Appendix F Detailed Option 2 and Option 3 Comparison

The below table sets out the key differences in what is included in the increased supporting GFA under Option 3 as compared to Option 2:

<table>
<tr><th>ED</th><th>Acute Cardiac Care Unit (i.e. Coronary Care Unit area)</th></tr>
<tr><td rowspan="2">Mental Health Short Stay to be considered outside of the ED footprint
Addition of workstation for the Discharge Liaison and social workers
Separation of staff spaces so that a majority are external to ED, whilst increasing training and education spaces
Increased storage space throughout the ED for equipment, and general and sterile stores
Treatment areas – inclusion of bariatric/super bariatric provision, additional procedure rooms and negative pressure rooms
Increased number of Behaviour Assessment Rooms, from 3 to 4, with an associated increase in support areas
Increased size of staff rooms and education space
An increase to 3 x CT scanners from 1 x CT scanner and inclusion of an MRI, with associated support spaces</td><td>Increased size of hybrid cardiac laboratory and associated support space to accommodate emerging practices
Provision of bariatric beds within the number of beds
Increased size of procedure rooms in line with AusHFG
Increased staff support spaces</td></tr>
<tr><th>Perioperative and Interventional area (i.e. theatres and IR Suites)</th></tr>
<tr><td>Increased in the size of the Hybrid Operating Room
Inclusion of a frozen section room, tissue and bone banks
Increased storage areas, including equipment garages, and general and sterile stores
Increased number of staff offices within SPIRE, education and support areas</td></tr>
<tr><th>Inpatient Units</th><th>ICU</th></tr>
<tr><td>Extra treatment room and increased storage</td><td>Increase in clinical support areas, including social work zone, meeting rooms and offices
Increased size of bays for bariatric/super bariatric and high acuity patients requiring advanced interventions
Dedicated patient rehabilitation gymnasium and treatment area within the ICU
Increased storage including equipment garages, general and sterile stores</td></tr>
<tr><th>Helipad</th><th>Loading Dock and CSSD</th></tr>
<tr><td>Increase to 2 Helicopter landing sites</td><td>Increase in the size based on user feedback.</td></tr>
</table>

Appendix G SPIRE Programme

The preliminary draft programme for SPIRE is set out overleaf:

ACT Government
Infrastructure Finance & Capital Works

ACT HEALTH INFRASTRATURE PROGRAMME
SPIRE
PRELIMINARY DRAFT PROGRAMME

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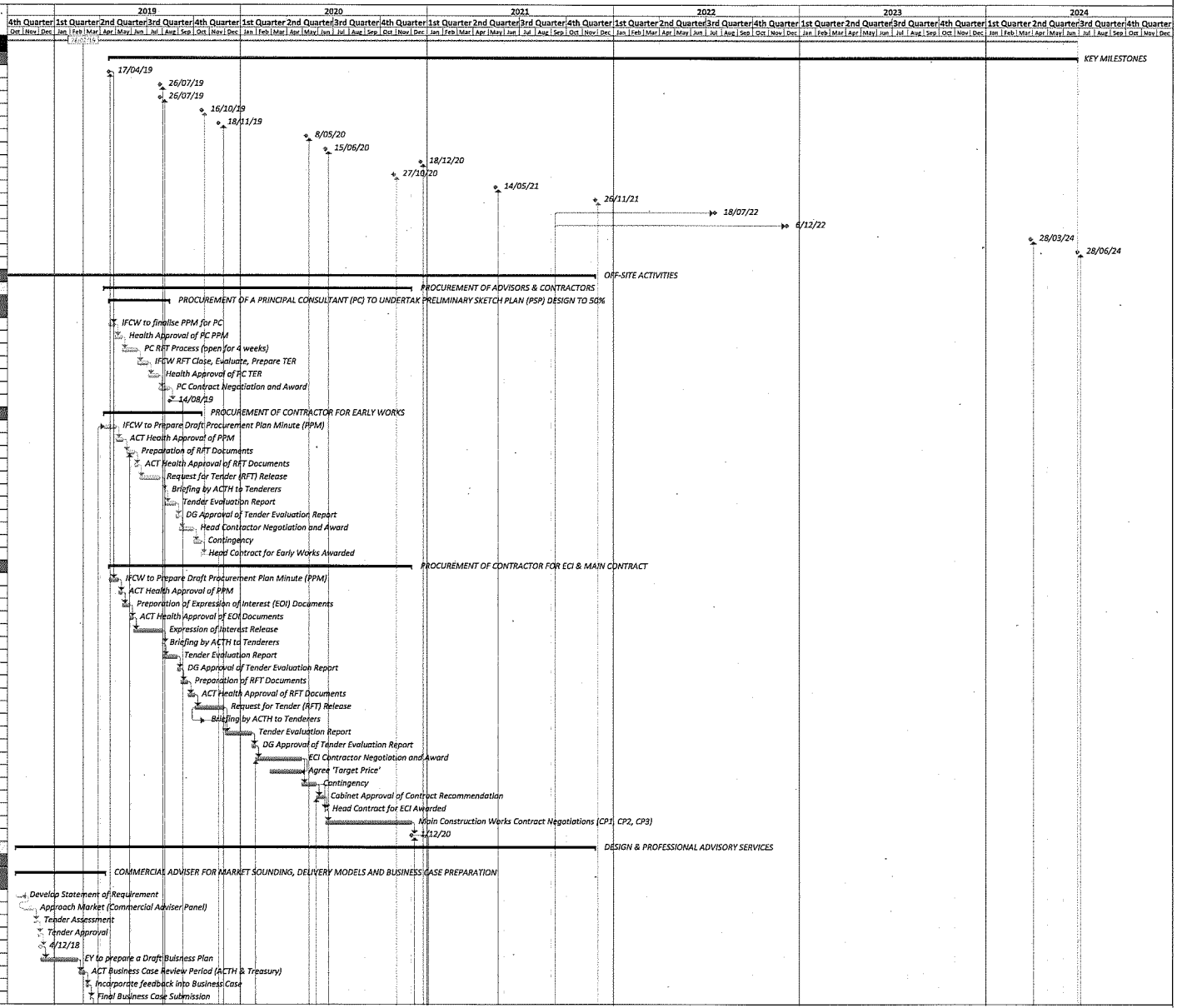
ID	Task Name	Start	Dur.	Finish	% Comp.
0	**SPIRE DRAFT MASTER PROGRAMME**	3/09/18	1420 d	28/06/24	2%
1	**KEY MILESTONES**	17/04/19	1266 d	28/06/24	0%
2	*Cabinet Approval of SPIRE*	17/04/19	0 d	17/04/19	0%
3	*Demolition & Demountables DA Approved*	26/07/19	0 d	26/07/19	0%
4	*PoC Substantially Complete*	26/07/19	0 d	26/07/19	0%
5	*Early Works Contract Award*	16/10/19	0 d	16/10/19	0%
6	*Site Ready to Commence Demolition*	18/11/19	0 d	18/11/19	0%
7	*50% PSP Design Complete*	8/05/20	0 d	8/05/20	0%
8	*Main Works ECI Contract Award*	15/06/20	0 d	15/06/20	0%
9	*Early Works Substantially Complete*	18/12/20	0 d	18/12/20	0%
10	*Excavation & Groundworks DA Approved*	27/10/20	0 d	27/10/20	0%
11	*Excavation Complete*	14/05/21	0 d	14/05/21	0%
12	*DA Design Complete*	26/11/21	0 d	26/11/21	0%
13	*Structure Complete*	18/07/22	0 d	18/07/22	0%
14	*Building(s) Mainly Watertight*	6/12/22	0 d	6/12/22	0%
15	*Completion Date (Net)*	28/03/24	0 d	28/03/24	0%
16	*Completion Date (Gross)*	28/06/24	0 d	28/06/24	0%
17					
18	**OFF-SITE ACTIVITIES**	3/09/18	796 d	26/11/21	3%
19	**PROCUREMENT OF ADVISORS & CONTRACTORS**	8/04/19	410 d	1/12/20	0%
20	**PROCUREMENT OF A PRINCIPAL CONSULTANT (PC) TO UNDERTAK PRELIMINARY SKETCH PLAN (PSP) DESIGN TO 50%**	18/04/19	80 d	14/08/19	0%
21	IFCW to finalise PPM for PC	18/04/19	5 d	29/04/19	0%
22	Health Approval of PC PPM	30/04/19	10 d	13/05/19	0%
23	PC RFT Process (open for 4 weeks)	14/05/19	20 d	12/06/19	0%
24	IFCW RFT Close, Evaluate, Prepare TER	13/06/19	15 d	3/07/19	0%
25	Health Approval of PC TER	4/07/19	15 d	24/07/19	0%
26	PC Contract Negotiation and Award	25/07/19	15 d	14/08/19	0%
27	*PC Engaged*	14/08/19	0 d	14/08/19	0%
28	**PROCUREMENT OF CONTRACTOR FOR EARLY WORKS**	8/04/19	132 d	16/10/19	0%
29	IFCW to Prepare Draft Procurement Plan Minute (PPM)	8/04/19	15 d	1/05/19	0%
30	ACT Health Approval of PPM	2/05/19	10 d	15/05/19	0%
31	Preparation of RFT Documents	23/05/19	10 d	6/06/19	0%
32	ACT Health Approval of RFT Documents	7/06/19	5 d	14/06/19	0%
33	Request for Tender (RFT) Release	17/06/19	30 d	26/07/19	0%
34	Briefing by ACTH to Tenderers	5/08/19	1 d	5/08/19	0%
35	Tender Evaluation Report	6/08/19	15 d	26/08/19	0%
36	DG Approval of Tender Evaluation Report	27/08/19	5 d	2/09/19	0%
37	Head Contractor Negotiation and Award	3/09/19	20 d	30/09/19	0%
38	Contingency	1/10/19	10 d	15/10/19	0%
39	Head Contract for Early Works Awarded	16/10/19	1 d	16/10/19	0%
40	**PROCUREMENT OF CONTRACTOR FOR ECI & MAIN CONTRACT**	18/04/19	402 d	1/12/20	0%
41	IFCW to Prepare Draft Procurement Plan Minute (PPM)	18/04/19	10 d	6/05/19	0%
42	ACT Health Approval of PPM	7/05/19	5 d	13/05/19	0%
43	Preparation of Expression of Interest (EOI) Documents	14/05/19	10 d	28/05/19	0%
44	ACT Health Approval of EOI Documents	29/05/19	5 d	4/06/19	0%
45	Expression of Interest Release	5/06/19	40 d	31/07/19	0%
46	Briefing by ACTH to Tenderers	1/08/19	1 d	1/08/19	0%
47	Tender Evaluation Report	2/08/19	20 d	29/08/19	0%
48	DG Approval of Tender Evaluation Report	30/08/19	5 d	5/09/19	0%
49	Preparation of RFT Documents	6/09/19	10 d	19/09/19	0%
50	ACT Health Approval of RFT Documents	20/09/19	10 d	3/10/19	0%
51	Request for Tender (RFT) Release	4/10/19	40 d	29/11/19	0%
52	Briefing by ACTH to Tenderers	21/10/19	1 d	21/10/19	0%
53	Tender Evaluation Report	2/12/19	30 d	22/01/20	0%
54	DG Approval of Tender Evaluation Report	23/01/20	5 d	30/01/20	0%
55	ECI Contractor Negotiation and Award	31/01/20	60 d	29/04/20	0%
56	Agree 'Target Price'	28/02/20	40 d	29/04/20	0%
57	Contingency	30/04/20	20 d	28/05/20	0%
58	Cabinet Approval of Contract Recommendation	29/05/20	10 d	12/06/20	0%
59	Head Contract for ECI Awarded	15/06/20	1 d	15/06/20	0%
60	Main Construction Works Contract Negotiations (CP1, CP2, CP3)	16/06/20	120 d	1/12/20	0%
61	*Agree GMP for MW*	1/12/20	0 d	1/12/20	0%
62	**DESIGN & PROFESSIONAL ADVISORY SERVICES**	17/10/18	765 d	26/11/21	6%
63	**COMMERCIAL ADVISOR FOR FEASABILITY STUDY**	31/10/18	1 d	31/10/18	100%
65	**COMMERCIAL ADVISER FOR MARKET SOUNDING, DELIVERY MODELS AND BUSINESS CASE PREPARATION**	17/10/18	118 d	10/04/19	30%
66	Develop Statement of Requirement	17/10/18	10 d	30/10/18	100%
67	Approach Market (Commercial Adviser Panel)	31/10/18	15 d	20/11/18	100%
68	Tender Assessment	21/11/18	5 d	27/11/18	100%
69	Tender Approval	28/11/18	5 d	4/12/18	100%
70	*Commercial Adviser Engaged*	4/12/18	0 d	4/12/18	100%
71	EY to prepare a Draft Buisness Plan	5/12/18	46 d	15/02/19	0%
72	ACT Business Case Review Period (ACTH & Treasury)	18/02/19	10 d	1/03/19	0%
73	Incorporate feedback into Business Case	4/03/19	5 d	8/03/19	0%
74	Final Business Case Submission	12/03/19	1 d	12/03/19	0%



