

Campbelltown Hospital Redevelopment

Project Communications and Engagement Plan

March 2017

C&EP



Health
Infrastructure

PROJECT COMMUNICATIONS
AND CONSULTATION PLAN

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Version	Date	Document Owner	Approved By
1.0	28 March 2018	██████████	██████████

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PURPOSE OF THIS PLAN

Consistent, transparent and proactive communications and consultation is essential to delivering a successful project outcome. Engaging with the right people at the right time informs the project and links stakeholders and consumers at all levels of the health system to the capital works. Stakeholder consultation also helps the team to identify project risks early, and to put effective mitigation measures in place to manage them.

This Communications and Engagement plan will be a live document that will drive the project to effective communications and stakeholder consultation. It will capture the project communications objectives, activities and governance from inception, planning and delivery through to completion.

The document will host accurate and current information about the project. This information will be utilised to produce a range of communications materials. It also outlines the communication protocols and procedures to efficiently complete the project.

The Communications and Engagement plan is divided into two chapters:

Chapter 1 will be referenced for the production of reports and public documents including the project website, media releases and media responses. This section will be updated at least once per month.

Chapter 2 will provide a foundation for project communications and are generally for internal purposes. This section will be updated every two months as a minimum.

KEY OBJECTIVES OF THE COMMUNICATIONS & ENGAGEMENT PLAN

- Provide a single hub to input all key project information.
- Provide a single hub from which data can be retrieved to produce accurate and timely communication outputs.

KEY BENEFITS:

The Communications & Engagement Plan will:

- Provide a clear governance framework for managing communications and consultation around each project.
- Identify key stakeholders and keep them informed throughout all stages of the project, in association with the 'Stakeholder Management Plan'.
- Encourage proactive communication and collaboration between SWSLHD, Health Infrastructure (HI), the community and key stakeholders.
- Have a consistent and clear communication process for developing, approving and distributing communications material.
- Measure performance against the plan and provide accurate reporting and evaluation.
- Be auditable and will be used for reporting to the ESC.

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GUIDING PRINCIPLES FOR COMMUNICATIONS AND ENGAGEMENT

We are adopting the Health Infrastructures guiding principles for capital projects in relation to communications and engagement, these are:

- Proactive stakeholder engagement
- Proactive and transparent communications
- Coordinated information
- Collaboration

All communications and stakeholder engagement approaches, materials and activities should reflect these important principles. This Communication & Engagement Plan has been designed to foster these principles.

MEDIA, EVENT AND MINISTERIAL PROTOCOLS

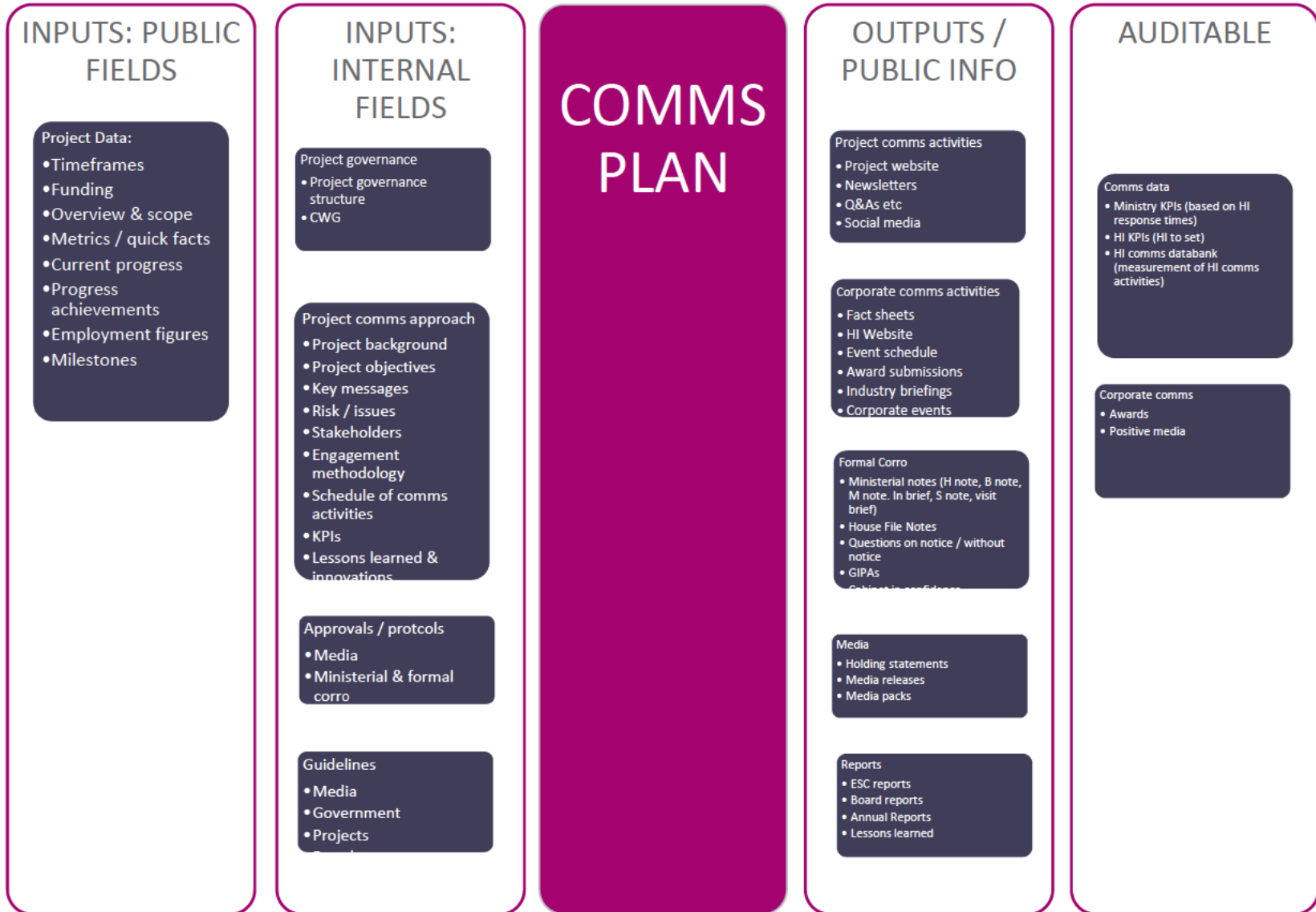
This document will be used closely in conjunction with the 'Health Infrastructure Project Director's Communications Guide'. The Communications Guide includes detailed processes for media, incident media, event and Ministerial correspondence to be managed across HI, the SWSLHD and Campbelltown Hospital.

