

Funding Released for ECI Phase Early Works	Cabinet	August 2025
ECI Agreement Award (incl. Early Works D&C Deed)	D-G	February 2026
Early Works Development Application Approval	Territory	January 2026
Enabling Works		
Cabinet Comeback		
Approval for the release of Enabling Works	Cabinet	May to August 2025
Funding Released for Enabling Works	Cabinet	August 2026
Appointment of Contractor	D-G	January 2026
D&C		
Investment Decision		
Main Works Business Case Approval	Cabinet	Mar-May 2026
D&C Deed Award (Main Works)	D-G	January 2027

13.3 Timeline Assumptions, Risks, and Dependencies

The assumptions for the timeline's development were informed through Project team consultation and benchmarked against prior similar projects.

The key timeline risk is the uncertainty of the EWBC Early Works scope approval, which impacts:

- Time required for the engagement of the Early Works subcontractors, pending approval.
- Time for review of Subcontractor Trade Packages prior to issuing to the market for tender.
- Availability of subcontractor labour and resources to meet the commencement date if the approval is not granted in time.
- Securing trades in a market where there is a potential labour shortage.

Risk mitigation strategies for the above risks will be developed in the early part of the VECI Phase to help manage and mitigate impacts on the timeline. The timeline of the Project will also be interdependent on the progress of the Enabling Works projects.

Appendices

Appendix A - VECI Agreement – Contract Summary

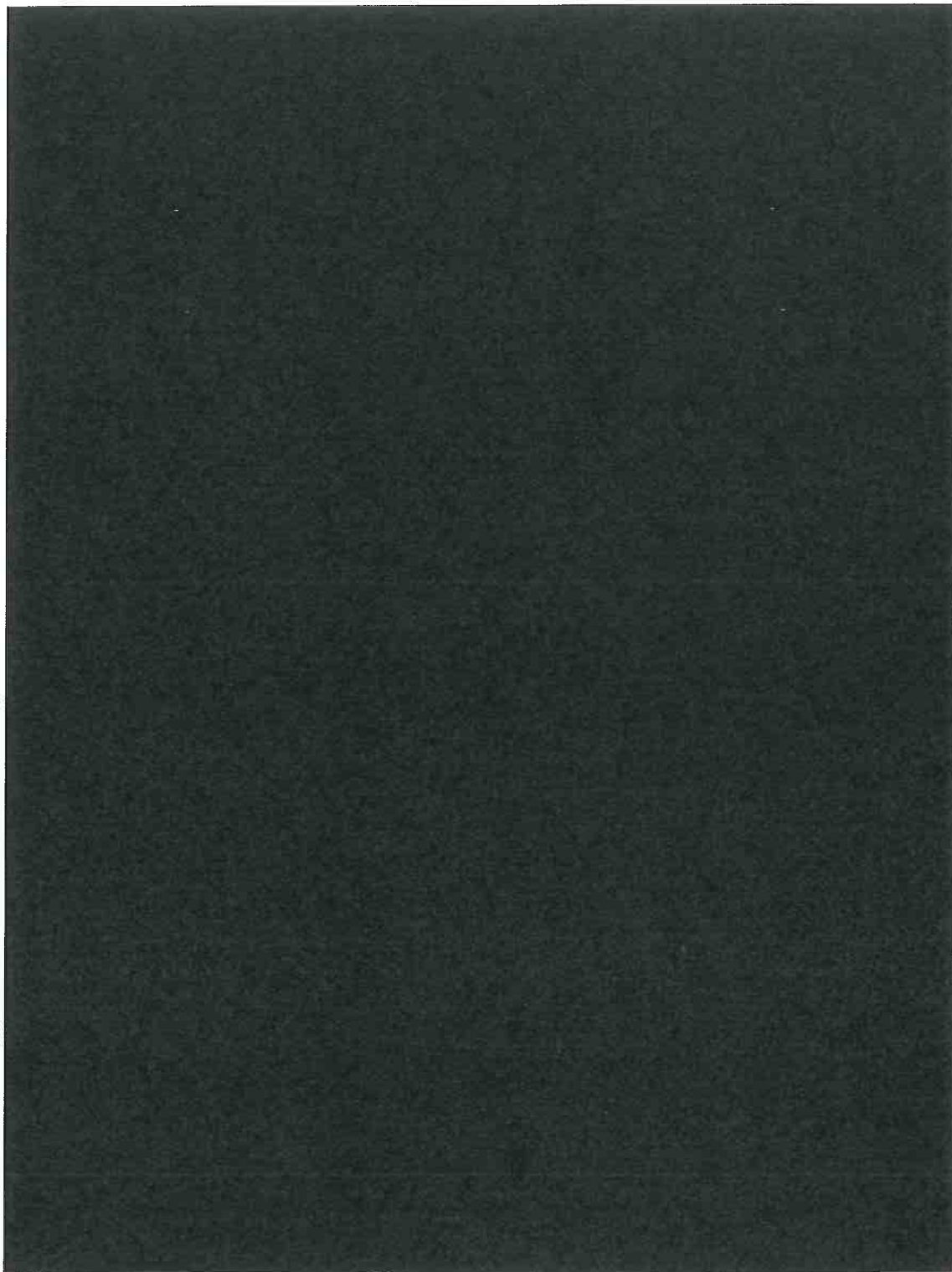
Appendix B - ECI Agreement – Contract Summary

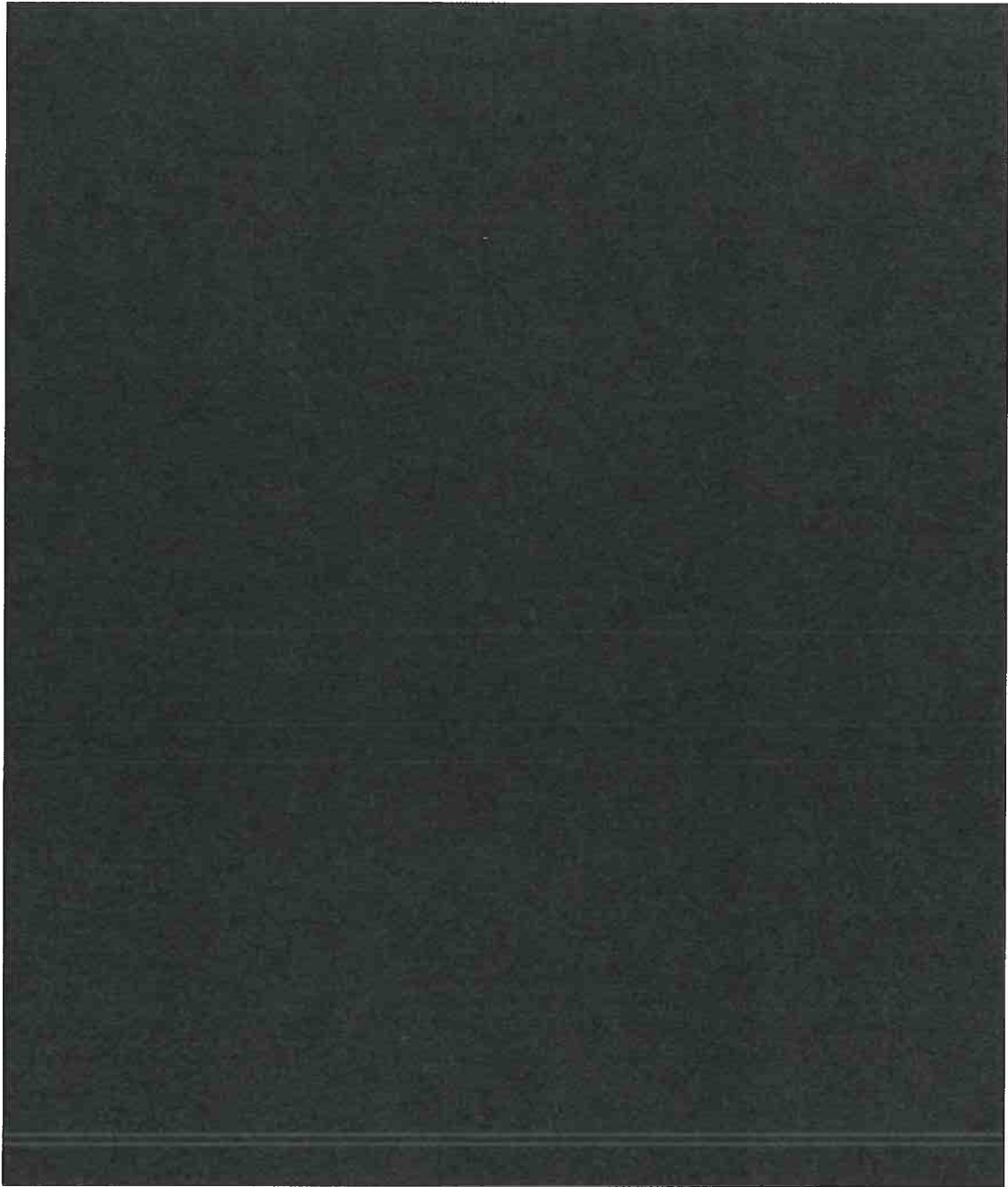
Appendix C - NHP Cost Estimates

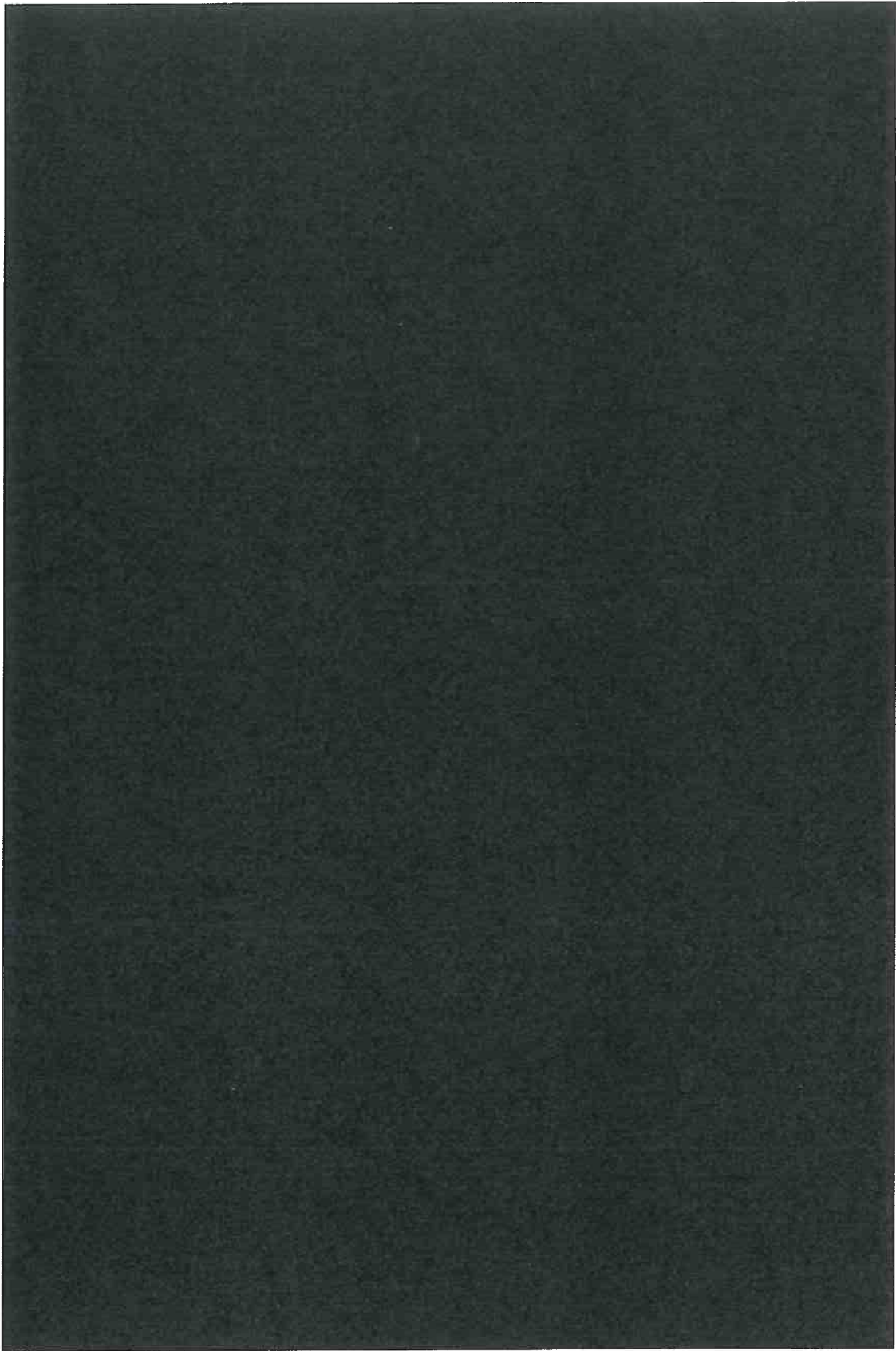
Appendix D - CAMHS Enabling Works Cost Estimates

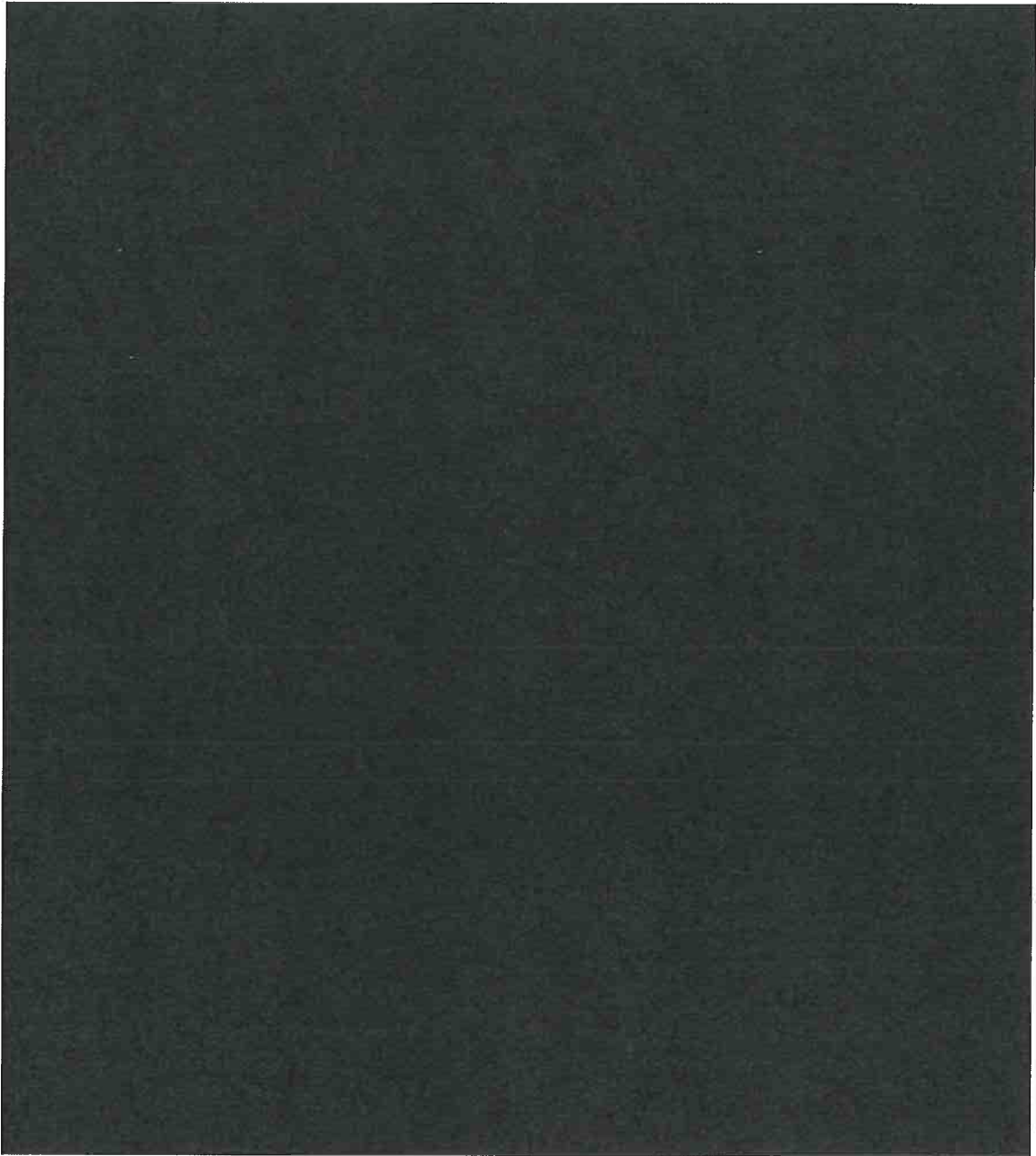
Appendix E - Arcadia House (AOD) Enabling Works Cost Estimates