Project Status Date: **26/02/19**
Planner: JC - IFCW

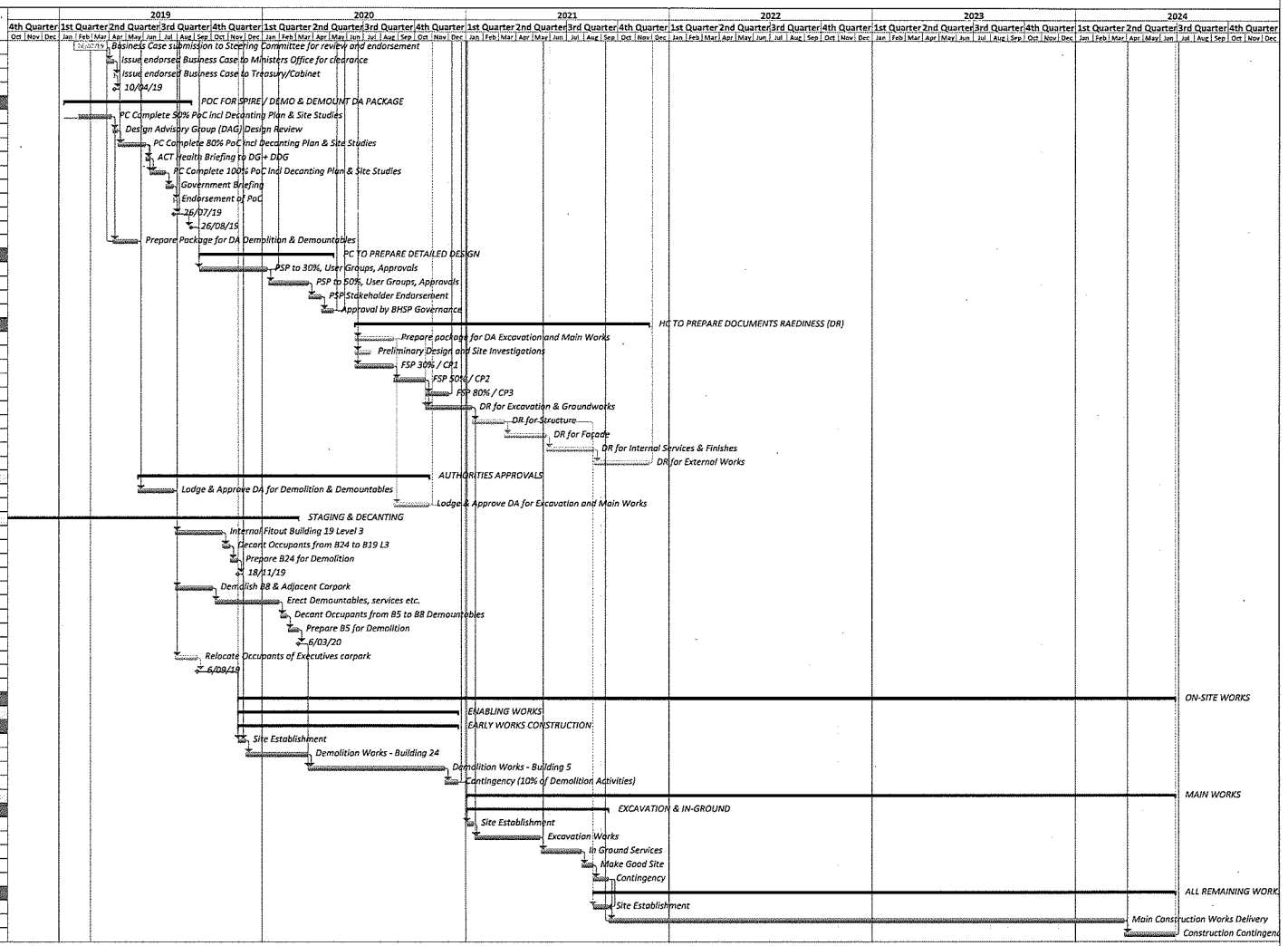
Critical Task | Task | Milestone | Summary | Project Summary | Progress | Complete Milestone

