

Infrastructure Services

Stakeholder & Community Engagement Plan

Kings Meadows Community Health Centre Redevelopment

October 2024

Version 3.2 (07/04/25)

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Document Revisions

REV	DATE	DETAILS
0.6	05/20/2023	SCEP Approved (for initial project scope)
1.0	12/09/2024	First draft Stage 1 SCEP (revised project scope)
2.0	02/10/2024	Final approved SCEP
3.0	3/3/25	Updates (R Ramage)
3.1	11/03/2025	Updates (S Rowlands)
3.2	7/04/2025	Updates (L Temple-Smith)
3.3		
3.4		

Document Approvals:

Prepared by	Lucy Temple-Smith	RPS AAP Consulting Pty Ltd	12/09/2024
Through	Richard Rainbird	Department of Health	25/09/2024
Through	Jennifer Cane	Department of Health	01/10/2024
Cleared by	Jon Hughson	Department of Health	01/10/2024

Level of involvement

The International Association for Public Participation (IAP2) has developed a Public Participation Spectrum to demonstrate the possible types of engagement with stakeholders and communities. The IAP2 spectrum also shows the increasing level of public impact as engagement progresses from 'inform' through to 'empower'.

With a commitment to effective community engagement as part of Department of Health's core business through project planning, development, design, construction and completion, the engagement strategies and supporting.

IAP2 Spectrum of Public Participation



IAP2's Spectrum of Public Participation was designed to assist with the selection of the level of participation that defines the public's role in any public participation process. The Spectrum is used internationally, and it is found in public participation plans around the world.

INCREASING IMPACT ON THE DECISION					
	INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
PUBLIC PARTICIPATION GOAL	To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis, alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision making in the hands of the public.
PROMISE TO THE PUBLIC	We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

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Introduction

The Department of Health (Department) plans to redevelop the existing Kings Meadows Community Health Centre (KMCHC) using a staged methodology. The original SCEP for this project assumed the project would be delivered as a single stage, that document is filed in CM at D23/98479. This updated Stakeholder, Communications and Engagement Plan (SCEP) reflects a staged delivery approach and is focused on commencing with a new Renal Unit as part of the KMCHC redevelopment project (the Project).

The SCEP is intended to assist the project team in identifying what engagement will be undertaken, who is responsible for progressing activities, when they are planned to take place, how they will be coordinated/captured and the locations where they will take place.

The focus of this SCEP is to provide the department with an in-depth communications and engagement strategy for the redevelopment of the KMCHC site. The final project phase, construction, is not within the scope of this SCEP. The SCEP will be updated before the commencement of construction.

Background

In 2019, the Australian Government's Community Health and Hospitals Program (CHHP) included \$10 million to redevelop the existing KMCHC site into a fit-for-purpose community health centre to meet increased demand for renal and allied health services in Northern Tasmania.

In 2022, a Project Manager was appointed, and design consultant ARTAS Architects was engaged, they undertook a building condition assessment and developed an options analysis and concept design for the redevelopment of the facility. The existing building's condition was found to be in an advanced state of disrepair and decline, the most efficient and cost-effective redevelopment methodology is to build new purpose-designed and built building/s.

Project overview and objectives

The existing KMCHC comprises of two buildings and extensive carparking within a surrounding area dominated by a retail shopping precinct, recreational golf club and residential housing along McHugh Street, Kings Meadows. McHugh Street also provides vehicle and pedestrian access to the Centre.

The objective of the project is for the Department of Health to deliver a staged redevelopment of the Kings Meadows Community Health Centre, which is designed to transform the centre into a new, fit-for-purpose health facility to meet the future needs of the community.

The commencement of the redevelopment and delivery of the new renal unit will include the demolition of the existing Joan Marshall building and the construction of a new Renal Health Centre on the same site, bearing the same name, with construction costs estimated at \$6.8 million. The objectives are as follows:

- Increase the current KMCHC renal service capacity from 16 to 18 treatment bays, including footings for future expansion to the rear of the new building for an additional 6 treatment bays (subject to additional funding)
- Deliver upgrades to the car park including undercover patient drop-off spaces, upgrades to the stormwater drainage system and planting of soft landscaping.
- Meet the requirements of the Australian Government CHHP grant funding.
- Renal Dialysis Services in the new Joan Marshall building are anticipated to commence operations in September 2026.

Project status and indicative timeline

A Development Application for the demolition of the existing Joan Marshall building and construction of the replacement building was approved by the City of Launceston on 13 September 2024. An amendment to the development application was submitted in March 2025.

The schematic design was approved by the renal team in February 2025, and detailed design and specifications for tender issue are progressing, with an expected completion of mid-April 2025. An open tender will be advertised in May 2025. Site works, beginning with the demolition of the current Joan Marshall building, are expected to commence in October 2025, with practical completion in October 2026 ahead of operational commissioning and use in November 2026.

Key risks

The key stakeholder engagement and communications issues and risks for the KMCHC include:

- Complexity of the site, in terms of location, site access, partial staff and client relocation during demolition and construction, competing and potentially conflicting stakeholder needs/preferences / priorities.
- Lack of public awareness of the development due to limited community engagement to date.
- The potential for representations to the City of Launceston Council during the public notice period causing delays in the provision of the Planning Permit.
- Relocation of some allied health services currently using consultation rooms within the Joan Marshall building to facilitate the staged approach may result in negative sentiment from staff, as well as confusion and concerns about continuity of care for health consumers.

Further detail on the key issues, risks and mitigation strategies for the Project are outlined in Appendix B – Stakeholder Risk and Mitigation Classification Tool.

Project benefits

The new renal unit of the KMCHC redevelopment will deliver an expanded renal facility and supporting infrastructure as well as upgrades to the car park, amenities and immediate building surrounds. Benefits to be realised include:

- An expanded renal service building that meets contemporary standards of a community health and satellite renal dialysis facility with:
 - Functional efficiencies within and between clinical services
 - Improved staff workflows
 - Collaborative office environments
 - Efficient access to sterile and non-sterile stores
 - Improve traffic and pedestrian movements into and around the site.
 - Improve the visual amenity around the site.
 - Modern and contemporary design and features to attract new staff and clients, and
- Provision of physical infrastructure that enables safe, high-quality care, contemporary service models, flexibility and adaptability.

Project location

The KMCHC is located at 22 McHugh Street, Kings Meadows, Tasmania and is accessed at the end of a cul-de-sac (Figure 2). There are 21 residential properties in McHugh Street.

The KMCHC is located within the municipality of City of Launceston (Council), the Tasmanian Legislative Council electoral division of Launceston and the Tasmanian House of Assembly and Federal House of Representative electoral division of Bass.



