



HEALTH INFRASTRUCTURE
Finley Health Service Redevelopment
Preliminary Construction Management Plan

**FINLEY HEALTH
SERVICE
REDEVELOPMENT
PRELIMINARY
CONSTRUCTION
MANAGEMENT PLAN**

Health Infrastructure NSW

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DOCUMENT ADMINISTRATION

Revision History

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01 Draft	19 March 2024	Internal CI	Draft for Review and Comment by CI
02	26 March 2024	Urbis	Final – for REF

Introduction

Report Objective

This Preliminary Construction Management Plan (CMP) is designed to present an overview of safety, health, traffic, and environmental considerations essential to support the Review of Environmental Factors (REF) to the Department of Planning and Environment. This Preliminary CMP will support the Application (REF) for the redevelopment of Finley Health Service. The goals of this Preliminary CMP are to:

- Highlight critical environmental issues linked to the construction activities for the proposed works;
- Ensure adherence to anticipated legislative conditions and relevant regulatory mandates;
- Propose management strategies for the aforementioned objectives; and
- Advise on monitoring, auditing, and reporting mechanisms to assist the lead contractor tasked with the execution of the project.

The plan covers the following areas of management:

- The Proposed Works;
- Site Management;
- Traffic Management;
- Environmental Management;
- Hazardous Materials Management; and
- Work, Health and Safety.

The Finley Health Service Redevelopment project is currently in the Design Development stage, with the Business Case being prepared for NSW Ministry of Health. Following the Contract Documentation phase, the appointed lead contractor will develop and implement a detailed Construction Management Plan for the ongoing safe demolition, works and construction at the site.

CMP Framework:

The CMP is structured around three principal components:

- A detailed account of the construction site and planned activities;
- Overall site management strategies;
- Suggested environmental management practices during the construction phase.

Application of the CMP

This initial CMP serves to instruct project managers, contract superintendents, and contractors engaged in the project's construction phase. Upon obtaining SSDA consent, it is anticipated that the CMP will be refined and presented to the certification body before the commencement of construction activities. The completed version will detail strategies to identify, prevent, mitigate, and correct any potential environmental impacts arising during the construction phase.

Report Limitations

This preliminary Construction Management Plan has been prepared to provide a general understanding of generic construction activities for delivering buildings and infrastructure, based on the initial concepts and preliminary site requirements.

Following REF approval, the Preliminary CMP will be reviewed and revised to incorporate the finalised design, including appropriate arrangements for detailed Construction, Environmental and Construction Management Plans by the relevant Principal Contractor.

Hospital and Site Description

Finley Health Service is located within the Murrumbidgee Local Health District (MLHD), which covers 21 Local Government Areas (LGAs) spread across 125,561 square kilometres. Finley is in the Small Community Hospital peer group.

The hospital currently provides Role Delineation Level 2-3 clinical services in:

- Acute Inpatient medical and non-procedural surgical;
- Sub-acute inpatients including palliative care, maintenance care and geriatrics;
- Community Health;
- Aboriginal Health;
- Mental Health and Drug & Alcohol;
- Clinical support services; and
- Non-clinical support services.

The Finley Health Service occupies 19,748sqm (1.75 hectares) at 169-189 Loftus Street, Finley. The Hospital is located on flat land some distance from the main street of Finley.

The existing hospital was constructed in the 1960s, with 2,416sqm of space in the main hospital. The hospital has had various upgrades in the intervening years including replacement of the electrical switchboard and relocation and upgrade of the Emergency Department. The site hosts a staff accommodation block of 371sqm, which is currently occupied despite the poor condition. Community care is delivered from an adjacent building of the same age as the hospital and covers 385sqm. There are also standalone buildings for plant and mortuary. Parking is provided in various on-grade car parks. Extensive low maintenance lawns and gardens are located around the hospital building.

Figure 1: Aerial view of Finley Health Service



Proposed Works

Scope of Works

Finley Health Service currently provides 16 inpatient beds, a level 2 emergency department which was refurbished in 2018, collocated GP Practice, community health services, clinical/ non-clinical support services and staff accommodation.

The construction works are focused on building 1 and immediate surrounds identified in the image below. The Finley Redevelopment is forecast for completion in April 2026.

