



Preliminary Construction Management Plan



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Prepared for issue: Dimitra Rousounidou Date: November 2022

Approved for issue: Leigh Gilshenan Date: November 2022

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1. Introduction

This Preliminary Construction Management Plan (PCMP) has been prepared to support a Concept and Stage 1 State Significant Development Application (SSDA) for the proposed Ryde Hospital Redevelopment ('the Project'). The Ryde Hospital Redevelopment (RHR) is being delivered by Health Infrastructure (HI) in partnership with the Northern Sydney Local Health District (NSLHD), on behalf of the NSW Government.

The Ryde Hospital site is located at 1 Denistone Road, Denistone and comprises Lots 10-11 DP 1183279 and Lots A-B DP 323458. It has an area of approximately 7.69Ha and currently accommodates the existing Ryde Hospital campus.

This report accompanies a SSDA that seeks approval for the establishment of a maximum building envelope and gross floor area for the future new hospital buildings, and physical Stage 1 Early Works to prepare the site for the future development. For a detailed project description refer to the Environmental Impact Statement prepared by Ethos Urban.

This PCMP has been developed during the concept design phase and contains preliminary construction methodologies for the delivery of this complex integrated project. It is envisaged that this PCMP will evolve and be further developed by the Contractor when appointed to deliver the Stage 1 Early Works and the subsequent Main Works Contractor in conjunction with the design consultant team, project stakeholders, HI & NSLHD.

The delivery of the construction works being undertaken for the Project Stage 1 Early Works will include, activities such as establishing the project site, demolition works, bulk earthworks, shoring, internal and construction access roads and in-ground service diversions.

It is noted that it is the responsibility of the Contractor to prepare detailed Environmental and Site Management Plans in accordance with the SSDA, for implementation during construction.

This report will address the SEARs requirements as detailed in Table 1: Project Specific SEARs requirements table below:

Table 1: Project Specific SEARs requirements

Item	SEARS Requirement	Relevant Section of Report
23.	Construction, Operation and Staging	4. Site Operations
	23(i) Provide details regarding the staging of the proposed hospital redevelopment, including details of how construction and operation would be managed, and any impact mitigated.	
6.	Construction Hours	7. Operation Hours & Contacts
	(6i) Identification proposed houses associated with Stage 1 development and provided details of the instances where it is expected that works will be required to be carried out outside the standard construction hours.	

In addition, this report has been updated in response to the submissions and agency advice received for SSD-36778089, being the Ryde Hospital Redevelopment (Concept and Stage 1). This report also provides an assessment of the design changes made to the development following SSDA lodgement. The design changes include the following:

- Stage 1 Works:
 - Minor expansion of Stage 1 Works area.
 - Removal of temporary decanting structure.
 - Removal of some civil works to the at-grade car park and existing loading dock area.
- Concept Proposal:
 - Refinements to the podium and tower building envelopes to reflect further design development.

- Relocation of the indicative canopy areas.
- Removal of the multi-deck car park building envelope located along the Ryedale Road frontage and replacement with at-grade car parking.
- Introduction of a new building envelope to accommodate a lower-height multi-deck car park located along the Denistone Road frontage.
- Inclusion of a single basement level to accommodate car parking below ground.

For further description of the changes refer to the Submissions Report prepared by Ethos Urban and the Architectural Drawings prepared by STH.

2. Project Overview

2.1 Overview

The existing Ryde Hospital is a district general hospital providing inpatient, outpatient and community services to the communities of Ryde and Hunters Hill. Ryde Hospital is located on the western border of the NSLHD and is the last of the NSLHD acute facilities to receive significant capital investment to support the delivery of modern healthcare and its redevelopment is therefore a high priority for NSLHD. Due to its location, Ryde Hospital also provides services to communities within the Western Sydney LHD, primarily from the Parramatta area.

In 2019 the NSW Government announced a \$479m investment to redevelop Ryde Hospital. The project announcement includes drivers to retain the historic Denistone House (built in the 1850s) whilst providing modern and enhanced clinical services.

