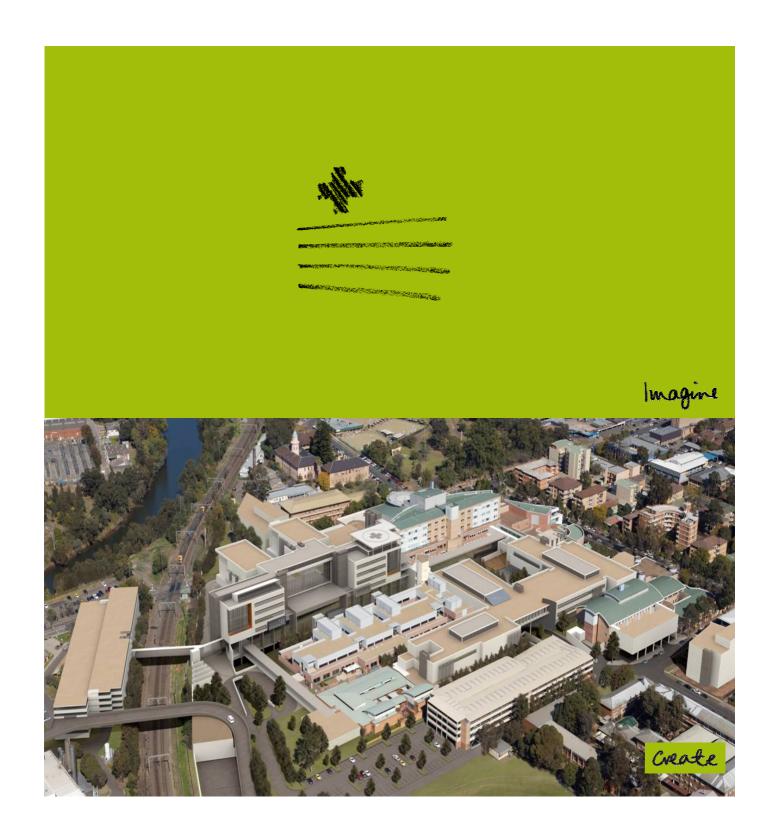


Stakeholder Consultation and Communications Plan

June 2009



Liverpool Hospital Redevelopment Stage 2.1Stakeholder Consultation and Communications Plan



Revision Control

| DATE | REVISION | PURPOSE | APPROVED BY |
|---------------|----------|--------------------------------------|-------------|
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| 6 June 2008 | 01 | Incorporate Principals Reps Comments | Robert Lake |
| 27 March 2009 | 02 | Reference to DP in CIG added | Nick Gaudry |
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Liverpool Hospital Redevelopment Stage 2.1Stakeholder Consultation and Communications Plan



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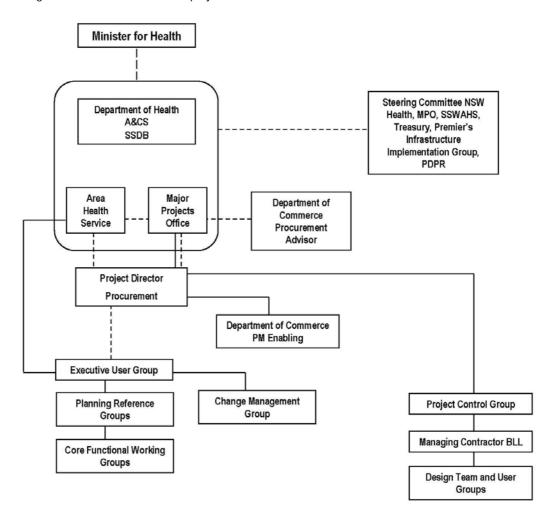


1.0 Project Governance Structure

The project is being managed by Capital Insight Pty Ltd as Project Director Procurement. A Steering Committee comprising representatives from the following agencies oversees the project:

- NSW Health
- Sydney South West Area Health Services (SSWAHS)
- Treasury; and
- NSW Premiers Department

The governance structure for the project is shown below:



An integral part of the project management process is ongoing consultation with a wide range of key organisations, health professionals and community groups (ie, stakeholders) who will either use the planned facilities or interface with the project in some way from an Authority, service provider and / or user perspective. The frequency, degree and level of consultation vary according to the role and responsibility of the particular stakeholder.

The list of potential Stakeholders is provided below:

Stakeholder Consultation and Communications Plan



1.1. External Stakeholders

- New South Wales Health (NSWH): (Health Infrastructure/Asset & Contract Services/Health Administration Commission)
- Sydney South West Area Health Services (SSWAHS)
- NSW Premiers Department
- NSW Treasury
- NSW Department of Planning
- NSW Department of Commerce
- Liverpool Chamber of Commerce and Industry
- Liverpool City Council
- Gandangara Local Aboriginal Land Council
- Integral Energy NSW
- Sydney Water
- AGL Energy Limited / Agility
- Telstra
- Optus
- Australian Rail Track Corporation
- Transport Infrastructure Development Corporation (NSW)
- RailCorp / State Rail Authority of NSW
- Ministry of Transport
- Road and Traffic Authority (NSW)
- Civil Aviation & Safety Authority
- Sydney Buses & Local Bus Operators
- NSW Fire Brigades
- Ambulance Service of NSW
- WorkCover Authority of NSW
- University of New South Wales
- University of Western Sydney
- TAFE NSW South Western Sydney Institute, Liverpool College
- Liverpool Girls High School
- Heritage Office
- Specific Community Groups

1.2. Internal Stakeholders

1.2.1. User Reference Groups

A number of User Reference Groups have been established to cover the following service departments of the Hospital:

- General Services (7)
- Clinical Support Services (7)

Liverpool Hospital Redevelopment Stage 2.1 Stakeholder Consultation and Communications Plan



