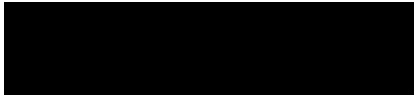




ACT
Government

ACT Health

Ref FOI19-10



Dear 

Freedom of Information (FOI) Request FOI

I refer to your revised application received by ACT Health on 27 March 2019 in which you sought access to information under the *Freedom of Information Act 2016* (the Act).

In your application you have requested:

"I would like copies of documents related to development of health infrastructure on Belconnen, Gungahlin and North Canberra (scope of Northside infrastructure FOI 2018):

- *Briefs provided to the Minister for Health and Minister for Mental Health related to significant infrastructure projects on the Northside of Canberra including Belconnen, Gungahlin and North Canberra dated from January 2018 until the present day. These briefs may include, but are not limited to, General Briefs, Question Time Briefs, Estimates Briefs and Annual Report Briefs.*
- *Documents provided to the Director-General of ACT Health related to significant infrastructure projects on the Northside of Canberra including Belconnen, Gungahlin and North Canberra dated from January 2018 to the current day. This includes correspondence with Ministers, senior executives of ACT Health, Canberra Health Services and other directorates about infrastructure projects on the Northside excluding routine correspondence such as the venue of a meeting for example.*
- *Documents related to meetings of the ACT Health Business Support and Infrastructure Committee related to significant infrastructure projects on the Northside of Canberra including Belconnen, Gungahlin and North Canberra dated between January 2018 and today. This includes agenda, minutes and other related documents excluding purely administrative material such as correspondence about the venue of the next meeting.*
- *I would be grateful if you could exclude duplicate copies of documents."*

On 27 March you defined Significant Infrastructure as meeting any of the following conditions:

It was an election commitment in the previous election or is in the Labor-Greens agreement;

The Minister, ACT Health or Canberra Health Services has issued a media release or held a media event to celebrate a milestone event ie, opening, announcing or turning a sod on the site;

It is in the Budget Papers for ACT Health or Canberra Health Services;

It is mentioned in the Annual Report of ACT Health or Canberra Health Services;

The Minister for Health or the Minister for Mental Health have been briefed on the project;

It adds significantly to the capacity of Canberra Health Services to deliver health services; ie more inpatient beds.

ACT Health Directorate was required to provide a decision on your access application by 21 May 2019.

Decision on access

Searches were completed for relevant documents and 29 documents were identified that fall within the scope of your request.

I have included as Attachment A to this decision the schedule of relevant documents. This provides a description of each document and the access decision for each of those documents.

I have decided to grant full access to 13 documents and partial access to 13 documents. I have decided to grant access, under section 50 of the Act, to copies of documents with deletions applied to information that I consider would be contrary to the public interest to disclose.

I have decided to refuse access to 3 documents as I consider the documents to be contrary to the public interest information under schedule 1 of the Act.

My access decisions are detailed further in the following statement of reasons and the documents released to you are provided as Attachment B to this letter.

In reaching my access decision, I have taken the following into account:

- The FOI Act
- The contents of the documents that fall within the scope of your request;
- The views of relevant third parties; and
- The *Human Rights Act 2004*

My reasons for deciding not to grant access to the identified documents and components of these documents are as follows:

Document 7, 8 and 25 of the identified documents are entirely composed of information that is considered to be contrary to the public interest to disclose under schedule 1.6(1)(d) of the Act. The information if disclosed would reveal the deliberations of Cabinet.

Documents 3, 5, 15, 21, 23 and 26 of the identified documents contain information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in section 17 of the Act as the information contained in these folios is personal information about individuals.

Public Interest Factors Favouring Disclosure

I have identified that there are no factors favouring disclosure of this information under Schedule 2, section 2.1.

Public Interest Factors Favouring Non-Disclosure

The following factors were considered relevant in favour of the non-disclosure of the documents:

- Schedule 2.2(a)(ii) - prejudice the protection of an individual's right to privacy or any other right under the Human Rights ACT 2004.

On balance, the information identified is contrary to the public interest and I have decided not to disclose this information.

Documents 9, 10 and 11 of the identified documents contain information that is considered to be contrary to the public interest to disclose under schedule 1.6(1)(d) of the Act. The information if disclosed would reveal the deliberations of Cabinet. They also contain information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in section 17 of the Act as the information contained in these folios is personal information about individuals.

Public Interest Factors Favouring Disclosure

I have identified that there are no factors favouring disclosure of this information under Schedule 2, section 2.1.

Public Interest Factors Favouring Non-Disclosure

The following factors were considered relevant in favour of the non-disclosure of the documents:

- Schedule 2.2(a)(ii) - prejudice the protection of an individual's right to privacy or any other right under the Human Rights ACT 2004.

On balance, the information identified is contrary to the public interest and I have decided not to disclose this information.

Documents 14 of the identified documents contains information that is considered to be contrary to the public interest to disclose under schedule 1.6(1)(d) of the Act. The information if disclosed would reveal the deliberations of Cabinet. This document also contains information that is not within the scope of the request and has been redacted.

Documents 20 and 25 of the identified documents are composed of, or contain information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in section 17 of the Act. These documents also contain information the disclosure of which would or could reasonably be expected to prejudice the business affairs of an agency or person.

Public Interest Factors Favouring Disclosure

The following factors were considered relevant in favour of the disclosure of the documents:

- Schedule 2.1(a)(i) the release of the document could be expected to promote open discussion of public affairs and enhance the government's accountability;
- Schedule 2.1(a) (ii), the release of the documents could contribute to positive and informed debate on important issues or matters of public interest.

Public Interest Factors Favouring Non-Disclosure

The following factors were considered relevant in favour of the non-disclosure of the documents:

- Schedule 2.2 (a) (xi) -Prejudice the business affairs of an agency or person.

On balance, the information identified is contrary to the public interest and I have decided not to disclose this information.

Charges

Processing charges are not applicable to this request.

Online publishing – disclosure log

Under section 28 of the Act, ACT Health maintains an online record of access applications called a disclosure log. Your original access application, my decision and documents released to you in response to your access application will be published in the ACT Health disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman
GPO Box 442
CANBERRA ACT 2601
Via email: ACTFOI@ombudsman.gov.au.

ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal
Level 4, 1 Moore St
GPO Box 370
Canberra City ACT 2601
Telephone: (02) 6207 1740
<http://www.acat.act.gov.au/>

If you have any queries concerning ACT Health's processing of your request, or would like further information, please contact the FOI Coordinator on 5124 9829 or email HealthFOI@act.gov.au.

Yours sincerely



Liz Lopa
Executive Group Manager
Strategic Infrastructure Division

May 2019

FREEDOM OF INFORMATION REQUEST SCHEDULE

Please be aware that under the *Freedom of Information Act 2016*, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: <http://www.health.act.gov.au/public-information/consumers/freedom-information>

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
<p>[REDACTED]</p>	<p>I would like copies of documents related to development of health infrastructure in Belconnen, Gungahlin and North Canberra.</p> <ul style="list-style-type: none"> • Briefs provided to the Minister for Health and Minister for Mental Health related to significant infrastructure projects on the northside of Canberra including Belconnen, Gungahlin and North Canberra dated from January 2018 until the present day. These briefs may include, but are not limited to, General Briefs, Question Time Briefs, Estimates Briefs and Annual Report Briefs. • Documents provided to the Director-General of ACT Health related to significant infrastructure projects on the northside of Canberra including Belconnen, Gungahlin and North Canberra dated from January 2018 to the current day. This includes correspondence with Ministers, senior executives of ACT Health, Canberra Health Services and other directorates about 	<p>FOI19/10</p>

	<p>infrastructure projects on the northside excluding routine correspondence such as the venue of a meeting for example.</p> <ul style="list-style-type: none"> • Documents related to meetings of the ACT Health Business Support and Infrastructure Committee related to significant infrastructure projects on the northside of Canberra including Belconnen, Gungahlin and North Canberra dated between January 2018 and today. This includes agenda, minutes and other related documents excluding purely administrative material such as correspondence about the venue of the next meeting. 	
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Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1.	1 - 14	Meeting Paper 3.C – MH Supported accommodation	6 Feb 2018	Partial Release	Schedule 1.6(1)(a) – Cabinet Information	YES
2.	15 - 17	Meeting Paper 3.D – Gungahlin Nurse led W.I.C.	6 Feb 2018	Full Release		YES
3.	18 - 30	Arrangements Min Brief – Calvary upgrades	13 Feb 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy	YES
4.	31 - 33	Arrangements Min Brief – Gungahlin WIC sod turning	22 Feb 2018	Full Release		YES
5.	34 - 45	Arrangements Min Brief – Gungahlin WIC sod turning	1 Mar 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy	YES

6.	46	Min Brief – Clare Holland House Expansion Project Agreement	22 Mar 2018	Full Release		YES
7.	57 - 58	Email – Inner North Community Health	18 Apr 2018	Not Released	Schedule 1.6(1)(a) – Cabinet Information	No
8.	59 - 64	Email – Inner North Community Health	18 Apr 2018	Not Released	Schedule 1.6(1)(a) – Cabinet Information	No
9.	65 -71	Email – Review of Min Brief	26 Apr 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy Schedule 1.6(1)(a) – Cabinet Information	YES
10.	72 - 79	Email – Review of Min Brief	26 Apr 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy Schedule 1.6(1)(a) – Cabinet Information	YES
11.	80 - 87	Email – Review of Min Brief	27 Apr 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy Schedule 1.6(1)(a) – Cabinet Information	YES
12.	88 - 91	Min Brief – WIC update	10 May 2018	Full Release		YES
13.	92 - 101	Email – Min Brief - UCPH	14 May 2018	Full Release		YES
14.	102 - 109	Email - Min Briefs for clearance	23 May 2018	Partial Release	Not within scope of the request	YES

