



NGH



**Health
Infrastructure**

INDEPENDENT AUDIT REPORT - OPERATION

New Maitland Hospital Stage 2 – Main Works

March 2023

Project Number: A220036



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EXECUTIVE SUMMARY

Multiplex Constructions (Multiplex) were contracted by Health Infrastructure (HI) to construct the New Maitland Hospital Stage 2 which is now completed and the Hospital is operational. CBRE and now Turner and Townsend are the Project Managers for the project acting on behalf of HI. Stage 2 of the works includes:

- An Emergency Department
- Medical, surgical, paediatric and maternity services
- Critical care services for adults and babies, including a special care nursery
- Operating theatres, delivery suites and assessment rooms
- Palliative care and rehabilitation services
- Mental health services
- Satellite renal dialysis
- A new chemotherapy service
- Oral health service
- A range of ambulatory care and outpatient clinics
- Construction of internal roadways and car parking for staff, patients and visitors
- Site landscaping
- Signage
- Tree removal
- Utility services connections and amplification works.

This is the sixth independent audit of this project and the second audit of the hospital in its operational stage, with all construction completed. Most of the remaining conditions are being managed by the Local Health District (LHD). All audits have been conducted by Natascha Arens as the NSW Department of Planning and Environments approved auditor for the Project.

This audit covered the relevant operational conditions covered by the SSI 9775 approval issued by the Minister for Planning on the 6 December 2019, as modified (MOD) by MODs 1 – 3. The audit period for this sixth audit is from the 29 March 2022 – 28 March 2023. As the audit has been operational for a whole year and all conditions in Section A-C of the approval have been addressed the audit was assessed compliance with the pre operational and operational conditions only. The audit found one non compliance out of 46 conditions relevant to the operation of the project.

1. INTRODUCTION

1.1. BACKGROUND

The New Maitland Hospital is a 339 bed hospital green field development located at 51 Metford Road, Metford. The hospital building consists of 8 floors including, basement, and lower ground floor for back of house and services plant, level 1 podium floor and levels 3 to 5 as in patient units (IPUs).

Multiplex Constructions (Multiplex) were contracted by Health Infrastructure (HI) to construct the New Maitland Hospital Stage 2 which is now completed and the Hospital is operational. CBRE and now Turner and Townsend are the Project Managers for the project acting on behalf of HI. Stage 2 of the works includes:

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- Tree removal
- Utility services connections and amplification works.

The project is subject to a State Significant Infrastructure (SS1-9775) and approval was obtained from the then NSW Minister for Planning for the construction and operation Stage 2 main works – New Maitland Hospital on the 6 December 2019.

There are three approved modifications (MOD) to the project:

- MOD 1 (correct minor errors) Consolidated Approval issued on the 23 January 2020.
- MOD 2 (Design refinements, including new courtyard canopies, balcony relocation, window positioning and amendment to plant and parapet levels) Consolidated Approval issued on the 31 August 2020
- MOD 3 (Solar Panel Array, Parking and Design Revisions) Consolidated Approval issued on the 27 July 2021

Multiplex engaged NGH to conduct an Independent Audit of Stage 2 of the Project in accordance with the programme submitted to the NSW Department of Planning and Environment (DPE) on the 10 December 2019. The audit plan has been progressively updated to accommodate scope of works and modifications. The audit scope includes the relevant requirements of the SSI 9775 Conditions of Approval (Section D and Section E) and the implementation of the relevant operational plans.

This is the sixth audit and the first operational audit of Stage two of the New Maitland Hospital SSI 9775. NGH has undertaken previous audits as follows:

- First audit of Stage 2 in February – March 2020.
- Second Audit July-August 2020.

- Third Audit January – February 2021
- Fourth Audit August 2021
- Fifth Audit March 2022

1.2. AUDIT TEAM

The audit was undertaken by Natascha Arens, Exemplar Global certified Lead Environmental auditor. Natascha has around 30 years' experience as an environmental professional and over 20 years as an environmental auditor.

Natascha's CV is provided at Appendix B.

1.3. OBJECTIVES

The objectives of the audit were to determine compliance with the Conditions of Approval SSI 9775 issued by the Minister for Planning on the 6 December 2019, as modified by Modifications 1 -3. MOD 3 issued as the consolidated approval on the 27 July 2021. The objective of this audit is to determine compliance with all relevant operational requirements.