The Communications & Engagement Plan and the Communications Guide hold key project information that will be used to produce a range of communication outputs. The communications outputs include, but are not limited to:

- Corporate communications activities – Factsheets, HI website, event schedule and award submissions
- Project communications activities – project website, newsletters and Q&As
- Government Relations and Ministerial liaison – Ministerial briefing notes, visit briefs, House File Notes, Parliamentary Questions, GIPAs, Cabinet in Confidence and speech notes
- Media – Holding statements, media releases and media packs.

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Communications & Engagement Plan – INPUTS AND outputs?



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CHAPTER 1

This chapter will capture key project information that changes on a regular basis. This includes project data:

Timeframes	Progress achievements
Funding	Employment figures
Overview	Milestones
Metrics	

Updates will be entered by COB on the first Monday of every month or as soon as a change happens. It is the responsibility of the Communications & Engagement Officer to update the sections on a regular basis.

It is important to note that information in this chapter maybe used to inform and illustrate public information, therefore timely and accurate information is essential.

CHAPTER 1 - Revision History

Version	Date	Updated by	Issued To	Remarks
0.1	4/12/2017			Plan in draft, please provide feedback.
1.0	28/03/2018		Root Partnerships	For Final Business Case

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1. PROJECT DATA

The information in this section may be extracted to inform critical communications material including fact sheets, website text, event schedules, ministerial correspondence, media statements and corporate reporting. As we are still in the early stages of planning, this document will be need to be updated regularly. At this stage we are limited in the information we have available.

1.1 TIMEFRAME, FUNDING, OVERVIEW & SCOPE

Overview and scope

In August 2014, an Abridged Clinical Services Plan for Macarthur to 2026 was developed in response from New South Wales Ministry of Health (the Ministry) to commence planning for Campbelltown Hospital Redevelopment Stage 2 (CHRS2) project.

In December 2016, the Ministry requested that South Western Sydney Local Health District (SWSLHD) undertake an accelerated planning exercise to revise the previous Clinical Service planning to meet a new timeframe of 2031 and to inform planning for the 'Planning Phase' for the CHRS2 and the next stage of planning for the Oran Park Integrated Health Hub.

Interim outcomes for the Enhanced Paediatric Capacity in South West Sydney 2026 planning process including potential paediatric/adult interfaces were also identified as part of the planning process, along with planning for future Mental Health Services on the Campbelltown Hospital campus. A SWS Enhanced Paediatric Capacity Plan 2031 was endorsed by the SWSLHD in October 2017.

Discussions since early 2017 with key SWS and Campbelltown Camden clinicians and managers as well as SWS health service planners, identified key service and clinical priorities for Macarthur to 2031.

Further discussion has confirmed a list of key infrastructure priorities to be included in CHRS2. Key infrastructure priorities are:

- Acute Mental Health Services, notably:
 - Integration of Child/Adolescent inpatient services with Paediatrics
 - Establishment of a new Older Persons Mental Health capacity (separate funding)
 - Acute Adult with gender specific capacity
 - A new Civil Secure Unit (separate funding)
- New Emergency Department, PECC, new Emergency Short Stay Unit (Admission Short Stay Unit, Discharge Short Stay Unit plus Paediatrics)
- Significant expansion in Paediatric inpatient and outpatient services
- Expanded Intensive Care Unit
- Enhanced Diagnostic Services including Medical Imaging, new Vascular Diagnostic Assessment Unit, new Neurophysiology Diagnostic Unit, new Nuclear Medicine Unit
- New Interventional Suite including all interventional and procedural services i.e. theatres, procedural, Interventional Radiology, Hybrid Operating Theatres

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- New shared Peri-Operative Unit with one entry point for all surgical patients plus new CSSD and Pre-Admission Clinic space
- New High Volume Short Stay Unit
- Enhanced Medical and Surgical Inpatient Subspecialty Units – or home wards including Closed Observation units .
- Enhanced Maternity and Neonatal services
- New In-Centre and satellite Renal Dialysis services
- Expanded theatre complex (new and refurbished)
- Expansion of ambulatory and outpatient services
- Expanded Cancer services including uplift in medical and radiation oncology services
- New Primary circulation spine on Hospital Street.

An abridged Clinical Services plan for Macarthur to 2031 was approved by the Ministry of Health and the SWSLHD in October 2017.

Timeframe

The project initiation phase commenced in August 2017, during this stage a visioning workshop was held with both internal and external stakeholders. The output from the session was the development of the project's guiding principles. The Master planning stage commenced in October and in November we held a Value Management Study workshop where a preferred master plan was selected.

Phase	Key Program Task/Milestones	Date
Phase 0	Project Initiation	August 2017
Phase 1	Master Planning	October 2017
Phase 2	Feasibility Development	February 2018
Phase 2	INSW Gate 2 Review	February 2018
Phase 2	Business Case	March 2018
Phase 3	Schematic Design Process	June 2018
Phase 3	Early Works (Carpark) Construction	June 2018

The first part of Phase 2 Feasibility Development has begun and is due for completion in February 2018.

In addition (for phase 2), the INSW Gate 2 Review preparation commenced in November and was undertaken in February 2018.

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Subsequently the Business case will be due in March 2018, this will conclude the segment milestones for phase 2. Once the project progresses we will detail the additional milestones.

Funding

The NSW Government announced in the 2017/18 NSW State Budget \$632 million for the Campbelltown Hospital Redevelopment Stage 2.

1.2 FACTS, PROGRESS ACHIEVEMENTS & EMPLOYMENT

Facts (used to inform factsheets, newsletters, reports etc)

Stage one delivered:

- The CHR Stage 1 was completed in early 2016. This Stage provided the Hospital with additional inpatient beds (with shell space for growth/expansion); enhancements to the Emergency Department including Short Stay Unit; Maternity and Paediatric services; co-located Ambulatory Care; Outpatients; Antenatal and Allied Health consulting rooms and treatment spaces; expanded Pathology, Clinical Information space and Loading Dock; as well as providing additional care parking.