Figure 1: KMCHC main building (#1) and Joan Marshall wing (#2), with McHugh Street shaded green; noting dental health is located under main building on northwest corner (Image from the ListMap)

Stakeholder engagement

Engagement approach and objectives

This Stakeholder and Community Engagement Plan covers up to the construction phase of the new renal unit only. An updated SCEP will be prepared and additional information added to the SCEP if / when additional works are to be implemented as part of the sites redevelopment. It is based primarily at the Inform and Consult levels of the IAP2 Spectrum, with one stakeholder being engaged on the Involve level.

Engagement objectives

- Raise awareness and support among key stakeholders and the community for the Project.
- Share information with stakeholders and the community about the need for the redevelopment and the resulting benefits.
- Build positive relationships with stakeholders and the local community and proactively manage issues.
- Provide genuine opportunities for stakeholders and the community to engage with the project and provide constructive feedback and promote these opportunities wherever possible.

- Understand areas of interest or concern for stakeholders and the local community to minimise objections, representations and potential delays to the planning approvals processes.
- Review and report community feedback to support informed decision-making and incorporate learnings into the SCEP.
- Inform stakeholders and the community about how their input contributed to the development of the project.

Engagement approach

The engagement for the KMCHC Redevelopment will be delivered in alignment with each project delivery Phase and will include a range of activities, as outlined below.

Throughout each phase risks, issues and community and stakeholder enquiries will be managed. At the conclusion of each phase, outcomes will be documented and measured to assess the effectiveness of the engagement approach, activities, and key messages.

Design Development

- Communications and to raise awareness of the Project and share the Concept Design ahead of the Development Application public notice period.
- One on one discussions with Primary External and Primary Internal stakeholders (KMCHC Health Service Leads) and Secondary external stakeholders as required.

Schematic Design

- Engagement to raise awareness of the project, communicate the outcome of the Development Application and notify stakeholders and the community of next steps.
- One on one discussions with Primary External and Primary Internal stakeholders and Secondary external stakeholders as required.

Construction Documentation and Tendering

- Creating and leveraging opportunities to raise awareness of the project, its benefits and key project milestones (for example, communications regarding the awarding of a construction contract, the start of construction).

Construction

- Communications and engagement activities to support the construction phase of the project and manage stakeholder and community relationships (as required).
- Creating and leveraging opportunities to communicate the benefits and key project milestones (for example, project completion).

Key dates for each part are set out in the Engagement Action Plan within this SCEP.

Stakeholders

Two categories of stakeholders will be consulted or informed during this project, namely internal audiences (Minister, management, staff, etc) and external audiences (Council, community, etc). These audiences are further categorised into Primary and Secondary stakeholders:

- Primary stakeholders are those who will be directly impacted by project activities or whose input and/or actions will affect the outcome of the project.
- Secondary stakeholders are those who will not be directly affected but may have varying levels of interest in the project and benefit from enhanced project awareness.

Five overarching stakeholder classifications and six stakeholder groups have been identified to better assist in the planning and execution of communication and engagement activities, the gathering of data throughout the process and reporting. The six stakeholder groups are:

1. Primary internal
2. Secondary internal
3. Tertiary internal
4. Primary external
5. Secondary external
6. Tertiary external

An overview of the stakeholder classifications and groups identified for the KMCHC is shown below. Further detail on the stakeholders within each group is provided in Appendix A.

Stakeholder classification	Stakeholder group
Government internal	<ul style="list-style-type: none"> • Primary internal – Decision makers • Primary internal – Project Control Group • Primary internal – KMCHC Health Service Leads • Primary internal – KMCHC staff • Secondary internal – Department of Health stakeholders • Tertiary internal – Support services
Government external	<ul style="list-style-type: none"> • Secondary internal – Other Government stakeholders
Community	<ul style="list-style-type: none"> • Primary external – Near neighbours • Primary external – Health consumers • Tertiary external – Broader community
Non-government	<ul style="list-style-type: none"> • Secondary external – Other non-government stakeholders • Secondary external – Unions
Other	<ul style="list-style-type: none"> • Tertiary external – Local media • Tertiary external – Advocacy groups / Other

Project Working Group

In 2023, a Project Working Group (PWG) was formed. The PWG is made up of representatives from each service currently operating from the Centre (KMCHC Health Service Leads). As directly impacted stakeholders, engagement with the PWG enabled the project team to gain a thorough understanding of each service's clinical and functional requirements and enabled the PWG to provide feedback and communicate project information to staff, when required.

Engagement tools

During the engagement the following engagement tools will be utilised.

Engagement tools	Description
Direct communication (Email and phone)	This includes emails and letters to special interest stakeholders with high interest/influence, to provide project information and invite participation in engagement activities.
Project email and phone	An email and phone line set-up for people to ask questions, raise issues and concerns or seek support to participate in engagement activities.
REACH article	Information required to communicate to staff at key points during project, for example, start work notification, disruptions or opportunities to provide feedback.
Flyers	To provide project information and promote engagement activities to near neighbours (residents and businesses).
Posters	Local noticeboards at KMCHC to provide information of the planned design and key dates for construction.
1:1 briefings/small group meetings	To provide stakeholders with up-to-date project information, including planning and approvals and construction and promote opportunities to receive updates on the project.
Email updates	E-updates will be issued to stakeholders who have indicated they would like to be kept up to date about the project. These will be issues at major project milestones or prior to engagement activities.
Frequently Asked Questions (FAQs)	FAQs will support internal and external communications, briefings, and presentations. These will be based on key messages and cover a range of project topics and potential issues. Approved FAQs will be developed so that they can be used across a range of communications materials.
Media release	Used at key points throughout the project to raise awareness of the project, communicate the need for the project and its benefits.
Media event	Official commencement of construction in consultation with the Minister for Health and the Australian Government CHHP.
Print and social media advertising	To provide project information and promote engagement activities and to publish construction request for tender [print]
Community drop-in sessions	To provide project information and capture feedback from near neighbours and the broader community.

Engagement tools	Description
Online staff briefing	Briefing for internal stakeholders via Microsoft Teams to hear updates about the project, ask questions and share concerns
Issues management register	To capture, track and report issues and matters raised throughout the engagement and ensure they are effectively addressed
Engagement outcomes report	To detail the engagement process, what was heard and how that feedback influenced the project
Engagement summary	A high-level public summary of the engagement and its outcomes

Engagement level

Below are the elements of the communication and engagement program that will be delivered for this project under each relevant IAP2 engagement level.