1.4. AUDIT SCOPE AND AUDIT PERIOD

The audit period for this audit was from the 28 March 2022 – 29 March 2023. It included the period from the issuing of the March 2022 audit report and all responses to the Department to the completion of the document review for the 2023 audit on the 29 March 2023.

1.4.1. Audit scope

The scope of the audit included:

- Compliance with the SSI 9775 conditions as modified by MOD 1 – MOD 3 and the consolidated approval issued on the 27 July 2021. A checklist was compiled (Appendix A) and was used during this audit to detail compliance.
- Implementation of the relevant operational management plans
- An assessment of performance of the project in relation to implementation of environmental plans.

2. AUDIT METHODOLOGY

2.1. SELECTION AND ENDORSEMENT OF THE AUDIT TEAM

Natascha Arens provided an independence declaration and CV and was nominated to the Department Planning and Environment (the Department) on 18 December 2019 to be the Independent Auditor for the New Maitland Hospital Stage 1. Natascha Arens was endorsed as the auditor by the Department in a letter dated 15/1/2020.

2.2. INDEPENDENT AUDIT SCOPE DEVELOPMENT

The audit scope was developed by reviewing the SSI 9775 Conditions as modified by MOD 1 – MOD 3, the scope of Stage 2 works, the *Independent Audit Post Approval Requirements* (DPIE May 2020) and the audit program (submitted to the Department 18 December 2019) and updated in the Audit plan prepared on the 27 July 2021 to include MOD 3.

The audit comprised of offsite document review and site photographs; and audit analysis and reporting.

An audit plan was provided to the auditee prior to the audit detailing the timing of the audit and requirements regarding accessing documentation.

Document review was undertaken prior to the online/virtual component of the audit. The audit interview component of the audit included:

- Opening meeting to introduce all parties and discuss the scope and objectives of the audit
- Document and records review to check compliance with conditions
- Interviews with staff
- Virtual site inspection via photographs
- Closing meeting to summarise the findings of the site audit and to discuss additional audit evidence required.

2.3. COMPLIANCE EVALUATION

The audit comprised of offsite document review and review of site photographs; and offsite audit analysis and reporting.

The document review included a review of the Conditions of Approval as modified by MODS 1-3 with the consolidated approval issued on the 27 July 2021 (SSI 9775) and all relevant operational plans. The audit protocol was developed and refined for the stage of works – Appendix A

An Opening Meeting was via teams on the 29 March at 11am.

Present at the opening meeting were:

- James Drinan – Turner and Townsend Project manager

2.4. SITE INTERVIEWS

Interviews with staff included:

- James Drinan – Turner and Townsend Project manager
- Steve Russell – Multiplex Project Engineer

- Keiran Hall – Maitland Hospital Facilities Management Engineer

Other consultation occurred prior to the MS Teams meeting via phone calls and email correspondence, as well as during the MS Teams meeting and following the meeting to gather further information as required.

2.5. SITE INSPECTION

A site inspection was not undertaken for this audit. Photo documentation was provided to satisfy the site compliance requirements for the audit. Site photos were provided for the landscaping works, fuel storage, waste storage areas, loading dock, the Bushfire Asset Protection Zone, Site entrance and internal storage areas for maintenance works. The photos showed that landscaped areas are completed and maintained, there was no evidence of storage of materials or waste in public areas and fuel storage around backup generators was locked and bunded. Photos of the inspection are provided in Appendix E and presented in the audit findings below.

2.6. CONSULTATION

Consultation was undertaken with all levels of the project team including, Health Infrastructure, Local Health District, Turner and Townsend and Multiplex.

2.7. COMPLIANCE STATUS DESCRIPTORS

The compliance status for each requirement or commitment has been assessed in accordance with the criteria in Table 2 (DPIE 2020).

Table 1 - Compliance status descriptors

Status	Description
Compliant (C)	The auditor has collected sufficient verifiable evidence to demonstrate that all elements of the requirement have been complied with within the scope of the audit.
Non-compliant (NC)	The auditor has determined that one or more specific elements of the conditions or requirements have not been complied with within the scope of the audit.
Not triggered (NT)	A requirement has an activation or timing trigger that has not been met at the time when the audit is undertaken, therefore an assessment of compliance is not relevant.

3. AUDIT FINDINGS

3.1. APPROVAL AND DOCUMENTS LIST

The following documents were reviewed to test for compliance with operational conditions or for implementation of plans.