Appendix F - Stakeholder Engagement Plan and Communication Strategy



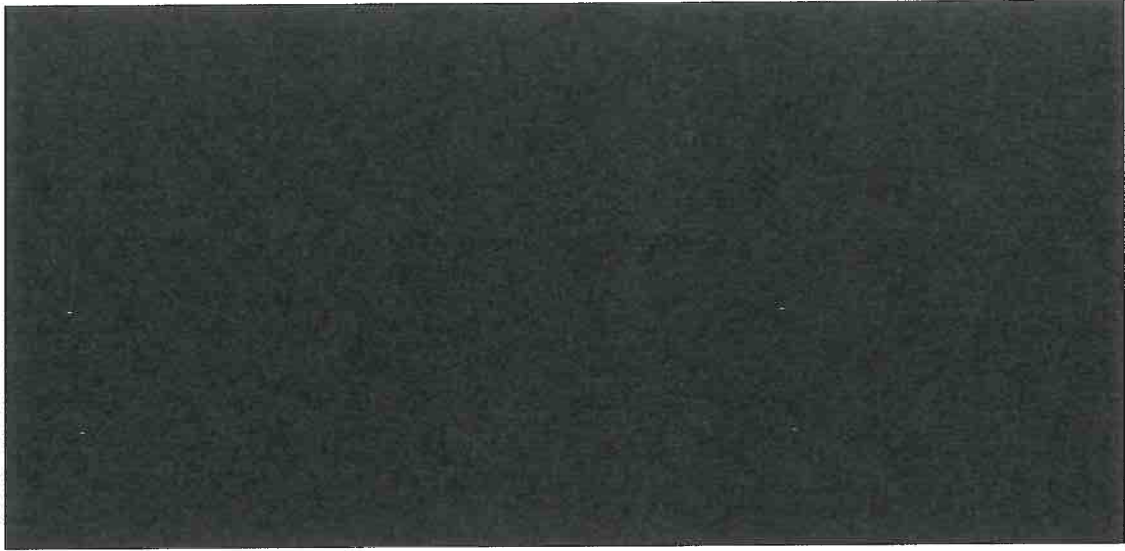


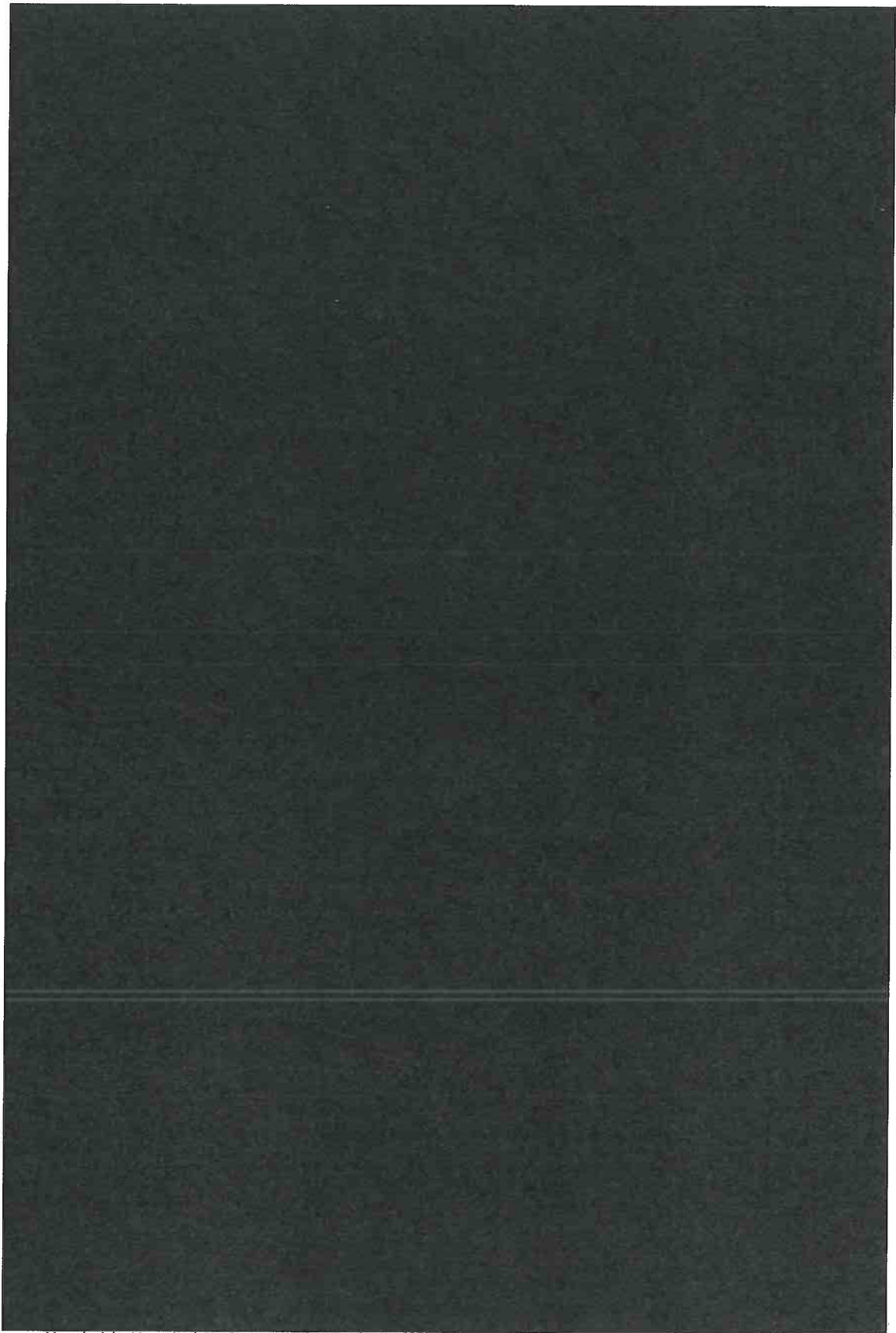




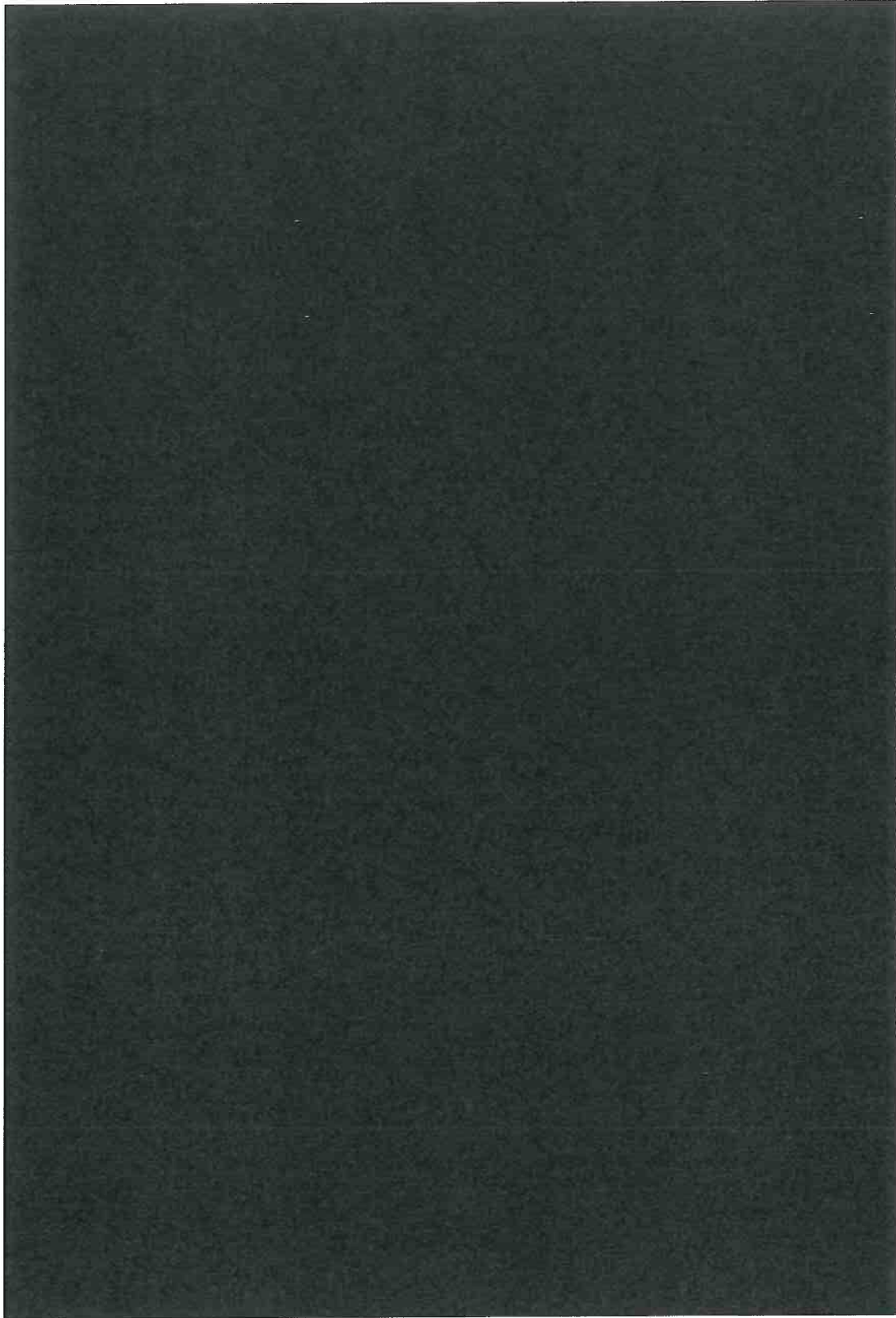
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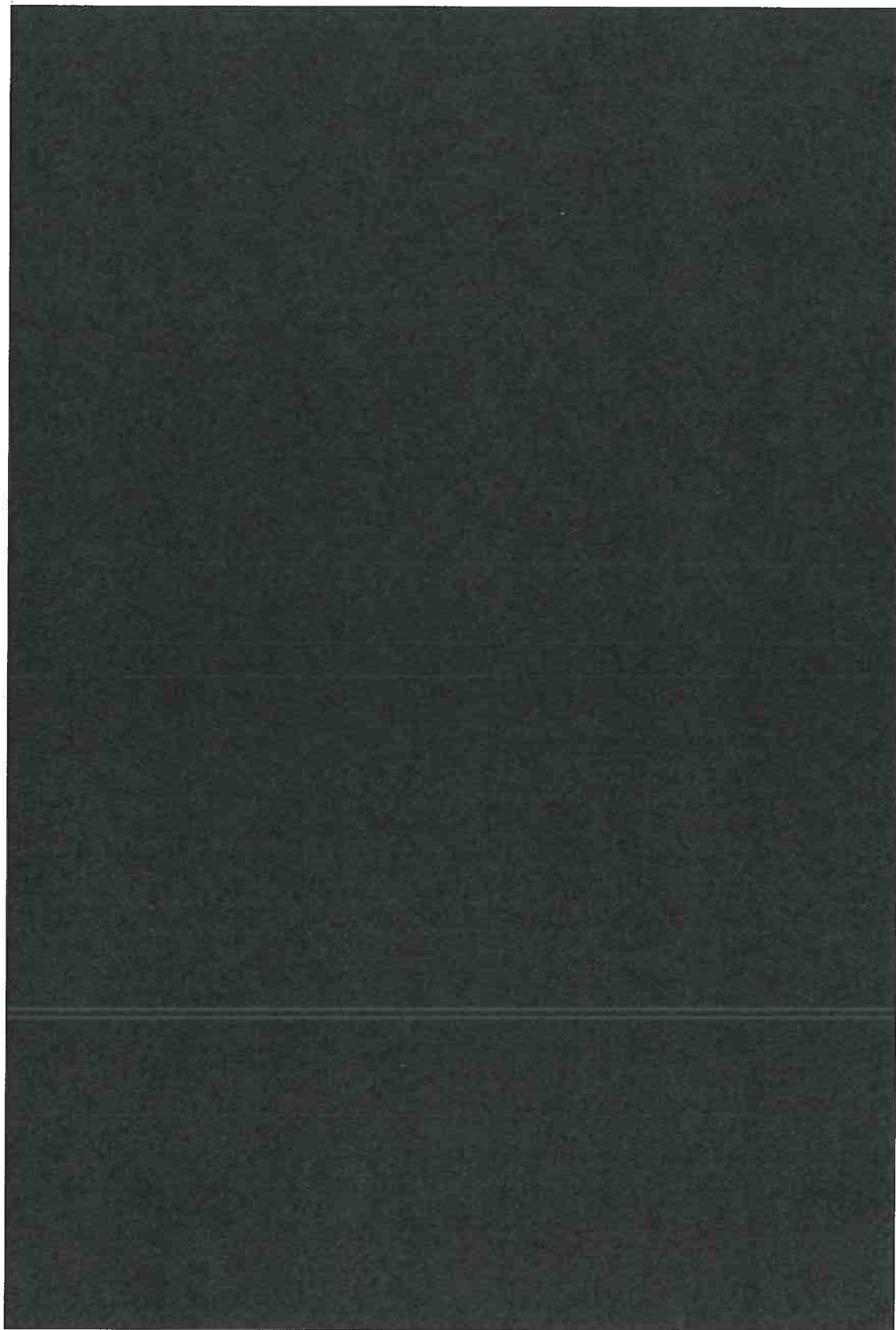
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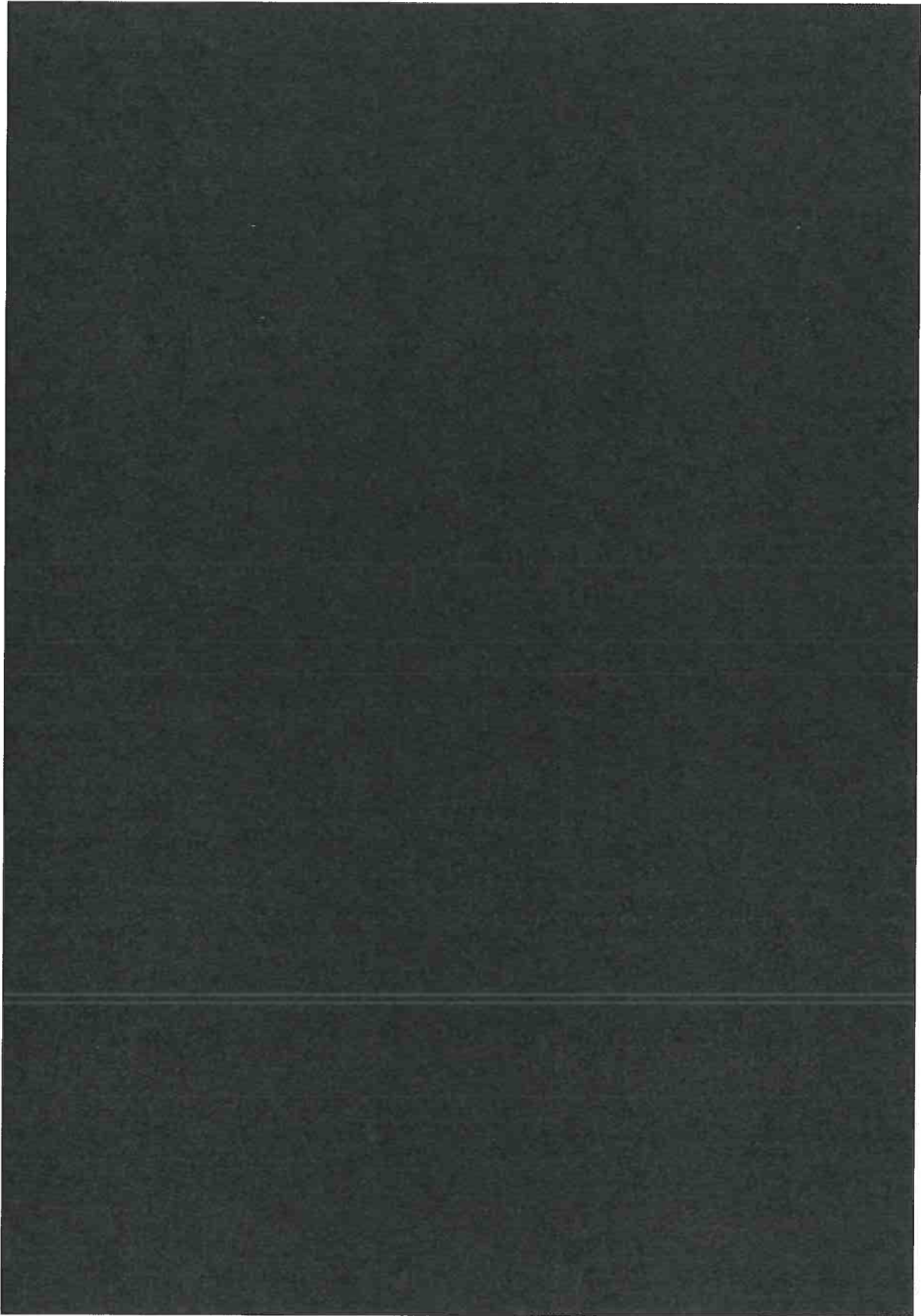
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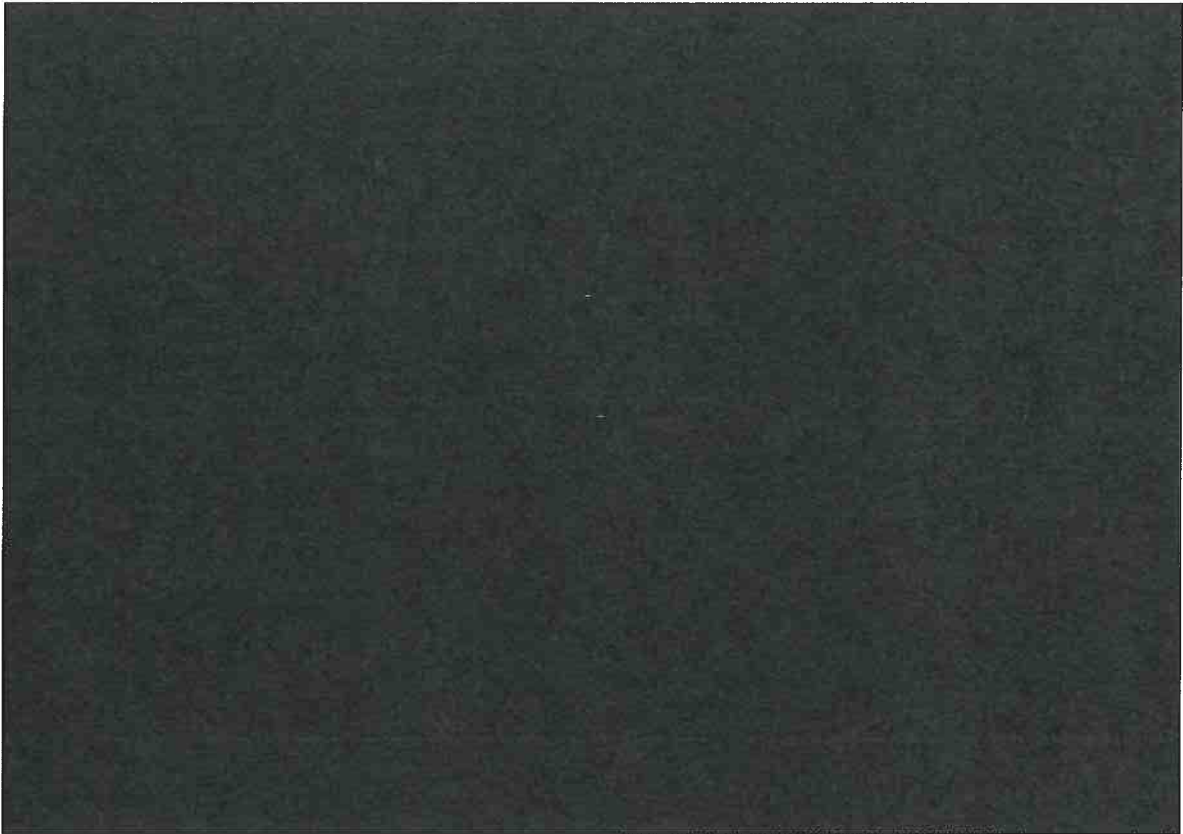
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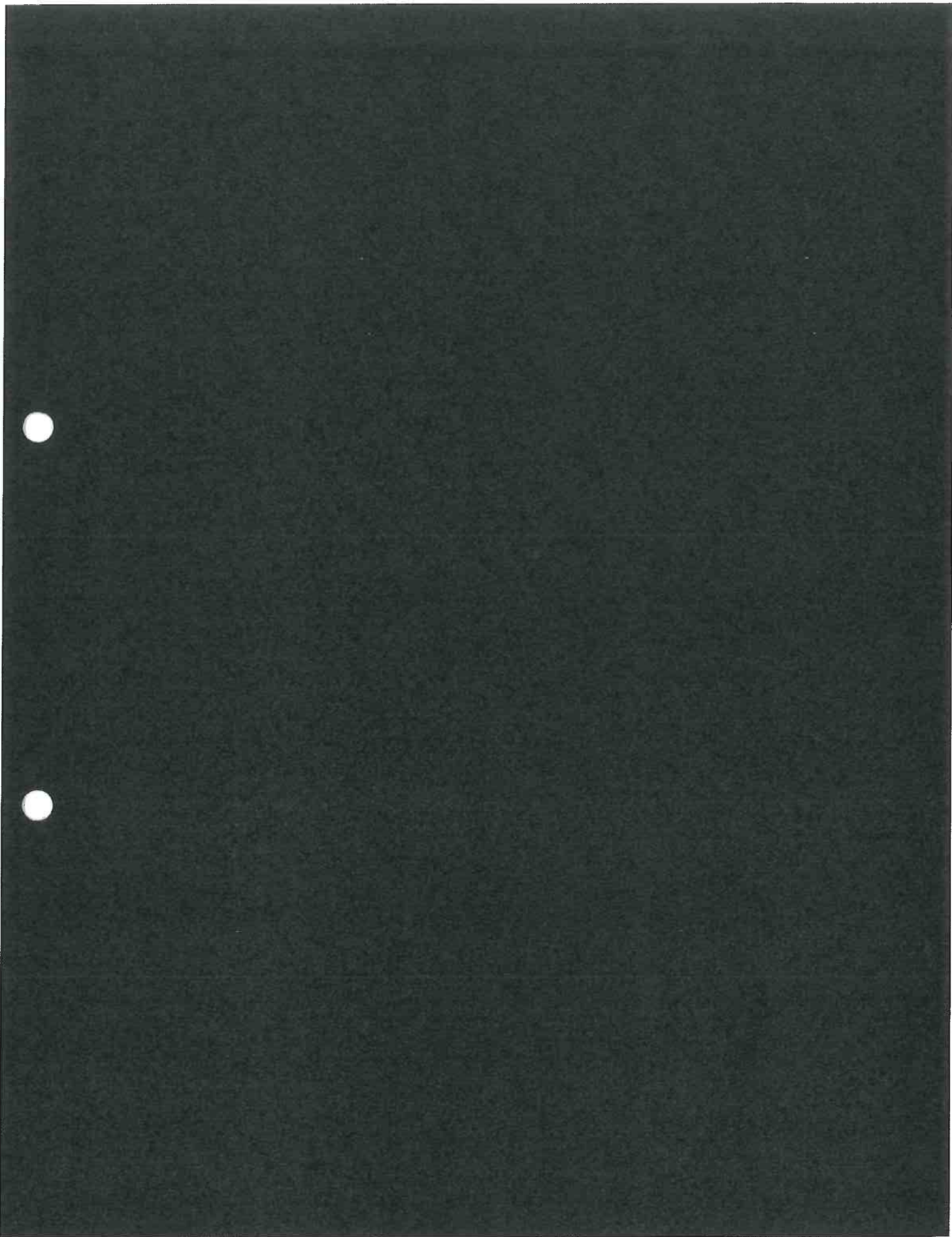