					Schedule 1.6(1)(a) – Cabinet Information	
15.	110 - 131	Arrangements Min Brief – UCH opening	7 June 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy	YES
16.	132 - 192	UCH final project documentation for endorsement	6 July 2018	Full Release		YES
17.	193 - 197	DDG Minute - UCH Car park practical completion and handover	6 July 2018	Full Release		YES
18.	198 - 200	ED Minute - Step up step down and Brian Hennessey refurbishment.	9 July 2018	Full Release		YES
19.	201 - 207	Email – agenda item 5.1 submission Calvary Meeting	18 July 2018	Full Release		YES
20.	208 - 225	DG Minute – Clare Holland House	18 July 2018	Partial Release	Schedule 2.2 (a) (xi) - Prejudice the business affairs of an agency or person.	YES
21.	226 - 240	Arrangements Min Brief – Calvary Maternity refurbishment.	24 July 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy	YES
22.	241 - 242	Assembly brief – Opening of Gungahlin WIC	Sept 2018	Full Release		YES
23.	243 - 251	Arrangements Min Brief – Opening of Gungahlin WIC	3 Sept 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy	YES

24.	252 - 258	Min Brief - Building Services Program	21 Sept 2018	Not Released	Schedule 1.6(1)(a) – Cabinet Information	No
25.	259 - 288	Min Brief – Meeting with Snow foundation – Clare Holland House	17 Sept 2018	Partial Release	Schedule 2.2 (a) (xi) - Prejudice the business affairs of an agency or person.	YES
26.	289 - 298	Arrangements Min Brief – Announcement Clare Holland House	17 Sept 2018	Partial Release	Schedule 2.2 (a) (ii) - Individual right to privacy	YES
27.	299 - 300	Assembly brief – Opening of Gungahlin WIC	Oct 2018	Full Release		YES
28.	301 - 302	Annual Report Brief - Opening of Gungahlin WIC	Oct 2018	Full Release		YES
29.	303 - 304	Annual Report Brief - Opening of UCH	Oct 2018	Full Release		YES
Total No of Docs						
29						



**Submission to
ACT Health
IOWG and BSIEC**

Meeting Date: 6 February 2018

Agenda Item No: 3.C

Subject: Design Brief - Mental Health Supported Accommodation

Source: Mental Health Justice Health Alcohol and Drug Service (MHJHADS)

Purpose/Comments: For approval

ACT Health Submission Paper

Subject: Design Brief Supported Accommodation

Officer Responsible: Amanda Slater

Committee Member: Colm Mooney

Date: 31 January 2018

Title: Design Brief - Supported Accommodation

Purpose To seek your endorsement of the *Design Brief - Mental Health Supported Accommodation*

Background

Mental Health Supported Accommodation provides permanent residential accommodation with 24 hour support to enable people experiencing complex, severe and persistent mental illness with significant functional impairment and/or risks associated with complex needs to live successfully in our community. These people cannot live independently as they live with the residual symptoms of treatment resistant schizophrenia or a psychotic disorder that impacts on their ability to function.

This accommodation will provide long term or permanent tenancy for people to live out their life. Twenty four hour care and support will be provided by a non-government organisation.

Mental Health Justice Health Alcohol and Drug Service (MHJAADS) is working in collaboration with Housing ACT, Community Services Directorate (CSD), to provide three fit for purpose 5-6 bedroom houses, each for 4-5 residents and one community agency support worker. These houses will increase access for people to MHJHADS inpatient services by providing appropriate support accommodation for long-stay patients. .

Issues

The design brief for this project is detailed in [Attachment A](#).

The design brief was reviewed and endorsed by the MHJHADS Steering Committee on the 13 December 2017.

The estimated cost of each house is \$1.0M

Subject to budget funding availability three off houses will be funded based on this design to be delivered by ACT Housing.

A community agency will head-lease each property through Housing ACT and the agency will receive funding to support the residents through their individual National Disability Insurance Agency support packages. Even considering the initial capital outlay for the houses, these beds will be more cost-effective than acute hospital beds with no ongoing costs for ACT Health.

Financial



Recommendations

That the:

- The Business Support Infrastructure Executive Committee (BSIEC) note the information contained within this submission.
- BSIEC approve the *Design Brief – Mental Health Supported Accommodation*



DESIGN BRIEF *SUPPORTED ACCOMODATION*

ACT HEALTH

ACT GOVERNMENT HEALTH DIRECTORATE

DATE JANUARY 2018

Document Version History

Rev No	Issue Date	Issued By	Issued To	Reason for Issue
Draft v0.1	October	HSPU	MHJHADS	First draft
Draft v0.2	November	HSPU	MHJHADS	Feedback incorporated
Draft v0.3	December	HSPU	MHJHDAS	Feedback
Draft v0.4	December	HSPU	Internal review	Feedback

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1. INTRODUCTION

The role of this Design Brief is to clearly define the activities and functions that need to occur in a particular setting.

It is not the role of the Brief to design the space. It is the role of the architect to design the space in response to the articulated requirements.

The Brief consolidates a great quantity of information regarding the Model of Care and describes the physical environment that must be provided for the model to be enacted. The detail required in the Brief must clearly and succinctly relate to elements of physical design. Excessive clinical and operational information and detail is not required and does not add value for the purposes of the Brief.

Prior to developing a Design Brief the following is required and is referred to in the Design Brief:

- Model of Care for the service / department / unit.
- Activity of the service / department / unit (i.e. resident numbers, occasions of service, bed numbers, etc.)

2. DESCRIPTION OF THE UNIT

Mental Health Supported Accommodation will provide 24 hour supported permanent residential accommodation to enable individuals experiencing complex, severe and persistent mental illness with significant functional impairment and/or risks associated with complex needs to live successfully in our community. This is a residential facility, not a health facility. Residents require up to 24 hours support or supervision of their activities of daily living including attending appointments, taking medication, attending to personal hygiene, shopping, preparing meals, eating and cleaning up after meals, keeping their bedroom clean and tidy, as well as attending to general domestic cleaning on a roster basis.

This accommodation will provide long term/permanent tenancy options for residents and will provide a home for residents to age in place. It will not operate as an inpatient or out patient service, but as a place for residents to be supported to live safely in our community, where psychosocial and clinical supports can be tailored to residents needs and provided through onsite or in-reach services.

3. SCOPE OF SERVICE

Residents using this service cannot live independently as they live with the residual symptoms of treatment resistant mental illness that impacts on their ability to function (e.g. living with schizophrenia or a psychotic disorder). Residents have complex, severe and persistent symptoms with significant functional impairment and/or risks associated with complex needs. They have limited insight and functional capacity. The level of psycho social disability makes these residents extremely vulnerable. Many have significant behavioural, co-morbidity and risk issues which need to be

managed with individually tailored supports. Some residents may have a physical disability, require assistance with activities of daily living or may be incontinent. As resident age, issues relating to ageing will also need to be managed (i.e. reduced mobility).

Care will be delivered in a group house/ residential environment. Residents will be accommodated in single bedrooms that are large enough to accommodate a small sitting area to enable 'quiet time'. They will require access to all amenities to enable them to operate independently.

The houses are to be a 5-6 bedroom house which will accommodate 4-5 residents and one NGO carer in each. The proposed house and future houses will be distributed across Canberra, with ready access to services and amenities.

The housing will be constructed by ACT Housing and Community Services, a division of the Community Services Directorate (CSD), and then Head leased to a community organisation facilitated by Housing ACT.

Resident will be able to self-discharge from this accommodation at their own volition, or when the accommodation is no longer appropriate however turnover of places will be low and resident will be able to age in place.

4. MODEL OF CARE SUMMARY

A collaborative approach involving Mental Health Justice Health Alcohol Drug Service (MHJHADS), Housing & Community Services ACT, and Community Sector partners is sought to provide a viable solution to supported accommodation requirement. This project will provide the accommodation required, MHJHADS will provide the clinical care, Housing ACT will undertake tenancy management and building maintenance and Community Sector partners will head lease the properties and coordinate and provide the supports required, funded by residents' National Disability Insurance Agency (NDIA) packages.

MHJHADS will manage referrals and admissions to the supported accommodation facility. Residents will be offered accommodation as determined by a residents' needs in a location that would suit, as much as is possible, their preference, age, gender, possible risk issues and behavioural needs. The successful transition of these resident to live in the community will be dependent on the development and delivery of a comprehensive NDIS plan, along with a detailed integrated plan around that supports the residents in their transition to their new home. In addition residents must be on the priority housing list.

5. WORKFORCE

There are no additional ACT Health workforce requirement. Residents will be seen by members of the existing mental health clinical services as per business as usual. The community organisation will provide staff funded through NDIS packages to provide 24 assistance with activities of daily living.

