

# NGH Independent Audit Report August 2020 - Responses to Non Compliance Items

Item	Condition	Audit Findings	Recommendation	Party to Action	Action
A20	At least 48 hours before the commencement of construction until the completion of all works under this consent, or such other time as agreed by the Planning Secretary, the Applicant must: a) make the following information and documents (as they are obtained or approved) publicly available on its website: (iv) regular reporting on the environmental performance of the development in accordance with the reporting arrangements in any plans or programs approved under the conditions of this consent; (v) a comprehensive summary of the monitoring results of the development, reported in accordance with the specifications in any conditions of this consent, or any approved plans and programs; (ix) audit reports prepared as part of any independent audit of the development and the Applicant's response to the recommendations in any audit report; (b) keep such information up to date, to the satisfaction of the Planning Secretary.	The compliance management program is available on the website. However, neither the compliance report nor the first audit report are available on the website these items are required to be on the website as defined in B42)  There are no monitoring results available on the website.  Due to the non-compliance with a) iv), v) and ix) the audit found that information on the website was not up to date.	The 2019 compliance report and the independent audit report and any relevant monitoring should be made publicly available.	Closed	<b>Following items have been uploaded to the website (<a href="https://www.hinfra.health.nsw.gov.au/our-projects/project-search/campbelltown-hospital-redevelopment-stage-2">https://www.hinfra.health.nsw.gov.au/our-projects/project-search/campbelltown-hospital-redevelopment-stage-2</a>):</b>  1. Monitoring records  2. 2019 Independent Audit Report (NGH) and Aug 2020 Report (NGH)  3. Compliance Reports (Wolfpeake) from Aug 2020 and Dec 2020
B42	No later than two weeks before the date notified for the commencement of construction, a Compliance Monitoring and Reporting Program prepared in accordance with the Compliance Reporting Post Approval Requirements (Department 2018) must be submitted to the Department and the Certifying Authority. Compliance Reports of the project must be carried out in accordance with the Compliance Reporting Post Approval Requirements (Department 2018). The Applicant must make each Compliance Report publicly available 60 days after submitting it to the Department and notify the Department and the Certifying Authority in writing at least seven days before this is done.	The pre construction compliance report met the requirements of Compliance Reporting Post Approval Requirements (Department 2018). The Compliance Reporting Post Approval Requirements (2018) requires that compliance reports are prepared at intervals no greater than 26 weeks. Wolfpeak have been engaged to prepare the June 2020 compliance report. The compliance report due in December 2019 was not prepared. HI Submitted the Compliance report to the Department on the 12 July 2019. The report has not been made publicly available.	Compliance reports should be scheduled so that they occur in accordance with Compliance Reporting Post Approval Requirements (Department 2018). Compliance reports should be made available on the website	Closed	<b>Following items have been uploaded to the website (<a href="https://www.hinfra.health.nsw.gov.au/our-projects/project-search/campbelltown-hospital-redevelopment-stage-2">https://www.hinfra.health.nsw.gov.au/our-projects/project-search/campbelltown-hospital-redevelopment-stage-2</a>):</b>  1. 2019 Wolfpeak Pre-Construction Compliance Report
C6	Activities may be undertaken outside of the hours in condition C5 if required: (a) by the Police or a public authority for the delivery of vehicles, plant or materials; or (b) in an emergency to avoid the loss of life, damage to property or to prevent environmental harm; or (c) where the works are inaudible at the nearest sensitive receivers; or (d) where a variation is approved in advance in writing by the Planning Secretary or her nominee if appropriate justification is provided for the works. Notification of such activities must be given to affected residents before undertaking the activities or as soon as is practical afterwards.	Works have been undertaken outside of these hours including on the 6, 7 and 8 December for the Commissioning of a crane. A neighbourhood drop occurred to notify affected residents. However as these works do not conform to the requirements of C6 a, b, or c a variation to the working hours is required in advance of out of hours works. The audit found no evidence that a variation to working hours was approved in advance in writing by the Planning Secretary.	Out of hours works must be approved by the planning Secretary in advance of the works unless they conform to part a, b, or c of this condition.	Closed  (CPB had received approval from the Principal to proceed with Sunday works - attached - which included flyer drop)	DPIE approval provided 18-11-2019
C14	The development must be constructed to achieve the construction noise management levels detailed in the Interim Construction Noise Guideline (DECC, 2009). All feasible and reasonable noise mitigation measures must be implemented and any activities that could exceed the construction noise management levels must be identified and managed in accordance with the management and mitigation measures identified in the approved Construction Noise and Vibration Management Plan.	Noise monitoring has not been undertaken to test compliance with the noise management levels, however the Construction Noise and Vibration Management Plan (CNVMP) identifies that exceedances may occur in Stage 2A. Table 4.3 of the CNVMP set the target of zero of non-compliant monitoring results, but monitoring has not occurred to test compliance. Therefore, this audit found that there is no way to check that the construction noise management levels detailed in the Interim Construction Noise Guide have been met. Furthermore, the requirement to monitor was also raised in an internal audit as an NC on the 29th June 2020.	Noise monitoring should occur to test compliance with the construction noise management levels.	CPB	CPB to review noise monitoring in accordance with requirements of the CNVMP with ARUP.  Note: Nil noise complaints received to date.