- Operational Landscape Management Plan (Daracon 2021)
- Green Travel Plan (Stantec 2022)

- Green Travel Plan (March 2023 Update, by Hunter New England Local Health District)
- Disaster plan January 2022
- Bushfire Response Plan January 2022
- Stormwater Operation and Maintenance Plan (Daracon December 2021)
- Long Term Environmental Management Plan (GHD 15/12/2021)

Records

- Hunter Power Systems – emergency Backup Generator testing checklist (20/1/2022)
- Hunter Power Systems – emergency Backup Generator testing checklist (3/3/2022)
- Hunter Power Systems – emergency Backup Generator testing checklist (7/4/2022)
- Hunter Power Systems – emergency Backup Generator testing checklist (19/5/2022)
- Hunter Power Systems – emergency Backup Generator testing checklist (6/7/2022)
- Hunter Power Systems – battery system checklist (26/7/2022)
- Rainwater harvesting system photos
- Photos of landscaping/garden areas/APZ
- Photos of fuel and chemical stores
- Carrier Service report 31 May 2022
- Simons Boilers Service sheet 15041 7/4/2022

3.2. COMPLIANCE PERFORMANCE

In summary the audit found one non-compliance for this reporting period out of a total of 46 Conditions of Approval relevant to the operation of the project plus 12 advisory notes:

The table below shows the compliances against the operational conditions.

Condition Part	Compliances	Non Compliances	Not triggered
D	29	0	2
E	12	1	2

Note: In relation to the tally above whole conditions of consent have been used to generate the tally. i.e. where a condition contains part a), b), c) etc this has been counted as one condition.

3.3. SUMMARY OF AGENCY NOTICES, ORDERS, PENALTY NOTICES OR PROSECUTIONS

There have been no agency notices, orders, penalty notices or prosecutions to date.

3.4. NON COMPLIANCES

One non-compliance was raised in this audit, the sixth audit of the project and the second operational audit.

Condition	Findings
E6 The Green Travel Plan required by condition D12 of this approval must be updated annually and implemented unless otherwise agreed by the Planning Secretary.	<p>The Green Travel Plan was updated in March 2023. It is noted that there are a number of requirements in the GTP that were assigned to be implemented at opening, with a regular review. Some of these actions have yet to be implemented including:</p> <ul style="list-style-type: none">• Talk part in National Walk to work day• Establish an internal Bicycle Users Group (BUG). BUGs are formed by people who want to work together to improve facilities for cyclists and encourage cycling• Develop a 'bike buddy' scheme for inexperienced cyclists at year of opening• Organise a breakfast for cyclists to incentivise staff to cycle as well as promoting cycling (Once a month)• Supply a workplace toolkit consisting of puncture repair equipment, a bike pump, a spare lock and lights• All Items under section 5.5 Carpooling <p>It is noted that the updated (2023) plan has stated that these actions will be considered in the next period. It also noted that a number of district wide initiatives have been implemented that are not included in the GTP including running a pilot program for salary packaging of e-bikes.</p>

3.5. PREVIOUS AUDIT RECOMMENDATIONS

No non compliances were raised in the previous audit and there are no open audit findings from any other audits.

3.6. ENVIRONMENTAL PLANS, SUB PLANS AND POST APPROVAL DOCUMENTS

3.6.1. Operational Management plans

Plans that are relevant to the operation of the project as per the conditions of consent include

- Green Travel Plan Stantec 8/2/2022 updated March 2023
- Disaster plan January 2022
- Bushfire response Plan January 2022
- Stormwater Operation and Maintenance Plan Daracon December 2021
- Long Term Environmental Management Plan (GHD 15/12/2021)
- Operational Landscape Management Plan (OLMP) Daracon November 2021

Plans have all been prepared in accordance with the relevant conditions and provided to the certifier and the Planning Secretary as required.

Inspections have occurred in line with the requirements of the Operational Landscape Management Plans as detailed in Section 3.6.2 below and in relation to testing maintenance of

3.6.2. Site Inspections, incidents and Other Records

The audit reviewed inspection records and site photos providing evidence of maintenance through operation:

- Hunter Power Systems – emergency Backup Generator testing
- Rainwater harvesting system tank level indicators showing fully functioning system
- Photos of landscaped areas including all carparks, entranceway, alongside internal roads, rear and side of building gardens, grassed verges
- Unobstructed bunds around back up generator and fuel storage
- Maintained fencing around back up generator and fuel storage
- Clean and tidy waste areas with no evidence of rubbish outside of secured bins
- Maintained APZ area
- Maintained Stormwater basin
- Locked and signposted flammable liquids store (only contains 20L fuel drum for mowers)
- Locked and signposted medical gas store
- Locked storesafe cupboard for paints and maintenance materials

Discussion with Keiran Hall – Maitland Hospital Facilities Management Engineer indicate that since February 2022 the Hospital has employed its own groundsman to implement the operational landscape management plan (OLMP). Site photos show that the grounds are in good condition however there is no documented evidence that the inspection and maintenance schedule is as per the requirements of the OLMP.