Macarthur Clinical School:

- Western Sydney University and South Western Sydney Local Health District officially opened the \$21 million Macarthur Clinical School at Campbelltown Hospital in August 2017.
- The Macarthur Clinical School is one of the key training sites for the University's School of Medicine, with students receiving hands-on clinical experience and mentoring by the hospital's senior specialists and other health professionals from their very first clinical year.
- Comprising purpose-built, specialist teaching and simulated learning spaces, the Clinical School also houses the hospital's postgraduate training unit for nursing and other health professionals, providing a significant boost to the hospital's clinical training capacity.
 - The Macarthur Clinical school will provide staff and students with access to world class training and education.
 - The service is deeply embedded in Western Sydney and has had strong and continued involvement from our local community.

Stage two:

- The south west has experienced unprecedented growth. Young families living and relocating to the area will benefit from the enhancement to paediatric services. This will allow children to be cared for close to home and additional special care beds will mean babies can be looked after close to where their families live.
 - In July 2017, a baby was born at Campbelltown Hospital every 2.5 hours (CSP).
 - By 2031 there will be 58% more people, a growth rate more than double for the rest of NSW, Children 0-14 years will increase by 58% by 2031 (CSP).

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- Our busy emergency department will also receive a boost, with an increase in the number of treatment spaces as well as the number of beds in the Emergency Short Stay Unit. This will help the hospital respond to the increasing demand for emergency care.
 - In 2015/2016 Campbelltown Camden Hospital was the 3rd Busiest Emergency Department in NSW with 72000 presentations annually behind North Shore and Liverpool (CSP).
 - Attendances at Macarthur Emergency Departments are estimated to increase by over 90% by 2031 (CSP).

- There will be important enhancements for acute and longer term inpatient and community based mental health services. This will include both specialist services for older people, adolescents and young people as well as additional beds for acute and non-acute adult mental health services.
 - Campbelltown Hospital has the 4th busiest Mental Health presentations in NSW at 2999 presentations annually behind St Vincent's, Liverpool and Prince Alfred (CSP).

- There will be an increase in the number of Intensive Care Unit beds allowing patients to be managed at Campbelltown Hospital. This will reduce the need for transfers because more complex medical and surgical services will be provided locally.
 - 16% of clinical activity for Liverpool Hospital services is for Macarthur residents, and with Liverpool capacity at 102% and Liverpool LGA population increasing by 39% to 2031, these patients will need to be cared for in Campbelltown Hospital (CSP).
 - More than 50% of Macarthur residents requiring surgery currently travel out of the Macarthur region for their care (CSP).

- Further enhancements to Campbelltown Hospital will include:
 - Diagnostic services – more medical imaging equipment
 - Inpatient facilities – increased number of medical, surgical, maternity and neonatal beds in response to additional demand for these services from a growing population
 - Ambulatory care facilities – more clinic rooms and other ambulatory spaces mean that patients can access more outpatient services
 - Refurbishments – the upgrade of a number of facilities, including adolescent mental health.

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Progress achievements

June 2017:

- NSW Minister for Health announced the \$632 million redevelopment for Campbelltown Hospital.

September 2017:

- 'Visioning' workshop was conducted by Price Water House Coopers (PWC). This session involved internal and external stakeholders. A key outcome was the development of guiding principles for the redevelopment.

October 2017:

- CSP endorsement: An abridged Clinical Services plan for Macarthur to 2031 was approved by the Ministry of Health (MOH) and the SWSLHD in October 2017.
- In October the project 'brand' was endorsed. This included a redevelopment specific logo and colour scheme.
- Appointment of Redevelopment Project Director Loretta Andersen.
- Project User Groups (PUGs) with a focus on concept design, commenced on site and will be completed by mid-December.

November 2017:

- Values Based Workshop conducted. Preferred option identified. .
- Further recruitment of the Campbelltown project team took place in November. Jodie Wilson was announced as the Administration Officer and Clare Seanson as the Communications & Engagement Officer.

December 2017:

- Engagement meetings with local MPs.
- First all staff redevelopment forums at Campbelltown Camden Hospital.

Employment figures

Current stage of project	Date	Number of employees
Workforce planning/ project staffing - resources		

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1.3 MILESTONES

The following milestones will provide opportunities to leverage media and communications opportunities, in some cases Ministerial attendance. As the project is still in the early stages, not all the dates have been determined, and some could change. This section will be regularly updated to reflect accurate time frames.

Milestone	Indicative dates / month
Planning <i>(example milestones below)</i>	
T1 - Master plan reveal	December 2017
T2 - Launch of concept design	February 2018 – internal stakeholders
T1 - Launch of schematic design	Q2 2018
T1 - Planning submission / approval	Q2 2018
T1 - Funding announcement	June 2017
T1 - Lead design team announced	To be confirmed with main contractor
T2 – Community forum	February 2018
Delivery	
T1 - Early works contract award	March 2017
T1 - Early works start on site / sod turn	April 2017
T1 - Main works contract award	Q2 2019
T1 - Early works finish	Q3 2019
T1 - Main works start	Q2 2019
T2 - First Concrete pour	To be confirmed with Main Contractor
T2 - Establishment of façade	To be confirmed with Main Contractor
T2 - Delivery of crane (name the crane)	To be confirmed with Main Contractor
T1 - Topping out ceremony	To be confirmed with Main Contractor
T2 - Delivery of large equipment (Modulars, CT Scans)	To be confirmed with Main Contractor/Health Infrastructure
T1 - Main works complete	Q1 2023
T2 - Transfer of services	To be confirmed
T3 - Progress visit / media opportunity	To be confirmed
T1 - Handover of facility	To be confirmed
T1 - Official opening	To be confirmed

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Other milestones will be included once the project progresses further:

- Change management milestones
- ICT milestones
- New technologies in digital hospitals
- Clinical/service announcements
- New models of care
- Digital records management
- New and improved workflows and patient flows
- Arts program
- Workforce and traineeships

CHAPTER 2

Information in this chapter will support the project communications activities.

Updates will be entered by COB on the first Monday of even months (February, April, June etc) or as soon as a change happens. The Communications & Engagement Officer is responsible for all updates.