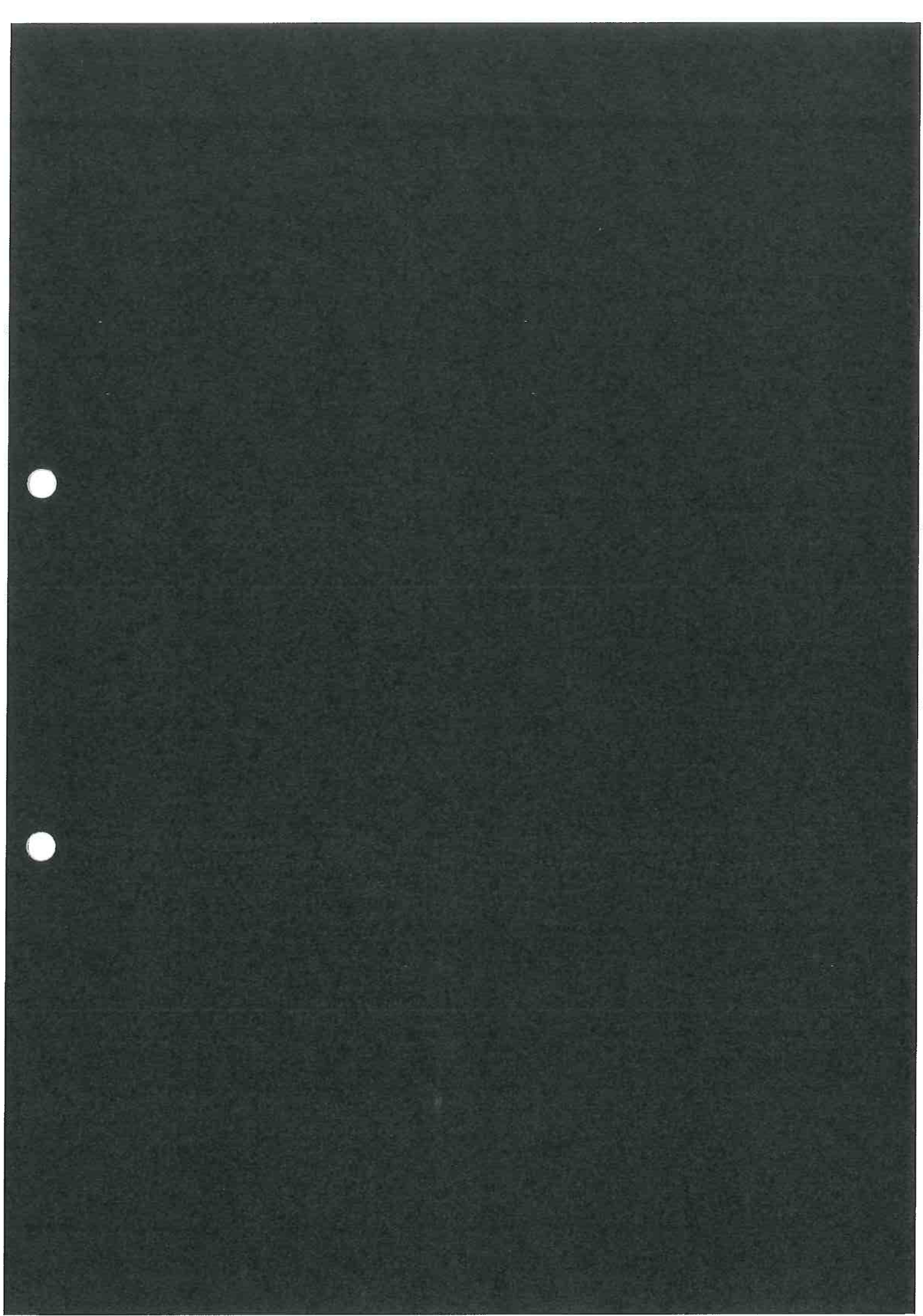




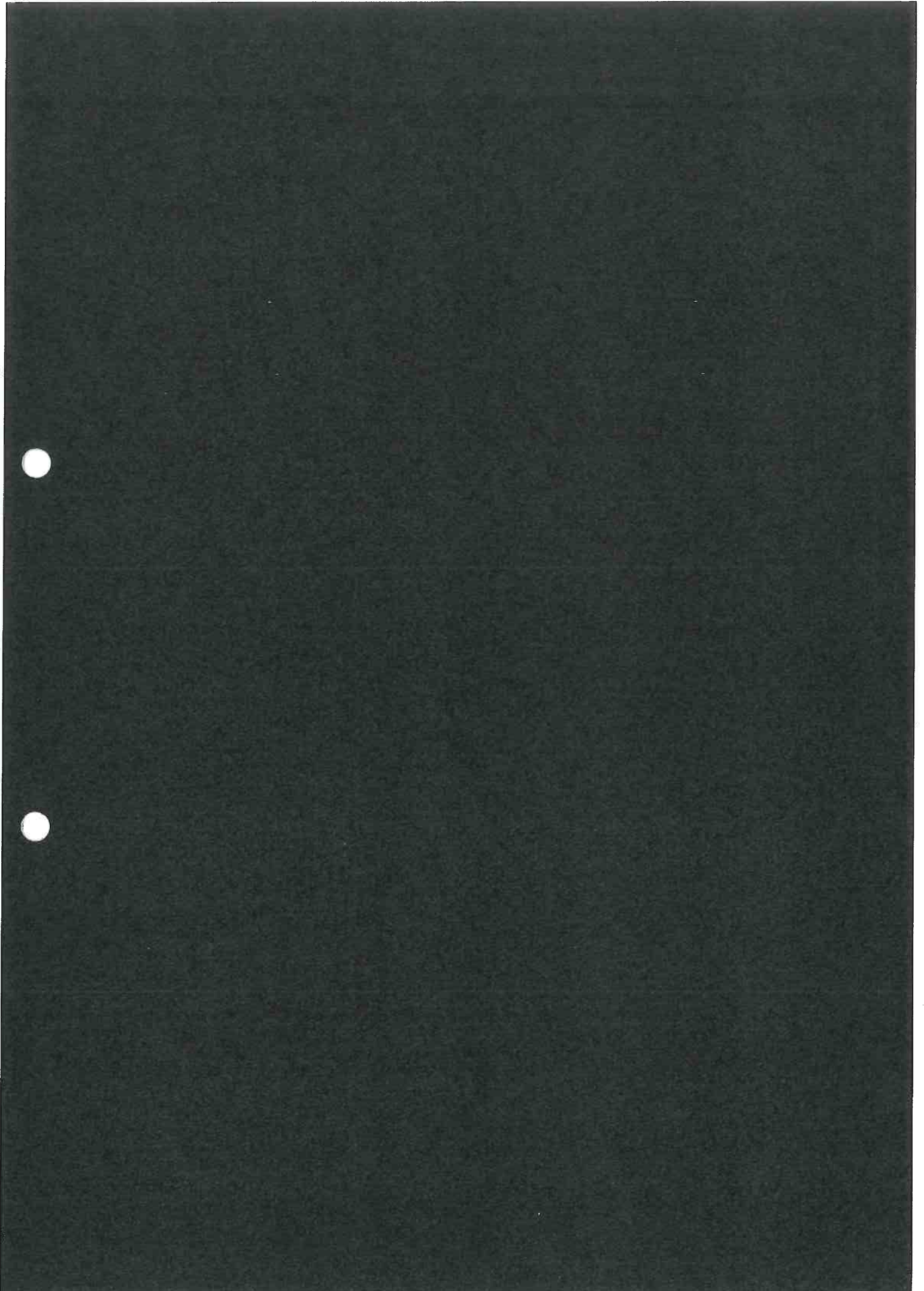




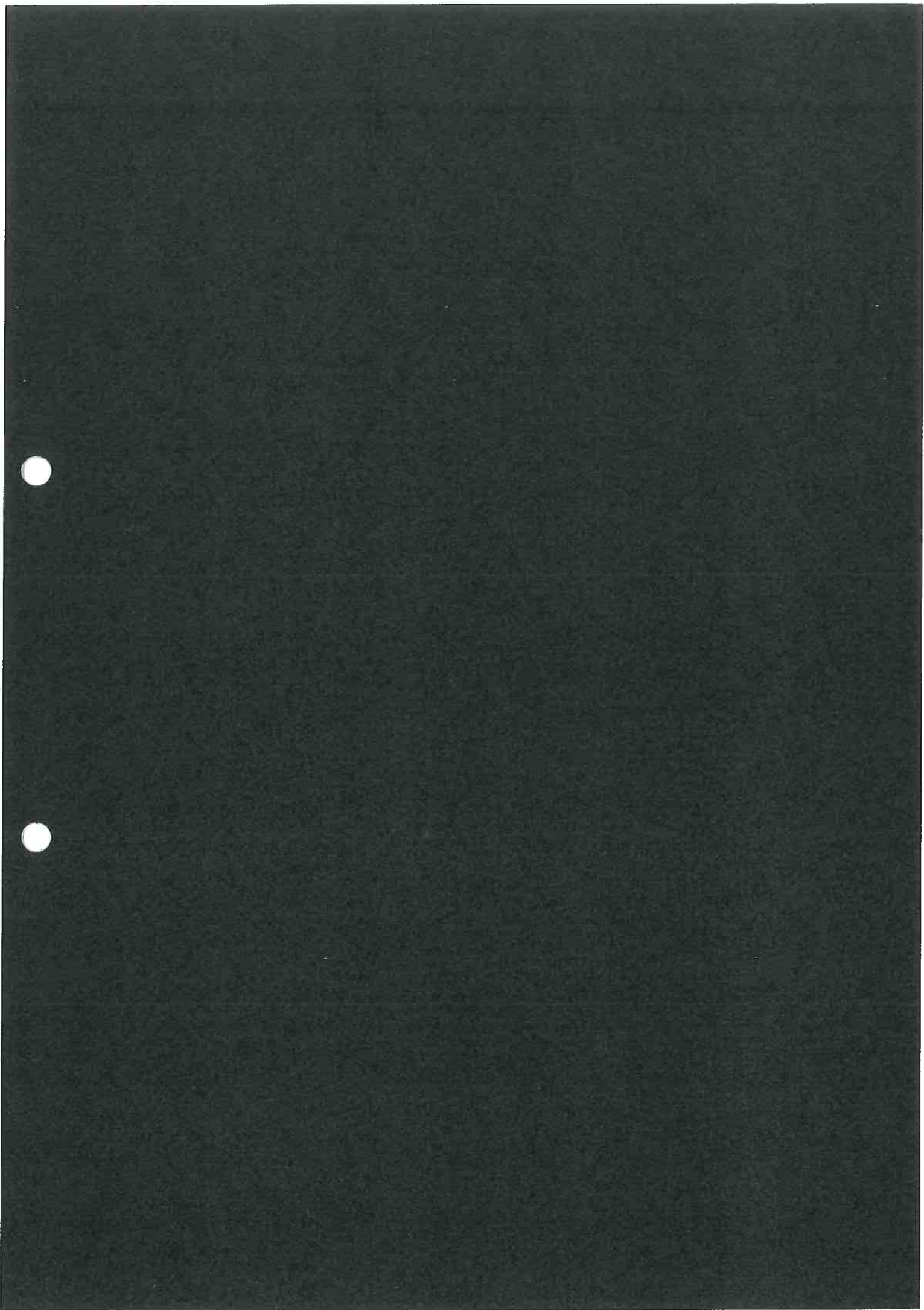








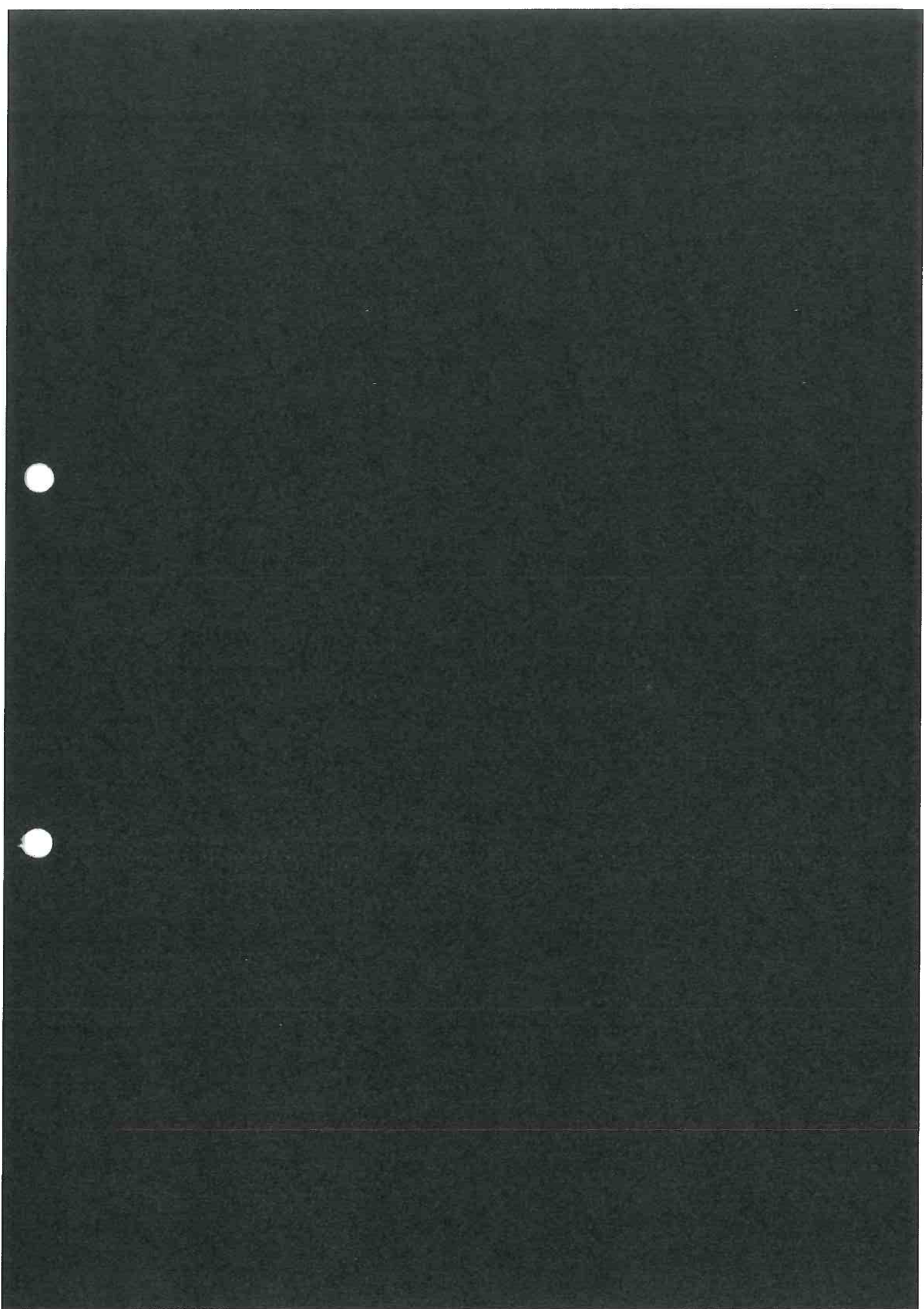




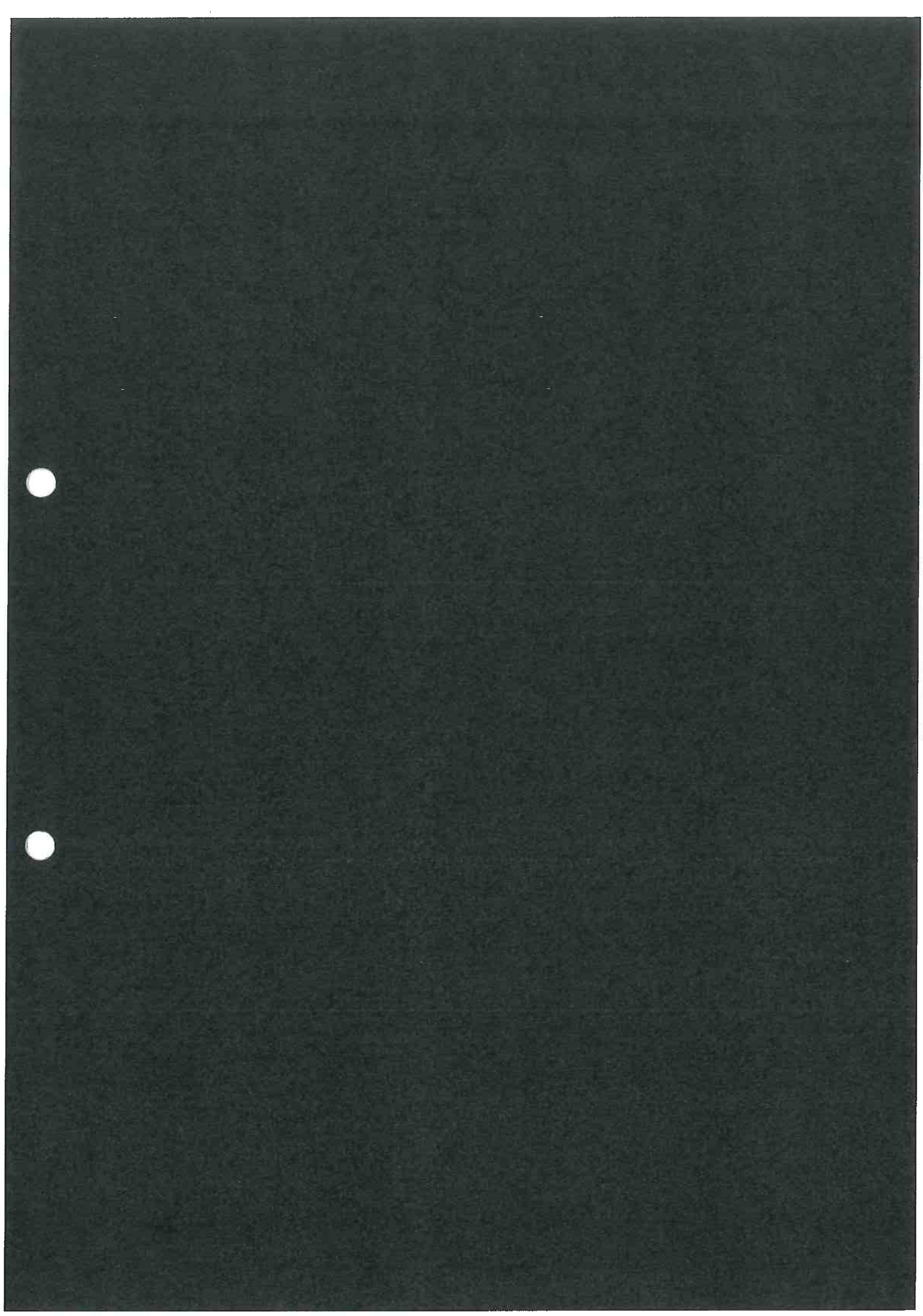




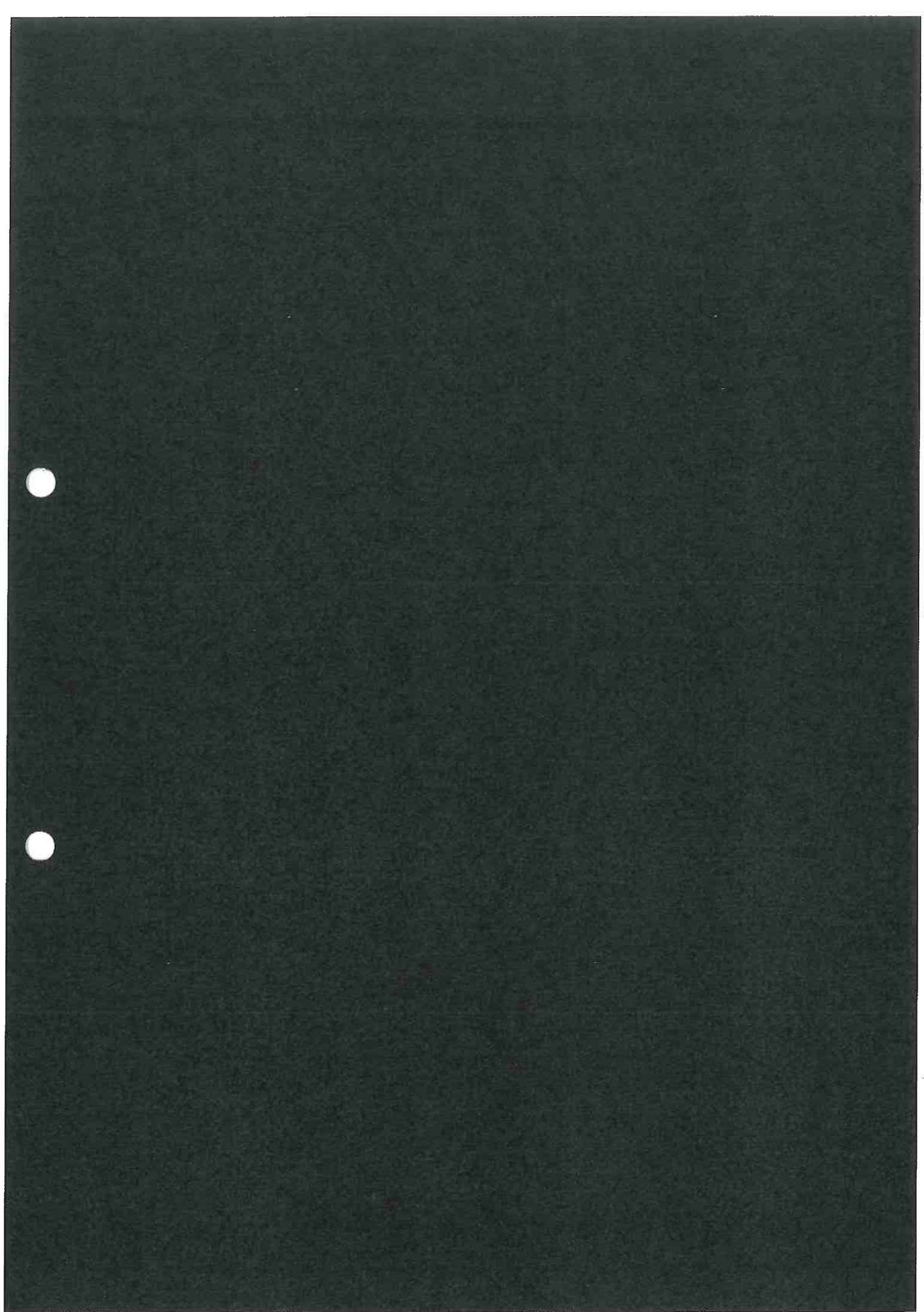




































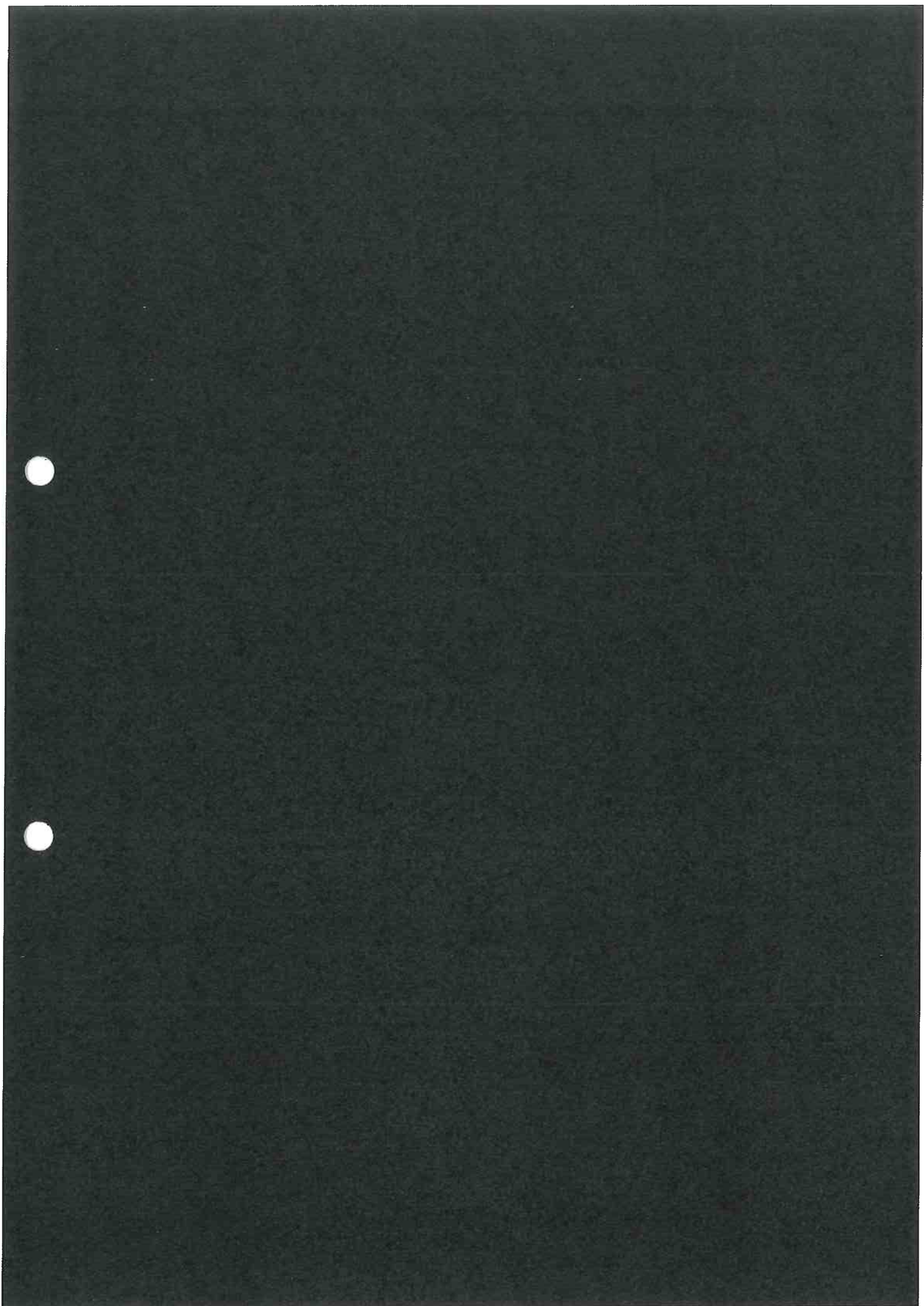




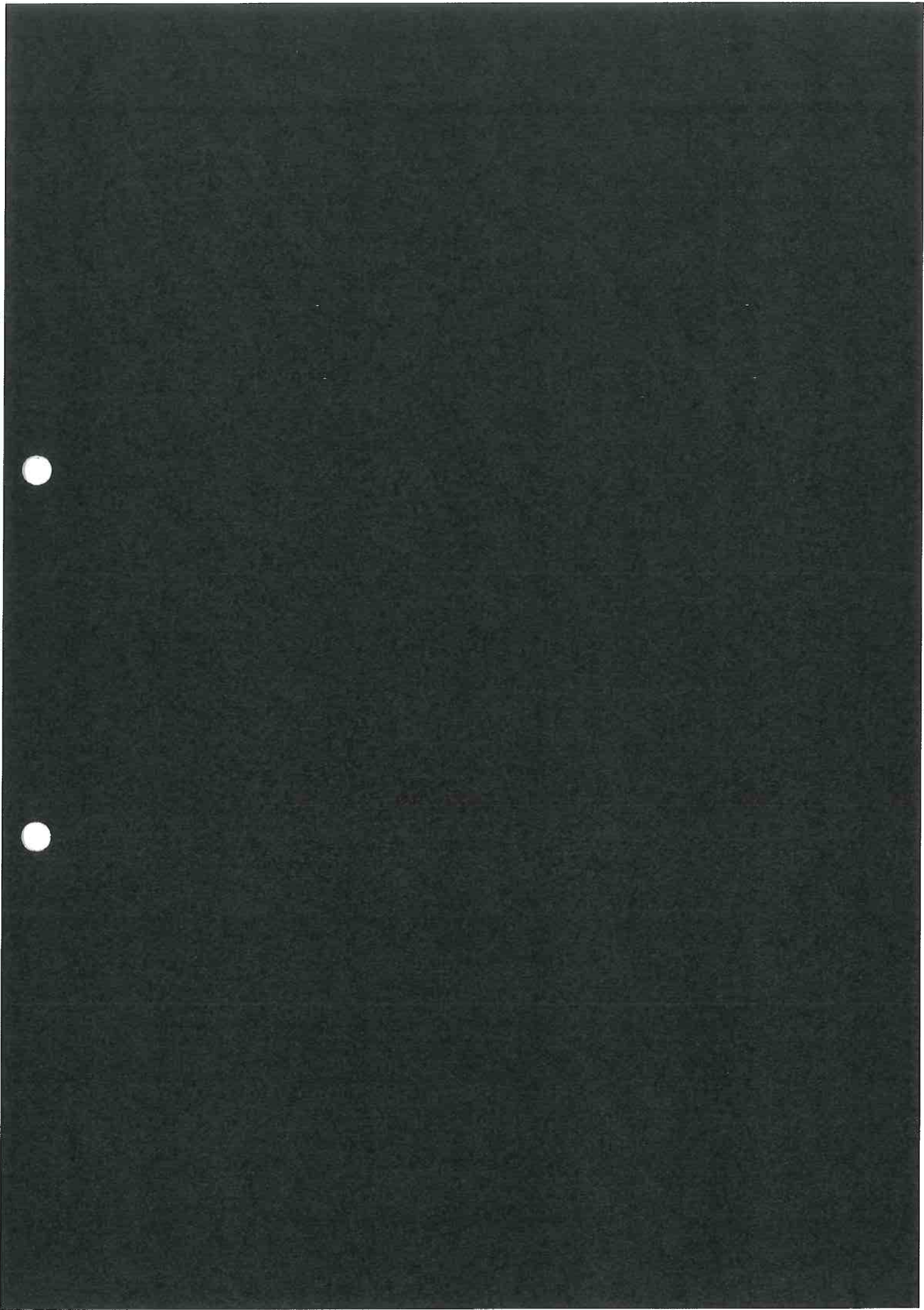




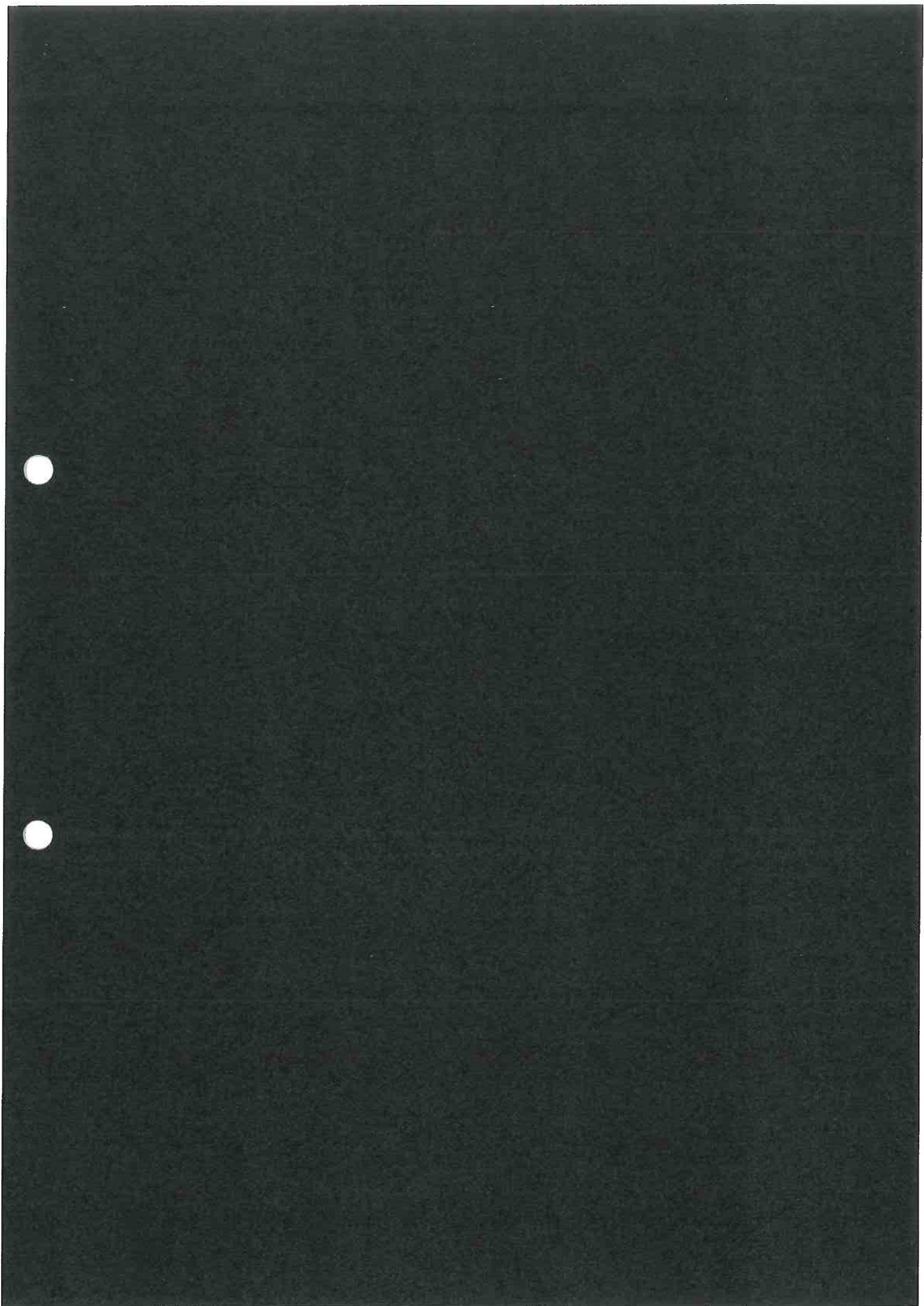








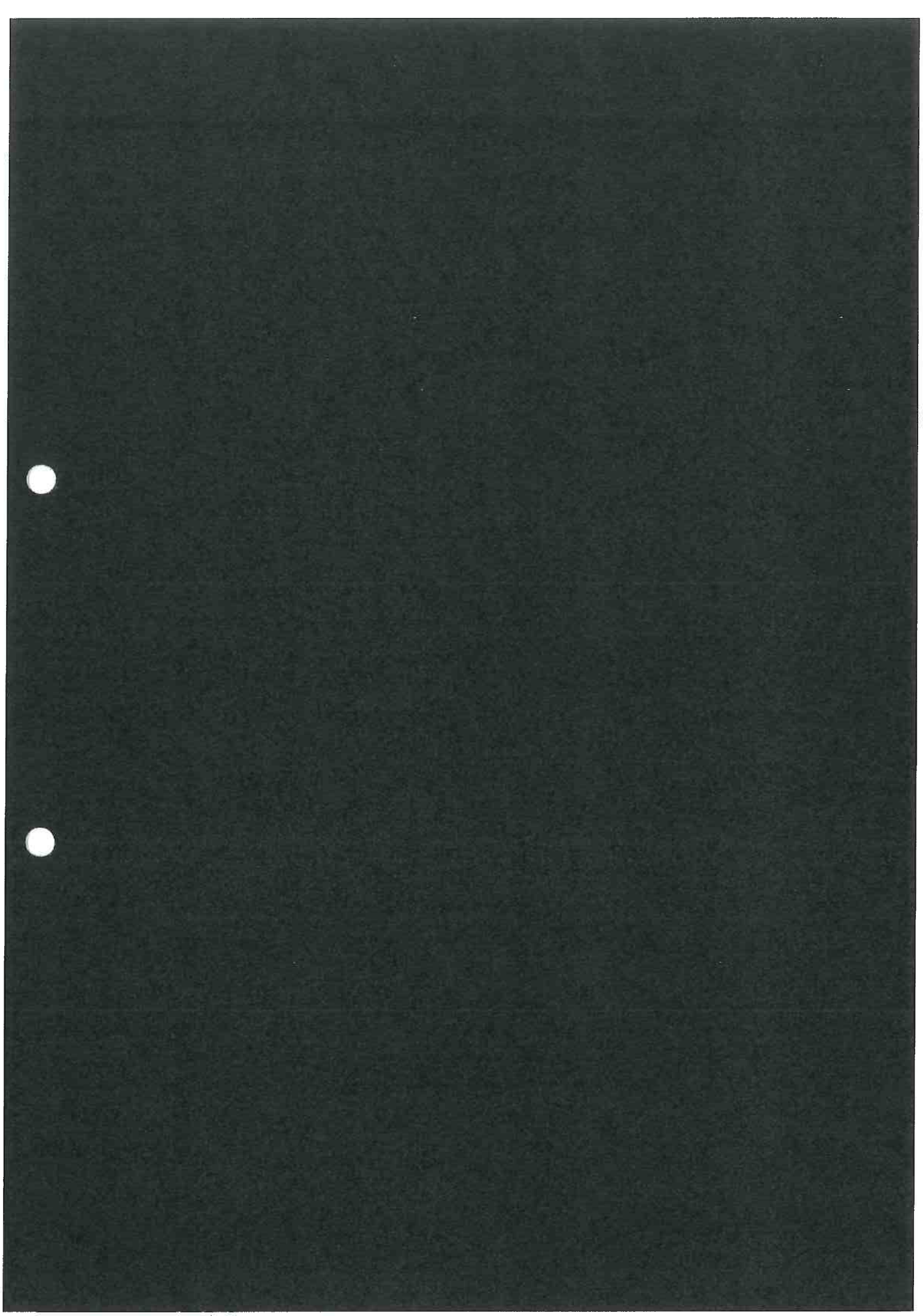




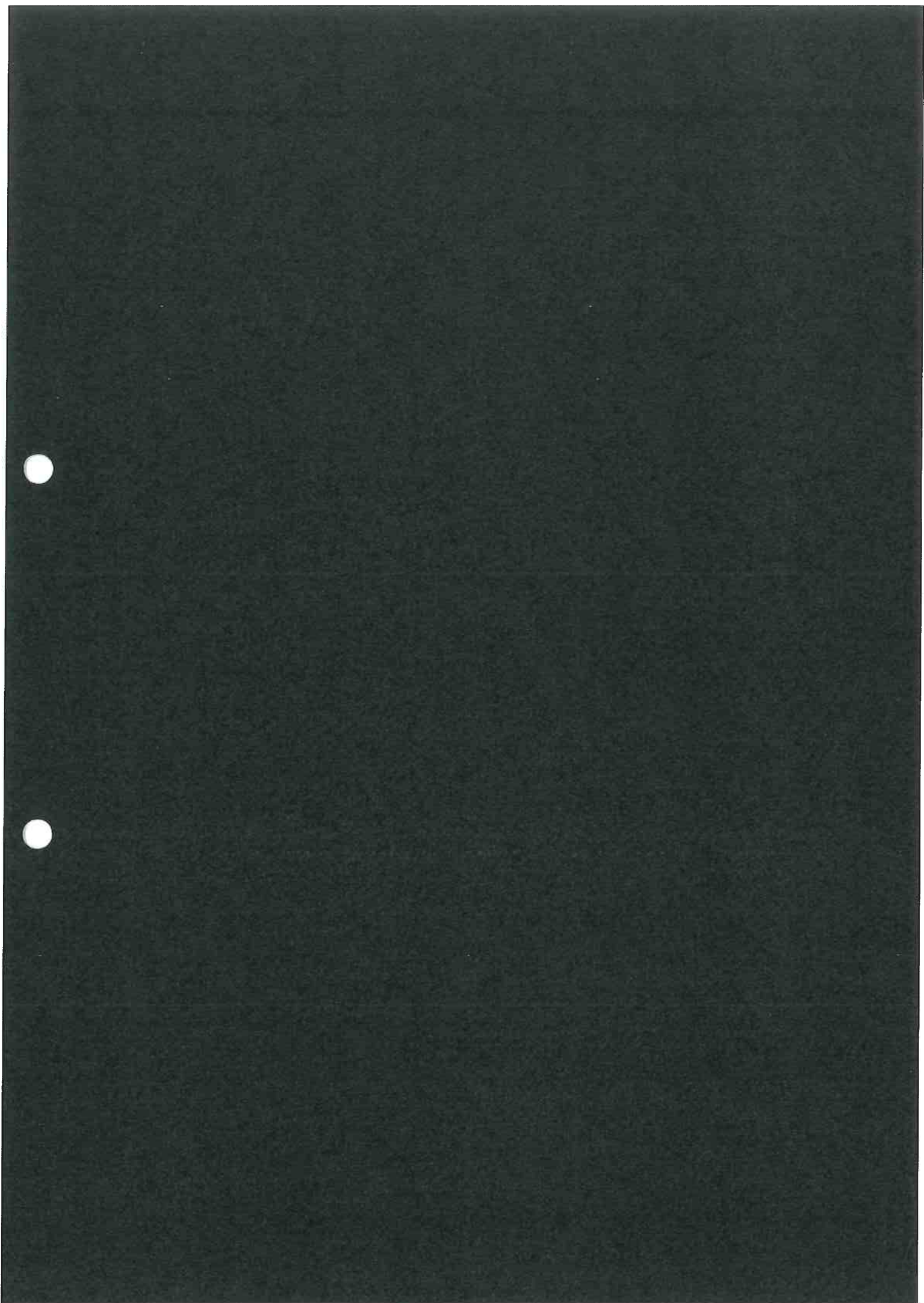








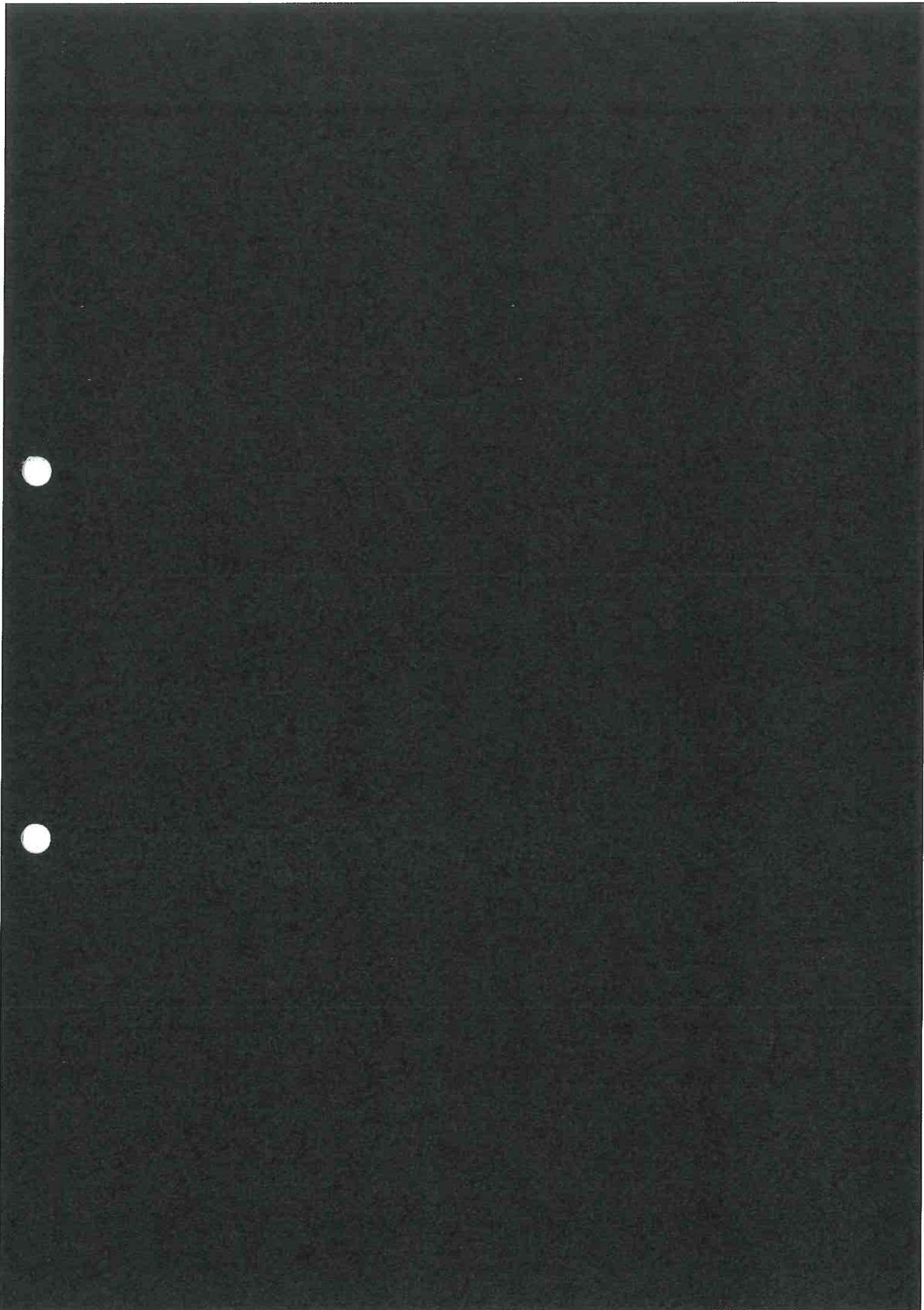




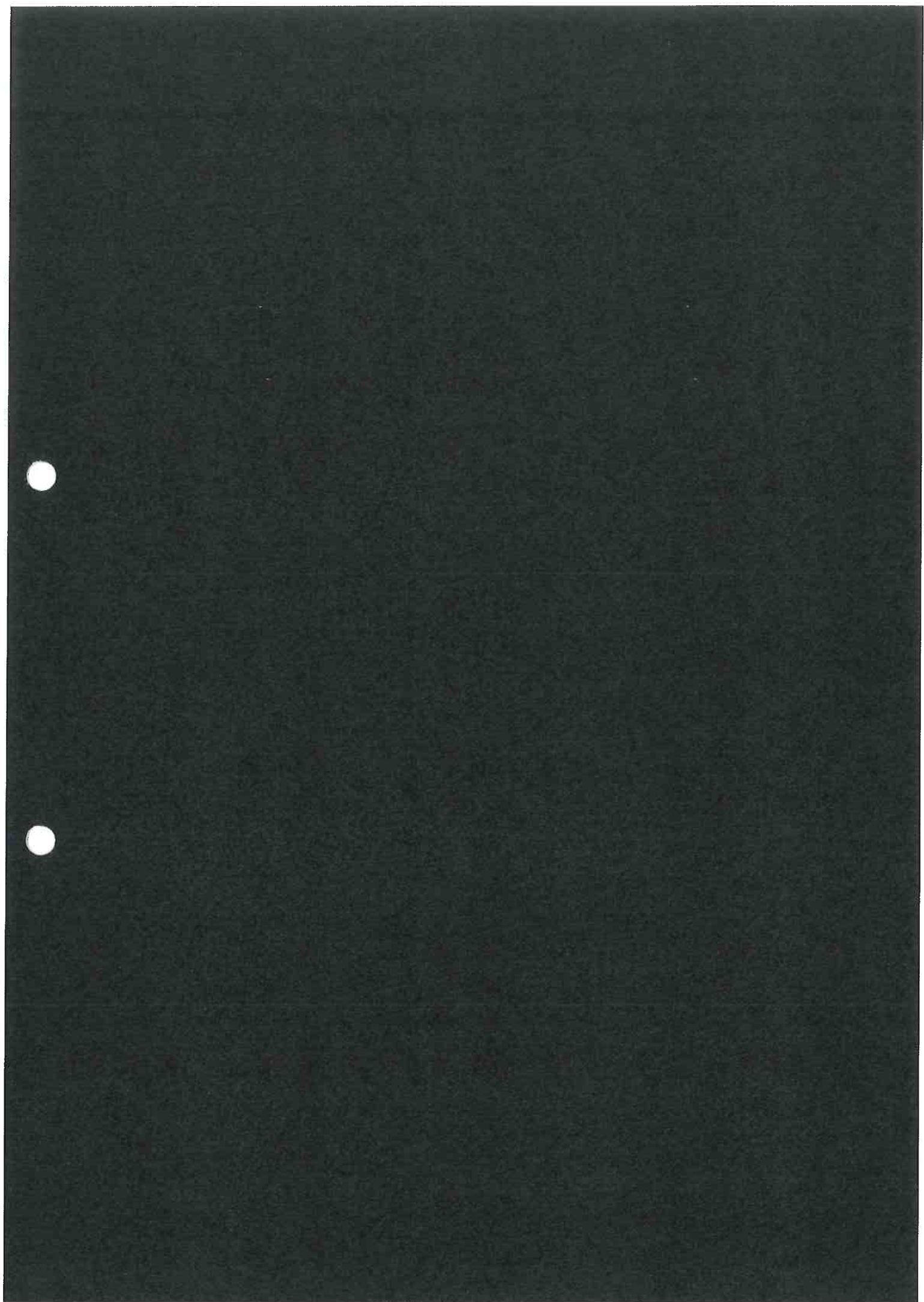












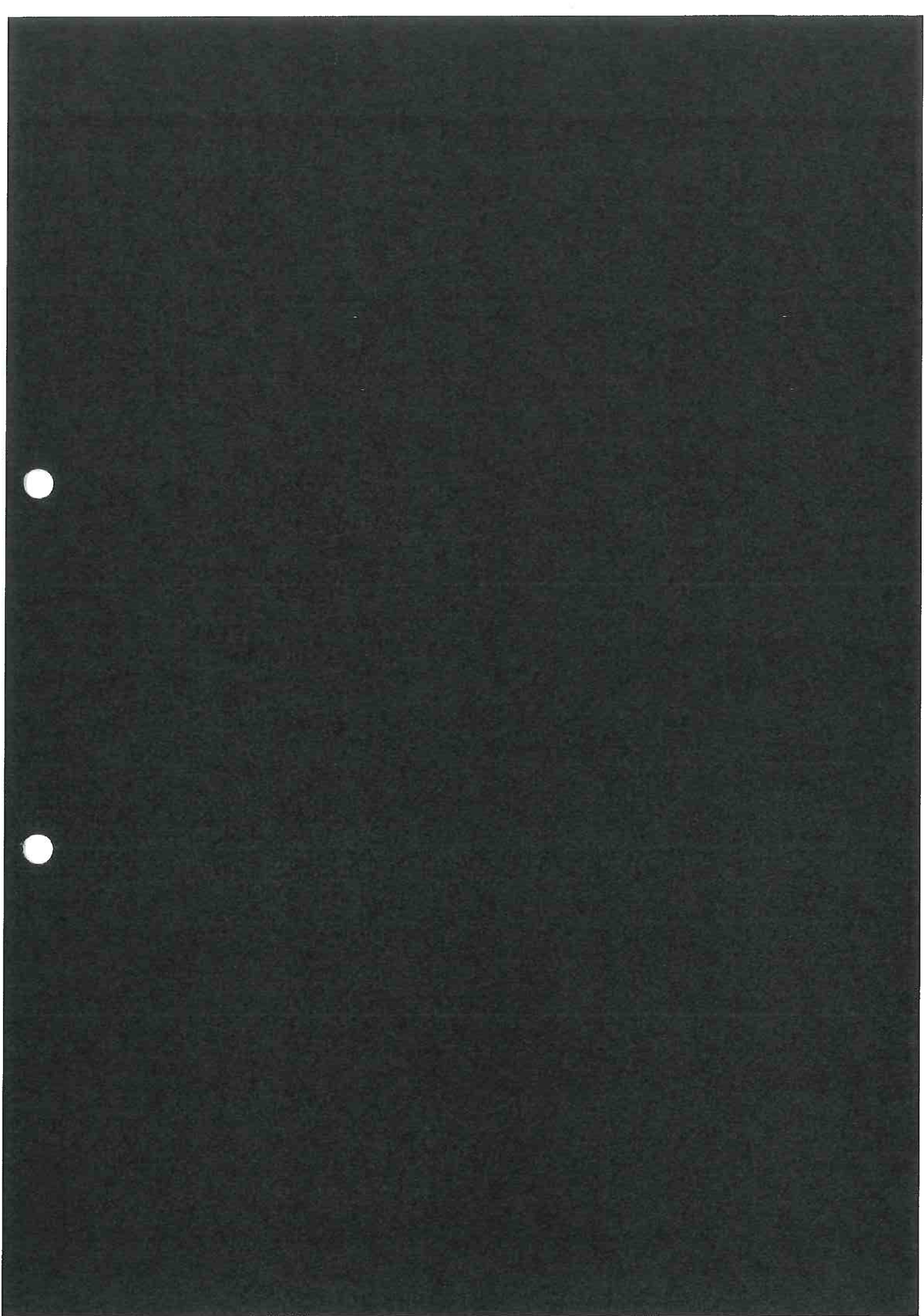












**BUILT
FOR
CBR**



Northside Hospital Project

Communications and Stakeholder
Engagement strategy

Major Projects Canberra

November 2024

Version History

Version No.	Date	Author	Issue Purpose
0.1	21/07/24	MPC	Draft for CWG review
0.2	3/10/2024	MPC	Edits from ACTH and CHS
2.2	1/11/2024	MPC	Edits from Board and PCG CEWG edits Key messages added to appendices

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1. BACKGROUND

The ACT has experienced the fastest growing population of any State or Territory over the last 10 years, growing from 370,000 to 455,000 people. By 2027, the ACT is expected to reach half a million residents and on average, welcome 9,000 new Canberrans each year. Every member of the community, both now and in the future, will need access to high quality health services.

