

INTERNAL BRIEFING Self-Initiated Briefing

Purpose:

To provide advice to the Randwick Campus Redevelopment (RCR) Project Control Group (PCG) regarding the endorsed Community and Consumer Engagement Strategic Plan July 2018 – June 2022.

Background and Key Issues:

- In 2017, the Randwick Campus Redevelopment (the project) Planning Development Committee endorsed a co-design approach to consumer engagement (refer to **T17/37417**).
- The project's community and consumer engagement vision is to obtain input from consumers and the community in determining the needs, concerns and priorities on all relevant issues such as the physical nature of facilities, service provision, training and education, patient information and accessibility as they relate to the project.
- The vision endeavours to uphold a patient-centred approach to health care throughout the course of the project.
- Following this commitment, a working group was established to develop a charter for engagement, which then formally transferred into a committee in February 2018 (refer to **T18/6549**).
- The committee, now known as the RCR Community and Consumer Advisory Committee (CCAC), outlined a set of goals and objectives for 2018, and part of this was to develop a strategic plan.
- The strategic plan is to guide the direction of consumer engagement by providing a framework for the practical application of consumer and community participation in planning, designing and enhancing the patient experience.
- In order to assess the effectiveness of our community and consumer engagement strategies, this plan will be monitored and evaluated internally on an ongoing basis.
- The CCAC will play a key role in monitoring the use of the strategic plan by sourcing the presence of project related patient and/or consumer experience recounts and consumer and community engagement data as part of the review and governance process.
- Such assessment will minimise the risk of not delivering a project that is consumer driven, values based, reputable and well governed.
- The plan has been developed in partnership with the members of the committee and was endorsed at the CCAC June 2018 meeting. **TAB A T18/36210**

Risk

There are no unmitigated risks

Recommendation:

That the CCAC strategic plan be approved and provided to the PCG for noting.

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Date: 20 June 2018

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Consultation: Community and Consumer Advisory Committee Strategic Plan, Sub-Group, Meagan Schlecht, Communications Manager, Health Infrastructure, Nick Seaby, Director, Communication, Health Infrastructure, Anthony Brown, Executive Director, NSW Consumers

- Approval:**
1. Trish Wills SESLHD Redevelopment Manager – *approved electronically 27/06/2018*
 2. Tobi Wilson, General Manager, Prince of Wales & Sydney/Sydney Eye Hospitals
 3. Return to author to provide to PDC Secretariats



2-2-08

Community and Consumer Engagement Strategic Plan

July 2018 – June 2022



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Document Control

Version	Date	Revision Description	Status
1.0	21.05.2018	Chelsea Wade Document author (first draft)	Draft
2.0	22.05.2018	CCAC Sub-group Committee Document commentary	Draft
3.0	12.06.2018	Meagan Schlecht and Nicky Seaby Document commentary	Draft
4.0	18.06.2018	John Patterson and Joy Wilson Document commentary	Draft
5.0	13.06.2018	Chelsea Wade Document amendment and update	Final Draft

Endorsement

Approved by the Community and Consumer Advisory Committee Chair



Date: 26.6.18

Bob Wilson

Chair, Randwick Campus Redevelopment Community and Consumer Advisory Committee

Approved by Redevelopment Manager



Date: 27-6-18

Trish Wills

Prince of Wales Hospital Redevelopment Manager

Approved by the Project Sponsor



Date: 2.7.18

Tobi Wilson

General Manager Prince of Wales Hospital Sydney/Sydney Eye hospitals

1. Background and purpose

The Randwick campus is home to a cluster of leading health, education and research partners including the South Eastern Sydney Local Health District, Sydney Children's Hospital Network and the University of New South Wales.

The Randwick campus is identified as an Education and Health Strategic Centre and a Health and Education Super Precinct in the Greater Sydney Commission's 'A Plan for Growing Sydney (2014)' and Draft Central District Plan (2017), respectively. The Randwick Campus Redevelopment (the project) is the catalyst project to realise the strategic objectives of the Greater Sydney Commission for Randwick.

