



HEALTH INFRASTRUCTURE

Preliminary Construction Management Plan

Cowra Hospital Redevelopment

20th December 2022

Version 0.1



Health
Infrastructure



Health
Western NSW
Local Health District

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1 Executive Summary

Central West Project Management (CWPM) has prepared the Preliminary Construction Management Plan for the Cowra Hospital Redevelopment (the Project). The Project is at the Detailed Design phase.

1.1 Project background

The NSW Government has allocated a total of \$110M towards the redevelopment of the Cowra Health Service. The Project includes construction of new facilities to deliver contemporary, integrated models of health care to support and improve the health of residents in Cowra and surrounding districts including Grenfell, Canowindra, and Woodstock.

The current Cowra Health Service facilities are approximately 60 years old and located on the same site as earlier hospital buildings. The existing buildings are aged and have a number of functional and structural problems that will need to be addressed in the near future. Major redevelopment of the Cowra Health Service was identified in the 2017 Western NSW LHD Asset Strategic Plan as a priority for future capital investment.

The Cowra Hospital and Health Service Clinical Services Plan 2020-2030 (CSP) v1.5 was endorsed by the Ministry of Health in May 2021. The services to be included in the Cowra Redevelopment include:

- Emergency Services
- Acute and Subacute Medical and Surgical Inpatient and Day Services
- Peri-operative Services
- Maternity Services
- Paediatric and Child Health Services
- Ambulatory Care Services
- Cancer Services
- Aged Care and Rehabilitation
- Mental Health, Drug and Alcohol
- Primary and Community Health
- Oral Health
- Clinical support services including Medical Imaging Unit, Pathology Services and Pharmacy.

Master Planning for the project commenced in July 2021. Three redevelopment options were considered during Master Planning Extend and refurbish the existing hospital, a new hospital on the existing site and a new hospital on a greenfield site.

The preferred option includes building a new Hospital to the North side of the existing hospital over 2 levels. The building is oriented towards Liverpool Street which locates clinical services and back-of-house services on the first floor, and non-clinical services and main entry on the ground floor, along with the main entry.

2 Key Stakeholders

Stakeholder	Contact Details
Client	Health Infrastructure Kylie Makins 0429 380 400
Client Representative	Central West Project Management Jamie Pinkerton 0402 297 765
Principal Contractor	To be appointed

3 Construction Activities

3.1 Work Methodology

The construction methodology will be undertaken in three key milestones:

1. Early Works.
This phase includes demolition of redundant buildings, inground remediation of hazardous substances, and full bulk earthworks and inground services relocation.
2. Main Works.
This phase includes design finalisation, construction, commissioning of new hospital adjacent to operating hospital, and staged carparking.
3. Demolition of Existing Hospital and Finalisation.
This phase includes demolition of existing hospital, completion of carpark, and finishing works, such as landscaping.

3.2 Construction Hours and Duration

The scope of works is relatively substantial and will be approximately 4 months for Early Works (Milestone 1), 18 months for Main Works (Milestone 2), and 7 months for Demolition Of Existing Hospital, Completion of Carpark, and Finishing Works (Milestone 3).

The works are programmed to commence in January 2023 to extend to mid-2026.

Table 2: Project Timeframes

Commencement Date	The commencement of the Early Works is scheduled for January 2023. The Main Works will follow, dependent on Main Works REF approval and engagement of Contractor, likely to commence in May 2023.
Work Duration	The duration of the overall works program is approximately 29 months, followed by a Post Completion Period of 12 months for each Milestone. Milestone 1 - Early Works: Approximately 4 months. Milestone 2 - Main Works: Approximately 18 months. Milestone 3 – Demolition of Existing Hospital and Finalisation: Approximately 7 months.
Work Hours	The work hours will be in accordance with the Interim Construction Noise Guideline, to be confirmed. Monday to Friday: 7am to 6pm. Saturday: 8am to 1pm. Sunday and Public Holidays: No Work. High noise generating works are to equate to a maximum of four-hour clocks, separated by at least one hour respite period. Some work may need to be completed outside of the above hours. If required, these will be planned in consultation with stakeholders and City Council to ensure all aspects of work are clearly understood by all parties, and minimise disruption to hospital operations. This may include works which are most appropriately carried out outside of main working hours, for critical hospital operational reasons.

3.3 Plant Equipment

The following plant equipment is anticipated for the works:

- Bulldozers, Backhoes and Earthmoving equipment;

- Articulated and fixed trucks;
- Mobile cranes;
- Forklifts and Elevated Work Platforms; and
- General Power Tools.

3.4 Earthworks

A preliminary bulk earthworks model has been established, estimating the Main Works range between 6.5m of cut to 2.5m of fill. The approximate volumes of cut and fill are 18,800m³ and 3,200m³, leaving 15,600m³ of excess cut which will need to be appropriately disposed off-site during construction. Geotechnical investigations determined a layer of uncontrolled fill, which could be contaminated and not suitable for reuse. This will need to be excavated and removed as General Solid Waste.

The existing hospital will remain operational during Milestone 1 and 2, which is noted to impact the completion of earthworks. Some temporary retaining walls and shoring will be required, to allow for existing structures to be retained, or behind compound fencing and hoarding.

The staging of works will be reviewed during Milestone 3 works, to confirm if material can be retained on-site.