Inform	Consult	Involve	Collaborate	Empower
Provide balanced and objective information to assist understanding of the problem, alternatives, opportunities and/or solutions	Obtain feedback on analysis, alternatives and /or decisions	Work directly with stakeholders to ensure their concerns and aspirations are understood and considered	Partner with stakeholders in each aspect of the decision including alternatives and identification of the preferred solution	Place final decision-making in the hands of the stakeholders
What this means for engagement:				
Inform the community and stakeholders about the redevelopment of the KMCHC, including, planned staged development planning and approvals, construction timeframes and impacts,	Consult with stakeholders (Primary internal – KMCHC Health Service Leads and Tertiary internal – Support services) on the schematic design of the KMCHC including design of service delivery spaces	Involve stakeholders on the use of the Joan Marshall name for the new building (Tertiary external [Joan Marshall's family])		

feedback opportunities and how they can subscribe for updates.	Consult with stakeholders (Primary internal – KMCHC Health Service Leads) on the decant strategy for the delivery			
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Negotiables and non-negotiables

These inform the development of the communication and engagement approach.

Negotiables	Non-negotiables
Schematic design (limited to KMCHC Health Service Leads)	Final Concept Design
Decant strategy development (relocation of some allied health staff and services) (limited to KMCHC Health Service Leads)	Urban design and landscaping for the site
Legacy of the Joan Marshall name within the redeveloped KMCHC	Public site access
	Demolition of building/s and any future development of the site and its surrounds
	Final decant strategy for the relocation of some community health services to other Launceston locations during construction, including decant schedule, timing, and location of temporary services

Key messages

Primary messages

- The Department of Health is delivering a staged redevelopment of the Kings Meadows Community Health Centre to transform it into a new, fit-for-purpose health centre to meet the future needs of the community.
- The Australian Government is providing \$10 million for the Kings Meadows Community Health Centre redevelopment through the Community Health and Hospitals Program (CHHP).
- The redevelopment will commence with the demolition of the existing Joan Marshall building and replacement with a new, larger, Renal Health unit that will support an expanded renal service delivery, additional car parking, safer access and improved wayfinding and landscaping.

- Following extensive building condition assessments, it became clear that a staged replacement of the Kings Meadows Community Health Centre is the most efficient and best value outcome to deliver a fit-for-purpose healthcare facility for the benefit of the community.
- A Development Application for the new renal unit (redevelopment of the Joan Marshall Building into a purpose-built 18-bay renal dialysis clinic) of the Kings Meadows Community Health Centre redevelopment was approved by the City of Launceston in September 2024.
- The Department of Health is committed to working closely with stakeholders and the community as the project develops.

Secondary / supporting messages

Funding

- The Australian Government has committed \$10 million to fund the Kings Meadows Community Health Centre redevelopment from the Community Health and Hospitals Program (CHHP).

Staged redevelopment

- The main Kings Meadows Community Health Centre building was constructed in the 1970s and extended with the addition of the 'Joan Marshall' wing in the late 1980s.

Extensive building condition and site investigations of the Kings Meadows Community Health Centre have revealed that the ageing health facility is no longer fit for purpose, as the building asset has reached the end of its supportive lifecycle. Consequently, a decision has been reached to demolish and replace the two existing buildings.

- Through demolition and replacement with new buildings, the development offers upgraded health facilities that are fit for purpose and enable high-quality and safe care.
- The scope of works for the new renal unit responds to the increased demand for renal services in Launceston and Northern Tasmania and the condition of the existing car parking and immediate building surrounds not meeting local planning and Australian Standards requirements.

Project benefits

The redevelopment of the KMCHC site will deliver:

- A new, fit-for-purpose Renal Health Centre that will enable the expansion of renal services from 16 to 18 treatment bays for improved service delivery, including footings for a future expansion of an additional 6 treatment bays to deliver 24 treatment bays in total (expansion is subject to additional funding).
- Upgrades to the Kings Meadows Community Health Centre car park, services and landscaping to improve traffic and pedestrian access and movement around the Centre and create an accessible, and welcoming Community Health Centre.
- An improved working environment for renal services staff.
- Contribution to the social health model, providing strong community connections through health service and support for people with complex comorbidity illnesses,
- Support and services for people who undergo renal transplant surgery in Melbourne,
- Increased capacity to support the communities' growing needs,
- Community education for training and supporting people for self-management of peritoneal dialysis and home haemodialysis, and

- Agility to meet the projected needs of an ageing Tasmanian population (i.e., more ambulatory care to minimise demand on emergency and acute inpatient services).

Stakeholder engagement

- Kings Meadows Community Health Centre health service providers were engaged during the design phase (from concept to detailed design – tender issue) of the Project.
- This enabled the Project team to gain a thorough understanding of how the centre is used, the existing constraints of the space, future opportunities, and health service delivery requirements.
- We will continue to keep you informed of any changes to local traffic or pedestrian conditions as the Project progresses.
- Stakeholders and community members will be kept up to date throughout the Project through a range of communications and engagement activities.

Phase specific messages

Each phase of the Project will require phase-specific key messages to be developed, as outlined below. These will be developed using key information related to the phase of the project.

Concept design

- A concept design for the new Kings Meadows Community Health Centre has been developed and a Development Application to the City of Launceston was approved in mid-September 2024.

Schematic design

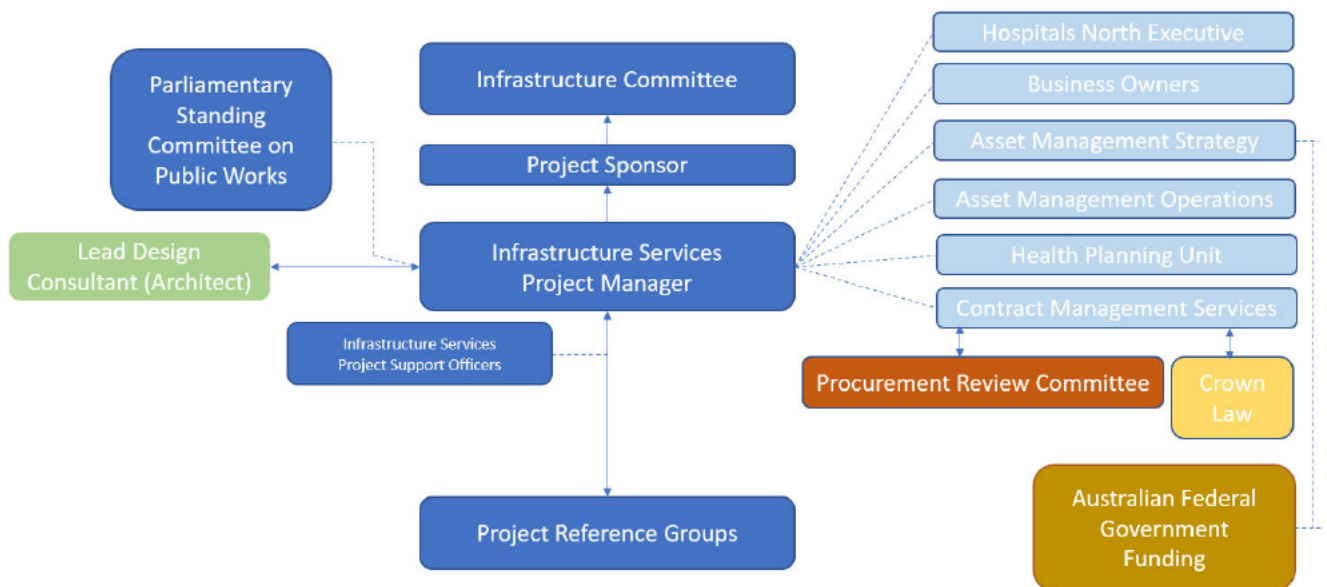
- An amendment to the Development Application was submitted in March 2025, the Project is currently in the detailed design (Tender issue) phase.
- During this phase, the design for the renal unit (demolition and rebuild of the Joan Marshall Building into a new 18-bay renal dialysis clinic) of the redeveloped Kings Meadows Community Health Centre will be refined and developed from schematic design to a final design (tender issue). This includes specifying all the details needed for the building's construction and fit-out inclusive of building services (electrical, mechanical and hydrology) as well as specifications for the interior materials and finishes and loose furniture, fittings, and equipment.
- Kings Meadows Community Health Centre health service providers will continue to be consulted on the space and future health service delivery requirements as the design develops.