Through identification of the stakeholder environment in geographical terms and the implication of upgrading the hospital in isolation with co-located facilities, the NSW Government has followed world best-practice in ensuring stakeholders are engaged in developing Randwick as a strategic centre to develop a long-term vision for growing Randwick as a leading hub of health care, clinical research and education.

In 2017, the Randwick Campus Redevelopment Planning Development Committee endorsed a co-design approach to consumer engagement, to empower the Randwick Campus Redevelopment project team to better understand and meet the needs of patients, families, carers and the community.

Consumer engagement refers to the wide range and strategies via which consumers are involved in the planning, service delivery and evaluation of NSW health care. This includes incorporating partnerships between patients and their family and/or carers and health professionals where care is provided at an individual level, as well as partnerships with consumers at a health service level.

By proactively establishing a meaningful and strategic plan with consumer consultation and input, we set a framework for the practical application of consumer and community participation in planning, designing and enhancing the patient experience.

The document compliments and builds upon the *Randwick Campus Redevelopment: Communications and Engagement Strategy*, and provides a more detailed approach of ensuring the community's voice is reflected in decisions made for the project. It also creates a robust framework of evaluating opportunities for consumers to share stories and experiences, as well as measuring how consumers have had a say in enhancing services for future patients, families and carers.

Finally, this document will act to exemplify how a patient-centred care approach is upheld when designing a new hospital and associated services.

2. What the vision is

2.1 Randwick Health and Education Precinct Vision

For the Randwick Education and Health Precinct to be globally renowned for excellence in Health, Teaching, Education and Research and to deliver the highest standard of care to patients in world class facilities.

People will also receive compassionate personalised care at home or in a place that is as close as possible to their home by clinicians who are informed by the latest available evidence.

People will be empowered to take responsibility for their own health and wellbeing and supported to manage periods of ill health. We will focus on our community's assets, supporting health literacy and advocating for healthy neighbourhoods, so that the people we serve are able to maintain their health and wellbeing.

2.2 Randwick Campus Redevelopment Vision

Recognised globally for exceptional care, enabling healthier lives

2.3 Community and Consumer Engagement Vision

To obtain input from consumers and the community in determining the needs, concerns and priorities on all relevant issues such as the physical nature of facilities, service provision, training and education, patient information and accessibility as they relate to the Redevelopment. The vision endeavours to uphold a patient-centred approach to health care throughout the course of the project.

2.4 Patient-Centred Approach

The patient-centred approach to health care treats each person respectfully as an individual human being and not as a condition to be treated. It involves not just the patient, but also families, carers and other supporters. It is concerned about the patient's comfort and surroundings as well as their beliefs and values.

A patient-centred approach makes care safer and of higher quality. It provides demonstrable personal, clinical and organisational benefits. It also satisfies an ethical imperative – involving patients in their own care and in the planning and governance of the system. Patient-centred care is particularly important among vulnerable or disadvantaged populations, such as the young, elderly, disabled or mentally ill; those from CALD; and Aboriginal and Torres Strait Islander communities. Patient-centred care principles and approaches are considered to be an opportunity to work towards addressing the inequity and obstacles that some patients, their families and carers can face. It is also seen as a way of supporting greater involvement of all people in healthcare processes, and potentially achieving better health outcomes.



3. What the project is

The NSW Government has committed \$720 million to Randwick Campus Redevelopment to build a new Acute Services Building for the Prince of Wales Hospital and realise the vision for the Randwick Health and Education Precinct.

The new Acute Services Building is expected to open in 2022 and will include:

- A new adult Emergency Department
- An expanded Psychiatric Emergency Care Centre (PECC), adjacent to the Emergency Department
- An expanded Intensive Care Unit
- Ten inpatient units (IPUs) with contemporary facilities to support new models of care
- New operating theatres for the Randwick Hospitals' Campus
- An expanded Central Sterilising Service Department
- A Medical Assessment Unit providing for rapid assessment of patients directly referred from the community
- A new helipad to support all campus partners
- Education and research spaces that will support collaborative clinical research and innovation

4. Who we are and what we do

The Randwick Campus Redevelopment Consumer and Community Advisory Committee

The Randwick Campus Redevelopment (RCR) Community and Consumer Advisory Committee (CCAC) is the primary body representing the interests of health care consumers and community members for the project.