No incidents have occurred in this reporting period.

3.6.3. Stakeholder, Community engagement and complaints

The website is the key location for the community to access information on the project. The Website is being updated and all the post approval documents as required by relevant conditions are loaded on the website, including the pre operation compliance report and all audit reports.

The main page of the website now includes opening information and a virtual tour of the completed hospital and a live Q and A section.

3.7. ENVIRONMENTAL PERFORMANCE

As the site is now operational the performance of the project is managed through the following plans:

- Green Travel Plan Stantec 8/2/2022
- Disaster Plan January 2022
- Bushfire Response Plan January 2022
- Stormwater Operation and Maintenance Plan Daracon December 2021
- Long Term Environmental Management Plan (GHD 15/12/2021)
- Operational Landscape Management Plan Daracon November 2021

In summary the audit found that there are few monitoring requirements through this operational stage of the project. However it was noted that:

- Landscaping areas were well maintained and showed excellent growth, cover and were weed free.
- The Asset Protection Zone required by the Bushfire Management Plan was in place. The requirements of the Bushfire Response Plan have not been triggered as a bushfire has not occurred.
- Disaster Plan – The aim of the disaster plan is to provide a set of procedures in the event of a disaster. There have been no disasters to date and as such no action is required.
- The Long Term Environmental Management Plan relates to the potential for residual contamination at the site and the requirements are only triggered in the event of excavation in certain areas.
- Green Travel Plan (GTP) - Section 5 of the plan details a suite of actions to be implemented regarding travel to the hospital for staff and visitors. The table below provides a summary of status of initiatives and is taken from the updated (March 2023) GTP. The approved version of this plan (Stantec 2022) included some initiatives that were meant to be implemented at year of opening that have yet to occur. This has been raised as a non-conformance and detail provided in Section 3.4.

Table 1: Green Travel Plan actions and status (2023 update)

Initiative	Implementation Plan	Status March 2023 – as per the 2023 update of the GPT
Implementation		
Identify a staff member to complete travel coordinator duties in this plan for up to one year at a time	At year of opening	Complete & Ongoing Initially managed by HNELHD Capital Works, currently transitioning to MH Executive

Initiative	Implementation Plan	Status March 2023 – as per the 2023 update of the GPT
Provide a welcome pack for each new staff member which includes a Travel Access Guide (TAG) and information on how to become involved in the staff carpool system	At year of opening and with each new staff	Complete & Ongoing

Walking

Identify employees living near work that may be interested in walking to work	At year of opening and as part of regular updates to the GTP	Complete & Ongoing
Produce a map showing safe walking routes to and from your site showing times rather than distances, to local facilities, such as shops and public transport stops	At year of opening as part of Travel Access Guide (TAG)	Complete & Ongoing
Have a few umbrellas handy at reception for rainy days – perhaps bearing the NMH logo	At year of opening	Complete & Ongoing
Review condition of existing footpaths onsite regularly and upgrade as required	At year of opening and regularly as part of updates to the GTP	Complete & Ongoing
Take part in 'National Walk to Work Day'	Every year	HNELHD involvement in this initiative to be further considered.
Introduce new staff to end of trip facilities as part of their induction	Every time a new staff member begins	Complete & Ongoing

Cycling

Establish an internal Bicycle Users Group (BUG). BUGs are formed by people who want to work together to improve facilities for cyclists and encourage cycling	At year of opening with regular check-ins	Further cyclist initiatives to be considered in next period.
Develop a 'bike buddy' scheme for inexperienced cyclists	At year of opening	Further cyclist initiatives to be considered in next period.
Organise a breakfast for cyclists to incentivise	Once a month	Further cyclist initiatives to be

Initiative	Implementation Plan	Status March 2023 – as per the 2023 update of the GPT
staff to cycle as well as promoting cycling		considered in next period.
Review bicycle parking regularly to meet peak needs, upgrade as required	Regularly, annually or biannually	Complete. Currently sufficient capacity with existing infrastructure.
Provide bicycle parking for visitors	At year of opening	Complete. Currently sufficient capacity with existing infrastructure.
Ensure bicycle parking is clearly visible or provide signage to direct people to cycle bays	At year of opening	Complete.
Provide an on-site bicycle maintenance service (either as a special one-day event or on request)	Regularly, annually or biannually	Further cyclist initiatives to be considered in next period.
Supply a workplace toolkit consisting of puncture repair equipment, a bike pump, a spare lock and lights	At year of opening with regular review	Further cyclist initiatives to be considered in next period.
Produce a map showing more leisurely bicycle routes to work	At year of opening, as part of TAG	Further cyclist initiatives to be considered in next period.
Participate in annual events such as 'Ride to Work Day'	Annually	Further cyclist initiatives to be considered in next period.

