
Access	Navigation across the Campus will prioritise and separate user needs and provide efficient travel distances. Way-finding communicates effectively to all users accessing the Campus. Public art and landmarks provide location identities and precincts have unique visual characteristics for orientation.
Amenity	The Campus emulates a healthcare village and caters for a live/work/play urban environment with a variety of retail, social and recreational amenities to support a diverse 24/7 consumer base of staff, visitors, patients and carers.

Objectives

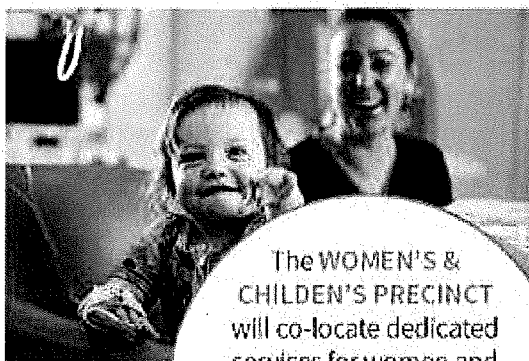
- » Provide a viable development pathway that delivers the scope of clinical services anticipated by the CSP in an operationally effective Campus.
- » Accommodate existing or new services in purpose designed assets by progressively decommissioning and demolishing those existing Campus assets where refurbishment is expected to exceed the cost of new replacement assets and yield sub-optimal operational environments.
- » Be sufficiently flexible and provide alternative settings for the accommodation of services pending the future definition of each modality scope and the associated Model of Care.
- » Optimise the deployment of new assets across the Campus whilst optimising the reuse of existing assets where appropriate.
- » Create a welcoming, person centered Campus through the integration of a series of vibrant interconnected indoor and outdoor spaces that are universally accessible, provide respite and promote wellbeing for all occupants.
- » Ensure that the development pathway supports operational continuity with minimal disruption to day-to-day hospital operations.

The Master Plan Precincts

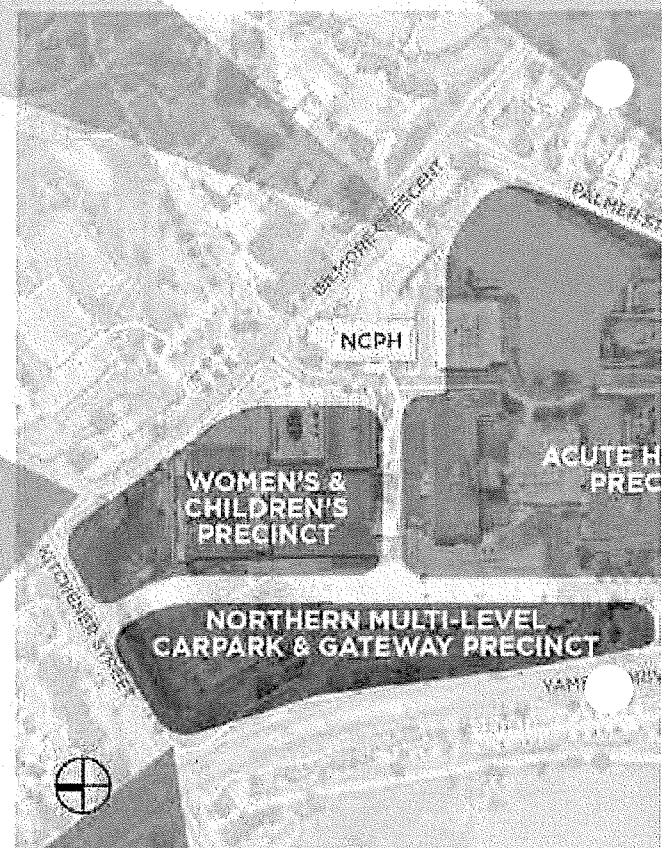
The **ACUTE HOSPITAL PRECINCT** will enable the delivery of world-class hospital services and improve acute patient movement and care, it will integrate the new critical services building and include basement car-parking.



The **TRAINING, RESEARCH AND INNOVATION PRECINCT** will provide a dedicated precinct for tertiary education providers with a university feel. It is suitably located near the accommodation precinct and bus stop.



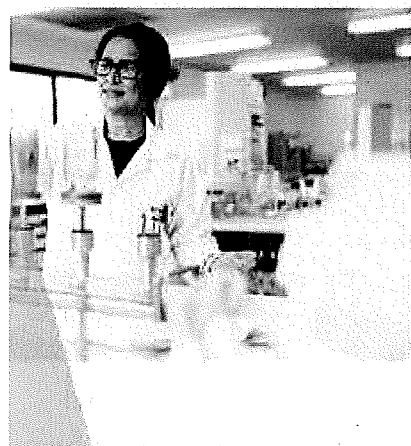
The **WOMEN'S & CHILDREN'S PRECINCT** will co-locate dedicated services for women and children in a more accessible way incorporating a playground and being located close to a new northern carparking precinct.



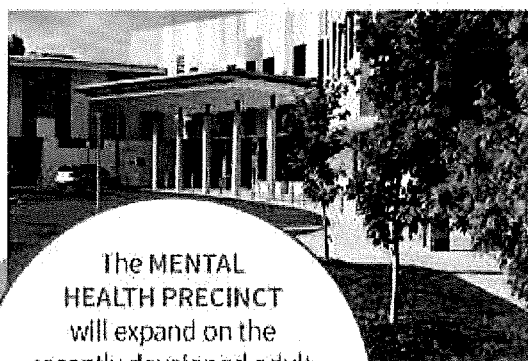
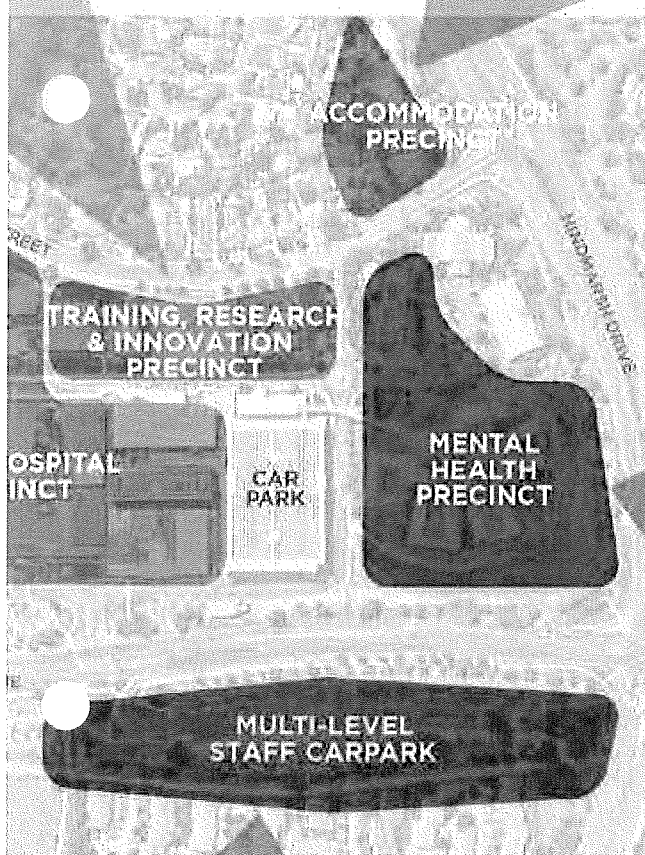
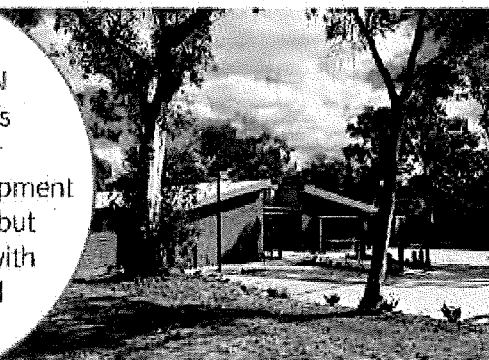
The Master Plan establishes seven distinct precincts across the Campus. The precincts have been developed to support efficient use of the Campus, make it easier to navigate around the Campus, and focus and co-locate relevant services to improve day-to-day operations and logistics of Canberra Hospital.

The **NORTHERN MULTI-LEVEL CARPARK & GATEWAY PRECINCT** will be a flexible site that could see research, education or administration as well as parking to serve the northern end of the campus.

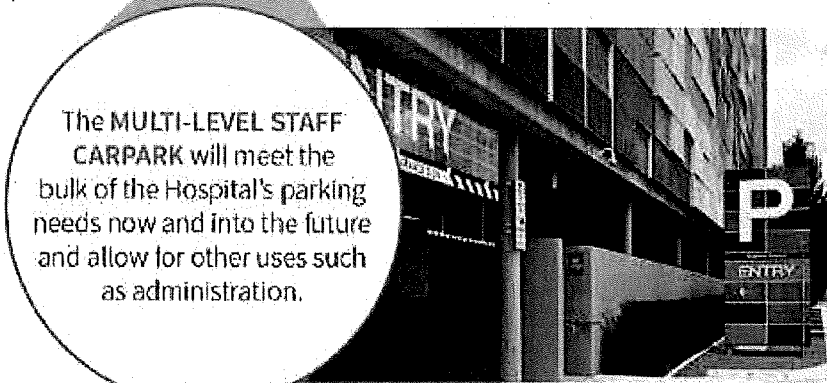




The ACCOMMODATION PRECINCT provides an opportunity for accommodation development close to the campus but suitably positioned with existing residential homes.



The MENTAL HEALTH PRECINCT will expand on the recently developed adult mental health unit and can be expanded further. It will include greater open spaces which will benefit staff and patients.



The MULTI-LEVEL STAFF CARPARK will meet the bulk of the Hospital's parking needs now and into the future and allow for other uses such as administration.

Figure 6 Master Plan Precincts

The Acute Hospital Precinct	The Acute Hospital Precinct is the part of the Campus which will contain and support the acute clinical services. This includes the CSB which will become operational in 2024. Further to this, the Acute Hospital Precinct will see a redeveloped inpatients and outpatients (Clinical Block), main reception (Welcome Pavilion), and provides additional capacity for allied health, non-clinical support services and a new pathology building. The Acute Hospital Precinct will also establish a new central open space. This central open space will act as the main public open space and support a variety of users on the Campus. Long term however, this central open space provides long term redevelopment opportunities for the Campus should additional development of an acute function be required towards the end of this Master Plan's life. It should be noted that the National Capital Private Hospital function while not included in any precinct should be considered as a use compatible and closely aligned to the function and delivery of care in the Acute Hospital Precinct.
The Training, Research and Innovation Precinct	The Training, Research and Innovation Precinct provides a dedicated part of the Campus for tertiary education providers. This precinct will support the delivery of training and research through the devolvement of new teaching and learning space, simulation spaces and will collocate with labs developed in a new pathology building in the Acute Hospital Precinct. This precinct will also support students and staff through the provision of supporting amenities like outdoor teaching spaces, proximity to public transport, end of trip facilities and dedicated meeting spaces. Development of new facilities and spaces will be delivered through collaborative design to ensure that modern methods of education, research and training is supported and enhanced through the built environment.
The Accommodation Precinct	The Accommodation Precinct provides the long-term location for Canberra Hospital to provide accommodation close to the Campus but in a suitable residential setting.
The Mental Health Precinct	The Mental Health Precinct ensures and supports the expansion of the relatively new Adult Mental Health unit and other Mental Health services. It will also include improved open space which will support mental health service delivery.
The Multi-level Staff Carpark 'Yamba' Precinct	The Yamba Precinct will provide a significant portion of Canberra Hospitals parking demand. The precinct is also able to accommodate a range of other ancillary uses.
The Gateway Precinct	The Gateway Precinct is a flexible site for other uses required on the Campus; this could include administration, or other non-clinical support uses, research and training. This site will also provide parking to service the northern end of the Campus. This precinct's prominent location supports the demonstration of architectural excellence. This will support the image of the Campus as a world class facility, support wayfinding through passive identification of the hospital and clearly delineate the Campus to its surrounds.
The Women's and Children's Precinct	The Women's and Children's precinct will co-locate dedicated services for women and children in a more accessible way incorporating a playground and being located close to a new northern carpark in the Gateway Precinct.

