

HEALTH INFRASTRUCTURE

Muswellbrook Hospital Redevelopment (MHR) Stage 3 – Community Health relocation

Preliminary Construction Management Plan (PCMP)

24/01/2024

V.01



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1.Introduction

1.1 Purpose

This Preliminary Construction Management Plan (the Plan) has been prepared to support a Review of Environmental Factors (REF) on behalf of Health Infrastructure for the Muswellbrook Hospital Redevelopment (MHR) Stage 3 project – Community Health Relocation works.

This Plan has been drafted to outline the preliminary parameters for site management practices during construction and is intended to provide sufficient information to support the REF, prior to engagement of a suitably qualified Contractor. It is noted that it is the responsibility of the Contractor to prepare the final Construction Management Plan including detailed Environmental and Site Management Plans in accordance with the REF, for approval and implementation during construction.

1.2 Construction Management Plan Components

The Plan covers the following areas of management:

- The operations of site management when undertaking the works:
 - Legislative requirements
 - Hours of construction works
 - Staging
 - Facilities
 - Public and Property Protection
- Mitigation to minimise amenity and environmental impacts:
 - Noise
 - Dust management
 - Odour control
 - Vibration management
 - Business Continuity Principles
- Traffic / pedestrian management for the duration of the work
- Waste Management:
 - Storage of dangerous goods
 - Hazardous materials management
- Services disconnections
- Communication with Stakeholders

2.Proposed Works

The Muswellbrook Hospital Redevelopment Stage 3 project focuses on consolidating all acute clinical services on campus.

The Community Health Relocation consists of internal building works focusing on the fit-out of the shell space created during the Stage 2 redevelopment specifically community health services within the existing Muswellbrook Hospital Lower Ground Floor.

The works associated with the Plan relate to the following:

- Construction of safety hoardings;
- Site Establishment and environmental controls;
- Localised demolition of existing space and relevant disconnection of services to enable the new works,
- Installation of new and connection into existing hydraulic, fire, electrical communications, security and mechanical services; and
- Construction and commissioning of the new fit-out;

2.1 Site and Locality Description

The Muswellbrook Hospital is located at Brentwood Street, Muswellbrook NSW 2333 as shown in Figure 1. The works related to this PCMP are located within the Hospital on Lower Ground Floor of the existing Hospital building which are indicated in Figure 1.



Figure 1 – Community Health Relocation

3.Key Participants/Stakeholders

Project Organisational chart:

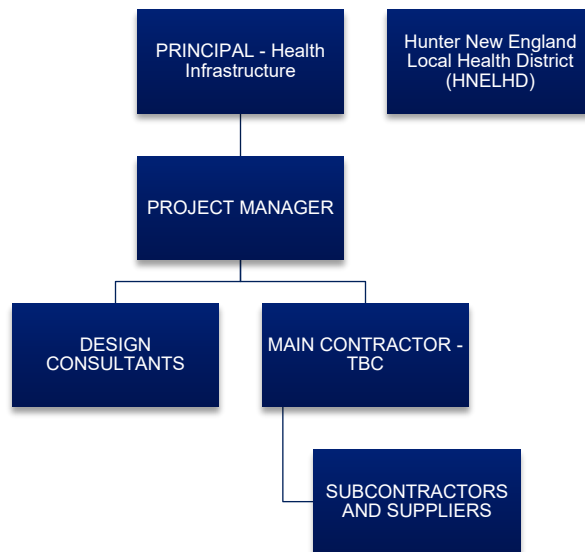


Figure 2 – Project stakeholders

4. Staging

The works will be delivered in a single milestone with no staging required.

5. Indicative Program

An indicative programme for the community health relocation scope is 6 months. The Contractor is to provide a detailed programme.

6. Consultation

Written notification will be provided as required under the REF requirements prior to commencement of any works on site. This will include local residents, Council and Hospital staff. Any planned disruptions to hospital operations will be managed through the process of Disruptive Works Notices (DWNs).