Figure 2: Main hospital building (building 1) and associated outbuildings

Site - Building Assets



Hospital

Age 1960's
Construction Brick / Metal roof
Condition poor



Staff Accommodation

Age 1980's
Construction Brick / Metal roof
Condition poor



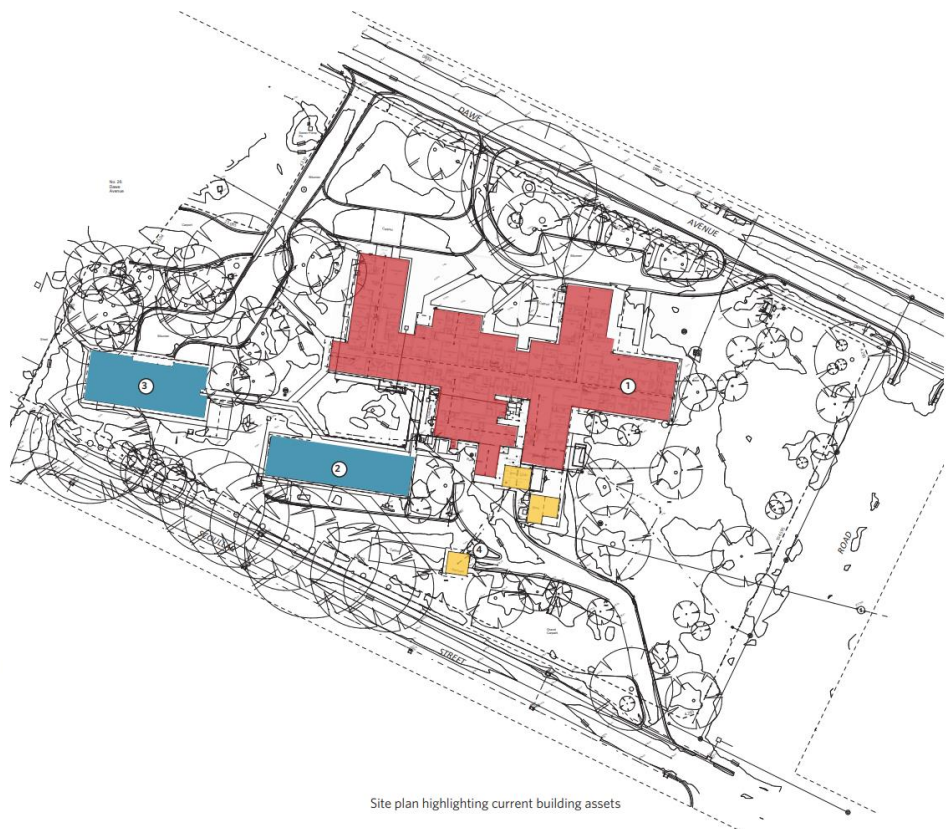
Community Health

Age 1980's
Construction Brick / Metal roof
Condition poor



Outbuildings

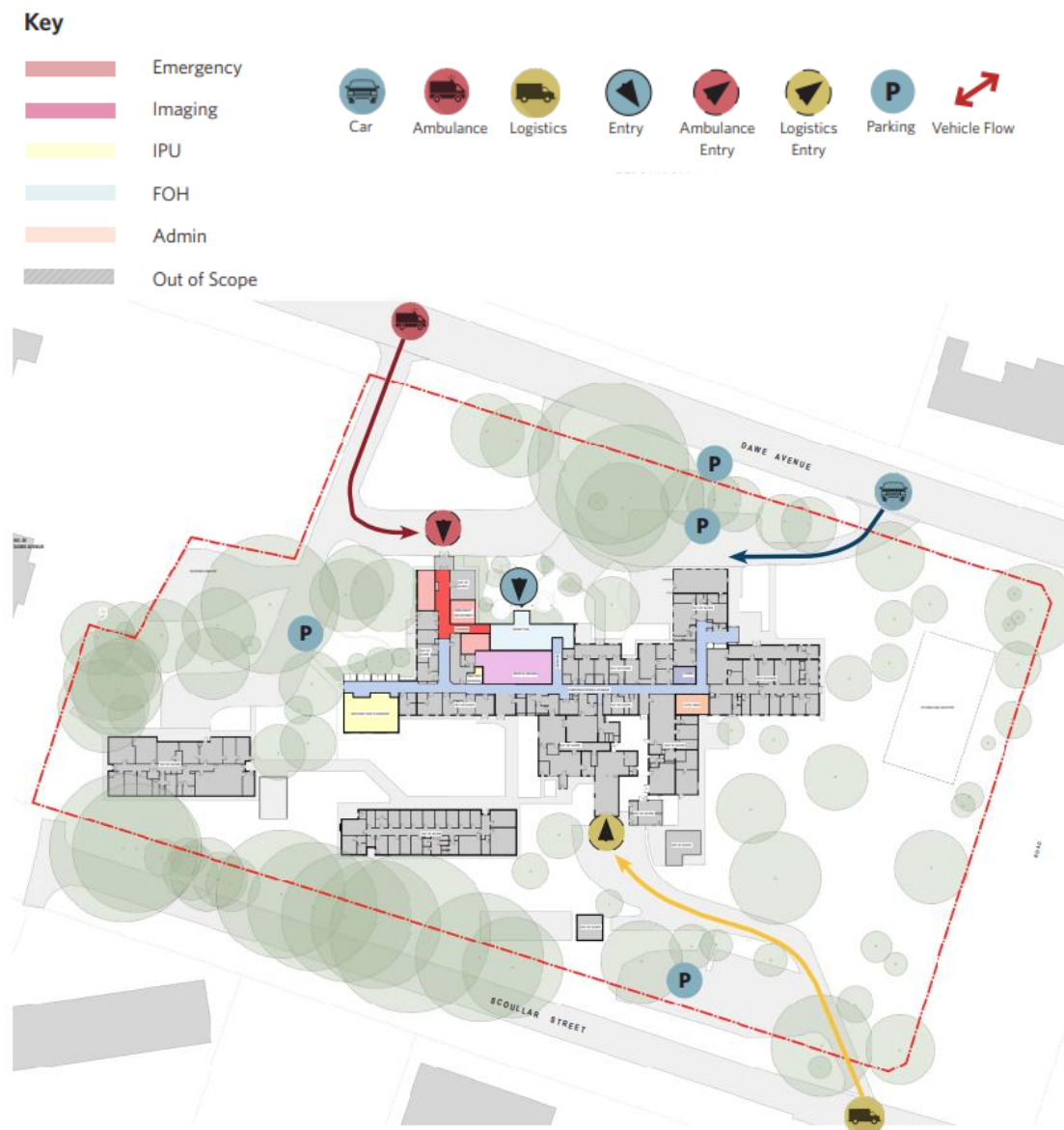
Age 1960's
Construction Brick / Metal roof
Condition poor



The project scope is illustrated in Figure 3 includes:

- a partial refurbishment of the Emergency Department;
- an IPU extension delivering 6 new beds;
- new medical imaging department (general Xray plus ultrasound);
- new front of house;
- refurbishment of the main hospital corridor and staff room;
- upgrade of essential engineering infrastructure including upgrade and expansion of the communications room;
- New roof sheeting and sarking to the hospital roof;
- landscaping to complement the main entry and IPU extension.