THE MASTER PLAN

The Master Plan demonstrates a significant transformation of the Campus we know today. This transformation is the result of several phases of redevelopment which will see the creation of critical modern, fit for purpose buildings and the 'opening up' and greening of the Campus. This new structure will see improved access, navigation, operation and an overall improved experience throughout the Campus.

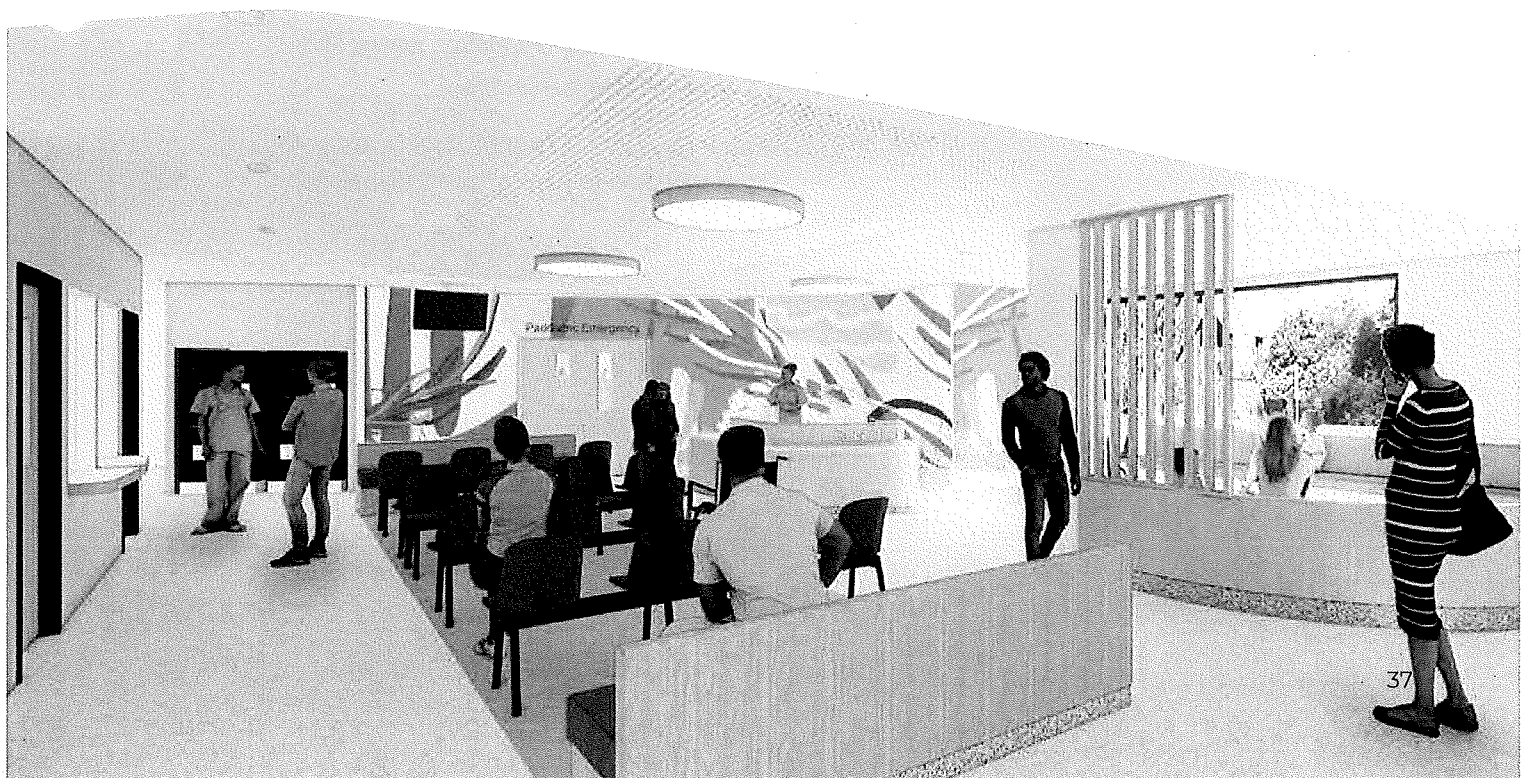
The Master Plan

The redevelopment of the Campus provides guidance for the construction/expansions of:

- » an expanded Emergency Department and an expanded Pathology Building
- » an Ambulatory Care and Inpatient building

- » a welcome pavilion
- » a new Gateway building
- » a multi-storey carpark proposing safer skybridge access to the Campus
- » a new expanded logistics centre
- » a new childcare centre.

Additionally, the Master Plan will see significant improvements to open space and internal road network.



CANBERRA HOSPITAL MASTERPLAN

- 1 TERTIARY HOSPITAL FOR WOMEN & CHILDREN
- 2 NATIONAL CAPITAL PRIVATE HOSPITAL
- 3 REGIONAL DAY/OUTPATIENT
- 4 HAZARD/CRAC/LOGISTICS
- 5 SOUTHERN CANBERRA
- 6 ACUTE MENTAL HEALTH UNIT
- 7 REHABILITATION & SPECIALIST SERVICES
- 8 RED CROSS HOUSE

- HIGH QUALITY FACADE
- NEW DEVELOPMENT
- FUTURE CAMPUS EXPANSION/RENEWAL
- PUBLIC ACCESS
- AMBULANCE ACCESS
- LOGISTICS ACCESS

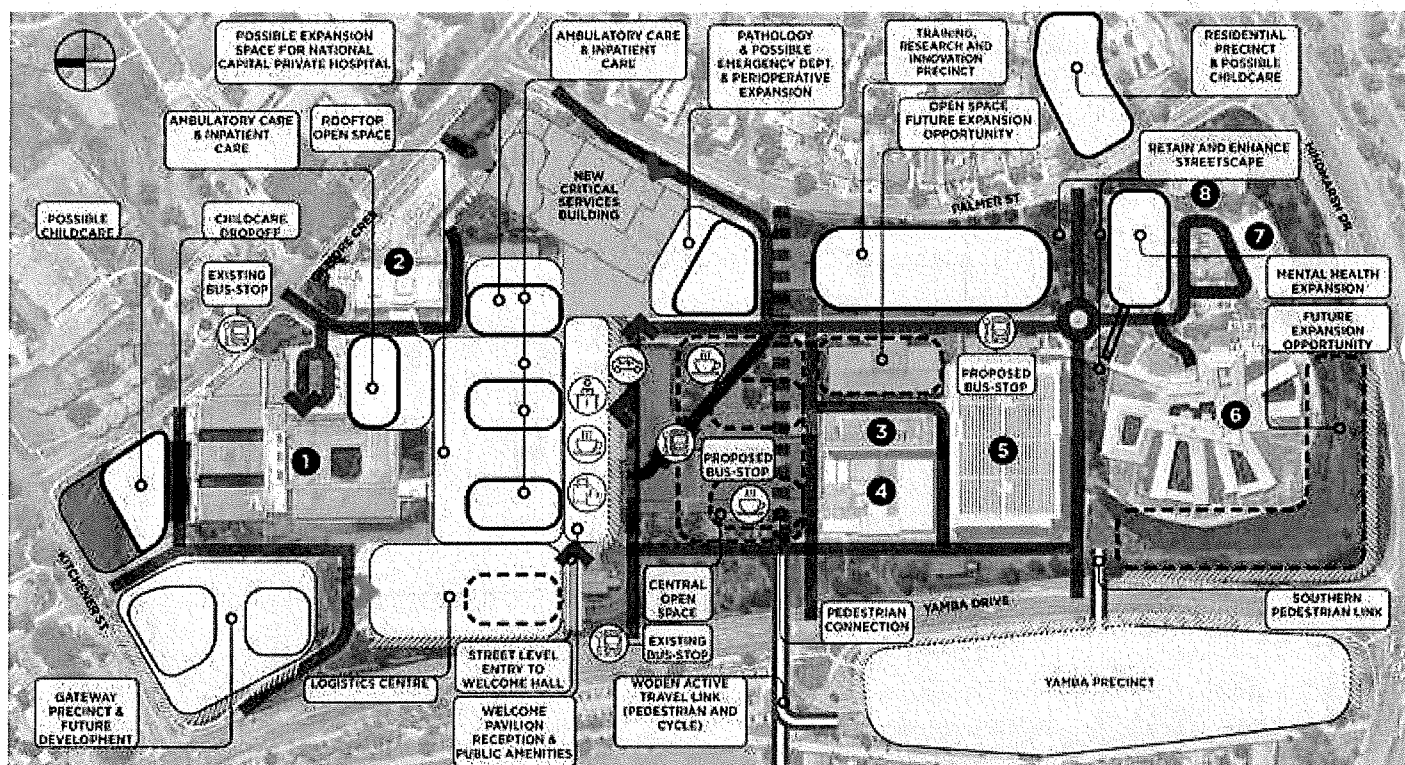


Figure 6 The Master Plan

The redevelopment of the Campus provides guidance for the construction/expansions of:

- » An expanded Emergency Department and an expanded Pathology Building;
- » There will be multiple new Inpatient buildings;
- » A welcome pavilion;
- » A new Gateway building;

- » A multi-storey carpark proposing safer skybridge access to the campus;
- » A new expanded logistics centre; and
- » A new childcare centre.

Additionally, the Master Plan will see significant improvements to open space and internal road network.

New Pathology Building	The Master Plan indicates a new Pathology Building (the Pathology Building) next to and adjoining the newly constructed Critical Services Building (CSB). The podium of this building could provide future expansion space for the Emergency Department and perioperative in the CSB. The new building will allow for expansion of pathology services in an environment fit for modern pathology delivery. The Pathology building will require direct access onto Hospital Road and internal access from the CSB for the transfer of specimens. Additionally, Pathology will require a pneumatic connection for the transfer of smaller specimens.
Ambulatory Care and Inpatient Care (Clinical Block)	The Inpatient Care (Clinical Block) will see the redevelopment of the current functions within Building 1 and 3 combining inpatient and outpatient functions into a single building. The Clinical Block will be delivered over three phases but will be a single contiguous building linked into the CSB. Part of this new building can also be utilised to support any future expansion to Centenary Hospital functions. During consultation, clinical discussions were held regarding the opportunity for a separate ambulatory care building which could house all outpatient services. This would give the opportunity for consumers to access these services without needing to navigate the wider hospital campus and the gateway precinct was identified as providing this opportunity. The Master Plan allows for future clinical decisions to be made to support this outcome on the gateway site if desired.
The Welcome Pavilion	The Welcome Pavilion is the 'front door' to Canberra Hospital and the central navigational point. The Welcome Pavilion will contain the main reception and will build on the 'Welcome Hall' established by the CSB. It will have capacity for expanded commercial activities which could include complementary services like retail, supermarket, gym, and expanded food and beverage options. While the Welcome Pavilion will have an internal focus its design will also ensure an outward focus and interface with the central open space. This will support an active and vibrant Campus. Liaison and information services should be included to ensure patients and their visitors can identify where they want to go and access services quickly and easily. This means accommodating services like the Aboriginal Liaison Office alongside the main reception.
Gateway Building	The Gateway Precinct provides a flexible site for the delivery of multiple Campus needs. The podium levels are envisaged to provide increased parking supply in the north of the Campus. Two indicative development footprints are indicated that could provide for multiple uses including office administration, education, or research. The site's prominent location supports a high quality architectural finish and accentuated height to support the identification of Canberra Hospital.