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C17	Any noise generated during construction of the development must not be offensive noise within the meaning of the Protection of the Environment Operations Act 1997 or exceed approved noise limits for the site.	The CNVMP identifies that exceedances may occur in Stage 2A. As no noise monitoring has occurred to date there is no way to check if noise has exceeded approved noise limits for the site, therefore the audit cannot determine compliance with this condition. It is noted that there have been no complaints regarding noise	Noise monitoring should occur to test compliance with the construction noise management levels.	Closed.	Stage 2A was during bulk earthworks, the works are now completed and no complaints were received. No further action required.
C37	Table 1 of the Independent Audit Post Approval Requirements (Department 2009) is amended so that the frequency of audits required in the construction phase is: (a)An initial construction Independent Audit must be undertaken within eight weeks of the notified commencement date of construction; and (b)A subsequent Independent Audit of construction must be undertaken no later than six months from the date of the initial construction Independent Audit.	The initial audit date is the date that all documentation is submitted to DPIE. This occurred on the 26 November 2019, therefore the second audit was due in late May 2020.	Audits should be scheduled so that they occur within the timeframe defined in the audit plan.	CPB	CPB to correctly schedule audits in accordance with the audit plan going forward.
C38	Independent Audits of the development must be carried out in accordance with: (a)the Independent Audit Program submitted to the Department and the Certifying Authority under condition C36 of this consent; and (b)the requirements for an Independent Audit Methodology and Independent Audit Report in the Independent Audit Post Approval Requirements (Department 2018).	It is noted that this audit was not undertaken 26 weeks form the first audit and therefore not in compliance with the audit program. This audit has been undertaken in accordance with the Independent Audit Methodology and Independent Audit Report in the Independent Audit Post Approval Requirements (Department 2018).	Audits should be scheduled so that they occur within the 26 week timeframe	CPB	CPB to correctly schedule audits in accordance with the audit plan going forward.
C39	In accordance with the specific requirements in the Independent Audit Post Approval Requirements (Department 2018), the Applicant must: (a)review and respond to each Independent Audit Report prepared under condition C38(a) of this consent; (b)submit the response to the Department and the Certifying Authority; and (c)make each Independent Audit Report and response to it publicly available within 60 days after submission to the Department and notify the Department and the Certifying Authority in writing at least seven days before this is done.	The 2019 audit report and response document was not publicly available at the time of the audit.	Independent audit reports should be made available on the website	Closed.	<b>Following items have been uploaded to the website (<a href="https://www.hinfra.health.nsw.gov.au/our-projects/project-search/campbelltown-hospital-redevelopment-stage-2">https://www.hinfra.health.nsw.gov.au/our-projects/project-search/campbelltown-hospital-redevelopment-stage-2</a>):</b>  1. 2019 Independent Audit Report (NGH)
C43	The Department must be notified in writing to compliance@planning.nsw.qov.au within seven days after the Applicant becomes aware of any non-compliance. The Certifying Authority must also notify the Department in writing to compliance@planning.nsw.qov.au within seven days after they identify any non-compliance.	The audit found no evidence that the department was notified in writing of the non -compliances raised the 2019 independent audit report within seven days of the applicant being provided the draft audit report	Notification of non-compliances should be made available to the Department in accordance with this condition	Closed.	Principal to issue the 2020 Independent Audit Report (NGH) to Dept of Planning (as 2020 report includes non-conformances). Completed.
C46	Within three months of: (a)the submission of a compliance report under condition B42; (b)the submission of an incident report under condition C42; (c)the submission of an Independent Audit under condition C39; (d)the approval of any modification of the conditions of this consent; or (e)the issue of a direction of the Planning Secretary under condition A2 which requires a review, the strategies, plans and programs required under this consent must be reviewed, and the Department and the Certifying Authority must be notified in writing that a review is being carried out.	The audit notes that the CEMP has been reviewed twice since the first audit and the pre construction compliance report. The audit did not find evidence that the Department had been notified of these reviews	The Department & Certifier should be notified in writing of any reviews of plans or strategies within three months of the submission of any of these reports.	Closed.	Principal to issue Rev 6 of the CEMP to Dept of Planning (issued to the Principal in CPB Con-TRANSMIT-001870 - 9/8/2020)  CPB have issued Rev 6 to the certifier on the 17/07/2020 - CPB Con-TRANSMIT-001658.  Completed.

**NGH Independant Audit Report August 2020 - Responses to Non Compliance Items**

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C47	If necessary to either improve the environmental performance of the development, cater for a modification or comply with a direction, the strategies, plans and programs required under this consent must be revised, to the satisfaction of the Certifying Authority. Where revisions are required, the revised document must be submitted to the Certifying Authority for approval within six weeks of the review.	The CEMP have been updated to reflect the changed conditions (specifically Table 2-2 of the CEMP). However the audit found no evidence that these documents were submitted to the Certifying Authority for approval within six weeks of the review	Plans, strategies and programs required under the consent should be made revised as required by this condition to the satisfaction of the certifier and then submitted the certifier for approval.	Closed.	Completed