Figure 3: Areas in scope



The construction works are focused on building 1 and immediate surrounds identified in the image below. The Finley Redevelopment is forecast for completion in April 2026.

Background Information

The following reports have been delivered as part of the Finley Health Service Redevelopment Project. These have been considered in the design process and will inform the Construction Management Plan:

- Geotechnical Assessment;
- Hazardous Materials Report;
- Preliminary Site Investigation;
- Detailed Site Investigation;
- Traffic Management Plan; and
- Waste Management Plan.

Legislative Requirements

The works will be undertaken in accordance with Legislative Requirements, including, but not limited to:

- National Construction Code 2011 comprising the Building Code of Australia;
- Protection of the Environment Operations Act and Regulations;
- Environmentally Hazardous Materials Act 1985;
- Protection of the Environment Administration Act and Regulations;
- Work, Health and Safety Act 2011 and relevant codes of practice and standards;
- Australian Standard 2601-2001: Demolition of Structures;
- Code of Practice for Safe Removal of Asbestos (NOHSC: 2002(2005));
- Waste avoidance and Recovery Act 2001 No.58;
- Environmental Planning and Assessment Act 1979;
- Heritage Act 1997 and current amendments;
- Local Government Act 1993;
- Soil Conservation Act 1938;
- State Environmental Planning Policies;
- Resource Recovery Act 2001; and
- Relevant Design Guidance Notes.

Site Management

Hours of Work

The following usual working hours are proposed for the project:

Monday - Friday	7.00am to 6.00pm
Saturday	8.00am to 1.00pm
Sunday's and Public Holidays	No Work
By Exception	<p>The Site Manager's, Principal's and local consent authority's approval is required for work outside of the normal construction hours listed above. No person will be permitted to work on-site alone or without a senior representative of the Contractor's team present.</p> <p>Further, no works will occur outside the hours nominated above unless prior approval is granted by the local consent authority, Berrigan Shire Council and / or NSW Roads and Maritime Services (RMS).</p>

Contractor Project Management Structure

As part of the Construction Management Plan, the Principal Contractor must present a comprehensive hierarchical management structure. This entails detailing the structure and responsibilities within the project team. Additionally, it requires nominating designated personnel to oversee critical roles, ensuring clear leadership and accountability throughout the project's lifecycle.

The contractor must detail the roles and responsibilities of the contractor team in relation to Workplace Health and Safety (WHS), risk management, and adherence to Health, Safety, and Environment (HSE) legislative requirements. This encompasses the accountability of positions from the Managing Director to the Health and Safety Representative and all other project personnel. The delineation will cover ensuring compliance with WHS regulations, proactive risk identification, and mitigation strategies, underscoring a commitment to safety and regulatory adherence across the project, in line with the WHS management requirements of a Principal Contractor as per the contract.

Safety in Design

Where the contractor is responsible for aspects or the whole of the design, or design finalisation, a specific Safety in Design process will be implemented in accordance with the contractor's Risk Management procedure. A Safety in Design register will be implemented to track safety hazards identified during the review of the design documentation. The register will record measures implemented to address these risks in the design. The current Safety in Design register developed by the architect has been created in accordance with the below risk assessment register.

Figure 4: Risk assessment matrix

Likelihood	Consequence			
	Major Death or permanent disability	Significant Serious injury, lost time	Minor Medical treatment required	Insignificant Minor scratch, bruise
Very Likely Expected in most circumstances	Extreme	High	High	Medium
Likely Could occur	High	High	Medium	Medium
Unlikely Could occur but low probability	High	Medium	Medium	Low
Very Unlikely Not expected to occur	Medium	Medium	Low	Low
Risk Rating	Control priority required			
Extreme	Stop work immediately until adequate controls are implemented			
High	Implement risk controls within the same day			
Medium	Implement risk controls within 1 week			
Low	Continue to monitor			
	Hierarchy of controls			
1. Elimination	Do we really need to do the activity or include it in the design?			
2. Substitution	Can we substitute with a less hazardous activity or design element e.g. different chemical			
3. Isolation	Can we separate the person from the hazard such as operating a machine remotely.			
3. Engineering	Can we specify guards, barriers etc.			
4. Administration	Can we document procedures, safe work instructions, use signage etc.			
5. PPE	Can we use PPE			

Site Establishment

The main contractor will be responsible for all approvals and coordination required to obtain approvals. The contractor is to submit all management plans for review and approval before commencing works.

Prior to the commencement of Works on site, the main contractor will ensure that all notifications and approvals are complete, relevant insurances are in place and that all applicable standards, statutory requirements and conditions are in place, as per all legislative and contract requirements.