CCAC has the capacity, credibility and authenticity to ensure that decision makers hear and understand the consumer perspective.

Our members are diverse: they cover individuals and collective bodies with key conditions, needs and issues across the health system. Our members include professionals with a key interest in healthcare consumer affairs and evaluation.

The purpose of the RCR CCAC is to ensure that a clear and diverse consumer and community voice and perspective is integrated into the Randwick Campus Redevelopment.

The RCR CCAC will provide leadership, connection, coordination and support to strengthen consumer and community engagement across the system to improve the delivery of care and the overall patient experience in respect of the RCR.

We will partner in the design of health facilities and care systems within the new Acute Services Building to ensure person-centred compassionate care is delivered and that the wellbeing of the patient, carer and their family is at the heart of every decision made. We will also focus on empowering patients to be genuine partners of their own healthcare.

This includes adopting co-design opportunities, along with integration of health and social care with other service providers and agencies, to improve access to and delivery of better person-centred care and enhanced community empowerment and resilience.

Members of the CCAC will continually explore ways to expand strategic and practical mechanisms of engagement for the RCR. The CCAC ensures there are forums and platforms that are powerful modes of co-design, along with benchmarking consumer and community involvement with other hospitals and organisations (appendix 2).

The RCR CCAC will also conduct important ongoing evaluation of consumer and community representation throughout the course of the project by examining key participation methods and by establishing robust feedback mechanisms. These will include but not be limited to, the use of feedback and issue forms which are logged and tracked; creating representation databases to assist with quantifying participation; and assessing modes and platforms that facilitate appropriate consumer and community representation.

5. How we will work

5.1 Guiding principles of design

The project's guiding principles of design supports partnering with consumers, and facilitates community and consumer participation in project planning. The principles have been derived from the Greater Randwick Integrated Health Services Plan, the Prince of Wales Hospital (POWH) and Community Health Service 2016/17 Priorities, the Randwick Health Collaboration, Greater Randwick Urban Masterplan Values and NSW Ministry of Health CORE Values. These are:

- Patients first
- People – co-located and collaborative
- Services are integrated and not duplicated
- Evidence-based and/or evidence generating
- Efficient, sustainable design
- Flexible and future ready
- Supports the delivery of patient care beyond the boundaries of the hospital

5.2 Participation Framework

Collaborate

High level engagement, forming of partnerships with community members in all aspects of the project cycle; CCAC membership, involved in the development of stakeholder engagement strategies relating to community and consumer engagement.

Involve

Consumers are engaged throughout the project cycle to ensure that community needs are properly considered; Options for involvement include Project User Group (PUG) participation, focus and work group participation, reporting function to the CCAC.