Public Transport

Develop a map showing public transport routes to work	At year of opening, as part of TAG	Complete
Put up a notice board with leaflets and maps showing the main public transport routes to and from work	At year of opening, as part of TAG	Complete online. Location of physical board to be reviewed.
Place information on the work intranet with links to appropriate external websites e.g. transportnsw.info	At year of opening	Complete
Encourage discussions with public transport operators to provide a bus service between Victoria Street station and the hospital	At year of opening	Complete

Initiative	Implementation Plan	Status March 2023 – as per the 2023 update of the GPT
Car Pooling		
Introduce formal carpooling scheme to encourage staff to share rides	At year of opening	Further car-pooling initiatives to be considered in next period.
Set up a carpooling database that is updated regularly and used to inform staff	At year of opening	Further car-pooling initiatives to be considered in next period.
Organise postcode lunches to familiarise staff with each other	At year of opening	Further car-pooling initiatives to be considered in next period.
Consider carpooling opportunities when rostering staff with involvement by the TPC	At year of opening	Further car-pooling initiatives to be considered in next period.
Car Parking		
Identify priority users of car park (e.g. people with disabilities and car-poolers) which will be located closer to preferred and visible locations.	At year of opening	Complete. Further opportunities regarding carpooling to be considered in next period.

3.8. CONSULTATION OUTCOMES

Relevant stakeholders were consulted as required by the conditions in the preparation of the management plans for the site. Specifically:

- Notice of Occupation Letter 15/12/2021 provided to DPIE as required by Condition D1.
- Consultation with all relevant stakeholders regarding structural damage to assets as required by the Post Construction Dilapidation Report (Condition D4). Response from Ausgrid, Hunter Water, Jemena and Telstra (December 2021) confirmed no structural damage and no further action required.
- Consultation with Council regarding the Post Construction Dilapidation Report (D4). It is noted that council provided comment on the report and also were provided a copy of the final report.
- Consultation with Department of Planning and Environment regarding the Operation and Maintenance Plan (OMP) as required by Condition D20. Acceptance of the plan was acknowledged, and no further action required.
- Correspondence regarding the alternative approach to the Green Star rating to achieve Ecological Sustainable Development (ESD). Notification of an alternative process was provided to the department on the 12 December 2019. The department subsequently approved the final ESD Strategy on 17 August 2021.

3.9. COMPLAINTS

The audited noted that there have been no complaints in this audit period.

3.10. INCIDENTS

There have been no incidents recorded in this reporting period.

3.11. ACTUAL AND PREDICTED IMPACTS - PROJECT KEY RISK IN THE EIS

An assessment was undertaken of the actual versus the predicted impacts of the projects' key risks as identified in the EIS. Project key risks identified in the EIS included:

- Amenity
- Traffic and pedestrian access
- ESD
- Biodiversity
- Heritage
- Noise and Vibration
- Sediment, erosion and dust control
- Drainage and flooding
- Bushfire risk

Largely these have been addressed and closed out in previous audit reports and only those relating to the operational stage are discussed below including:

- Amenity as it relates to landscaping
- Traffic and pedestrian access (in relation to the Green Travel Plan)
- Biodiversity
- Noise and Vibration
- Bushfire risk

3.11.1. Amenity

The EIS included requirements for solar access, acoustic impacts, visual privacy, view loss, overshadowing, reflectivity from building facades and wind impacts. The EIS stated that a high level of environmental amenity for any surrounding residential land uses must be achieved.

Actual impact

The landscaping is now completed and all internal and external fit out complete. The project has achieved compliance with all requirements as evidenced through the various compliance certificates.

Recent photos of the site provided during this audit showed that the grounds and landscaping were well maintained and all internal and external component of the hospital finalised and operational.