Construction Documentation and Tendering

- The Kings Meadows Community Health Centre redevelopment (demolition and rebuild of the Joan Marshall Building into a new 18-bay renal dialysis clinic) is currently in the construction planning and tender phase.
- An Open Tender will be advertised in May 2025, for Tenderers who are prequalified with the Department of Treasury and Finance in the 'Building Contractor – Institutional' Category to a value equal to or greater than \$7 Million and who also have Accreditation under the Australian Government Building and Construction Work Health and Safety (WHS) Accreditation Scheme will be eligible to tender.
- A construction contractor has been chosen for the construction of the new renal unit of the Kings Meadows Community Health Centre redevelopment.

Project Governance Structure

Governance



Project Reference Group (PRG)

PRG Meetings to be chaired by – Project Manager, KMCHC Redevelopment

PRG-Exec



PRG - Management



Sub - PRG's



Revision: 18/3/25

Engagement action plan (with methods and tools)

The following action plan outlines the timeframe for identified engagement methods and communication tools that will be used to achieve the Project's engagement objectives. It also outlines the responsibilities for each action for the engagement consultant (RPS) or the Department (DoH). Internal activities (e.g. preparation, drafting of materials) are italicised and noted as such.

Planned timing / frequency	Method/ tool	Description	Responsibility/ Approval	Stakeholder/s (by group)	Engagement level
Design development (Inform and Consult)					
<i>Complete (Jan 2024 – February 2025)</i>	<i>Key messages</i>	<i>Draft updated project overarching and project phase key messages</i>	<i>RPS and DoH</i>	COMPLETE	<i>N/A</i>
	<i>Email and phone</i>	<i>Establish project email and 1800 number</i>	<i>RPS</i>	COMPLETE	<i>N/A</i>
	<i>DA Communications</i>	<i>During / at approval of the SCEP v1.0, update following drafts for approval:</i> <ul style="list-style-type: none"> <i>Stakeholder emails</i> <i>Letterbox flyer</i> <i>Media release (complete 25 September)</i> <i>REACH Article</i> 	<i>RPS</i>	COMPLETE	<i>N/A</i>
	<i>FAQs</i>	<i>On approval of the SCEP v1.0, and based on approved key messages, draft project FAQs to address stakeholder and community interest, issues and concerns</i>	<i>RPS</i>	<i>Internal activity</i>	<i>N/A</i>

Phase Milestone: Development Application submission – October 2024 – COMPLETE					
Complete 24 October – mid December 2024, following DA submission)	Direct communications	Distribution of tailored stakeholder emails to inform key stakeholders about the upcoming public advertisement of the Development Application for KMCHC and project contact information.	DoH	COMPLETE Primary internal – Decision makers Primary internal – Project control group Primary internal – KMCHC Health Service Leads Primary internal – KMCHC Staff Secondary internal – DoH stakeholders Tertiary external – Advocacy groups	Inform
	Letterbox flyers	Distribution of letterbox flyers, in-person	RPS	COMPLETE Primary external – Near neighbours	Inform
	1:1 or small group briefings (online / in-person, as required)	Schedule sessions, create agenda and supporting materials, attend session and record feedback / discussion outcomes; to inform of upcoming Development Application public advertisement, the project and key timelines including service relocation plans [as known]	RPS / DoH	COMPLETE Primary internal – KMCHC Health Service Leads	Consult
	REACH article	Draft, schedule and publish article with key information on project, upcoming Development Application public advertisement and where to get more information	DoH	COMPLETE Primary internal - All	Inform

				Secondary internal - All Tertiary internal - All	
	Online staff briefing	Develop agenda, schedule and hold online staff briefing to update KMCHC leadership and staff about the new renal unit redevelopment	RPS and DoH	COMPLETE Primary internal – KMCHC Health Service Leads Primary internal – KMCHC Staff	Inform
Project milestone: Planning Permit (DA Amendment approved on 21/3/2025)					
Schematic design (Inform, Consult, Involve) February – April 2025					
Week one (following issue of permit)	1:1 or small group briefings (online / in-person, as required)	Schedule session/s, create consistent agenda and supporting materials to review and gain feedback on schematic design update stakeholders on project, record feedback	DoH [RPS as required]	COMPLETE Primary internal - KMCHC Health Service Leads	Involve
Week one (TBC)	Posters	Design, approve and display posters in the Health Centre to share the overarching design and the external look of the new building to, KMCHC staff and clients	RPS/DoH	WIP Primary internal – KMCHC Health Service Leads Primary internal – KMCHC Staff	Inform
Week one (TBC)	Social media [Facebook]	Drafting, approval, and distribution of social media post sharing project design renders and providing information about next steps	RPS / DoH	Primary external – Clients	Inform

				Primary external – Near neighbours Tertiary external – Local media Tertiary external – Advocacy groups Tertiary external – Broader community	
Week one	Media release	Drafting approval and distribution of media release highlighting the advertising of a Tender for construction and information about next steps - Tender Award & Construction	RPS / DoH	Primary external – Clients Primary external – Near neighbours Tertiary external – Local media Tertiary external – Advocacy groups Tertiary external – Broader community	Inform
Week one / two	Online staff briefing	Schedule session, create agenda and supporting materials, attend sessions and record questions and discussion outcomes. Record session.	RPS and DoH	Primary internal - All Secondary internal - All Tertiary internal - All	Consult
Week two/three	Letter/DL flyer to update	Draft for approval and distribute to residents of McHugh St (as per The List)	RPS/DoH	WIP Primary external – Near neighbours	Consult
Following Online staff briefing	REACH Article	Share recording of the Online Staff Briefing via a REACH article	DoH	Primary internal - All	Inform