Multi Storey Carpark	The Multi Storey Carpark indicated on the Yamba precinct will provide the bulk of parking supply for staff over the next 20 years. The carpark will be connected to the Campus via sky bridges. The skybridges will be publicly accessible to support improved active travel connections between the Campus and the Woden Town Centre.
Logistics Centre	As the Campus grows, so too do the supporting services. The current logistic functions located within Building 1 (loading dock, waste, kitchen, linen etc.) are nearing capacity. In order to grow logistic support, a new dedicated logistics centre is proposed on the western edge of the Campus. This facility will have dedicated access for service vehicles and connect through the Campus via level 1. The Logistics centre would be contiguous with the Clinical Block. As such, during design and feasibility it could be explored as to whether additional clinical functions could be accommodated on top of the Logistics Centre.
Childcare Centre	Currently the childcare centre on the campus is in an old asset that is nearing end of life. The current centre also occupies space in the new mental health precinct that the Master Plan envisages for expansion of mental health services. There are two suggested locations for the relocation of the child care centre – on the corner of Kitchener Street and Gilmore Crescent in the Women and Children's Precinct or in the new Accommodation Precinct in Gaunt Place.
High-quality façade	Several new buildings within the Campus identified for redevelopment are situated in prominent locations. This offers the opportunity to demonstrate architectural excellence to improve identification and status of the Campus to the public and visitors, raise the profile of Canberra Hospital to existing and prospective employees.

Access and accessibility

A holistic approach to movement has been adopted in the development of the Master Plan.

While private vehicle transport is and will continue to be a primary mode for many that visit the Campus other modes of transport have been prioritised and reinforced through the Master

Plan to ensure a diverse, resilient and sustainable transport network. This includes improved access and accessibility for emergency services vehicles to and through the campus.

Access and Accessibility (Vehicles)

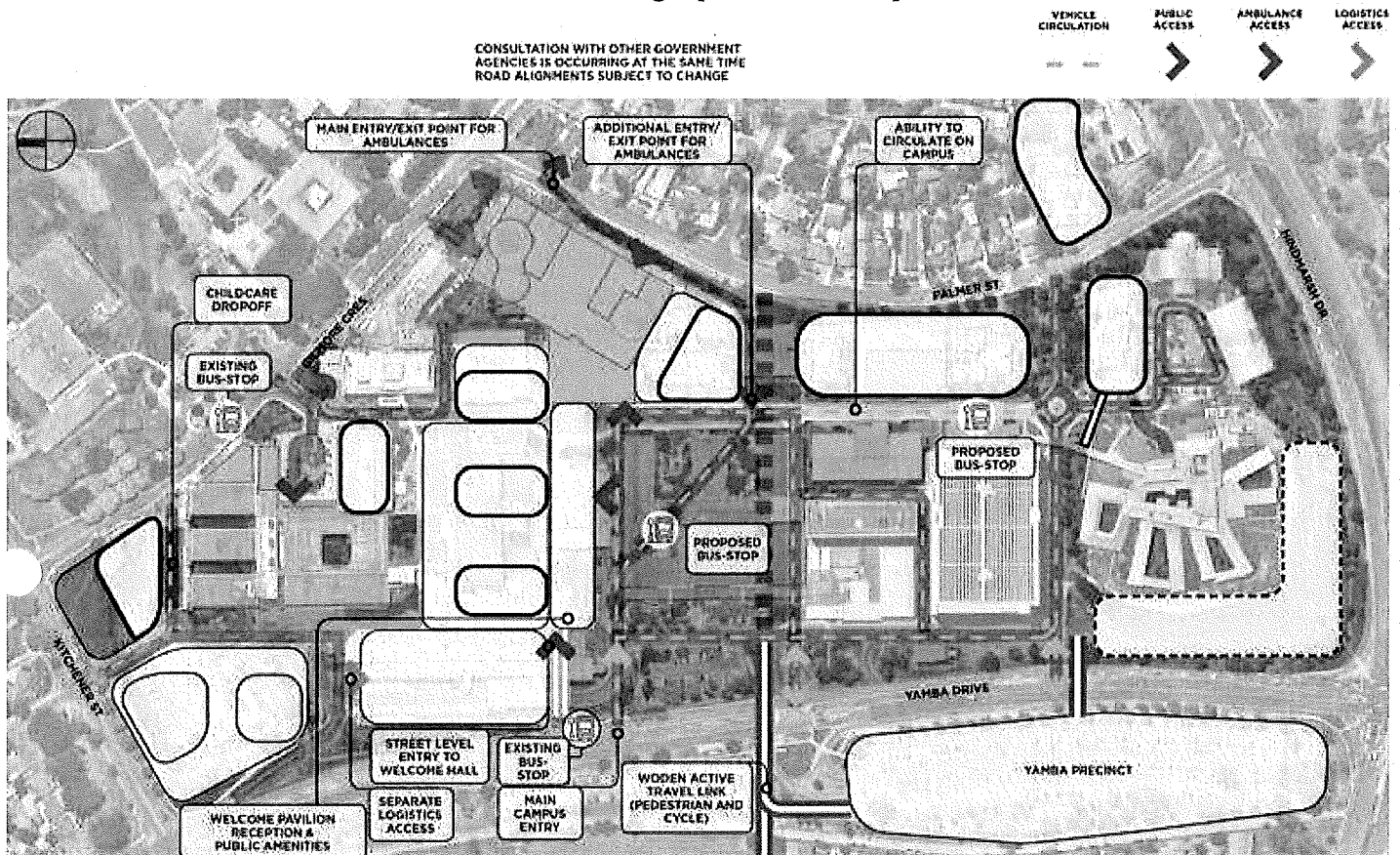


Figure 7 Access and Accessibility (Vehicles)

Management of vehicles on the Campus is critical to the safe and efficient access and operation of Canberra Hospital. There is a variety of vehicles types and users which access the Campus every day. Each user has different requirements. Vehicle types and users include:

- » Private vehicles
 - patients
 - visitors
 - staff
 - students
 - taxi and ride share
- » Commercial vehicles
 - heavy and Medium Rigid service vehicles
 - utilities delivery small cargo
- » Public transport
 - ACT Government Public buses
 - CHS Shuttle bus
- » Service vehicles
 - ambulances and emergency blood

To ensure the best user experience and the greatest operational efficiency, each type and user journey and preferred behaviours has been carefully considered. Wherever possible different types have been separated. Additionally, each user's preferred behaviour is supported. This includes drop off bays alongside the welcome pavilion, drop off at childcare centre locations and improved access and exit options.

Private Vehicles

Private vehicles will primarily access the Campus from Yamba Drive. This new entry acts as the 'front door' allowing direct line of site to the Emergency Department and the main public access points.

Commercial Vehicles

Commercial vehicle movements have been separated from private vehicles. This will ensure operational efficiency and reduce conflicts with traffic flows.

Public Transport

Public transport will also access the Campus via Yamba Drive but will have a dedicated lane to be able to drop users within the central open space proximate to most services and facilities. This is covered in more detail on page 46.

Service Vehicles

Ambulance vehicle entry and egress will change with the delivery of the CSB. Ambulances will access the Emergency Department via Palmer Street. Through the development of the Pathology building there is the opportunity to explore extending road access through to Hospital Road.

Intersections

The Master Plan proposes several new or augmented intersections from the surrounding road network into the Campus. These intersections will require detailed review and investigation through the implementation of the Master Plan. The ACTHD will ensure strong collaboration with TCCS to work through the current performance of the network at each stage and develop detailed designs and investigations to fully resolve each intersection.

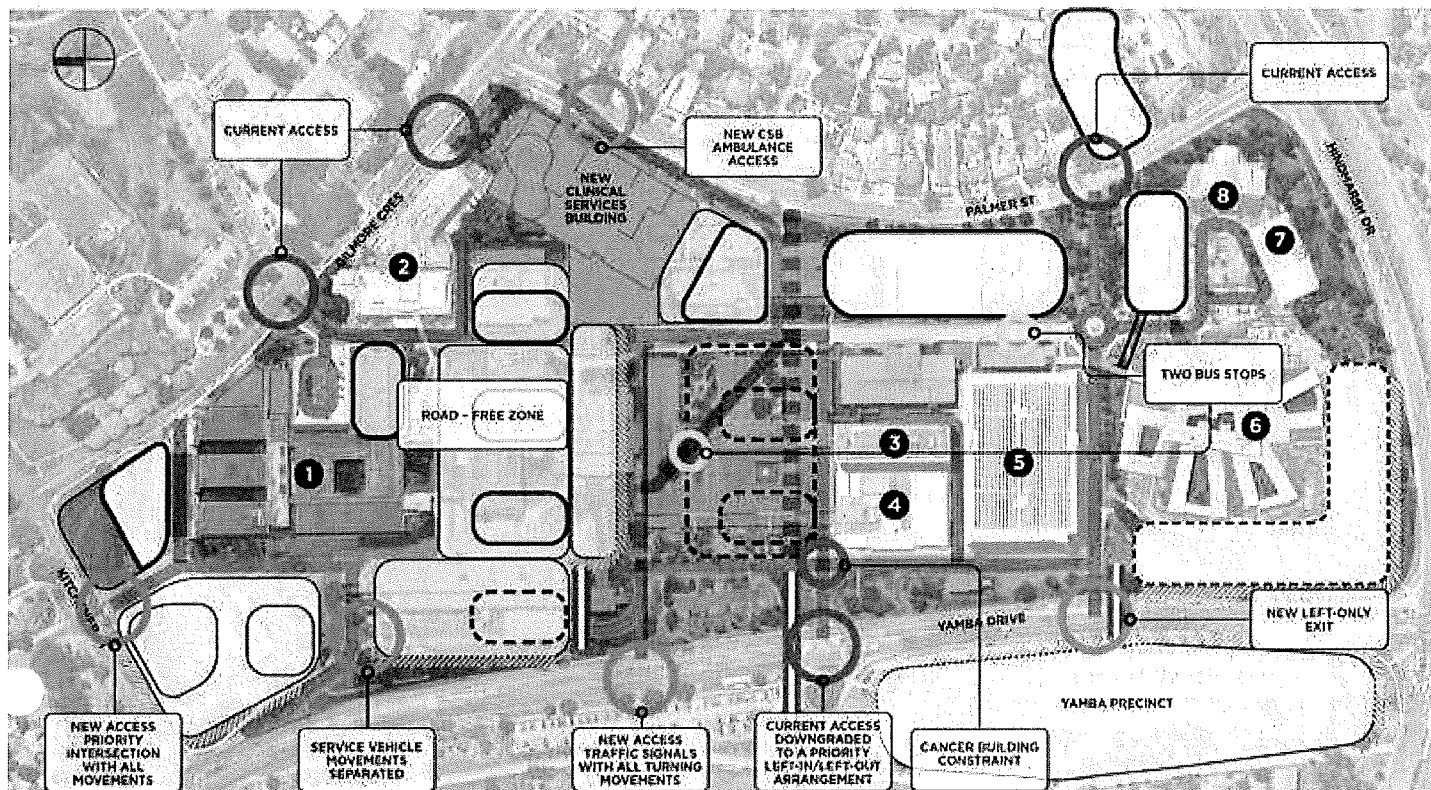


Figure 8 Campus Intersections

Access and Accessibility (pedestrians)