- Emergency and Ambulatory Care Units (5)
- Inpatient Units (8)

See Attachment 4 and 5 for details

1.2.2. Special Reference Groups

A number of Special Reference Groups have been established to cover the following services:

- Security and Master keying (2)
- Electrical Systems and Reticulation (2)
- Fire Safety (1)
- Hydraulic Systems (1)
- Medical Gases (2)
- Mechanical Systems (2)
- BMS and Asset Tagging (2)
- Communication Systems (1)
- Internal Transport Systems (3)
- Front of House, Signage and Facades (2)
- Standardisation / Kit of Parts (4)
- Landscaping (1)
- Furniture, Fittings and Equipment (1)

See Attachment 4 and 5 for details

1.2.3. Other Representations

- Technical Experts / Advisers
- Clinical Reference Group
- Multi-Disciplinary Review Panel
- Executive User Group

See Attachment 4 and 5 for more details

1.3. Consultation at Work

It is highly important that each of the consultative groups work well both individually and collectively to achieve the objectives in a timely manner. The following principles are provided to encourage these endeavours:

- Group participants need to be clear about their roles and responsibilities. Codes of Conduct,
 Terms of References and Meeting Agendas will guide the activity of participants
- Participants need to attend all meetings and efficiently and effectively contribute to the work of the Group
- Action Plans, Issues Papers, Design Proposals, Meeting Minutes and Design Reports prepared for meetings are a formal part of performance management and communication
- Joint problem solving and design resolution are an integral part of the consultative process for the achievement of needs-based design and documentation

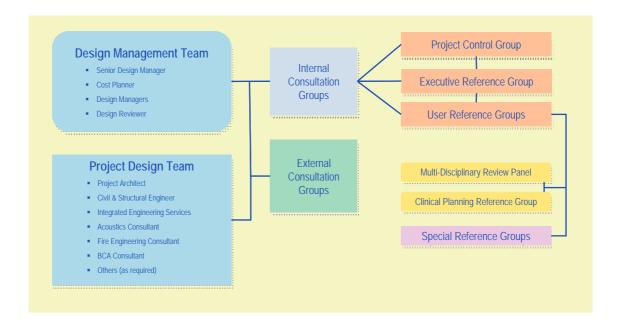
Stakeholder Consultation and Communications Plan



2.0 Design Consultation

The Section covers framework for User Reference Groups, Special Reference Groups and other related groups, Technical Experts, Clinical Reference Group and, Multidisciplinary Review Panel.

Design Management and Consultation Structure



The Terms of Reference provide a set of guidelines and operational principles to assist the various groups in achieving design objectives and deliverables in an efficient and effective manner.

2.1. User Reference Groups

In Principle, the user consultation process aims to be a collaborative exercise that unites design managers with the end user to review the functional aspects of the associated department.

This consultation will focus on:

- Aligning the objectives of the design brief with the design
- Unique department requirements
- Review of opportunities & future direction
- Staff/patient interactions
- Operational flows of the department
- Review the operations around specialised equipment needs
- Synergies between departments
- Benchmarking the design to NSW Health Guidelines
- High level staging & construction review

2.1.1 Positions

In order for the group to carry out its role effectively, each member must understand their role and have access to relevant information to support them in carrying out their responsibilities. Unless specifically requested, opinions and statements will not be attributed to individuals. It is the responsibility of the group to make decisions and recommendations

Stakeholder Consultation and Communications Plan



Chairperson

The Chairperson must ensure that the group functions properly, there is full participation, all relevant matters are discussed, effective decisions & resolutions are made and carried out. The chairperson should be proactive in planning all meetings. The Chairperson is required to direct and maintain order over the proceedings and ensure meetings progress aligns with the agenda and appropriate matters are referred to the Executive User Group (EUG).

Minutes Secretary or Personal Assistant (Project Administration)

The Minutes Secretary (or equivalent) coordinates the members of the working groups and distributes required information to participants in the lead up to meetings. The Minutes Secretary (or equivalent) ensures proceedings of meetings are recorded and distributed to members.

Group Representative

Group members must clearly understand their duties and responsibilities commit to dedicating adequate time and energy to undertaking entrusted duties, acting with integrity and truly representative to the needs of their department / service area.

Executive Sponsor

Executive Sponsors are nominated by the Client to take over responsibility for selected User and Special Reference Groups to ensure they achieve the desired level of progress in terms of matching the design to the brief, aligning the design to the cost plan through value engineering, finalising room data sheets / FF&E specifications and achieving timely sign-off on the design.

2.1.2 Terms of Reference

The Terms of Reference apply to each of the User Reference Groups listed in Section 1.2.1 covering Schematic Design and Design Development Phases for each relevant Project Milestone:

Schematic Design

- Review the current Schematic Design given any feedback from the Start-Up Design Review Workshop applicable to the Department
- Review the Schematic Design 1:100 layout plans (and other related 1:500/1:200 drawings) re: alignment with the model of care, schedule of accommodation and operational policies, functionality, workflows, SSWAHS Design and Building Standards & Guidelines (January 2007), capital and recurrent cost efficiencies, future adaptability and flexibility and value engineering perspectives
- Review Preliminary Room Data Sheets and the generic inclusions in respect to room and service
 descriptions and special requirements, room fabric and outline specifications, furniture and
 fittings, equipment and associated services and other building service requirements. Further,
 ensure that key Furniture, Fittings & Equipment (FF&E) Items have been accounted for early in
 the design
- Formally approve and sign-off the Schematic Design and associated documentation for the purpose of enabling the design to be costed and for the design to progress to more detailed stage