6. OPERATIONAL DESCRIPTION AND ASSOCIATED DESIGN REQUIREMENTS

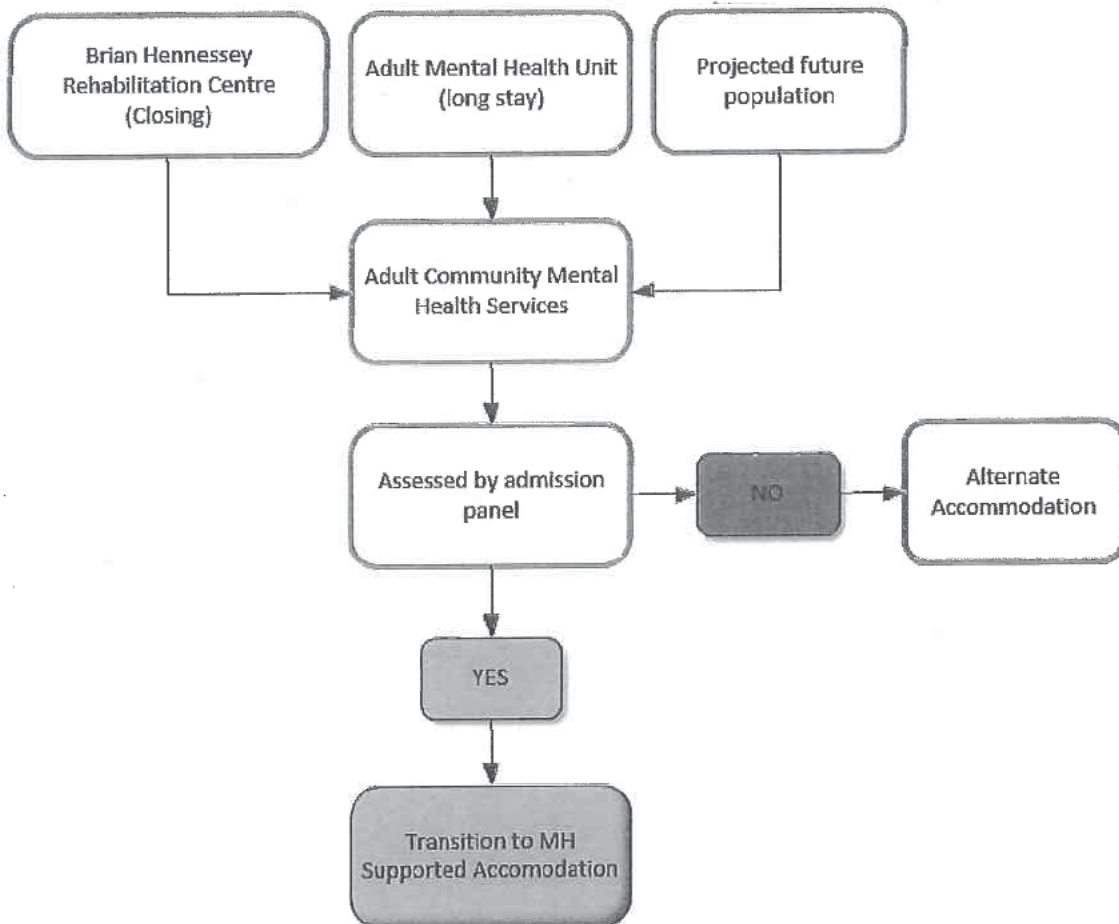
6.1. ACCESS

6.1.1. Admission to Accommodation

Admission will be via a referral from MHJHADS. An initial cohort of residents is anticipated specifically from Brian Hennessey Rehabilitation Centre as well as resident from the AMHU who do not have appropriate long term accommodation in the community.

Referral to the Supported Accommodation will be initiated by Mental Health services within MHJHADS. MHJHADS will have the gate keeper role as to who is appropriate for this accommodation.

Figure 1 – Access pathway to Supported Accommodation



6.1.2. Access points for staff, residents and visitors

As per any residential house there will be a front door and back door with an alternate third egress point if possible. Residents will have house keys and be able to come and go as they are able/as is appropriate.

Rules around visitors and after-hour access will be developed and managed by the NGO with some input from MHJHADS.

6.2. CLINICAL SUPPORT

6.2.1. Psychosocial support

Support services as detailed in residents' NDIS Packages will be managed by a nominated NDIS Support Coordinator, who would then broker the services required from NDIS registered services providers. Psychosocial support and interaction will be provided by the NGO carer, including overnight as required, as well as support around medication management and activities of daily living including: prompting of personal hygiene, assistance in meal preparation, shopping and budgeting, attending appointments and social activities.

6.2.2. Clinical support

Mental health intervention and treatment will be undertaken through in-reach Community Mental Health services. The level of care will be commensurate with the clinical presentation of the resident. Moderate to High intensity multidisciplinary intervention and treatment care will be provided by the relevant clinical service.

As part of a resident's clinical care, regular reviews will be undertaken as per MHJHADS Standard Operating Procedures. More frequent reviews will be completed according to the resident's clinical presentation.

Primary Care will be provided through a resident's General Practitioner in the community.

Treatment or therapies will occur on an outpatient basis in the community. Facilities within the houses for therapies are not required, however a study, in addition to communal space, is required for use as a private interview room.

6.2.3. Medical imaging and pathology

Any medical imaging or pathology requirements will be met through the residents General Practitioner via external imaging or pathology providers.

6.2.4. Pharmacy

Generally medication will be prescribed by the GP, although other medications may be prescribed by their treating psychiatrist. Medication administration model will depend on the residents' capacity. Some residents will not have the capacity to remember to take medication, or are at risk of overdosing. These resident's medication will be stored securely in a staff only area and managed by the onsite staff.

Other residents will have the capacity to safely self-administer medications. These residents will store their medications in their room in a lockable drawer and may be supplied in either a Webster pack or commercial packaging, once again dependant on the residents capacity.

As part of the resident's therapeutic journey, residents requiring injections will be encouraged to walk/catch public transport to their local community health centre for administration of that

medication. There may be a requirement to administer injections on site and these will be administered in the resident's bedroom.

6.3. NON-CLINICAL SUPPORT

6.3.1. Housing

Tenancy support will be provided by Housing & Community Services ACT.

6.3.2. Administration

Clinical in-reach staff will not require administrative space within the accommodation, but rather will write notes upon return to their home base. Staff will require access to Wi-Fi within the house. NGO staff will require access to administrative base in the staff bedroom which will include a computer and phone

6.3.3. Environmental and supply services

The NGO will be responsible for the purchase of cleaning products and toilet paper.

Household cleaning will be the responsibility of the residents and will be a roster based, task process. Residents will be responsible for the cleaning of their bedrooms.

6.3.4. Food

Upon becoming the service provider for a supported accommodation house, the NGO will initially stock the kitchen with "start-up supplies". Following this, residents will be responsible for their own food shopping and preparation, with support of the community organisation staff member as required. Each resident will require designated storage of their own goods including refrigeration and storage for dry goods. Staff prepare and eat their meals in the communal kitchen/dining area. Occasionally there are group meals shared between all residents and staff, which is paid for by contributions from both the residents and the NGO

6.3.5. Rest rooms, seating, kitchenettes / beverage bays, staff rooms

The accommodation is to include a residential type kitchen. Residents will be responsible for cooking and cleaning after themselves after using the facilities.

There are no specific visitor amenities required.

Spaces, for example lounge, living, family and/or dining rooms will be required in a configuration that enables separation of residents and the ability of groups to meet with privacy. There will be two living spaces, one where communal activities can occur, and an alternate quiet area.

The laundry is to be residential in style and include washing machine, dryer, laundry tub with bench space and storage of linen/laundry supplies.

One of the bedrooms will be required as an overnight room for staff. The room will require a sofa bed or single bed, desk space and mini bar fridge.

6.4. SECURITY REQUIREMENTS

Security will be as per a standard residential facility. Residents will have the ability to lock their bedroom doors, in order to maintain their privacy, however rooms must be able to be opened by staff should there be a need.

Each bedroom is also to have a lockable drawer for the residents' items and for medication storage.

The staff office/bedroom, which includes medication storage, will also be secure and have a door to outside as a dual egress

7. SPECIFIC DESIGN REQUIREMENTS

7.1. OVERARCHING DESIGN REQUIREMENTS

7.1.1. General

- 5 bedrooms each with ensuite for initial house. 5-6 bedroom for further house.
- Designed to provide gender separation if possible
- Class C Accessibility – -all common area
-2 bedrooms with associated ensuites
- Further bedrooms/ensuites Class C adaptable
- Staff overnight room to have workstation, storage for medication/stores and files
- Small sitting area attached to each bedroom, or space within the bedroom to enable quiet time
- Have internal finishes which are home like and non-institutional and easy to maintain
- Be single level and easily accessible
- Be wheel chair accessible
- Access to private, fenced outdoor areas, including space for gardening
- The lounge areas are to be separate and offer acoustic privacy
- Open plan kitchen/dining space
- Parking for NGO and clinical staff
- The study is to a room, not an open nook with dual egress

7.1.2. ICT

Residents will require access to IT and communications technologies for internet, Wi-Fi and phone use.

Shared lounge space will require TV (s) and access to games consoles, and facilities for music playing.

