213A reference 213A-2026-17 - North Canberra Hospital
Element # The element of the order each document responds to is indicated by the letter in the document reference.

Document reference	Document type	Description	Date of creation	Author	Number of pages	Claim of Privilege	Claim details	Personal Information 213A(r)
CHS.G.1	Minute	Minute to CEO North Canberra Hospital - Decant	13-Nov-25	CHS	35			
CHS.G.2	Letter	Letter to AMA - NCH Decant	24-Nov-25	CHS	1			
CHS.G.3	Letter	Letter to ANMF - NCH Decant	24-Nov-25	CHS	1			
CHS.G.4	Letter	Letter to ASMOF - NCH Decant	24-Nov-25	CHS	1			
CHS.G.5	Letter	Letter to CEPU - NCH Decant	24-Nov-25	CHS	1			
CHS.G.6	Letter	Letter to CFMEU - NCH Decant	24-Nov-25	CHS	1			
CHS.G.7	Letter	Letter to CPSU - NCH Decant	24-Nov-25	CHS	1			
CHS.G.8	Letter	Letter to ETU - NCH Decant	24-Nov-25	CHS	1			
CHS.G.9	Letter	Letter to HSU - NCH Decant	24-Nov-25	CHS	1			
CHS.H.1	Plan	Clincal Service Plan	25-Feb-25	Lineaire Projects	135			
CHS.N.1	Plan	Clincal Service Plan	25-Feb-25	Lineaire Projects	135			
HCSD.C.1	Business Cases	Northside Hospital Project Enabling Works business case	01-Mar-24	HCSD	247	Prejudice to proper functioning of Government	This Business Case was disclosed with limited redactions under a return to the Legislative Assembly in response to a prior order to produce documents. The redactions made to the document in this return are identical to those previously accepted by the Assembly following the Arbiter's report (pp 10-12, C.43.HCSD). The release of any redacted sections would result in significant financial harm to the Territory throughout the rest of the project. This project has not completed procurement yet. A delivery partner has been selected under a VECI contract. The project is still in the VECI phase. Should the ECI or lump sum conversion process at the end of each phase not demonstrate value for money the Territory reserves the right to return to market for a competitive Request for Tender process. Noting both the possibility that a Request for Tender process may be required and that further negotiation is required through the transition to ECI and Main works offer, the release of the redacted information would guide the delivery partner on the budget that the Territory has available and will in turn influence pricing. This will impact the Territory's ability to demonstrate value for money as the delivery partner will focus on the Territory's maximum budget rather than on their estimate of actual costs. Tenderers would be requested to provide their response to the project across a number of criteria. This includes for example their approach to stakeholder management, methodology or the risks associated with the project. This is used to assess tenderers' ability to respond to complex information within a defined period of time and their skill and capability with projects of a similar scope and complexity. Releasing detailed information prior to completion of procurement will mean that the Territory can no longer rely on this method as an assessment criterion. Release of options consideration and risk analysis provided to tenderers will impact the Territory's ability to negotiate contract terms.	
HCSD.C.2	Business Cases	A new Northside Hospital Business case	01-Mar-23	HCSD	499	Prejudice to proper functioning of Government	This Business Case was disclosed with limited redactions under a return to the Legislative Assembly in response to a prior order to produce documents. The redactions made to the document in this return are identical to those previously accepted by the Assembly following the Arbiter's report (pp 10-12, C.44.HCSD). The release of any redacted sections would result in significant financial harm to the Territory throughout the rest of the project. This project has not completed procurement yet. A delivery partner has been selected under a VECI contract. The project is still in the VECI phase. Should the ECI or lump sum conversion process at the end of each phase not demonstrate value for money the Territory reserves the right to return to market for a competitive Request for Tender process. Noting both the possibility that a Request for Tender process may be required and that further negotiation is required through the transition to ECI and Main works offer, the release of the redacted information would guide the delivery partner on the budget that the Territory has available and will in turn influence pricing. This will impact the Territory's ability to demonstrate value for money as the delivery partner will focus on the Territory's maximum budget rather than on their estimate of actual costs. Tenderers would be requested to provide their response to the project across a number of criteria. This includes for example their approach to stakeholder management, methodology or the risks associated with the project. This is used to assess tenderers' ability to respond to complex information within a defined period of time and their skill and capability with projects of a similar scope and complexity. Releasing detailed information prior to completion of procurement will mean that the Territory can no longer rely on this method as an assessment criterion. Release of options consideration and risk analysis provided to tenderers will impact the Territory's ability to negotiate contract terms.	