Design Development

 Review, approve and sign-off the final set of specific Room Data Sheets for the department with particular reference to room fabric and outline specifications, furniture and fittings, equipment and associated services and other building service requirements. In doing so, reference the range of samples and prototypes displayed on-site as appropriate

Stakeholder Consultation and Communications Plan



- Review, approve and sign-off final Detailed Designs covering overall Departmental Plan, Room Layouts (plans and elevations) with particular reference to the inclusion of all items and specifications provided on individual Room Data Sheets
- Meet with relevant Design Consultants (particularly, Interior Design and Acoustics, Mechanical & Electrical, IT and Communications, Hydraulics, Fire, Medical Gases, Security, etc.) and nominated in-house Technical Experts to ensure the designs align with specified user needs, industry codes, regulations, standards and guidelines as appropriate
- Review the design from a value engineering perspective with particular emphasis on Safety and Quality Improvement, Environmental Sustainable Development, Whole of Life, Cost Planning, Total Construction Sum and budget requirements
- Review, approve and sign-off relevant Engineering Services designs and supporting documentation as required to allow the design documentation phase to be advanced and design fully costed

2.1.3 Design Resolution

During the URG consultation process, elements of the design may be challenged. This is seen as a constructive process. However, all matters in excess of the SWSAHS Design and Building Standards and Guidelines must be referred to Executive User Group (EUG) for their consideration and endorsement.

The relevant Executive Sponsor of the URG will complete the Request for Design Variation Form in association with members of the Group. This will be forwarded to the BLL Design Manager who will present supported recommendations to the EUG for their consideration. Upon formal endorsement by the EUG and Project Director of Procurement, BLL will ensure agreed changes are incorporated in SWSAHS Design and Building Standards Guidelines as appropriate and formally signed off by the EUG.

2.2. Special Reference Groups

2.2.1. Terms of Reference

Special Reference Groups have been established to enable a group of experts to determine specific design requirements for services that extend across the Hospital - not being confined to one or few departments or areas of the facility.

Once the overall designs, operational policies, etc. have been defined by the Special Reference Groups, the information is made available to relevant User Reference Groups for review and adaptation to suit specific departmental requirements. The Special Reference Groups address both Schematic Design and Detailed Design and Documentation requirements based on their own experience and User feedback.

Schematic Design

- Review relevant health industry codes, regulations, standards and guidelines applicable to the special area under consideration including the SSWAHS Design & Building Standards and Guidelines (January 2007).
- Establish a list of the key design considerations and operational policies applicable to the special area under consideration to guide the design process
- Provide input to the Project Design Team / Design Consultants and User Reference Groups as required (via the Technical Expert) in the development of Schematic Design concepts and Room Data Sheets applicable to the special area under consideration
- Review the Schematic Design and associated documentation as part of the Approval and Sign-Off process for the purpose of enabling the design to be costed and for the design to progress to more detailed stage. Further, relevant design advice and information will be included in the Design and Building Standards and Guidelines document.

Stakeholder Consultation and Communications Plan



Design Development

- Review the final set of Room Data Sheets for relevant departments with specific reference to items and specifications requirements applicable to the special area under consideration
- As required, provide input into the collection and / or development of Samples and Prototypes that align with the special area under consideration
- Review final Detailed Designs covering overall Departmental Plans, Room Layouts (plans and elevations) by relevant departments with particular reference to the inclusion of items and specifications provided on individual Room Data Sheets relevant to the special area under consideration
- Meet with relevant Design Consultants (Engineering Services) and nominated in-house Technical Experts to ensure designs align with specified user needs, industry codes, regulations, standards and guidelines as appropriate
- Review relevant Engineering Services designs and supporting documentation for compliance with design requirements in support of the approval and sign-off process for the Design Development and Documentation phase aligned to the special area under consideration

2.3. Technical Experts

2.3.1. Terms of Reference

Schematic Design and Design Development for Relevant Project Milestones:

- Provide specific technical advice to relevant User Reference Groups and Special Reference Groups, Project Design Team, etc. given the person's area of expertise. At a minimum, advice is to be provided on latest trends, recommended changes to the Design Brief, operational policies, FF&E items, etc. so that best practice is achieved through design and documentation
- As required, provide input into the preparation of Room Data Sheets in line with the special area of expertise
- As required, provide input into the choice of samples and prototypes in line with the special area of expertise
- As required, provide input into Value Engineering Workshops / Sessions in line with the special area of expertise with an emphasis on preserving the key elements of the design from an operational & regulatory perspective
- Review Schematic Designs and Detailed Designs and Documentation in support of the approval and sign-off process of User Reference Groups, Clinical Reference Group, Multi-Disciplinary Review Panel and Special Reference Groups

2.4. Clinical Reference Group

2.4.1. Terms of Reference

The overall aim of establishing Clinical Reference Groups (i.e. medical, nursing, area health) is to ensure that an appropriate number of clinical staff representing key clinical specialties / departments of the Hospital provide input into the design process on behalf of their colleagues for relevant Project Milestones.