ACT Government
Infrastructure Finance & Capital Works

ACT HEALTH INFRASTRATURE PROGRAMME
SPIRE
PRELIMINARY DRAFT PROGRAMME

Solid Support
experience ahead of time

ID	Task Name	Start	Dur.	Finish	% Comp.
75	Business Case submission to Steering Committee for review and endorseme	13/03/19	10 d	26/03/19	0%
76	Issue endorsed Business Case to Ministers Office for clearance	27/03/19	10 d	9/04/19	0%
77	Issue endorsed Business Case to Treasury/Cabinet	10/04/19	1 d	10/04/19	0%
78	*Submit the Detailed Business Case to Cabinet*	*10/04/19*	*0 d*	*10/04/19*	*0%*
79	**POC FOR SPIRE / DEMO & DEMOUNT DA PACKAGE**	**10/01/19**	**155 d**	**26/08/19**	**10%**
80	PC Complete 50% PoC incl Decanting Plan & Site Studies	10/01/19	60 d	5/04/19	28%
81	Design Advisory Group (DAG) Design Review	8/04/19	7 d	16/04/19	0%
82	PC Complete 80% PoC incl Decanting Plan & Site Studies	17/04/19	32 d	5/06/19	0%
83	ACT Health Briefing to DG + DDG	6/06/19	5 d	13/06/19	0%
84	PC Complete 100% PoC incl Decanting Plan & Site Studies	14/06/19	20 d	11/07/19	0%
85	Government Briefing	12/07/19	10 d	25/07/19	0%
86	Endorsement of PoC	26/07/19	1 d	26/07/19	0%
87	*PoC Completed*	*26/07/19*	*0 d*	*26/07/19*	*0%*
88	*Cabinet Approval of PoC*	*26/08/19*	*0 d*	*26/08/19*	*0%*
89	Prepare Package for DA Demolition & Demountables	8/04/19	30 d	22/05/19	0%
90	**PC TO PREPARE DETAILED DESIGN**	**10/09/19**	**160 d**	**8/05/20**	**0%**
91	PSP to 30%, User Groups, Approvals	10/09/19	80 d	10/01/20	0%
92	PSP to 50%, User Groups, Approvals	13/01/20	50 d	24/03/20	0%
93	PSP Stakeholder Endorsement	25/03/20	15 d	16/04/20	0%
94	Approval by BHSP Governance	17/04/20	15 d	8/05/20	0%
95	**HC TO PREPARE DOCUMENTS RAEDINESS (DR)**	**16/06/20**	**360 d**	**26/11/21**	**0%**
96	Prepare package for DA Excavation and Main Works	16/06/20	50 d	24/08/20	0%
97	Preliminary Design and Site Investigations	16/06/20	20 d	13/07/20	0%
98	FSP 30% / CP1	16/06/20	50 d	24/08/20	0%
99	FSP 50% / CP2	25/08/20	40 d	20/10/20	0%
100	FSP 80% / CP3	21/10/20	30 d	1/12/20	0%
101	DR for Excavation & Groundworks	21/10/20	50 d	12/01/21	0%
102	DR for Structure	13/01/21	40 d	11/03/21	0%
103	DR for Façade	12/03/21	50 d	25/05/21	0%
104	DR for Internal Services & Finishes	26/05/21	60 d	19/08/21	0%
105	DR for External Works	20/08/21	70 d	26/11/21	0%
106	**AUTHORITIES APPROVALS**	**23/05/19**	**355 d**	**27/10/20**	**0%**
107	Lodge & Approve DA for Demolition & Demountables	23/05/19	45 d	26/07/19	0%
108	Lodge & Approve DA for Excavation and Main Works	25/08/20	45 d	27/10/20	0%
109	**STAGING & DECANTING**	**3/09/18**	**371 d**	**6/03/20**	**0%**
110	Internal Fitout Building 19 Level 3	29/07/19	60 d	21/10/19	0%
111	Decant Occupants from B24 to B19 L3	22/10/19	10 d	4/11/19	0%
112	Prepare B24 for Demolition	5/11/19	10 d	18/11/19	0%
113	*B24 ready for Demolition*	*18/11/19*	*0 d*	*18/11/19*	*0%*
114	Demolish B8 & Adjacent Carpark	29/07/19	50 d	4/10/19	0%
115	Erect Demountables, services etc.	8/10/19	75 d	31/01/20	0%
116	Decant Occupants from B5 to B8 Demountables	3/02/20	10 d	14/02/20	0%
117	Prepare B5 for Demolition	17/02/20	15 d	6/03/20	0%
118	*B5 ready for Demolition*	*6/03/20*	*0 d*	*6/03/20*	*0%*
119	Relocate Occupants of Executives carpark	29/07/19	30 d	6/09/19	0%
120	*Executive Carpark ready for Demolition*	*6/09/19*	*0 d*	*6/09/19*	*0%*
121		3/09/18	1 d	3/09/18	0%
122	**ON-SITE WORKS**	**19/11/19**	**1119 d**	**28/06/24**	**0%**
123	**ENABLING WORKS**	**19/11/19**	**268 d**	**18/12/20**	**0%**
124	**EARLY WORKS CONSTRUCTION**	**19/11/19**	**268 d**	**18/12/20**	**0%**
125	Site Establishment	19/11/19	10 d	2/12/19	0%
126	Demolition Works - Building 24	3/12/19	70 d	23/03/20	0%
127	Demolition Works - Building 5	24/03/20	170 d	24/11/20	0%
128	Contingency (10% of Demolition Activities)	25/11/20	18 d	18/12/20	0%
129	**MAIN WORKS**	**4/01/21**	**851 d**	**28/06/24**	**0%**
130	**EXCAVATION & IN-GROUND**	**4/01/21**	**175 d**	**14/09/21**	**0%**
131	Site Establishment	4/01/21	10 d	15/01/21	0%
132	Excavation Works	18/01/21	80 d	14/05/21	0%
133	In Ground Services	17/05/21	50 d	27/07/21	0%
134	Make Good Site	28/07/21	15 d	17/08/21	0%
135	Contingency	18/08/21	20 d	14/09/21	0%
136	**ALL REMAINING WORKS**	**18/08/21**	**696 d**	**28/06/24**	**0%**
137	Site Establishment	18/08/21	20 d	14/09/21	0%
138	Main Construction Works Delivery	15/09/21	615 d	28/03/24	0%
139	Construction Contingency (10%)	29/03/24	61 d	28/06/24	0%



Project Status Date: 26/02/19
Planner: JC - IFCW

Critical Task | Task | Milestone | Summary | Project Summary | Progress | Complete Milestone

Appendix H WEBs methodology and assumptions

Given the complexities associated with estimating quantitatively the economic impact of health related policies, this analysis considers the wider economic benefits (WEBs) to be the economic value generated throughout the construction period of the capital investment and the economic stimulation it provides. The total economic, or flow on impacts, have been estimated using an input-output (IO) model of the Australian economy and regional economies.

IO models trace the revenue and expenditure flows that link industries and workers within and outside economic regions. For instance, an increase in output in one industry (the direct impact) would give rise to demand for inputs from other industries (industrial effect) as well as labour (consumption effect). In turn, these support industries would demand further inputs and labour and so on. This is the so-called multiplier or indirect effect.

To model the economic impact, software called REMPLAN was used. REMPLAN's core data set is based on Australian Bureau of Statistics (ABS) national accounts figures of the Australian economy, coupled with the latest Census data.

For small regions, multipliers tend to be smaller than national multipliers since their inter–industry linkages are normally relatively shallow. Inter–industry linkages tend to be shallow in small regions since they usually don't have the capacity to produce the wide range of goods used for inputs and consumption, instead importing a large proportion of these goods from other regions. REMPLAN addresses these issues by factoring in these leakage effects in regional economies, based on assessing the current structure of the regional economy (using workforce data).

This analysis uses tailored input-output multipliers that reflect the specific characteristics of the ACT region. The REMPLAN model accounts for 'leakage' of direct expenditure from the economy in its multipliers. An important limitation of input-output analyses such as this is that they do not consider capacity constraints in the economy (e.g. full employment). Such constraints limit the extent to which economic impacts can increase in a linear fashion with changes in demand. That is, the results indicate the **gross**, rather than net, impact of the capital investment.

All figures and data presented in the software are based on data sourced from the ABS, most of which relates to the 2016, 2011, 2006 and 2001 Censuses. Using ABS datasets and an IO methodology, industrial economic data estimates for defined geographic regions are generated by REMPLAN.

Limitations

There are many advantages of using IO modelling as the basis for economic contribution studies (including an approach that is relatively easy to understand and communicate, it can ascertain sectorial impact of industry specific changes, and the process is transparent), but there are also limitations that result from the use of critical assumptions and these should be well understood when interpreting the results of the analysis.

Limitations include:

1. The approach assumes fixed production coefficients and subsequently constant returns to scale. This means that no matter how much production occurs the per-unit costs of required inputs remains the same.
2. The approach assumes that unlimited supplies of production inputs such as labour (lack of supply side constraints) are available.
3. It does not account for price changes that may result from increased competition for scarce resources.

4. The analysis is built on a static picture of the economy that does not consider dynamic adjustments that occur from a shock.
5. Products are only sold in a single industry (Homogeneity of product).
6. It considers the average effects rather than the marginal effects, meaning that IO models do not take into account economies of scale, unused capacity or technological change.
7. Economic contribution studies do not consider the substitution impacts to other industries (what might happen to expenditures if the specific industry was lost). As such economic contribution is a gross measure rather than net.
8. The IO model accounts for 'leakage' of direct expenditure from the economy. However, it may still be possible for the economic contribution presented to be realised in places other than the ACT.

Direct impacts

Underpinning the results is the direct impact. It is from the direct impact that the indirect impacts (industrial and consumption effects) are estimated and thus the total economic impact. For this study, the direct impact was based on the costings as discussed in Chapter 6 where the direct impact was considered to be the raw construction cost. Specifically:

Direct impact = raw cost for construction + raw cost for decanting

Where:

Raw cost = construction + early works + design fees + construction fees + artworks + FF&E + ICT

The direct impact does not include contingency estimates, Government fees, or escalation costs. Contingency costs were removed as these are not expected cash flows at this point in time. Escalation costs were removed as the analysis was performed in real terms. Government fees (including Act Health management and IFCW fees) were removed as these are considered to be transfers between Government entities with no net increase or decrease outside of Government and thus no net increase in economic output.

The result is a total direct impact of $372.3m being $346.9m in capital investment for construction and $25.4m in decanting costs with the below table highlighting the calculation.