As the works will be undertaken within an existing building located on mine subsidence land, written notification to Subsidence Advisory NSW will be undertaken in accordance with the Site Environmental Planning Policy (Transport and Infrastructure) 2021.

7. Complaints Management Systems

Complaints may include any interaction with a community member or stakeholder who expresses dissatisfaction with the project, services or staff member's actions during the project.

To ensure that complaints are managed consistently the following information is required to help resolve the complaint quickly and effectively.

- Complainant contact details
- Description of complaint
- The requested remedy/action
- Due date for response
- Immediate action (if any)

All complaints are to be raised with the Project Manager and referred to NSW Health Infrastructure for entry into the Complaints Register and management of outcomes.

8. Contact Details

The Principal Contractor will identify the key points of contact that will be coordinating all on site construction related activities.

The point of contact for the on-site Project Manager will be confirmed.

9. Operations of Site Management

The works will be undertaken under the supervision of the Contractor.

All statements and proposals documented in this Plan will be reviewed at the time of contract award for the works to ensure alignment with proposed preferred methodologies and sequencing developments.

9.1 Legislative Requirements

The works will be undertaken in accordance with legislative requirements and as specified in the tender documents related to the awarding of the Main Contract.

9.2 Business continuity principles

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

Key Principles include:

- All other hospital operations will continue to operate at full capacity through a live operating hospital environment for the duration of the works. Any works shall be completed through the staging and sequencing of works in order to maintain hospital operations at all times.
- Early Notice of Disruptions – where disruptions such as noise, vibration, dust, services shutdowns, closure of pedestrian or vehicle paths/access points and other are necessary, early notice must be provided to the Principal in accordance with the Disruptive Works Notice process. The Contractor will provide minimum 3 days' notice disruption, however, shall socialize disruptions well in advance. Consultation will occur with the Principal/Muswellbrook Hospital/HNELHD and any other relevant stakeholders to confirm an acceptable time/date/methodology for disruptions. Disruptions may be required to be completed outside of normal working hours.
- Infection control – ensure the infection control of the hospital is maintained. This includes external construction works on the campus and any locations of construction within the hospital environment. The infection control of existing facilities must not be compromised by construction works.
- Provision of temporary services/measures to support disruptions (if applicable) – where major disruptions are required such as service shutdowns, temporary/change of entry points, back up of services shall be provided and agreed with the Principal/Hospital/HNELHD to facilitate the continued operations of the hospital.

- Maintain compliant access and egress pathways and if unable to do so, develop alternative pathways and the relevant documentation and notification of changes (e.g. update egress maps if fire/evacuation pathways are altered).

9.3 Hours of Construction Works

The following hours of operation are proposed for the works:

- Monday to Friday 7:00AM to 5:00PM
- Saturdays 8:00AM to 1:00PM
- Sundays and Public Holidays..... No works.

It is not envisaged that the construction works will require work to be undertaken out of normal working hours. Exceptions may be required for the delivery and removal of heavy machinery to minimise impacts on other road users.

Some works such as connecting and disconnecting services and works that are considered noisy need to be completed during certain hours to ensure minimal disruption to hospital operations. These works are to be planned in consultation with stakeholders and subject to Disruption Notice applications to ensure all aspects of the works are clearly understood by all parties to minimise disruption to critical hospital operations.

9.4 Site and Facilities

Site access is to be controlled by the Contractor at all times.

It is envisaged that the Contractor's compound and support facilities and areas shall be located within one of the proposed zones shown in Figure 2.