'Clinical Champions' will provide input into the design process based on regular consultation with their clinical colleagues and key multi-disciplinary team members to ensure the design supports efficient and effective clinical practice and contributes to patient and staff well-being

Stakeholder Consultation and Communications Plan



Schematic Design

- As required, review and provide feedback on the Start-Up Design Review Workshop Report from a clinical perspective
- Review the Schematic Designs (package of 1:500, 1:200 and 1:100 drawings) particularly medically-orientated departments / service areas, from a clinical perspective in terms of its alignment with the model of care, key operational policies, functionality, workflows and recurrent cost efficiencies, future adaptability and flexibility and value engineering solutions / design enhancement
- Review Preliminary Generic Room Data Sheets from a clinical perspective with emphasis on ensuring key Furniture, Fittings & Equipment (FF&E) Items are accounted for in the design and align with clinical practice requirements
- Review the Schematic Designs and associated documentation in support of the User Reference Group process

Design Development

- Review the Room Data Sheets for clinical departments / service areas with particular reference to inclusions and specifications from a clinical perspective.
- From a clinical perspective, provide input into selection and product review of samples and design prototypes
- Review the final Detailed Designs for clinical departments / service areas ensuring that drawings and specifications align with the needs of clinical staff as indicated in the Design Brief, Room Data Sheets and other reports and documents
- As required, meet with relevant Design Consultants (particularly, Interior Design and Acoustics, Mechanical & Electrical, IT and Communications, Hydraulics, Fire, Clinical Gases, Security, etc.) and nominated in-house Technical Experts to ensure designs align with clinical user needs and clinical practice requirements
- Provide input into design value engineering reviews with particular emphasis on Safety and Quality Improvement, Environmental Sustainable Development, Whole of Life, Cost Planning, Total Construction Sum / budget requirements as they pertain to clinical staff considerations
- From a clinical perspective, review Detailed Designs and Documentation for relevant departments / service areas in support of User Reference Group approval and sign-off processes

2.5. Multi-Disciplinary Review Panel

2.5.1. Terms of Reference

The Multi-Disciplinary Review Panel has been established to enable team members to collectively review design and documentation related to key service departments that embrace a multi-disciplinary approach to service provision (model of care) ie, Inpatient Units, Operating Theatre Suite, Ambulatory Care Clinics, etc. for relevant Project Milestones.

The Multi-Disciplinary Review Panel will evaluate relevant service departments from a design and operational perspective to ensure the needs of each discipline (or key occupational group) are met so the design facilitates efficient and effective teamwork and operational performance. Input into the approval and sign-off process ensures specified user needs are aligned with designs.

Schematic Design and Design Development

 Review the work of the various User Reference Groups for nominated departments to ensure the needs of the Multi-Disciplinary Team are met and the design aligns with the specific needs of various disciplines working within the particular department





- Provide feedback to User Groups on areas of concern / opportunities for improvement to the functional design, workflows, building services, room data sheet inclusions (ie, finishes, FF&E, lighting, communications, etc.), operational efficiency, value engineering outcomes, etc.
- Provide input to selected User Reference Groups design approval and sign-off processes

2.6. Executive User Group (EUG)

2.6.1. Terms of Reference

The Executive User Group reviews progress of design of all phases of the Liverpool Hospital redevelopment project on a regular basis to ensure that SSWAHS objectives are being achieved and to be briefed on overall progress of the project.

The Project Director Procurement chairs the meeting. The Project Director Procurement prepares the meeting agenda and will arrange minutes of the meeting to be recorded and circulated.

BLL will prepare material for the EUG meetings which covers design and construction progress, and raises issues which require EUG direction.

2.6.2. Participants

The Executive User Group will consist of the Project Director Procurement's representative, Liverpool Hospital executive, SSWAHS executive, nominated executive sponsors of User Groups and Special Preference Groups and BLL representatives.

2.6.3. Scheduling

EUG's are held monthly and are currently scheduled on the first Tuesday of each month.

2.7. Consultation Through Detailed Design and Construction

BLL recognise that a crucial part of successful completion and handover of the project is having the intended occupants familiar and conversant with the facility and systems they will have. We also recognise that the make up of stakeholder and user groups will change during the life of the project and the importance of ensuring new members embrace the agreed concepts and designs as an integral part of the consultation process.

During the Detailed Design Phase of the project the consultation process will continue, and be refocussed on review of equipment selections, detailed review of plans for critical areas, sample and prototype reviews.

The Groups and participation required will be agreed with the Principals Representative and the Redevelopment Transition Manager following the Design Development Phase, and working groups organised to review plans, samples and prototypes.

During the construction of the project, most particularly during the fit out phases, BLL will organise and conduct regular tours of the facility as appropriate with User Groups.

The aim of the tours will be to:

- Familiarise the Users with the areas they will be occupying and the systems they will be using
- Review installations for functionality and make design adjustments if needed
- Review quality of the installations to ensure acceptance at completion
- Engender a level of pride and ownership of the new facilities

Liverpool Hospital Redevelopment Stage 2.1 Stakeholder Consultation and Communications Plan



2.8. Samples and Prototypes

An important part of the design consultation process is the display to Users of Samples and Prototypes of the key fittings, fixtures and specialist areas proposed for the development. BLL recognise that the use of Samples and Prototypes is the most effective manner to demonstrate to users what will be included in the finished facility.

BLL will coordinate with SSWAHS appropriate areas for the display of samples and prototypes. BLL will commence the Sample and Prototype review process during the Design Development phase of the project.

Attachment 6 shows the sample and prototype approval process including URG, SRG and EUG (if required) contribution.

Stakeholder Consultation and Communications Plan



3.0 Project Management

The Section covers Terms of Reference for the Project Control Group and the Construction Interface Group.

3.1. Project Control Group (PCG)

3.1.1. Terms of Reference

The Project Control Group will monitor and advise on all aspects of the Works and the contract, and facilitate and make decisions, if possible, where BLL and the Principal agree the matters are for PCG consideration. The PCG should attempt to achieve consensus on decisions at all times. The Principal and BLL will give effect to such decisions in accordance with the terms of the Contract.

The Principal's Authorised Person will chair each alternate PCG meeting. The Principal's Authorised Person will arrange the minutes of the meeting to be recorded and circulated.

BLL will prepare a comprehensive report on the status of the project for distribution at least 4 days before PCG meetings.

The PCG can establish Subproject Control Group(s) as required to address specific matters, issues or concerns. Subproject Control Group(s) will be chaired by BLL and membership shall include representation from BLL, the Principal's Authorised Person, Consultants, Subcontractor or Supplier Representative(s). Subproject Control Group(s) report to the PCG and meetings will be held as required. BLL will provide administrative support for these meetings and the Project Director Procurement may act for the Principal at the meetings.

