Service planning, the Functional Design Brief, infrastructure planning and a feasibility assessment shall be completed for all capital infrastructure projects prior to progressing any detailed planning and design for the capital delivery project.

A Capital Project Implementation Plan (CPIP), commensurate to the size, nature and risk of the project, shall outline the management strategy for the delivery of the project to meet the required government objectives.

Implementation Standard for Project Initiation Stage

1. Purpose
This implementation standard identifies the minimum requirements that evidence the implementation of the Capital Infrastructure Project Delivery policy at the project initiation stage. It also identifies the responsibilities (and audit criteria) of individual positions in relation to these requirements.

The primary purpose of this stage is to establish an agreed strategy for the continued planning, design and delivery of the capital infrastructure project.

Attachment 1 outlines the relationship with other policy documents.

2. Scope
This implementation standard applies to all Department of Health employees and contracted staff (permanent, temporary and casual) employed in the department’s corporate divisions and commercialised business units.

This implementation standard applies to all major capital works projects as outlined in the Hospital and Health Boards Regulation 2012.

3. Supporting documents
Authorising Policy and Standard/s:
- Capital Infrastructure Project Delivery Policy QH-POL-374:2012

Procedures, Guidelines and Protocols:
- Implementation Standard for Procurement Management QH-IMP-374-1:2012
- Implementation Standard for Project Definition Plan Stage QH-IMP-374-3:2012
- Implementation Standard for Design and Documentation Stage QH-IMP-374-4:2012
Department of Health: Implementation Standard for Project Initiation Stage

- Implementation Standard for Construction Stage QH-IMP-374-5:2012
- Implementation Standard for Project Commissioning and Finalisation QH-IMP-374-6:2012
- Queensland Health Capital Infrastructure Requirements v6.0

Forms and templates:

- Clinical Infrastructure Unit Project Handover Process and Report Template
- Capital Project Implementation Plan Template
- Health Service Information Agency (HSIA) - Project Initiation form

All forms and templates are available from HIB-Program_Coordination@health.qld.gov.au.

4. Related documents

Queensland Health:

- Department of Health Financial Delegations
- Department of Health Governance Policy for Queensland Health Service Planning and Capital Infrastructure Program and Projects QH-POL-359:2012
- Department of Health Guidelines for Building Performance Evaluations QH-GDL-334-1:2012
- Department of Health Procedure for Building Performance Evaluations QH-PCD-334-1:2012
- Department of Health Procurement Policy QH-POL-044:2009
- Department of Health Real Property Management Policy QH-POL-353:2012
- Department of Public Works and Health Planning and Infrastructure Division Partnering Agreement
- Health Infrastructure Branch – Signage Manual
- Queensland Health Capital Infrastructure Requirements v5.0

Other:

- Department of Housing and Public Works 2011, Capital Works Management Framework
- Department of Housing and Public Works 2012, State Procurement Policy
- Department of Infrastructure and Planning 2010, Project Assurance Framework
5. Requirements

5.1 Criteria for project initiation stage

Prior to initiation of a capital infrastructure project:

5.1.1 The Project Director shall ensure the following has been completed:

- Queensland Government approval for the capital infrastructure project to proceed
- service planning, functional design brief, capital infrastructure planning and preliminary business case development, commensurate with the scope, value and complexity of the project
- a Project Handover Report from the infrastructure planning phase, including any associated technical briefing (see HIB Clinical Infrastructure Unit Project Handover Process and Report Template). The Project Handover Report shall be endorsed by:
  - the relevant Chief Executive, Hospital and Health Service
  - Senior Director, Clinical Infrastructure Unit
  - Senior Director, Capital Projects Unit.
- any required land acquisition for the capital infrastructure delivery project, with planning approval commenced.

5.1.2 The Senior Director, Capital Projects Unit shall endorse:

- the tender list, terms of reference, assessment panel and recommendation for any consultancies which will extend beyond the project initiation stage of a capital infrastructure project.
- the capital infrastructure proposal including cost plan for an approved capital infrastructure delivery project.
- the site selection criteria, due diligence check list and site acquisition recommendation for any land acquisitions for a capital delivery project (in accordance with the Real Property Management Policy and Implementation Standards).