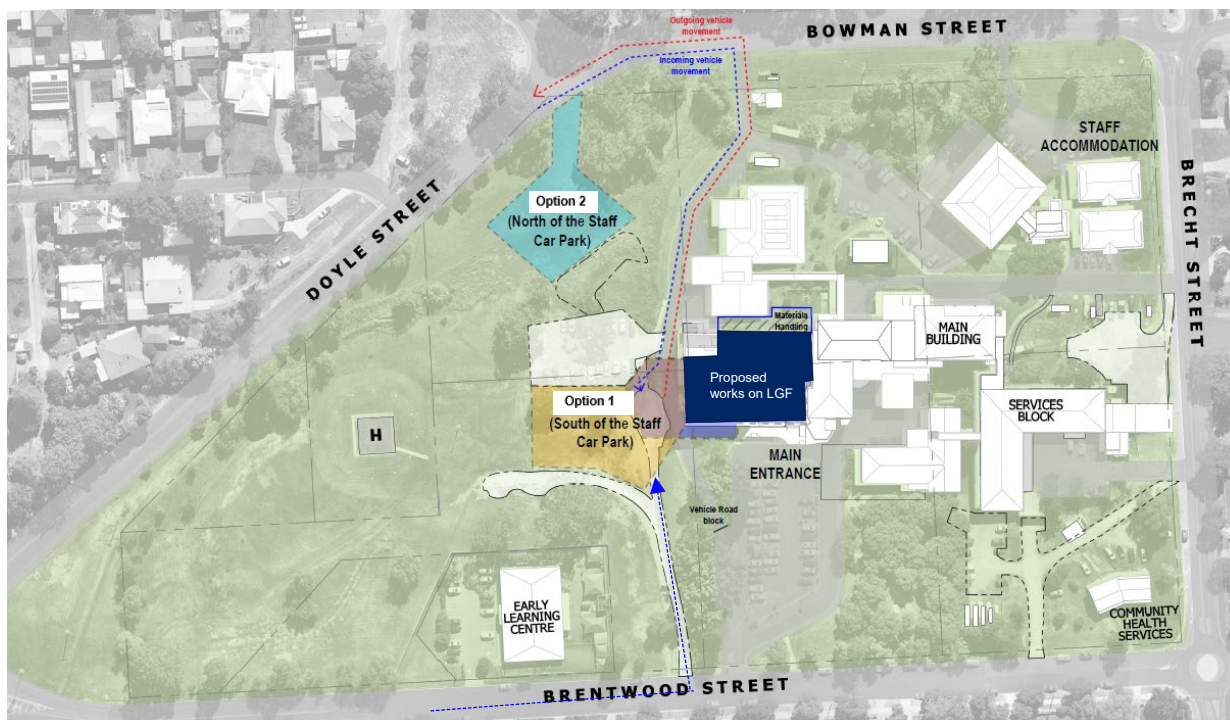


Figure 3 – Indicative Contractor Compound Options Plan and traffic movements

Final location and Site Set-up and Establishment Plan will be developed by the Contractor in consultation with stakeholders upon their engagement and prior to commencement of works. This plan will detail the location of amenities, lay down areas and temporary infrastructure needed to undertake the works.

The final materials handling strategy and worker access shall be addressed by Contractor upon their engagement and consultation with the LHD to ensure appropriate consideration of impacts on the hospital operations.

It is envisaged that worker access shall be via lower ground access adjacent to the development zone and security installed to lock out non-Contractor access whilst live construction activities are under way. In the case of an emergency, these security points would trip to not intervene with emergency egress or access by emergency services.

A Construction Traffic Management Plan will be developed by the Contractor upon their engagement. As indicated in Figure 3, it is envisaged that construction vehicles will enter and exit the site from Bowman Street, with vehicles proceeding to travel along Doyle Street, onto Brook Street and turning onto New England Highway. Another potential option could be entering and exiting from Brentwood Street.

9.5 Public and Property Protection

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

Appropriate hoarding / fencing (as specified in Australian Standards, WorkCover requirements and contract requirements) will be installed to the work areas and prior to commencement of the works. Site Hoardings will be erected around the perimeter of the site compound and support areas (eg: materials lay down zones and storage) and maintained to prevent public access. Site signage will provide 24-hour emergency contact details including contact name and telephone number. Safety related statutory signage will also be erected on the boundary of the site in accordance with WorkCover requirements.