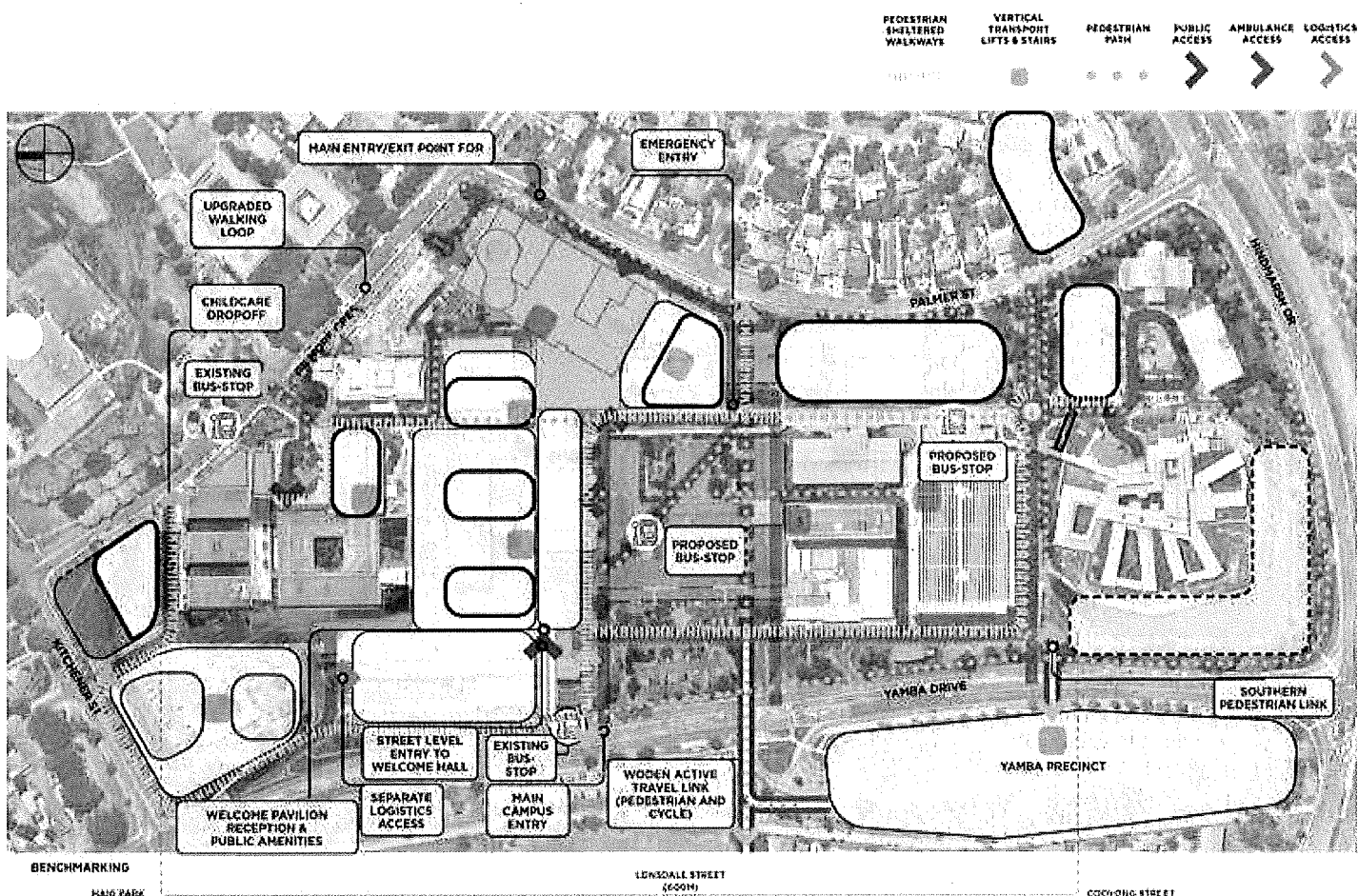


Figure 9 Access and Accessibility (Pedestrians)

The Master Plan ensures a much more walkable and active Campus. Currently, the Campus is hard to navigate and has limited high quality pedestrian infrastructure. Supporting active transport modes is critical to creating a sustainable, healthy and accessible Campus.

The Master Plan establishes a logical, clear and efficient pedestrian network. This network prioritises pedestrian journeys and ensures an integrated approach to design providing seamless internal and external journeys.

Canberra's climate can be challenging at times. To support active travel movements around the Campus consistent external shelter should be provided wherever possible. As redevelopment occurs across the Campus, new buildings should seek to provide consistent and complete coverage to the streetscape. Where this isn't possible or for areas of the Campus that won't be redeveloped, landscaping should seek to incorporate shelter such as the existing covered walkway along Hospital Road.

The network of paths will be as level and consistent as possible to support ease of movement. Consideration of paving materials and quality will be given to improve navigation and amenity. Additionally, to support the performance of the network improved wayfinding and signage should be integrated into the design.

Wayfinding

To support better navigation around the Campus all wayfinding and signage will be improved. This will include review and redesign of all existing signage and recommendations for additional wayfinding methods.

Wayfinding should support a robust and holistic approach ensuring people of different abilities, ages and cultures can efficiently and intuitively navigate the Campus. This includes informing design of landscape, architecture, art, colour, naming, building form and structure and location of facilities.

To achieve this the existing CHS Signage Manual and Design Guidelines will require a comprehensive review and update.

Naming

As part of improved wayfinding and navigation consideration should be given to building naming conventions. Ideally this will look at precinct, number, name and function.

Naming over the years has reflected the development process, that is with a specific project approach. As the Campus has expanded and redeveloped the logical numbering sequence has been lost. Numbering should be reviewed and to reflect a logical sequence to users. Naming should also include a meaningful name, including names from Ngunnawal language. The United Ngunnawal Elders Council should be engaged in this process to assist in the identification of appropriate names.

Cycling

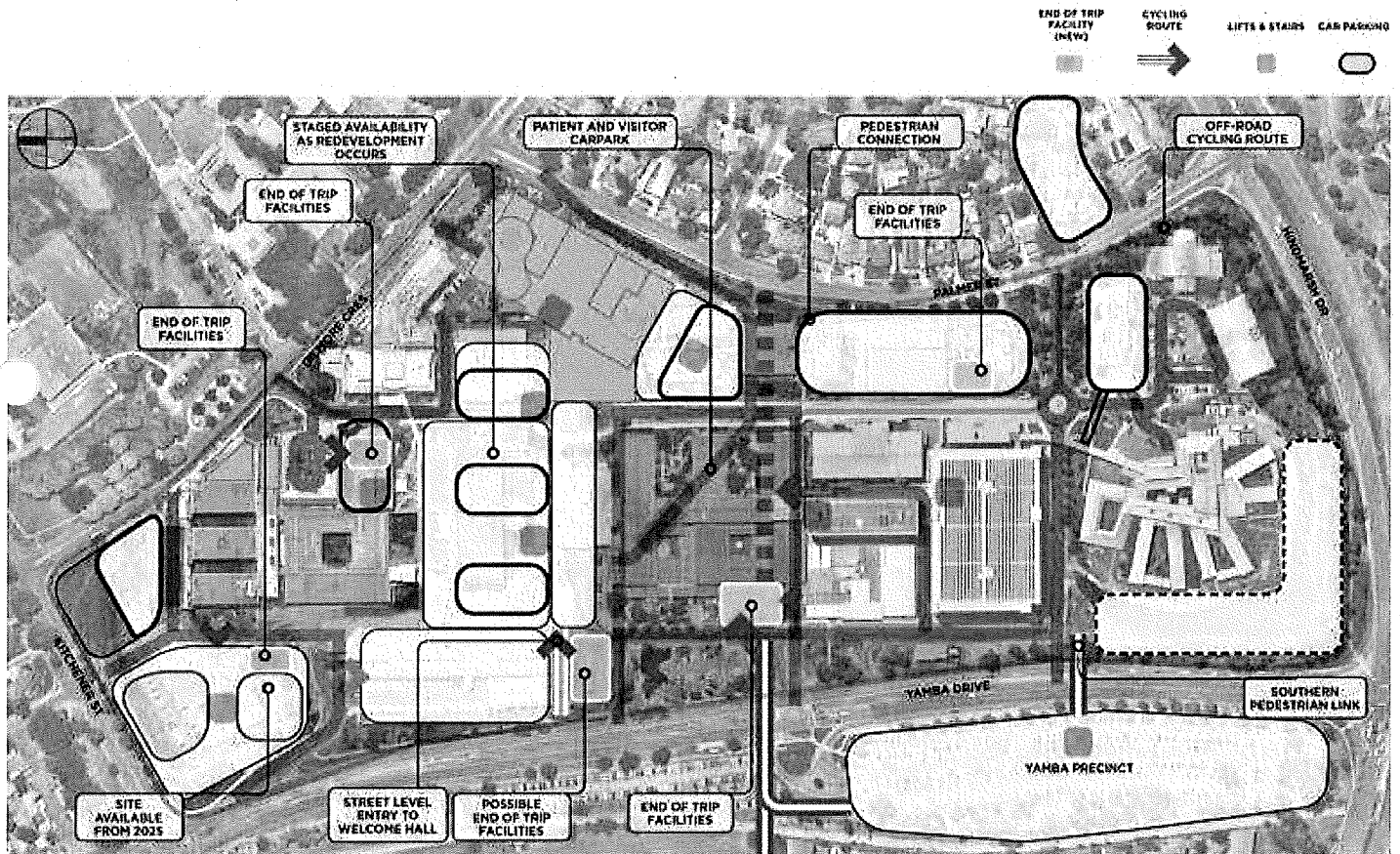


Figure 10 Cycling

Cycling and active travel represent one of the most important modes of travel. They support healthier lives, equitable access and they help to support sustainability targets, support local economies and reduce our reliance on private vehicles and demand on infrastructure like car parks and roads.

The Master Plan identifies better infrastructure for cyclists through the upgrade and establishment of a highly accessible and high-quality cycle network. This network will be connected to the broader cycling network improving the connections to the Woden Town Centre and the Garran shops.

It will also be complemented by improved end of trip facilities. The path network will be logical, clear and direct.

The commuter network will be separate to the pedestrian network to reduce conflict.

End of trip facilities will be provided in logical locations and will be designed to remove as many barriers to cycling as possible. This includes ensuring adequate size, lockers and storage, drying facilities, secure bike storage and maintenance equipment and large, well provisioned bathroom facilities to meet expectations and requirements of users.