CHAPTER 2 - REVISION HISTORY

Version	Date	Updated by	Issued To	Remarks
1.0	28/03/2018	████████	Root Partnerships	For Final Business Case

2 PROJECT COMMUNICATIONS APPROACH

2.1 BACKGROUND & OBJECTIVES

The CHR Stage 1 was completed in early 2016. This Stage provided the Hospital with additional inpatient beds (with shell space for further beds); enhancements to the Emergency Department including Short Stay Unit; Maternity and Paediatric services; co-located Ambulatory Care; Outpatients; Antenatal and Allied Health consulting rooms and treatment spaces; expanded Pathology, Clinical Information space and Loading Dock; as well as providing additional care parking.

The CHRS2 Investment Decision Template (12 May 2017) provided a Preliminary Cost Estimate of \$632 million for stage 2 of the redevelopment. On 17 June 2017, the NSW Premier, the Treasurer and Minister for Industrial Relations and the Minister for Health announced a funding commitment of \$632 million for the Campbelltown Hospital Redevelopment stage 2 upgrade, Mental health and South West Paediatric Service Project to upgrade Campbelltown Hospital Service.

The detailed Planning Phase for Stage 2 is in the process of investigating the project scope and addressing the CSP for deliverables within the available budget to meet project objectives.

2.2 THE LOCAL HEALTH DISTRICT – OVERARCHING VISION & MISSION

SWSLHD – Vision & Mission
<p>Vision:</p> <p>Leading care, healthier communities</p> <p>Mission:</p> <p>Our mission is to promote the health of the residents of the District and patients using our health services through the delivery of high quality healthcare. We do this by providing health services that are population based, patient-centred and involve families and carers.</p> <p>We use evidence to inform health practices; and consult, communicate, engage, and collaborate with patients, local communities, agencies, and care providers to improve the way we plan and provide health care services and programs.</p> <p>We strive to deliver services that are respectful of personal dignity and autonomy; and sensitive to the needs of people from different cultures.</p> <p>We emphasise learning and reflection and are committed to continuous quality improvement and innovation in delivering efficient and sustainable health care.</p> <p>Our culture enables excellence and accountability, values our people, and supports positive leadership and teamwork.</p> <p>Our Priority Strategic Directions:</p> <p>The following strategic directions guide how services are services and planned and developed into the future:</p> <ol style="list-style-type: none"> 1. Build capacity to effectively service growing demands for health

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2. Redesign of services bringing them closer to people and communities
3. Integrated action with the South Western Sydney Medicare
4. Partnering with external providers to delivery public health
5. Enhancing service networks and growing centres of excellence
6. Shared access to unified information for all the health care team
7. An integrated focus on primary prevention for patients and communities
8. Embedding education and research within service delivery

SWSLHD – Values & Principles

Values:

The Core values are fundamental to provision of health services across NSW and the foundation stones for building trust. They underpin all activities of the District and define how staff and resources work together and collaborate with patients, carers, the community and service partners in delivering and improving the health of the community.

1. Collaboration: Working as one team with patients, carers, the community, and other service providers
2. Openness: Services are transparent and open and explain the reason for decisions
3. Respect: Everyone involved in patient care or a health projects can contribute and their views will be heard, valued and respected
4. Empowerment: Staff, patients, carers and the community can make choices and influence outcomes. Systems and processes will enable participation, supply necessary information, support delegation and ensure accountability.

Our Principles:

The following principles guide how services are managed and developed into the future:

1. All residents have equity in access to health care services. People who are disadvantaged will be provided with assistance to access services where necessary.
2. Health services across the District will be of high quality.
3. Patients, communities, staff, and service providers will be treated with courtesy, dignity, and respect. Communication and collaboration will be fundamental to engagement.
4. Health care will be patient and family centred and responsive to the culture and needs of individuals, families, and communities.
5. Individuals and communities will be actively engaged in health care and programs. They will be provided with information and supported to make informed choices about their health. Autonomy in decision making will be respected.
6. Population health programs and strategies will be developed with communities and other agencies to improve the health of local communities. Strategies will be multifaceted to increase effectiveness and sustainability.
7. Services will be provided as close to home as possible and integrated across hospitals, community, and primary health settings. Networks to centres of excellence and tertiary services will increase access to expertise when required and support timely care.

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8. Collaboration and teamwork will occur within all health services and include patients, community members and service partners. New partnerships and opportunities to improve health and health care will be explored and developed.
9. The workforce is valued and will be consulted and included in the development and implementation of initiatives. Personal and professional development opportunities will be provided to enable staff to meet ongoing changes in the health system.
10. Services will be provided in a safe and healthy environment.
11. New models of care, health care practices and technology based on evidence will be used to ensure that patients and communities receive the best and most appropriate service available. Innovation and research will be encouraged to ensure safe and appropriate interventions.
12. Services will be provided in an efficient, sustainable, and cost-effective manner and will be evaluated and remodelled as required.
13. Environmental sustainability will be fundamental to the design and delivery of clinical and non-clinical services and infrastructure.

2.3 PROJECT VISION PRINCIPLES

A vision workshop was conducted in September 2017 that had key stakeholders including community representation; the following were developed as a set of guiding principles for the vision of the redevelopment.

Guiding Principles

- Patient services will meet the healthcare needs of the growing population.
- Campbelltown Hospital will transition to a tertiary facility, establishing a world-class training ground for the delivery of a broad range of clinical services.
- Campbelltown Hospital will become a healthcare hub for the Macarthur community and work within a network of hospitals delivering care to the broader south western Sydney community.
- Paediatric and mental health services will be significantly enhanced and integrated across the facility.
- We will strive to embed innovation, research and education in everything we do.
- Campbelltown Hospital will be adaptive to the future needs of the community, driven by technology and new ways of working.
- We commit to genuine and respectful consultation and engagement with the local community throughout the project, to inform planning, design and function.
- Campbelltown Hospital is a leader in delivering world class health care, with cutting-edge facilities becoming an employer of choice.