3.1.2. Participants

The Project Control Group will consist of, as a minimum, the Principal's Authorised Representative, BLL's Authorised Representative, a senior end user and the Principal's Senior Executive.

3.1.3. PCG Report

The PCG report will cover the following:

- Authority Approvals
- Design and Construction progress against the contract program
- Identify issues affecting or likely to affect the works
- Design Progress and issues
- Procurement Status
- Finance forecast total end cost compared with agrees TCS and GCS budgets
- Report on construction progress, issues, upcoming activities and consultation activities
- Industrial relations issues and disputes affecting progress on site
- Quality Assurance, Commissioning and Handover
- Environmental and safety issues including statistics
- Any other significant issues achievements, upcoming events or milestones

3.1.4. Scheduling

PCG will be held monthly and are currently scheduled on the first Wednesday of each month.

Stakeholder Consultation and Communications Plan



3.2. Construction Interface Group

3.2.1. Purpose

The purpose of the Construction Interface Group is to ensure that the project is implemented in a manner that minimises the risk of interruption to the operations of the facility.

3.2.2. Terms of Reference

The terms of reference for the group are:

- Review of Disruption Plans (refer to Disruption Plan)
 - To provide a mechanism through which proposed methods of work for all activities that will, or potentially may interrupt services to the campus can be reviewed, evaluated and recommended for approval
 - To ensure that strategies are developed that address or mitigate all identified risk factors for the Liverpool Hospital Stage 2.1 project and local Liverpool Hospital projects that may impact on the hospital during the implementation of the project
 - To arrange all necessary approvals for the proposed methods of work
 - To ensure that the approved Methods of Work system is established, implemented and monitored, and outcomes are reviewed
- To communicate project information and strategies to the appropriate areas and staff
- The Group reports to the Area Chief Executive via the Executive User Group

3.2.3. Participants

The Construction Interface Group will consist of, as a minimum, the Principal's Authorised Representative, BLL's Construction Management Representatives, a senior SSWAHS Representative and Hospital representatives representing management and engineering.

3.2.4. Scheduling

The group will meet monthly or more frequently if required.

Stakeholder Consultation and Communications Plan



4.0 External Stakeholders

This section covers the consultation and communication approach with external stakeholders, which will be managed by some regular meetings and communication strategies.

4.1. Campus Coordination Group

4.1.1. Purpose

The purpose of the Campus Co-ordination Group is to bring together all groups doing construction for the Liverpool Hospital Redevelopment project along with key external stakeholders to ensure that activities are well communicated and co-ordinated among the various parties.

4.1.2. Terms of Reference

The terms of reference for the group are:

- To provide a mechanism through which proposed construction activities are co-ordinated among the various construction groups
- Provide a formal forum for affected parties, particularly the Australian Rail Track Corporation (ARTC), Railcorp / State Rail Authority of NSW, Education (School and TAFE) and the Ambulance Service, to be provided information about the project
- Provide a forum for local stakeholders to be informed and understand the implications of impending construction activities
- To co-ordinate and manage traffic during periods of high construction activity
- To provide a method of informing parents and students of the school of altered traffic arrangements
- To ensure that Construction Companies are informed of, understand and plan around the constraints of the key local stakeholders

4.1.3. Participants

The Campus Co-ordination Group will consist of, as a minimum, the Principal's Authorised Representative, BLL's Construction Management Representatives, representatives of other Construction Companies on the campus, a senior Hospital representative representing management and engineering, Education representative representing TAFE and the School, an Ambulance Service representative and a representative of the Rail Agency.

4.1.4. Scheduling

The group will meet monthly or more frequently if required.

4.2. Authorities Consultations

4.2.1. Department of Planning

The Minister for Planning has determined that the project is declared to be a project which Part 3A of the Environmental Planning and Assessment Act 1979 applies. A Part 3A Concept Application has been approved and subsequent Project Applications will be prepared by BLL.

With the assistance of a specialist consultant, BLL will formally and informally communicate with the Department to determine the requirements of the application and agree with the department the form of the submissions.

Stakeholder Consultation and Communications Plan



4.2.2. Authorities

Throughout the course of the project BLL will meets with various authorities to plan works, discuss requirements and inform of design and construction progress. These authorities may include:

- Liverpool City Council
- Integral Energy NSW
- Sydney Water
- AGL Energy Limited / Agility
- Telstra
- Road and Traffic Authority (NSW)
- Civil Aviation & Safety Authority
- Sydney Buses & Local Bus Operators
- NSW Fire Brigades

BLL will plan and prepare for all meetings and advise the Principal's Representative when meetings are taking place.

4.3. Community Communication

The Liverpool Hospital Redevelopment is a significant development for the Liverpool community. The community will be interested in the project from a number of different aspects, including:

- What form the completed development will take and its implication for the community
- Access to the hospital once completed
- The expanded range of services that will be offered by the new facilities
- Employment opportunities during construction and in the completed facilities
- The timeline of the project
- Community complaint process

When site work commences, BLL will provide on the Project Sign Boards:

- A telephone number on which complaints about construction and operational activities may be registered
- A postal address to which written complaints can be sent
- An email address to which electronic complaints may be transmitted

In conjunction with the Principal's Representative and SSWAHS, BLL will develop and implement Community Communications strategies, which may include:

- Letter drops giving information on impending construction activities
- Local Media Releases regarding the development
- Community information sessions

BLL will engage directly with parties affected or interested in the construction, in particular:

- Liverpool Girls High School regarding managing of traffic at school start and finish times
- Gandangara Local Aboriginal Land Council regarding employment opportunities during construction