2.2 Site Description

Ryde Hospital is situated upon the lands of the Wallumedegal people of the Darug Nation. The site is located at the interface between the suburbs of Denistone and Eastwood, which are characterised by low density residential dwellings. The hospital is strategically positioned 200m south of Blaxland Road, which is a main arterial road between Epping and Ryde, and 500m north-east of Denistone Railway Station.

Ryde Hospital is located on the western border of the NSLHD, bounded by Denistone Road, Fourth Avenue, Ryedale Road and Florence Avenue. This site is approximately 77,000 square metres, with half of this site steep and undeveloped bush land. The site and campus boundary is shown below in Figure 1.

The Ryde hospital campus is comprised of many disparate buildings from varying eras ranging from 1950 to 2013, group around Denistone house built in 1872 and the Stables built in 1874. The Ryde Hospital site is located at 1 Denistone Road, Denistone.

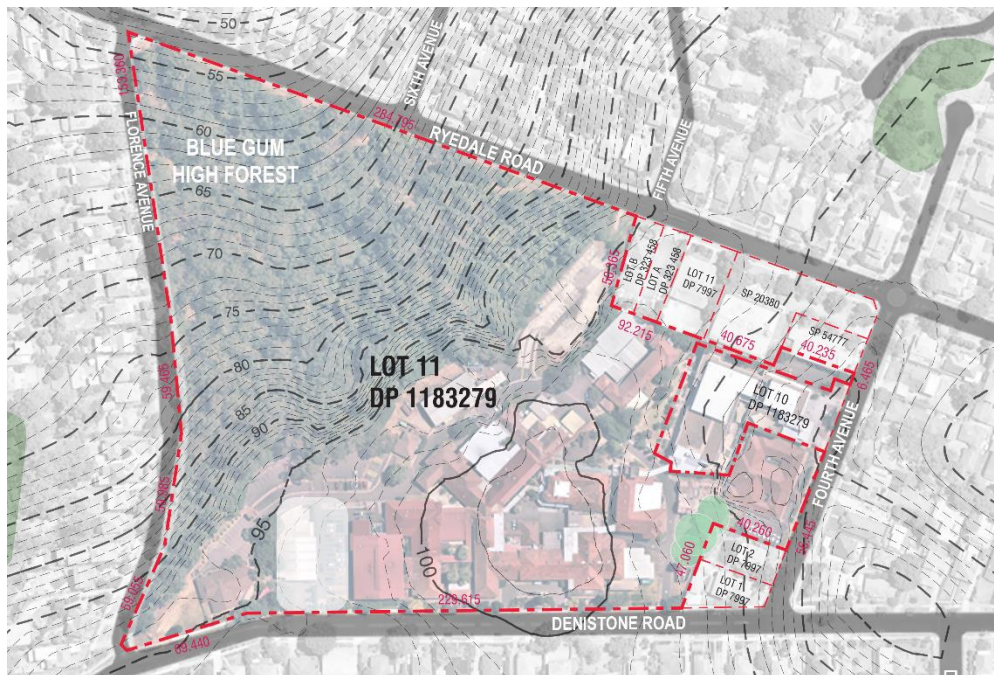


Figure 1: Existing site plan and Lot boundaries



Figure 2: Existing Ryde Hospital campus

2.3 Concept Proposal and Stage 1 Early Works

This component (and EIS) seeks approval for a Concept Proposal and Stage 1 Development Application for site establishment and clearing works for the Ryde Hospital Redevelopment.

The Concept Proposal includes a new hospital building and associated refurbishment works of selected existing hospitals facilities, including a maximum building envelope and gross floor area.