Public Transport

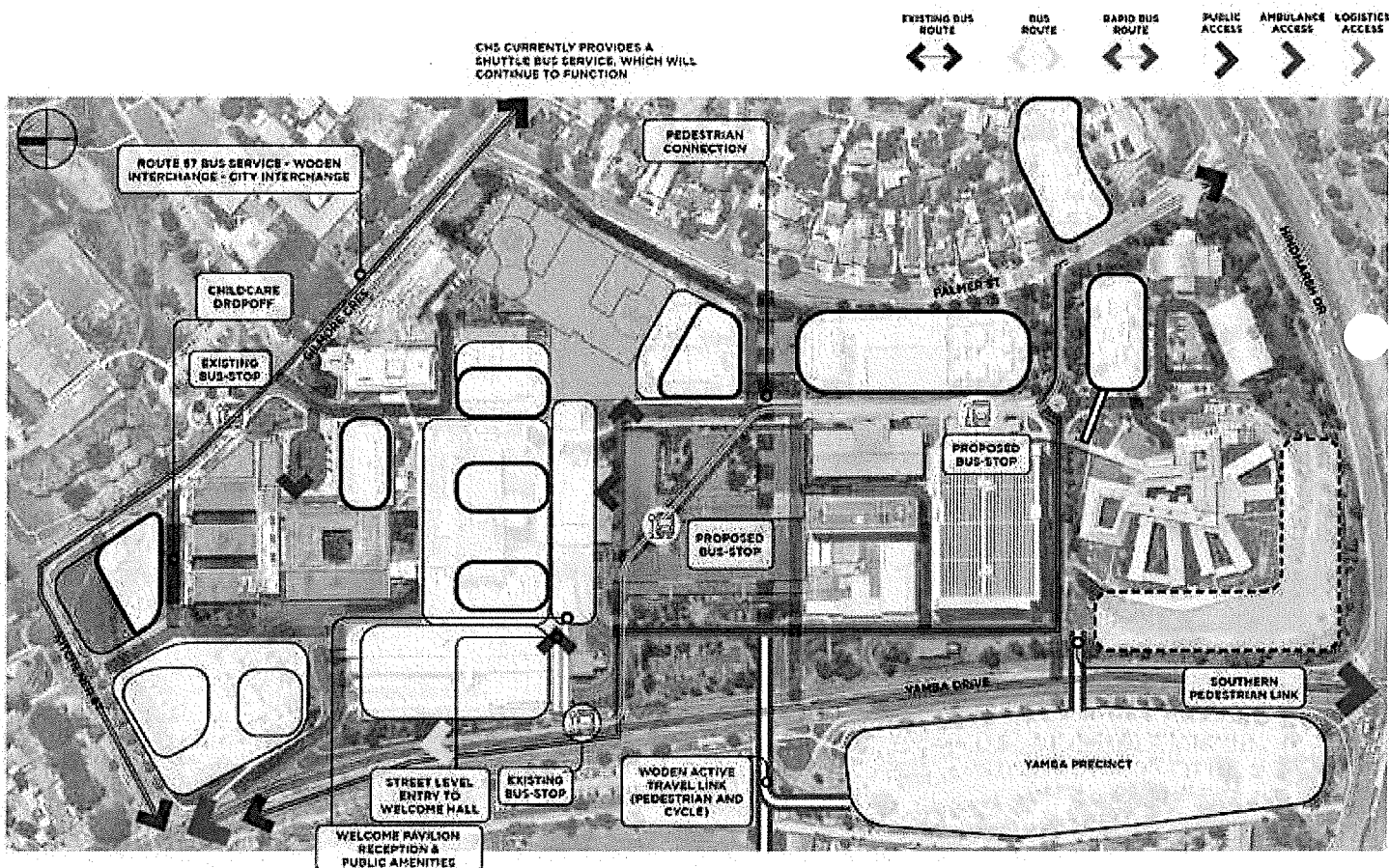


Figure 11 Public Transport

Public transport on the Campus is critical to ensure equitable access to the Campus. The two main services will continue to operate. This includes the Rapid (R6) service which drops passengers along Yamba Drive and the other which travels through the Campus every 15 minutes. These services will be reconfigured during each phase of the development of the Campus. The final phase of the Master Plan will see a dedicated bus stop located adjacent to the Main entry of the new Clinical Block and the Emergency Department. An additional bus stop will be provided in the south of the Campus to service the Training, Research and Innovation precinct and Mental Health precinct.

Additionally, the CHS shuttle service will work in tandem to move passengers around the Campus.

Bus services will be coordinated with TCCS to work as efficiently as possible primarily connecting passengers from the light rail when dropped at the Woden Interchange.

Bus Shelter

Bus shelters will be provided at designated locations to visually identify stops, provide shelter and information.

Parking

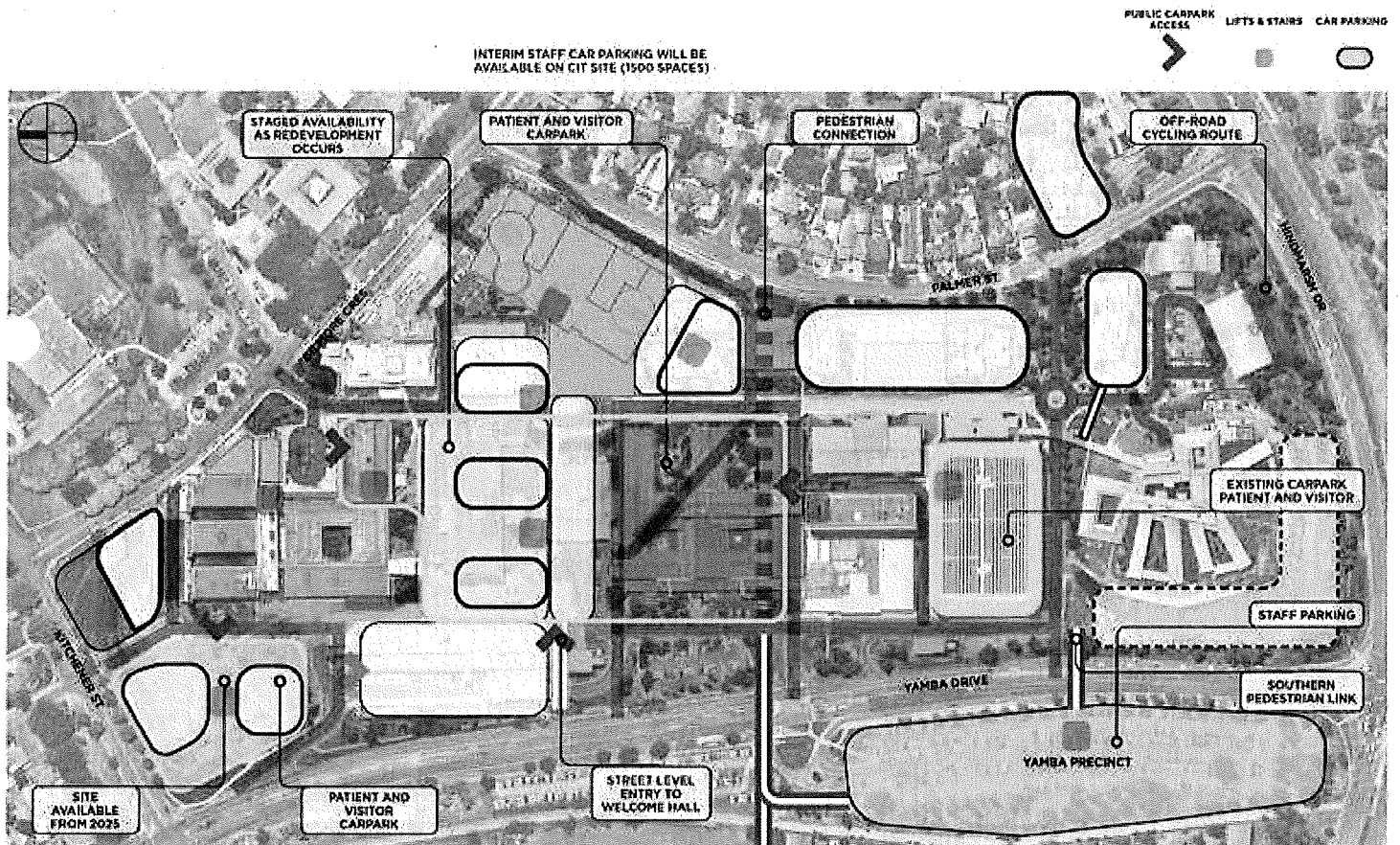


Figure 12 Parking

As private vehicles represent a significant and dominant transport mode to access the Campus, ensuring adequate supply and distribution of parking is critical to operation of Canberra Hospital. As Canberra and the region has grown so to has demand on parking infrastructure. While the Master Plan identifies and supports other modes of transport there are significant increases to parking across the Campus.

New car parking established in the Master Plan has adequate area to provide more than sufficient supply to parking demand levels over the next 20 years. This will require further investigation and analysis to determine precise parking demand, supply, timing and traffic impact at the design and feasibility stage.

Locations proposed ensure an even distribution of parking across the entire Campus. The Yamba Precinct is immediately available for development and is able to supply a bulk of staff parking requirements. This carpark would connect to the Campus proper (Section 53 Garran) via skybridges. These bridges would also support public pedestrian movements traveling between the Campus and the Woden Town Centre. The Gateway Precinct will provide a much-needed increase of parking supply in the northern end of the Campus to support visitors and staff to the CHWC and the future uses of the Gateway Building.

The Master Plan also establishes a coordinated approach to the delivery of parking, ensuring that as each project is developed a continuous underground carpark can be established under the new clinical blocks and the current Building 3 location. This carpark will support the majority of patient and visitor parking on the Campus. This will allow people the ability to quickly access parking infrastructure in the centre of the Campus, park near their desired service, travel under shelter and in a secure environment to a nearby lift and travel directly to the public level of Canberra Hospital.

Additionally, the existing structured carpark in the southern part of the Campus will remain but will be investigated to identify the ideal timing

and allocation of staff and public parking as the Campus transforms over the next 20 years.

Existing and future parking should be evaluated for the inclusion of electrical vehicle (EV) charging. As the ACT and the world reduce emissions, EVs are likely to become much more common. To support the transition to net zero by 2040 providing this infrastructure will be important in supporting that change.

Parking timing restrictions will be monitored and evaluated as the Campus changes. There is a balance to be struck between providing spaces for as many as possible and ensuring users have enough time to access services without stress.

Culture

In continued acknowledgment of country and the traditional owners, the Ngunnawal people, our shared cultural identity should be celebrated and demonstrated throughout the Campus. The ACT Health Reconciliation Action Plan (RAP) embraces the Statement of Commitment contained in the ACT Aboriginal and Torres Strait Islander Agreement 2015–18 and recognises the importance and value of:

- » working together in a collaborative, inclusive and transparent manner
- » forming and strengthening partnerships and working with individuals, groups, and community stakeholders
- » providing accessible and equitable services that promote the fair distribution of economic resources by aiming to improve the social, environmental, economic and cultural infrastructure of the local Aboriginal and Torres Strait Islander community
- » acknowledging the responsibility to provide opportunities of life-long learning that develop the health, wellbeing and connection of Aboriginal and Torres Strait Islander people and their families.

Cultural Overlay

All future projects should be viewed through the lens of Aboriginal and Torres Strait Islander peoples. Projects should include consultation with relevant peak bodies and users to identify opportunities for the improved access to healthcare for First Nations people and to identify opportunities to interweave cultural identity into the built environment.

Aboriginal and Torres Strait Islander culture should be celebrated and the hospital designed to be welcoming and safe for First Nations people. Culture should be at the forefront of all design thinking across all Master Plan projects and should include strong collaboration.

Buildings and public realm

- » Aboriginal Liaison Office should be easy to access and identify on arrival to the Campus
- » culturally sensitive spaces should be provided within buildings and within the landscape

- » identify opportunities to interweave Aboriginal and Torres Strait Islander culture through collaboration with traditional artists on development phases – consider opportunities such as façade, carpet, colours, signage, anything to create a fully integrated and immersive cultural landscape and public realm
- » include appropriate sculptures within the landscape
- » buildings or structures should reference Ngunnawal or Aboriginal design
- » provide space for Ngunnawal and other Aboriginal and Torres Strait Islander people, ideally located on the main public level easy to identify and access
- » space for families to gather, access to affordable meals, kitchens or BBQ facilities
- » incorporate bush tucker and traditional healing plants into the landscape. This could be paired with educational signage and programs and co-located with the Health Loop
- » name buildings, places and spaces using Ngunnawal language.