5.2 Project Initiation – development of the Capital Project Implementation Plan

5.2.1 The Project Director shall complete a Capital Project Implementation Plan (CPIP) that clearly articulates:
Department of Health: Implementation Standard for Project Initiation Stage

- project objectives: a clear definition of the government objectives for the project including scope, allocated budget and timeframe
- program and tasks: identification of the key tasks and development of the project timetable outlining the date by which key deliverables shall be achieved, based on major assumptions and risks
- human resources: identification of internal and external human resources required and their funding source, plus the reporting structure and resourcing strategy
- project governance: identification and development of roles, responsibilities, accountabilities, communication processes and reporting structures as per Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects.
- reporting and information management: reporting requirements, frequency, reporting levels and format, information management systems including for document management
- stakeholder engagement: a community engagement plan shall be developed outlining the purpose, how, by whom and where consultation shall occur and include processes to resolve both internal and external disagreements
- risk management: identification and management of the current known key risks, plus strategy for the ongoing identification, management and reporting of project risks
- benefits management: benefits are identified in the initial business case/feasibility study and through the Building Performance Evaluation Balanced Scorecard development. Included is how and when benefits will be delivered and be monitored, measured and reported.
- change management: the key change management strategies including:
  - changes in work practices and business processes identified through the development of the Functional Design Brief
  - organisational and staff readiness and capability
  - sources of potential resistance
  - consultation and engagement processes, in line with the communication and consultation plan
  - training and support requirements.
- quality management: identify the quality techniques and standards to be applied and the responsibilities for achieving the desired quality and performance levels
- funding framework: a funding and financial management strategy to outline the timing, mechanisms, sources and cash flow. All approvals
for non-recurrent expenditure shall comply the appropriate delegations.

- assumptions: an outline of the assumptions upon which the CPIP is based.

5.2.2 The Project Director shall seek approval of the CPIP from the relevant Chief Executive, Hospital and Health Service and the Senior Director, Capital Projects Unit.

5.3 Project Team Procurement

5.3.1 The Project Director shall procure the resources as outlined in the approved CPIP (see Implementation Standard for Capital Infrastructure Project Delivery – Procurement Management).

5.4 Project Team Orientation

5.4.1 The Project Director shall ensure all initial and future members of the project team and key stakeholder undergo orientation to the project and have a documented list of responsibilities. The project team includes, at a minimum:

- the relevant Chief Executive, Hospital and Health Service, or their delegate
- members of all project committees e.g. Project Steering Committee, Project Control Group, User Groups.

5.4.2 The Project Director shall ensure orientation processes engage, inform and engender ownership of the project’s objectives and benefits to be realised. Orientation shall include:

- information on the benefits, program and activities for the project
- identification of anticipated challenges
- strategies to achieve the project’s defined scope, budget and timeframe
- familiarisation with the CPIP.

5.5 Reporting

5.5.1 The Project Director shall establish reporting processes for the lifecycle of the capital infrastructure delivery project. At a minimum, this shall include:

- Monthly reports provided to the Project Director from:
  - Project Manager
  - Procurement Manager
  - responsible officer for information infrastructure e.g. Queensland Health, Health Services Information Agency or external consultancy. any other external consultants engaged, i.e. Principal Consultant, Quantity Surveyor and Programmer.
Department of Health: Implementation Standard for Project Initiation Stage

For projects with a project budget of $5 million or greater, or as requested by Senior Director, Capital Projects Unit, reports will be prepared by the Project Director on a monthly basis.

5.6 Project Committees

5.6.1 The project committee structure shall reflect the size and complexity of the project and shall align with the Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects.

5.6.2 Each project shall have a Project Steering Committee, responsible for project-level decision-making, endorsement or approval of project documentation and resolution of project-specific scope, operational and budget issues.

5.6.3 Operational committees (i.e. Executive User Group, Project Control Group or Project Advisory Group) shall be established commensurate with the stage, scope and complexity of the project. The role of the committees shall include gathering of information/evidence, recommending design and coordination solutions, and ensuring scope and budget issues are progressed to the Project Steering Committee.

5.7 Development Management

5.6.1 The Project Director shall ensure:

- as a minimum, user representatives of the new and/or redeveloped space will inform the planning and design development and review
- the responsible officer for information and communications technology provide a documented plan which outlines the scope and cost estimate of the information and communication technology requirements
- representatives from centralised areas of expertise (e.g. Centre for Health Related Infection Surveillance Program, Bio-medical Technology Services, Clinical Networks) are available as required, to provide input in the planning, design development and review of the new and/or redeveloped space
- where new services will be provided as part of the capital delivery project, expert advice is sought from other existing services. For significant larger, complex and/or speciality services, this may include utilisation of interstate and/or international experiences.