				Secondary internal - All Tertiary internal - All	
Following Online staff briefing	Direct communication - Emails	Share recording of Online Staff Briefing and project contact information	DoH	Primary internal – KMCHC Health Service Leads Primary internal – KMCHC Staff	Inform
Two weeks after engagement conclusion	Engagement summary	Collate feedback from each engagement activity, identifying key themes; draft succinct engagement summary	RPS	Primary internal - Decision makers	N/A
(Detail Design) Construction Documentation and Tendering (Inform) February - May 2025					
Q1 / Q2 2025	Advertise tender 3 May 2025	Letter drop residents in McHugh St Posters/flyers on site about the project – visuals	RPS	Primary external – Near neighbours	Inform
Q1 / Q2 2025	DoH website (not available)	Update project webpage with details of current Phase of project	RPS / DoH	All	Inform
Q1 / Q2 2025	Direct communication (email)	Distribute tailored emails to inform stakeholders of project progress, using specific phase key messages	RPS/DoH	Primary internal – Decision makers Primary internal – Project control group	Inform

				Primary internal – KMCHC Health Service Leads Primary internal – Staff Email update subscribers	
Q1 / Q2 2025	Direct communication (email, letters)	Draft and distribute tailored stakeholder emails to provide an update / inform key stakeholders about the status / outcome of the tendering process	DoH [RPS as required]	Primary internal – Decision makers Primary internal – Project control group Primary internal – KMCHC Health Service Leads Primary internal – KMCHC Staff Secondary internal – DoH stakeholders Tertiary external – Advocacy groups	Inform
Project milestone: Awarding of construction contract – September 2025 (TBC)					
October 2025 (TBC)	Media release	Drafting, approval and distribution of a media release highlighting the award of Contract IS 789 for the construction of the new renal unit	DOH/RPS	Primary external – Clients Primary external – Near neighbours Tertiary external – Local media	Inform

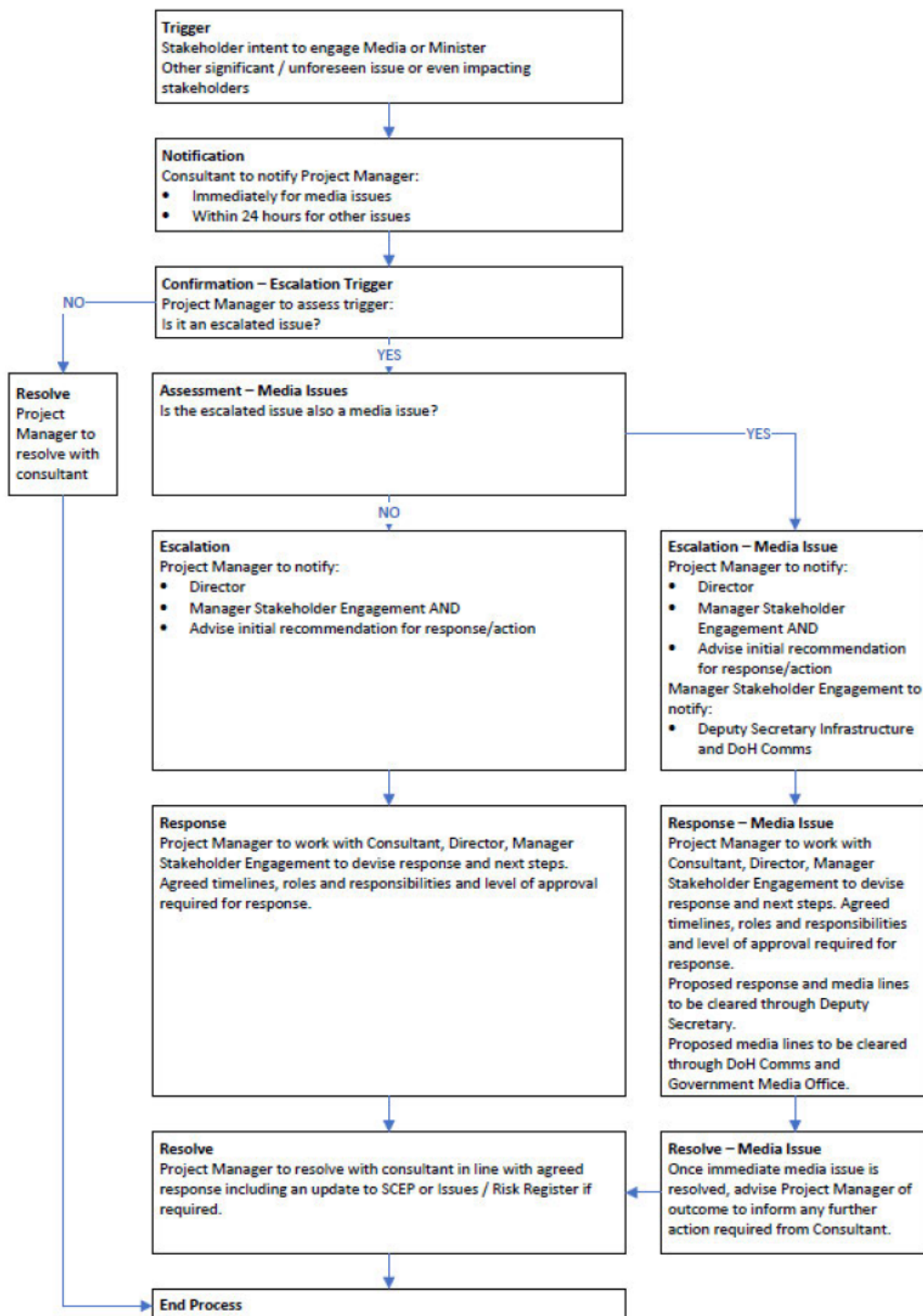
				Tertiary external – Advocacy groups Tertiary external – Broader community	
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Ongoing activities			Responsibility
Ongoing	Direct communication, Monitor and respond	Utilise the Microsoft Teams Page and three Teams within the communicate directly to each group, monitor and respond to feedback, questions and concerns in Chat as required. Record feedback for reporting purposes. Update contact lists / team members as required.	DoH / RPS
Ongoing	Direct communication	Update FAQs to reflect stakeholder issues and concerns	RPS
Ongoing	Direct communication	Refining the SCEP to reflect stakeholder feedback, issues and concerns	RPS
Ongoing	Direct communication	Monitor 1800 number, Project email and Online Survey	RPS
Ongoing	Monitor and respond	Monitor media, stakeholder enquiries, issues, and risk. Record and respond as required	RPS
Fortnightly	Project team meetings	Regular project management team meetings to discuss upcoming actions, responsibilities, potential risks and mitigations	RPS and DoH
Construction (September 2025 – November 2026)			
Communications and engagement activities to be delivered during Construction are not within the scope of this SCEP. They will be determined prior to the commencement of construction and the SCEP updated.			