Liverpool Hospital Redevelopment Stage 2.1Stakeholder Consultation and Communications Plan



5.0 Attachments

Stakeholder Consultation and Communications Plan



Attachment 1: Consultation Members and Contact Register

| | Master List: Cons | ultation Members and Conta | ct Register | |
|--|-------------------|--|----------------------|---------------|
| Consultation Group | Name | Position | Contact Numbers | Email Address |
| USER REFERENCE GROUPS | | | | |
| General Services (GS) | | | | |
| Corporate Services (GS1A+B) | | | | |
| Hotel Services (GS2) | | | | |
| Engineering Services (GS3) | | Details of person perso | | |
| Patient Support Services (GS4) | | | the | LI0 |
| Education Centre (GS5) | | | lote. proved by avai | ladie |
| Clinical Support Services (CSS) | | | ns apploand are wha | se se |
| Diagnostic Imaging Services (CSS1) | | alc of perso | illser Glood Databa | |
| Nuclear Medicine (CSS2) | | Details carence / | I the Access | |
| Pharmacy (CSS3) | | utive Released an | 0 412 | |
| Peri-Operative, OT, Sterilising (CSS4) | | Executive project were | | |
| Operating Suite (CSS5) | | yia Proj | | |
| Procedural Suite (CSS6) | | | | |
| Cancer Centre (CSS7) | | | | |
| Ambulatory Care Units (AC) | | | | |
| Ambulatory Care - Cluster 1 (AC1) | | | | |
| Ambulatory Care - Cluster 2 (AC2) | | | | |
| Ambulatory Care - Cluster 3 (AC3) | | | | |
| Ambulatory Care - Cluster 4 (AC4) | | | | |



| | Master List: Consult | tation Members and Conta | ct Register | |
|---|----------------------|---|---------------------------|---------------|
| Consultation Group | Name | Position | Contact Numbers | Email Address |
| After-Hours GP Clinic, Admission & Discharge (AC5) | | | | |
| Inpatient Units (IPU) | | | | |
| Cardiology (IPU1) | | | | |
| Haematology / Oncology and Palliative Care (IPU2) | | | | |
| Paediatrics and Adolescents (IPU3) | | | to' the | ble |
| Respiratory and Special Medicine Renal and Sleep Studies (IPU4) | | Details of pers Reference Reference Via Project Web a | Note. approved by are ava | |
| Neurosurgery, Renal Medicine & Specialty Medicine (IPU5) | | potails of pers | User Group Datab | |
| Trauma and Orthopaedics (IPU6) | | Deterence | nd the Acco | |
| Critical Care (IPU7) | | - cutive not Web a | | |
| Other IPUs (Existing CSB) – (IPU8) | | Exercia blolen | | |
| SPECIAL REFERENCE GROUPS (SRG) | | Ala . | | |
| Security and Masterkeying – Overarching Principles (SRG1A) | | | | |
| Security and Masterkeying – Detailed Planning (SRG1B) | | | | |
| Electrical Systems & Reticulation Infrastructure (SRG2A) | | | | |
| Electrical Systems & Reticulation – Internal (SRG2B) | | | | |
| Fire Systems (SRG3) | | | | |
| Hydraulic Systems (SRG4) | | | | |
| Medical Gases Systems Infrastructure (SRG5A) | | | | |



| | Master List: Consult | ation Members and Conta | ct Register | |
|--|----------------------|--|----------------------|---------------|
| Consultation Group | Name | Position | Contact Numbers | Email Address |
| Medical Gases Systems – Internal Detailed Design (SRG5B) | | | | |
| Mechanical Systems Infrastructure (SRG6A) | | | | |
| Mechanical Systems – Internal Detailed Design (SRG6B) | | Details of Potential Details of Det | | 1.0 |
| Building Management Systems (SRG7A) | | | Note: and by | ine ilable |
| Asset Tagging (SRG7B) | | | and to her are | avalida |
| Communication Systems (SRG8) | | 10 | ersons or Group are | tabase |
| Internal Transport Systems – Lifts and Escalators (SRG9A) | | Details Of P | nce / User Access Do | |
| Internal Transport Systems – Pneumatic Tube and Document Carriers (SRG9B) | | Executive Relove | b and wa | |
| Internal Tranport Systems – Helipad (SRG9C) | | via Projec | | |
| Front of House, Signage and Facades – Principals (SRG10A) | | V | | |
| Front of House, Signage and Facades – Design Development / Work Packages (SRG10B) | | | | |
| Standardisation / Kit of Parts – Clinical (SRG11A) | | | | |
| Standardisation / Kit of Parts – Finishes and Fitments (SRG11B) | | | | |
| Standardisation / Kit of Parts – Wet Areas (SRG11C) | | | | |
| Standardisation / Kit of Parts – Offices and Workstations / Meeting Rooms (SRG11D) | | | | |
| Landscaping (SRG12) | | | | |



| | Master List: Consu | Itation Members and Conta | ct Register | |
|---|--------------------|--|-----------------------|--------------------|
| Consultation Group | Name | Position | Contact Numbers | Email Address |
| Furniture, Fittings and Equipment (SRG13) | | | | |
| CLINICAL REFERENCE GROUP (MRG) | | | | |
| MULTI-DISCIPLINARY REVIEW PANEL (MDRP) | | Details O Details O Executive Reference Executive Project Via Project Via Project Via Project Via Project Via Via Project Via | Note: proved t | y the available |
| EXECUTIVE REFERENCE GROUP (ERG) | | 10.0 | f persons apploving a | ne ave Database |
| TECHNICAL EXPERTS | | Details | rence the Access | |
| Infection Control | | autive Reio | veb and di | |
| Information Technology & Management | | Execuproject | | |
| Engineering Services | | VIA | | |
| Biomedical Engineering Services | | | | |
| Sterilising Department | | | | |
| Security | | | | |