2.4 KEY MESSAGES

Key messages facilitate a one voice approach when communicating with community and key stakeholders. They also allow both HI and the LHDs to manage issues by ensuring that messages delivered to the broader public are accurate and consistent. For this plan, key messages have been broken up into three distinct components which include:

- The NSW Government
- The Local Health District
- Project specific

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SWSLHD Key Messages

Key messages from the Local Health District for CHR2 planning include:

- Delivering safe and quality health services is a priority for SWSLHD.
- The needs and concerns of stakeholders are important and there will be a number of forums and workshops that the community can attend.
- We will provide regular updates to keep the community informed.
- The Campbelltown Hospital Clinical Services Plan highlights the need to address the health needs of the increasing population.
- New facilities and services will enhance student learning and encourage the professional development of local doctors, nurses and allied health clinicians.

NSW Government Key Messages

NSW 2021 is a plan to make NSW number 1. It is a 10-year plan to rebuild the economy, provide quality services, renovate infrastructure, restore government accountability, and strengthen our local environment and communities. NSW 2021 replaces the State Plan as the NSW Government strategic business plan, setting priorities for action and guiding resource allocation.

The NSW Government has delivered the following key messages through its term of government. These key messages should continue to be used for project communications.

- The NSW Government is getting on with the job of upgrading our public hospitals.
- The NSW Government is getting on the job of delivering enhanced health services for the community.
- The planned process is the next vital step on the journey towards building a world-class hospital to better serve our growing community.
- The NSW Government is committed to upgrading our hospitals and delivering the highest standard of clinical care.
- The Local Health District will determine the exact nature of the upgrade, based on the future clinical needs of the Campbelltown Hospital.

2.5 LHD CAPITAL WORKS PORTFOLIO

An overview of the other major works within the LHD catchment are mentioned below to provide context and understanding around the current situation and highlight common potential issues or stakeholders.

Project background

Campbelltown Hospital Redevelopment Stage 1:

The CHR Stage 1 was completed in early 2016. This Stage provided the Hospital with additional inpatient beds (with shell space for further beds); enhancements to the Emergency Department including Short Stay Unit; Maternity and Paediatric services; co-located Ambulatory Care; Outpatients; Antenatal and Allied Health consulting rooms and treatment spaces; expanded Pathology, Clinical Information space and Loading Dock; as well as providing additional care parking.

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Bowral & District Hospital Redevelopment:

Bowral and District Hospital are currently planning a \$50 million government led redevelopment project delivering a new clinical services building with upgrade for:

- Acute beds adult and pediatric inpatient wards
- Maternity
- Birthing suites
- New entrance
- New operating theatres

2.6 PROJECT OBJECTIVES

Project Vision: Leading Macarthur to better health.

Project objectives

- Support implementation of agreed Better Health Value targets
- Improve self-sufficiency in the provision of acute medical and surgical care for residents of the catchment area
- Improve service catchment and patient flows
- Reconfigure and expand Emergency Department services
- Improve access to outpatient services
- Enhanced mental health facilities
- Increase surgical capacity
- Increase patient bed base
- Increase paediatric service self-sufficiency at Campbelltown

2.7 REDEVELOPMENT SPECIFIC KEY MESSAGES

Redevelopment Specific Key Messages

- This is an exciting time for the local community with millions of dollars being invested locally at Campbelltown Hospital.
- Planning has commenced for the \$632 million upgrade of Campbelltown Hospital, which will bring world-class health care to the south west community.
- The funding has come at an important time because the area is experiencing unprecedented growth.
- There will be increases in both the volume and level of services being provided at Campbelltown Hospital.
- This will reduce the need for patients to travel out of the area to access health services.
- There will be more inpatient beds which will allow children to be cared for close to home and additional special care beds will mean babies can be looked after close to where their families live.
- Our busy emergency department will also receive a boost, with an increase in the number of treatment spaces as well as the number of beds in the Emergency Short Stay Unit.
- This will help the hospital respond to the increasing demand for emergency care.

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- The funding means important enhancements can go ahead for both acute and longer term inpatient and community based mental health services.
- Both specialist services for older people, adolescents and young people as well as additional beds for acute and non-acute adult mental health services will be delivered.
- There will be an increase in the number of Intensive Care Unit beds allowing patients to be managed at Campbelltown Hospital and will reduce the need for transfers because more complex medical and surgical services will be provided locally.
- Further enhancements to Campbelltown Hospital will include:
 - Diagnostic services – more medical imaging equipment
 - Inpatient facilities – increased number of medical, surgical, maternity and neonatal beds in response to additional demand for these services from a growing population
 - Ambulatory care facilities – more clinic rooms and other ambulatory spaces mean that patients can access more outpatient services
 - Refurbishments – the upgrade of a number of facilities, including adolescent mental health.

2.8 STAKEHOLDERS AND ENGAGEMENT APPROACH

Stakeholders are the individuals, organisations, groups, political representatives and businesses who may be affected by the redevelopment. As part of the communications and consultation program, the CHRS2 Project Planning Team will engage a number of stakeholders. These stakeholders can be broadly categorised into the following groups:

- Federal and State government departments and politicians
- Local councils and politicians
- Business and industry groups
- Residents and community stakeholders
- Local media
- Facility and LHD employees
- Construction contractors.

The Stakeholder engagement document categorises stakeholders who are either directly involved, impacted, or influence the outcomes of the CHRS2 project. It also outlines areas of interest or concern relevant to these stakeholders as well as suggested initiatives and/or responses. This document will be updated regularly with all engagement activities and key stakeholder details.

2.9 ISSUE / RISK MANAGEMENT

The issues below have the potential to be expressed through the media, parliamentary debate and through submissions from the consultation process.

The table below highlights the key areas of concern, in particular for the first 12 months.

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Theme	Detail of anticipated concerns	Key messages
Paid for Car parking.	Car parking is currently free, potential for unions to get involved, poor communication, timing, and depth of information. Failure to identify key stakeholders for communication	<p>The car park will deliver upon all necessary growth and expansion requirements. Any car parks lost through construction will be replaced in advance.</p> <p>While there may be some access changes during the redevelopment, we will ensure there will be no issues for patients attending the emergency department, or other areas of the hospital.</p>
Workforce: recruitment/retention.	Failure to recruit staff numbers to meet capacity and complexity requirements.	<p>CHR2 will deliver a modern and contemporary facility with innovative models of care.</p> <p>There will be new opportunities for staff growth.</p> <p>There will be an increase in staff numbers to meet capacity and capability.</p> <p>Opportunity to work in a world class facility.</p> <p>New facilities and services will enhance student learning and encourage the professional development of local doctors, nurses and allied health clinicians.</p> <p>The Macarthur Clinical school will provide staff and students with access to world class training and education.</p> <p>A program of training and education.</p> <p>Tertiary hospital status.</p> <p>Contemporary and innovation models of care.</p>
Disruption and inconvenience through construction phase.	Staff and consumer fatigue and frustration due to length of project.	While there may be some access changes during the redevelopment, we will ensure there will be no issues for patients attending the emergency department, or other areas of the hospital.
Community identifiable outcome for paediatrics.	Community expectation of significant and visible paediatric services.	There will be a significant uplift of paediatric services integrated across the facility.