Escalation process

The Escalation Pathway will be used to manage and resolve escalated stakeholder issues of a general nature that are reported to the consultant. The Escalation Pathway is designed to support appropriate awareness and decision-making to minimise negative impacts and facilitate timely resolution of escalated issues. Triggers for escalation include (but are not limited to): stakeholder intent to engage the Minister or the media and significant emerging issues or risks that do not have a documented approach for mitigation or management. This pathway is not intended to address other project or construction incidents where an incident response protocol or other operational process exists for mitigation / response.

Process Flow – SCEP Escalation Pathway



Reporting and evaluation

Below are the stakeholder engagement reporting and evaluation methods that have been identified for the Project, to measure the effectiveness and impact of stakeholder communications and engagement activities throughout the project.

Delivery timeframe	Method	Description	Objective of the measure	Frequency
Key milestones	Communication materials	Communication materials, produced to support engagement	Confirm quality of materials produced	DoH feedback following each round of engagement
Duration of engagement	Media monitoring	Monitoring media coverage to track reach and issues raised	Measure awareness and community perceptions	Ongoing
Duration of engagement	Registrations of interest	Measure number of people who have signed up to receive project updates via online survey and viewing or accessing project information [social media, website analytics]	Identify the level of reach of communications methods, identify which stakeholders most active	Following each round of engagement
Duration of engagement	Participation levels	Number of people providing feedback via the 1800 number and project email	Effectiveness of engagement methods	Following each round of engagement
Duration of engagement	Participation levels	Participation of directly invited Stakeholders in 1:1 briefings / Small group meetings	Effectiveness of engagement methods	Following each round of engagement
Key milestones	Engagement outcomes summary reports	Draft and deliver summaries of engagement outcomes within agreed timeframes	Measure on-time delivery of engagement outcomes into early design to planning approval phase	Key milestones

Appendix A – Stakeholder identification

Stakeholder classification	Stakeholder group	Stakeholder	Stakeholder representative	Stakeholder Issues/Interests	Level of interest	Level of influence	Level of engagement (refer IAP2)	Stakeholder classification
Government internal	Primary internal – decision makers	Minister for Health,	Jacqui Petrusma	High level of interest in project planning, delivery, scope and timeframes.	High	High	Inform	Indirectly affected
		Minister for Health	The Hon Mark Butler MP	The responsible Minister and rep for Aus Gov in any formal announcements or similar	High	High	Inform	Indirectly affected
		DoH Secretary	Dale Webster	High level of interest in project planning, delivery, scope and timeframes.	High	High	Inform	Indirectly affected
		Infrastructure Oversight Committee (IOC)	Various	High level of interest in project planning, delivery, scope and timeframes.	Medium	Medium	Inform	Indirectly affected
		DoH Deputy Secretary - Infrastructure	Andrew Hargrave	High level of interest in project planning, delivery, scope and timeframes.	High	High	Inform	Indirectly affected
		Deputy Secretary Hospitals and Primary Care, DoH	Brendan Docherty	High level of interest in project planning, delivery, scope and timeframes.	Medium	Medium	Inform	Indirectly affected
	Primary internal – Project Control Group	Business Owner	Julie Seeber Nursing Director Primary Health	High level of interest in project planning, delivery, scope and timeframes.	High	High	Inform-Involve	Directly affected
		Project Sponsor	Fiona Lieutier Chief Executive Hospitals North	High level of interest in project planning, delivery, scope and timeframes.	High	High	Inform-Involve	Directly affected
		Project Sponsor	Michelle Searle Acting Deputy Secretary Community, Mental Health and Wellbeing	High level of interest in project planning, delivery, scope and timeframes.	High	High	Inform-Involve	Directly affected
		IT Support	Ian Mackintosh and Chris Stingle Health ICT	Have been consulted in design development and will continue to hold interest / need to be consulted through final design, service provision and to determined level of support / input required Progress to 'Involve' during later project phases	Medium	Low	Inform-Involve	Directly affected
		Facilities Management Team	Site Coordinator, Aldon Elliot	Need to be consulted through final design, service provision and to determined level of support / input required Progress to 'Involve' during later project phases	Medium	Low	Inform-Involve	Directly affected
	Primary internal – KMCHC Health Service Leads	KMCHC Health Service Lead)	Lesley Dawkins – Coordinator Community Health Centre Lesley.dawkins@ths.tas.gov.au 6777 3005	High level of interest in project planning, delivery, scope and timeframes. Main point of contact for all KMCHC staff / Service Leads.	High	Medium to high	Inform-Consult	Directly affected
		Kings Meadows Dental Clinic (Oral Health Services Tasmania)	Kristy Haycroft 1300 011 013	100% increase from 2 chairs to 4, requires additional sterilising infrastructure, storage and office space	High	Medium to high	Inform-Consult	Directly affected
		Renal Unit	Rose Mace Nurse Unit Manager	Infection Control is requesting an isolation room that will result in sacrifice of other patient bays or home dialysis rooms	High	Medium to high	Inform-Consult	Directly affected
		Podiatry	Claire Massey Manager North	Sterile storage needs and additional ventilation needed in treatment room	High	Medium to high	Inform-Consult	Directly affected