Accommodation

- » accommodation projects should incorporate culturally sensitive design to support Aboriginal families needs.

Open Space

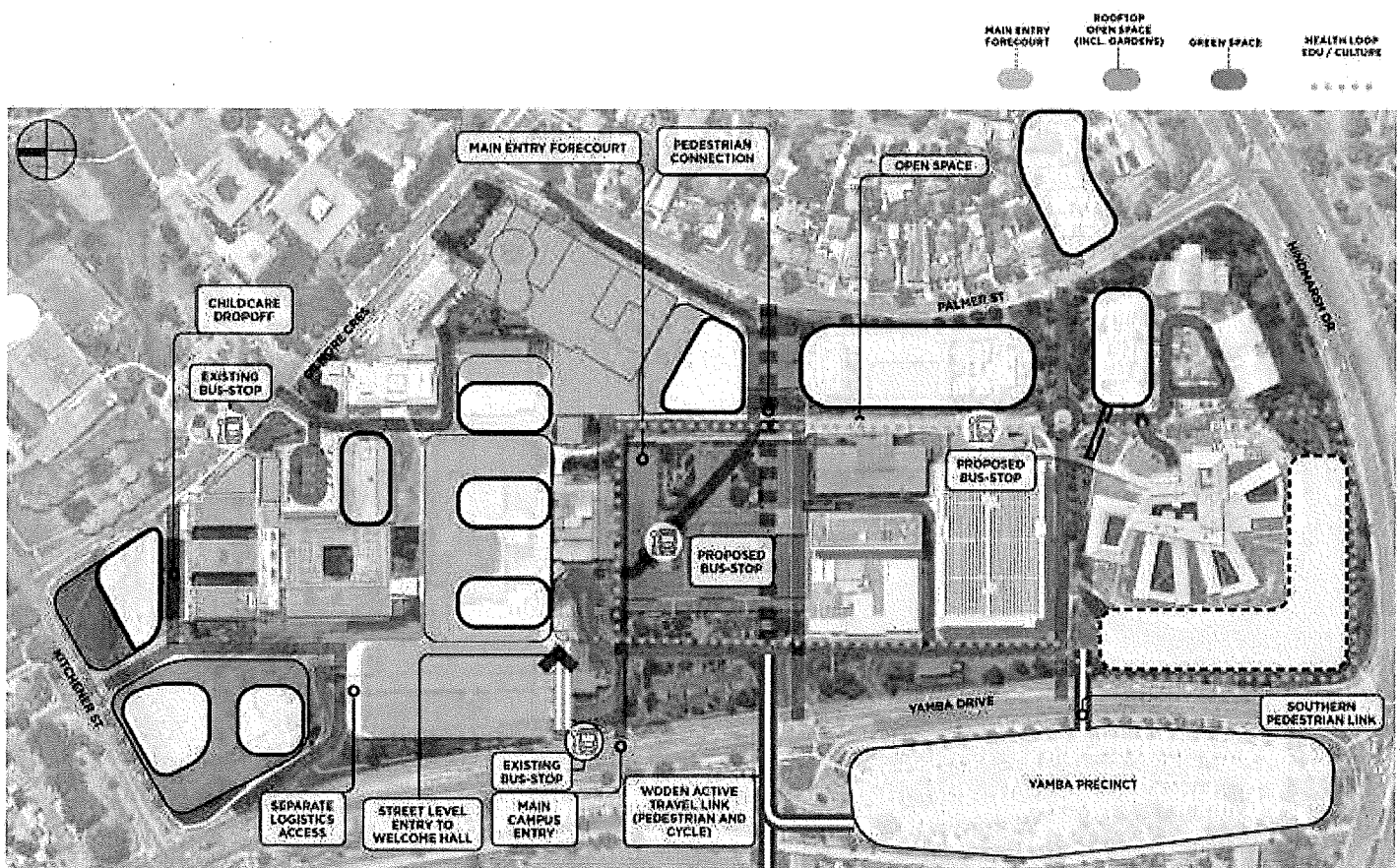


Figure 13 Open Space

The Master Plan will see the ‘opening up’ and greening of the Campus. The Campus open space network will be upgraded and improved to complement new buildings, roads and paths to ensure high quality amenity, cultural representation, wayfinding and a portfolio of uses for the diverse users of the Campus.

New spaces on the Campus will include spaces to rest, exercise, learn, mourn, reflect, decompress, get together with family, gather and recreate. The Campus will support a full 24/7 healthy and active life.

As the campus is redeveloped it is important that the existing stock of trees across the campus are evaluated to ensure wherever possible they are retained, enhanced and incorporated into new landscapes and public spaces.

Legend

- 1 Central Open Space
- 2 Welcome Pavilion
- 3 Training, Research and Innovation Precinct
- 4 Rooftop Open Space
- 5 Palmer Street
- 6 Bateson Road
- 7 Hospital Road
- 8 Health loop
- 9 Healing Gardens
- 10 Communal open spaces
- 11 Quiet contemplative spaces
- 12 Staff only outdoor spaces

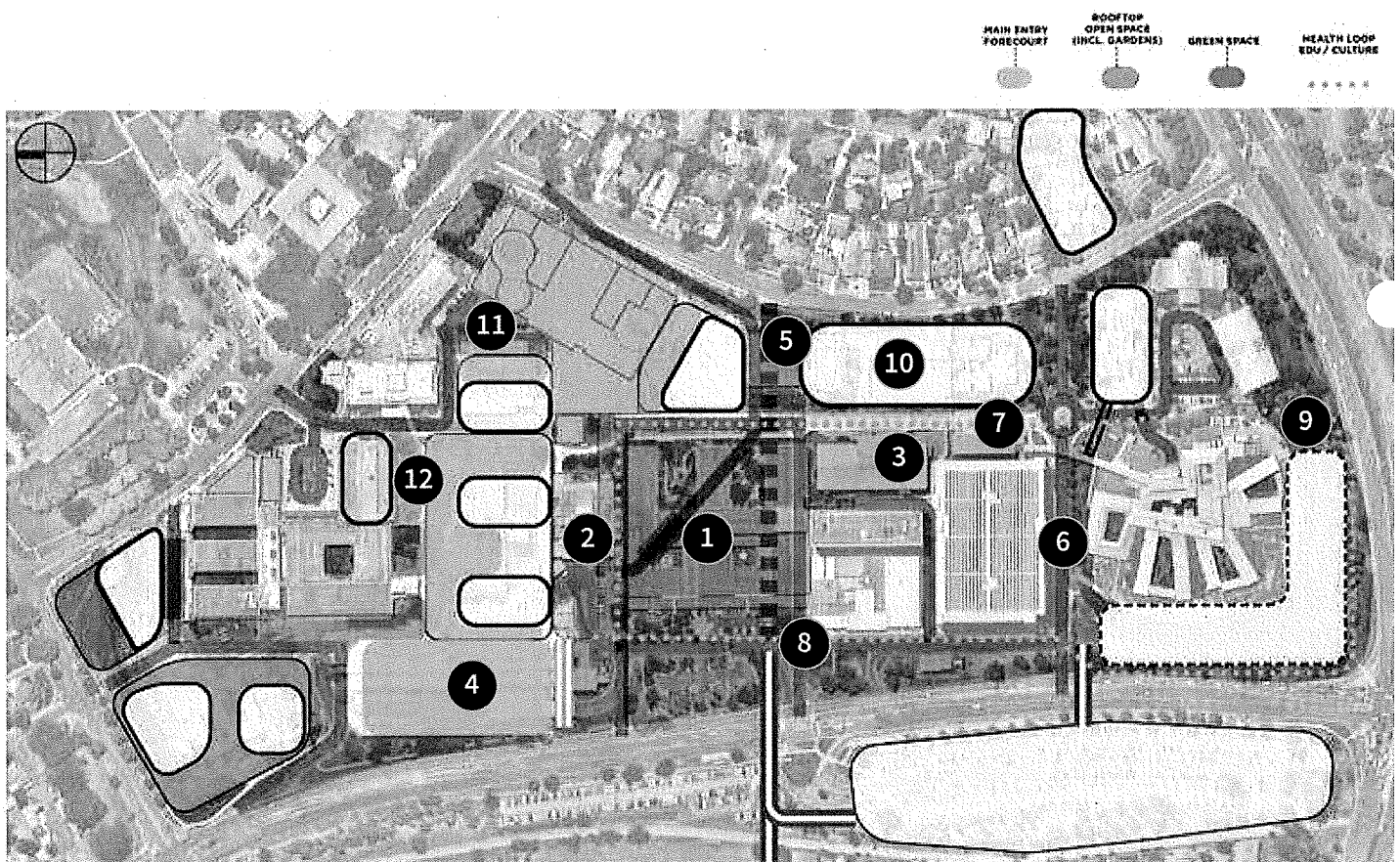


Figure 14 Open Space 2

1. Central Open Space

The Central Open Space represents the heart of the Campus. Co-located with the busiest functions on the hospital and centrally located this space will have high demand and need to support an array of uses. The Central Open Space will be built on top of the Acute Hospital Precinct carpark. As such the design will need to respond to this challenge. Additionally, the extent of the Central Open Space will need to thoughtfully resolve level changes from Yamba Drive to Hospital Road through the creation of terraces. The Central Open Space should also include infrastructure to support unforeseen events like pop up events or alternatively pandemic responses such as a temporary emergency facilities. Beyond the life of the Master Plan the Central Open Space allows for long term expansion, growth or the redevelopment process of the Campus to continue.

The Central Open Space should include facilities for groups and families, shelter, seating and artwork. The inclusion of any trees or taller elements should not encumber lines of site from the Yamba Drive entry to the ED.

Commercial

The Central Open Space is a large open space. To assist in the activation and utilisation of this open space the area should utilise pavilions to provide commercial uses.

2. Welcome Pavilion

The Welcome Pavilion should support activation of the Yamba Road streetscape. This can be achieved through articulation of the building and a permeable interface with the street. Landscaping along the Yamba Road entry to Hospital Road should support high volumes of pedestrian movement and support drop-off and pick-up.

3. Training, Research and Innovation Precinct

With the establishment of the Training, Research and Innovation Precinct, this part of the Campus should foster a university character. This character should support outdoor learning, student life and teaching staff. The current Building 15 site, once decanted, offers the opportunity to be utilised as an outdoor amphitheatre. This would support learning, events, and improved amenity for the Canberra Region Cancer Centre.

The pedestrian connection to the skybridge is also established along the northern side of the Training, Research and Innovation Precinct. This supports better east/west movements and improved permeability into the Campus from Garran.

4. Rooftop Open Space

Rooftops provide an opportunity for additional greenspace across a constrained Campus. This will provide additional open spaces for activities and functions but also improve the outlook of recovering patients. This will support better wellbeing and faster recovery times.

5. Palmer Street

The landscaping along the western side of Palmer Street should improve the interface and amenity for existing residents along Palmer Street. This includes providing wider paths, screen landscaping and improved street tree coverage.

6. Bateson Road

Existing street trees along Bateson Road should be retained and increased. Additionally, paving and footpaths should be improved to support better pedestrian movement.

7. Hospital Road

Hospital Road represents the 'main street' of the Campus. As such this street should support high levels of traffic, people and represent the highest levels of amenity. Hospital Road will incorporate shelter, art, seating, signage and high-quality paths. The road and path network should be as accessible as possible featuring wide, level and consistent paving.

To support the activity and vibrancy of Hospital Road buildings should orientate to Hospital road locating entrances and lobbies along this frontage. Frontages should be open, transparent and promote activity and visual interest.