8. SCHEDULE OF ACCOMMODATION

Rooms Required	Number	Notes
Bedroom with ensuite	5	Large enough to accommodate sitting area
Lounge area	2	Separated
Kitchen/dining	1	Open plan
Laundry	1	Large enough for washing/dryer/basin

Study	1	To be used as interview room,
Outdoor space		
Storage cupboard		Start-up supplies

9. FUNCTIONAL RELATIONSHIPS

The accommodation will be located in close proximity to public transport, shops and community health centres.

10. ABBREVIATIONS

ACMHS	Adult Community Mental Health Service
ACOS	Assertive Community and Outreach Service
AMC	Alexander Maconochie Centre
AMHU	Adult Mental Health Unit
ARITT	Acute Response and Intensive Treatment Team
BHRC	Brian Hennessey Rehabilitation Centre
CRT	Community Recovery Team
MH	Mental Health
MHJHADS	Mental Health Justice Health and Alcohol & Drug Service
MoC	Model of Care
NGO	Non-Government Organisation
NDIA	National Disability Insurance Agency
NDIS	National Disability Insurance Scheme



ACT HEALTH

ACT GOVERNMENT HEALTH DIRECTORATE

DATE



Submission to ACT Health BSIEC

Meeting Date: 6 February 2018

Agenda Item No: 3.D

Subject: Gungahlin Nurse-Led Walk In Centre – Advanced Preliminary Sketch Plan Design

Source: Project Manager, Irene Yong

Purpose/Comments:

- Provide endorsement of the proposed advanced Preliminary Sketch Plan (PSP) design
- Note the project financial status
- Note that construction will proceed once the Development Application is approved.

ACT HEALTH INFRASTRUCTURE OPERATIONS WORKING GROUP

Title: Gungahlin Nurse-Led Walk In Centre - Advanced Preliminary Sketch Plan Design

Purpose

To seek endorsement for the proposed advanced Preliminary Sketch Plan (PSP) design.

To note the project financial status.

To note that construction will proceed once the Development Application is approved.

Background

ACT Health has requested Infrastructure Finance and Capital Works (IFCW) to undertake the design and construction of the Gungahlin Nurse-Led Walk In Centre. Manteena Commercial Pty Ltd was engaged as the Contractor in late September 2017.

Issues

The project has achieved the following milestones:

- Development Application (DA) was lodged on 23 November 2017;
- The DA public notification period closed on 24 January 2018. No representations were received by the Environment and Planning Directorate during the public consultation period;
- DA approval is anticipated by 28 February 2018;
- The ACT Health Planning Unit has reviewed and accepted the advanced PSP design submission;
- The advanced PSP design submission has been accepted by the User Group and Project Executive Sponsor;
- An Independent Commissioning Agent (ICA) has been engaged to review the advanced PSP design, Documentation Readiness (DR) and construction Shop Drawings. ICA reports feedback will be incorporated into the design and construction documentation;
- The advanced PSP design submission has been accepted by ACT Health Facility Management (ACTH FM). ACTH FM will be provided the opportunity to review DR and construction Shop Drawings. ACTH FM will receive copy of ICA reports; and
- Note that in response to a query previously from Business Support and Infrastructure Executive Committee (BSIEC) (refer decision register 17/045), the Accessible toilet door width is designed for wheelchair/ stretcher access.

Financial

The project budget is \$3.425 million including allocation for the Weston Creek Community Health facility and project contingencies.

A revised cost plan was prepared by the Master Cost Planner based on the endorsed advanced PSP design. Savings have been made as additional parking is no longer required as part of the project. These savings have offset the cost deficit shown in the previous meeting.

The revised cost plan indicates that the existing budget allocation is sufficient for the Gungahlin Nurse-Led Walk In Centre project to progress into construction phase. The available project contingency at construction commencement is \$100,000 and is acceptable to meet the risk profile of the project at this stage.

Recommendations

That you:

- Provide endorsement of the proposed advanced PSP design.
- Noted the financial status of the project.
- Noted that construction will proceed once the Development Application is approved.



MINISTERIAL BRIEF

Health Directorate

UNCLASSIFIED

To: Minister for Health and Wellbeing

Tracking No.: MIN18/156

13/2/18

From: Karen Doran, Deputy Director-General, Lynton Norris, Deputy Director-General

CC: Nicole Feely, Director-General

Subject: Public Announcement - Upgrades Calvary Public Hospital Bruce

Critical Date: 16 February 2018

Critical Reason: The public announcement is scheduled for this day

- DG .../.../...
- DDG 12/02/18

Purpose

To provide you with details of the arrangements for the public announcement of the upgrades to maternity at Calvary Public Hospital Bruce.

Recommendations

That you:

1. Note the information contained in this brief and attachments.

Noted / Please Discuss

Meegan Fitzharris MLA

6,2,18

Minister's Office Feedback

UNCLASSIFIED

UNCLASSIFIED

Background

1. Birth numbers at Calvary Public Hospital have decreased over the past couple of years with more mothers and families choosing the Centenary Hospital for Women and Children (CHWC) as their birth venue. This trend is causing pressure on the Centenary Hospital, while birthing capacity exists at Calvary.
2. Anecdotally, the difference in amenity and patient accommodation between the two public hospitals is a major determinant of the patients and family choice of birth setting. The Centenary Hospital provides all mothers with a single room in a contemporary environment. Calvary retains mainly two or four patients shared rooms in a slightly tired but entirely safe and comfortable setting.
3. The ACT Government has confirmed capital funding of \$2.6 million for the imminent commencement of the reconfiguration, expansion and refurbishment of the Calvary Maternity Unit, with work required to be completed before 30 June 2018. This project was a 2016 election commitment by the Barr Government.

Issues

4. Across Calvary, CHWC and the community women in the ACT enjoy access to consistently high quality maternity services. There is a great deal of collaboration between the services and they share a focus on mother and baby centered care and safe birthing practices that meet the birthing preferences of mothers.
5. CHWC provides various fetal, neo-natal and paediatric specialist services. Complicated and high-risk pregnancies and births are referred to CHWC.
6. Expectant mothers in the ACT can choose their birthing location. There are no 'area' conditions or restrictions on choosing Calvary or CHWC. The variations in accommodation and amenity between the two services are widely known and possibly over-promoted by primary carer providers and parenting social media networks.
7. Additionally, transport and access to both hospitals is straightforward and this means that people are not heavily penalised by choosing to birth away from their nearer hospital. Personal anecdotes and patient stories of satisfying birth experiences at Calvary and information provided to Canberra GPs, have not addressed the trend of people preferring to birth at CHWC. This trend is ultimately unsustainable.
8. The refurbishment, reconfiguration and expansion of Calvary's Maternity Unit will resolve much of the perceived disparity between amenity and accommodation standards at the two facilities.
9. Calvary's Maternity Unit will expand from 15 beds to 18 beds. The adjacent Birth Suite rooms will also be refreshed during the project.
10. Equally importantly, the refurbishment project provides a tangible 'change' or 'upgrade' that is a powerful platform for the ACT Government, ACT Health and Calvary to communicate a refreshed and simple message of comparable experiences for mothers birthing from July 2018.
11. In fact, not only would it be an offer of a comparable experience but it could imply a novel experience – "be one of the first to birth in Calvary's refurbished Maternity Unit – Fabulous care in a fresh setting".

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12. The refurbishment project is a clear achievement of the ACT Government's undertaking to provide high quality and accessible services for all Canberrans.
13. During the four month project the Maternity Unit will be relocated to the 6th Level of the Xavier Building. This will ensure work can be undertaken without any impact on patients and visitors.

Financial Implications

14. The ACT Government is providing capital funding of \$2.6 million for the project. The project has no impact on future staffing or other costs.

Consultation

Internal

15. Extensive internal consultation has taken place to ensure the refurbishment achieves the capacity, features and quality required; that it can be completed on time and within budget; and that maternity services can continue safely while the project work is undertaken.

Cross Directorate

16. At Executive level and through formal and informal clinical networks, extensive cross directorate attention has been given to sharing public maternity activity across the two sites.

External

17. Primary care providers have been informed of the excellent Maternity services at both hospitals. The upgrade of Calvary's accommodation will enable this important group to unreservedly refer mothers to Calvary's Public Maternity Services.

Benefits/Sensitivities

18. Patient choice and equitable access to health services are expectations in the community. Their choice is affected by many things including the perceived standard of accommodation, amenity and hospitality. The refurbishment of Calvary's Maternity Unit will ensure both services offer like experiences.

Media Implications

19. There are two favourable considerations in respect of media activity around the funding of the refurbishment project. The first is the investment by the Territory being a tangible demonstration that it values Calvary as a network service provider.
20. The second and most immediately important consideration is that the funding and project announcement provides you, ACT Health and Calvary with the opportunity to influence the birthing plans and decisions for all mothers (and especially from North Canberra) who are giving birth after 30 June 2018.
21. Actively promoted and targeting both primary care providers and mothers-to-be, an immediate and sustainable adjustment to birthing activity between the two services could be achieved.
22. A potentially adverse media reaction may come from strong advocates for the Birth Centre services at Calvary and CHWC.

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23. A public announcement to inform the community of the upgrades to the maternity unit at Calvary has been scheduled for 11.30am on Friday, 16 February 2018. An Arrangements Brief, including speaking notes, has been prepared (Attachment A).
24. A Media Alert (Attachment B) and Media Release (Attachment C) have been prepared.