Contractor Site Amenities

The main Contractor will establish a site compound that will accommodate meals, ablution, toilets and change facilities for use for the duration of the project, within the defined site boundary.

Site Access Control

The main contractor will be required to erect a temporary 2.4m high fence or hoarding around the site and will be responsible for ensuring that the site may not be accessed by the public. Temporary bollards, road and pedestrian barriers with signage will be erected where works impede on areas external to the site. The main contractor will be required to ensure pedestrian safety. All works are to be undertaken in accordance with the public protection measures as required in the Australian Standards.

The Principal Contractor will maintain a site entry register requiring all visitors to sign-in upon entry. All visitors are required to wear an identification "visitor" badge, be adequately dressed and wear appropriate PPE at all times while on site.

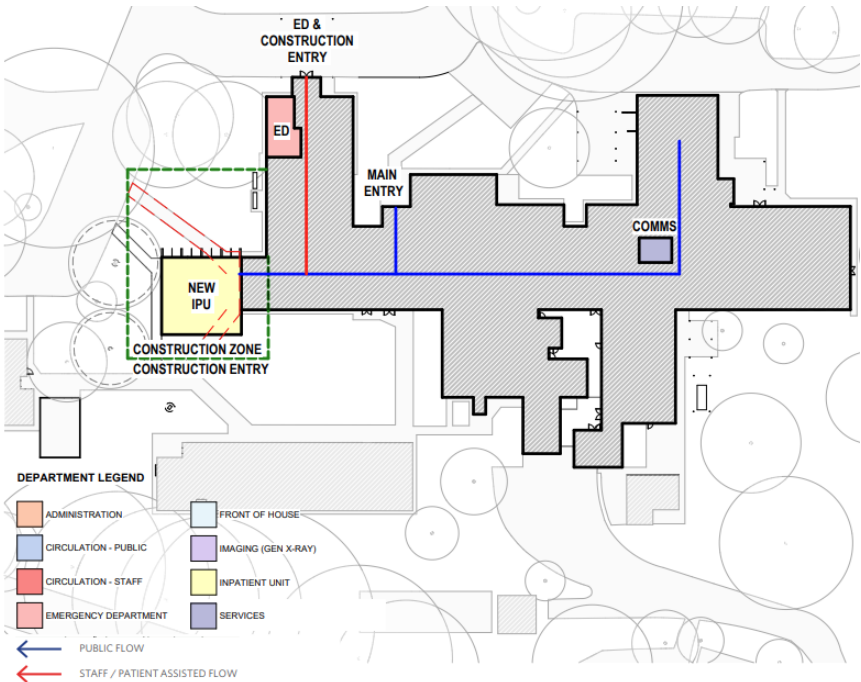
The site compound is to be locked outside of working hours to restrict public / unauthorised personnel accessing the site. Security should be provided through patrols and CCTV where required.

Staging

The staging, methodology and delivery (including all services utilities and infrastructure upgrades) of the project will be in line with the Project Construction Program which is to be confirmed. The demolition works are mainly concerned with the removal of internal load bearing and non-load bearing walls within the FOH area. At present, the Schematic Design methodology presents the current staging for the construction Works. The staging is an ongoing area of development.

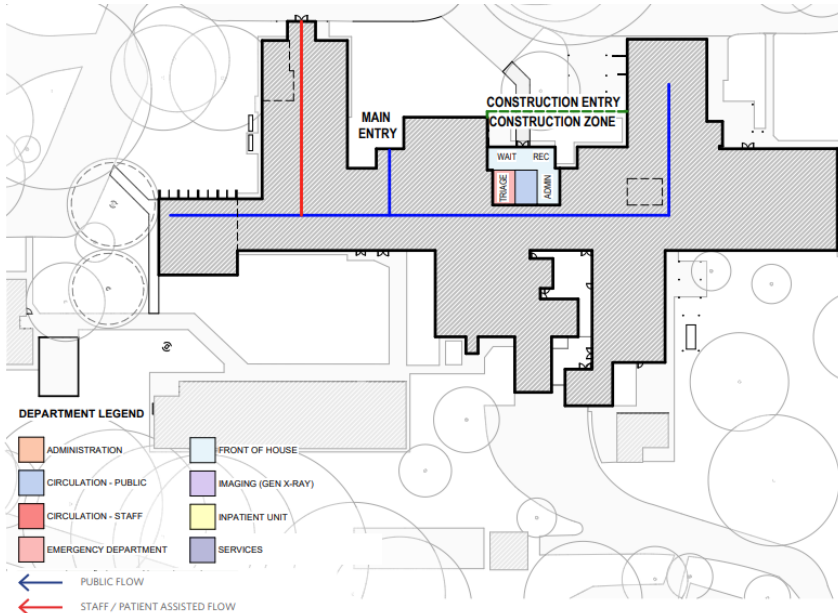
Stage 1: IPU Extension, Comms Room & Part ED Alteration

Construct new IPU extension. IPU Ward 3 to serve as a construction buffer to the existing IPU and will be offline during this stage. The IPU extension & Ward 3 becomes operational following Stage 1 completion. Replan portion of existing ED. Upgrade and expansion of existing Comms Room.