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<i>Theme</i>	<i>Detail of anticipated concerns</i>	<i>Key messages</i>
		Leading the state by providing innovative integrated MOC.
Failure to meet expectations of key stakeholders.	Failure to deliver project on time and on budget and failure to deliver within scope.	Robust planning includes anticipated timeframes for reaching milestones and governance including accountability at all phases of the project.
Lack of internal and external consultation	CHR2 not in line with staff and community expectations around deliverables. Staff and community disengaged.	We will conduct regular consultation with internal and external stakeholders. We will communicate our key milestones to stakeholders. We will involve internal and external stakeholders in the different stages and processes as appropriate.
Current funding not enough to deliver community needs	Community expectations that more funding is needed.	The Campbelltown hospital has experienced a sequence of redevelopment stages. The first stage was completed in 2016 and the second stage commenced planning in 2017. This is just one of a sequence of phases.
Lack of consistent messaging	Inconsistent and incorrect messaging is damaging to the project.	Our communication and engagement approach is strategic and synchronised.

2.9 SCHEDULE OF COMMUNICATIONS ACTIVITIES

To effectively communicate with the project stakeholders, it is important to plan the communications channels and tools for the project. Communications and consultation activities for the project are outlined below.

Overview/ Objective	Responsibility	Location/ Outlet	When / Frequency	Audience
Internal Emails				
Regular email to keep stakeholders informed of the Project	Comm & Engagement Officer	Email	As needed	Hospital staff
Newsletter				
To provide project updates and as a record of achievement. Newsletters include: - Redevelopment Newsletter - Hospital Newsletter - District News	Comm & Engagement Officer	Email/Intranet	Monthly	Staff Staff All
Social media				
Campbelltown Hospital and SWSLHD has a Facebook page. The District also has a Twitter account	Comm & Engagement Officer	Social media	As needed	All
Events and launches				
Provide opportunities to celebrate/showcase project milestones	LHD/Hospital	Event	As needed	Media Community Representatives Government Staff Other local stakeholder groups
Project Flyer				
A 1-page A4 with key information (in greater detail) to address specific	Comm & Engagement Officer	Lobby / Staff Noticeboard	As needed	Staff Patients Community

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<p>issues or topics of regular enquiries about the project, such as:</p> <ul style="list-style-type: none"> • Car parking • Overview of the proposed development • Benefits that the project will provide • Scope of work • What to expect in relation to disruption/ traffic/ noise and how this will be managed 				Other local stakeholders
Media Release				
<p>See media calendar for media opportunities:</p> <ul style="list-style-type: none"> • Submission of Development Application. • Award of Early Works package of work (if applicable) • Award of construction contract • Turning of the first sod • Midway through construction • Completion of construction 	Comm & Engagement Officer & HI	Distribute to media identified through stakeholder analysis	As needed	Media Community
Display Boards (including Schematic Designs)				
Promote the benefits of the new services and provide visual information regarding how the new infrastructure will look	HI	Lobby/ staff Noticeboard		Staff Patients Community Other local stakeholders

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Staff Notice Boards				
To be updated regularly with project info. Note: New noticeboard strategy/policy under development	Comm & Engagement Officer	Noticeboard	Updated regularly	Staff Patients Community Other local stakeholders
Intranet				
Project page on Intranet with: <ul style="list-style-type: none"> • Key internal staff messages (relating to the project) • A status report with all key information relevant to the staff (that is not on the internet site / project newsletters) such as: <ul style="list-style-type: none"> ○ More details relating to the consultation of the user groups and working groups (e.g. User Group Leaders and Coordinators) ○ Detailed statements re: works on site (and how these may impact staff) ○ Other relevant status information • Date and times for next site based presentations 	Comm & Engagement Officer	Intranet	Updated regularly	Staff LHD
Internet				
Dedicated page on internet with information relating to the project, milestones, photos, and videos	Comm & Engagement Officer	Internet	Update regularly	All
Feedback				

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<ul style="list-style-type: none"> Project email will be provided to allow stakeholders to ask questions about the project and receive responses in an agreed turnaround time 	Comm & Engagement Officer	Email	On website only	All
Staff Forums				
Held as required for major announcements/milestones, key messages that need to be communicated first hand.	Comm & Engagement Officer	Facility	As required	
Ward/department Roadshows				
Updates to staff	Comm & Engagement Officer	Facility	As required	
Letterbox drop				
<ul style="list-style-type: none"> If required 	Comm & Engagement Officer	Letterbox drop	As required	Neighbours to the site

2.10 LESSONS LEARNED

Lessons learned will be populated once the business case has been finalized.

2.11 PROJECT INNOVATION

The project team continues to explore innovative options at this early stage of planning.

Innovations will be tabled once the project progresses through design.