Signatory Name:

Phone:

Action Officer:

Phone:

Attachments

Attachment	Title
Attachment A	Arrangements Brief/Speaking Notes
Attachment B	Media Alert
Attachment C	Media Release

UNCLASSIFIED



Meegan Fitzharris MLA

Member for Yerrabi

Minister for Health and Wellbeing

Minister for Transport and City Services

Minister for Higher Education, Training and Research

Attachment A: ARRANGEMENTS BRIEF

FUNCTION:	Announcement of Refurbishment of Calvary Maternity Unit
VENUE:	Ward 3S, Level 3 Marian Building, Calvary Public Hospital Bruce. Mary Potter Circuit, Bruce
HOST:	Name: Barbara Reid, CEO, Calvary Public Hospital Mobile: [REDACTED]
DAY:	Friday
DATE:	16 February 2018
TIME:	11.30am -12.15pm
TIME COMMITMENT:	45 minutes
CATERING:	Not applicable
DRESS CODE:	Business
YOUR ROLE:	Address media and take questions from media representatives
WHERE TO PARK:	A designated parking space will be available in the Calvary Executive Parking area. See map attached
WHO WILL MEET YOU:	Barbara Reid will meet you at the parking space and escort you to the location of the media event
ADVISOR ATTENDING:	
AUDIENCE:	Media, Calvary Executive and Senior Managers, Calvary Midwives and Nurses who work in the Maternity Unit
VIPs:	Nil
PAST INVOLVEMENT:	You are familiar with the Calvary Maternity Unit and have performed a number of media activities at Calvary in the past
SENSITIVITIES/OTHER INFORMATION:	<ul style="list-style-type: none"> There is a significant variance in the maternity accommodation and amenity of the Centenary Hospital and Calvary Public. This has led to an imbalance in birthing activity with the Centenary Hospital experiencing some pressure and Calvary having capacity. The upgrade of Calvary to a similar standard is a critical tactic in realigning birthing activity across the public hospitals

AUSTRALIAN CAPITAL TERRITORY LEGISLATIVE ASSEMBLY

London Circuit, Canberra ACT 2601, Australia GPO Box 1020, Canberra ACT 2601, Australia
Phone +61 2 6205 0051 Email fitzharris@act.gov.au



@MeeganFitzMLA



MeeganFitzharrisMLA

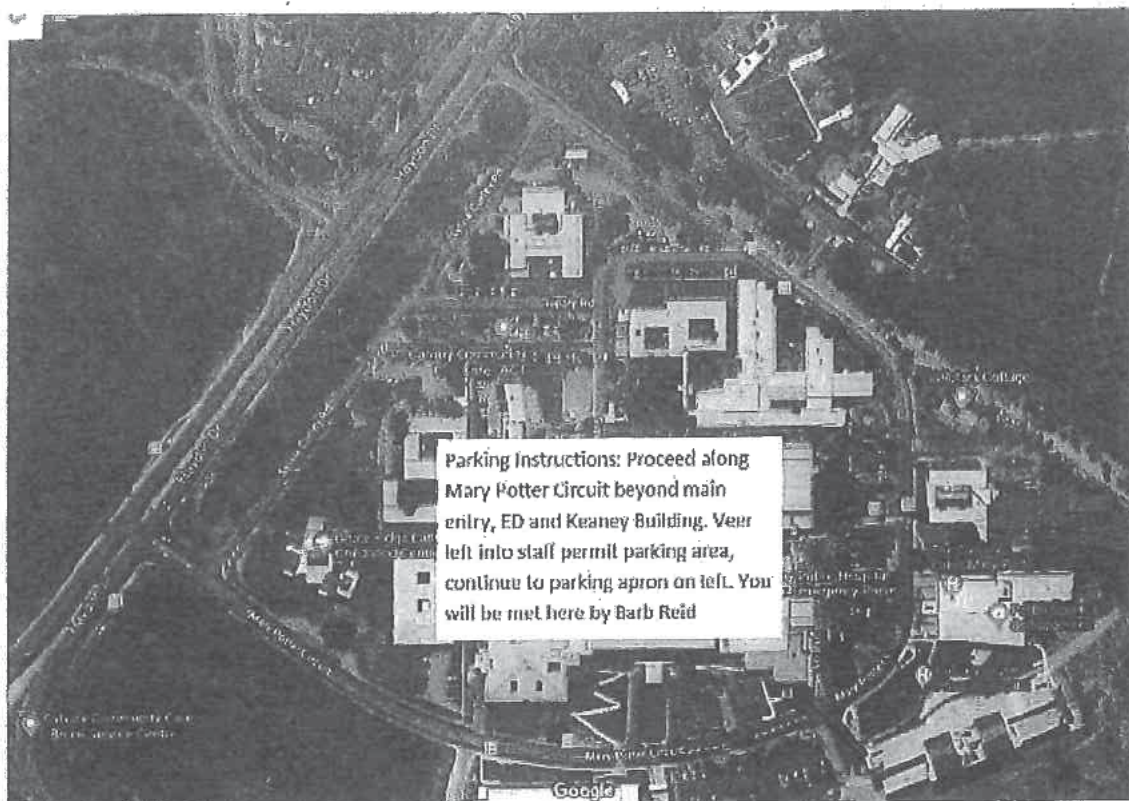
Meegan Fitzharris MLA – Arrangements Brief

	<ul style="list-style-type: none"> As currently occurs now, mothers with more complex pregnancies and births will be referred to Canberra Hospital to receive the appropriate antenatal, foetal medicine and paediatric care for mum and child.
ORDER OF CEREMONIES	<p>11.35am: Barbara Reid welcomes you and media to Calvary</p> <p>11.36am: Minister addresses the media followed by Minister and media being walked through the current facility with Project Manager Denise Holm</p> <p>11.50am: Minister invites questions and performs interviews as requested</p> <p>12.05pm: Media activity concludes, Minister escorted to her vehicle for departure</p> <p>12.10pm: Minister departs</p>
MEDIA:	Media release and invitations will be coordinated and handled by ACT Health Media and the Minister's office
SOCIAL MEDIA ACCOUNTS	ACT Health, Minister and Calvary social media should be used for maximum reach. Particular priority for Mothers and Family networks to be reached
OUTSTANDING REGULATORY ISSUES	Nil

Meegan Fitzharris MLA – Arrangements Brief

MAP TO PARKING LOCATION

Use in conjunction with previous information about Where to park and Who will meet you



Meegan Fitzharris MLA – Speaking notes

**SPEAKING NOTES FOR THE
CALVARY PUBLIC HOSPITAL MATERNITY UNIT REFURB
11.30am FRIDAY 16 FEBRUARY 2018
WARD 3S, LEVEL 3 MARIAN BUILDING, CALVARY PUBLIC
HOSPITAL**

Acknowledgements

Traditional owners: I acknowledge the traditional custodians of the land we are meeting on, the Ngunnawal people. I acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.

Thank you Barb for again welcoming me to Calvary once again.

Calvary is the major public hospital and health facility in North Canberra providing high quality care for nearly 40 years.

For many women across Canberra this has been where they have had their babies.

Indeed, last year 1,555 women gave birth at Calvary Public Hospital.

Today I am delighted to announce the ACT Government will be investing \$2.6 million to refurbish, reconfigure and expand the Calvary Maternity Unit so we can see even more babies born here.

Meegan Fitzharris MLA – Arrangements Brief

We expect this work to get under way very soon, and will be completed in a timely way so that expectant mums can start to benefit from this renewed facility by mid-year.

I'm sure there will be some excited expectant mothers out there who are due later this year who will have some brand new facilities to look forward to.

It's important to note there's a two-fold benefit to this investment:

- recreating a fresh and uplifting experience for expectant mums in the Maternity ward and expanding the bed capacity of the maternity AND
- surgery units.

So, what's going to change?

- We are refurbishing and reconfiguring 10 single rooms each with ensuites and four spacious shared rooms with bathrooms.
- The Maternity ward capacity will increase from 15 beds to 18 beds.
- A new patient and family lounge room and beverage bay will be created along with a new baby/parent education and assessment room.
- Aesthetic upgrades will be made through all public and clinical areas throughout the Maternity ward.
- The rooms in the adjacent Birth Suite will be refreshed.

Meegan Fitzharris MLA – Arrangements Brief

- All these upgrades will provide more generous space for mothers, babies and their families.

In the meantime the Maternity Unit will be relocated to level 6 of the Xavier Building in the area previously used by Calvary Private services.

By July, Calvary Public Hospital's maternity ward will be on par with the standard and quality available at the Centenary Hospital.

Both these facilities have exceptional Midwifery, Nursing and Medical staff.

For women, particularly those on the northside who are planning a family, I suggest they plan ahead and consider taking advantage of these enhanced facilities, conveniently located here at Calvary.