The 2023 ACT Health Infrastructure Plan details the ACT Government's critical investment in health infrastructure across the Territory for the coming decade. This includes a new northside hospital.

Data and demand projections indicate a need for a significantly larger northside hospital. This suggests that current capacity at North Canberra Hospital (former Calvary Bruce Public Hospital) will need to double by 2041. Further analysis recommended building a brand-new hospital, rather than expanding the existing hospital.

Recognising this as a priority, the ACT Government committed in the 10th Parliamentary and Governing Agreement to plan and design a new northside hospital and shift to in-source operations. In May 2023, the *Health Infrastructure and Enabling Act 2023* was passed in the Legislative Assembly enabling the ACT Government to move existing functions from Calvary Health Care ACT to Canberra Health Services. Calvary Bruce Public Hospital transitioned to Canberra Health Services and was renamed as North Canberra Hospital in July 2023. This is the site for the new northside hospital.

In February 2024, the Strategic Communication Review Group approved the ACT Health Infrastructure Communication and Engagement Strategy for the next five years. This strategy takes elements from that overarching plan and applies these specifically to the Northside Hospital Project.

In April 2024, the then Minister for Health, Canberra Health Services (CHS) and ACT Health communication teams developed an overarching narrative for all infrastructure projects. The agreed narrative is:

"Canberra is growing and so is our health system.

The ACT Government is investing in health infrastructure to support the Territory's changing health needs now and into the future.

We are building a new hospital in the north, modernising the Canberra Hospital, and expanding our network of community health facilities so we can deliver safe, high-quality and person-centred care closer to home.

We are also investing in attracting, training, and retaining the best health professionals.

From our health centres and Walk-in Centres to our hospitals, we are making sure you can access the very best health care where and when you need it".

The narrative will be considered in line with all key messaging for the project.

The new, modern facility will deliver world-class, person-centred, and accessible public health care, to attract and retain a strong clinical workforce, and to respond the demand for public hospital services driven by ACT's predicted population growth.

1.1 Purpose of this document

This Communications and Engagement Strategy has been developed for the Northside Hospital Project. It describes the overarching communications and engagement approach for the Northside Hospital Project and how key stakeholders and the community will be engaged and informed throughout the project delivery.

Consistent, transparent and proactive communications and engagement are essential to delivering a successful project outcome. Engaging with the right people at the right time informs project planning,

design and delivery, linking the community, stakeholders, and consumers at all levels of the health system to the project.

It also enables the project team to identify risks early and ensures effective mitigation measures are in place to manage those risks throughout the project lifecycle while looking for innovative project opportunities.

This plan aligns with the ACT Government's people-focused approach to communicating with, and encouraging participation from, a range of stakeholders during the planning, design, and delivery of the new northside hospital.

This strategy outlines who, when and how the project will engage and communicate at each project milestone from planning through to operations. This is a strategy document that will be supported by a number of detailed action plans for specific impacts and stakeholder groups.

1.2 Key themes

Preceding this strategy was a three-phased Community Engagement Plan, Designing ACT health services for a growing population (Designing ACT health services), which explored the community's current and future perceptions of the ACT health care system. The themes that will be integrated into this strategy as messaging, content or consultation points and are as follows:

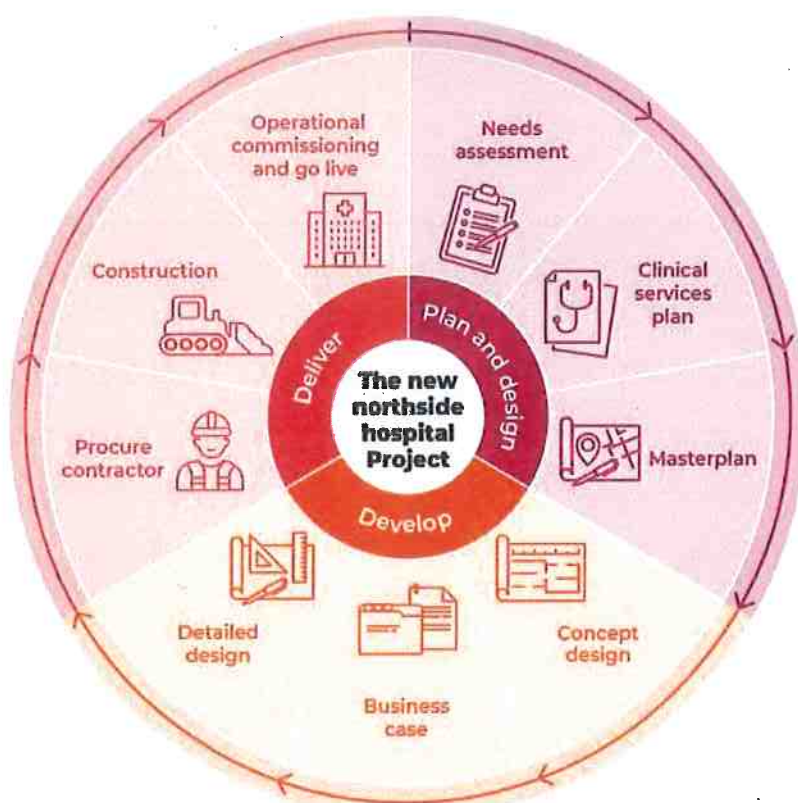
- > Clinical services – maternity, emergency, mental health and paediatrics
- > Experience – wayfinding, green space, experience for the young and elderly
- > Quality – safety, workforce, customer service and wait times
- > Parking and travel
- > Location
- > Accessibility and inclusion
- > Infrastructure and technology
- > Governance and operations
- > Sustainability
- > Hospital general
- > Health general

The clinical services that will be offered, experience and quality were the strongest themes from this consultation that will form the foundation for future engagements and consultation.

1.3 Project milestones

There are three overarching project phases for delivering the new northside hospital project that we will align communication activity with including:

- > Plan
- > Design
- > Deliver



At each phase, the steps taken will be informed by engagement with community, stakeholders, clinicians, consumers, and First Nations peoples, and be tailored specifically for the Northside Hospital Project and its program of work.

The table below outlines indicative key milestones during the planning, design and delivery phases and will be reviewed and updated regularly critical project milestones and opportunities.

Milestone	Indicative timing	Status
Plan		
Scope and needs analysis	2018	Complete
Site selection and assessment of Calvary Public Hospital	2020	Complete
Early clinical services planning community consultation	2022	Complete
Calvary transition to Canberra Health Services	2023	Complete
Designation of Northside Hospital Project	2024	Complete

Milestone	Indicative timing	Status
Planning and early contractor procurement	2024	
Early Works	2025-2026	See CAMHS strategy
Design		
VECI process	2024/2025	
Concept Design	2025	
Schematic Design	2025	
Detailed Design	2025	
Deliver		
Main works Development approval	2026/2027	
Early and enabling works - Mental health - Childcare	2024-2026	
Construction	Mid-decade	
Completion	2031	
Commissioning	2031	
Opening	2031	

The procurement model and planning timeframe provides adequate time for meaningful engagement and feedback as well as providing adequate time to prepare communications that resonate.

1.4 Project vision

The new northside hospital will be a modern, state-of-the-art hospital for patients, visitors and workforce. It will form part of a Territory wide person-centred health system that is accessible, accountable, and sustainable.

1.5 Project objectives

Communications and engagement objectives will ensure the local community, consumers, workforce and key stakeholders are consulted, engaged and informed of project activities and any potential impact of this project while ensuring these stakeholders are able to provide feedback as the project progresses. This will be achieved by:

- > providing regular information on the development and delivery of the project to all project stakeholders; and

- > delivering targeted consultation with the local community and key stakeholders during project planning, design and delivery.

The guiding communication and engagement objectives include:

1. Give partners, stakeholders and the community **confidence in the planning and delivery process** through a consistent approach and messaging and increasing stakeholder understanding of the project and its vision
2. Provide a **clear governance framework and transparent approach** for managing consultation and communication
3. Identify key stakeholders and **encourage proactive two-way communication, manage concerns and set expectations** during all project stages
4. Set out an achievable commitment to **regular, transparent and meaningful engagement**
5. Develop targeted, effective communications and **manage the flow of information, mitigating any risks and misinformation** relating to the project
6. **Listen to feedback, investigate suggestions and report back every time**
7. **Leverage the skills and lessons learned** from the delivery of previous health infrastructure projects, Canberra Health Services (CHS) and ACT Health.

1.6 Communication and Engagement risks and challenges

The table below lists potential communications and engagement risks associated with the planning for the Northside Hospital Project. Risks are also captured in the Northside Hospital risk register and will be reviewed and reported and updated monthly to the project team and as part of the Communication and Engagement Working Group.

Risk/Potential issue	Mitigation measures
Timeframes for the planning and delivery process including the right time to engage stakeholders	• Communicate clear and agreed messages about the planning and/or delivery process and make this information publicly available and easily accessible (refer to staging diagram for Northside Hospital Project when developed) • Provide clear and accessible feedback channels with agreed key messages and process for collecting feedback and responding • Where possible utilise existing communications forums to convey key messages and timelines. • Advise stakeholders of opportunities for input and decisions • Clearly explain how any impacts to the community and staff will be mitigated throughout the project lifecycle • Where possible ensure proactivity around works onsite to build trust
Stakeholders underestimate or overestimate the role they	• Clearly define engagement opportunities with stakeholders • Clearly define negotiables and non-negotiables • Clearly define the mix of voices in decision making process

can have in the planning phase	• Demonstrate how feedback has and will be used and close the loop on all feedback
Perception around the land acquisition and transition from Calvary	• Identify advocates for the project to assist with disseminating project communications and increase stakeholder understanding and buy-in • Develop targeted and timely communications and engagement activities to increase stakeholder understanding of the project benefits
Ensuring inclusive participation and capacity of stakeholders	• Ensure diverse input and involvement is sought throughout the project lifecycle • Identify and engage with a diverse range of project advocates to assist with project understanding and participation • Build the capacity of stakeholders as required to engage in the planning process, increase health literacy, and develop a shared understanding of the process • Utilise any existing partnerships for engagement • Specialist consultants for groups that do not generally engage with government or who face barriers to participation
Understanding project benefits	• Ensuring at each phase broad benefits are promoted • Use ambassadors and workforce to speak to benefits • Ensure a broad Territory health perspective with benefits and outcomes • Balance the focus of construction impacts with outcomes
Increased activity onsite for early works and relocations	• Build trust through early engagements and setup clear internal communications forums and feedback mechanism • Ensure feedback lines are consistently published for where people can find accurate information or voice concerns • FAQs for internal and external engagement • Media opportunities and proactive announcements where appropriate • Timelines and impact communications
Impacts to nearby bushland and biodiversity	• Clear messaging about requirement for an Asset Protection Zone and relate to the environmental management plans • Environmental mitigation measures outlined in collateral • Masterplan that includes environmental outcomes
Lack of understanding about the project	• Clear and proactive messaging, scope and timelines using a diverse range of channels • Stakeholder specific information
Inadequate funding for project delivery	• Clear and proactive messaging to ministerial offices to advise of risk and impacts to project/s • Project scope to be included in communication material
Program/project delay	• Update timelines, key messages and milestones providing reasons for delay.

Reaching current and prospective workforce	• Proactive and upfront communication with staff with regular opportunities for engagement • Communication plan and feedback mechanisms to support staff during construction • Robust change management plan to support transition into operations
Disruption to services/parking/way finding	• Collaborate with Canberra Health Services to understand staff requirements and opportunities to minimise disruption during construction • Work with Contractor on innovations • Clear and proactive communication to advise of changes
Engagement / consultation fatigue	• Coordinated, strategic engagement plans that consider previous engagement outcomes and milestones • Combined calendar of engagement activities • Overcoming time poor engagements through outcomes • Coordination across partner directorates to leverage and collaborate engagement activities and opportunities.

1.7 Communication and engagement opportunities

The project timeframe, scale and expected outcomes allows for risks to be offset or project outcomes to be enhanced through a focus on opportunities. Some opportunities that could be investigated as part of the communications and engagement strategy rollout include:

- > Reimagined Bruce Sports, Health, and Education Precinct
- > Set a new standard in engagement by demonstrating how feedback is used
- > Future focussed – what else will be different by mid-decade?
- > App for notifications, geo targeting within the hospital, parking
- > Use of virtual reality (VR) or augmented reality (AR) tools
- > Community ambassadors – how do we work together to tailor key messages to targeted groups
- > Video updates catering to time poor, those with lower literacy and culturally and linguistically diverse (CALD) audiences
- > Excellence in First Nations engagement with community led initiatives and big thinking
- > Get out – don't expect the community to come to us
- > Contractor engagement initiatives, way finding and support
- > Promotion of job and local participation outcomes
- > Social enterprise included in the supply chain
- > School and university programs
- > Legacy projects – history, time capsule, gardens, arts
- > Innovations in models of care and advancements in medical technology in the new hospital
- > Expansion of services.

1.8 Project learnings

Given the recency of other major infrastructure projects underway, in particular the Canberra Hospital Expansion project, we have the opportunity to capture communication and stakeholder engagement learnings to drive innovation and outcomes for northside hospital project. Learnings include:

- > Involving consumer advocates in Project User Groups (PUGs) to provide education and holistic understanding of the process including what can and cannot be included in a clinical setting and why.
- > Working with CHS and staff to identify recent and relevant stakeholders to involve in consumer reference groups. Establish this process early and develop a framework for recruitment and training so that when the opportunity arises these consumer stakeholders understand their role.
- > Set out terms, negotiables and principles for all reference groups and help them understand their involvement.
- > Ensuring the right timing in the process with stakeholders. Do not go out too early with clinical or design information that is irrelevant or hard for consumer or community groups to understand. Early and often is important but understanding the long timeframe for this project and keeping up interest and involvement.
- > Understanding the roles and responsibilities between clinical engagement and community engagement and how these differ and also cross over. Ensure systems and processes are in place to support the clinical process as well as looking for any emerging issues and opportunities.
- > Understanding the roles and responsibilities for communication between the MPC communications team, CHS communication and engagement team and campus modernisation team to ensure clarity of message and channel and being able to work hand in hand.
- > Visually capture the project through photos and video including the PUG and other reference group consultation processes. This is a good news story for socials, websites, case studies and for the people involved to see them coming together. Also ensure better coordination of video/photo capture between the contractor, MPC and CHS for use across organisations, in particular during construction and commissioning phases where access to the site is restricted.
- > Better visibility of the project through establishment of information display within the current hospital building to engage consumers in the project and build increased awareness of the new hospital during construction.

1.9 Stakeholders

The stakeholder analysis below identifies the range of stakeholders with an interest in, or that may be impacted by, the project and their likely views. The project will strategically and proactively engage the community and key stakeholders. These stakeholders can be broadly categorised into the following groups:

- > ACT Government
- > Health workforce – current and potential
 - NCH workforce
- > Health consumers, families, carers and other hospital users including those with specific needs
- > Health peak bodies and interest groups
- > Consumer Reference Groups

- > First Nations communities
- > Precinct stakeholders
- > Northside community – resident and community stakeholders
- > Business and industry groups
- > Broader ACT and surrounding regions
- > Interface projects

The stakeholder analysis table below categorises stakeholders who are either directly involved, impacted or influence the outcomes of the project. It also outlines areas of interest or concern relevant to these stakeholders as well as suggested initiatives and/or responses.

DRAFT

Stakeholder group	Stakeholder	Interest level	Interest area	Tactics for engagement
Elected officials	Minister for Health Minister for Mental Health Minister for Justice Health Member for Canberra	High	Community perception of the project in the lead up to the next election Economic, social and environmental objectives met Infrastructure that is fit for purpose Addressing local issues such as traffic, congestion and parking	Stakeholder meetings Briefings Formal correspondence
Government and non-government Territory agencies	ACT Health Directorate Canberra Health Services CMTEDD DDTS Environment, Planning and Sustainable Development Directorate Transport Canberra and City Services Directorate Education Directorate Community Services Directorate Parks ACT Community councils Non-Government Organisations (NGOs) Emergency Services Ministerial advisory councils	High	Awareness and understanding of the project Project timeline Opportunities to input into the design Consulted on an ongoing basis at relevant stages of the project Project related development consent processes	Stakeholder meetings Briefings FAQs Fact sheets
Hospital and local health services	General Manager, executive staff and executive steering groups Clinical staff Non-clinical staff Volunteers Patients, visitors and carers Unions and alliances Suppliers and other service providers Bruce Ridge Early Childhood Centre stakeholders Child and Adolescent Mental Health (CAMHS) Gawanggal Mental Health Unit Arcadia House Calvary Haydon Aged Care and Retirement Living Clare Holland House	High	Awareness and understanding of the project Consulted on an ongoing basis at relevant stages of the project Project timeline Opportunities to input into the design Up to date and timely information Construction impacts including impacts to services	Staff updates Project updates Emails/phone Website Social media Stakeholder meetings Information sessions FAQs Fact sheets
Health consumers	Patients Families	High	Awareness and understanding of the project and its benefits Consulted at relevant stages of the project	Project updates Emails/phone

Stakeholder group	Stakeholder	Interest level	Interest area	Tactics for engagement
	Carers Visitors Territory Health Infrastructure Consumer Reference Group Australian Medical Association (ACT Branch) Health Care Consumers Association Medical Women's Society of the ACT Public Health Association of Australia Australian Medical Students' Association A Gender Agenda Asthma Australia Canberra Hospital Foundation Headspace Ronald McDonald House Carers ACT Other consumer groups		Planning considerations Project timeline Opportunities to input into the design Up to date and timely information that is easily accessible and understood Construction impacts and impacts to services	Website Social media Stakeholder meetings Information sessions FAQs Fact sheets
Media	Metro and regional media outlets Social media channels	High	Awareness and understanding of the project Share media news and stories at relevant stages of the project	Media release Media holding statement Key messages for spokesperson Stakeholder meetings
Research and education providers	Canberra Institute of Technology Radford College Australian National University University of Canberra Hospital	Medium	Awareness and understanding of the project Project timeline Partnership opportunities	Project updates Emails/phone Website Social media Stakeholder meetings Information sessions FAQs Fact sheets
Other interest groups	Environmental groups Canberra Business Chamber GIO Stadium Canberra ACT Council of Social Service Community Councils	Medium	Awareness and understanding of the project Project timeline Up to date and timely information that is easily accessible and understood Opportunities to input into the design Construction impacts and impacts to services	Project updates Emails/phone Website Social media Stakeholder meetings Information sessions FAQs

Stakeholder group	Stakeholder	Interest level	Interest area	Tactics for engagement
Local and broader community and small businesses	General community Small businesses	Medium	Awareness and understanding of the project Project timeline Up to date and timely information that is easily accessible and understood Opportunities to input into the design Construction impacts and impacts to services	Fact sheets Project updates Emails/phone Website Social media Stakeholder meetings Information sessions FAQs Fact sheets
Priority community groups	Older persons LGBTQIA+ CALD stakeholders People with disabilities or complex needs People with chronic conditions People on lower incomes People experiencing family or domestic abuse Carers Youth (people between 10 years and 21 years)	Medium	Awareness and understanding of the project Project timeline Up to date and timely information that is easily accessible and understood Opportunities to input into the design Construction impacts and impacts to services	<i>(note: all content will be adapted to suit different needs)</i> Project updates Emails/phone Website Social media Stakeholder meetings Information sessions FAQs Fact sheets
Environment and ecological groups	TBC	High	Biodiversity of the site Capturing and showcasing the ecological values The connection of the hospital to the outdoors Appropriate planting and species Opportunities to be involved	Early consultation Provide research and investigations to guide engagement Negotiables for consultation to be developed Information sessions FAQs
Transport providers and user groups	Transport Canberra and City Services	High	Access and joint opportunities Fully integrated masterplan and transport Opportunity for user engagement	Early consultation Provide research and investigations to guide engagement Negotiables for consultation to be developed Information sessions and FAQs

Stakeholder group	Stakeholder	Interest level	Interest area	Tactics for engagement
First Nations communities, organisations, associations and services	First Nations engagement plan to be delivered as part of the external communication planning			

2. COMMUNICATION AND ENGAGEMENT APPROACH

2.1 An aligned approach

The Northside Hospital Project communication and engagement approach aligns with and leverages the ACT Health Infrastructure Communication and Engagement Strategy and principles. They serve as a guide to building trust, maintaining transparency, and creating an environment where everyone's voice is heard



2.2 Northside hospital project strategic framework

The new northside hospital sits within a substantial and well-established health precinct with an exciting broader masterplan. The northside team will focus on innovative and best practice engagement methods to build awareness, and ultimately support, from external stakeholders and communities while understanding the pivotal importance of our internal stakeholders.

This framework demonstrates how we will deliver consistent communications and engagement activities to support all project phases through a series of communication and engagement sub-plans. Each specific plan will focus on either a particular project stage or group of stakeholders. These plans will be revised and updated as required to ensure that they respond to project staging and deliverables.

The sub-plans are:

External Communications Plan

- Consumer Reference Groups
- Engagement with special interest groups, community members and other stakeholders
- Media and PR opportunities
- Campaigns focussed on increasing awareness of the project throughout its lifecycle
- Activities to broaden awareness and involvement

Internal Communications Plan

- Staff engagement and consultation
- Awareness and advocacy

- Impact management

First Nations Engagement Plan

- Developed and implemented in partnership
- Leading long-term opportunities

Audience specific or works specific plans

- Environment and transport plans
- Early works engagement
- Relocations

This framework for the new Northside Hospital Project focuses on early, proactive, transparent and regular communications and engagement throughout all stages of the project. This helps to develop community and stakeholder understanding, ensure opportunities for stakeholder and community input and feedback, identify and manage issues early and help achieve better outcomes for the project.