3.5 Source and Quantity of Materials

External Materials

Building elements will be selected to meet NCC 2022 requirements, and structural requirements appropriate to Building Importance Level 4. The building will comprise of a concrete structure with concrete floor slabs. Gable and skillion roofs will be Colorbond sheet steel.

Cowra is well known for granite and sandstone. Landscape will explore the use of these materials during next phase of design.

Internal Materials

Internal walls will be mostly plasterboard lined steel stud walls, with appropriate fire, thermal and acoustic ratings. Detailed proposals will be developed during Detailed Design.

Internal materials are to be low-maintenance and durable finishes, as well as locally appropriate. An emphasis on materials which minimise opportunity for vandalism will also be considered.

3.6 Traffic Management and Access

Minimal traffic impacts from the Main Work are expected. The additional vehicles are not expected to cause delays on local roads or create subsequent impacts to other roads. There will be no changes to public transport routes and services.

During site inductions, workers will be encouraged to make use of public transport, active transport, or carpooling, as they will not be permitted to park on site or within the Hospital. This will assist with minimising the impact to residents and Hospital users.

TTW will provide a Traffic Guidance Scheme detailing traffic control measures to maintain safety within the existing road network. This will include traffic marshals, signage, manoeuvring areas, and any other relevant traffic management strategies to be in place during construction.

It is not anticipated that any road closures will be required to facilitate construction of the site, however this will be reviewed once a Contractor is engaged.

TTW have provided recommended access routes during construction until the end of Milestone 2, to avoid local access roads where possible:

- Approach via Kendal Street;
- Left/Right turn onto Brisbane Street;
- Enter the site via left/right turn from Brisbane Street;

- Exit site in a forward direction onto Brisbane Street; and
- Left/Right turn onto Kendal Street.

A Construction Traffic Management Plan will be developed by the Contractor to:

- Provide safe and uninterrupted access for pedestrians and vehicles accessing the construction site, hospital site and resident driveways;
- Maximise safety of site personnel, pedestrians, cyclists, commuters, and drivers;
- Minimise environmental impact as a result of construction traffic;
- Ensure construction traffic does not unduly interrupt existing traffic flows on the local road network;
- Ensure safe operation of public transport during construction in adjacent roads;
- Prevent vehicles arriving at the site, without prior arrangement, or outside the approved working hours;
- Encourage site workers to utilise local public transport system, active transport, and car sharing wherever possible;
- Timely and effectively implement traffic management measures;
- Maintain access at all times for hospital and stakeholder's deliveries;
- Fulfil the Council and the Roads and Maritime Services requirements; and
- Provide revised access to site during Milestone 3.

3.7 Ancillary Facilities

The site amenities and compounds erected will accommodate lunch, ablution and change facilities for the duration of the project. The proposed location will be determined post-engagement of the preferred contractor. The site amenities will be modest in area and located away from any sensitive hospital or residential uses.

It is anticipated that no on-site parking will be permitted for contractors associated with the works and will be advised not to park within one block of the Hospital. The Contractor will need to provide a car parking strategy that retains existing off-site parking for the public.

4 Environmental Health and Safety

4.1 Asbestos Management and Removal Plan

Note: This section is to be read in conjunction with the Hazardous Building Survey, appended to the REF and prepared by JK Environments.

The appointed Principal Contractor will develop a strategy in accordance with the statutory regulations for asbestos management and removal.

As friable asbestos has been identified on site, all works associated with the disturbance and removal of asbestos containing materials must be undertaken by a Licenced *Class A* Asbestos Removalist.

The Principal Contractor must prepare an Asbestos Removal Control Plan for the proposed works. The control plan must include an allowance for asbestos air fibre monitoring during the removal and thorough clean up works upon completion of the removal works. An asbestos management plan will be prepared for the proposed works in areas containing asbestos. A clearance inspection must be undertaken on completion of removal works and prior to any other construction activities being undertaken.

4.2 Noise and Vibration Management

Note: This section is to be read in conjunction with the Construction Noise and Vibration Management Plan, appended to the REF and prepared by Acoustic Logic.

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

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

As part of noise mitigation for the project, the contractor will be responsible for the management, checking of compliant maintenance regimes and statutory supervision of all equipment, such as making sure all trucks and machinery involved in the Works will be checked for defective exhaust systems and general servicing.

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

- Ensure that construction works do not significantly impact background noise levels around the hospital precinct, and that applicable guidelines and regulations are met;
- Ensure all equipment operates within the applicable noise levels;
- Ensure that construction works do not cause sufficient vibration to damage surrounding buildings, and comply with the applicable guidelines and regulations;
- Vibration does not affect occupiers of the adjoining buildings; and
- Ensure construction methodologies adopted minimise the impact of noise, dust and vibration.

4.3 Waste Management and Recycling Principles

The Contractor will be required to recycle and reuse materials where possible. The contractor will be required to arrange for the sorting and recycling of waste materials and packaging to ensure maximum recycling is achieved. The contractor will be committed to achieving compliance with the EPA guidelines. All packaging is to be removed before materials are delivered to site to minimise waste generation on site.

5 Dilapidation Report

Prior to commencing the works onsite and at completion, the appointed Principal Contractor will generate a Pre and Post Dilapidation Report. The report shall cover as a minimum the following areas:

- Existing roads and access roads;
- Infrastructure;
- Adjoining properties;
- Existing landscape, including trees to be retained;
- Services mains;
- Stormwater systems; and
- Existing utilities and authority services.

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