ENDS

Key Facts

- 1555 Births Calendar year 2017
- Around 90 Registered Midwives make up the MW team, working FT,PT and Casual to achieve suitable coverage at all times
- Obstetric and Paediatric Specialists available within service
- 10 cot Special Care Nursery for neonates with special needs and others stepping down from significant paediatric treatment at CHHS
- MidCall home visits after discharge from hospital
- Lactation assistance and support
- Multidisciplinary model of care including full range of allied health services
- Access to highly skilled pastoral care services
- Continuum of care including antenatal checks, birthing education and parent readiness classes, post natal care
- Currently 15 beds moving to 18 beds under refurbishment

Meegan Fitzharris MLA – Arrangements Brief

SOCIAL MEDIA POSTS FOR THE

**ANNOUNCEMENT OF THE IMMINENT COMMENCEMENT OF THE
REFURBISHMENT, RECONFIGURATION AND EXPANSION OF THE
CALVARY PUBLIC HOSPITAL MATERNITY UNIT
11.30am FRIDAY 16 FEBRUARY 2018
WARD 3S, LEVEL 3 MARIAN BUILDING, CALVARY PUBLIC
HOSPITAL**

These activities are currently being discussed between Calvary and ACT Health

Facebook, Twitter and Instagram posts will also be sent through the Calvary National Office social media team

Suggested posts for Minister:

Twitter:

- Pleased to be investing \$2.6m into upgrading Calvary's Maternity Ward – giving new mums on the north side a choice in more services in the ACT.
- By July 2018 expecting mums on the north side of CBR will get a good start to their new life with a new baby in a newly refurbished \$2.6m maternity ward – watch this space!

Facebook:

- A \$2.6m new look and feel is on its way to Calvary Public Hospital's maternity ward. As of July this year expectant mums will start to enjoy refreshed, spacious and modern facilities – on par with the Centenary Hospital. All part of delivering improved, high quality health services that meet the demands of CBR's growing population on the north side.
- Calvary Public Hospital's maternity ward is about to get a fantastic renovation. We're delivering a refreshing new look and feel to this ward so that new mums can enjoy a fresh start to motherhood. In the meantime the maternity ward is temporarily moving from the Marian Building to the Xavier Building so that this \$2.6m renovation work can get underway at the maternity ward.



Media release

MEEGAN FITZHARRIS MLA

Minister for Health and Wellbeing
 Minister for Transport and City Services
 Minister for Higher Education, Training and Research
 Member for Yerrabi

16 February 2018

Better birthing facilities for new mums in Canberra's north

Expectant mothers in Canberra's north will soon have access to more comfortable, spacious birthing facilities with a major refurbishment and expansion of the maternity unit at Calvary Public Hospital announced today.

The newly refurbished maternity ward will increase its bed capacity from 15 to 18, offering a combination of 10 single rooms with ensuites and four large two-bed rooms with bathrooms.

"The ACT has some of the best maternity services in Australia, and we want to make sure our maternity wards are comfortable, inviting and well-equipped.

"The \$2.6 million refurbishment announced today will offer new mothers, particularly those on the growing northside, better access to high-quality, modern birthing facilities."

The upgrade includes:

- Refreshing the look and feel of the maternity ward by providing more space for mothers, their babies and their families;
- A new patient and family lounge room and beverage bay;
- A new baby and parent education and assessment room; and
- Contemporary Birth Suite rooms.

"The work is scheduled to begin at the end of February and take around four months to complete. So women expecting their babies in July 2018 can be the first to try out the newly refurbished facilities.

"The ACT Government is committed to improving health services across the territory, with these improvements aimed at extending the life of Calvary Public Hospital as it celebrates its 40th anniversary.

"Calvary has a wonderful team of dedicated midwives and doctors, with more than 1,550 babies born at Calvary last year. It's a great option for expectant mums to consider, particularly if they live on the northside, and after this refurbishment it will be even better," said Minister Fitzharris.

Calvary Public Hospital Chief Executive Officer Barb Reid welcomed the Minister's announcement.

"Our team of midwives, nurses, doctors and specialists are delighted that this project will develop facilities and deliver refreshingly new clinical surroundings for mothers and families," Ms Reid said.

"While 'bricks and mortar' are only a small part of a safe and happy birth, it is important that mothers, babies and families are comfortable through their pregnancy and during their admission. Calvary is grateful to the ACT Government for funding of this exciting project," Ms Reid said.

ACT LEGISLATIVE ASSEMBLY

Phone (02) 6205 0051

Email fitzharris@act.gov.au

@MeeganFitzMLA

MeeganFitzharrisMLA

From Friday 23 February, the maternity ward at Calvary Public Hospital will be temporarily relocated to level 6 of the Xavier Building (previously used by Calvary Private). Work is currently underway to accommodate this transition.

Statement ends

Media contact/s:

Claire Johnston T (02) 6205 0022 M 0499 993 930 E clairev.johnston@act.gov.au



Health Directorate

UNCLASSIFIED

To:	Minister for Health and Wellbeing	Tracking No.: MIN18/220
Date:	21 February 2018	
From:	Nicole Feely, Director-General	
Subject:	Gungahlin Walk-in-Centre – Sod turning event – 23 February 2018	
Critical Date:	22 February 2018	
Critical Reason:	Media event scheduled for 9.15am on Friday, 23 February 2018.	

- DG /.../...
- DDG /.../...

Purpose

To provide you with arrangements details and media material for the sod turning event, to mark the commencement of construction at the Gungahlin Walk-in-Centre (WiC) site.

Recommendations

That you:

1. Note the information contained in this brief; and

Noted / Please Discuss

2. Note the Arrangements Brief (Attachment A), Speaking Notes (Attachment B), Media Release (Attachment C) and Media Alert (Attachment D).

Noted / Please Discuss

Meegan Fitzharris MLA/...../.....

Minister's Office Feedback

Background

1. The delivery of a nurse led WiC in Gungahlin is a Government priority which was fully funded in the 2017-18 Budget.

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2. Construction works on the Gungahlin WiC are planned to commence in March 2018.
3. The Walk in Centre design solution will see an extension to the existing Gungahlin Community Health Centre (GCHC).
4. It will comprise approximately 240m² of new construction, including four treatment spaces and support infrastructure.
5. A Head Contractor, Manteena Commercial Pty Ltd was engaged on 20 September 2017.
6. This year has seen the approval of the Development Application and the finalisation of the extension's building design. Now that the project has reached these important milestones, works will commence on site.
7. Work commenced on Friday, 16 February 2018, with site establishment, including the installation of site fencing and the site sheds.
8. The target project delivery date is August 2018.

Issues

9. To enable site establishment, a total of 21 car parking spaces will be temporarily closed until the Walk in Centre opens.
10. People going to the Gungahlin Community Health Centre are likely to notice noise and some vibrations coming from the site over the coming months.
11. Pedestrian crossing access to the new facility was considered during the pre-Development Application (DA) submission meeting with the relevant Authorities, however, no concerns were raised, nor conditions attached to the final project DA Notice of Decision.
12. The pedestrian access to the WiC and its connection to the external street system will be via existing path. A Disability Discrimination Act (DDA) accessible pathway is currently available from the main pedestrian access point from Ernest Cavanagh Street.

Financial Implications

13. In the 2017-18 Budget, the ACT Government identified capital funding of \$2.925million to deliver a WiC for Gungahlin.

ConsultationInternal

14. Information has been provided by Health Infrastructure Services, Health Services Program, Canberra Hospital and Health Services and Performance, Reporting and Data and Government and Communications.

Cross Directorate

15. As part of the Development Application process regular discussions have taken place with representatives from Environmental Planning and Sustainable Development Directorate (EPSDD) and Transport Canberra and City Services (TCCS).

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External

16. Representatives from the Health Care Consumers Association (HCCA) have been involved in working groups as part of the WiC design development process.

Benefits/Sensitivities

17. There have been some stakeholder concerns raised, particularly from the local GP community, in relation to a perceived 'competition' and duplication of services.

Media Implications

18. The sod turning event at the Gungahlin WiC site has been scheduled for 9.15am on Friday, 23 February 2018. An Arrangements Brief (Attachment A) and speaking notes (Attachment B) have been prepared.
19. As this is a media event, Health Media has prepared a Media Release (Attachment C) and a Media Alert (Attachment D).

Signatory Name: Colm Mooney

Phone: 79186

Action Officer: Sallyanne Pini

Phone: 54689

Attachments

Attachment	Title
Attachment A	Arrangements Brief – Sod turning event at Gungahlin Walk-in-Centre site
Attachment B	Minister Fitzharris speaking notes
Attachment C	Media Release
Attachment D	Media Alert

UNCLASSIFIED



MINISTERIAL BRIEF

Health Directorate

UNCLASSIFIED

To:	Minister for Health and Wellbeing	Tracking No.: MIN18/220
From:	Nicole Feely, Director-General	
Subject:	Gungahlin Walk-in-Centre – Sod turning event	
Critical Date:	23 February 2018	
Critical Reason:	Media event is scheduled for this day	

- DG .../.../...
- DDG .../.../...

Purpose

To provide you with information for the sod turning event, to mark the commencement of construction at the Gungahlin Walk-in-Centre (WiC) site.

Recommendation

That you note the information contained in this brief and attachments.

Noted/ Please Discuss

Meegan Fitzharris MLA

*M. Fitzharris**1, 13, 2018***Minister's Office Feedback**

Please provide update on any additional services to be offered at Gungahlin based on previous CHN facilitated meeting (eg. fracture clinic), & direction for model of care at other WiCs.