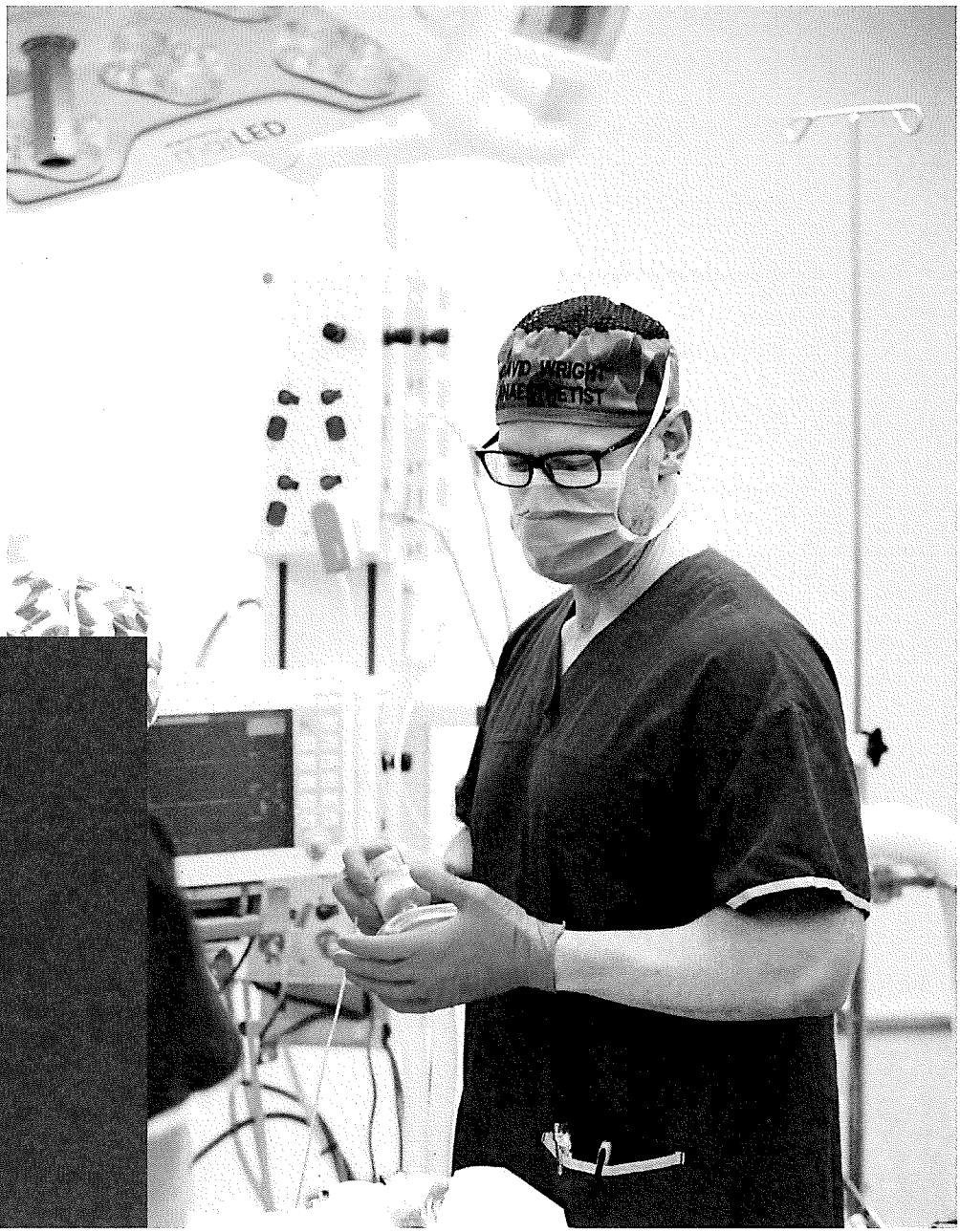
Table 53: Direct impact calculation

Description	Capital investment	Decanting cost
Construction	$232,769,891	$19,865,600
Early works	$3,415,109	$0
Design fees	$24,803,800	$1,358,000
Construction fees	$10,630,200	$582,000
Artworks	$1,476,000	$81,000
FF&E	$44,293,000	$1,889,000
ICT	$29,529,000	$1,640,000
Total direct impact	**$346,917,000**	**$25,415,600**

Appendix I Communications and Engagement Strategy

ACT Government | ACT Health

Surgical Procedures, Interventional Radiology and Emergency Centre (SPIRE)



Stakeholder communications and engagement strategy

March 2019

Contents

Purpose

The SPIRE Stakeholder Engagement and Communications strategy aims to:

1. receive clinical1 and other user/expert input into infrastructure planning to ensure project concepts and early designs meet health care needs and community expectations;
2. inform and engage local communities, health services staff and user groups in the infrastructure development program as it unfolds; and
3. build positive public sentiment for the project.

Achieving these aims will create the foundation for winning broad support for the SPIRE Centre amongst key influencers and stakeholder groups over the life of this major infrastructure project.

This strategy provides an over-arching communications and engagement map. Subordinate plans, relevant to specific stakeholders or stages of the project – staging and decanting, for example – will inform actions over the life of the project.

A list of internal and external stakeholders and analysis of appropriate communications and engagement methods are at Attachment 1.

Background

Territory-wide Health Services Framework

ACT Health has undertaken Territory-wide health services planning to develop an evidence-based foundation for major health infrastructure decision making. Planning work is conducted in close consultation with clinical staff, with opportunities for further engagement from non-government organisations and community-based organisations.

As part of this planning work, ACT Health has developed a Territory-wide Health Services Framework. The Framework is a high-level strategic plan that establishes the overarching principles to guide the development and redesign of health care services across the Territory over the next decade.

The ACT Government's 10-year Health Plan also provides the foundation for key infrastructure investments, to continue to build an innovative and world-class health system for the ACT. The Plan recognises the importance of keeping Canberrans healthy and emphasises the need to plan ahead and invest, to ensure our health system is able to meet demand in an efficient, sustainable and innovative way.

SPIRE Centre

The new Surgical Procedures, Interventional Radiology and Emergency Centre (SPIRE) is a $500 million investment in Canberra's health infrastructure.

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1 In this document the term **"clinician"** or **"clinical staff"** refers to a health care professional that works as a primary care giver of a patient in a hospital, skilled nursing facility, clinic, or patient's home. **Clinicians** can be medical assistants, doctors, counsellors, psychiatrists, nurses and so on.

The new Centre will deliver:

- a boost to the number of operating theatres delivering more capacity for elective and emergency surgery
- more inpatient beds and a larger intensive care unit
- a coronary care unit for people requiring high level care for heart conditions
- state-of-the-art surgical, procedural and imaging facilities
- a significantly expanded ED, enabling capacity for emergency health care for women and children.

The SPIRE site

The location for the SPIRE development was announced by the ACT Health Minister, Meegan Fitzharris, 12 December 2018. The site encompasses land on which Canberra Hospital buildings 5 and 24 are currently located. Development will require the demolition of these buildings and the relocation of existing services and staff from the site.

SPIRE site preparation planning, decanting and demolition works will commence in January 2019. The construction site is to be cleared and ready for building works by December 2019.

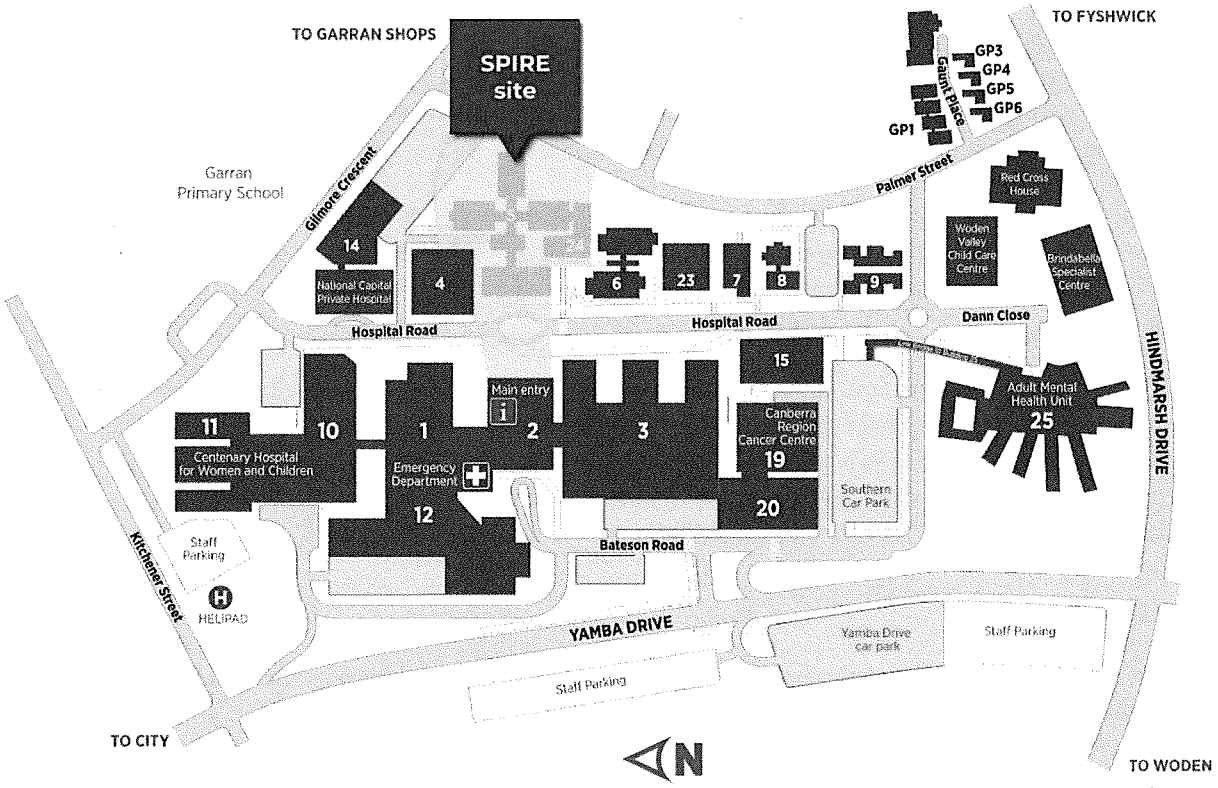

Image 1: SPIRE location across buildings 5 and 24

Key messages and project narrative

Planning and implementation of the Surgical Procedures, Interventional Radiology and Emergency (SPIRE) Centre, North-side Hospital Scoping and Expansion of the Centenary Hospital for Women and Children (CHWC) projects are interlinked, forming the major components of the Building Health Services Program (BHSP).

A Territory-wide approach to health services planning is a foundation principle for planning and early design of each project. Communications will convey this core principle, in addition to providing stakeholders with the SPIRE project information relevant to their interests.

Key messages include:

Territory-wide health planning

- As our city continues to grow, so too does demand for health services. To ensure the healthcare needs of Canberrans are met today and into the future, significant planning is underway to ensure every part of our health system can support the growing community, including our infrastructure.
- An important part of this planning is providing infrastructure that will allow us to fulfil our goal of providing quality care when and where it is needed most.
- ACT Health is engaging with experts and user groups to ensure infrastructure meets the short, medium and long term health services needs of the Territory.
- Consultation and robust planning will ensure that SPIRE will provide the Canberra community with high quality, accessible and flexible health services that meet the evolving needs of our growing population.