Consult

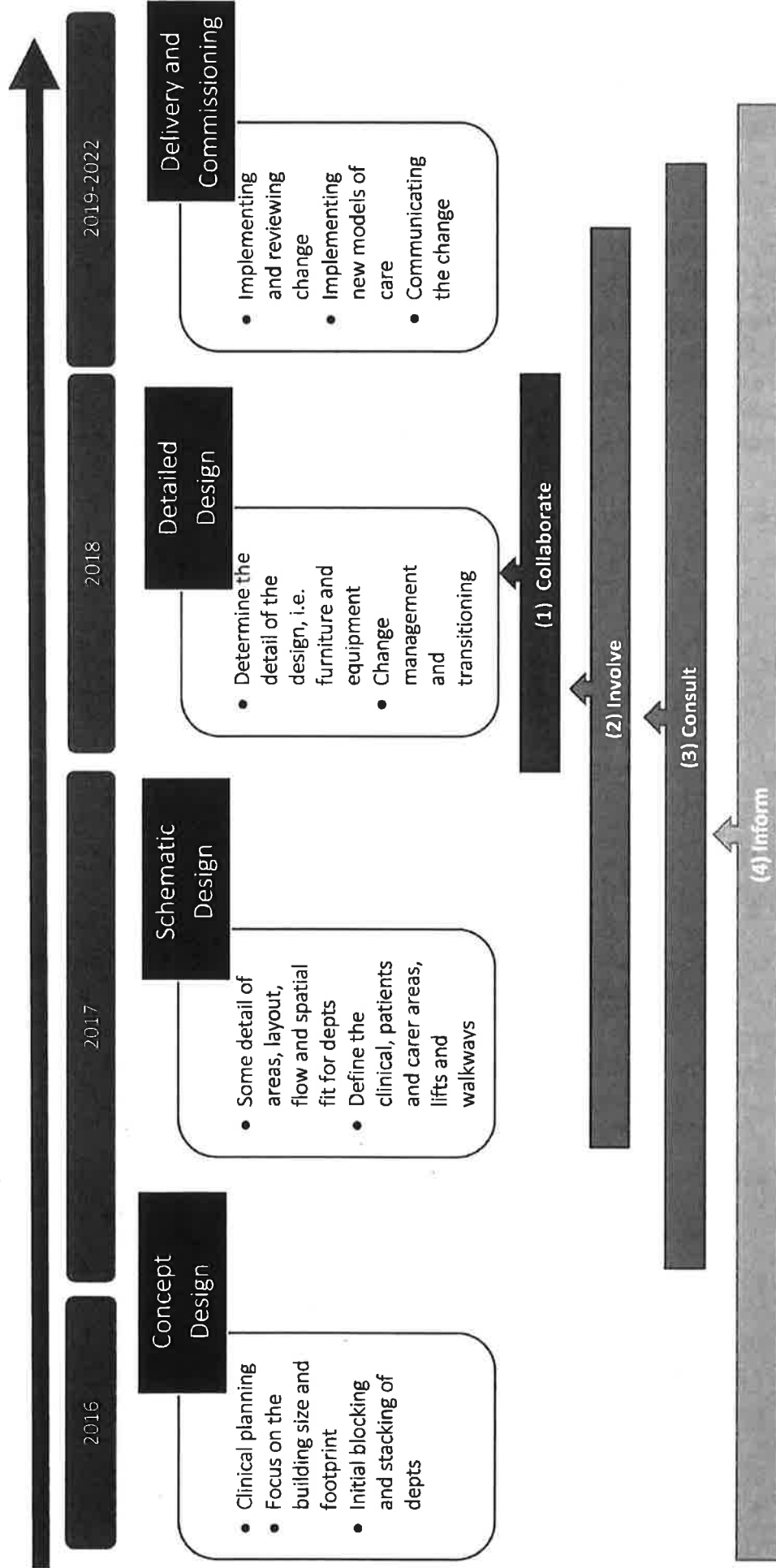
Two-way communication, opportunity for the community to engage and influence the Redevelopment; Community and consumers provide feedback on project planning through surveys, community group briefings, public information sessions, residential door knocks, social media commentary and statutory planning pathways submissions.

Inform

One-way communication, information sharing; General public receive information about the project through channels such as fact sheets, websites, community updates sent via mail, advertising, patient information.

5.3 Participation on a spectrum

Figure 1



6. Our key concepts

Partnering with consumers is a complex area that involves different concepts and terms. The measurement and evaluation of activities and outcomes in this area is also complex.

Partnerships at the level of service, department or program of care, or a whole health service improve the health service, experiences and outcomes for patients, carers, families, the community and the workforce.

This is done by drawing on the knowledge, skills and experiences of people who are using the health service, have used it in the past or may use it in the future, or who have wider experiences as consumers and community members.

6.1 Partnerships at the level of a service, department or program of care

This level of partnership relates to the organisation and delivery of care within specific areas. It involves the participation of patients, carers, families and consumers in the overall design of the service, department or program. This could include membership in redesign teams, and participating in planning, implementing and evaluating change.