Background

1. The delivery of a nurse led WiC in Gungahlin is a Government priority which was fully funded in the 2017-18 Budget.
2. Construction works on the Gungahlin WiC are planned to commence in March 2018.
3. The WiC design solution will see an extension to the existing Gungahlin Community Health Centre (GCHC).
4. It will comprise approximately 240m² of new construction, including four treatment spaces and support infrastructure.

Re. pedestrian access - please clarify location of new pedestrian crossing

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5. A Head Contractor, Manteena Commercial Pty Ltd was engaged on 20 September 2017.
6. This year has seen the approval of the DA and the finalisation of the extension's building design. Now that the project has reached these important milestones, works will commence on site.
7. Work commenced on Friday, 16 February 2018, with site establishment, including the installation of site fencing and the site sheds.
8. The target project delivery date is August 2018.

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ConsultationInternal

14. Information has been provided by Health Infrastructure Services, Health Services Program, Canberra Hospital and Health Services and Performance, Reporting and Data and Government and Communications.

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19. As this is a media event, Health Media has prepared a Media Release (Attachment C) and a Media Alert (Attachment D).

Signatory Name: Colm Mooney

Phone: 79186

Action Officer: Sallyanne Pini

Phone: 54689

Attachments

Attachment	Title
Attachment A	Arrangements Brief – Sod turning event at Gungahlin Walk-in-Centre site
Attachment B	Minister Fitzharris speaking notes
Attachment C	Media Release
Attachment D	Media Alert

UNCLASSIFIED

Meegan Fitzharris MLA

Attachment A: ARRANGEMENTS BRIEF

FUNCTION:	Ground breaking for construction commencement of Gungahlin Walk-in Centre
VENUE:	Site next to Gungahlin Community Health Centre, 57 Ernest Cavanagh St, Gungahlin ACT 2912
HOST:	Name: Colm Mooney Mobile: [REDACTED]
DAY:	Friday
DATE:	23 February 2018
TIME:	9:15am – 9:45pm
TIME COMMITMENT:	30 minutes
CATERING:	No
DRESS CODE:	Business and enclosed flat shoes. Additional Personal Protective Equipment (PPE) will be provided on site.
YOUR ROLE:	Address media and 'turn the sod' on site.
WHERE TO PARK:	A car park will be reserved at the Gungahlin Community Health Centre, near the main entrance.
WHO WILL MEET YOU:	Colm Mooney will greet you in the car park and escort you to the site entrance.
ADVISOR ATTENDING:	Claire Johnston
AUDIENCE:	ACT Health staff, representatives from the construction company and local Canberra media invited to the event.
VIPs:	<p>ACT Health</p> <ul style="list-style-type: none"> • Colm Mooney, Executive Director, Health Infrastructure Services • Denise Lamb, Executive Director, Cancer, Ambulatory and Community Health Services <p>Manteena Commercial Pty Ltd</p> <ul style="list-style-type: none"> • Mark Bauer, General Manager, Manteena
PAST INVOLVEMENT:	You have previously visited the Gungahlin Community Health Centre. Funding for the new Walk-in Centre was announced as a pre-budget initiative last year.
SENSITIVITIES:	General Practitioners (GPs) in the area have questioned introducing a Walk-in Centre to Gungahlin.

ORDER OF CEREMONIES	<p>9:15am: Minister arrives and is escorted to the site entrance.</p> <p>9:20am: Minister addresses media</p> <p>9:25am: Photo opportunity of Minister breaking ground on site</p> <p>9:35am: Minister answers media questions</p> <p>9:45am: Event concludes and the Minister is free to depart.</p>
MEDIA:	Media will be invited. A media release and alert has been prepared.
SOCIAL MEDIA ACCOUNTS	<p>ACT Health Twitter and Facebook</p> <p>Minister Fitzharris Twitter and Facebook</p>
OUTSTANDING REGULATORY ISSUES	The event is being held on a construction site.

Gungahlin Walk-In Centre sod turning Questions and answers

Q: What will be the cost of constructing the Gungahlin Walk-in Centre?

A: The total construction cost for this new centre is \$2.925 million.

Q: How many staff will the centre employ?

A: Staffing requirements are 9.43 clinical staff, 3.5 administration staff and one full time Nurse Manager.

Q: When did construction start and when will it be complete?

A: Construction commenced on 16 February and is scheduled for completion in August 2018.

Q: How many people are using other Walk-In Centres?

A: The Tuggeranong and Belconnen Walk In Centres are incredibly popular, with a combined total of more than 36,000 patient presentations every year.

Demand for the centres continues to grow. Year to date there has been an 11 per cent increase in presentations compared to last year and each month there are more presentations at both centres.

Q: How many patients from Gungahlin would use the Belconnen or Tuggeranong WICs?

A: People who live or work in Gungahlin will be able to access this new Walk-in Centre once it opens later this year.

If pressed

I do not have the exact figures for the number of people living in Gungahlin using the other centres, however I'm confident that this new piece of health infrastructure will provide a convenient alternative for residents in this region.

Q: Who is constructing the centre?

A: The head contractor is Manteena Commercial, who have joined us here this morning.

Q: How many patients do you anticipate will use the centre?

A: We anticipate the Gungahlin Walk-in Centre will experience comparable visitor numbers to Belconnen and Tuggeranong. Once the centre opens, we expect patient numbers grow rapidly.

Q: Is there evidence Walk-In Centres reduce pressure on emergency departments.

A: Walk-in Centres provide an alternative to other public health services. Our WICs in Belconnen and Tuggeranong are incredibly popular, with over 36,000 presentations every year.

If pressed

We're unable to make a direct correlation between hospital Emergency Department activity and Walk-in Centre activity because there are different reasons people require these services.

Q: Are Walk-in Centres worse value for money than GP visits?

A: The cost comparison of a GP visit to a WiC visit is not possible due to the different nature of the services provided in each service. Walk-in Centres provide a no-cost service in a market that has the lowest bulk billing rates in Australia.

Q: Are Walk-in Centres unfairly competing with GPs?

A: Walk-in Centres are not in competition with GPs or other primary health care services.

They complement GP services by providing referrals and updates back to a patient's GP. Walk-in Centres are staffed by a rotating team of nurses, which makes the service distinctly different from the continuity of care that is provided by GPs to patients and families.

Walk-in Centres provide fast, free, one-off treatment for minor injuries and illnesses such as cuts and bruises, minor infections, strains, sprains, skin complaints and coughs and colds. People who visit the centres that have serious or complex care needs are advised to seek medical care from a health professional for their ongoing care.

If pressed

Canberrans often report difficulty accessing a GP, sometimes having to wait significant time to be able to get an appointment.

It is important to support the health needs of Canberrans when there are very limited alternative options available. Walk-in Centres do this by providing health care seven days a week from early in the morning until late at night with no appointment necessary.

Status Update – Weston Creek Walk-in-Centre and Inner North Health Centre

1. The ACT Government has committed to successfully deliver two new walk-in centres, one of which will be in Gungahlin, and other in the Weston Creek region.
2. Planning and design work has commenced for a walk-in centre in the Weston Creek region. A suitable location has been identified in the Weston Creek region for this walk-in centre, and a request will soon be considered by Cabinet to fund the capital investment to deliver this exciting service.
3. Early planning work for a community health centre in the inner north has commenced. This planning will assist the Government to determine what services are needed in the inner north.



Media release

MEEGAN FITZHARRIS MLA

Minister for Health and Wellbeing
 Minister for Transport and City Services
 Minister for Higher Education, Training and Research
 Member for Yerrabi

23 February 2018

Free healthcare services on the way for Gungahlin community

The Gungahlin community will soon have access to free local healthcare services with construction works now underway on a new nurse-led Walk-in Centre.

The Gungahlin Walk-in Centre will be Canberra's third centre offering free one-off treatment for people with minor illness and injury, with two others already operating in Tuggeranong and Belconnen.

"It's wonderful to see work starting today on the new Gungahlin Walk-in Centre, which I know will be a popular healthcare service for the growing local community," said Minister for Health and Wellbeing Meegan Fitzharris.

"The new Gungahlin Walk-in Centre will be co-located with the existing Gungahlin Community Health Centre on Ernest Cavanagh Street. It will provide the community with access to high quality, extended hours health care services closer to where they live.

"The ACT Government is investing \$2.9 million to build the new Walk-in Centre, which is due to open in late-2018 with a team of highly skilled Advanced Practice Nurses and Nurse Practitioners."

Australian Nursing & Midwifery Federation ACT welcomed the new Walk-in Centre.

"The ANMF ACT Branch welcomes the development of a new Walk-in Centre at Gungahlin that will provide access to free health services to people in Canberra's north. Our highly skilled ACT Nurses are well placed to provide these services, including wound care, treating minor skin conditions and upper respiratory tract infections," said ANMF ACT Branch Secretary Matthew Daniel.

The Gungahlin Walk-in Centre will feature four treatment rooms, a high ceiling corridor to let natural light into the building and easy access from the public car park.

Designs for the centre are complete and approved, and are based on the successful design of the Belconnen Walk-in Centre, which has been operating since July 2014.

"Our Walk-in Centres in Belconnen and Tuggeranong are incredibly popular and see more than 36,000 patient presentations every year," said Minister Fitzharris.

"Canberra is a city of people who have busy lives and need after-hours options. Walk-in Centres provide an alternative to other public health services and complement the other services on offer.