The interrelation of the strategy and plans is outlined in the diagram below:

Background	Key Messages	Approach	Stakeholders	Governance
• Project summary • Project history • Timeframes	• The project narrative	• Objectives • Principles	• Stakeholder cohorts • Areas of interest & influence	• Team structure • Role responsibilities & accountabilities • Protocols
Internal Engagement Plan		External Engagement Plan		
• Clinicians & staff • Detailed key messages • Detailed stakeholder analysis	• Engagement objectives • Engagement program • Collateral & activities	• Stakeholder cohorts • Areas of interest & influence • Negotiable & non-negotiables • Team structure	• Role responsibilities & accountabilities • Protocols	
Communications Plan		Evaluation Plan		
• Branding • Collateral	• Digital • Events	• Monitoring • KPIs	• Research	

This framework is based on providing appropriate levels of engagement. The level of public participation required for this project is informed by the IAP2 spectrum and based on the level of public impact from the project and the scope for community and stakeholder input to the Northside Hospital Project. The level of public participation required for this project will be at the 'Inform' and 'Consult' levels on the IAP2 Spectrum, stakeholders, such as service partners, consumers and staff being engaged at the 'Collaborate' level.

Inform	Consult	Involve	Collaborate	Empower
We will keep you informed	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decision to the maximum extent possible	We will implement what you decide
Neighbours Precinct partners Northside community Broader ACT	User groups Special interest groups Precinct partners Interface projects	Community Reference Group Health Reference Groups Youth Reference Group	Partner directorates Clinicians and staff First Nations	Project teams

2.3 Key message hierarchy

This key message hierarchy will guide key messaging for the northside hospital project to ensure the Territory wide health narrative as well as benefits are captured throughout the project lifecycle while supporting important operational and mitigation messaging needed to progress the design then construction of the project.

Tier 1 key messages	Tier 2 key messages	Tier 3 key messages
Territory wide messages. Who, what, why, when and how snapshot. Capture in our templates, pull out boxes, baseplates. Include on all communications.	Benefits key messages Opportunities	Operational Process What is happening What action or change is required?
Constant messaging Feedback loops Contact Us Support/Accessibility For more information		

These key messages have been developed as a scaffold to build communication tools and collateral to capture the bigger picture messaging right down to specific key messages on all communication. Each communication activity will include messages scaffolded from aspirational to practical.

To ensure consistency and recency of messaging, a full key message document will be reviewed and updated as part of the monthly Communication Engagement Working Group (CEWG) with all partners agreeing to updates prior to implementing.

2.4 Overarching engagement planner

This plan aligns with the three project stages of Planning, Design and Delivery and offers an overview of what will be covered in the sub-plans. This is an overview and specific action plans with timelines, roles and responsibilities will be developed for approval through the governance process.

Planning 2024-2025		Design 2025-2026		Construction – mid decade
Sub-plan	Build confidence in the planning and delivery process through education and awareness Develop a vision for the project and ensure consistency Focus on governance and transparency	Encourage proactive participation Manage concerns and set expectations Be regular, meaningful and transparent Listen and report back every time	Mitigate risks and misinformation Listen Be targeted and effective Focus on the project vision for the future	
Internal Communication Plan North Canberra Hospital Staff Full plan to be developed in consultation with CHS	- Staff briefing and pop ups to raise awareness and provide communication channels direct with MPC - Staff survey to learn more about the hospital, special interest areas and how they best receive communication. This may be an early engagement channel to understand any issues or concerns to develop required mitigation strategies. - All staff updates provided via intranet, video, written, forums - Ensure all external announcements for tenders, consultants etc are made internally as well, where possible prior to general public. - Nominate internal project spokesperson or champion to distribute project information. - Develop an internal look and feel for the project so staff can differentiate this information from other internal communications. - Where possible use existing communication channels. - CSP consultation and PUGs setup.	- Align consultations both internally and externally to key milestones - Capture, report and feedback to stakeholders to demonstrate the rigour of the design process. - Process and governance to open consultation to Project User Groups (PUGs) - Agree negotiables and close out all feedback - Present how feedback has driven design changes - Project updates using CHS channels - Staff briefings - Open communication channels - Create advocacy with consumer facing staff	- Impact management - Change/workforce management - Escalation process for issues - Provision of key messages for consumers and patients - Using the best platforms for messages on changes - Signage and wayfinding - Site tours - Media milestones and construction updates - Planned handover, change management and tours in the lead up to completion and go live - Promotion of outcomes aligned to the delivery of built infrastructure - Keep the vision front and centre	
Consumer Reference Groups	- One-on-one briefings to increase awareness and understanding of project, timeframes and opportunities - Ensure timelines and contact details are provided including meeting schedule and the best way to provide information - Survey or meeting on the best way to disseminate information - Timeline of expected consultation and planner - Offer one to one or group briefings outside of this group to key organisations - Lessons learnt review and plan - Inductions	- Project updates provided to this group to disseminate to stakeholders - Project milestone consultations and presentations - Two-way communication demonstrating informed design - Establish briefing and feedback process and timeframes	- Continued project updates to reach a larger audience through this group with construction impacts - Feedback on construction impacts accepted and closed out with this group - Consultation on construction impacts on access and wayfinding - Continued presentations and updates including imagery and tours	
First Nations	- Work with specialist consultant to map out strategy for engagement and key stakeholders and families - Understand priorities for these groups in relation to the area and the hospital - Look for two-way educational opportunities to understand country and the design process. - Map out consultation and feedback milestones - Possible Walk on Country if appropriate	- Meetings to explore culturally appropriate design opportunities - Meetings to explore construction related opportunities - Engagement at each design milestone and feedback on input - Two-way communication demonstrating informed design - Develop arts and cultural projects and outcomes	- Ceremony prior to any construction including early works - Onsite support as needed - Education opportunities for hospital staff - Broader community education opportunities - Content for Project Updates - Provision of all Project Updates to disseminate to broader community audience.	

Precinct stakeholders	- Project Updates - Briefings if needed - Provide contact details and key points of contact		- Consultation at project milestones - One to one precinct consultations	- Impact management - Escalation process for issues - Provision of key messages for consumers and patients - Using the best platforms for messages on changes - Signage and wayfinding
Environmental and Heritage	- Develop suite of professional information to inform any impacts - Provide updates and briefings as needed - Setup required reference groups to understand needs - Opportunities for involvement or projects		- Consultation at project milestones - Specific meetings or consultations as needed - Agree negotiables based on professional advice - Capture stories and outcomes - Project Updates and information to share with broader groups and interested parties.	- Active involvement where possible at various stages - Project Updates and FAQs - Escalation process for issues - Provision of key messages for stakeholders
Traffic and Transport	- Develop full stakeholder matrix and roles and responsibilities - Capture key engagements and outcomes - Seek to understand various outcomes		- Consultation at project milestones - Specific meetings or consultations as needed - Communicate outcomes in this area and agreement on strategy	- Construction impacts - Long term changes and education - Updating maps, GPS and guides - Wayfinding
Community Local residents Businesses	- Education around the process and timeframes - Use graphics and project updates for general awareness - Focus on the vision for the project - Area specific communications - Advocacy from the precinct and neighbouring precincts		- Public information sessions at shopping centres and key health hubs - Community group information sessions - Media and advertising for promoting engagement opportunities - In hospital pop up sessions - Static stands at libraries and key locations with feedback loops - Factsheets, website and Project Updates - Media	- Report back on Your Hospital campaign - Public information sessions for EIS, with supporting collateral
General Communications	- Setup templates and newsletters - Define and update project key messages and FAQs each month to ensure consistency - Specific FAQs – e.g Early Works - Media opportunities and events - Develop schedule of internal and external communications - Project factsheets - Built for CBR website - ACT Government owned channels – i.e. Our Canberra - Database development and management - Building key relationships		- Media opportunities and events around design milestones - Campaigns around key milestones - Built for CBR website - ACT Government owned channels – i.e. Our Canberra - Project factsheets - Project newsletters – internal and external - Specific engagement plans for key community and reference groups - Develop all complaint management process - Comms planning for construction methodology - Demonstrate the planning process - Collateral updates - Information display and collateral - Pop ups	- Impact management – noise, dust, vibration, closures, access, parking etc. - Way finding and engagement for key stakeholders - Clear lines to find out information - Complaint management - Website updates - ACT Government owned channels – i.e. Our Canberra
Evaluation	- Development of KPIs - Develop group assessment tool and check-ins for CEWG		- Evaluation at all engagement events and feedback ideas to the team - Capturing and monitoring internal and external complaints - Opportunities for promotion - Media sentiment	- Ongoing evaluation and feedback. - No. of internal and external complaints - Capturing and monitoring internal and external complaints - Opportunities for promotion - Media sentiment

2.5 First Nations engagement

MPC will work in partnership with specialist consultants as well as First Nations communities and families to ensure engagement is:

- > Delivered in partnership
- > Genuine
- > Meaningful
- > Sought at the correct points in the design development (with ample time for input)
- > Remunerated and arranged as appropriate (location, walk shop, yarning circle, online, in person etc)
- > Diverse in its reach
- > Appropriate in its touchpoints. That the most appropriate people are involved depending on the issue / theme being addressed.

MPC will continue to meet, engage and collaborate with governing bodies and through other forums as normal, or in collaboration with partner directorates and as needed.

The plan developed by a specialist First Nation consultant will align with the governance, key messaging and timelines of this strategy.

2.6 Tools and channels

The table below provides a summary of the tools that may be used to communicate and engage.

Tools and channels	Description
Project spokesperson(s)	The primary project spokesperson is Minister for Health. The primary MPC spokesperson is DG or their delegate (ie DDG). The internal spokesperson is the Project Director. Clinical or workforce spokesperson is CHS
Media (proactive and reactive)	Media events will be used to keep Canberrans informed of project developments, noting updates via mainstream media is an effective delivery tool to reach a wide audience. Reactive media issues and enquiries will be managed by MPC Communications and Engagement alongside partners. See RACI and SOP below.
Project key messages	Updated monthly and presented to CEWG to provide consistency and to capture moving project status for easy development of media, holding statements and speaking points.
Project email	A project email provides a direct and easy access avenue for the community, staff and stakeholders to ask questions or provide feedback.

Project webpage	A project website will be the single source of truth for the project. It will be updated regularly to provide updated information on the project.
Your Say and Built for CBR webpages	Clear link back to the project web page. Can be used while consultations are open for input.
Factsheets and project updates	Factsheets and tailored collateral will provide information about the project, design progress, construction methodology, next steps and address key community questions and issues.
Project distribution subscriber sign-up list	Stakeholders and the community will be encouraged to sign up for e-newsletters via the web and other engagement tools.
E-newsletter/email updates	E-newsletters and email updates will be sent to stakeholders and the community as per the project's sign-up list. The project's e-newsletter provides updated information on the project. Targeted email communication to stakeholder groups will also come from the Project team.
Advertising	Advertising through paid channels will assist in directing Canberrans to be informed and/or participate in formal consultation on the project.
Social media and other ACT Government owned channels	Regular posts to increase project awareness and encourage engagement with the project, support key project milestones and any consultation information or link. Other ACT Government owned channels, i.e. Our Canberra (print, digital and EDM) will also be used to increase awareness across the community for key project milestones.
Maps/visualisations/flythrough videos and artists impressions	Artist impressions and visualisations are used to share the project vision and communicate project outcomes and benefits to the community and stakeholders. High quality visualisations, maps and artists impressions (video and stills) to be used for public consultation and meetings with key stakeholders.
Virtual and augmented reality	Virtual and augmented reality could be used to help audiences better understand the designs being proposed for the project.
Pop ups/ community events and information displays	Pop ups are an effective way to personalise the project with one-on-one engagement between the public and project team members. Additionally, having a project presence at relevant community events, and at key stakeholder association events assists in familiarity with the Project over time.

Site events/ tours	Events for stakeholders and members of the community to interact with the project and to facilitate a maintained level of interest. May include media visits to promote the reporting of construction progress.
Feedback forms	Feedback forms will be used to gather insights at relevant forums, info sessions and activities.
Stakeholder packs	We will work with our stakeholders and reference groups to help share information through their networks. This will include creating content that can be shared through their channels and providing guidance on timelines. This will help broaden our reach and provide a trusted source of information.
Reference groups	Reference groups will be established as needed throughout all phases of the project – i.e. Health Infrastructure Consumer Reference Group, Northside Community Reference Group, Consumer Reference Group, First Nations Group/s etc
Briefings (key stakeholder/elected reps/gov agencies)	Key stakeholders and sensitive receivers will be given the opportunity to receive briefings on the project. Regular briefings will be scheduled with key stakeholders to seek input on project development and provide a project update.
Signage/notice boards	Project signage displayed when needed outlining key project information and using appropriate ACT Government branding.
Photography/videos	Share the construction journey using renders, photos, drone footage, and time-lapse video.
Work notifications	For construction phase and early works activities. Notifications will be distributed prior to works being undertaken and will be distributed electronically and on the website. These can be provided well in advance of works to be distributed to hospital users.
SMS	Use of SMS updates around construction, parking or traffic changes will be explored as the project progresses.
Door knocking	Door knocking will be used as required to gain contact details, seek feedback, engage with impacted stakeholders and provide project information or updates.
Individual and group meetings (on-line/face-to-face)	One-on-one or group meetings are used to engage with nearby property owners, landholders and interested stakeholders as requested by the stakeholder or the project team. Meetings can be held in person or online and provides a mechanism for informing, collaborating, addressing issues and gathering feedback.

2.7 Branding

Built for CBR is the ACT Government's infrastructure brand. Its purpose is to clearly and consistently highlight the benefits of the Territory's infrastructure projects to the community. This brand will be used on all external facing content through all of the project's phases. For more on the Built for CBR brand and its principles, refer to the [Built for CBR Brand Guardian](#).

Communications and engagement internal to ACT Government

As the Directorate is responsible and accountable for the project, communications and engagement to other directorates and agencies should use MPC branding and templates. This includes, briefs, reports and all other correspondence.

The ACT Government uses the [Australian Government's Style Manual](#). The Style Manual is information easy to read, accessible and inclusive.

2.8 Accessibility

To ensure we are delivering accessible information and encouraging diversity in the feedback received, the following communications and engagement tools and methods will be used to meet the needs of various audiences. These include those that have mobility issues, are vision or hearing impaired, have low literacy, are from culturally and linguistically diverse (CALD) communities, children and the elderly. Easy English standard will be applied.

Channel/ method	Accessibility
Website	The Project website will be WCAG 2.1 level AA.
Hybrid meetings	Hybrid meetings will always be offered when engaging with stakeholders and the community.
Venues	Venues used for consultation activities will be easily accessed with public transport, have nearby accessible parking and allow for equal entry, circulation and participation for the whole community.
One-on-one conversations	Discussions over the phone or face-to-face can be arranged for those who need additional assistance to receive information or provide feedback.
Project collateral	- We are committed to improving accessible design in printed and online collateral to improve readability such as use of colour, font sizes, alt text, meaningful captions, audio content where possible. - Easy English collateral will be considered. - Printed collateral can also be requested for those who do not have access to a computer.

Translation service

- Major Projects Canberra has established a free telephone service for people who require translation support 13 14 50. This is available on project collateral and the website.

Co-design and representation

- We will consult with those who have a lived experience in developing engagement and communications methods that facilitates genuine inclusion. This could include accepting video submissions, the use of a variety of survey tools and engagement styles, or the flexible consideration of meeting times and locations.
- We will ensure broad representation on reference groups and on engagement activities, or design opportunities to ensure diverse voices are heard.

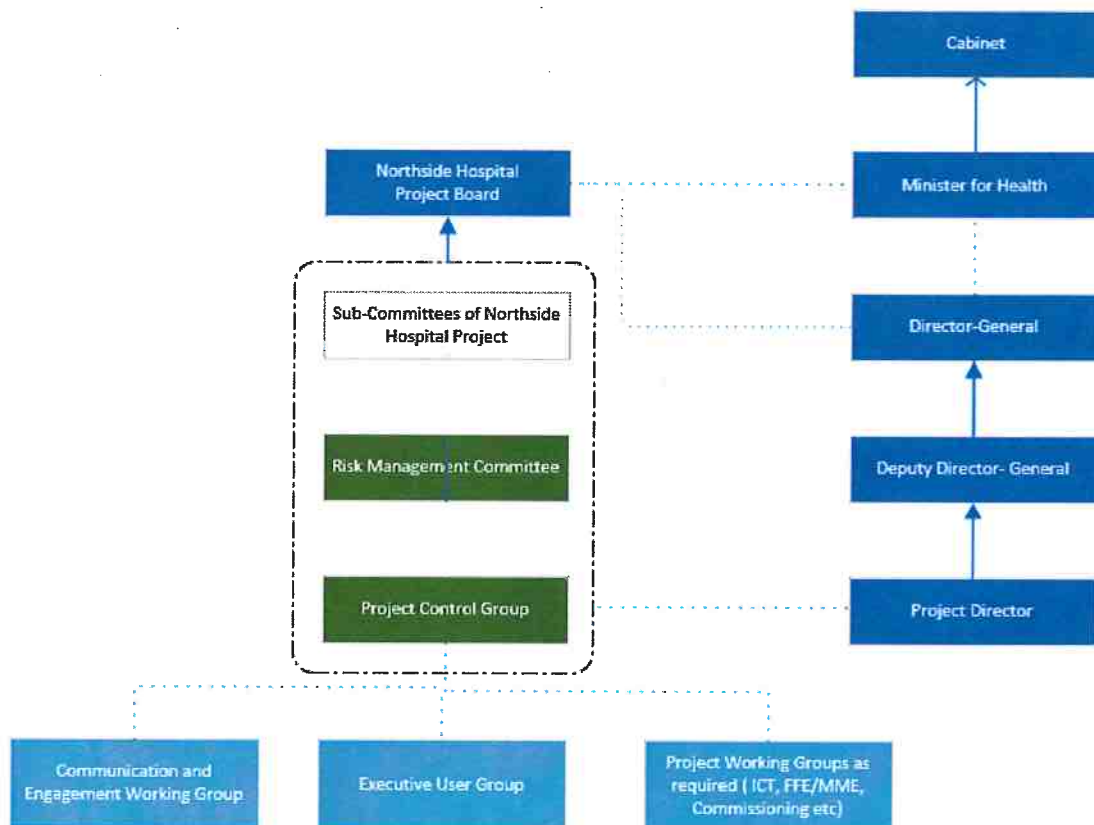
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3 GOVERNANCE AND PROTOCOLS

An overarching governance structure has been established to ensure that adequate input is provided to the project from all levels within MPC, ACT Health and CHS.

This strategy outlines a specific approach for developing, progressing and agreeing upon communications and engagement activities for the project in line with the overarching governance plan. It is intended to make clear the accountabilities, responsibilities and support required from all organisations.

Refer governance structure below:



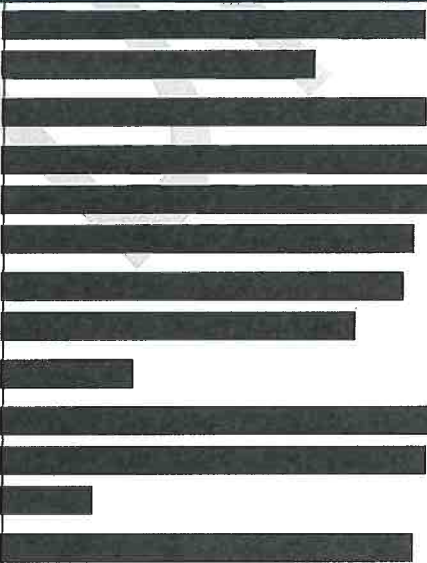
3.1 Communication and engagement roles and responsibilities

With communication and engagement professionals supporting the project from all areas the roles and responsibilities below will be used to support the approach and reflect the governance and approvals structures in place.

Major Projects Canberra	Canberra Health Service (CHS)	ACT Health
• Strategy and communication planning • Media and ministerial milestone opportunities • Community and special interest group engagement • Closing out enquiries or complaints • Materials development • Internal communication development	• Staff engagement and internal communications support • Staff transitions, workforce planning and change management • Operational input into local community engagement and planning • Internal communications support and approvals	• Business Case • Clinical Services Plan • Policy • Service Design • Community Health • Integrated Health Network promotion

3.2 Project team roles and responsibilities

In addition, to the communications and engagement specialists with direct responsibility for implementing engagement activities there will be senior executives and teams with accountability for ensuring communications outcomes help meet project aspirations and reduce risk. The table below provides an overview of the key roles.

Title	Members	Accountability
Project Board		Board TOR includes: • Provide advice in respect of strategy formulation and project development matters in with the project management team. • Provide advice to assist the project team performing its functions and exercising its powers in a proper, effective and efficient way. • Review, comment and endorse Cabinet submissions. • Provide advice in respect of key emerging risks and issues, including stakeholder risks and strategic risks.

Title	Members	Accountability
		- Assist project team to assist in achieving organisational goals and alignment with other ACT Government plans and strategies. - Approve and note Business Case appendices including Communications and Engagement strategy.
Project Control Group		PCG TOR includes: - Provide direction, guidance and oversight to the NHP Project Team (across the planning, design development, construction and commissioning phases), - In partnership with Communications and Engagement teams, provide appropriate and consistent engagement and communication with staff of CHS, consumers and local residents to both gain input to, and disseminate information from the NHP PCG. - Endorse and/or make recommendations to the NHP Project Board regarding the budget for the various aspects of the project.
Project Director		- Provide look ahead to inform communication. - Update team on program, risks and issues from project, Board and PCG - Attend CWG.

Title	Members	Accountability
Project Communication and Engagement lead supported by MPC Senior Director Communications and Engagement	MPC	• Lead Project communications and engagement. • Implement communication plans. • Prepare material/ collateral. • Ensure consistency with MPC and Whole of Government processes. • C&E reporting. • Respond to enquiries and close out.
Canberra Health Services	CHS CWG Members	• Internal communications feedback and channels.
ACT Health Directorate	ACTHD CWG members	• Internal communications feedback and channels. • Delivery of the ACT Health Infrastructure Communication and Engagement Strategy.
Communications Working Group		• Agree C+E plan for approval through governance. • Ensure internal approvals and escalation.
MPC Senior Director Communications and Engagement	Corporate communications	
Project communication lead	Media Graphic design	
Consultants		• Assist in preparation and presentation of information and materials in their area of expertise.
Contractor		• Program of works.

Title	Members	Accountability
		• Design principles. • Signage. • Plans.
Commissioning/ Change team		

3.3 Communications Working Group (CWG)

The communication working group is responsible for strategic oversight of the planning, coordination and implementation of all project communications and engagement activities, as well as issues and media management. The CWG will meet monthly to review, approve and provide input into planned activities. The working group will also report on C+E risks and issues to the PCG and will agree on a forward plan of activity with an outcomes report issued in each meeting for reporting. This group will include:

Role	Position	Name
Chair	Senior Director, Communications and Engagement (MPC)	

Terms of Reference, Standard Operating Procedures and RACI are incorporated into Appendix B. These will be reviewed and updated biannually and aligned with project staging.

3.4 Protocols

The following protocols will be employed to ensure a consistent and comprehensive approach to communications and engagement throughout the project lifecycle.