Construction vehicle access / egress gates / signage will be installed. Site, pedestrian signage and any temporary pedestrian measures required will be installed and maintained for the duration of the Works.

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

Potential nuisance will be minimised to the occupiers of adjacent areas of the Hospital. Typically, works will be hoarded off and completely segregated from public interaction. When interacting with adjacent spaces, the Contractor will ensure strict compliance with pre agreed operational methodologies.

10. Environment and Amenity

The Contractor undertaking the works will be required to prepare a comprehensive Environmental Management Plan (EMP) prior to the issue of a Crown Certificate to ensure that all elements of the plan meet all statutory requirements as well as NSW Health Infrastructure's requirements. The environmental performance of the contractor will be monitored throughout the Works.

10.1 Incident Reporting

Ensure compliance with the notification and other requirements of the Protection of the Environment Operations Act 1997 (NSW) (POEO Act).

The Principal will be immediately notified of any pollution incident that may cause material harm to the environment, providing evidence that notification requirements of the POEO Act have been met, where applicable.

Details of any waste removed from the Site and not disposed of at a lawful facility will be reported immediately.

When requested, Contractor will provide an incident investigation report, including identification of the cause of the incident and corrective actions taken, in the form directed.

10.2 Noise and Vibration

Note: This section is to be read in conjunction with the Acoustic Report prepared by Acoustic Logic.

The Contractor will be required to provide noise monitoring during the works to comply with legislative and Planning requirements.

Management of noise emissions from the site will be consistent with requirements of the Interim Construction Noise Guideline, and relevant Australian Standards. A Construction Noise and Vibration Management Plan will be prepared which will specify performance requirements for the Contractor. No machine work will be permitted outside the normal working hours set unless appropriate written approval has been obtained through the DWN process.

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

As part of the noise mitigation treatment for the project, the Contractor will be responsible for the management, checking of compliance maintenance regimes and statutory supervision of all equipment, such as making sure all machinery involved in the works are checked for defective exhaust systems and general servicing.

With works being contained to within the existing Main Building envelope, minimised noise transmission levels are anticipated to the external surrounds and neighbouring parties.

Where noisy works shall impact adjacent hospital departments, consultation shall be conducted, and works will be undertaken under an approved Disruptive Works Notice (DWN).

The appointed Contractor will be responsible for producing detailed Dilapidation reports of the adjoining areas that may be potentially impacted in the Main Building prior to a works commencing and at completion (Pre and Post Dilapidation Report). Areas of existing dilapidation shall be reinspected by the builder prior to conclusion of works to verify that no further damage has been sustained from the nearby works.

10.3 Dust

Works shall be contained within the existing Main Building envelope. Minimal dust is anticipated to be generated by the works and shall be managed through:

- Erection of hoardings around the site works and sealing around these,
- Covering up existing vents within the construction zone
- Daily cleaning regime which shall be managed by the Contractor.

Contractor shall be responsible for developing a project specific dust prevention and management plan which shall form part of an Air Quality Management Plan for the works.

Further to above section 2.4 Facilities, the Contractor's Air Quality Management Plan shall take into consideration and address any requirements associated with AHFG Part D – Infection Prevention and Control that may triggered by the construction

10.4 Hazardous Materials (as applicable)

Prior to any construction works, a Hazardous Management Plan (HMP) will be prepared for the site in consultation with nominated project stakeholders to manage (if required) the removal or treatment of hazardous materials.

The HMP will include removal control plans for any Synthetic Mineral Fibre (SMF), Polychlorinated Biphenyl (PCB), Asbestos and removal of other hazardous materials as appropriate.

These control plans will be developed by specialist hazardous materials contractor and will detail such items as:

- The design, installation, and testing of an appropriate enclosure to prevent asbestos fibre release during construction and removal;
- Using & Maintaining RPE (Respiratory Protective Equipment);
- Management of entering & leaving the removal area;
- Decontamination of the removal work area including tools and persons;
- Transport & disposal of asbestos waste; and
- Negative pressure units / dust suppression techniques to be employed (sizing and strategy for these units will be determined by the accredited demolition/hazardous materials removal contractor and will be included within the HMP).