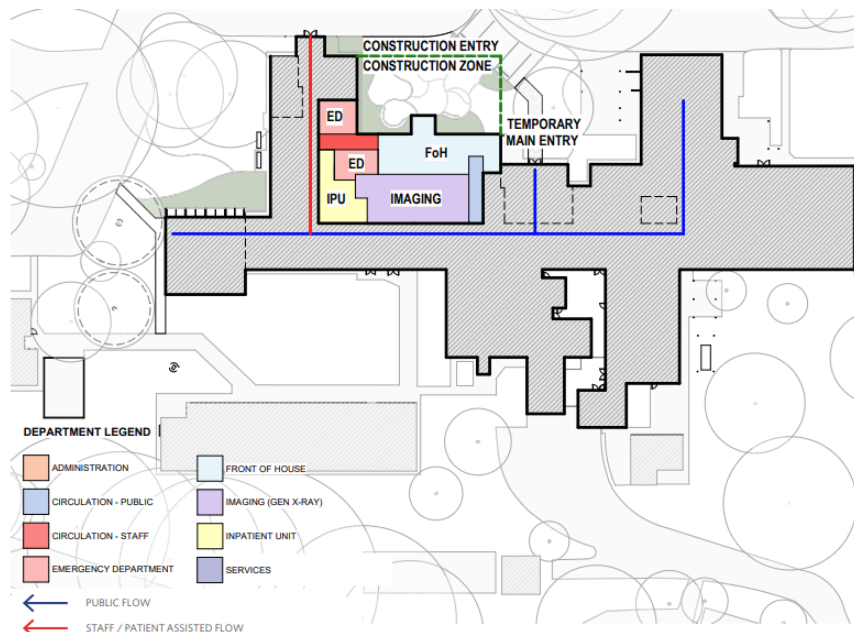
Stage 2: Fit out of Temporary Main Entry

With the new IPU extension & Ward 3 operating, the existing IPU Veranda and Ward 12, 13 & 14 will be fitted out to temporarily accommodate the Main Entry, FoH, ED Triage and Administration whilst the new Main Entry is under construction during Stage 3. A temporary footpath to the existing carpark will be required and is intended to be absorbed into the landscaping during Stage 3 once it is no longer required.



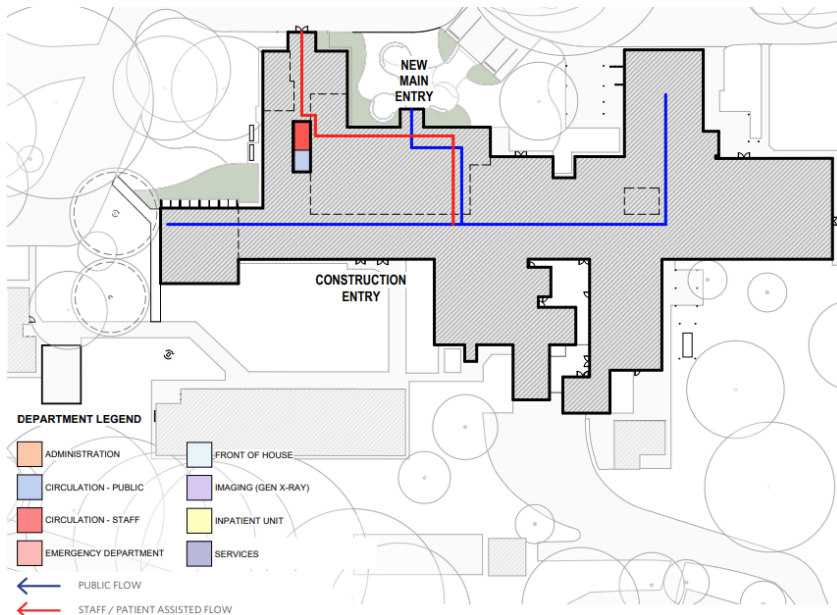
Stage 3: New FoH, Imaging, Part ED/ IPU Alteration & Landscaping

Replan to portion of existing ED and IPU to create new corridor link to connect new FoH to existing ED. Works to ED/IPU is to be prioritised during this stage to minimise disruption to the hospital operation. Construct new Main Entry, FoH & MI. Followed by completion of landscaping works



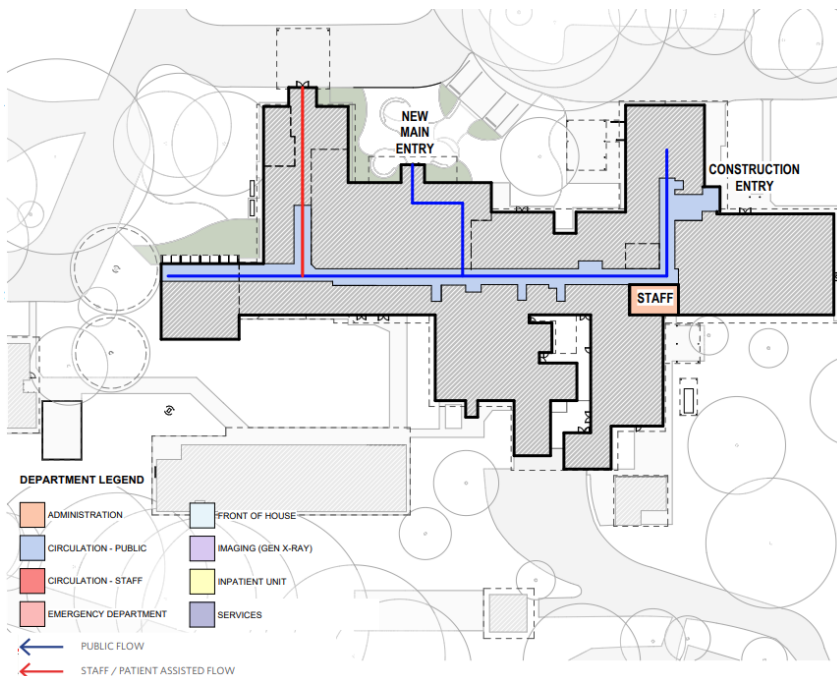
Stage 4: ED/IPU Corridor Doors

ED/IPU corridor door to be relocated to allow completion of the new link between FoH and existing ED. Temporary access to ED from rest of hospital to be via the ED Treatment Room. Construction access via existing Nurse Manager Office to minimise disruption to hospital