8. Health Loop

The Health Loop provides a path with pedestrian priority that staff, visitors and patients can utilise for recreational walking and exercise. The Health Loop will feature outdoor gym equipment, co-locate with a Campus gymnasium, and connect with cultural and educational elements introduced in the landscape.

9. Healing Gardens

The Mental Health Precinct will include healing gardens which will provide therapeutic and program gardening space for patients on the Campus.

10. Communal Open Spaces

Communal open spaces will provide semi private spaces for informal gathering of staff and students.

11. Quiet Contemplative Spaces

Quiet spaces will be provided in private locations to allow people to have space to process, grieve, decompress or have hard conversations.

12. Staff Only Outdoor Spaces

Dedicated space for staff will be provided in the Acute Hospital Precinct. This is to allow staff to lunch, decompress and get away from the operational stresses of the Campus.

Cultural Overlay

All landscaping should include Aboriginal and Ngunnawal cultural overlay. This should feature in landscape design through the inclusion of traditional healing plants, bush tucker, art or bespoke solutions such as custom materials or inclusions.

Horizontal Connectivity and Vertical Stacking

Horizontal Connectivity

The Master Plan allows for separate and discreet movements across the Campus. The current Campus has built in inherent conflicts of movement. This is evident in Building 2 for example where public, clinical and logistic movements converge at the same point and level.

Through redevelopment, the Master Plan will ensure logistic, public and clinical movements are separated, direct and efficient. This will also support long term planning by establishing consistent levels. This is to avoid level 1 in one building being different to level 1 in another.

Logistics to be connected and contiguous on Level 1, all public access to be connected on Level 2, and clinical and patient areas connected on Levels 3 and above.

Parking indicated within the Acute Medical Precinct will be located on Level 1 and below and will require logistic connections to be maintained across Level 1.

To connect Building 19 the Canberra Region Cancer Centre, a combined logistic and clinical link will be established underneath the central open space on Level 1. Public connections can be made via external sheltered walkways or directly across the central open space.

Logistic movements on Level 1 will require contiguous uninterrupted movement from the new logistics centre built on the western edge of the Campus. This will utilise and expand existing tunnel networks.

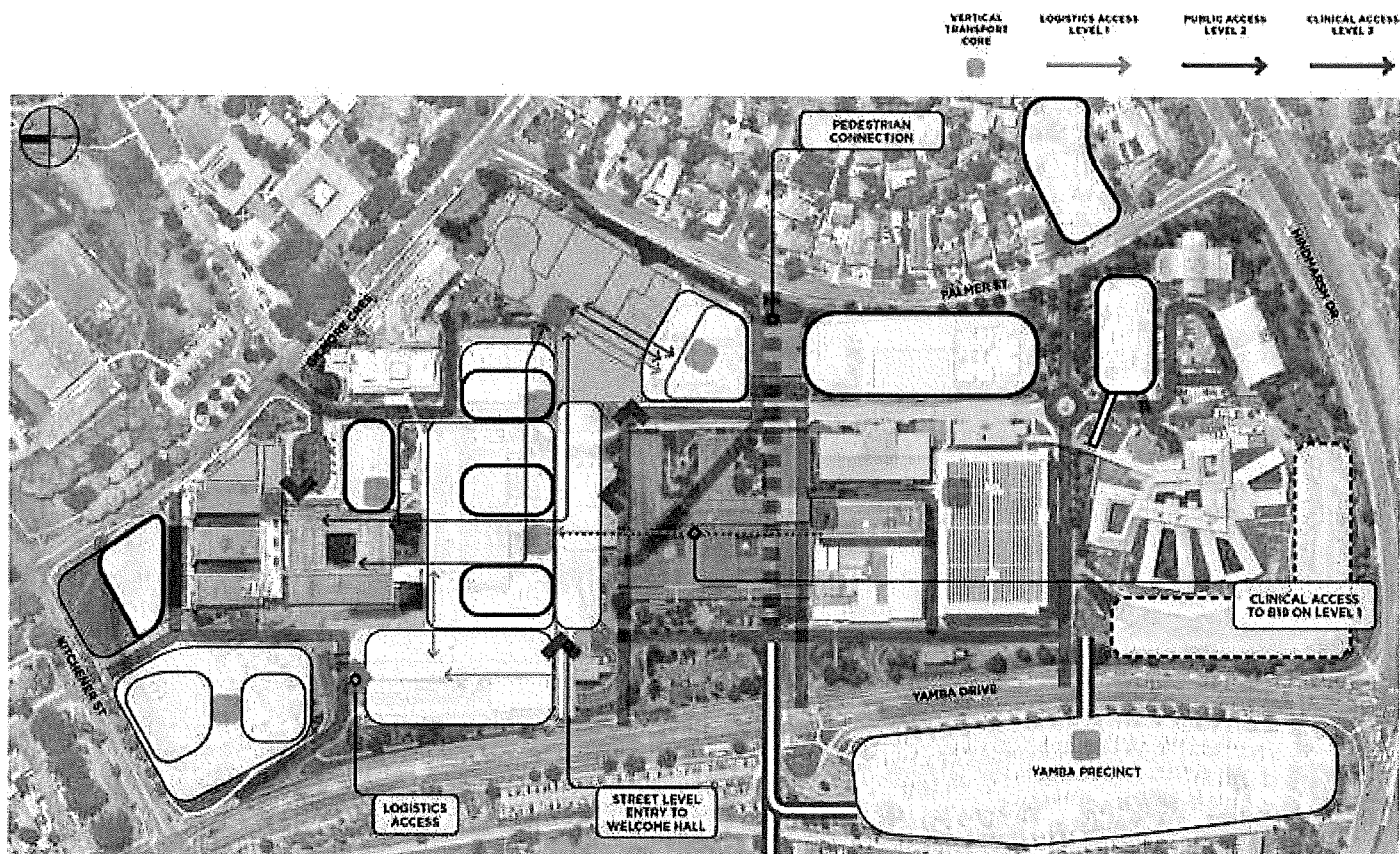


Figure 15 Horizontal Connectivity

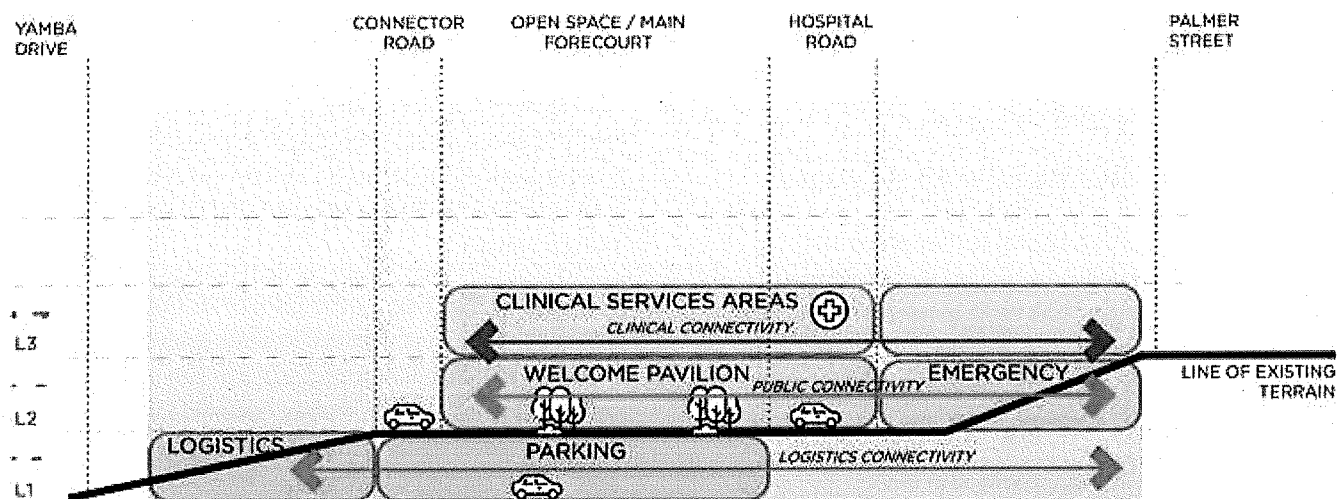


Figure 16 Vertical Stacking

Vertical Stacking

Further to the separated horizontal connectivity, vertical stacking will be employed to increase efficiency. This will see the even distribution of lift cores which can support vertical movement into specific uses like inpatient care, ICU, ED and Maternity. Where possible lift cores will be provided to the basement parking within the Acute Hospital Precinct to allow direct and convenient access to services.

Education

The Campus currently accommodates multiple education, training and research providers. As the main tertiary trauma hospital this role will be retained and enhanced through the implementation of the Master Plan. This precinct is already emerging with the recently completed Building 8 which provides additional teaching capacity on the Campus with the inclusion of simulation space.

Teaching is typically delivered in the operational areas of the Campus. However, there is a need for shared learning space for additional study and learning, which could include lecture halls, meeting rooms and simulation space. New teaching, learning and education spaces should promote the best education models and collaborative multidisciplinary learning.

In 2019, the ANU announced the intention to develop a new Medical School on campus alongside the development of the (then) SPIRE Building. Since that time extensive consultation has been undertaken with the University regarding the Medical School and its vision for the ANU's presence on the campus, including through the newly formed ANU and Canberra Hospital Master Plan Taskforce.

The ANU has a vision for an Advanced Health Training Precinct, a world-leading translational research facility within the Canberra Hospital precinct. This includes the revitalisation and expansion of the ANU medical school including replacement of the existing ANU facilities in Building 4 on the campus.

The Government will continue to work with the ANU and other education and research organisations in the development of the Training, Research and Innovation Precinct.

Zero Emissions Strategy

The ACT Climate Change Strategy requires the ACT to transition to net zero emissions from Government operations by 2040. The Master Plan enables this target to be achieved. As the ACT has a 100 per cent renewable electricity supply, the main objective for the Campus is to convert all buildings to become fully electric services and remove any reliance on gas. As such all new buildings will be required to be all electric. Existing buildings with carbon emitting building systems which are not proposed to be renewed will require retrofit. This process is guided by the Zero Emissions Strategy.

Further to this, fleet vehicles associated with health service delivery will transition to renewable fuel sources. To support this change electric vehicle charging will be included within project scopes for consideration. This will support Ambulances, fire and rescue and fleet vehicle transition to net zero.

Climate Change Preparedness

In addition to reducing emissions the Campus will need to respond to a changing climate. With weather events becoming more intense and erratic, buildings and the open space network will be under increasing pressures. This has been demonstrated by significant weather events such as bushfire smoke and hailstorms. These events need to be considered in regards to refurbishment of existing assets and the design of new assets.

Building design

Building design of existing and new assets needs to fully consider and respond to the impacts of climate change. This should include impacts from hail on rooftops and plant, smoke and dust, increasing heat, and extreme winds and rain.

Open Space

The open space network across the Campus will also require consideration while being designed and upgraded to mitigate the impacts of climate change. This includes increasing the provision of soft landscaping and improving permeability to cool the Campus and reduce heat island effect. Canopy cover will be increased beyond the ACT Government 30 per cent target. Trees and plants will require improved infrastructure to support establishment and to fare against extreme weather and drought.

Additionally, the improved open space network and building design will support sustainable behaviour from the users of the Campus by supporting walking and active modes of transport and ensuring people have safe, sheltered or enclosed options to choose from.

Fire

While the redevelopment of the Campus occurs, it is critical to ensure a principles-based approach to the ongoing management of fire safety. Collaboration early and often should be undertaken with Emergency Services Agency (ESA) in the design, delivery and commissioning of new buildings and spaces.