Escalation process

The Northside Hospital Project Communications and Engagement lead, supported by the Project Communications Manager, will have overarching responsibility for implementation of this strategy and associated plans and for identifying, coordinating and reporting on items which require escalation, to the Senior Director Communications and Engagement and the Project Director.

Led by MPC, the Communications and Engagement Working Group (CWG) will have full overview of issues and will be responsible for the development and implementation of the CEP. The CEWG escalates any issues or concerns to the Project User Group.

Contact and communication management

We will set up and manage the project specific email, as well as a database to community/stakeholder contact. As the project progresses this may also include a 1800 number for construction related enquiries.

Capturing and closing out all consultation is an important element for the entire team to take responsibility for, with numerous cross team interactions with stakeholders. Consultation Manager is designed for the process to occur.

3.5 Community feedback and complaints

Stakeholders and the community can ask a question, provide feedback or make a complaint by:

- emailing
- calling or emailing a member of the Project team directly
- calling Access Canberra on 13 22 81
- completing a feedback form at a relevant event, pop-up or engagement.

In the design phase and as the Project moves into early works and construction, the Project will manage complaints in line with the 'Major Projects Canberra – Community Liaison Management Guidelines', which provides guidance and a series of protocols for managing and escalating complaints.

4 MONITORING, REPORTING AND EVALUATION

Monitoring, reporting and evaluation will be carried out over the life of the Project and used to assess what is/isn't working, next stages, opportunities, or adjustments to engagement planning and delivery.

Reporting

All communications and engagement activities including stakeholder meetings and interactions will be tracked, evaluated and reported.

The types of communications and engagement reports produced will include:

- post announcement and monthly media summaries
- monthly/or quarterly communication data reports (TBC)
- post consultation briefing session summaries/minutes/actions (as needed)
- post consultation listening reports (as needed)
- post consultation 'What We Heard' reports (as needed)
- YourSay data collection and activity reports (monthly).
- CM stakeholder reporting as required by the PD or PCG

Evaluation

Regular evaluation will be conducted to track and monitor the effectiveness of activities, capture sentiment and identify areas where more work is needed to inform and engage our audience.

An evaluation will be conducted at the end of each consultation activity, with specific measures outlined in the relevant communications and engagement action plan. A listening or 'What we Heard' report will be prepared to close out the engagement loop and report back on:

- who we engaged with
- how engagement took place
- how much feedback was received
- key themes raised
- how community and stakeholder feedback was or is being used in project development.

Success will be measured in areas of:

- number of submissions received
- number of people attending information sessions
- number of stakeholders engaged or participating
- number of community members engaged or participating
- positive sentiment
- website views
- social media reach and engagement
- media coverage
- post event surveys, feedback loop from stakeholders on effectiveness of engagement.

Communication team annual goals

These are to be developed jointly with the CEWG and reviewed annually aligned to project milestones.

Appendix A – Approvals and responsibility matrix and standard operating procedures

Appendix B – Key messages

Appendix C– Complaints Management Process

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Appendix A - Approvals and responsibilities matrix and standard operating procedures

The MPC communication and engagement team and / or approved representatives will draft communication and engagement material for review and input by internal stakeholders and ministerial offices as required.

Major Projects Canberra (MPC) is responsible for delivering the communications and engagement for this project, working closely with CHS and ACT Health.

The below table outlines activities for the planning phase of the project to be updated as the project progresses.

Activity	Responsible <i>Who will do the work</i>	Accountable <i>The 'back stops here'</i>	Consulted <i>Opportunity to input</i>	Informed <i>Kept in the loop</i>
Health Infrastructure Program - community education and awareness	ACT Health	ACT Health	Major Projects Canberra CMTEDD	Canberra Health Services
NHP communications, media, key messaging and awareness as per the Communication and Engagement Strategy	Major Projects Canberra ACT Health	Major Projects Canberra	ACT Health Canberra Health Services	CMTEDD
Communication and Engagement Action Plans - Activity specific implementation plans and timelines	Major Projects Canberra	Major Projects Canberra	Canberra Health Services ACT Health	
Communication collateral regarding: - clinical - models of care - operational	Canberra Health Services	Canberra Health Services	ACT Health Major Projects Canberra	CMTEDD
Communication collateral NHP - infrastructure program - scope - timeframes and milestones - impact management	Major Projects Canberra	Major Projects Canberra	Canberra Health Services ACT Health	CMTEDD
Stakeholder and community engagement - Design - Delivery	Major Projects Canberra	Major Projects Canberra	Canberra Health Services ACT Health	CMTEDD

Activity	Responsible <i>Who will do the work</i>	Accountable <i>The 'buck stops here'</i>	Consulted <i>Opportunity to input</i>	Informed <i>Kept in the loop</i>
Internal communications regarding NHP to hospital staff, clinicians and contractors	Major Projects Canberra	Canberra Health Services	Major Projects Canberra	ACT Health
Milestone announcements	Major Projects Canberra	Major Projects Canberra	Canberra Health Services ACT Health	CMTEDD
Relocation of CAMHS - clinical engagement	Major Projects Canberra	Canberra Health Services	Canberra Health Services	ACT Health
CAHMS Cottage	Major Projects Canberra supported by Canberra Health Services	Major Projects Canberra	Canberra Health Services ACT Health	
Gawarrngal	Major Projects Canberra supported by Canberra Health Services	Major Projects Canberra	Canberra Health Services ACT Health	
Alcohol and other drugs (AOD) Directions/Arcadia House	Major Projects Canberra supported by ACTH	Major Projects Canberra	Canberra Health Services ACT Health	
Design and Construction of Northside Hospital including on site early works	Major Projects Canberra	Major Projects Canberra	ACT Health Canberra Health Services	CMTEDD
First Nations engagement Clinical planning and engagement	Canberra Health Services	Canberra Health Services	ACT Health	Major Projects Canberra
First Nations Design engagement	Major Projects Canberra	Major Projects Canberra	Canberra Health Services	ACT Health

Activity	Responsible Who will do the work	Accountable The 'buck stops here'	Consulted Opportunity to input	Informed Kept in the loop
Health Infrastructure Consumer Reference Group	ACT Health (post Nov 2023 – Handover to MPC supported by ACT Health)	ACT Health post Nov 2023 – Handover to MPC supported by ACT Health)	Major Projects Canberra	Canberra Health Services
Project reference groups (as needed)	Major Projects Canberra	Major Projects Canberra	Canberra Health Services ACT Health	
Statutory Planning approvals	Major Projects Canberra	Major Projects Canberra	Territory Agencies as required	ACT Health Canberra Health Services
Clinical services planning	Canberra Health Services	Canberra Health Services	Major Projects Canberra ACT Health	
Operational Readiness	Canberra Health Services	Canberra Health Services	Major Projects Canberra ACT Health	
Decant – Early works and main hospital	MPC Canberra Health Services	Canberra Health Services	MPC Canberra Health Services	

Standard Operating Procedures

This Standard Operating Procedure (SOP) outlines how communication and engagement activity will:

- Be forecast and tracked monthly
- Allow time for input from Communication and Engagement teams
- Reviewed and approved by all agencies where appropriate
- Ensure messaging is consistent and activity is planned in a way that meets the needs of all agencies
- Provides clear timelines for differing internal approval processes and be able to be tracked during this process
- Provide confidence that each team understands different operating requirements and timeframes.

Responsibilities

Communications and engagement activities for the design and construction phase of NHP is led by **Major Projects Canberra (MPC)**, in collaboration with **ACT Health, Canberra Health Services (CHS)**, and **Chief Ministers, Treasury and Economic Development Directorate (CMTEDD)**.

This document will be reviewed every six months to align with project milestones and phases and be updated in parallel with the RACI, which outlines key roles and responsibilities for project activities. Clearance and approvals processes should be determined based on the activity type listed in the RACI.

To streamline approvals:

- All upcoming activity in relation to the northside hospital project will be provided in a forecast as part of the Communication Engagement Working Group each month to provide awareness of timeframes and approval requirements.
- Each agency will nominate a single point of contact responsible for managing internal approvals and these key people are noted at the end of this document.
- An approvals matrix table will be developed and added to the approval process to provide visibility of who has provided input and or approved communication materials. Each agency to sign once internal approvals are complete or to provide notes should changes be needed before approvals are provided.
- The communications teams will work on drafts, with the lead agency providing clean versions for internal director and executive approvals once the communications team have completed reviews
- Relevant content and materials will be saved in file share system.
- Where possible provide up to two weeks' notice when packages of works need to be approved.

MPC	CHS	ACTH
Subject matter expert in design and construction	Ensure MPC input and fact checking of internal communication	Provide input at working approval stage to ensure alignment with overarching health strategy and tactics
Review and fact checking of dates and details	Gain internal approvals of internal and external communications	Provided an understanding of who has provided input and who will be progressing.
Gain project-based approvals from PMs and PDs	Approvals from line area or relevant team	Provide clean versions for Exec approvals and DDG and DG approvals.
Ministerial team will progress relevant items to DDG, DG and Ministers.	Gain DCEO and CEO approvals prior to Government Relations team	

Approval process

#	Activity/ item	Process	Clearances	Clearance turnaround
Media items				
Where possible, all opportunities to be flagged at Communication and Engagement Working Group (CEWG) through a short- and long-term forecast.				
1	Arrangements briefs Event proposals Media releases Media pitches Talking points	Lead directorate is determined by the C&E teams. Responsible directorate will: • draft materials • Liaise with and seek input from partner directorate's C&E teams • get executive approvals • sends to partner directorates for clearance - Approvals required: ACT Health: EBM Comms, EGM Infrastructure CHS: Senior Director of Content and Engagement, relevant Exec and DCEO MPC: Senior Director Comms and Project Director, DDG • sends to relevant Minister's Office/s for clearance • sends final Minister cleared materials to partner directorates via Ministerial teams for information. • C&E team sends final Minister cleared materials to C&E colleagues in partner directorates for information.	All agencies listed on RACI doc under 'Consulted' (depending on activity type) Note: Any events anticipated to be at NCH needs prior agreement from CHS/NCH.	3- 5 working days when submitted to directorate ministerial teams for clearance, unless a deadline is indicated. Where possible 2 weeks advance lead time should be provided to allow for drafts to be closed out with teams prior to approvals.
52	Media enquiries	Lead directorate for a response is determined by the C&E teams. Responsible directorate will: • draft response • seek input from partner directorates communications teams (if required – e.g. missing info) • send to supporting directorates for formal approval (via <u>directorates communications teams</u>) following full clearances through responsible directorate. <i>(If parallel approvals are required the lead directorate will coordinate)</i> • send to Ministerial Office/s for clearance • send final response to media, and to partner directorates for information.	All agencies listed on RACI doc under 'Consulted' (depending on activity type)	Response usually required same day. Take direction from lead agency on deadline request. Note: Due to tight timeframes of media enquiries, a no response from partner directorates by the due deadline may be taken as approval unless advised otherwise.
Strategic communications				
All new planned communications plans for Northside Hospital Project design and construction phase to be flagged at Communication and Engagement Working Group (CEWG) including changes to key messages, FAQs and timeframes for implementation				
4	Communication plans (Tier 1, 2 and 3),	• MPC drafts plans in relation to the design and construction of NHP	All agencies listed on RACI doc under 'Consulted'	

	for projects relating to NHP	- MPC seeks input from partner directorate's C&E teams to ensure alignment with other campaigns or engagements - MPC gets executive/ approval where needed - MPC sends to partner directorates for clearance - MPC sends to Minister's Office/s for clearance where relevant - MPC sends final Minister cleared materials to partner directorates Ministerial teams for information. - MPC C&E team sends final Minister cleared materials to C&E colleagues in partner directorates for information. - MPC to manage changes and timeframes Note: communication plans are usually progressed with a brief and should be managed in line with Ministerial / Cabinet processes.	(depending on activity type)	Where possible 2 weeks advance lead time should be provided to allow for drafts to be closed out with teams prior to approvals.
Content / collateral Note: This process has MPC as lead agency, if content, collateral, campaign or engagement is led by a partner directorate, follow same process with MPC providing input Process will be dependent on the type of collateral and the below is an example.				
5	Social media content Website content Print and digital collateral (e.g. factsheets, postcards, project update, signage) Presentations Video content (including briefs where applicable)	- Each directorate seeks input from partner directorate's C&E teams or provides copies for awareness to ensure information has correct timeframes and facts, depending on the type of collateral. - Comms and Engagement teams liaise with partner directorate's C&E team for review of drafts and executive clearance - MPC sends to Minister's Office/s for clearance (via MPC ministerial teams) - MPC C&E team sends final Minister cleared materials to C&E colleagues in partner directorates for information.	All agencies listed on RACI doc under 'Consulted' (depending on activity type)	3-5 working days or by indicated deadline
	Community engagement materials (e.g. YourSay content, letters to stakeholders, Listening reports)	- Lead directorate drafts materials - MPC seeks input from partner directorate's C&E teams - MPC liaises with partner directorate's C&E team for review of drafts - MPC gets executive clearance - MPC liaises with partner directorate's C&E team for their internal executive clearances if required - MPC sends to Minister's Office/s for clearance (via MPC ministerial teams) - MPC C&E team sends final Minister cleared materials to C&E colleagues in partner directorates for information.	All agencies listed on RACI doc under 'Consulted' (depending on activity type)	3-5 working days or by indicated deadline

Key contacts

The contacts highlighted below are responsible for gaining internal approvals within their directorate.

[illegible]

Appendix B Key messages

These messages are dynamic and aligned to the changing project environment. To ensure consistency and recency these will be updated monthly and review as part of the CEWG meeting.

TIER ONE KEY MESSAGES

ACT Government's is committed to a more integrated and sustainable health system for the Canberra community.

- > The ACT Government's vision is for a public health system in the ACT that is accessible, accountable, and sustainable.
- > ACT Government is committed to health care 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 regions.
- > Canberrans should have access to public health care, where and when they need it.
- > The ACT Government is investing in health infrastructure to support the Territory's changing health needs now and into the future.
- > The ACT Government is building a new northside hospital to meet the growing health care needs of our community with demand for hospital services in Canberra's north expected to more than double by 2041.
- > A new northside hospital will provide care for the community, meeting the demand for public hospital services driven by expected population growth, an ageing population and the changing health needs of the community.
- > Bringing together the ACT's health services to become one, integrated public health system ensures we can support the health of the community into the future.
- > From our health centres and Walk-in Centres to our hospitals, we are making sure you can access the very best health care where and when you need it.
- > The ACT Government is investing in attracting, training, and retaining the best health professionals.

TIER TWO KEY MESSAGES

Opportunity

Canberra's northside community is set to benefit from a \$1 billion investment into a new state-of-the-art hospital that will strengthen health services and serve a growing and ageing population.

- > The new northside hospital will be the largest health project ever undertaken in the ACT.
- > Located on the North Canberra Hospital site the new state-of-the-art hospital will provide (XX greater capacity, enhanced services, specialist services, increased emergency capacity, integrated services....)
- > The new northside hospital will create more jobs both during construction and operation and will help attract and retain a clinical workforce with modern, state-of-the-art facilities.
- > The new northside hospital provides more convenient access to health services, creating a more liveable city.
- > The new northside hospital will provide modern, sustainable, and accessible infrastructure to support our growing city. It will consider our wider sustainability goals, including the net zero target.

- > By delivering a new state of the art facility on an existing health site provides the opportunity to develop a masterplan to support growth and complementary services and transport.
- > With construction set to commence by mid-decade, the northside hospital will provide public health services to Canberra's north for decades to come.

North Canberra Hospital

During the planning and delivery of the new northside hospital the North Canberra Hospital will remain open and fully operational.

- > The new northside hospital will be built on the existing North Canberra Hospital campus in Bruce.
- > The new northside hospital will not be an additional hospital for the ACT but will replace the existing North Canberra Hospital with a larger, modern hospital.
- > Delivering a new northside hospital builds on the ACT Government's commitment to a more integrated and sustainable health system for the Canberra community.
- > The safety, health and wellbeing of patients and staff will remain our top priority.
- > While planning and construction is in progress, public hospital services will continue to be provided on the site.
- > The hospital will remain open throughout construction.
- > The initial early works onsite will commence in 2025.
- > Over the last five years alone, the ACT Government has invested more than \$62 million in capital works at North Canberra Hospital, and we will continue to invest in the facility until the new northside hospital is built.

TIER THREE KEY MESSAGES

Process

Building a new hospital starts with good planning. The development of a Clinical Services Plan that is specific to the health needs of the community is an essential first step for the new northside hospital.

- > Clinical service planning for the new northside hospital demonstrated (insert needs xx) that can be delivered with this new hospital.
- > Planning and design of the new hospital is being led by Major Projects Canberra with partners ACT Health and Canberra Health Services and a team of specialist consultants. It is a collaborative process involving clinicians and operational staff, patient groups, local stakeholders and the community.
- > The project team is working with clinicians and operational staff, patients, carers and the community to complete functional design, concept design and schematic design for the new hospital.
- > The project to date has been committed to and undertaken regular, detailed and consultation with the community, local industry, health consumers and hospital staff and we intend to continue this close collaboration through development of the design, service planning and construction.
- > During the planning and delivery of the new Northside Hospital the North Canberra Hospital will remain open and fully operational.

Consultation

Building a new contemporary facility requires thoughtful planning and consultation to ensure it meets the needs of staff, clinicians, patients, community members and visitors, now and for years to come.

- > The ACT Government is committed to working closely with the community, stakeholders, consumers, and our workforce to ensure health facilities are designed to meet the needs of Canberrans now and into the future.
- > There will be significant opportunity for the community to provide their feedback on the design and construction of the new northside hospital.
- > The project team is working with clinicians and operational staff, patients, carers, special interest groups, First Nations and the broader northside community to complete planning and design for the new hospital.
- > Throughout the planning process there will be numerous opportunities to see how stakeholder feedback can be integrated.
- > This is a new hospital for the northside, and we encourage local communities to be involved and reimagine a new hospital precinct.

Project design outcomes and innovations

- > The ACT Government is designing a facility to enhance consumer, staff and public experience, while at the same time providing innovation in the design of health infrastructure.
- > The new Northside Hospital Project will deliver facilities that support greater alignment of health service delivery across the ACT.
- > The new Northside Hospital Project will deliver sustainable and environmentally conscious health infrastructure that is contemporary, safe and appropriate to support the delivery of modern, high-quality healthcare.

Appendix C– Complaints Management Process

[Title]

This core process is part of MPC's Quality Management System. It outlines the standards, requirements and expectations in managing, actioning and recording enquiries and complaints received by the community and stakeholders related to MPC matters and the designated projects managed by Major Projects Canberra.

This document functions as an 'internal control' to safeguard our people and assets, minimise errors and ensure that operations are conducted in a consistent and approved manner.

The following roles and responsibilities have been identified for this work instruction:

Role	Responsibility
Communications and Engagement Team	- Implement Community Liaison Management Guidelines outlined in this document. - Respond promptly to all enquiries and complaints received via phone, in writing and in person. - Monitor project inboxes during business hours (9am to 5pm, Monday to Friday). - Provide a written or verbal acknowledgement to community enquiries/feedback within one business day, sooner if related to onsite construction works. - Where possible keep the enquirer and/or complainant informed of the process until the enquiry/complaint is resolved. - Coordinate, draft and approve community enquiry and complaint responses as per approved protocol outlined in Section 3.0 below. - Close out community enquiries and complaints within agreed timeframes. - Record all enquiries, complaints and outcomes in accordance with the Territory Records Act 2002 (refer to section 2.2). - Track trends in community feedback and complaints and provide to contractors, project teams and MPC for continuous improvement and reporting. - Refer community enquiries and complaints received in relation to other Directorates to the appropriate Communications and Engagement team / member and advise stakeholder.
Project teams	- Ensure complaints received on the work site or at any project location are referred to the Communications and Engagement team in a timely manner. - Assist in resolving enquiries and complaints, including providing technical information and review, within the allotted timeframe for response.
Contractors	Ensure complaints received on the work site or at any project location are referred to the Communications and Engagement team in a timely manner.

	• Provide information as requested by the Communications and Engagement Team within the allotted timeframe for response. • Manage resolution of construction-related enquiries and complaints in accordance with agreed process and/or requests from the Communications and Engagement Team (refer to section 2.6). • Resolve queries with approved project information and record details as per process outlined in Section 2.2 below.
• Other ACT Government Directorates	• Refer community enquiries and complaints received directly in relation to Major Projects Canberra back to the appropriate Communications and Engagement team / member. • Assist in resolving enquiries and complaints where there may be overlap in responsibility (traffic management, public transport impacts etc). • Approve responses to Tier 1 enquiries and complaints in line with approved Community Liaison Management Guidelines.

Process instructions

How enquiries, compliments or complaints are made

Enquiries, compliments and complaints can be lodged via one of the following methods:

Method	Details
Email	Major Projects Canberra: majorprojectscanberra@act.gov.au (monitored 9am to 5pm, Monday to Friday, excluding public holidays) Designated project inboxes (monitored 9am to 5pm, Monday to Friday, excluding public holidays), including: • Canberra Light Rail: lightrailtowoden@act.gov.au • CIT Campus – Woden: citcampuswoden@act.gov.au • Canberra Hospital Expansion: hospitalexpansion@act.gov.au • Canberra Theatre: canberratheatreproject@act.gov.au
Phone	Available project community information lines: • Raising London Circuit/light rail: 1800 956 409 (24 hours a day, seven days a week) Complaints and enquiries can also be directed to the construction contractor or onsite construction manager/supervisor of each project.
Letter	Major Projects Canberra PO Box 158 Canberra ACT 2601
In person	Via meeting or information session
Online	Each of the project's 'Contact Us' pages outlines the most efficient online method to provide feedback, a compliment or complaint.

Record keeping

In accordance with the Territory Records Act 2002, comprehensive records (electronic) must be maintained using an approved Major Projects Canberra records management program (Objective).

Recommended information to record includes:

- all communication and documentation to and from the enquirer/complainant
- any correspondence received and/or sentiment relating to the matter
- issues raised and any information discussed, both internally and externally
- what records were used in the analysis of the enquiry/complaint
- the outcome(s) of the enquiry/complaint including any recommendations or decisions made and any actions undertaken or proposed, or investigations underway
- verbal or written authority to communicate with third parties on behalf of the enquirer/ complainant
- Response to enquiry/ complaint and response times. Include decisions made about the issues, the reasons for the decisions and any evidence referenced sections of legislation, policies, procedures and business rules that were relevant to determine a fair and reasonable outcome to the issues.
- any undertakings given to the person making an enquiry/complaint about actions that are to be taken to resolve the problems identified as a result of their enquiry/complaint.

Referring community enquiries

Where an enquiry is received that does not relate to activities planned, in progress or completed by MPC, the referring officer will identify the appropriate ACT Government agency to respond, forward the enquiry and provide the customer with an updated point of contact within five business days.

Definitions

Enquiry

A general question or compliment made by a member of the community, industry representative or interest group.

Enquirer

A person lodging a general question or compliment about a MPC project or its staff.

Complaint

An expression of dissatisfaction made to or about a MPC project, its staff or the handling of a complaint where a response or resolution is expected or legally required. A complaint covered by this Policy includes:

- any allegation of impropriety or misconduct by a staff member not covered by the Code of Conduct during the project
- any clearly articulated grievance about the handling of a matter, our policies, procedures, actions or proposed actions or service during the project.