iCBR .C.1	Summary	Options - SCHEDULE OF ACCOMMODATION	21/5/26	iCBR	151			

iCBR.a.1	Report	Whole of life cost report for the NorthCanberra Hospital Project that informed the preferred option in the Business Case.	26-Nov-25	Rider Levett Bucknall	180	Prejudice to proper functioning of Government	On 28 January 2026, Rider Levett Bucknall delivered a report to the Territory (represented by iCBR) which provides the Territory with the NHP Concept Design Cost Estimate for Option 2B (Cost Estimate Report). The Cost Estimate Report was obtained by the Territory to inform both its assessment and position in relation to the costs of the NHP. It signals the Territory's 'willingness to pay' for the main works of the project. The disclosure of the Cost Estimate Report would plainly weaken the Territory's bargaining position in future negotiation processes and otherwise impair future procurement processes. The Territory would be placed at a commercial disadvantage either through the Early Contractor Involvement (ECI) and Main Works offer negotiations, or through an alternative market approach. The Territory would be unable to demonstrate value for money, in the largest single investment by the Territory in health infrastructure as a direct consequence of compromising its commercial position before the procurement and contract negotiation stages. It is not possible to disclose the report in a redacted form as even limited information creates a real risk of harm where that information is likely to inform the market that the Territory is retaining additional budget to account for project delivery risks or is willing to pay for an element that might otherwise be considered a supplier risk. The disclosure of the Cost Estimate Report would likely compromise the financial interests of taxpayers, where the NHP remains in the VECI phase and subject to future commercial negotiations and/or procurement processes.
iCBR.B.1	Paper	Information produced for part b	03-Jul-26	iCBR	1		
iCBR.C.2	Extract from 26-27 Financial Year Business Case	Extract of relevant informaiton from 2026-27 Business Case that describes options considered.	03-Jul-26	iCBR	11		
iCBR.C.3	Business Cases	Northside Hospital Project Early Works Business Case	Feburay 2025	iCBR	226	Prejudice to proper functioning of Government	This Business Case was disclosed with limited redactions under a return to the Legislative Assembly in response to a prior order to produce documents. The redactions made to the document in this return are identical to those previously accepted by the Assembly following the ACT Government Projects — Business Cases Interim Report dated 13 August 2025 by the Hon Keith Mason AC KC (Arbiter's report) (pp 10-12, C.42.iCBR). The release of any redacted sections would result in significant financial harm to the Territory throughout the rest of the project. This project has not completed procurement yet. Multiplex was selected as the delivery partner under a VECI contract. The NHP is still in the VECI phase. Should the ECI or lump sum conversion process at the end of each phase not demonstrate value for money the Territory reserves the right to return to market for a competitive Request for Tender process. Noting both the possibility that a Request for Tender process may be required and that further negotiation is required through the transition to ECI and Main works offer, the release of the redacted information in the Business Case would guide the delivery partner on the budget that the Territory has available and will in turn influence pricing. This will impact the Territory's ability to demonstrate value for money as the delivery partner will focus on the Territory's maximum budget rather than on their estimate of actual costs. Tenderers would be requested to provide their response to the project across a number of criteria. This includes for example their approach to stakeholder management, methodology or the risks associated with the project. This is used to assess tenderers' ability to respond to complex information within a defined period of time and their skill and capability with projects of a similar scope and complexity. Releasing detailed information prior to completion of procurement will mean that the Territory can no longer rely on this method as an assessment criterion. Release of options consideration and risk analysis provided to tenderers will impact the Territory's ability to negotiate contract terms and achieve value for money.

iCBR.D.1	Program time line	Northside Hospital Project Options Time line	30-Mar-26	Turner and Townsend	3	Prejudice to proper functioning of Government	The release of the program will prejudice future negotiation processes, and the Territory will be placed at a commercial disadvantage in its negotiations either through the ECI and Main Works offer negotiations or through a market approach should the ECI or Main Works offer not prove to be value for money. The Territory's program timeline contains confidential and commercially sensitive information on the Territory's indicative milestones and the duration of the Main Works for the NHP. The disclosure of the information would weaken the Territory's bargaining position in future negotiation processes and otherwise impair future procurement processes. The reason is that a contractor could use that information in commercial negotiations to determine how long the Territory has budgeted for a particular stage and overall completion, including any contingency that there may be. If this commercially sensitive information were to be published, it will weaken the Territory's bargaining position in commercial negotiations. It could also be used by a contractor to gain a commercial advantage by delaying negotiations until closer to the Territory's indicative commencement date (to limit the Territory's options to go to market and still achieve its program timeline) and provides insight into the Territory's contingency planning (where money has been budgeted and may be available). The Territory will not be able to achieve value for money, where the procurement and contract negotiation stages are compromised by release of the Territory's commercially sensitive information, such as details about The Territory's 'willingness to pay' for elements of the project. The document cannot be released with partial redactions given all details and assumptions regarding sequencing, staging, critical path and program float would influence the cost of the project to the Territory.	
iCBR.E.1	Register	Risk Register - Major	01-Jun-26	Turner and Townsend	2	Prejudice to proper functioning of Government	The release of the risk register will prejudice future negotiation processes, and the Territory will be placed at a commercial disadvantage in its negotiations either through the ECI and Main Works offer negotiations or through a market approach should the ECI or Main Works offer not prove to be value for money. The Territory's assessment of risks throughout the NHP is confidential and commercially sensitive information. The Territory's assessment of risk through the Risk Register directly informs commercial negotiations. The Territory will seek to transfer risk where appropriate to a contractor, but the disclosure of its assessment would weaken its bargaining position and its ability to transfer that risk. The Territory will not be able to achieve value for money, where the procurement and contract negotiation stages are compromised by release of the Territory's commercially sensitive information, such as details about The Territory's 'willingness to pay' for elements of the project. The document cannot be released with partial redactions, given all details regarding the Territory's willingness to retain or transfer risk to third party providers and knowledge regarding the particular risks being tracked by the Territory, and by extension, the potential contingency within the budget for that risk, is detrimental to the Territory's ability to achieve value for money.	