		Physiotherapy	Liv Mitchell Area Manager	No issues currently, time poor and haven't been able to apply themselves fully to design review	High	Medium to high	Inform-Consult	Directly affected
		Child Health and Parenting Service (CHaPS)	Ashlee Sherman Assistant Director of Nursing 1300 011 013	High level interest in impacts on how they operate and potential changes to their tenancy Request 3x oversized consult rooms with specialised joinery along one wall	High	Medium to high	Inform-Consult	Directly affected
		Social Work	Tua Agiava Principal	High level interest in impacts on how they operate and potential changes to their tenancy. Stakeholder is easy going and is an advocate for change.	High	Medium to high	Inform-Consult	Directly affected
		Midwifery	Karen Munro Clinical Coordinator	High level interest in impacts on how they operate and potential changes to their tenancy. Consult room proximity to bathrooms	High	Medium to high	Inform-Consult	Directly affected
	Primary internal – KMCHC Staff	Staff of all health services operating within the KMCHC	Contact through KMCHC Health Service Lead and direct communications channels where required Add to Microsoft Teams Channel, update as required	High level interest in impacts on how they work, changes to their work environment and potential changes to their access to their workplace	High	Medium to high	Inform-Consult	Directly affected
	Secondary internal – DoH stakeholders	Mental Health	sdcmts@ths.tas.gov.au darren.turner@ths.tas.gov.au	General interest in new facility impacts to service delivery (in Phase E if at all)	Low to Medium	Low	Inform	Indirectly affected
		Oral Health Services Tasmania	Northern Tasmania 1300 011 013	Interest in impacts to service delivery throughout construction	Medium	Low	Inform	Indirectly affected
		Renal Services	Lynd, Win winn.smith@ths.tas.gov.au	Interest in impacts to service delivery throughout construction	Medium	Low	Inform	Indirectly affected
		Ambulance Tasmania – North	ambulance.adminnorth@ambulance.tas.gov.au 03 6777 1450	Interest in impacts to service delivery throughout construction	Medium	Low	Inform	Indirectly affected
		Infection Prevention Control Unit	Fiona De Sousa Nurse Manager, Launceston General Hospital Fiona.de.sousa@ths.tas.gov.au	General interest in new facility impacts to service delivery (in Phase E if at all)	Low to Medium	Low	Inform	Indirectly affected
		Transportation Unit	Whelan, Lia-Jane lia-jane.whelan@health.tas.gov.au	Final design, service provision and level of support / input required	Medium	Low	Inform	Indirectly affected
	Tertiary internal – Support services	Community Equipment Scheme	Bucher, Andrea M andrea.bucher@ths.tas.gov.au	Final design, service provision and level of support / input required	Medium	Low	Inform	Indirectly affected
		Medical Records Storage	michael.rowley@health.tas.gov.au	Final design, service provision and level of support / input required	Medium	Low	Inform	Indirectly affected
		Pharmacy Statewide	Liza Case	Resupply services, level of interest in final design, changes to service provision / supply	Medium	Low	Inform	Indirectly affected
Community	Primary external – Health consumers	Health consumers / general public who visit the site (either regularly such as renal or casually)	Various	Construction impacts	Medium	Medium	Inform-Consult	Directly affected
	Primary external – Near neighbours	McHugh St Residents	Properties from numbers 1-21 McHugh Street (refer to the List provided for mailouts)	Final design Construction impacts, access urban design and landscaping	Medium	Medium	Inform-Consult	Directly affected

		Bakery & Cafe – Banjo's Kings Meadows	(03) 6343 4975	Construction impacts	Low	Low	Inform	Directly affected
		Pharmacy + Co Kings Meadows	(03) 6344 1484	Construction impacts	Low	Low	Inform	Directly affected
		Tamar Valley Food and Wine Boutique Tours	Jan tamarvalleytours@gmail.com 0474 496 724	Construction impacts	Low	Low	Inform	Directly affected
		Lemon Tree Chinese Massage	0402 378 515	Construction impacts	Low	Low	Inform	Indirectly affected
		Launceston Golf Club	Tony Powell General Manager generalmanager@launcestongolfclub.com.au	Construction impacts, access	Medium	Medium	Inform-Consult	Indirectly affected
		H&R Block Tax Accountants – Kings Meadows	(03) 6348 4100	Construction impacts	Low	Low	Inform	Indirectly affected
		Hair United	0499 446 131 Reception@hairunited.com.au	Construction impacts	Low	Low	Inform	Indirectly affected
		Kings Meadows Seafood	(03) 6344 4068	Final design Construction impacts	Low	Low	Inform	Indirectly affected
Government external	Secondary external – Other Government stakeholders	Kings Meadows Florist	0472 731 300	Final design Construction impacts	Low	Low	Inform	Indirectly affected
		Local Government - City of Launceston	Matthew Garwood (Mayor) 03 6323 3101 0497 281 841 Mayor@launceston.tas.gov.au Shane Eberhardt General Manager Infrastructure & Assets	General interest in new centre	Medium	High	Inform	Indirectly affected
		Australian Government – House of Representatives	Bridget Archer MP Bridget.Archer.MP@aph.gov.au	General interest in new centre	Medium	Low	Inform	Indirectly affected
		Legislative Council Representative – Launceston	Rosemary Armitage MLC (Independent) rosemary.armitage@parliament.tas.gov.au	General interest in new centre	Medium	Low	Inform	Indirectly affected
		Legislative Council Representative – Windermere	Nick Duigan MLC nick.duigan@parliament.tas.gov.au	Sent a letter on 1 June 2023 regarding the current condition of the Centre in relation to a maintenance issue (leaking roof) in the Renal Unit. A reply was sent outlining how the issue had been resolved and informing Mr Duigan of the redevelopment.	Medium	Low	Inform	Indirectly affected
		Child Safety Services	Department of Communities Tasmania Coates, Andrea Andrea.coates@decyp.tas.gov.au	General interest in new facility impacts to service delivery (in construction phase if at all)	Low to Medium	Low	Inform	Indirectly affected
		Aboriginal Health Service, Launceston (Tasmanian Aboriginal Corporation)	Lisa Coulson Practice Manager 03 6332 3800 launceston@tacinc.com.au	General interest in new centre	Low	Low	Inform	Indirectly affected
		Tasmanian Fire Service – Northern Region Office	fire@fire.tas.gov.au PH: 03 6777 3666	Interest during construction phase regarding access, assessment/s, safety	Medium	Medium	Inform-Involve	Indirectly affected

Non-government	Secondary external – Other non-government stakeholders	Unions (ANMF, AMA, HACSU)	Contact through Project Sponsor / other DoH Executive level	High level of interest in project scope, renal service, service relocation, project timelines and delivery	High	Medium	Inform	Indirectly affected
		Launceston Chamber of Commerce	Alina Bain Executive Officer ceo@lcc.asn.au	General interest in new centre	Low	Low	Inform	Indirectly affected
Other	Tertiary external – Local media	Various	Contact through DoH Communications Team	Medium level interest in project, scope, impacts and timeframes	Medium	Medium	Inform	Indirectly affected
	Tertiary external – Broader community	Joan Marshall Trust	David Marshall (Joan Marshall's son) 0447 382 411 dg.marshall@gmail.com	Joan Marshall is the eponym for the Joan Marshall Wing of the current Kings Meadows Community Health Centre Joan passed away in August 2023. Contact with her family in 2024 confirmed their consent to continue the use of her name for the new building.	Medium	Low	Consult-Involve	Indirectly affected
		Launceston and surrounds community	N/A	Low to Medium level interest in the project	Low / Medium	Low	Inform	Indirectly affected
	Tertiary external – Advocacy groups / Other	Primary Health Tasmania – Community Advisory Council	Gabe Gossage (Chair) Ellen MacDonald (Health Consumers Tasmania nominee)	High level interest in potential impacts on their areas of interest	Medium	Low	Inform	Indirectly affected
		Citizen Advocacy Launceston	Program Manager: Nicole Marquis (03) 6331 2177 manager@citizenadvocacylton.org.au	High level interest in potential impacts on their areas of interest	Low	Low	Inform	Indirectly affected
		Families Tasmania	Manager: Mel Knuckley Mel@familiestasmania.org.au 0407 512 315	High level interest in potential impacts on their areas of interest particularly with Chaps	Low	Low	Inform	Indirectly affected
		Disability Advocacy Network Australia (DANA)	info@dana.org.au Office is in NSW/ ACT	High level interest in potential impacts on their areas of interest particularly with CHaPs	Low	Low	Inform	Indirectly affected
		Kins Raising Kids Tasmania	0428 144 076 admin@kin4kids.org.au secretary@kin4kids.org.au	High level interest in potential impacts on their areas of interest particularly with CHaPs	Low	Low	Inform	Indirectly affected