6.2 Partnerships at the level of the health service

This relates to the involvement of consumers in overall governance, policy and planning. This level overlaps with the previous level in that a health service is made up of various services, departments and programs. Partnership at the health service level involve engaging consumers and community representatives as members in key governance committees in areas such as patient safety, facility design, guideline development and research. This level can also involve partnerships with local community organisations and members of local communities.

7. Our standards

Evaluating the CCAC and consumer input for the project will be aligned with the *Australian National Safety and Quality Health Service (NSQHS) Standards*. The aim of the NSQHS Standards is to protect the public from harm and improve the quality of health service provision.

The CCAC's ambition is prescribed by Standard 2: Partnering with Consumers. The intention is to create a health service in which there are mutually beneficial outcomes by having:

- Consumers as partners in planning, design, delivery, measurement and evaluation of systems and services.
- Patients as partners in their own care, to the extent that they choose.

7.1 Partnering with Consumers Criterion

One

Clinical governance and quality improvement systems to support partnering with consumers. Systems are designed and used to support patients, carers, families and the community to be partners in healthcare planning, design, measurement and evaluation

Two

Partnering with patients in their own care. Systems that are based on partnering with patients in their own care are used to support the delivery of care. Patients are partners in their own care to the extent they choose.

Three

Health literacy. Health service organisations communicate with patients in a way that supports effective partnerships.

Four

Partnering with consumers in organisations design and governance. Consumers are partners in the design and governance of the organisation.

8. Our Objectives

The CCAC's objectives reflect the vision, have been informed by NSQHS' Standard 2 and have considered our key concepts of partnering with patients, consumers and the community.

The objectives act to ensure the Randwick Campus Redevelopment develops, sustains and evaluates patients, consumers and the community's needs, concerns and priorities on all relevant issues related to the project. At the foundation of each objective is the principle of patient-centred care. The objectives are themed with two philosophies to consumer representation drawn from the key concepts, this includes a patient experience approach; and a consumer engagement approach (appendix 2).

Objective One

Partner with patients, carers and the community as a whole to ensure diverse consumer and community voices are involved in the co-design of the campus' change and innovation.



Objective Two

Generate new and harness existing methods to collaborate, shape and co-create patient-centred hospital and campus designs.



Objective Three

Partner strategically to achieve a patient-centred health facility that is socially and ethically competent to all population groups.



Objective Four

Evaluate, sustain and grow a consumer driven, values based, reputable and well governed redevelopment.



8.1 Objective One

Partner with patients, carers and the community as a whole to ensure diverse consumer and community voices are involved in the co-design of the campus' change and innovation.

Strategies

Consult and communicate with hospital and campus consumers and representatives of the community to understand their issues, experiences and desired outcomes.

Build partnership skills to make a positive contribution and support participation in co-design and decision making.

Promote opportunities for partners to share experiences and expertise and provide input into the RCR design and planning phases.

Promote the benefits and manage a process to ensure diverse consumer, carer and community representation in influential healthcare advisory committees, reviews and taskforces.

Activities

We will put these strategies into effect by:

- Seeking member input into design submissions and briefings via project user groups and other mechanisms as appropriate
- Seeking member input into publications and campaigns
- Organising meetings and workshops with members on key issues and/or design elements
- Running a strong consumer carer and community representative program and having an active plan to diversify its participants
- Working with the LHD to identify and support emerging consumer and community leaders
- Providing training and skills development to representatives through a structured program

Outcomes and Success Factors

We will know we have been successful because we have evidence of:

- Members have been given the opportunities to provide input, and have their experiences and advice collected and incorporated into design elements
- A members' only feedback form used regularly to seek feedback and inform program
- Consumer and community representatives participate on model of care reviews and evaluations
- Publications and campaigns have been developed jointly with members where there is a common interest
- Workshops and other forums address issues identified by members and are well attended with outcomes disseminated across the project team
- There are consumer and community representatives on governance and/or high-level committees

8.2 Objective Two

Generate new and harness existing methods to collaborate, shape and co-create patient-centred hospital and campus designs.

Strategies

Undertake and promote the use of patient-centred research and evaluation in evidence-based health systems development.