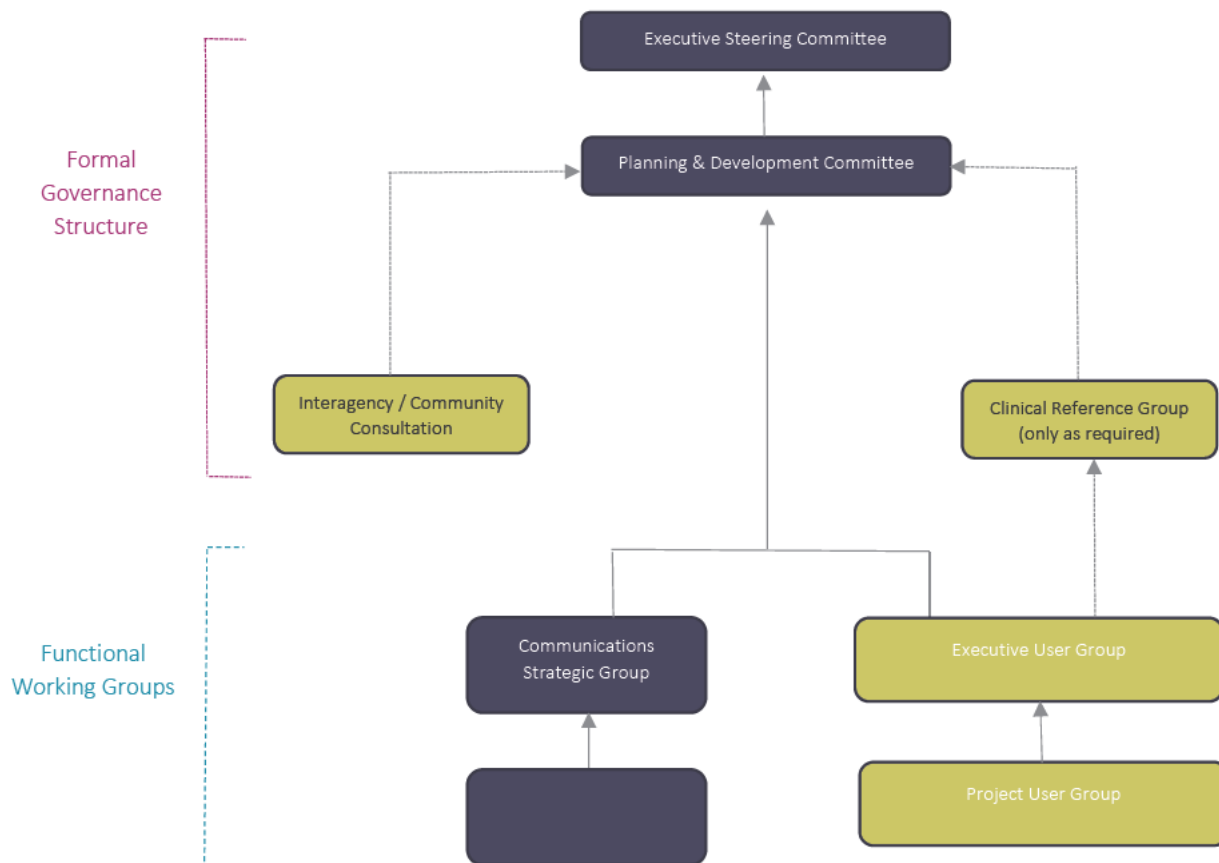
CHAPTER 3

3 PROJECT GOVERNANCE FOR COMMUNICATIONS

The project governance structure shows the hierarchy and interrelationship between the various governance groups for projects within the planning and delivery phases. The main objective of project governance is to:

- Establish a transparent authority framework to manage the planning and delivery phases of projects
- Provide a clear structure of decision making and endorsement of key project documents and strategies
- Provide clear structure of decision making and endorsement of the program, budget and scope for each project
- Provide a coordinated interface between the Governance Arrangements and the governance arrangements within the LHD to allow timely decision making regarding clinical and non-clinical inputs to each project

Project Governance Structure – Planning



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3.1 COMMUNICATIONS STRATEGIC GROUP (CSG)

The Communication Strategic Group (CSG) reports to the PDC/PDG. It has responsibility for developing / monitoring key project activities including communications and consultation (further outlined below). This is the avenue to formally highlight communication issues to the ESC.

The CSG team meets monthly and reports to the PDC / PCG. A standard agenda for the CWG includes:

1. Review of the updated plan – Chapters 1 and 2
2. Review of the Communications Actions and Issues Register which tracks consultation and communications completed since last meeting, and identifies feedback and any follow-up required
3. Review of Communications Calendar (three month look ahead).
4. Review of Media Plan
5. Planning for Milestones – review of communications events / media / materials
6. Identification of specific stakeholder risks and management of these risks
7. Change management communications issues

Membership:

Name	Organisation
██████████ – Media Director	SWSLHD
██████████ – Communications & Engagement Officer	SWSLHD
██████████ – Campbelltown Project Director	SWSLHD
██████████ – HI Communications & Engagement Advisor	Health Infrastructure
██████████ – HI Senior Project Director	Health Infrastructure
██████████	Root Partnerships

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3.2 ROLES AND RESPONSIBILITIES

The Communications & Engagement Officer, provided with information by the Hospital and Project Team will have responsibility for media and communications. This will be carried out in close consultation with:

- Health Infrastructure
- Project Director
- LHD/Campbelltown & Camden Executive Team
- Hospital Management Team
- LHD Capital Works Manger
- Director of Redevelopment
- NSW Ministry of Health
- Project Manager (in consultation with the Design Team and Construction Team)

Role	Responsibility
Communications & Engagement Officer	<ul style="list-style-type: none"> • Owner of the Consultation & Communications Plan • Prepare a report to be tabled monthly at the PCG / PDC / PPT • Manage the Communications Action List and Register • Owner of communication channels: newsletters, project brochures/flyers, project fact sheets (but not HI fact sheets) and media releases • Obtain LHD approvals for communications collateral • Chair CWG meetings • Work with the LHD and HI to develop the Communications Plan from the Communications Strategy and identify key stakeholders • Oversee implementation of the Communication Strategy providing active support to the LHD as necessary
SWSLHD Media & Comms Director	<ul style="list-style-type: none"> • Oversees the Communications & Consultation Strategy • Provide input to the Communications & Consultation Plan • Participate in CWG meetings as required • Obtain necessary CE approval for relevant communications collateral
HI Project Director	<ul style="list-style-type: none"> • Oversees the Communications & Consultation Strategy • Provide input to the Communications & Consultation Plan • Participate in CWG meetings as required • Obtain HI approvals for Communications collateral
HI Communications Manager	<ul style="list-style-type: none"> • Provide input to the Communications & Consultation Strategy and Plan. • Provide communications framework for all projects • Support stakeholder engagement and media relations • Project branding facilitation • HI Fact sheets
Redevelopment Director	<ul style="list-style-type: none"> • Provide input to the Communications & Consultation Strategy and the Communications and Consultation Plan • Provide the link between Change Management & Communications • Participate in CWG meetings • In consultation with the Communications Lead, obtain Hospital approvals for Communication Items

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	<ul style="list-style-type: none"> • Coordinate consultation process
NSW Ministry of Health	<ul style="list-style-type: none"> • Participate in governance meetings as required
Architect and Design & Construction Teams	<ul style="list-style-type: none"> • Provide and prepare presentation and communications materials in the area of their expertise • Assist in the presentation of materials in their area of expertise • Coordinate, attend and minute all Project User Group consultation meetings

The following committees are applicable to the communication process of the Project:

Executive Steering Committee (ESC)

The ESC is the ultimate decision-making authority within the Project Governance structure. It provides overall project direction, strategic advice, and leadership; consider political, social, or relevant regional commentary around sentiment towards the Project and advice regarding strategic long-term considerations and evaluation of broader redevelopment issues.