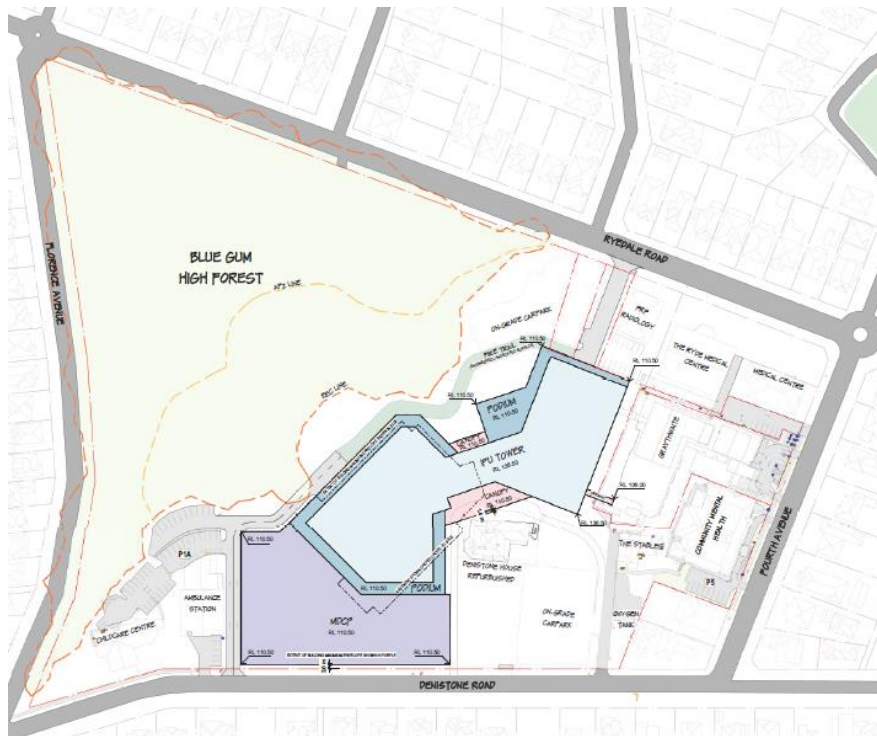


Figure 3: Proposed Site Layout Plan

Stage 1 preliminary enabling works, including demolition, infrastructure and utility services relocation/upgrades, earthworks, establishment of the internal road network and car parking.

Early works included in this development application include:

- Site clearance;
- Demolition of a number of buildings (existing buildings 11, 17 & 18), internal roads and of carpark P5;
- Decommissioning and diversions of minor services to facilitate earthworks;
- Site preparation earthworks to Stage 1 compound



Figure 4: Existing Site Plan - Early Works Area

2.4 Stage 2 SSDA

Stage 2 (which will be subject to a separate application following Concept and Stage 1 works), will seek for approval for:

- the detailed design, construction, and operation of the new Hospital building
- connections to the existing Hospital
- public domain improvements
- refurbishment of existing hospital facilities
- Multi-deck and on-grade carpark.

3. Key Participants / Stakeholders

The Project Organisational chart is as follows:

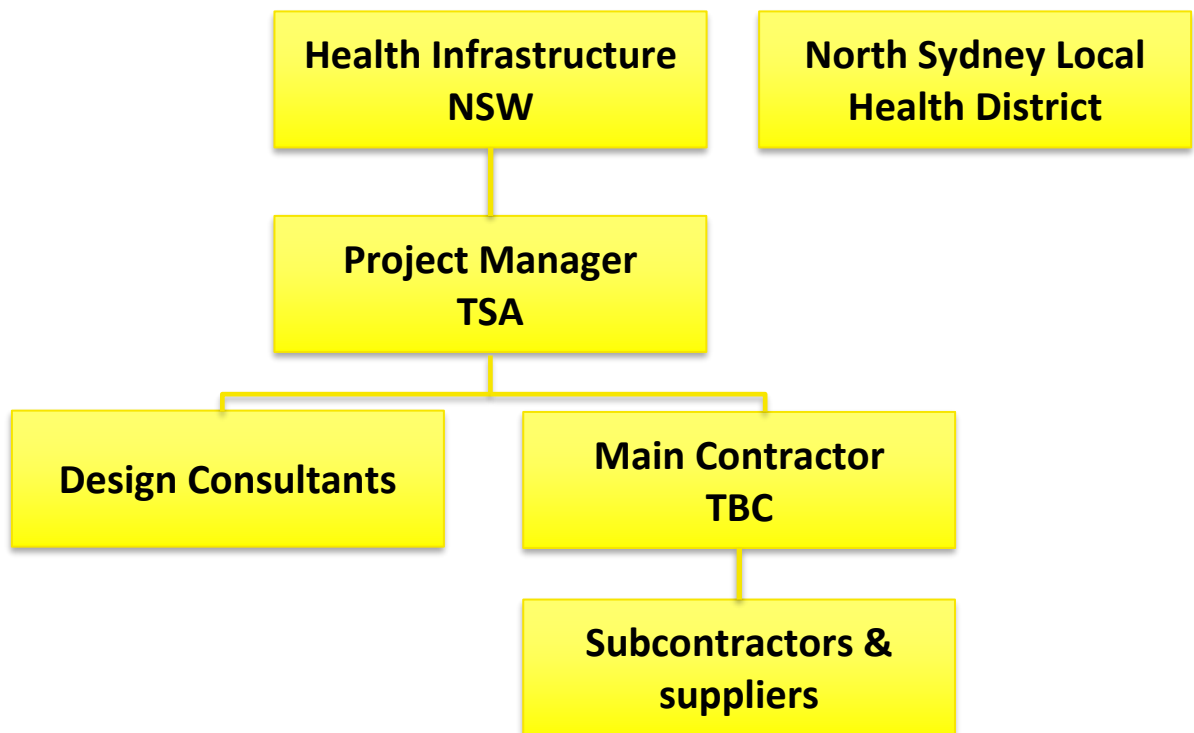


Figure 5 Project Organisational Structure

4. Site Operations

Following appointment, the Principal Early Works Contractor will be obliged to develop and provide for use a detailed Construction Environmental Management Plan/s that will incorporate WHS, Environmental and Quality management as well as all relevant sub-plans including:

- Biodiversity Management Plan
- Soil and Water Management plan
- Construction Waste Management Plan
- Traffic Control Plan
- Construction Noise and Vibration Management plan (CNVMP)
- Dust/ Air Quality Management Plan
- Access and Movement Plan (for construction staff).

Preliminary sub-plans and assessments to inform some of the above have been provided to support the EIS and are referred to in this PCMP.

This plan will be developed specifically for the subject site and contract works. The plans will take into consideration site specific risks that have been identified and document the implementation of control measures to effectively

mitigate those risks.

All statements and proposals documented in this Preliminary Construction Management Plan will be further detailed at the time of contract award for the Works to ensure alignment with the proposed methodologies and construction staging of the Contractor. This includes details of site layout, and logistics, construction zones, plant equipment and machinery.

4.1 Legislative and Regulatory Requirements

The Works will be undertaken in accordance with the following legislative requirements and any others that must be complied with, as required:

- National Construction Code 2019 Amdt 1 comprising the Building Code of Australia;
- Applicable Australian Standards;
- Protection of the Environment Operations Act and Regulations;
- Approved Methods for the Modelling and Assessment of Air Pollutants in NSW (EPA);
- Environmentally Hazardous Chemicals Materials Act 1985;
- Protection of the Environment Administration Act and Regulations;
- Work, Health and Safety Act 2011 and relevant codes of practice and Standards;
- Work Health and Safety Regulation 2017;
- Code of Practice for the Safe Removal of Asbestos (NOHSC:2002(1998));
- Resource and Recovery Act 2001;
- Environmental Planning and Assessment Act 1987;
- Heritage Act 1997;
- Local Government Act 1993;
- Soil Conservation Act 1938;
- Threatened Species Conservation Act 1995 and Regulation;
- Biodiversity Conservation Act 2016;
- Native Vegetation Conservation Act 1997; and
- Australian Standard 4970-2009: Protection of Trees on Development Sites

4.2 Hours of Construction

The hours of demolition or construction including delivery of materials to and from the site shall be restricted to between:

- Monday to Friday inclusive 7.00am to 6.00pm.
- Saturday 8:00am – 1:00pm
- No work permitted on Sundays and Public Holidays

No extended construction hours are anticipated to be needed for the Early Works package.