6. Review

This Standard is due for review on: 20 June 2014

Date of Last Review: Not applicable – new policy

Supersedes: Not applicable – new policy

7. Business Area Contact

Senior Director, Capital Projects Unit, Health Infrastructure Branch,
## 8. Responsibilities

<table>
<thead>
<tr>
<th>Position</th>
<th>Responsibility</th>
<th>Audit criteria</th>
</tr>
</thead>
</table>
| Deputy Director-General, System Support Services | ● Approve this policy and supporting documents.  
  ● Undertake the role of Senior Responsible Owner for capital delivery programs and projects. | ● Policy documents considered and approved.  
  ● Role undertaken for capital delivery program and projects as per Governance Policy for Health Service Planning and Capital Program and Projects.                                                            |
| Business Change Owner (generally the relevant Chief Executive, Hospital and Health Services) | ● Undertake the Business Change Owner role as per the Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects.  
  ● Undertake the business service planning and development of functional design brief as required for the capital infrastructure projects.  
  ● Approve Project Handover Report.  
  ● Assess and approve the Capital Project Implementation Plan (CPIP).  
  ● Appoint project team for the business. | ● Chair the Project Steering Committee.  
  ● Business applies and actively contributes to the initiation of the project.  
  ● Required service planning and functional design brief completed as per the Health Service Planning Health Service Directive.  
  ● Project Handover Report approved.  
  ● CPIP approved.  
  ● Business project team appointed as per CPIP. |
| Chief Health Infrastructure Office, Health Infrastructure Branch, System Support Services | ● Policy custodian of the Capital Infrastructure Project Delivery Policy.  
  ● Undertake the role of Higher Authority for capital delivery programs and projects.  
  ● Endorse the capital infrastructure proposal for an approved capital delivery project. | ● Policy submitted for approval has been developed and maintained in accordance with the requirements of the Queensland Health Policy Management Policy.  
  ● Role implemented as per Standard and within delegations plus as per Governance Policy for Health Service Planning and Capital Program and Projects.  
  ● Endorsed capital infrastructure proposal. |
| Senior Director, Capital Projects Unit, Health Infrastructure Branch, System Support | ● Approve the Project Handover information.  
  ● Assess and approve CPIP. | ● Approved Project Handover approved.  
  ● Approved CPIP. |
9. Definitions of terms used in the policy and supporting documents

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition / Explanation / Details</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Performance Evaluation Balanced Scorecard</td>
<td>Building performance evaluation responds to the complex healthcare environment by providing a multidimensional framework (service, functional, physical and financial) which systematically monitors performance and also links facility design and performance to the long terms strategies of the organisation.</td>
<td>HPID Building Performance Evaluations: Report on pilot project outcomes</td>
</tr>
<tr>
<td>Business</td>
<td>The Business is the relevant Hospital and Health Service or Division.</td>
<td>HIB</td>
</tr>
<tr>
<td>Business case</td>
<td>A Business Case provides a substantiated argument for the proposed project and includes analysis and justification for the scope and delivery options to provide best value for the funds requested.</td>
<td>Adapted from the Project Assurance Framework at <a href="http://www.treasury.qld.gov.au/office/services/financial/project-assurance-framework.shtml">http://www.treasury.qld.gov.au/office/services/financial/project-assurance-framework.shtml</a></td>
</tr>
<tr>
<td>Business Change Owner (generally the relevant Chief Executive, Hospital and Health Service)</td>
<td>The Business Change Owner is accountable for the business change by providing strategic leadership to ensure the product is capable and the organisation is ready to enable the operationalisation of the business change.</td>
<td>Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects</td>
</tr>
<tr>
<td>Capital Infrastructure Requirements</td>
<td>Provision of the basis for a consistent and standardised approach to infrastructure planning and design.</td>
<td>Capital Infrastructure Requirements</td>
</tr>
</tbody>
</table>
| Capital Infrastructure Proposal                                       | Capital infrastructure proposal;  
- Informed by service planning  
- Considers the condition and capacity of the existing infrastructure  
- Includes a minimum of three infrastructure options                                                                                                           | Adapted from Capital Infrastructure Planning Policy                                          |
| Capital Project Implementation Plan (CPIP)                           | The CPIP outlines the strategy and associated processes to manage the delivery of the project according to the government requirements for scope, budget and program.                                                               | nil                                                                                        |
| Capital Works                                                        | The CWMF is the Queensland government's                                                                                                                                                                                             | Capital Works Management                                                                   |
### Management Framework (CWMF)

Key policy for managing risks in the planning and delivery of government building projects. It identifies the major risk areas and sets out the steps that must be taken to manage those risks. The CWMF gives effect to the whole-of-Government Prequalification (PQC) System for building industry consultants and contractors seeking to undertake government building projects.