Pursue collaborations within the campus environment, including existing forums, for patient-centred healthcare.

Activities

We will put these strategies into effect by:

- Undertaking reviews and, where possible, practical investigation of methods supporting patient-centred hospital design
- Promoting community and consumer engagement through existing networks to ensure the consumer voice is heard
- Pursuing opportunities for presentations and participation in existing campus' patient support groups

Outcomes and Success Factors

We will know we have been successful because we have evidence of:

- The CCAC seeking avenues for co-designing is supported and assisted by key project stakeholders
- Consumer and community representatives are active in the design and implementation of co-design activities undertaken by the project team
- Consumers and community representatives actively participate in all stages of co-design program/activity evaluations
- Consumer perspectives are included in a wide range of presentations and workshops
- Campus staff accept and consider consumer input as business as usual, and useful for identifying how to improve the patient experience

8.3 Objective Three

Partner strategically to achieve a patient-centred health facility that is socially and ethically competent to all population groups.

Strategies

Engage with a broad range of health care and other consumer organisations to inform and collaborate on health design and associated issues.

Develop partnerships and alliances with key stakeholders to advance priority and vulnerable patient-centred health issues.

Activities

We will put these strategies into effect by:

- Identifying and actively participate in key stakeholder alliances and partnerships
- Participating in key stakeholder meetings
- Developing joint design elements and proposals with partners
- Working on campaigns and other advocacy initiatives on priority issues

Outcomes and Success Factors

We will know we have been successful because we have evidence of:

- CCAC key members and project partners with key alliances, and act as spokespersons for the alliances where appropriate
- Key stakeholders seek CCAC out as a partner in campaigns and advocacy work on a range of health issues or concerns
- CCAC is visible as part of major campaigns on health initiatives or issues relating to the redevelopment

8.4 Objective Four

Evaluate, sustain and grow a consumer driven, values based, reputable and well governed redevelopment

Strategies

Adopt governance practices that uphold responsibility, accountability, transparency and compliance and a culture that promotes continuous improvement.

Implement a database/program that is relevant to members, informs them and maintains their active engagement.

Ensure efficient and effective management of the CCAC's member's resources and its operations.

Activities

We will put these strategies into effect by:

- Introducing a Committee communication pathway for members to communicate key decisions or issues discussed during the design and planning phases
- Undertaking review and appraisal for all committee members and representatives
- Holding monthly meetings following standard governance processes to evaluate participatory processes, input to communications strategies, and to receive strategic presentations
- Undertaking a mid-term review of the Strategic Plan
- Holding review meetings and implementing strategies to increase participation
- Consolidating issue reports, feedback and governance structures with key CCAC members and LHD
- A Redevelopment Consumer and Community Engagement Monthly Report will be established and presented to each CCAC

Outcomes and Success Factors

We will know we have been successful because we have evidence of:

- CCAC will meet all of its regulatory requirements
- Evaluations and reviews of performance are predominately positive and constructive or negative feedback is acted upon and actions reported back
- Membership and participation is seen as a usual part of design
- Member satisfaction and perceptions of CCAC will be benchmarked and regularly measured
- There will be enhanced input into all aspects of the RCR from organisations identified as representing the broad health consumer community

9. How we will know we have achieved the vision

9.1 Monitoring and Evaluation

In order to authenticate the effectiveness of our community and consumer engagement strategies and the magnitude of meaningful collaboration in project design, this plan will be monitored and evaluated internally on an ongoing basis.