"Walk-in Centre nurses can provide referrals and updates back to a patient's GP to enable them to continue providing treatment and advice for these patients' ongoing health needs.

ACT LEGISLATIVE ASSEMBLY

Phone (02) 6205 0051

Email fitzharris@act.gov.au

@MeeganFitzMLA

MeeganFitzharrisMLA

"We are committed to delivering person-centred, safe and effective care with the appropriate health infrastructure to meet the future needs of our community. Delivering more Walk-in Centres across our city is a key part of this," Minister Fitzharris said.

For more information visit: www.walkincentre.act.gov.au.

Media contact:

Claire Johnston T (02) 6205 0022 M 0452 597 459 E clairev.johnston@act.gov.au

ATTACHMENT B
GUNGAHLIN WALK-IN-CENTRE SOD TURNING
9:15am, Friday 23 FEBRUARY 2018

Acknowledgements

- Traditional owners: I acknowledge the traditional custodians of the land we are meeting on, the Nggunawal people. I acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.
- MLAs – Suzanne Orr and Michael Pettersson.
- Colm Mooney, Executive Director, ACT Health
- Denise Lamb, Executive Director, ACT Health
- Mark Bauer, General Manager, Manteena

As the ACT's Minister for Health and Wellbeing and a local MLA I'm thrilled to be here today to turn the first sod on Canberra's third Walk-In-Centre, officially marking the start of the construction.

I would like to thank the project Head Contractor, Manteena, the project architect, May Russell and the Health Infrastructure delivery team for achieving this significant milestone.

The ACT Government is committed to investing in better healthcare, where and when people need it.

We are investing \$2.9 million to build this new centre in Gungahlin, to ensure more Canberrans can access free one-off treatment and health advice for minor injuries and illnesses.

More Walk-in Centres were a key commitment by ACT Labor during the 2016 election, and it's great to be standing here today ready to get this work underway.

This is all about providing this growing community with high quality, extended hours' health care services closer to where they live.

Co-location with the existing Gungahlin Community Health Centre here on Ernest Cavanagh Street means residents in the region will have access to more publically funded health services in their town centre.

I'm also pleased to announce designs for the centre are complete and approved.

They are based on the successful design of the Belconnen Walk-In Centre, which has been operating since July 2014.

On that note, our Walk-In Centres in Belconnen and Tuggeranong are incredibly popular and see more than 36,000 patient presentations every year.

I'm expecting the same success here in Gungahlin.

The Gungahlin Walk-in Centre has been designed with practicality and patient-centred care in mind.

It will feature four treatment rooms, a high ceiling corridor to let natural light into the building and easy access from the public car park.

The new centre will be staffed by a team of highly skilled Advanced Practice Nurses and Nurse Practitioners.

Canberra is a city of people who work, have busy lives and need after-hours options. We know Gungahlin in particular is a growing region with lots of young families living throughout the region.

Our popular Walk-in Centres provide an alternative to other public health services. Parking is easy, public transport is close by and the wait to see a nurse is minimal.

Walk-in Centre nurses can provide referrals and updates back to a patient's GP to enable them to continue providing treatment and advice for these patients' ongoing health needs.

We are committed to delivering person-centred, safe and effective care with the appropriate health infrastructure to meet the future needs of our community.

Delivering more Walk-In Centres across our city is a key part of this. I will be eagerly watching as construction unfolds throughout the year ahead of the scheduled opening in late 2018.

ENDS



Media alert

MEEGAN FITZHARRIS MLA

Minister for Health and Wellbeing
 Minister for Transport and City Services
 Minister for Higher Education, Training and Research
 Member for Yerrabi

22 February 2017

Construction starts on Gungahlin Walk-in Centre

Attention news editors and chiefs of staff

Not for broadcast or distribution

Construction work has begun on Canberra's third Walk-in Centre.

Minister for Health and Wellbeing Meegan Fitzharris will tomorrow (Friday) attend the sod turning in Gungahlin Town Centre.

The new Gungahlin Walk-in Centre will be co-located with the existing Gungahlin Community Health Centre on Ernest Cavanagh Street. It will provide the community with access to high quality, extended hours' health care services closer to where they live.

WHAT: Commencement of Gungahlin Walk-in Centre construction

DATE: 23 February 2018

TIME: 9:15am

WHERE: 57 Ernest Cavanagh Street, Gungahlin ACT 2912

Statement ends

Media contact/s:

Claire Johnston T (02) 6205 0022 M 0452 597 459 E clairev.johnston@act.gov.au

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ACT Health Directorate

UNCLASSIFIED

To:	Minister for Health and Wellbeing	Tracking No.: GBC19/84
CC:	Chief Minister, Treasury and Economic Development Directorate	
From:	Michael De'Ath, Director-General	
Subject:	Clare Holland House Expansion Project Agreement	
Critical Date:	22 March 2019	
Critical Reason:	To ensure the agreement is returned to Minister Hunt for execution, before the end of March 2019.	

• DG .../.../...

Purpose

To seek your agreement to sign the Project Agreement (Attachment A) for the expansion of Clare Holland House (CHH) offered by the Commonwealth to the Australian Capital Territory (ACT).

Recommendations

That you:

1. Note the information contained in this brief;

Noted / Please Discuss

2. Sign the Clare Holland House Expansion Project Agreement (Attachment A); and

Signed / Not Signed / Please Discuss

3. Sign the attached reply to The Hon Mr Greg Hunt MP, Commonwealth Minister for Health, attaching the signed Project Agreement (Attachment B).

Signed / Not Signed / Please Discuss

Meegan Fitzharris MLA/...../.....

Minister's Office Feedback

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Background

1. In April 2018, the ACT accepted the Commonwealth's offer of a \$4 million grant supporting the expansion of CHH to increase palliative care facilities in the ACT.
2. At a press conference on 25 September 2018, together with representatives from Commonwealth Government and the Snow Foundation, you announced the expansion project and the contributions from Australian Commonwealth Government committing \$4 million and the Snow Foundation donating \$2 million towards the CHH expansion. This brings the total agreed funding for the project to \$6 million.
3. The Project Agreement (Attachment A) outlines the role of each party within the initiative as well as setting the outputs, milestones, reporting, and financial arrangements for the project.
4. This expansion will deliver in line with the agreement's project outputs:
 - i. Inpatient areas: 8-10 palliative care beds, including family friendly design, appropriate bariatric support, and supportive spaces (kitchen, pharmacy, storage areas etc).; and
 - ii. Administrative expansion: reconfiguration of existing office space, and additional room to accommodate the increase in patient amenity and staff numbers.
5. The upgrade and extension of the CHH palliative care facility will ensure that members of the Canberra community at the end of their life continue to receive high quality care delivered with dignity and respect.

Issues

6. The Commonwealth has requested that the signed Project Agreement be returned to Minister Hunt's office by end of March 2019.

Financial Implications

7. The Clare Holland House project is currently funded entirely from external sources, the only impacts for the Territory will be in relation to depreciation, repairs and maintenance and lifecycle replacement costs.

Consultation

Internal

8. The Strategic Infrastructure Division has liaised with the finance team in relation to our reporting arrangements outlined in the Project Agreement.

Cross Directorate

9. ACT Health Directorate has sought advice from the Federal Financial Relations team in relation to approving the final version of the Project Agreement.

External

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10. Not applicable.

Benefits/Sensitivities

11. There are no sensitivities related to the execution of this Project Agreement.

Communications, media and engagement implications

12. The key stakeholders for this project are as follows:

- Calvary Health Care;
- Special interest groups, including Palliative Care ACT;
- ACT Health Directorate; and
- Funders - The Snow Foundation and Commonwealth Government Department of Health.

Signatory Name:	Brad Burch	Phone:	X49719
Action Officer:	Monica Lindemann	Phone:	X49191

Attachments

Attachment	Title
Attachment A	Clare Holland House Project Agreement
Attachment B	Letter of response to Minister Hunt

UNCLASSIFIED



Meegan Fitzharris MLA

Minister for Health and Wellbeing
 Minister for Higher Education
 Minister for Medical and Health Research
 Minister for Transport
 Minister for Vocational Education and Skills
 Member for Yerrabi

The Hon Greg Hunt MP
 Minister for Health
 Parliament House
 CANBERRA ACT 2600

Dear Minister *Greg*

Thank you for your letter of 15 February 2019 about the Commonwealth's contribution of \$4 million for the Expansion of Clare Holland House in Canberra.

I am pleased to enclose a signed copy of the Project Agreement, for execution by your Office.

I can confirm that the Territory will seek prior agreement with the Commonwealth on the nature and content of any events, announcements, promotional material or publicity relating to activities under the Project Agreement, and that the roles of both parties, in addition to the Snow Foundation, will be acknowledged and recognised appropriately.

Thank you for supporting this important infrastructure project and the health and wellbeing of the people of Canberra and surrounding region. Ms Liz Lopa, Executive Group Manager, Strategic Infrastructure, will be the key point of contact for this work and can be contacted on (02) 5124 9805, or Liz.Lopa@act.gov.au

Thank you again for your continued support of this important project.

Yours sincerely

Meegan Fitzharris MLA
 Minister for Health and Wellbeing

22/3/2019

ACT Legislative Assembly

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