Complainant

A person expressing dissatisfaction about a MPC project, its staff or the handling of a complaint where a response or resolution is expected or legally required. A complaint can be made by one person, jointly with somebody else, or can be lodged on another person's behalf.

Concern

A less formal expression of worry or anxiety about an issue which expresses a hopeful resolution.

Critical Incident

A traumatic event or threat of such (within scope of MPC delivery) which may cause extreme stress, fear or injury.

Dispute

An argument or disagreement between two or more parties where agreement on the facts or resolution cannot be reached.

Feedback

Positive or negative opinions, comments and expressions of interest or concern made about MPC, its projects, its staff or the handling of a complaint where a response or resolution is NOT expected or legally required.

Receiving community enquiries/complaints

Enquiries and complaints may be received via phone, letter, email, website, face-to-face engagement or via a contractor. Any enquiries and complaints including supporting information must be recorded from first contact. The initial record of the enquiry will document:

- date and time of the enquiry or complaint
- method of enquiry or complaint (e.g. phone, email, meeting, letter)
- the contact information of the enquirer or complainant
- summary of the enquiry/complaint and nature (e.g. noise, vibration), including sentiment
- any other relevant information (e.g. location, number of people affected by a complaint)
- any commitments made
- any additional support the person making a complaint requires.

Confidentiality

Personal information that identifies individuals will only be disclosed or used by MPC as permitted under the relevant privacy laws and any relevant confidentiality obligations. An enquirer or complainant's contact information along with their query will be recorded for the purposes of addressing their enquiry.

Role of appointed contractor(s)

Appointed works contractor(s) will play a vital role in the triage, escalation and resolution of community enquiries and complaints. MPC's Communication and Engagement Team will ensure contractors understand their role in this regard via:

- delineation of responsibilities and required escalation protocol in contract documents
- provision of the approved Community Engagement Management Guidelines.

Responsiveness and timeframes

Timeliness is an important driver of customer satisfaction across all levels of government regarding service delivery. While resolution of complaints can be complex and take time, we will endeavour to meet the following minimum standards:

- all construction-related complaints received are acknowledged within the same business day, or within the project agreed timeframe, and resolved within 10 business days, if the complaint cannot be resolved in the initial contact
- all enquiries/feedback received are acknowledged within one business day of receipt and resolved within ten (10) working days
- where a response within 10 working days is not possible, the enquirer or complainant will be notified and expectations regarding the timeframe for response will be managed accordingly
- All enquiries/feedback and complaints will be recorded within a timely manner in accordance with the Territory Records Act 2002. An enquiry/complaint will be assessed and prioritised in accordance within the Tier of the

issues raised (refer to Section 3.3). If a matter concerns an immediate risk to safety or security, the relevant critical incident notification process should be initiated via the relevant *Project Director* and/or *Contractor's Representative*, and the response escalated accordingly.

Managing expectations

While MPC makes every effort to meet the expectation of enquirers and complainants, sometimes expectations cannot be reasonably met. Our commitment is to we provide all relevant facts and related information in a timely manner including:

- who is handling their enquiry and how to contact them
- how the enquiry will be handled
- the expected timeframes for our actions
- the progress of the enquiry and reasons for any delay
- their likely involvement in the process
- what to do next if not satisfied with the outcome.

If we are unable to meet the enquirer or complainant's expectations, we will endeavour to explain what we can and cannot do and provide alternative avenues. If we are unable to deal with any part of an enquiry/complaint, we will advise the enquirer or complainant as soon as possible and provide guidance as to where such issues may be directed (if known and appropriate).

If the specified timeframes for responding to complaints is likely to be longer than is reasonably expected, this will be explained in the response acknowledging the enquiry/complaint or in additional correspondence.

Classifying complaints

Complaints are classified using a triage methodology to determine the complexity, urgency and risks associated with a complaint. The majority of enquiries/complaints will fall within tiers 2 and 3. The triage levels are described as follows:

Tier 3

Tier 3 enquiries/complaints are classified low risk and the project team will seek to resolve these within a reasonable timeframe and method. Depending on the nature of the enquiry/complaint it might be resolved in person, on the phone or through a follow-up email or letter using approved project information. Wherever possible, resolution of a Tier 3 complaint will include information on how to seek a review of the outcome. All details of the customer interaction are recorded in accordance with the Territory Records Act 2002 (see section 2.2).

Common examples

- General feedback about the project
- An enquiry relating to notified night works or traffic disruptions.
- An enquiry relating to notified traffic control in line with an approved traffic management plan.
- An enquiry relating to dust where suppression is occurring in line with an approved mitigation strategy.
- A compliment to the project team.
- An enquiry related to project matters where a pre-approved response is available, or enquirer/complainant can be referred to approved source i.e. the project website or collateral (construction notification).

Tier 2

Tier 2 enquiries/complaints are classified medium risk and may require escalation to the Project Director for review and approval. Tier 2 complaints should be resolved quickly and effectively within the project team. All details of the customer engagement are recorded in accordance with the Territory Records Act 2002 (see section 2.2).

Common examples

- A complaint relating to construction-related impacts (i.e. vibration, construction noise or dust beyond acceptable levels) or poor worker behaviour (i.e. swearing, littering).
- A complaint relating to unnotified out of hours works or traffic disruptions.
- An enquiry relating to a more complex project matter which requires technical input and/or risk mitigation.

Tier 1

Tier 1 enquiries/complaints relate to complex issues which require escalation to the Project Director, Chief Projects Officer and where required, the relevant Minister's Office. These enquiries/complaints will relate to critical project issues including safety, community wellbeing and conduct of staff. The project team will take responsibility for the final resolution of the issues raised. Tier 1 enquiries/complaints should be resolved quickly and effectively within the project team and keep the Chief Projects Officer informed of the resolution. All details of the customer engagement are recorded in accordance with the Territory Records Act 2002 (see section 2.2).

- A complaint relating to a perceived major safety risk on site.
- A complaint relating to a perceived major safety risk to the community.
- A major complaint relating to worker behaviour (i.e. unsafe or vulgar conduct).
- A complaint relating to project design or construction that carries an identified reputational risk.

Note: critical safety incidents should follow the project specific crisis communications procedure.

Resolution and approvals

After acknowledging receipt of the enquiry/complaint, project teams and subject matter experts may be contacted to prepare a response or resolution.

This is done by considering the outcome(s) sought by the person making a complaint, gathering more information or investigating where needed and, where there is more than one issue raised, determining whether each matter needs to be separately addressed.

The person who made the enquiry/complaint must be kept up to date on progress, particularly if a complaint is not resolved within the standard timeframe (maximum 10 business days).

The outcome of the enquiry/complaint should be done using the most appropriate medium (phone call, email, meeting or letter), or via the preferred method requested by the person who made the enquiry/complaint.

Actions taken will be tailored to each case and will consider any statutory requirements, policies and practices.

Workflow

Tier 3

Step	Task Description	Responsibility
1.	Resolved within the standard timeline as outline in 2.6 by the receiving officer using approved project information.	Communications and Engagement Team and/or appointed works contractor

Tier 2

Step	Task Description	Responsibility
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1.	Response drafted by receiving officer with required input(s) from the project team (subject matter experts), contractor and/or other relevant directorates/MPC officers. Reviewed by Communications Director for the relevant project.	Communications and Engagement Team / or contractor
2.	- The project's Communications Director may seek advice or a further review from the Senior Director, Communications and Engagement, Major Projects Canberra. - This may be if there are conflicting views on how to best respond/resolve the matter or for other reasons relating to the topic.	Communications and Engagement Team
3.	Response reviewed and approved by the project's relevant Executive Branch Manager or project area lead, who can also request for <i>Project Director</i> approval.	Executive Branch Manager / Project Director
4.	Approved response provided to enquirer or complainant.	Communications and Engagement Team/ or contractor

Tier 1

Step	Task Description	Responsibility
1.	- Enquiry/complaint immediately escalated for attention of the relevant Project Director, Senior Director Communications and Engagement, and Executive Branch Manager and Chief Projects Officer. - If requested by the Chief Projects Officer, enquiry/complaint alerted to relevant Minister's Office.	Communications and Engagement Team/ or contractor
2.	Response drafted by the receiving officer in partnership with the project's Communications Director - taking in required input(s) from the project team (subject matter experts), contractor and/or other relevant directorates/MPC officers.	Communications and Engagement Team/ with contractor if applicable
3.	Reviewed by MPC's Senior Director Communications and Engagement and Executive Branch Manager.	- Senior Director Communications and Engagement - Executive Branch Manager.
4.	Response reviewed by Project Director	Project Director
5.	- Response reviewed by Chief Projects Officer. - If requested by the <i>Chief Projects Officer</i>, response escalated to relevant <i>Minister's Office</i> for final review.	Chief Projects Officer
6.	Approved response provided to enquirer or complainant.	Communications and Engagement Team

Forwarding enquiries/complaints

For enquiries that need to be resolved by another directorate.

Step	Task Description	Responsibility
1.	Make a call to an identified contact officer at the appropriate Directorate best placed to resolve the enquiry/complaint.	Communications and Engagement Team and / or contractor
2.	Forward enquiry/complaint and any additional supporting information.	Communications and Engagement Team and / or contractor
3.	Advise enquirer/complainant of course of action and provide contact details for officer handling the enquiry/complaint.	Communications and Engagement Team and / or contractor

Escalation

Enquiries/complaints may be subject to internal escalation in circumstances where:

- the enquiry/complaint cannot be resolved using the classification and resolution procedures outlined in 3.0 within a reasonable timeframe agreed to by the enquirer or complainant.
- the nature of the enquiry/complaint falls into one of the following categories:
 - an activity generates three enquiries/complaints within a 24-hour period (separate complainants).
 - a single stakeholder reports three or more complaints within a three-day period.
 - an enquirer/complainant threatens to escalate their issue to the media or government representative.
 - the enquiry/complaint relates to a compliance matter.

Enquiries/complaints will be escalated internally to the relevant Project Director. At the outset, contractors (where relevant) will be required to work with delegated representatives with the view of resolving the enquiry/complaint. The contractor will be required to satisfy MPC representatives that considerations and recommendations have been implemented and all avenues available to them have been exhausted prior to seeking further escalation.

Reporting

Appropriate records must be kept from the outset which also contributes to project and Directorate reporting (see section 2.2).

Regular reporting, review and analysis of complaints provides vital data for the project and MPC to track, measure and improve performance.

Reporting on complaint management and resolution is done as part of standard monthly project reporting, and/or as part of the MPC's monthly corporate report.

Process map



Training and accreditation

No training or accreditation is required to complete these tasks, however IAP2 and Consultation Manager training is desirable.

Resources

Policy/Document	Location
Territory Records Act 2002	Territory Records Act 2002 Acts

Records management

Refer to 2.2 for record keeping management.

Evaluation

If you identify any opportunities for improvement while following this process, please email your suggestions to the content owner and to MPCGovernance@act.gov.au for consideration when the document is next reviewed.

Document Information

Version	Issue Date	Position	Details
0.1	July 2022	Communications and Engagement	Drafted
0.2	February 2023	Senior Director Communications and Engagement	Content owner review
0.3	Month 2023	Senior Director, Governance	Quality control review
1.0	Month 2023		Delegate review

Review and Approval

Date approved: DD Month 2023

Approved by: Insert title

Date effective: As at the date of approval

Review frequency: Typically annually or biennially

Document Details

Content owner: Insert position title

Support Contact: Insert position title and email address

QMS ID: [Governance Unit to insert following quality review]

DRAFT

Purpose of proposal

The proposal would fund the detailed design, early works, and enabling works for the new northside hospital in Bruce, ACT, as well as the relocation of the Child and Adolescent Mental Health Service (CAHMS) and Alcohol and Other Drugs Rehabilitation facility (AOD) from the Bruce hospital campus to new locations in Canberra's south. These elements form part of a larger program to deliver the Northside Hospital Project (NHP).

Wellbeing domains and impact description

Access and connectivity	Economy	Education and life-long learning	Environment and climate	Governance and institutions	Health
Housing and home	Identity and belonging	Living standards	Safety	Social connection	Time

Primary domain

Impact description

Health

The Northside Hospital Project, CAHMS and AOD is expected to have significant, direct positive impacts on a range of health outcomes in the Territory by:

- Providing greater capacity in the public healthcare system in the north of the ACT and across the Territory.
- Improving access to health services by providing services closer to a growing and aging northside population, reducing demand pressures in the south side on Canberra.
- Supporting continued mental health outcomes through delivery of a new dedicated CAHMS facility and mental health facility as part of the new hospital.
- Providing contemporary hospital facilities that enable implementation of contemporary models of care and improvements in the safety and quality of service delivery.
- Providing improved user experience for staff, patients and visitors.
- Improving physical and mental health for those most at risk of harm from substance use.

Other domains

Economy

The proposal would have a moderate direct, positive impact on the economy through the construction phase of the project as well as through additional job creation and associated economic stimulus.

The proposal would have a significant, indirect positive impact on the economy through operational phase by:

- Supporting an increased hospital workforce.
- Fostering economic growth through increased workforce participation and productivity as a result of improved patient health outcomes.

Safety

The proposal will have significant, positive impact on the safety wellbeing domain. As one of only two general public hospitals in Territory, a new Northside Hospital will:

- deliver a new emergency department critical in the provision of emergency health services in the north of Canberra and the surrounding region.
- be critical in improving overall resilience in the Territory's health network by providing improved capability and capacity to respond to future Territory-wide major health events.

Evidence base and data

Provide evidence that your proposal will have the wellbeing impacts described above. Note that it is not enough to only provide evidence that the issue exists.

Evidence

Demand for hospital services in the ACT is growing

- The population of the ACT is estimated to grow to approximately 554,000 by 2036 and 703,000 by 2058¹ with population growth expected to be concentrated in Canberra's north.
- This population growth is contributing to increased demand for health services.
- Demand for hospital services is forecast to increase steadily over the next ten years. The number of emergency department presentations is also growing and forecast to increase at 3% per annum over the next ten years.
- The new Northside Hospital is planned to increase Canberra's capacity to meet demand across the 2031 and 2041 planning horizon.

Source

- ACT Health Services Plan 2022-2030

Type of evidence

ACT government data or research

¹ ACT Government (2019), ACT Population Projection: 2018 to 2058, January 2019 (viewed at www.treasury.act.gov.au)

Provision of hospital services improves patient health outcomes Hospital services provided by the North Canberra Hospital, including emergency department, are a critical element of the health system in the ACT and necessary to support improving health outcomes for the Territory.	ACT Health Services Plan 2022-2030	ACT government data or research
Access to hospital services The availability of accessible and timely hospital care services is integral to assessing the quality of healthcare services. Accessibility of Australia's hospitals can be measured in several ways, including waiting times and geographic location. The Northside hospital will provide additional health services that coordinates with services delivered at the Canberra Hospital and other forms of health care services. The Northside hospital will enhance the Territory's capacity to provide coordinated health care for all residents.	Australian Institute of Health and Welfare	National data and Research
Alcohol and Other Drug Rehabilitation - Alcohol and other drug use is common in Australia. Problems with substance use are health problems that can be treated. - Structured health interventions delivered to individuals to reduce the harms from alcohol and other drugs improve health, social and emotional wellbeing.	National Framework for Alcohol, Tobacco and Other Drug Treatment 2019-2029	National data and Research
Child and Adolescent Mental Health - In 2022, more third of young Australians experienced a mental health disorder. - Early intervention in mental illness can have a significant impact on persons prognosis's, particularly for children and young people	- National Study of Mental Health and Wellbeing 2020-2022 (ABS) - Victoria Department of Health	National data and Research National data and Research
What don't we know? Investment Logic Mapping previously undertaken for the project identified a number of Key Performance Indicators (KPIs) for measuring benefits from the project, including those relevant to wellbeing. An approach to benefits realisation for the project will be further developed over future stages of the project, this is expected to include setting appropriate KPI's and collecting necessary data in order to evaluate impacts on wellbeing indicators such as improvements to overall health and access to health services.		

Measuring wellbeing outcomes

How will the Government know this proposal has achieved the anticipated wellbeing impacts?

What is the measurable outcome?

- Benefits realisation for main works elements of the project will be undertaken in accordance with the Capital Framework. This includes:
 - Development of a benefits realisation plan to monitor and report on the realisation of benefits identified in the project Investment Logic Map and business cases.
 - Post-Implementation Review to assess project outcomes.
 - Benefits realisation reporting consisting of ongoing monitoring, reporting on the realisation of benefits identified in the benefits realisation plan.

Benefits realisation for the project will incorporate relevant wellbeing indicators under the Health domain.

- Immediate benefits associated with the delivery of enabling workstreams being the Child and Adolescent Mental Health service (CAMHS) and the Alcohol and other Drugs (AoD) services will be realised through capital funding arriving as a result of this business case. Benefits include:
 - Direct improvements in the quality of mental health services for young Canberran's by the establishment of a fit-for-purpose facility.
 - Direct improvements in the quality of drug and alcohol rehabilitation services for all Canberran's by the establishment of a new rehabilitation facility.

How will you measure it?

- An approach to benefits realisation for the project will be further developed over future stages of the project. This is expected to include setting appropriate KPI's and collecting necessary data in order to evaluate impacts on wellbeing indicators such as improvements to overall health and access to health services.
- Successful delivery new infrastructure to support the CAMHS and AoD services.
- An increase in the utilisation, and treatment for individuals, benefiting from the CAMHS and AoD services.

Evaluation

- Per the Capital Framework a benefits realisation plan and reporting for the project will incorporate relevant wellbeing indicators under the Health domain.

Who is impacted?

The project will have positive wellbeing impacts for a wide range of the community located both in Canberra and the surrounding region. In particular:

ACT residents and patients – the entire population of the ACT will positively benefit, as greater capacity of services becomes available across the Territory. Current estimations show that the ACT will need to provide an additional 275 adult acute inpatient beds and about 55 emergency treatment bays by 2036-37. This need could be met by the new hospital. Whilst it is expected that residents in the North of Canberra would be more likely to directly use the new hospital, all Canberrans would benefit from less crowded service provision at other locations. Given that the population is ageing, a larger proportion of people in older age groups will be positively impacted going forwards.

Health care workers will benefit as more jobs become available connected to the new hospital, and pressure is taken off those working at the current sites. New and modern hospital facilities (including staff amenities, research and training spaces, end of trip facilities, retail) will also improve the working environment for staff. The new Northside Hospital is anticipated to support a full time equivalent (FTE) workforce of over 2,000.

Families and carers will benefit from improved, modern and purpose-built facilities that will improve their experience in caring for patients while in hospital, such as improved parking, improved waiting areas, improved retail, improved wayfinding, etc.

Business and local economy – a higher quality of health service provision should have an indirect positive effect on worker productivity across the local economy of the ACT, as a healthier population is less likely to take time off work due to ill health.

Will the proposal have a different or disproportionate impact (positive or negative) on any groups?

This proposal will have a disproportionately positive impact on a number of groups:

Older Canberrans - Canberra's population is growing and ageing. Older Canberrans have relatively higher rates of chronic illness, co-existing disease and therefore higher risk of emergency department presentations and hospital admission. Over 2023-24 of all patients over 65 who presented to an emergency department in Australia, 52% were subsequently admitted to hospital compared to 30% for all patients².

Children and Young People - The CAMHS relocation will deliver a fit for purpose facility in a community environment enabling the provision of a contemporary model of service, with improved accessibility and consumer centric focus, further destigmatising mental health care for children and youth.

People with a disability - The proportion of ACT residents living with disability increased from 16.2 per cent (62,000 people) in 2015 to 19.4 per cent (80,000 people) in 2018. People with disability report that they experience discrimination or service barriers that prevent access to appropriate care but they are also more likely to experience higher rates of hospital admission and extended lengths of stay. In 2024, 26% of people living with a disability in Australia under the age of 64 visited a hospital emergency department and 22% were admitted to hospital³.

In 2024, 12% of patients who need assistance or have difficulty with communication or mobility had difficulty accessing medical facilities. The new Northside Hospital will replace the older and aged existing North Canberra Hospital introducing modern design principles and significantly improved accessibility.

Gendered impacts

While there is a lack of specific data detailing the exact ratio of female to male healthcare workers in the ACT, general national health workforce trends provided by the Australian Institute of Health and Welfare (AIHW) indicate that females have a significantly higher representation compared to male healthcare workers with a female-to-male health workforce ratio of about 2.9:1 nationally. Assuming these trends hold across the Territory, the proposal is likely to have a higher positive impact on females, given the higher proportion of females that would use the proposed increased supply of carparking to travel to work.

Impacts on Aboriginal and Torres Strait Islander people

AIHW data indicates that Aboriginal and Torres Strait Islander Peoples are higher users of health services at the ACT compared to the general ACT population. The average rate of ED presentations for Aboriginal and Torres Strait Islander people across all age groups in the ACT is 834.8 per 1,000 population compared to 353.1 for other Australians⁴.

By improving access to health services for Aboriginal and Torres Strait Islander people at the North Canberra Hospital, the proposal will contribute to key Closing the Gap health outcomes including life expectancy and healthy birthweight.

Implementation of the proposal will consider engagement with the Aboriginal and Torres Strait Islander community.

Impacts on future generations

The new Northside Hospital will assist in meeting the growing demand for health care in the Territory overing the coming decades, benefiting both current and future generations of Canberrans.

Will the proposal have an impact on or be impacted by climate change?

Emissions reduction

² Source: Australian Institute of Health and Welfare, Emergency Department Care, 2024.

³ Source: Australian Institute of Health and Welfare, People with disability in Australia, 2024

⁴ Source: Australian Institute of Health and Welfare, number of presentations to ACT public hospital EDs in 2023-24

Consistent with the ACT Climate Change Strategy, the delivery of the project will seek to reduce emissions during construction and optimise the use of sustainable materials where appropriate. The new Northside Hospital will include a number of Environmental Sustainable Development considerations, including being all-electric and electric vehicle enabled. The new hospital will also target a minimum 5 star Green Star rating (or equivalent).

Adaptation and risk management

Climate change-driven extreme weather poses a risk to infrastructure projects, and the Bruce Hospital Campus, located near bushland, faces a heightened bushfire threat. To mitigate this, expert advisors will be engaged throughout planning and development to ensure effective bushfire risk management and appropriate design solutions.

Cross-portfolio collaboration and partnerships

- A project governance structure for the project has been implemented in accordance with the Capital Framework. This structure incorporates a Project Board as its key advisory body. Membership of the Project Board consists of an independent chair and member as well as representatives from ACTHD, CHS, EPSDD, TCCS and CMTEDD.
- iCBR is responsible for leading and supporting procurement of the project, key agency stakeholders are:
 - CHS who will be the operator of the new hospital
 - ACTHD observes the key service design aspects to be developed throughout the detailed design phase
 - CMTEDD provides key senior governance roles for the Project through the Finance and Budget Group, Infrastructure and Commercial Advice and Economics and Financial groups.
- A stakeholder engagement framework has been developed to outline the communications and engagement activities through-out the Project. Engagement activity will continue to inform development and decision making for the Project, allowing the community and stakeholder to have regular input into the development of the new hospital. Consultation will occur with key stakeholders and the community in line with key project milestones.

Open Access Wellbeing Impact Summary (Cabinet Submission WIAs only)

- N/A.