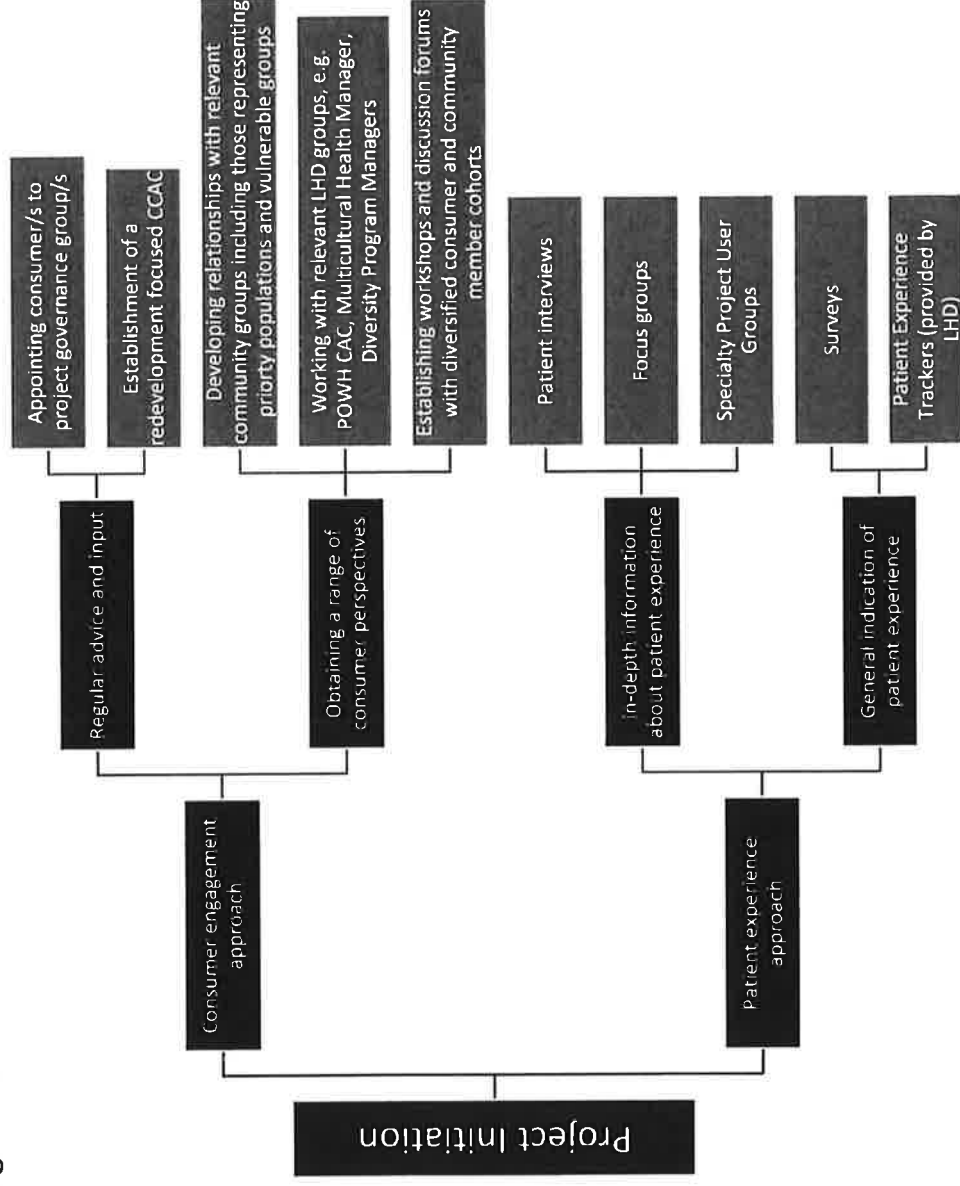
The CCAC will play a key role in monitoring the use of the Strategic Plan by sourcing the presence of project related patient and/or consumer experience accounts and consumer and community engagement data as part of the review and governance process.

Evaluation of the Strategic Plan will involve:

- Annual review of the volume of activities the CCAC members and other project related consumers and community members have been involved in, from basic involvement (advice only) through to more complex involvement (strategy and approach).
- Annual review of the objectives' outcomes and success factors.
- Development of assessment tools and feedback mechanisms.
- Critical analysis of assessment tools and feedback mechanisms.
- Measure of website traffic and analytics.
- Internal and external community group member consultations, projects involved in and level of contribution.
- Survey of consumers engaged with the Randwick Campus Redevelopment.
- Survey of staff engaged with the Randwick Campus Redevelopment.