SPIRE

- The SPIRE Centre is a major health infrastructure project for Canberra and the surrounding region.
- The SPIRE Centre will increase our capacity to deliver acute, hospital-based health care in a modern, purpose-built facility. It will see $500 million invested in the Canberra Hospital campus.
- Features of SPIRE include:
    - a boost to the number of operating theatres, delivering more capacity for elective and emergency surgery
    - more inpatient beds and a larger intensive care unit
    - a coronary care unit for people requiring high level care for heart conditions
    - state-of-the-art surgical, procedural and imaging facilities
    - a significantly expanded ED, enabling capacity for specialist emergency healthcare for women and children

Communications will reinforce these key messages with appropriate levels of detail. There will be opportunities for identified stakeholders to engage in the project during the planning and design phases.

Communication principles

All communication and engagement with the community and identified internal and external stakeholders will be based on the following principles:

- timely and regular;
- accessible and clear;
- coordinated, consistent and accurate;
- focused on the benefits of the change in management and governance, and reassuring the community of level of service delivery; and
- based on a 'no surprises' approach to issues management.

These principles are consistent with the Chief Minister's commitment to an Open Government that is transparent, participatory and collaborative.

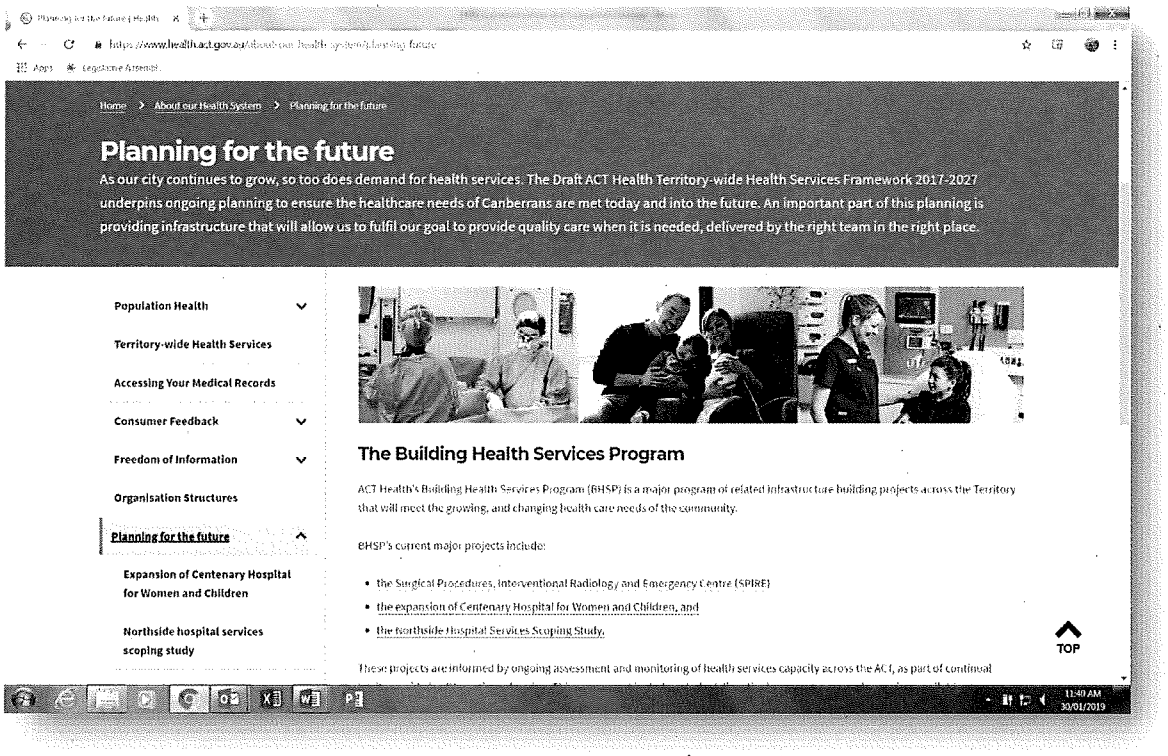

Image 2: BHSP web page on the ACT Health website: ***health.act.gov.au/infrastructure***

Target audiences

Primary target audiences will vary over the life of the project, with an emphasis on internal and stakeholder engagement in the early phases, shifting to strong external, public communications as the building takes shape. Target audiences include:

Internal

- Clinical staff of Canberra Health Services, including:
    - Canberra Health Services executives; and

    - key clinicians and clinical directors, nursing directors and senior allied health stakeholders.
- Chief Medical Officer, Chief Nursing and Midwifery Officer, Chief Psychiatrist and Chief Allied Health Officer;
- ACT Health and Canberra Health Services staff;
- SPIRE Clinical Reference Group
- Clinical Leadership Forum;

External

- ACT residents;
- local residents (Garran);
- relevant unions;
- research and tertiary education partners
- statutory authorities and partner directorates
- community organisations, non-government organisations (NGOs) and professional bodies (including the Australian Medical Association and Royal Colleges)
- local media
- unions

A full list of internal and external stakeholders and recommended modes of communication is at Attachment 1.

Communication channels matrix

The communications process will make use of multiple modes and existing ACT Health channels to inform and engage target audiences.

Feedback received from the Clinical Information Session, 22 November 2018, has been considered in identifying best-fit modes of communication for this important primary audience. A key message from this group was to receive communications at least **six weeks** in advance of any required action or milestone event.

Existing ACT Health channels include:

Channel	Internal	External
ACT Health website		
ACT Health and ACT Government social media accounts		
ACT Health Intranet		
CHS internal staff newsletter – Pulse		
CHS CEO all staff emails		
ACT Health Director-General all staff emails		

Division-wide newsletters		
Canberra Health Services all staff email		
Managers information kit		
Director-General and Chief Executive Forums		
Direct email		
Media relations (releases, alerts, press conferences, op-eds, backgrounders with journalists)		
Collateral (Posters/flyers in workplaces, hospital tea rooms, digital screens across TCH etc.)		
Face-to-face meetings		
Presentations at existing scheduled staff meetings		
Your Say website		
Our Canberra newsletter		
Public meetings		
Letterbox drops (Garran residences)		
External signage and worksite hoardings		

Communications resources

The ACTHD Communication Unit is developing a suite of communications and marketing resources including a BHSP communications 'visual guide' (Attachment 2). The purpose of the guide is to ensure all print and online communications have a consistent, distinctive look and feel, aligned with ACT Health branding.

The Style Guide will be used to create templates for the following resources:

- BHSP video (30 and 80 sec)
- PowerPoint
- Factsheets
- Posters
- News items for incorporation in Our Canberra and staff updates
- Monthly project updates (internal)
- Content for Your Say website
- External signage and hoardings
- Screen savers and CHS digital screens
- Social media images
- Webpage banners (update existing)

Communications and engagement plan

The following tools have been identified as appropriate for internal project communication and engagement activities relevant to the Staging and Decanting program.

X	Media release	X	Media alert
X	Media event	X	Community/other event
X	Social media	X	Traditional advertising
X	Direct mail	X	Social media advertising
X	Video/animation	X	Your Say website
X	Access Canberra script/outreach email		Merchandise
X	Our Canberra newsletter (online/print)	X	ACT Health website
X	Printed products (flyers, postcards, posters etc)	X	Research
	Text message	X	Community meetings

Tool	Other information	When	Responsible
ACT Health - BHSP page health.act.gov.au/infrastructure	The BHSP page will host all public information on the SPIRE project, including FAQs. It is the reference point for all information and inquiries. Updated monthly	From January 2019 – project completion	Strategic Infrastructure Engagement Officer with ACTHD Comms team
SPIRE factsheet	Available online and for distribution at public meetings, staff meetings, waiting rooms etc. Updated at key project milestones – eg design confirmed	From January 2019 – project completion	Strategic Infrastructure Engagement Officer with ACTHD Comms team
Our Canberra newsletter	Project updates including SPIRE images, design concepts as they become available.	From March 2019, May and August editions to project completion	Strategic Infrastructure Engagement Officer with ACTHD & CMTEDD Comms team

Tool	Other information	When	Responsible
BHSP video (30 sec and 90 sec)	Video promoting Territory-wide health services planning and infrastructure developments, including SPIRE. For use on website, social media (30 sec) and presentations as required.	February 2019	Strategic Infrastructure Engagement Officer with ACTHD Comms team
Public meetings	Presentation at Woden Valley Community Council Public Meeting outlining SPIRE plans. Including Q&A session	6 March. Follow-up presentations at key milestones 2020 -2023	Executive Group Manager Strategic Infrastructure Branch
Meeting with Garran Primary School principal	Meeting to inform and seek advice regarding communication with school community. Further school community communications may be required based on outcome of meeting	March 2019	Strategic Infrastructure team
External building/street signage	Public notice of site development and new SPIRE Centre on Palmer Street	April 2019	Strategic Infrastructure Engagement Officer with CMTEDD and ACTHD Comms teams
Letter box drop Palmer and Gilmore streets Garran	SPIRE factsheet, demolition and site preparation plan. Including contact information for enquiries	April 2019	Strategic Infrastructure team with ACTHD Comms team
Posters	For display in CHS and patient spaces. Distributed to relevant stakeholders.	May 2019 – to project conclusion	SPIRE Communication and Engagement Working Group
Letters to key external stakeholders identified in Attachment 1	Provide overview of SPIRE, construction timeline, any impact on services and features of new Centre once complete. Letters may accompany posters above.	April 2019 – at key milestones	SPIRE Communication and Engagement Working Group