Key matters to consider include:

- » access for ESA's largest aerial appliances
- » safe deployment areas on structures like underground car parks
- » emergency evacuation locations
- » reasonable performance solutions identified and thoroughly developed.

Helicopter

The existing Helicopter landing pad will relocate from the north west corner of the Campus to the northern rooftop of the CSB. The Master Plan ensures that the preferred flight path of approaching and departing helicopters is accommodated. Future development which contemplates significant height proximate to the new CSB should consider and resolve any impact to flight paths.

Height

As the Campus is restructured it will be required to maintain a compact and efficient form.

There are three height controls to consider at the implementation of each phase.

Yamba Drive is currently controlled by the Territory Plan. A range of rules and criteria apply with the key criteria requiring future development to be 'no higher than the established tree canopy along main avenues with primarily landscaped frontage.' Additionally, impact on the adjacent homes will require consideration.

The accommodation precinct or Gaunt Place has a current maximum of two storeys.

The Campus proper (Section 53 Garran) currently does not have a defined height limit. As such, height will be determined by the operational requirements of future facilities, the flight path of the helicopter and the amenity of the Campus and surrounds.

Whilst individual projects will go through the design and statutory development process, the impacts of height should be considered to ensure the best possible outcomes for the overall amenity of the Campus and surrounds. Impacts include overshadowing of open space and other buildings, intensification of prevailing wind and privacy. Further, height should be considered to be utilised in positive ways. Increased height can be used as an intuitive wayfinding tool. This could mean allocating greater heights near places on the Campus that are visited frequently by the public like ED and the Main Entry to the new Clinical Block. Meanwhile, the more 'active' and pedestrian parts of the Campus should support and incorporate human scale interfaces.

IMPLEMENTATION

Phasing

To achieve the fully redeveloped Campus while minimising clinical disruption there are several implementation phases. These phases allow for the construction or delivery of space to allow an existing use to be decanted. This then enables the demolition and redevelopment of a new asset. There are core and time critical phasing works that need to be undertaken to respond to asset age and condition. It should be noted that the Master Plan proposes a high-level phasing strategy and will require a detailed staging and decanting strategy to oversee and guide the delivery of the phases.

Consultation and collaboration

The development of the Master Plan saw strong engagement and input from a broad and diverse cohort of organisations, stakeholders and the community. This process should be continued at the commencement of each project. This process should be tailored for each project and learn from subsequent engagements. The CHE offers an excellent standard regarding significant built assets.

Governance

The Canberra Hospital Master Plan will require a governance structure to oversee the selection, design and development and delivery of projects, phases and adherence to strategic vision, goals objectives of the Master Plan.

This structure should include:

- » CHS
- » ACTHD
- » MPC
- » TCCS
- » EPSDD
- » Relevant clinical Directors
- » HCCA

Key stakeholders in design should include:

- » UNEC
- » ACT Aboriginal and Torres Strait Islander Elected body
- » DRG.

Terms of reference will need to be formed and agreed at the commencement of the implementation of the Master Plan.

Beyond the Master Plan

The Master Plan indicates several locations for expansion of existing services. This includes Mental Health Expansion sites and the Canberra Region Cancer Centre sites. These sites offer logical expansion zones and have been reserved for these purposes should they be required in the short, medium or long term.

The Master Plan enables a significant amount of flexibility for future development. Future development locations will provide unforeseen developments space to be realised.

These spaces include:

- » the Gateway Precinct
- » the roof of the Logistics Hub
- » the Central Open Space.

At the formation of the Canberra Hospital Master Plan 2021–2041 there was discussion around the location and definition of the Mental Health Precinct. As the Adult Mental Health Unit assets age and condition solidifies this services position on the Campus, this location will be retained as the logical and efficient location to continue to deliver mental health services.

It is envisaged that at the end of the life of this Master Plan, that the Mental Health Services position on the Campus should be reviewed to identify if the location and built assets should be retained or if they should be integrated and relocated elsewhere on the Campus to ensure the best possible delivery of mental health services to the community.

WELLBEING IMPACT ASSESSMENT

Canberra Hospital Master Plan Implementation	ACTHD	Wellbeing Impact 1
Purpose of proposal Purpose This proposal will have a significant impact on the infrastructure condition and user experience of the Canberra Hospital, thereby improving the operational effectiveness of the hospital, resulting in improved facilities and experience for patients, staff and visitors. The asset condition and age, current capacity and performance of a number of existing buildings is in a critical state. The Master Plan identified this and is now implementing the first phase of projects to replace these assets. This business case will begin implementing the <i>Canberra Hospital Master Plan 2021-2041</i> (the Master Plan), which was accepted by Cabinet in 2021, by undertaking the design works, planning and detailed costings for the following three new buildings: - o A new pathology building (currently found in building 10), to be built on the site of the existing building 6; - o a new inpatient building (one of two new buildings to replace the inpatient facilities in building 1), to be built on the site of the existing building 4; and, - o a new inpatient building (the other new building to replace the inpatient facilities in building 1), to be built on the site of the existing building 10. This proposal will also upgrade public realm and wayfinding on campus.		
Impact description These projects will enable the future decommissioning of Building 1 inpatient accommodation and the replacement of the existing pathology building. This will save significant expenditure on maintenance on both of these existing buildings. The investment in replacement buildings also enables improved service delivery and increase capacity and accessibility within our health service.. It will support staff satisfaction, efficient workplaces, modern spaces for improved training, learning and service delivery, which in turn will support improved working conditions and morale. Modern facilities will also support staff attraction and retention, reducing turnover. Visitors will also find a more inviting campus, safer, easier to navigate and remove an unnecessary layer of their experience on the campus. People with a disability will also find facilities more accessible as they will be designed for all abilities. This will ensure the campus is empowering, equitable and encourages people to seek care rather than discourage. Further these projects will in turn enable the dramatic physical transformation of the campus. The phasing and projects were carefully planned in the Master Plan to result in multiple interconnected outcomes for the campus. Once implemented these projects will create a more accessible campus, making accessing and navigating the campus easier and more enjoyable. It will allow for the creation of improved open space to support better quality of experience on the campus. This will provide green spaces, improved views, places to recreate, learn, relax or grieve. It will allow for the development of improved active travel connections and infrastructure allowing people to walk and cycle around the campus. These projects will also facilitate the future delivery of underground parking on the campus which will improve all user experiences, which will enable them to quickly park in a weatherproof, secure and efficient area close to the part of the campus they want to visit. This will reduce stress in what is generally a stressful time and support more efficient service delivery.		
Who is affected? All users of the Canberra Hospital – including patients, staff and visitors. This includes all people within the ACT and the surrounding region. The design of these facilities will ensure a diverse range of users are fully considered. This includes consideration of people with disabilities, people of all ages, understanding cultural backgrounds and requirements, genders, sexual orientation, abilities and financial abilities. The surrounding community have been considered through the design of the master plan to minimise disruption to them through the construction of these facilities through thoughtful site selection. This has seen higher acuity and significant buildings located away from residential and community areas. Further the surrounding community will see improved public realm, transport networks and built form improving the amenity of their suburbs. Finally, the new designs will be all electric, which is an important step for the Territory to decarbonise, improving the long-term sustainability of the planet through reduced contributions to climate change.		
Wellbeing domain Health		
Timeframe Between one and five years. The design phase will occur over the first year. This will include consultation with stakeholders who will learn about and inform the long-term vision. Wellbeing will be truly realised at the completion of construction in 5 years. The Master Plan provides a 20-year time frame for full implementation.		
Evidence base and data The Master Plan was informed by the following: • Data underpinning the draft Territory Wide Health Services Plan and Canberra Health Services Clinical Services Plan that		

WELLBEING IMPACT ASSESSMENT

map out future healthcare needs of the community;

- Phase 1 report by SAFM which provided asset age and condition reports;
- feedback from clinicians and CHS staff through Master Plan workshops;
- expert consulting teams (architects, planners and engineers); and,
- Phase 1 and 2 community and stakeholder engagement (<https://www.health.act.gov.au/about-our-health-system/planning-future/canberra-hospital-master-plan>).

The Master Plan outlines that the demand for health services is projected to rapidly increase over the next 20 years due to an ageing and growing population, availability of new medical technology, a greater prevalence of chronic diseases and increasing consumer expectations. The Master Plan identified that a number of the original buildings that are still being utilised today, including the inpatient tower block, are at the end of their useful life the Territory Wide Health Service Plan and Canberra Health Services Clinical Services Plan provide growth and demand information associated with the campus and from Canberra and the surrounding region. The Master Plan and implementation of individual projects respond to the identified needs of that growth and replace ageing infrastructure. The current pathology services occupy building 10, which is an aged building that is not fit for modern pathology services. Accommodation for staff and for new medical equipment is extremely cramped. Pathology services will need to grow as services grow, including the opening of the Clinical Service Building (CSB) in 2024, which will drive increases in demand for pathology services. Consultation and engagement also identified that the user experience of the campus was poor and in need of intervention.

Accountability and evaluation – how will we know this proposal has been successful?

The Canberra Hospital Master Plan established both the governance and policy foundation for the delivery of its implementation. This will provide the relevant bodies for each project as well as overarching bodies to ensure strategic direction and objectives are being realized.

Time and budget will be managed through the Master Plan Implementation PCG as well as project reporting to the Executive Group Manager of the Strategic Infrastructure Division.

Finally, each project will be evaluated against the CSP with Health Service Planning, CHS and MPC to ensure each project meets requirements for care and improves the outcomes of the next.

Key relationships

The following stakeholders were consulted through 2 phases of consultation the development of the Master Plan:

- ACT community through two YourSay consultation rounds;
- Canberra Hospital Expansion Local Community Reference Group;
- Aboriginal and Torres Strait Islander Consumer Reference Group; Elected Body and United Ngunnawal Elders Council;
- Disability Reference Group;
- unions including the Community and Public Sector Union, the Australian Nursing and Midwifery Federation, Australian Salaried Medical Officers Federation, Professionals Australia; the Health Services Union and the United Services Union;
- Woden Valley childcare centre on campus;
- Ronald McDonald House;
- National Capital Private Hospital; and,
- all ACT tertiary education institutions.

The following stakeholders will be consulted for this project and were previously consulted when developing the Master Plan:

- Patients – represented by Health Care Consumers Association;
- Canberra Hospital staff;
- Garran residents;
- Garran Primary School; and,
- Woden Valley Community Council.

This consultation represented one of the largest in the Territory's history and received a significant response from the community.

At the completion of consultation, the Master Plan was evaluated to ensure it had adequately responded to all issues. This allows us to move forward with individual projects with confidence with an accepted and supported pathway and knowing all key issues upfront for the design process. As each project goes live an appropriate level of engagement and mix of members will be coordinated and included. Generally, all stakeholders will be offered the chance to participate on an ongoing basis.

External stakeholders will be consulted about the three new buildings in a single consultation process, to ensure these groups are presented with the holistic plan for the coming 1-5 years of development on the hospital campus. Internal stakeholders will be consulted on each of the individual building projects, as applicable. Consulting with key stakeholders is essential for this project to ensure the design output meets the needs of the people who will be using these buildings. Staff and users will be consulted to ensure designs are robust and meet multiple outcomes. This includes looking beyond the functionality of the building from a clinical point of view to ensure, amenity, safety, cultural, environmental, and accessibility outcomes are resolved successfully. Evaluation of each design will be undertaken through multiple design review process by have an expert project team, user group workshops and project control group which includes stakeholders with greatest investment and requirement in the projects.