4.3 Safety

The Contractor is responsible for the construction work at all times until the work is completed under the Contract and is engaged as principal contractor and manager and controller of the premises for the construction work under Clauses 293 and 298 of the Work Health and Safety Regulations (NSW) 2017 (WHS Regulations). The Contractor is authorised to exercise such authority of the person conducting a business or undertaking that is commissioning the construction project as is necessary to enable it to discharge the responsibilities of principal contractor and manager and controller of premises imposed by the Work Health and Safety Act (NSW) (WHS Act) and Chapter 6 of the WHS Regulations.

A site-specific WH&S management plan will be developed by the Contractor to demonstrate the commitment of the Project to Workplace Health & Safety (WH&S). The plan will identify the scope of work to be undertaken, the hazards associated with the work and the risk assessment processes and risk control measures to be used in the execution of the plan. The Contractor must include procedures for identifying and managing risk and how this will be monitored and managed to ensure employer and employee compliance with these systems.

The Contractor will maintain accreditation under the Australian Government Building and Construction WHS

Accreditation Scheme (the Scheme) established by the Building and Construction Industry Improvement Act 2005 (BCII Act) while building work (as defined in section 5 of the BCII Act) is carried out. The Contractor must comply with all conditions of Scheme accreditation.

The objectives of the Site Safety Plan (SSP) include the following:

- Maintain lost time injury reporting and review positive performance indicators;
- Report all incidents and near misses and develop corrective action plans;
- Conduct Senior Management and WH&S Group reviews;
- Develop required WH&S resources;
- Formalise regular senior management reviews of WH&S systems and implement relevant improvements;
- Continually develop WH&S systems, policies, procedures and WH&S Plans to comply with statutory requirements and industry best practice;
- Maintain an Audit Program to comply with system's requirements;
- Ensure all corrective actions and non-conformances are closed out;
- Meet or exceed the requirements of AS4801 certification and Federal Safety commission accreditation;
- Adopt a zero-tolerance safety philosophy;
- Provide Safety Awareness and other appropriate WH&S training;
- Continue to implement ongoing induction procedures on all Projects;
- Hold regular Consultative Committee meetings, maintain minutes and record actions;
- Issue Safety Alerts to all staff and other stakeholders according to requirements;
- Conduct weekly toolbox talks on site and maintain a register of attendees;
- Maintain a data base of all toolbox talks.

The SSP will also address the following:

- WH&S training – identification of WH&S training needs of all personnel, induction training, refresher training, attendance of WH&S committee personnel at consultation training etc.;
- Incident management – identifies who will be available during and outside normal working hours to prevent, prepare for, respond to and recover from illness/ injury and incidents;
- Site safety rules – As a minimum will include induction and safety training, PPE, Site access and security, procedures for emergency situations, illness and injury, protection of personnel and the public, work at elevated areas, safe working, hazardous materials and dangerous goods etc.;

Safe Work Method Statements – All activities assessed as having WH&S risks require a SWMS to be prepared and implemented.

The Principal Contractor will need to comply with their duty under WHS management in accordance with the legislative requirements listed but not limited to, in Section 4.1 of this document.

4.4 Site Fencing, Public and Property Protection

The general principle is to separate construction areas of work from the public, hospital staff and visitors. Where there is a cross-over, this will be managed to ensure safety of all persons and equipment.

Appropriate hoarding/fencing (as specified in Australian Standards and SafeWork NSW requirements) will be installed to prevent public and staff access and to maintain security for the various areas of the works.

Site Notices will be erected at the boundary of the site. The site notices will include details of; Principal Contractor details, name of Site Manager and 24-hour contact number, approved hours of work, and details of the Principal and other appropriate stakeholders. Safety related statutory signage will also be erected on the boundary of the site in accordance with WorkCover requirements.

Site, precinct information and pedestrian signage and any temporary pedestrian measures required will be installed and maintained for the duration of the Works.

These public and property protection measures will be reviewed at the time of contract award and during regular PCG meetings, to ensure alignment with proposed preferred methodologies and construction stage and to ensure that the safety of the public and staff is maintained at all times during the works.

Potential nuisance will be minimised to the occupiers of adjacent areas of the Hospital. Typically, works will be hoarded

off and completely segregated from public interaction. When interacting with adjacent spaces, the Contractor will ensure strict compliance with pre agreed operational methodologies.