Tool	Other information	When	Responsible
Your Say website – "Your Healthy Future" section	*Your Say* is ACT Government's key public engagement tool. Invite comment/feedback on proposed BHSP projects, or SPIRE.	June –August 2019	SPIRE Communication and Engagement Working Group with CMTEDD
Forum – GPs, Health Care Consumers Association, other interest groups (external)	Information sessions for stakeholders with a professional interest in the services delivered in the new SPIRE Centre	May 2019, and at regular intervals throughout life of project	SPIRE Communication and Engagement Working Group
Ministerial briefings	Keep the Minister's Office up-to-date and identifying opportunities for good news stories.	February 2019 – project completion	SPIRE Communication and Engagement Working Group
Advertising	When SPIRE Centre design is confirmed, promote through advertising and advertorial in local media	Late 2019 - 2020	SPIRE Communication and Engagement Working Group
Social media	Celebrate key project milestones, highlighting positive changes to healthcare services in the ACT	February 2019 – project completion	SPIRE Communication and Engagement Working Group
Press releases and events	Notify press of key project milestones, highlighting positive changes to healthcare services in the ACT. Offer site/Centre walk throughs at appropriate developments in the project	February 2019 – project completion	SPIRE Communication and Engagement Working Group
Artist impressions	Once a building concept illustration is available, commission artist/architectural drawings to assist the public/staff visualise the new building, its exterior and interior	April 2019	Strategic Infrastructure team

Tool	Other information	When	Responsible
4D time-lapse video	Animated SPIRE site demolition and build process for placement on website, intranet, social media and in presentations.	June 2019	SPIRE Communication and Engagement Working Group
Talking points	Key messages, fast facts made available to Minister, senior staff and other staff so that ready answers are available for public meetings, media or staff meetings. Updated at key milestones, or as required.	February 2019 – project completion	SPIRE Communication and Engagement Working Group
Naming competition	Consider naming competition for SPIRE Centre as a means of public engagement. Should only be done towards end of project and not be held as a public vote due to risk of 'joke' name.	2023	SPIRE Communication and Engagement Working Group

Issues and risk management

There is a range of internal and external risks associated with the SPIRE project. Many of the identified risks will require a communications response.

Issues/risk	Description	Stakeholder	Mitigation measure
Construction risks	Incidents on site (including asbestos findings, fire, injury, damage to plant).	Wider ACT community, depending on issue. Industry WorkSafe ACT Head contractor	Prepare information relating to these issues, i.e. talking points. Ensure safety is a priority with dealings with the contractor to set the standard

Issues/risk	Description	Stakeholder	Mitigation measure
	Use of local companies.	Wider ACT community Industry	Contractor to supply job numbers/ goods and services/ sub-contractors used in ACT. As part of the contract they are required to meet LIPP compliance and where possible use local suppliers.
	Behaviour of staff, including where they park and how they access site.	Wider ACT community Head contractor	Include worker behaviour re: parking, language etc in tool box talks on a regular basis.
	Timeframes/cost increase from what has been said publicly.	Wider ACT community Media Health Minister	Keep accurate records of any scope changes, for example achieving value for money.
Procurement/contract.	Contract dispute.	Industry Wider ACT community Media	Develop prepared response on how the issue is being handled
	How the contract was awarded	Industry. Wider ACT community Media	Transparency of tender process. Highlight benefits of chosen contractor, where possible.
	Insolvency from either a consortium member or a major sub-contractor.	Industry Wider ACT community Media Health Minister	Payments on time to head contractor

Issues/risk	Description	Stakeholder	Mitigation measure
	Strike/industrial action or unions/staff representatives involved with construction methodology/hazards.	Industry Wider ACT community Media Health Minister	Have a prepared response on how the issue is being handled.
Construction environmental impacts.	Noise, vibration, dust.	Staff and patients in nearby areas/buildings. Head contractor	Include key messages about the construction impact. The Contractor should advise to enact an action plan if an activity will cause excessive disruptions.
	Heavy vehicle movements.	Local residents. Staff and patients accessing the hospital campus. Head contractor.	The Contractor should advise HIP PT of larger than usual numbers of heavy vehicles on local streets. These movements would also be supported by an approved TMP.
	Traffic changes/delays.	Local residents. Staff and patients accessing the hospital campus. Head contractor.	The Contractor should advise of any impacts on the hospital campus or local streets. The early use of VMS boards should be considered.

Issues/risk	Description	Stakeholder	Mitigation measure
Design issues	Issues relating to functionality.	CHS staff Patients ACTHD Health Minister	Clinical staff engaged in project governance. Information relating to the significant clinical and consumer involvement in design. Promote why the design decisions have been made, such as benefits.
New service locations	Misconception that some services will not be as good as they were, or as good as was promised.	Patients. Staff. Media. Wider ACT community.	Highlight benefits of project and building design Thank staff and patients for their patience as we upgrade and refurbish the Canberra Hospital campus.
	Confusion about access to services during or post construction	Patients. Staff. Wider ACT community.	Ensure maps and other communication material is easily accessible to patients. Large signage in the Canberra Hospital main foyer outlining changes/new locations.

Monitoring and evaluation

The SPIRE Communications and Engagement Working Group will have responsibility for monitoring the effective implementation of this strategy.

To inform the Working Group, the Strategic Infrastructure Branch will provide a one page, monthly report covering:

- summary of inquiries and responses to the BHSP email account
- any feedback received by the BHSP team related to SPIRE
- number of visits to the BHSP web page/s
- risk and issues management register

Project management

The SPIRE Communications and Engagement Working Group is responsible for the successful implementation of the Stakeholder Communications and Engagement Strategy for the life of the project.

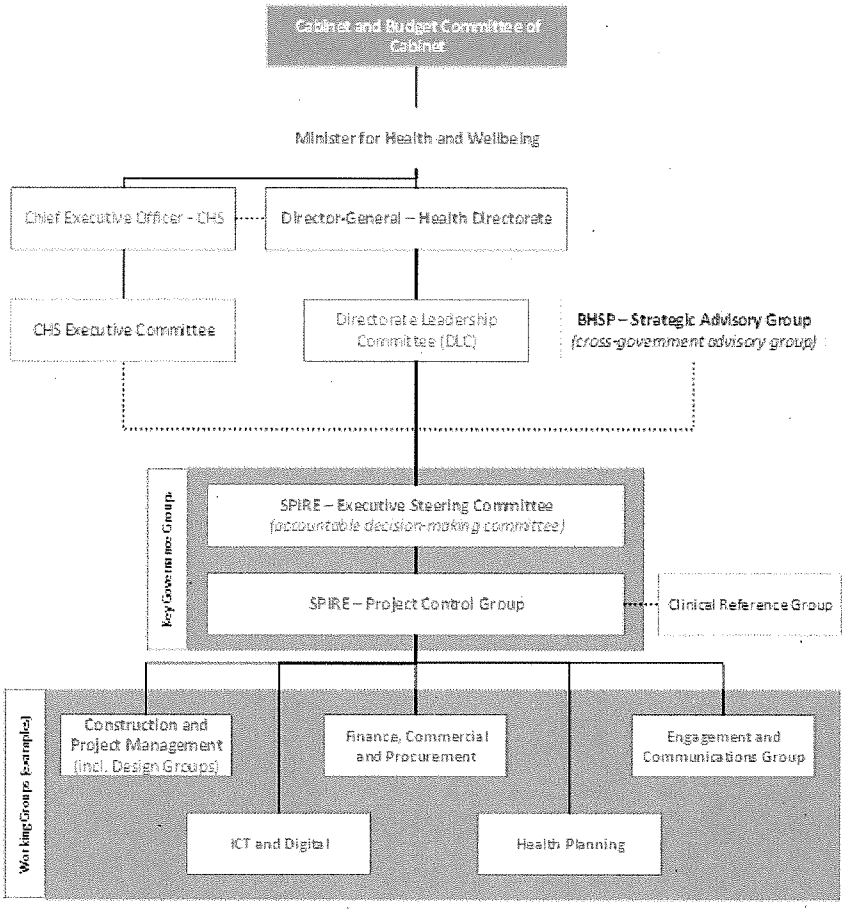

Image 3: SPIRE governance structure

SPIRE Communications and Engagement Working Group members are:

Name	Role	Number	Email
Monica Lindemann (Chair)	Special Advisor	5124 9191	Monica.lindemann@act.gov.au
Vanessa Dal Molin	Executive Branch Manager, Office of the Director General	5124 9401	Vanessa.DalMolin@act.gov.au
Merryn Jelbart	Communications Manager, ACT Health	5124 9469	Merryn.jelbart@act.gov.au
Cynthia Douglas	Senior Stakeholder Manager, Canberra Health Services	5124 9529	Cynthia.douglas@act.gov.au
Elaine Greenaway	Communications Account Manager, Canberra Health Services	5124 9527	Elaine.greenaway@act.gov.au
Rhona Jason-Smith	Senior Health Planning Officer	5124 9667	Rohna.JasonSmith@act.gov.au
Kate Evans	Clinical Liaison Officer	5124 9668	Kate.evans@act.gov.au
Brad Burch	Executive Branch Manager, Strategic Infrastructure	5124 9719	Brad.burch@act.gov.au
Casey Hayne (Secretariat)	Directorate Administrator		Casey.hayne@act.gov.au

Subordinate plans

1. SPIRE: staging and decanting program. Internal communications and engagement plan
2. Clinical Engagement Plan (March 2019)

Attachments

1. Clinical Engagement Plan (March 2019)
2. SPIRE stakeholder lists
3. BHSP communications style guide

Attachment 1: Clinical Engagement Plan (March 2019)

Purpose

To engage key clinical stakeholders in the development of the SPIRE Business Case for Cabinet submission, April 2019. This engagement plan is for the period 1 March – 29 March 2019.