Stage 5: Corridor / Staff Area Light Refurbishment & Roof Replacement

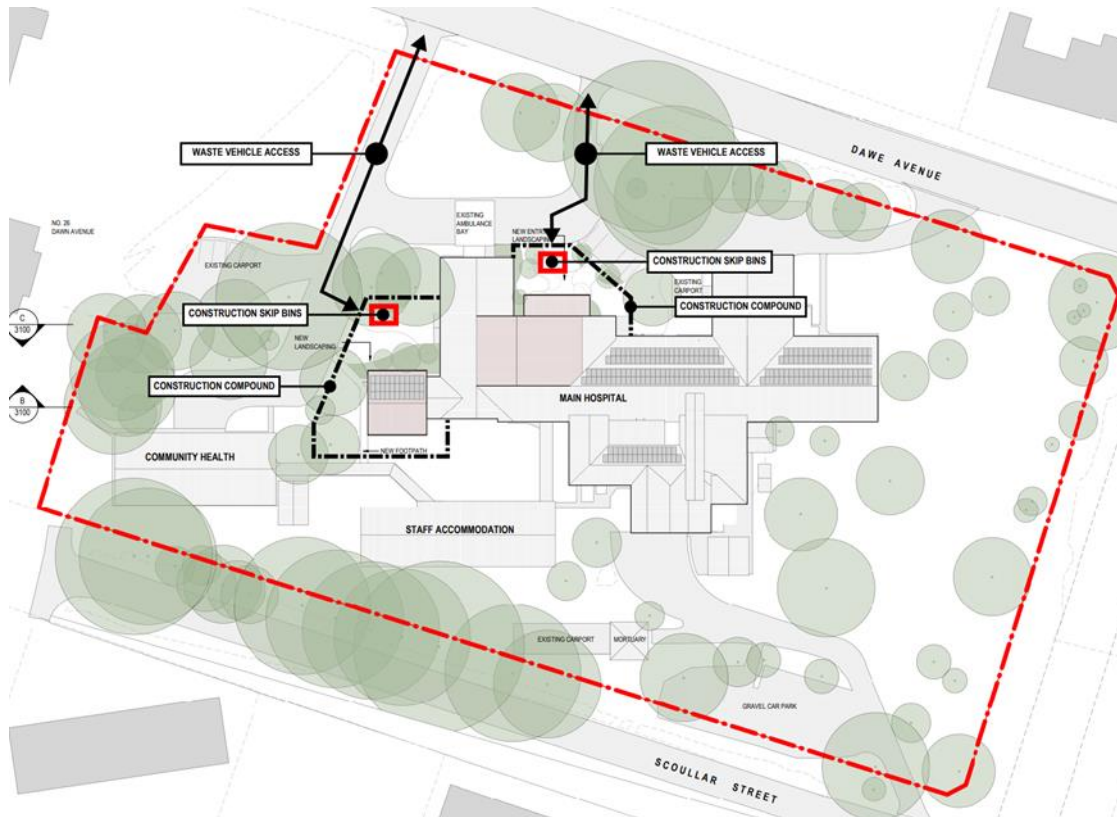
Complete light upgrade of public corridor and Staff Room. Replace existing roof to remainder of hospital, to be co-ordinated with the contractor and users.



Site compounds

Two site compounds are proposed to service the needs of the staging: one compound to service the IPU extension; a second compound to service the Front of House / Medical Imaging upgrades. Finalisation of the extent of the compounds will be in conjunction with the Project Manager, local service manager and Contractor.

Figure 5: Proposed construction compounds



Traffic Management

Construction Traffic Management Plan

A Construction Traffic Management Plan (CTMP) will be a key deliverable of the appointed main Contractor.

It is noted that NSW Ambulance Service will continue to require access to the Emergency Department throughout the construction phase. Unobstructed Ambulance access will be a priority for traffic management.

Trade parking will be available along Dawe Avenue, Scoullar Street and Donaldson Street. Construction workers will be advised not to use hospital parking but will have time limited access to designated loading bays.

Figure 6: Trade parking options



Construction Traffic Routes and Site Access

In preliminary discussions it has been identified that truck access will be via the Dawe Street entries which will deliver trucks to the proposed compounds according to where the works are being undertaken (see Figure 5). The management of traffic through the Dawe Street entrance will be a daily activity for the contractor.

Construction vehicles will not be permitted to utilise the roadway through the ED Ambulance off-load / parking bay.

It is anticipated that the contractor will utilise the trade parking as noted above.

There is not likely to be highly disruptive (e.g. cranes and concrete truck) access required, but if necessary, disruption notices and necessary traffic controls will be put into place.