Appendix B – Stakeholder risk and opportunities classification tool

ID No.	Risk, Issue or Opportunity Description	Likelihood	Consequence	Risk Level	Stakeholder(s) / group	Power	Interest	Stakeholder Classification	Proposed mitigation
1	Complexity The complexity of the project, in terms of location, site access, ongoing service provision during construction, some staff and client relocation during construction, competing and potentially conflicting stakeholder needs/ preferences/ priorities. Noting that disruption to the operation of the facility and the impact on community will be unavoidable during the duration of the build.	Moderate	Low	Moderate	Project Working Group Staff Near neighbours	High Med Low	High Med High	Government internal Government internal Community	<ul style="list-style-type: none"> Multiple communication channels promoting engagement opportunities Develop consistent but Phase and stakeholder specific communication materials to support engagement Deliver Phase and stakeholder specific engagement activities Transparent reporting of engagement outcomes 'Open' engagement processes to capture feedback from cross-section of stakeholders
2	Limited stakeholder engagement Limited engagement with external stakeholders including near neighbours, and other interest groups to date. Consultation has been limited to government agencies due to the confidential nature of the project, prior to the Minister's approval and announcement.	Moderate	Low	Moderate	Near neighbours Other government stakeholders Other interested groups / stakeholder Other government stakeholders Near neighbours Local media Broader community	Med Low Low Low Low Med Low	Med Med Med Med Med Med Low	Community Government external Government external Community	<ul style="list-style-type: none"> Multiple communication channels promoting engagement opportunities, including direct invitation to key stakeholders Tailored key messaging Transparent reporting of engagement outcomes Targeted engagement opportunities Multiple engagement opportunities during each engagement round
3	Community perceptions Perceptions about what might be happening to the current health centre, the site and the local area, how services will be maintained or delivered throughout the construction period may create concern amongst the local community	Low	Low	Low	Near neighbours Clients Broader community	Low Low Low	Med Med Med	Community	<ul style="list-style-type: none"> Multiple communication channels promoting engagement opportunities Online survey to capture feedback from community members Media release focusing on project timeframes, final designs and project benefits

4	Perceptions of project communication material Perceptions of the new building and surrounds from release concept designs and renders leading to misconception and/or concern	Low	Low	Low	All	Med	Med	All	<ul style="list-style-type: none"> Prior to releasing any concept designs / renders, prepare pro-active and reactive messages in response to questions, issues or concerns regarding the proposed designs Engagement activities to include sharing information about the final design of the KMCHC including maps and renders
5	Rental properties McHugh Street rental properties, risk that communication does not reach tenants and/or landlords due to property change over	Low	Low	Low	Near neighbours	Low	Low-Medium		<ul style="list-style-type: none"> Document McHugh Street tenancy details from LIST and identify any properties where multiple communications may be required eg Letterbox flyer provided in envelope addressed to tenant and/or landlord Consider door knocking to speak to residents Update stakeholder communications log with any information received during community engagement activities regarding communications preferences
6	Planning and design process – Representations to Council Commencement of Design Development will be subject to receipt of a Planning Permit for the proposed development. Representations to Council during the public notice period and/or requests for information causing delays in the provision of the Planning Permit ie requirements for design changes and re-submission.	High	Moderate	Moderate	Near neighbours	Med	Med	Community	<ul style="list-style-type: none"> Development of communications to raise awareness of the Project, share the concept design and inform stakeholders about the DA submission Media release focusing on project timeframes, sharing the concept design and highlighting project benefits Monitoring of 1800 number, project email and online survey to address any issues, concerns, risks
					Project Working Group			Government internal	
					Broader community			Community	
7	Traffic management / flow Access to the site is constrained, with all vehicles currently entering and exiting the centre via a very narrow residential road, McHugh Street.	Low	Low	Low	Near neighbours	Med	Med	Community	<ul style="list-style-type: none"> Email communication, letterbox flyers and construction information templates prepared prior to Phase E commencement
					Broader community				
8	Project funding Commencement of Construction Documentation & Tendering will be subject to funding approval by the Department to support the pre-tender cost estimate and all associated project costs.	Low	Low	Low	Decision makers	High	High	Government internal	<ul style="list-style-type: none"> Prepare funding approval specific key messages Email communications to inform of funding decision and any changes to project timelines 1:1 Briefings and small group meetings as required.
					Project Control Group	High	High		
					DoH stakeholders	Med	Med		
					Project Working Group	Med	High		
					Other government stakeholders	Low	Low	Government external	
9	Final design – Stakeholder impacts Lack of agreement on specific and/or final design requirements / service inclusions and general discontent about the revised two stage delivery creating negative sentiment toward the project, impacting stakeholder relationships and project progress.	Low	Med	Low	Project Working Group	Med	High	Government internal	<ul style="list-style-type: none"> 1:1 briefings and small group meetings to update on designs, requests and considerations Posters to communicate final design and highlight benefits

10	Union involvement Change of project scope resulting in service providers engaging Unions and the media to voice their concerns	Mod	Mod	Mod	Advocacy Groups / Other	Med	High	Other - External	<ul style="list-style-type: none"> Media monitoring and reporting to Decision Makers Development of response as required
11	Change of project scope Additional external market factors may result in a further change of scope, potential alternations (reduction) to the previously communicated schematic design, change to staged approach or inability to complete the project with current funding.	Moderate	Moderate	Moderate	Decision makers	Med / High	Med / High	Government internal	<ul style="list-style-type: none"> Development of tailored key messaging to address any change of scope 1:1 briefings as required
					Project Control Group	Med / High	Med / High		
					Project Working Group	Low / Med	High		<ul style="list-style-type: none"> Development of tailored key messaging to address any change of scope in previously communicated project scope / design 1:1 briefings and small group meetings to update on project scope, any required alterations/changes
					DoH Stakeholders	Low	Med		<ul style="list-style-type: none"> Development of tailored key messaging to address any change of scope in previously communicated project scope / design Group / online briefings as required

12	Decanting plan The Service to nominate staff to relocate (as required) to enable vacant possession of the Joan Marshall building for its demolition to facilitate the construction of the new renal unit	High	High	high	Decision makers	High h	high	Government internal	<ul style="list-style-type: none"> • Service to provide requirements for nominated staff to accommodation services to enable them to identify suitable temporary accommodation for approximately. 14 months during the construction of the new renal unit • Infrastructure Services to assist accommodation service where required



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