Engagement seeks to:

- Receive clinical input into the SPIRE business case
- Provide transparency in decision making processes for key stakeholders
- Cultivate a collaborative approach to project design and development
- Cultivate positive sentiment for the SPIRE project and its development process

Background

The $500 million SPIRE project will transform the north-eastern side of the Canberra Hospital campus and greatly expand the hospital's capacity to deliver acute and emergency services. The project is due for completion 2023-2024.

Development of a business case for Cabinet consideration, by 11 April 2019, is a critical milestone in the progress of the project.

A number of stakeholder engagement, project planning and governance meetings have been established to facilitate the efficient progress of the SPIRE project.

To further support informed decision making, this plan proposes a series of individual engagements with identified clinical Executive Directors to provide them with richer information relevant to their area of responsibility and the facilities proposed within SPIRE.

Engagement activities detailed in this plan aim to supplement the existing planning and governance structures and communications.

Stakeholders

Key clinical stakeholders, relevant to the SPIRE project and the services it will deliver, include:

- Chief Executive Officer Canberra Health Services, *Bernadette MacDonald*
- Executive Director Medical Services, *Paul Dugdale*
- Extensive Director Critical Care, *Narrelle Boyd*
- Executive Director of Surgery, *Daniel Wood*
- Executive Director Medicine, *Girish Talaulikar*
- Executive Director Infrastructure Management and Maintenance, *Colm Mooney*
- Executive Director Nursing and Midwifery *Hamish Jeffrey*
- Executive Director Allied Health *Lisa Gilmore*

Each of the Executive Directors listed above have leadership responsibilities for healthcare services delivered at Canberra Hospital and proposed to be delivered within SPIRE. It is important that these individuals, and their teams, have a broad understanding of the project development process and an opportunity to contribute to the development of the SPIRE business case.

Engagement activities 1 – 29 March

SPIRE engagement and governance activities	4-8 March	11-15 March	18-22 March	25-29 March
Project Planning Meeting	5 March	12 March		25 March
Executive Planning Team Workshop		14 March		
Executive Steering Committee			21 March	
Project Control Group		15 March		
Individual Clinical Executive Director meetings	TBC		TBC	

Individual clinical leadership engagement

During the weeks 4-8 March, and 18-22 March, ACT Health Strategic Infrastructure staff members will meet with the listed clinical stakeholders. The first meeting is to inform the Executive Planning Team Workshop, the second to tie-off any outstanding or un-resolved issues.

Attachment 2: SPIRE stakeholder lists

Stakeholders

Stakeholders are categorised in the following tables:

Canberra Health Services staff	
Directly affected	**Indirectly affected**
• Clinical staff working in building 5 and 24: doctors, nurses, allied health professionals. • Non-clinical staff working in buildings 5 and 24: administrative staff, building management staff, security. • CHS Executive • Clinical Directors of acute services to be delivered in SPIRE • Staff delivering services in SPIRE	• CHS staff • CHS switchboard staff • Policy and administration staff
Other internal stakeholders	
• ACT Minister for Health and Wellbeing • ACT Minister for Mental Health • Members of the ACT Legislative Assembly • The Chief Minister Treasury and Economic Development Directorate (CMTEDD) • Environment, Planning and Sustainable Development Directorate (EPSDD)	• ACT Government staff answering public enquiries (e.g. Access Canberra) • Statutory government offices/officers • Potential CHS employees.

ANU Medical School staff and students	
Directly affected	**Indirectly affected**
• Teaching staff • Research staff • Administrative staff • Students	• Executive staff • ANU medical faculty • ANU Medical School communications unit • Policy and administration staff

ACT Health staff	
Directly affected	**Indirectly affected**
• Planning • Corporate Unit	• Executive staff • ACT Health staff • Policy and administration staff

External stakeholders		
Health professionals	**Facility**	**Higher education**
• National Capital Private Hospital • Australian Medical Association (ACT Branch) • Australian College of Midwives (ACT Branch) • General practitioners (GPs) and referring doctors • Potential ACT Health employees • Capital Health Network	• Other facility management services, eg. IT • Health Services Union NSW/ACT/QLD branch • CHS staff delivering support services – eg linen, meals, cleaning. **Government** • ACT Legislative Assembly representatives and decision-makers • Ministerial advisory committees and councils • Transport Canberra	• Providers who have students on placement with Canberra Health Services – CIT, ANU, UC. **ACT Community** • Patients and carers (existing and future) • Garran community • Woden Valley Community Council • Health Care Consumers' Association • Media

The SPIRE Stakeholder Communications Engagement Working Group will work with the Project Control Group and line areas to further develop this list.

The Project Control Group and line managers will be responsible for identifying stakeholders and providing contact details. The Stakeholder Engagement Working Group will be responsible for collating and maintaining this list.

Stakeholder engagement analysis

The purpose of stakeholder engagement analysis is to:

- identify key stakeholders
- examine their interest, influence and relevant issues; and
- define the required level of engagement or communication.

Internal stakeholders

Canberra Health Services staff are key stakeholders in the success of the project. Engaging staff and keeping them informed about the SPIRE project is essential for a successful outcome. Informed and engaged staff can also be strong advocates for the project—they interact with patients, carers, friends and family on a daily basis. Ensuring staff are on board and enthusiastic is therefore a high priority.

It is also important to engage and communicate effectively with other internal stakeholders, such as the ACT Minister for Health and Wellbeing and ACT Minister for Mental Health's offices, to promote the project.

External stakeholders

External stakeholders include residents of Canberra, and the surrounding region, who will use, or potentially use SPIRE; residents of Garran; medical and nursing staff (current and future); and other interested and influential groups.

Levels of engagement

The different possible levels of engagement, as defined in 'Engaging Canberrans: A Guide to Community Engagement', are summarised below.

	Inform	Consult	Involve	Collaborate
Goal	Provide balanced and objective information and assist understanding.	Obtain stakeholder feedback on analysis, alternatives and/or decisions.	Work directly throughout the process to ensure concerns and aspirations are understood and considered.	Partner each aspect of the decision including alternatives and solutions.

Note: engagement levels may change over time.

Internal stakeholder analysis

Internal stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/relevant issues	Methods/tools	Responsibility
Canberra Health Services - Executive	Chief Executive Officer Canberra Health Services, *Bernadette MacDonald* Executive Director Medical Services, *Paul Dugdale* Extensive Director Critical Care, *Narrelle Boyd* Executive Director of Surgery, *Daniel Wood* Executive Director Medicine, *Girish Talaulikar* Deputy Director General, Canberra Health Services, *Chris Bone*	Consult	Interest in ensuring infrastructure meets service requirements and that building process is communicated effectively to staff and patients, minimizing disruption. Influential in effectively communicating project progress to CHS staff	• Membership in governance committees • Direct communication between ACTHD project lead and executives • Project updates included in agenda of weekly ACTHD and CHS CEO catch up meetings	Executive Group Manager Strategic Infrastructure and Procurement
Canberra Health Services - staff directly affected	SPIRE Clinical Director (CHS) *TBC* Executive Director Infrastructure Management	Involve	CHS staff will be directly affected by the SPIRE build in terms of their work environment and responsibilities. Clinical leaders are important to building positive sentiment towards the changes and informing staff of	• Membership in Governance committees and Working Groups • Information sessions • ACT Health website • Intranet	Stakeholder Engagement Working Group

Internal stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/relevant issues	Methods/tools	Responsibility
	and Maintenance, *Colm Mooney* Executive Director Nursing and Midwifery, *Hamish Jeffery* Clinical Director Surgery and Oral Health, *Frank Piscioneri* Emergency Department, *Greg Hollis* Intensive Care Unit, *Bronwyn Avard* Retrieval Services (Air Ambulance) *Kelvin Grove* Anesthesia, *Thomas Brussel* Maxillofacial Surgery, *Dylan Hyam* Orthopedic Surgery, *Professor Paul Smith* Medical Imaging, *Charles Ngu* Pathology, *James Dahlstron* Clinical Support Services, *Lisa Gilmore*		upcoming events that will impact their work. Staff may provide word-of-mouth commentary on the project with patients, clients, friends or family members Need to provide key messages for staff to convey to the public. Staff will also play a role in informing existing patients and carers of the transition arrangements.	• Staff bulletin • CEO Bulletin • Fact sheets • Posters • Digital screen 'ads' (Internal) • Information packs • Change champions	

Internal stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/relevant issues	Methods/tools	Responsibility
	Pharmacy, *Sheridan Briggs* Cancer Services, *Paul Craft* Outpatients, *Cathie O'Neill* Patient Flow, *Lyn O'Connell* Chief Allied Health Officer, *Kerry Boyd*				
Canberra Health Services staff working in buildings 5 and 24	**Building 24** CHS Executive Executive Support Quality & Safety Unit **Building 5** Child at Risk Health Unit Canberra Sexual Health Unit Staff Development Unit Staff and family accommodation Volunteer Services Tissue Viability Service ANU Medical School - (external)	Involve	CHS staff will be directly affected by the SPIRE build in terms of their work environment and responsibilities. Staff and services will be required to permanently move from these buildings and will require regular, accurate information about the decant schedule and new office/service locations Staff may provide word-of-mouth commentary on the project with patients, clients, friends or family members Need to provide key messages regarding the positive impact of SPIRE on Canberra's health services for staff to feel their short-term inconvenience is will contribute to long-term	• Membership in Governance committees and Working Groups • Information sessions • ACT Health website • Intranet • Staff bulletin • CEO Bulletin • Fact sheets • Posters • Digital screen 'ads' (Internal) • Information packs • Change champions • Regular, targeted decant updates to a custom staff email list	SPIRE Stakeholder Communications and Engagement Working Group