Environmental Management

The Principal Contractor undertaking the works will be required to provide an Environmental Management Plan (EMP) to ensure that all elements of the plan meet statutory requirements as well as NSW Health requirements. At a minimum this plan will address each of the areas below. The environmental performance of the Contractor will be monitored throughout the works and formally reported on a monthly basis.

Noise and Vibration

Noise from any area of the site will not exceed the limits in the Noise Control Act 1975. No machine will operate outside the normal working hours described unless prior approval has been granted by the local consent authority.

Demolition and excavation works shall comply with Australian Standard 2436-1981 "Guide to Noise Control on Construction, Maintenance and Demolition Sites". As part of the noise mitigation strategy for the project, all trucks, excavating equipment and machinery will be inspected for defective or operationally noisy exhaust systems.

Prior to commencement to works, liaison will take place with occupants from neighbouring residences and occupants of the hospital.

Dust Mitigation

A dust prevention strategy will be detailed in the Construction Management Plan and agreed by the project stakeholders. Dust control, minimisation and mitigation will occur at the source of dust and where dust occurs. Transfer of dust to the operational hospital and neighbours will be prevented.

Odour Control

Any potential odour associated with the works will be identified and addressed in the Construction Management Plan.

Plant and machinery involved in the works will be serviced regularly and checked for emissions. The contractor will be required to implement safe works methods for the use and containment of solvent-based paints, adhesives and sealers.

Storage of Dangerous Goods

Works will require the use of flammable fuels such as petrol, diesel and oxyacetylene etc. Storage of such items will be in a secure, lockable compound with sufficient ventilation and appropriate signage in accordance with relevant codes of practice and standards. Material Safety Data Sheets for all flammable or potentially harmful liquids or gases will be provided by the contractor prior to works commencing on site.

If required, the contractor will be responsible for applying and obtaining any licences associated with the storage and transportation of dangerous goods.

Fire Safety

During construction activities within the operational hospital, the contractor will ensure all fire egress pathways are maintained at all times. It is expected that the contractor plans and coordinates with the facility, and with fire egress at the forefront, to maintain a safe hospital environment.

The contractor must continuously consult and plan their construction activities as needed to align with the operational requirements of the facility. This includes the implementation of clear signage, barriers, and alternative routes as necessary, to guide traffic and maintain a safe environment for all hospital occupants – to be detailed in a Disruption Notice submission to the facility for approval.

Stormwater Run-off and Sediment Control

Drainage of surface water run-off will be allowed to flow along the existing contours of the site surface water infrastructure which includes kerbs, gutters, gully-pits and stormwater run-off drains.

The site areas associated with the project will be continually cleaned of rubble to minimise possible sediment flow during rainfall periods. Stormwater kerbs and drainage lines will have sediment controls in place. Stormwater grate

inlets surrounding the demolition areas will be covered with a selected geotextile fabric to allow water to enter the drains and regain sediment generated by the works.

Sediment controls such as sediment fences, stabilised site access and inlet filters will be detailed in the Construction Management Plan and will be regularly checked, particularly during heavy rainfall periods.

Complaint Procedure

A procedure for dealing with complaints regarding dust, noise, odours or any other environmental nuisance will be established in the Construction Management Plan. A register of complaints will be maintained in the site office and the Project Management Consultant will be notified of all new complaints. The register will be made available to the consultant Project Manager and the Client.

Waste Management / Recycling Principles

The Contractor will be committed to achieving compliance with the Environmental Protection (EPA) guidelines and compliance with relevant sections of the Waste Management Plan. The contractor will implement forms of waste management and waste minimisation, to the standards outlined in the preliminary Waste Management Plan, appended to the Review of Environmental Factors assessment, and final Waste Management Plan provided by the Contractor.

Prior to commencement the contractor will be required to confirm the geotechnical investigations completed to date and to complete additional investigation if information is found to be inadequate or incomplete. All recommendations for treatment of hazardous wastes must be followed as per the relevant section of this document.

All waste materials generated from the works will be recycled or repurposed where possible, with the exception of soft demolition materials and hazardous materials. The Construction Management Plan will identify types of waste generated and the intended methods of recycle, reuse or disposal.

Hazardous Materials Management

Identification

The Contractor will be required to complete a full hazardous materials assessment prior to any works commencing on site, over and above what has been completed to date. The management and removal from site of any/all hazardous material will be undertaken in accordance with the relevant Australian Standards.

Any potential hazardous material that is discovered that has not been previously identified must be immediately reported to agree on a strategy to minimise exposure through safe containment or removal.

Air Monitoring

In accordance with all codes and standards, air monitoring will be undertaken by a registered occupational hygienist during asbestos removal.

The daily monitoring results will be assessed by a hygienist and the records will be provided to the Project Manager.

Removal

Removal of any hazardous materials will be carried out by a licensed subcontractor supervised by both the Contractor and a registered occupational hygienist. All works will occur and comply within the requirements of the relevant codes and standards. Required asbestos certification will be provided to the Project Manager prior to commencement of further works in the affected area.

Disposal

Hazardous materials will be sealed and loaded prior to transport in accordance with the relevant codes and standards. All asbestos materials will be bagged and placed in plastic lined disposal containers and will be disposed at a registered EPA landfill with full accountability and traceability of transport and disposal monitoring, enforced and monitored throughout the works contract. The Contractor will provide and maintain certificates and verification documents at all times.