4.5 Security

Security measures must be provided to prevent unauthorised access to adjoining land and the construction work site including the safeguarding of site materials, plant and equipment. Security measures will be in place at all times when the site is not in operation. This may include perimeter barriers, locks, surveillance systems, security lighting and motion detectors. In the event where a construction site cannot be fully secured, consideration will be given to the use of a security service to prevent unauthorised access.

4.6 Disruption Notices

Any planned disruptions to hospital operations will be managed through the process of Disruption Notices (DNs). For such stoppages, the DN will describe the applicable works, timetable, issues and risk management plans.

DNs are submitted by the contractor to the project manager and NSLHD stakeholders for approval in advance of works commencing (minimum seven days).

The Contractor shall (in consultation with the Project Manager) provide positive planning and communication through this process, including establishing a “Disruption and Shutdown Approval” process with an agreed format and regular meetings, communicated formally via email.

The Contractor shall give the Principal sufficient written notice of any operational service and infrastructure interruption or significantly noisy works (such as use jackhammers etc on Site), relating to or arising from the Works. The Contractor’s responsibility or obligation to comply with all relevant codes will remain unaffected by the giving of any such notice.

4.7 Complaints & Neighbour Management

From the commencement of construction until completion, the Principal Contractor will be required to maintain a community liaison officer on the project. This officer will be contactable by both a mobile phone and email and the contact details will be clearly advertised on site hoardings, community updates and the like. The Principal Contractor will be required to maintain a register of complaints and to report to the Project Manager and Health Infrastructure the status of complaints on a monthly basis. Complaints that cannot be addressed by the Principal Contractor will be presented to the relevant representative for resolution of the issue.

5. Construction Methodology

5.1 Site Establishment

Site establishment activities are detailed in Section 5.3 of this document. A Preliminary Site Plan is attached with the Environmental Impact Statement which will be further developed by the Principal Contractor once engaged.

5.2 Remediation / Validation

Following acquisition of the Project Site, Health Infrastructure will undertake works to secure the Project Site, establish access, and ensure appropriate environmental control measures are in place. These preliminary works do not form part of the SSD application for the Project.

The Contractor will be provided background reports from all consultants for the site prior to commencing Stage 1 Early works. These reports will provide sufficient background to inform the Contractor of the ground conditions and previous preliminary works to assist in determining whether further testing and specific materials handling/waste disposal is required.

5.3 Decant

As a result of early works occurring within a live health environment there will be impact on existing services, as such, a decanting strategy has been proposed. This will be further refined in consultation with all relevant parties.

5.4 Soil Erosion & Sediment Control

The soil erosion and sediment control will be implemented in accordance with the Civil Design.

5.5 Environment & Amenity

The contractor undertaking the Works will be required to submit for approval a comprehensive Environmental Management Plan (EMP) to ensure that all elements of the plan meet all statutory requirements, Conditions of Approval as well as the Ministry of Health's requirements. The EMP will describe the environmental strategy, methods, controls, and requirements for the execution of the Works. It will stand alone as the master document for site environmental activities.

The primary aim and objective of the EMP will be to provide a framework of procedures to minimise the impacts of the construction of the project on the environment. The environmental performance of the contractor will be monitored throughout the Works.

As a minimum, any further erosion and sediment controls required for the Stage 1 Early Works (following completion of preliminary works outside of this application) shall be designed, installed and maintained in accordance with the requirements of Managing Urban Stormwater: Soils and Construction 'The Blue Book' 2004 (4th edition) and/or details provided by project engineering consultants.

5.6 Infection Control Management

Infection prevention and control strategies that are consistent with national guidelines, including the availability of hand gels, ready access to personal protective equipment and attention to finishes.

The Contractor will develop an Infection Control Management Plan to ensure that all members of the construction team have a full appreciation of the project, the risks of infection posed by construction activities and how to manage these risks. The Infection Control Management Plan will outline the Contractors approach to identifying any infection control risks and details the measures required to address the risk of infection resulting from the construction works.

The Contractor will regularly consult with the Principal to identify any infection control measures required to address the risk of infection resulting from the construction works.