Stakeholder Consultation and Communications Plan



Attachment 2: Schematic Design – Consultation Attendance Register

| DESIGN PHASE | Schematic Design |
|--------------------|------------------------|
| CONSULTATION GROUP | ie, General Services |
| REFERENCE GROUP | ie, Corporate Services |

| | | Sch | ematic Design – Co | onsultation | Attendance R | Register | | | | | | | |
|------|------|----------------------|----------------------|-------------|----------------------|----------------------|------------------------|----------------------|----------------------|--|--|--|--|
| | (| Consultation M | eeting 1 | (| Consultation M | eeting 2 | Consultation Meeting 3 | | | | | | |
| Name | Date | Attendance (Tick) | Attendance (Sign) | Date | Attendance (Tick) | Attendance (Sign) | Date | Attendance (Tick) | Attendance (Sign) | | | | |
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Attachment 3: Design Development – Consultation Attendance Register

| DESIGN PHASE | Design Development |
|--------------------|------------------------|
| CONSULTATION GROUP | ie, General Services |
| REFERENCE GROUP | ie, Corporate Services |

| | | Desig | ın Development – (| Consultation | Attendance I | Register | | | | | | | |
|------|------|--|--------------------|--------------|----------------------|----------------------|------------------------|----------------------|----------------------|--|--|--|--|
| | (| Consultation M | eeting 1 | (| Consultation M | eeting 2 | Consultation Meeting 3 | | | | | | |
| Name | Date | Date Attendance Attendance (Tick) (Sign) | | Date | Attendance (Tick) | Attendance (Sign) | Date | Attendance (Tick) | Attendance (Sign) | | | | |
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Stakeholder Consultation and Communications Plan



Attachment 4: Schedule of Consultation Meetings - User Reference Groups (Milestones 1, 2, 5 & 6)

Schematic Design and Detailed Design & Documentation

Note: *Maybe up to 4 meetings

| | Sch | nedule of Consultation Meetings (N | lilesto | nes 1, | 2, 5 8 | 6) for | Sche | matic | Desig | n and | Detai | led De | sign 8 | Docu | ımenta | ation | | | | |
|---------------------|-------------------------|---------------------------------------|-------------------|---------------------------|-------------------|---------------------------|---------|--------|---------------------------|-------|--|---------------------------------|--------|------|---------------------------|-------|----|---------------------------|-------|----|
| | | | | | | Schen | natic [| Design | 1 | | | Detailed Design & Documentation | | | | | | | | |
| | Refer | ence Group | | Consultation Meeting 1 | | Consultation Meeting 2 | | | Consultation Meeting 3 | | | Consultation Meeting 1 | | | Consultation Meeting 2 | | | Consultation Meeting 3 | | |
| MILESTONE | | | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 |
| USER | General | Corporate Services (GS1) | ✓ | | | ✓ | | | | | | ✓ | | | ✓ | | | ✓ | | |
| REFERENCE GROUPS | Services (GS) | Hotel Services (GS2) | ✓ | | | ✓ | | | | | | ✓ | | | ✓ | | | ✓ | | |
| | | Engineering Services (GS3) | ✓ | ✓ | | ✓ | ✓ | | ✓ | ✓ | | ✓ | ✓ | | ✓ | ✓ | | ✓ | 1 | |
| | | Patient Support Services (GS4) | ✓ | | | ✓ | | | | | | 1 | | | ✓ | | | ✓ | | |
| | | Education Centre (GS5) | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | |
| | Clinical | Diagnostic Imaging (CSS1) | ✓ | | | ✓ | | | | | | 1 | | | ✓ | | | ✓ | | |
| | Support Services | Nuclear Medicine (CSS2) | ✓ | | | ✓ | | | | | | ✓ | | | 1 | | | ✓ | | |
| | (CSS) | Pharmacy (CSS3) | ✓ | | | | | | | | | ✓ | | | 1 | | | ✓ | | |
| | | Peri-Operative, OT Sterilising (CSS4) | ✓ | | | ✓ | | | | | | ✓ | | | ✓ | | | √ * | | |
| | | Operating Theatre (CSS5) | ✓ | | | | | | | | | ✓ | | | ✓ | | | √ * | | |
| | Procedural Suite (CSS6) | | ✓ | | | | | | | | | ✓ | | | ✓ | | | ✓ | | |
| | | | Schen uled lat | natic De | 3 & M4 sign Me | | | | & 4 will | be | M3 & M4 (maybe up to 4 meetings) (Note: Detailed Design & Documentation Meetings for Milestones 3 & 4 will be scheduled later) | | | | | | | | tones | |