The ESC consists of the following key representatives:

Name	Organisation	Contact details
Members		
[Redacted]	Health Infrastructure	[Redacted]
[Redacted]	SWSLHD	[Redacted]
[Redacted]	NSW Ministry of Health	[Redacted]
Invitees		
[Redacted]	Health Infrastructure	[Redacted]
[Redacted]	Health Infrastructure	[Redacted]
[Redacted]	Health Infrastructure	[Redacted]
[Redacted]	Health Infrastructure	[Redacted]
[Redacted]	Health Infrastructure	[Redacted]
[Redacted]	SWSLHD	[Redacted]
[Redacted]	SWSLHD	[Redacted]

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[REDACTED]		
[REDACTED]	NSW Ministry of Health	[REDACTED]
[REDACTED]	Root Partnerships	[REDACTED]
[REDACTED]	Root Partnerships	[REDACTED]
Circulation	Role	Organisation
Members, Invitees and their Executive Assistants		

Planning & Development Committee (PDC) – Planning

The PDC oversees the planning of a project until contractor appointment. The key deliverables monitored by the PDC include the Service Procurement Plan (SPP), Preliminary Business Case (PBC), Project Definition Plan (PDP) and the Business Case (BC). The PDC monitors overall program and project requirements within budget, time, and scope. The PDC also monitors the development of key strategies such as operational and workforce strategies and change and communication strategies.

The PDC consists of the following key representatives:

Name	Organisation	Contact details
Members		
[REDACTED]	Health Infrastructure	[REDACTED]
[REDACTED]	South Western Sydney Local Health District (SWSLHD)	[REDACTED]
[REDACTED]	Campbelltown Camden Hospital	[REDACTED]
[REDACTED]	Campbelltown Camden Hospital	[REDACTED]
[REDACTED]	Health Infrastructure	[REDACTED]
[REDACTED]	South Western Sydney Local Health District (SWSLHD)	[REDACTED]
[REDACTED]	South Western Sydney Local Health District (SWSLHD)	[REDACTED]

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[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	South Western Sydney Local Health District (SWSLHD)	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
TBC Director of Allied Health	Campbelltown Hospital	
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Campbelltown Hospital	[REDACTED]
[REDACTED]	Billard Leece Partnership (BLP)	[REDACTED]
[REDACTED]	Billard Leece Partnership (BLP)	[REDACTED]
[REDACTED]	Root Partnerships	[REDACTED]
[REDACTED]	Root Partnerships	[REDACTED]

PROJECT COMMUNICATIONS
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3.3 APPROVALS AND PROTOCOLS

This C&CP is a reference point for the project team to monitor and manage the range of communication and consultation activities throughout the project lifecycle.

The primary endorsement mechanism for the C&CP is the Planning and Development Committee (PDC).

Escalation process

LHD communications team will have overarching responsibility for implementation of this plan and for identifying, coordinating, and reporting on items which require escalation.

The PDC and Executive Steering Committee (ESC) are accountable for the endorsement and approval of all plan outputs, and performance against this plan is reported to the PDC.

Approvals process

The approval process for communications issues have been streamlined into:

- Proactive communications
- Reactive communications

Proactive communications

Proactive communication materials are those which are developed on a forward-looking basis around the needs of the project. Typically, proactive communications materials are planned rather than reactive.

Proactive communications materials may include:

- Internal documentation such as FAQs, newsletter stories fact sheet, anticipated key messages
- Media promotion of project milestones
- Website content
- Project communications material

Proactive communication materials will be developed through a collaborative approach between the Hospital, LHD and HI. This will typically comprise of three key steps:

- Step 1: Communication requirements are identified by the project team/hospital and discussed with the Communications Lead
- Step 2: The Communications Lead drafts the communications material and circulates to HI for review and comment prior to issue
- Step 3: Following consensus, relevant approvals, the agreed communication material is provided in response to the identified communication need

Reactive communications

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Reactive communication materials are those which are typically developed in response to immediate / urgent requests for information. Reactive communications materials may include:

- Ministerial correspondence
- Parliamentary inquiries
- Responses to media enquiries
- Responses to social media which contain potential risk to HI, NSW Ministry of Health, or the LHD

Reactive communication materials will be developed through a collaborative approach between HI and the LHD. This will typically comprise of three key steps:

- Step 1: Communication requirements are identified and reviewed by Campbelltown Hospital and the LHD to determine response
- Step 2: The identified lead for the response drafts the communications material and circulates to HI for review and comment prior to issue
- Step 3: Following consensus, and approval from NSW Ministry of Health (where necessary), the agreed communication material is provided in response to the identified communication need

3.4 EVALUATION

Key performance indicators (KPIs)

Objective	KPI
Accurate and timely communication, tailored to the needs of each stakeholder and the community	<ul style="list-style-type: none"> ▪ Minimal ministerial enquiries and project complaints ▪ Incorrect or negative perceptions minimised
Mitigate reputation risk	<ul style="list-style-type: none"> ▪ Consistent enhanced reputation of all project partners across the life of the project ▪ Positive project announcements
Anticipate and manage potential issues to minimise negative publicity	<ul style="list-style-type: none"> ▪ Early identification of issues and quick resolution
Positively position the project	<ul style="list-style-type: none"> ▪ Positive media coverage incorporating key messages ▪ Positive stakeholder sentiment
Build stakeholder and community trust through engagement and education	<ul style="list-style-type: none"> ▪ Positive feedback ▪ Increased stakeholder and community participation in community forums and user groups

A monthly report, including all communications and consultation activities and issues management will be provided to the PCG. Activities are also reported against KPIs at PPT and PDC meeting.