5.7 Traffic Management

RHR Traffic consultant Stantec have developed a Preliminary Construction Traffic Management Plan in line with the

project specific SEARs requirements. Refer to the Traffic Impact Assessment report prepared by Stantec for further details.

5.7.1 Traffic and Pedestrian Management Plan

Prior to construction works commencing, the Principal Contractor will develop a Construction Pedestrian and Traffic Management Plan which will detail how traffic, pedestrian and cyclist access will be managed during the construction works.

Traffic flows and vehicle/pedestrian separation are a major consideration and pedestrian routes are to be maintained throughout construction. Traffic control personnel will be provided by the Principal Contractor during operating hours, or as advised by the Principal Contractor within their Construction Pedestrian and Traffic Management Plan.

Key issues for traffic, pedestrian and cyclist management during construction to be considered in the Construction Pedestrian and Traffic and Management Plan include, but is not limited to:

- Provide safe and uninterrupted access for pedestrians and vehicles accessing the construction site, hospital site;
- Ensure maximum safety of site personnel, pedestrians, cyclists, commuters, and drivers;
- Minimise environmental nuisance and impact as a result of construction traffic;
- Ensure construction traffic does not unduly interrupt existing traffic flows on the local road network;
- Safe operation of buses and other transport services during construction in adjacent roads;
- Have no vehicles arrive at the site, without prior arrangement, outside the approved working hours;
- Encourage site workers to utilise local public transport system and car sharing wherever possible;
- Timely and effective implementation of traffic management measures;
- Maintain access at all times for hospital and stakeholder's deliveries.

Pedestrian and vehicular movements into and around the site will be maintained, or alternate routes determined where necessary, and be defined by clear signage. Where necessary, physical traffic management personnel will be used to guide pedestrians and vehicles safely.

Temporary hoarding appropriate to the interaction between pedestrians and construction works (as per relevant codes and standards) will be constructed to prevent unauthorised access to the construction site. These hoardings and fences may be staged to allow for appropriate construction methodologies to be planned.

Deliveries to within the site will be managed through the existing road within the hospital as agreed with the Project Manager and NSLHD. Relevant management controls to be implemented as required.

Materials will be staged and stored in such a way to promote a clear and safe work site. At all times, materials are to be stored safely within the work area or site compound. While loading and unloading vehicles, it will be clearly stated that vehicles must not obstruct roads, driveways and paths of egress from surrounding buildings or fire protection equipment.

5.7.2 Construction Entry / Exit

Construction site access will be from Ryedale Road. Traffic controllers will be in place during working hours to ensure safe construction traffic movements.

5.8 Noise and Vibration Management

This section is to be read in conjunction with the Noise and Vibration Impact Assessment prepared by Acoustic Studio and submitted as part of this SSDA lodgement.

Noise from the construction site shall not exceed the limits set out in the Interim Construction Noise Guidelines, EPA and Australian Standards. No machine work will occur outside the approved working hours set unless approval has been given through the DN process.

The noise and vibration from the use of any plant equipment and/or building services associated with the premises shall not give rise to an offensive noise as defined under the provisions of the Interim Construction Noise Guidelines, EPA

and Australian Standards.

As part of noise mitigation for the project, the contractor will be responsible for the management, checking of compliant maintenance regimes and statutory supervision of all equipment.

Guidelines for operational limits, identification of at-risk receivers and implementation of mitigation measures will be provided in a project Construction Noise and Vibration Management Plan. The objectives of the Construction Noise and Vibration Management Plan will be to:

- Ensure that construction works do not significantly impact background noise levels around the hospital precinct, and that applicable guidelines and regulations are met;
- Ensure all equipment operates within the applicable noise levels;
- Ensure that construction works do not cause sufficient vibration to damage surrounding buildings, and comply with the applicable guidelines and regulations;
- Vibration does not affect occupiers of the adjoining buildings; and
- Ensure construction methodologies adopted minimise the impact of noise, dust and vibration.
- Reasonable methods (having regard to the use and operation of existing health facilities in close proximity to the Site) of noise suppression on all compressors, jack-hammers and other machinery of whatsoever will be implemented to ensure that the noise levels emanating from the Site during the Works are minimised.