Specialist Class A licensed contractors will be used to remove material classified as hazardous in the HMP. These materials will be removed separately first and disposed of in accordance with EPA requirements and statutory requirements. If identified hazardous material is to be removed by a qualified Occupational Hygienist. Certification must be provided that identified hazardous material has been removed from the building.

10.5 Odour Control

In terms of the construction activity for the site, it is expected that odour problems will be minimal. All plant and machinery involved in the works will be regularly serviced and checked for exhaust emissions.

11. Traffic Management

As part of the final Construction Management Plan, the Contractor will be required to develop a Traffic and Pedestrian Management Plan for approval prior to commencement of the works.

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

- Provide safe and uninterrupted access for pedestrians and vehicles accessing the construction site, hospital site;
- Ensure maximum safety of site personnel, pedestrians, cyclists, commuters, and drivers;
- Minimise environmental nuisance and impact as a result of construction traffic;
- Ensure construction traffic does not unduly interrupt existing traffic flows on the local road network;
- Safe operation of buses and other transport services during construction in adjacent roads;
- Have no vehicles arrive at the site, without prior arrangement, outside the approved working hours;

- Timely and effective implementation of traffic management measures;
- Maintain access at all times for hospital and stakeholder's deliveries.

NSW Ambulance will access the Emergency Department (ED) 24 hours a day, seven days a week via the ambulance bays. Parking for urgent ambulances is collocated with the ED, access must be maintained at all times.

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

11.1 Construction Entry/Exit

It is proposed that construction traffic will enter and exit from Bowman Street. Deliveries to within the site will be managed through the existing road within the hospital as agreed with the Project Manager and HNELHD. Relevant management controls to be implemented as required.

During the construction works there will be minimal truck movements per day with peak movements occurring during material deliveries and weekly skip bin removals. Materials will be staged and stored in such a way to promote a clear and safe work site. At all times, materials are to be stored safely within the work area or site compound. While loading and unloading vehicles, it will be clearly stated that vehicles must not obstruct roads, driveways and paths of egress from surrounding buildings or fire protection equipment.

Detailed haulage and delivery routes are yet to be determined, however, as a general principle, heavy vehicles will be restricted to arterial and sub-arterial transport routes. Use of suburban streets will be avoided as far as practicable.

Appropriate traffic management procedures will be implemented and include consultation with Muswellbrook Shire Council.

11.2 Pedestrian Protection

Pedestrian and vehicle passage to and around the hospital will be maintained, or alternate routes determined where necessary, and be defined by clear signage.

Temporary hoarding, appropriate to the interaction between pedestrians and construction works, (as per WorkCover requirements and Australian Standards) will be constructed to prevent unauthorised access to the site. These hoardings and fences will be staged to allow access to in-use areas during the works.

11.3 Parking

It is envisioned that parking can be accommodated on site, with access off Bowman Street. The Contractor will not utilise any existing staff/visitor parking spaces currently available to the hospital, contractors and sub-contractors will be encouraged to car share and be as efficient as possible if parking cannot be fully accommodated on site.

12. Waste Management

12.1 Waste Management / Recycling Principles

Where possible any material waste generated from the works will be recycled.

A Construction Waste Management Plan will be produced by the Contractor prior to works commencing. All material that cannot be recycled or reused will be disposed to an approved landfill facility. Waste will be minimised and that generated will be separated to maximise recycling.

12.2 Storage Of Dangerous Goods

Dangerous goods (such as petrol, diesel, oxy-acetylene, oils, etc.) will be stored in a lockable compound with sufficient ventilation in accordance with relevant codes of practice and standards. Material safety data sheets on all flammable and potentially harmful liquids will be provided by the Contractor undertaking the works.

Contact Details

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