Disruption Management

Disruption Notices will be supplied for any planned works that will cause disruption to the infrastructure or operations of the health service e.g. electricity cut overs, site investigations etc. A Disruption Notice will be provided at a minimum of two weeks prior to the planned disruption, in a format that has been agreed with the client in collaboration with the project manager. MLHD's communications team will be involved in dissemination of information regarding the disruption to the affected parties.

A communications tool and protocol will be deployed to all Contractor, MLHD and project management personnel involved in the execution of the disruption to enable real time management.

Work Health and Safety

As part of the Construction Management Plan (CMP) the Principal Contractor will develop specific management plans to meet their contractual and legal obligations as well as detailing specific control measure of known risks. The Contractor will appoint a specific site WHS Supervisor and all construction personnel will be required to hold the Construction Industry Induction certification.

The Contractor will:

- Coordinate the updating and implementation of the Construction Management Plan;
- Coordinate the monitoring and inspection of requirements within the CMP;
- Ensure personnel are trained and aware of their obligations - including one nominated GC21 expert aware of the WHS requirements of the Principal Contractor;
- Ensure that subcontractors are aware of their safety and environmental obligations;
- Oversee other day to day activities required by the CMP; and
- Host weekly WHS meetings/walkthroughs with the Principal (or Principal's representative).

Project WHS Management

It is imperative that the safety and well-being of all the project stakeholders, the general public and visitors to the site, the client, consultants, subcontractors and all site staff is addressed in planning, design and management decisions.

It is the Contractor's responsibility to ensure that all persons carrying out the nominated work have the relevant training including Work Health and Safety (WHS) Induction Training. The minimum requirements are that workers complete:

- Industry Induction (White Card);
- Client Induction; and
- Site/Client Specific WHS induction.

All personnel and visitors to site will need to complete an induction prior to commencing on site. A record of all inducted personnel will be retained and updated on-site, including all relevant training certification. White Card training must be completed and a copy of the White Card kept. Workers cannot commence on site until these are complete, and a record provided by the contractor.

Site specific Safe Work Method Statements will be submitted, with an accompanying Method of Procedure, for all medium-high risk works. The Disruption Notice requires the contractor to flag all required risks associated with the works, and rate them in accordance with the risk assessment table accompanying the Disruption Notice.

Emergency Management

An emergency response plan will be developed, with events categorised as those that can be dealt with locally and those that would require a full site evacuation.

First aid assistance must be provided on site during construction hours of operation, with a communication system to be established in each area of the site. There must be a nominated first aid officer on site at all times, and a designated point, such as a shed for first aid treatment. All first aid materials (including fire extinguishers) are to be provided by the contractor.

All first aid incidents are to be formally reported to the Principal ASAP as required by the Contract.

Emergency Exits and Evacuation

Emergency exits will be provided from the building under construction and must remain unobstructed at all times. Emergency stairs and evacuation routes will be communicated to all personnel through the on-site induction prior to commencing any works on site. Changes to evacuation procedures and routes will be communicated to all personnel through daily pre-start meetings or weekly toolbox talks. Attendance of the Contractor's personnel will be recorded at these meetings and submitted to the Principal's Authorised Personnel (PAP).

Random emergency evacuation drills will also be undertaken to train and test the workforce during the unlikely event of an emergency evacuation. During an emergency evacuation, all personnel will be accounted for at the muster point by the contractor's safety representative which will include a reconciliation against the record of personnel on site.

Emergency Vehicle Access

Emergency vehicle access will be provided to the site and the safety coordinator or site supervisor will be responsible for escorting any emergency crew to the First Aid shed or point of emergency. The traffic controllers will be responsible for maintaining clear access for emergency vehicles.

Site Cleanliness and Rubbish Removal

Rubbish will be removed from the construction site into skip bins, or relevant recycling receptacle. The disposal subcontractor will recycle materials and aim to reduce waste going to landfill wherever possible. A record of types and volumes of waste will be recorded and managed in line with the Waste Management Plan (Appendix B for reporting). Management of waste will occur on an ongoing basis to ensure that workers have safe access to the site compound. The contractor is to provide bins for construction waste, and avoid using facility bins for the duration of the project.

Amenities

Site amenities will be provided that allow for a clean and safe break out space for site workers including access to a refrigerator, microwave, clean drinking water out of the elements. Ablution facilities will be provided with handwash facilities and rubbish bins that will be emptied regularly. Appropriate signage will be provided to promote personal and site wide hygiene.

Site Emergency Contacts

An emergency contact list and escalation process will be established prior to works commencing.

A site board will display, as a minimum, the key site contacts and after-hours contacts relating to the site. Information regarding site safety will be displayed along the site boundary and throughout the site.

Communication and Stakeholder Engagement

The Contractor and Project Manager will have a key role in maintaining relationships with project stakeholders to ensure that the project objectives are met with minimal disruption to the operation hospital, adjoining owners, businesses, authorities and service providers the project will interact with.

The contractor will develop, implement and manage a Stakeholder Communication plan that will provide a framework for Stakeholder engagement during construction works.

The Contractor and Project Manager will work with the MLHD Communications team to detail proposed works and strategies to minimise any impact of access, amenity, staging and program as well as the impact on surrounding facilities and services. In particular, the contractor will communicate with the proposed traffic management controls to be implemented and which will be updated throughout the project to reflect current works.