

HEALTHCARE · HOSPITALS AND HEALTH SERVICES

Built around care.

A hospital measures success in clinical sessions kept, infections prevented and a facility that stays maintainable.

Ducon Building Solutions delivers ward and administration refurbishment, clinical and allied-health fitout, imaging and theatre works, building services upgrades and façade remediation inside operating hospitals.

WHAT WE CONTROL, AND HOW

Clinical services first. The build fits around them.

— Infection prevention and control

ICRA risk assessment before mobilisation. HEPA-filtered negative-pressure containment, pressure-differential monitoring and sealed hoarding to the class the assessment requires.

— Clinical service continuity

Works programmed around theatre lists, clinic sessions and admission patterns. Shutdowns and percussive work booked with clinical leadership, not imposed on them.

— Access and amenity

Patient, staff and visitor routes maintained throughout. Separate trade access and no construction traffic through clinical corridors.

— Building services interfaces

Medical gas, essential power, fire and mechanical isolations staged so no critical service loses redundancy without an agreed plan.

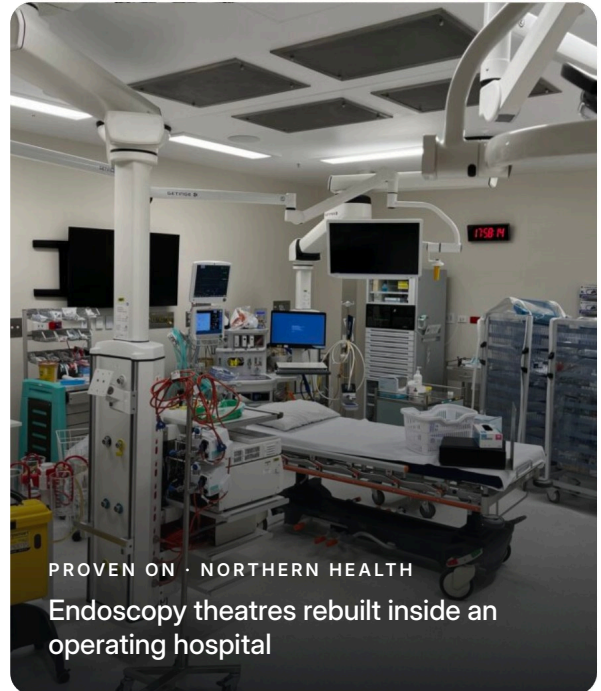
PROOF, NOT ADJECTIVES

Theatres rebuilt metres from procedures that kept running.

PROVEN ON

Northern Health Endoscopy

Northern Health defined success as procedures continuing metres away, uninterrupted, while operating theatres were rebuilt. That definition set the containment class, the access route, the sterile-zone controls and the shutdown windows, all agreed before mobilisation. Clinical services continued for the duration of the works.



Also delivered: Rosebud Hospital, Bayview House, refurbishment in a live clinical environment. Frankston Hospital, 2 West, ward works in an operating hospital.

SELECTED EXPERIENCE

HealthShare Victoria

Alfred Health

Peninsula Health

Northern Health

Monash Health

Eastern Health

CAPABILITY AT A GLANCE

- Ward, theatre, imaging and specialist clinical refurbishment
- Clinical and allied-health fitout and repurposing
- Building services, infrastructure and compliance upgrades
- Healthcare maintenance, reactive works and minor capital delivery

CREDENTIALS THAT MATTER TO THIS BUYER

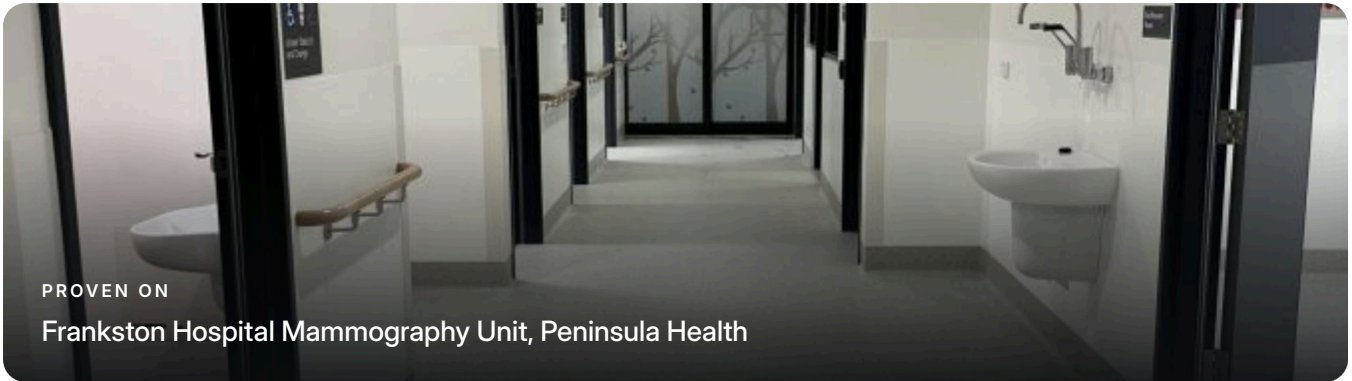
- HealthShare Victoria Accreditation No. 572
- Federal Safety Accreditation
- Pre-Qual CSR to \$8M

2002
building since

1,000+
projects delivered

7
specialist sectors

3
ISO certifications: 9001, 45001, 14001



We have never had any issues at all with Ducon, and that is a big benefit.

Eugene Nogueira, Senior Engineer, Peninsula Health

HOW WE WORK: FOUR QUESTIONS BEFORE ANYTHING STARTS

YOUR OPERATIONS	YOUR TIME	YOUR BUDGET	YOUR STANDARD
What can't stop while we're here? The ward stays open and the list starts at eight. We work to the bed, not the floor.	When can we actually be there? Around theatre lists, shift change and visiting hours, including the nights nobody else wants.	What are we working with? Staged so beds come back in the order the hospital needs them, not the order that suits us.	What does completed look like to you? Infection control is the finish. ICRA, containment and pressure differentials agreed before we cut.

Can you work in a ward that is still admitting?

Yes, it is most of what we do. Before we mobilise we agree with you what cannot stop clinically, then stage the work to the ICRA assessment and your service patterns, with containment, access control and shutdown windows planned in advance.

How do you handle infection control?

An ICRA risk assessment is completed before we mobilise and determines the containment class, access route and monitoring regime. Containment is built and verified before demolition begins, and monitored for the duration.

Tell us what can't stop.

The ward, the theatre, the clinic...

[Start the conversation](#)