### Governance

The functions, responsibilities, processes and procedures that define how a program/project is set up, managed and controlled.

### Functional Design Brief

The Functional Design Brief includes:
- Description of the models for clinical and operational service delivery
- Summary of the functional space requirements defined at the completion of health service and infrastructure planning
- Specific design and performance information which relates to the project site and building requirements

### Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects

The intent of the policy is to establish a consistent statewide approach to all health service planning and capital infrastructure program/projects.

### Higher Authority

The Higher Authority has the authority to make final approval on project change requests within delegations, and provide decision-making for high risk areas for the program or project. This position is appointed by the Senior Responsible Owner (SRO) and may be the same as the Executive e.g. Chief Health Infrastructure Officer, Health Infrastructure Branch.

### Major Capital Works

Major capital works are activities which are:
- Structural works
- Involve alterations to the building envelope
- Result in additional recurrent operational expenditure
- Result in the need for regulatory compliance of the building and information technology standards

### Pre-qualification System (PQC)

The PQC supports the Capital Works Management Framework (CWMF) by providing a comprehensive central register of pre-qualified building industry consultants and contractors. The PQC also establishes clear and consistent performance requirements and guidelines for the selection of building industry service providers for government building projects.

### Project

A project is a temporary organisation that is created for the purpose of delivering one or more products according to an agreed plan.
<table>
<thead>
<tr>
<th><strong>Project Assurance Framework (PAF)</strong></th>
<th>The PAF is the foundation framework for ensuring that project management is undertaken effectively across the Queensland Public Sector and delivers Value for money to the government. It is a whole-of-Government project assurance process that establishes a common approach to assessing projects at critical stages of their lifecycle.</th>
<th>Queensland Treasury and Trade</th>
</tr>
</thead>
</table>
| **Project Board (Project Steering Committee)** | The Project Board (Steering Committee) is accountable to the Sponsoring Group for the success of the approved commitments, and has authority to direct the program or project according to the approved mandate. This group meets regularly as determined by the program or project; however, must meet to provide advice for decisions outside regular meetings. The Project Board (Steering Committee) consists of:  
• A Project Executive as appointed by the Senior Responsible Owner  
• Business Change Owner or delegate  
• Senior User(s) as appointed by the Business Change Owner  
• Senior Supplier(s) or representative. | Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects |
| **Project Director** | The Project Director has the authority to run the project on a day-to-day basis on behalf of the Project Board (Steering Committee). The Project Director brings together and manages all aspects of the program or project to deliver within budget, time and scope. This role reports directly to the Senior Director, Capital Projects Unit, Health Infrastructure Branch. | Adapted from Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects |
| **Project Team(s)** | The Project Teams are responsible managing the set-up of project components/products required to support the delivery of the new capability and realisation of benefits. Project Teams provide proactive interventions and decision-making to ensure that the project stays on track. | Governance Policy for Health Service Planning and Capital Infrastructure Program and Projects |
| **Department of Health Financial Delegations for Expenditure, Losses and Special Payments.** | The financial delegations set maximum limits (inclusive of GST) as determined by the Accountable Officer for Queensland Health’s expenditure (recurrent and non-recurrent), write off losses and special payments for delegated positions within the Department. | Department of Health |
| **Queensland Health Procurement Delegations** | Procurement Delegations have been introduced by the Director-General as an internal control measure and apply specifically to the acquisition of goods and services. In meeting responsibilities prescribed in the State Procurement Policy and the Financial Administration and Audit Act 1997, the Director-General has delegated procurement. | Queensland Health Procurement Delegations |
10. Approval and Implementation

Policy Custodian:
Chief Health Infrastructure Officer, Health Infrastructure Branch, System Support Services, Department of Health

Responsible Executive Team Member:
Deputy Director-General, System Support Services, Department of Health

Approving Officer:
Deputy Director-General, System Support Services, Department of Health

Deputy Director-General, System Support Services, Department of Health

Approval date: 20 June 2012
Effective from: 20 June 2012
Attachment 1: Dependant Relationships between Health Service Directives, Policies and Standards

Health Service Directive – Health Service Planning

Capital Infrastructure Planning Policy

Capital Infrastructure Project Delivery Policy

Health Service Directive – Asset Management

Implementation Standard - Procurement Management

Implementation Standard – Project Initiation

Implementation Standard – Project Definition

Implementation Standard – Design and Documentation

Implementation Standard – Construction

Implementation Standard – Commissioning and Finalisation