Internal stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/relevant issues	Methods/tools	Responsibility
			benefits for themselves and the community.		
Canberra Health Services – staff indirectly affected	Executive Directors, Directors and staff of across the CHS including: Allied Health Medical Services Cancer and Ambulatory Support Aboriginal and Torres Strait Islander Liaison Services Critical Care Mental Health, Justice Health and Alcohol and Drug Services Women, Youth and Children Surgery Medicine Finance and Business Intelligence Infrastructure Management and Maintenance Quality Safety Innovation and Improvement People and Culture Communications and Government Relations	Inform	Directly and indirectly affected staff may provide word-of-mouth commentary on the project, for example, with patients, clients, friends or family members. Staff are interested in improving facilities for both patients and staff, expanding capacity and meeting demand for acute and emergency services. Communications to align with Change Management Plan and Relocation Plan.	• Meetings (staff, Executive) • ACT Health website • Intranet • Staff bulletin – the Pulse • CEO emails • CEO Forums • Fact sheets • Posters • digital screen 'ads' (Internal) • Team meetings	Stakeholder Engagement Working Group

Internal stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/relevant issues	Methods/tools	Responsibility
ACT Government staff	Department staff indirectly affected, including: Chief Minister, Treasury and Economic Development Directorate Community Services Directorate Environment and Planning Directorate Justice and Community Safety Directorate Education and Training Directorate ACT Ambulance Service Transport Canberra and City Services Project and Capital Works (PCW) Transport ACT (ACTION) Access Canberra Shared Services ICT Emergency Services Agency WorkSafe ACT	Inform	May be indirectly affected by the opening of SPIRE in terms of their responsibilities and community engagement. May be able to be a positive spokesperson on the project, if they are asked about it in an informal setting. Expertise required to ensure operational success.	• ACT Health website • Whole-of-government messages • Intranet • Staff bulletin • Fact sheets • Whole of Service message • Whole of Service informational	Stakeholder Engagement Working Group
ACT Government staff (continued)	ACT Government staff answering patient and public enquiries (e.g. Access Canberra)	Inform	Need timely accurate information to respond to enquiries	• Scripts/Q&As/holding statements • Website • Intranet • Staff bulletin	Stakeholder Engagement Working Group

Internal stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/relevant issues	Methods/tools	Responsibility
Members of the ACT Legislative Assembly	The Health Ministers and their Offices	Collaborate	Minister for Health and Wellbeing and Minister for Mental Health to be informed of the progress of the project, as well as maintaining an overarching view of how the project fits in the Health portfolio and Ministerial commitments. Opportunities for positive project communications.	• Ministerial briefs • Weekly communications and stakeholder engagement meetings with the Office	Exec Director Strategic Infrastructure and Procurement
	MLAs	Inform	Need to be kept informed of milestone progress and benefits. Educate on purpose/services.	• Letter • Fact sheet • Website and social media • Information kits	Exec Director Strategic Infrastructure and Procurement
Statutory government offices/officers	ACT Human Rights Commissioner Health Services Commissioner Public Advocate Official Visitors ACT Civil and Administrative Tribunal	Inform	Need to be kept informed of milestone progress and benefits. Educate on purpose/services.	• E-newsletter • Letter • Fact sheet • Website • Meetings	Stakeholder Engagement Working Group

External stakeholder analysis

External stakeholder type	Specific stakeholders	Level of engagement	Interest/influence/ relevant issues	Methods/tools	Responsibility
Garran residents and school community	Residents in close proximity to the building works on Palmer Street and Gilmore Street. [redacted]	Consult	Will have concerns regarding disruption during site demolition and building works. Will have an interest in traffic flow, building height, noise and any other impacts on amenity, safety and property value.	• Meetings • Letterbox drop • Fact sheets • Facebook • E-newsletter • Website • Public forum	Stakeholder Engagement Working Group
ANU Medical School	[redacted]	Involve	Will have concerns regarding decant and relocation of training facilities. Agreements in place regarding access to	• Engage in Staging and Decanting Working Group • Staff forum • Meetings • Fact sheets • Email updates	Stakeholder Engagement Working Group
Emergency Services	ACT Ambulance Services Helicopter ambulance service	Consult	Directly impacted by change to location of Emergency Department Interest in contributing to design of emergency access and patient flow.	• Engage in working groups • Meetings • Fact sheets • Email up dates	Strategic Infrastructure Branch
Directly affected patients, support people	Patients and carers at: • Canberra Hospital • Calvary Public Hospital Bruce • ACT GPs	Inform	To be directly affected by change in service. Update on key milestones. Need clear service and access details.	• Staff updates (word of mouth) • Posters • Letters • Website (faqs) • Information pack • Video	Stakeholder Engagement Working Group

				• Site visit • E-newsletter • Advertising • Our Canberra newsletter	
Community groups and peak bodies	Health Care Consumers Association (HCCA) Woden Valley Community Council	Consult	A mutual understanding of the impacts on current and future services is required. Educate groups on purpose/services. Engage in regular dialogue	• Meetings • Letter • Fact sheets • Facebook • E-newsletter • Website • Stakeholder working group membership	
	Local councils: Gungahlin Community Council Inner South Community Council North Canberra Community Council Tuggeranong Community Council Weston Creek Community Council Woden Valley Community Council	Inform	Interest is general. Interest may increase once works are underway Educate community on purpose/services. May generate media interest.	• Twitter/Facebook • Newsletter • Fact sheet • Website • Advertising • Media • E-newsletter • Our Canberra newsletter	
	Aboriginal and Torres Strait Islander Elected Bodies United Ngunnawal Elders Council Winnunga Nimmityjah Aboriginal Health Service and the Aboriginal and Torres Strait Islander Staff Support Network CHS Aboriginal Liaison Officer National Aboriginal Community Controlled Health Organisation	Inform	Interest is general. Educate on purpose/services.	• Facebook • Newsletter articles • Fact sheet • Website • Existing act health or act government relationships • Our Canberra newsletter • Update on community radio	

Health sector special interest groups	Others: Primary HealthCare Network, National LGBTI Health Alliance, Capital Health Network, National Disability Insurance Agency	Inform	Educate members on purpose/services/benefits. Key milestone updates.	• Industry briefing/morning tea • Letter • Fact sheet • Website • Media • Facebook/twitter • Newsletter articles • Targeted letters • Ensure referral processes are clearly articulated	

Unions and other industry representative groups or lobby groups	Health Services Union	Consult	Educate members on purpose/services/benefits. Key milestone updates.	• Letter • Fact sheet • Website • Existing meetings/relationships • Facebook/Twitter • Newsletter articles	
	Australian College of Surgeons (ACT Branch)	Consult	Educate members on purpose/services/benefits. Key milestone updates.	• Industry briefing/morning tea • Letter • Fact sheet • Website • Existing meetings/relationships • Facebook/Twitter • Newsletter articles	
	Australian College of General Practioners (ACT Branch)	Consult	Educate members on purpose/services/benefits. Key milestone updates.	• Industry briefing/morning tea • Letter • Fact sheet • Website • Existing meetings/relationships	

Unions and other industry representative groups or lobby groups (continued)	Australian Salaried Medical Officers Federation	Inform	Educate members on purpose/services/benefits. Key milestone updates.	• Letter • Fact sheet • Website • Existing meetings/relationships • Facebook	
	Environmental groups	Inform	Educate members on purpose/services/benefits. Key milestone updates.	• Website • Letter • Meetings (via existing ACT Government relationships)	
	General Practitioners ACT Pharmacy Guild Australian Government Department of Health (myhospital.gov.au)	Inform	Educate on purpose/services/benefits. Key milestone updates.	• Letter • Fact sheet • Website • E-newsletter • Existing meetings/relationships	
Higher education providers who may have students on placement with ACT Health	Australian National University, Charles Sturt University, Sydney, Newcastle, Australian Catholic University, Western Sydney, University of Canberra, Canberra Institute of Technology	Inform	Educate on purpose/services/benefits. Key milestone updates. Update on student placements.	• Facebook/Twitter • E-newsletter • Letter • Fact sheet • Website	

Ministerial Advisory Committees and Councils	Disability Advisory Council Ministerial Advisory Council on Women Ministerial Advisory Council on Ageing	Inform	Minister for Health and Wellbeing to be informed of any issues relating to the project within their jurisdiction. Educate on purpose/services/benefits. Key milestone updates.	• Meetings • Briefs • Letter • Fact sheet	
Transport stakeholders	ACTION Buses (Transport ACT) and its customers; road users in the vicinity of the site, Pedal Power, ACT Regional Community Bus Services (run by ACT Community Services groups), Valmar Disability Services bus service (Queanbeyan), other community transport services	Inform	Affected by any changes to traffic conditions, as well as requiring access to the completed facility. Educate on purpose/services/benefits. Key milestone updates. Agreement on management of complaints.	• Facebook/Twitter • E-newsletter • Letter • Fact sheet • Website • Signage • Existing meetings/relationships	

Canberra and Canberra region community	Local residents	Inform	Require clear information about what services are *and are not* provided	• Website • Facebook/twitter • Fact sheet • Advertising (optional) • Announcements/events • Our Canberra newsletter • Media coverage (see below)	
Media	Local mainstream media: The Canberra Times, The Chronicle newspapers, City News, Canberra Weekly, ABC 666, FM 104.7, Mix 106.3, Prime TV, WIN TV, Other media: HerCanberra, Crikey, FUSE, OurCommunity, The Conversation, wider Canberra regional media	Inform	Provide information to the public. Key milestones. Address community issues.	• Media releases • Information kits • Social media posts • Events	
Prospective ACT Health employees	Potential employees within and outside Canberra	Inform	May be interested in working at Canberra Hospital. Information about services, facilities and work opportunities.	• Website – links to the TCH and RACC recruitment sections • Recruitment (beyond scope of this strategy)	

ACKNOWLEDGMENT OF COUNTRY

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

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