The evidence base about consumer partnership and associated effectiveness is building, but there is not yet an endorsed best-practise approach. The above evaluation approaches will provide consumer engagement input and outcomes in a qualitative and quantitative manner. It will be the responsibility of the CCAC, in collaboration with other internal authorities, to critically assess and evaluate the co-design approach to consumer engagement for the Randwick Campus Redevelopment.

Appendix 1: Matching Tool



Appendix 2: Examples of methods for consumer participation

Method	Stakeholder/s	Participation	Timeframe
Briefings: <ul style="list-style-type: none"> - Staff forums - Meetings 	POWH and Campus Staff Health Practitioners Hospital Volunteers POWH Foundation Consumers (all encompassing)	Inform	Ongoing <ul style="list-style-type: none"> - Fortnightly - Monthly - Quarterly - As required
Communication Materials: <ul style="list-style-type: none"> - Newsletters - Factsheets - Email updates - Noticeboard posters and advertisements - Staff packs - PUG packs 	POWH and Campus Staff Health Practitioners Hospital Volunteers POWH Foundation Consumers (all encompassing) District Services	Inform Consult	Ongoing <ul style="list-style-type: none"> - Monthly - As required
Electronically <ul style="list-style-type: none"> - Social media - Internet and intranet website updates - Electronic kiosks 	POWH and Campus Staff Health Practitioners Hospital Volunteers POWH Foundation Consumers (all encompassing) District Services and staff Wider community	Inform	Ongoing <ul style="list-style-type: none"> - Monthly - As required
Project User Groups	POWH and Campus Staff Health Practitioners Consumers (all encompassing)	Collaborate	Ongoing
Pop ups and displays	POWH & campus Staff Hospital Volunteers Consumers (all encompassing)	Involve	As required
Discussion forums: <ul style="list-style-type: none"> - Workshops - Focus Groups - Morning/afternoon teas 	POWH & campus Staff Campus Executive Health Practitioners Consumers (all encompassing)	Collaborate	As required
Surveys	Consumers Community	Involve Consult	As required

Related documents and references

Australian Commission on Safety and Quality in Healthcare. National Safety and Quality Health Service Standards. *Standard 2: Partnering with consumers*. Retrieved from:

https://www.safetyandquality.gov.au/wp-content/uploads/2012/10/Standard2_Oct_2012_WEB.pdf

Australian Commission on Safety and Quality in Healthcare. National Safety and Quality Health Service Standards. *User Guide for Measuring and Evaluating Partnering with Consumers* (2018).

Retrieved from: <https://www.safetyandquality.gov.au/wp-content/uploads/2018/04/User-Guide-for-Measuring-and-Evaluating-Partnering-with-Consumers.pdf>

Australian Commission on Safety and Quality in Healthcare. (2011). *Patient-centred care: Improving quality and safety through partnerships with patients and consumers*. Retrieved from:

<https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/>

Consumer and Community Engagement Framework, Randwick Campus Redevelopment Project Team, Ref No. T18/9416

Consumers Health Forum of Australia. Strategic Plan 2015-2018. *Representing consumers on national health issues*. Retrieved from: <https://chf.org.au/representation>

Health Consumers NSW. *Consumer and Community Engagement Model* (June 2015). Retrieved from:

http://www.hcnsw.org.au/data/Resources/2015_07_17_Final_report_and_template.pdf

New South Wales Agency for Clinical Innovation. *Patient Experience and Consumer Engagement: A Framework for Action* (2015). Retrieved from:

https://www.aci.health.nsw.gov.au/data/assets/pdf_file/0005/256703/peace-framework.pdf

Randwick Campus Redevelopment: Communications and Engagement Strategy V2.0 (October 2017), Randwick Campus Redevelopment Project Team

Randwick Campus Redevelopment: Community and Consumer Advisory Committee Charter V.4 (December 2017), Randwick Campus Redevelopment Project Team

Randwick Campus Redevelopment: Final Business Case V11.0, (December 2017), Randwick Campus Redevelopment Project Team, Health Infrastructure