5.9 Odour/ Fumes Control

Any potential odours, fumes/smoke associated with demolition and construction for the site will be assessed and minimised.

5.10 Protection of Trees

The retention and protection of vegetation on the site will be met as per the conditions of approval and in line with the Arboricultural Impact Statement submitted along with this SSDA.

The Contractor will be required to prepare a detailed site-specific Construction Management Plan. This Plan will need to demonstrate the measures that will protect trees and vegetation being retained under the development works.

5.11 Waste Management and Recycling Principles

The Contractor will be required to recycle and reuse materials where possible. The contractor will be required to arrange for the sorting and recycling of waste materials and packaging to ensure maximum recycling is achieved. The contractor will be committed to achieving compliance with the EPA guidelines.

5.12 Waste Management and Recycling Principles

Dangerous goods (such as petrol, diesel, oxy-acetylene, oils etc.) will be stored in a lockable compound with sufficient ventilation, bunding, hard surface and located away from waterways and drains in accordance with relevant codes of practice and standards. Material safety data sheets on all of these flammable and potentially harmful liquids will be provided by the contractor undertaking the Works.

5.13 Services Diversions

During the works, should any services diversions require to be undertaken, the following principles are to be followed:

- Any required services diversions/disruptions will be undertaken with full coordination, development and input with relevant HI, SLHD and authority stakeholders and will only proceed with approval, via a Disruption Notice process and appropriate consultation with the relevant service providers.
- Impacts on the hospital will be kept to the absolute minimum, which may result in 'Out of Hours' work.
- At all-times patient care will be paramount and staff and visitor safety, access and security maintained.

5.14 Dilapidation Report

Prior to commencing the works onsite and at completion, the appointed Principal Contractor will generate a Pre and Post Dilapidation Report. It is the Contractors responsibility to ensure the report considers all areas reasonably impacted by the works. At a minimum the reports will consider the following areas:

- Infrastructure and services within reasonable proximity to the works; and
- Property, Buildings, or structures within reasonable proximity to the works including site sheds. This includes but is not limited to existing taxi rank, existing grass area adjacent ambulance bay and hospital street corridor adjacent works zones.

The full extent of the Dilapidation reports will be agreed with the Principal prior to investigations proceeding.

6. Business Continuity Principles

The Works will be undertaken within a live health care environment. The Contractor will be responsible for the staging and sequencing of construction works in order to minimise the impact to the existing operations of the remainder of Ryde Hospital and greater campus.

Key principles include:

- The works will be taking place in an operating hospital environment for the duration of the works. Enable the continuation of hospital operations on the Ryde Hospital campus to continue to operate at full capacity during the construction works
- Separation of construction works from hospital operations to ensure:
- The safety of hospital staff, patients and visitors
- Segregation of construction activities to minimise impacts to hospital operations including departments above and below proposed works
- The hospital operations shall not be disrupted through the works. This shall be completed through the staging and sequencing of works in order to maintain hospital operations at all times.
- Early Notice of Disruptions – where disruptions such as noise, vibration, dust, services shutdowns, closure of pedestrian or vehicle paths/ access points, etc. are necessary, early notice must be provided to the Principal in accordance with the Disruption Notice process.
- Infection Control – ensure the infection control of the hospital is maintained. This includes external construction works on the campus and any locations of construction in the existing hospital environment. The infection control of existing facilities must not be compromised by construction works.
- Provision of temporary services/ measures to support disruptions – where major disruptions are required such as service shutdowns, or change of entry points, temporary arrangements such as alternative entry points, back up services, etc. shall be provided to the satisfaction of the Principal/ NSLHD to facilitate the continued operation of the hospital.
- Maintaining the compliance of all existing facilities during the works interface or connection with existing buildings or engineering system will be required. The Contractor must ensure the compliance and occupation of all existing facilities is maintained at all times.
- Maintain compliant access and egress pathways and if unable to do so, develop alternative pathways and the related documentation and notification of changes (e.g. update egress maps if fire/ evacuation pathways are altered).

Best for Project

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hello@tsamgt.com | tsamgt.com

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