| | Sch | edule of Consultation Meetings (V | lilesto | nes 1, | , 2, 5 8 | 6) for | Sche | matic | Desig | n and | Detail | ed De | sign & | Docu | ımenta | ation | | | | |
|---------------------------|-----------------------------------|--|---------------------------|--------|----------|---------------------------|------|-------|---------------------------|-------|--------|---------------------------------|--------|------|---------------------------|-------|----|---------------------------|----|----|
| | | | Schematic Design | | | | | | | | | Detailed Design & Documentation | | | | | | | | |
| | Refere | nce Group | Consultation Meeting 1 | | | Consultation Meeting 2 | | | Consultation Meeting 3 | | | Consultation Meeting 1 | | | Consultation Meeting 2 | | | Consultation Meeting 3 | | |
| | | MILESTONE | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 | M1 M2 | M5 | M6 |
| USER | Ambulatory | Ambulatory Care - Cluster 1 (AC1) | ✓ | | | | | | | | | ✓ | | | ✓ | | | ✓ | | |
| REFERENCE Care Units (AC) | Ambulatory Care - Cluster 2 (AC2) | ✓ | | | | | | | | | 1 | | | ✓ | | | ✓ | | | |
| (continued) | () | Ambulatory Care - Cluster 3 (AC3) | ✓ | | | ✓ | | | | | | 1 | | | ✓ | | | ✓ | | |
| | | Ambulatory Care - Cluster 4 (AC4) | ✓ | | | | | | | | | ✓ | | | ✓ | | | ✓ | | |
| | | After-Hours GP Clinic, Admission and Discharge (AC5) | 1 | | | ✓ | | | | | | ✓ | | | ✓ | | | ✓ | | |
| | Inpatient | Cardiology (IPU1) | ✓ | | | ✓ | | | | | | 1 | | | ✓ | | | ✓ | | |
| | Units (IPU) | Haematology / Oncology & Palliative Care (IPU2) | 1 | | | | | | | | | ✓ | | | ✓ | | | 1 | | |
| | | Paediatrics and Adolescents (IPU3) | ✓ | | | ✓ | | | | | | 1 | | | ✓ | | | ✓ | | |
| | | Respiratory and Special Medicine / Sleep Studies (IPU4) | 1 | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | 1 | | |
| | | General Surgery, Vascular Surgery, Gastroenterology and Liver, Colorectal, Neurology, Stroke & Paediatrics (IPU5) | ~ | | | | | | | | | ~ | | | ~ | | | | | |
| | | Neurosurgery, Renal Medicine & Specialty Medicine (IPU6) | 1 | | | ✓ | | | | | | ~ | | | ✓ | | | 1 | | |
| | | Trauma and Orthopaedics (IPU7) | ✓ | | | ✓ | | | | | | ✓ | | | ✓ | | | ✓ | | |
| | | Critical Care (IPU8) | ✓ | | | ✓ | | | | | | ✓ | | | ✓ | | | ✓ | | |

Stakeholder Consultation and Communications Plan



Attachment 5: Schedule of Consultation meetings: Special User Groups

| Schedule of Consultation meetings: Special User Groups | | | | | | | | | |
|--|--|----------|----------|----------|---|---|--|--|--|
| Reference Group | | Meeting | | | | | | | |
| _ | | 1 | 2 | 3 | 4 | 5 | | | |
| SPECIAL REFERENCE GROUPS (SRG) | Security / Masterkeying – Principles (SRG1A) | ✓ | ✓ | ✓ | | | | | |
| | Security / Masterkeying – Detailed Planning (SRG1B) | ✓ | ✓ | ✓ | ✓ | | | | |
| | Electrical Systems & Reticulation - Infrastructure (SRG2A) | ✓ | ✓ | | | | | | |
| | Electrical Systems & Reticulation – Internal Planning (SRG2B) | ✓ | ✓ | ✓ | ✓ | | | | |
| | Fire Systems (SRG3) | ✓ | ✓ | ✓ | ✓ | ✓ | | | |
| | Hydraulic Systems (SRG4) | ✓ | ✓ | ✓ | ✓ | ✓ | | | |
| | Medical Gases Systems - Infrastructure (SRG5A) | ✓ | ✓ | ✓ | | | | | |
| | Medical Gases Systems – Internal Detailed Planning (SRG5B) | ✓ | ✓ | ✓ | | | | | |
| | Mechanical Systems – Infrastructure (SRG6A) | ✓ | ✓ | ✓ | | | | | |
| | Mechanical Systems – Internal Detailed Planning (SRG6B) | ✓ | ✓ | ✓ | | | | | |
| | Building Management Systems (SRG7A) | ✓ | ✓ | ✓ | | | | | |
| | Asset Tagging (SRG7B) | ✓ | ✓ | ✓ | | | | | |
| | Communication Systems (SRG8) | ✓ | ✓ | ✓ | ✓ | ✓ | | | |
| | Internal Transport Systems – Lifts and Escalators (SRG9A) | ✓ | ✓ | ✓ | | | | | |
| | Internal Transport System – Pneumatic Tube and Document Carriers (SRG9B) | ✓ | ✓ | ✓ | | | | | |
| | Internal Transport System – Helipad (SRG9C) | ✓ | ✓ | ✓ | | | | | |
| | Front of House, Signage and Facades – Principles (SRG10A) | ✓ | ✓ | | | | | | |

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| Schedule of Consultation meetings: Special User Groups | | | | | | | | | | |
|--|---|----------|---|----------|---|---|--|--|--|--|
| Reference Group | | Meeting | | | | | | | | |
| | | 1 | 2 | 3 | 4 | 5 | | | | |
| SPECIAL REFERENCE GROUPS (SRG) continued | Front of House, Signage and Facades – Detailed Planning / Work Packages (SRG10B) | ✓ | ✓ | ✓ | | | | | | |
| | Standardisation / Kit of Parts – Clinical (SRG11A) | ✓ | ✓ | ✓ | | | | | | |
| | Standardisation / Kit of Parts – Finishes and Fitments (SRG11B) | ✓ | ✓ | ✓ | ✓ | | | | | |
| | Standardisation / Kit of Parts – Wet Areas (SRG11C) | ✓ | ✓ | ✓ | ✓ | | | | | |
| | Standardisation / Kit of Parts – Offices, Workstations and Meeting Rooms (SRG11D) | ✓ | ✓ | ✓ | | | | | | |
| | Landscaping (SRG12) | ✓ | ✓ | ✓ | | | | | | |
| | Furniture, Fittings and Equipment (SRG13) | ✓ | ✓ | ✓ | ✓ | ✓ | | | | |

Stakeholder Consultation and Communications Plan

Attachment 6: Sample and Prototype Approval Process