iCBR.G.1	Presentation	250526 NCH All Staff Final	01-May-25	CHS and iCBR	41			
iCBR.G.10	Presentation	Consumer - led Design Principles for Northside Hospital	03-Jul-25	HCCA	30			
iCBR.G.11	Plan	iCBR Northside Hospital Project Aboriginal and Torres Strait Islander Infrastructure Design Consultant Stakeholder Engagement Plan	15-May-26	ETMP	37			Y
iCBR.G.12	Agenda	Health Infrastructure Consumer Reference Group Agenda	04-Sep-26	iCBR	2			Y
iCBR.G.13		HCCA Recruitment Pack	17-Apr-25	HCCA	13			
iCBR.G.14	Agenda	Health Infrastructure Consumer Reference Group Agenda	19-Mar-26	iCBR	2			Y
iCBR.G.15	Agenda	Health Infrastructure Consumer Reference Group Agenda	25-Jun-26	iCBR	2			Y
iCBR.G.16	Agenda	Health Infrastructure Consumer Reference Group Agenda	06-Nov-25	iCBR	2			Y
iCBR.G.17	Plan	iCBR Comms and Engagement Plan Early Works	01-Mar-26	iCBR	9			
iCBR.G.18	Register	Meeting Tracker	NA	iCBR	2			
iCBR.G.19	Register	Membership Tracker			1			Y
iCBR.G.2	Paper	NCH Decant Consultation Paper	01-Sep-25	CHS	9			
iCBR.G.20	List	NHP Master Stakeholder List	NA	iCBR	4			Y
iCBR.G.21	Presentation	Presentation The Cottage	01-Aug-24	iCBR	10			
iCBR.G.22	Presentation	Project Update to Government Architect	01-Aug-25	iCBR	10			
iCBR.G.23	Schedule	PUG and TWG Meeting Calendar	30-Nov-25	iCBR	3			
iCBR.G.24	Register	Register of Comms and Engagement Activities	01-May-26	iCBR	8			
iCBR.G.25	Register	NHP Engagement 2026_ as of 6 July	09-Feb-26	iCBR	2			
iCBR.G.3	Presentation	260213 NHP Project Update	01-Feb-26	CHS and iCBR	16			
iCBR.G.4	Strategy	Appendix K Communications and Stakeholder Engagement Strategy	01-Dec-25	iCBR	61			
iCBR.G.5	Presentation	Built for CBR HCCA Presentation	01-Nov-24	iCBR	16			

iCBR.G.6	Plan	Communications and Engagement Plan NHP Masterplan and Pre Business Case	01-Sep-25	iCBR	8	
iCBR.G.7	Presentation	CAMHS Industry Presentation	01-Sep-25	iCBR	11	
iCBR.G.8	Plan	Communications Action Plan CAMHS	01-Sep-25	iCBR	12	
iCBR.G.9	Subplan	Consumer Reference Group (CRG) subplan	26-Feb-26	iCBR	9	
iCBR.L.1	List	Birth Centre Stakeholder List	NA	iCBR	1	Y
iCBR.L.2	Plan	Communications Plan - Birth Centre Co-Design	12-Nov-25	iCBR	6	
iCBR.L.3	Plan	Communications Action Plan	01-Sep-25	iCBR	8	
iCBR.L.4	Transcript	Hansard 10 June 2026 - Minister Stephen Smith described the Government understanding of co-design	10-Jun-26	Legislative Assembly	128	
iCBR.L.5	List	Birth Centre Stakeholder Matrix	NA	iCBR	1	
iCBR.L.6	List	Birth Centre Roundtable Event planning notes	08-May-26	iCBR	3	
iCBR.L.7	Presentation	NCH Birth Centre Round table presentation	01-May-26	iCBR	6	
iCBR.L.8	Plan	Birth Centre Roundtable Plan	10-Dec-25	iCBR	5	
iCBR.N.1	Brief	Signed and Annotated Brief Early Works and Birth Centre	01-Dec-25	iCBR	5	
iCBR.N.2	Presentation	Appendix to brief	01-Oct-25	iCBR	13	
iCBR.N.3	Brief	Signed and Annotated Brief Birth Centre Feasibility	10-Apr-25	iCBR	6	
iCBR.N.4	Paper	PCG paper Birth Centre Model and Design	09-Oct-25	CHS and iCBR	4	
iCBR.N.5	Paper	PCG paper Birth Centre Model and Design Attachment A	16-Oct-24	Health Consult	85	
iCBR.N.6	Paper	PCG paper Birth Centre Model and Design Attachment B	01-Oct-25	Multiplex	11	
iCBR.N.7	Paper	PCG paper Birth Centre Model and Design Attachment C	01-Oct-25	Multiplex	9	