3.11.2. Traffic

GTA Consultants have undertaken a Transport Impact Assessment outlining the traffic, access and parking impacts as well as mitigation measures associated with the proposed NMH. The assessment includes consideration for the transport conditions surrounding the road network at the opening of the NMH and at the

10-year horizon to ensure the road network is able to accommodate the operation and expected traffic generation of the NMH.

Actual impact

Post construction dilapidation surveys confirm that there was no impact to the surrounding road network.

Stantec have completed the Green Traffic Plan and access and parking arrangements are compliant with the conditions of consent. It was noted during this audit that not all components of the Green Travel Plan (GTP) have been implemented in line with Section 5 of the GTP (refer Section 3.4).

3.11.3. Biodiversity

The EIS identified the following impacts that were required to be managed in relation to biodiversity for Stage 1 of the works.

- Clearing of native vegetation, and removal of dead wood and dead trees causing direct habitat loss which in turn may cause:
 - Fragmentation/ Loss of habitat connectivity
 - Increase edge effects
 - Loss of tree food sources and reduced foraging habitat
 - Loss of nest sites.
- Introduction and/ or spread of noxious weeds and pathogens
- Disturbance of fauna during construction due to light, noise and air quality impacts generated by vehicles, equipment and construction activities
- Fauna mortality or injury
- Erosion of disturbed areas leading to sedimentation and dust affecting any downgradient habitat or habitat within drainage channels

Actual impacts

The majority of clearing occurred in stage 1 works, so the impacts relating to stage two were predominantly around the protection of existing vegetation.

A bush regeneration plan has been prepared as part of the weed management plan which states that weeding will occur in the remnant vegetation ground layer system in the disturbed roadside zone Metford Road, adjacent to the natural remnant vegetation area to the Southwest of the nominated area involved.

Daracon have undertaken the Bush regeneration works in this area. Black Beetle Landscape designers confirmed that the works had been completed in a letter dated 15 May 2021.

Daracon were engaged to undertake landscaping and maintain until establishment. This ceased in March 2022. Since that time the LHD has employed a number of grounds staff to look after landscaping. Time stamped photos were provided for review of all landscaped areas. A review of the photographs showed that the landscaping is maintained, weed free, mulched and plants appear to be thriving (refer Appendix E).

3.11.4. Noise impact

The noise assessment in the EIS set operational noise limits in the Stage 2 Noise and Vibration Assessment, prepared by Acoustic Logic, dated 5 April 2019

Acoustic Logic report dated 11/3/2022

Actual impacts

In order to test compliance with the Acoustics Logic operational noise predictions and limits, monitoring was undertaken. Operational noise monitoring occurred on the 10 March 2022 and confirmed compliance with operational noise limits (Acoustic Logic 11/3/2022)

Group DLA found mechanical plant to be compliant (Mechanical air handling systems), also included in Interim Certificate of Compliance for Mechanical Services issued by Fredon Air (NSW) Pty Ltd, dated 20/05/2021

Mechanical plant and equipment is being checked and maintained in accordance with manufacturers requirements as evidenced by service records.

3.11.5. Bushfire

A Bushfire Impact Assessment (BIA) was undertaken by to investigate the potential construction and operational bushfire hazards of the Proposal and how these risks could be suitably reduced and managed.

The land is located on bushfire prone land and contains bushfire hazards such as fuel from the surrounding vegetation and downslopes to the west and east of the southern building which could affect fire behaviour.

The BIA identified that the operation of plant and equipment using combustible fuels such as diesel and petrol would increase the risk of bushfire from the site to adjacent areas. The BIA recommended several bushfire protection measures recommended, including a 70m APZ, and concluded that the measures specified would provide an adequate standard of bushfire protection for the NMH.

Actual impacts

The audit reviewed Cadence Consulting Surveyor's boundary set out drawings and clearing limits (January 2019) which show that the APZ is outside of the area cleared.

Photos were provided of the APZ to show that this has been maintained as required.

3.12. SITE INSPECTION

A physical site inspection was not undertaken for this audit. Time stamped photos were provided on request of the following areas

- Site entrance
- Carparks
- Landscaped grounds
- Waste storage areas
- Maintenance room and hazardous material storage areas
- Backup generators and diesel storage areas

3.13. SITE INTERVIEWS

Site interviews occurred with staff from Multiplex and CBRE and the LHD during the course of the audit. The interviews found that staff understood the operational and pre operational conditions that were required to be completed.

3.14. PREVIOUS ANNUAL REVIEW OR COMPLIANCE REPORT RECCOMENDATIONS

There have been two compliance reports required under the conditions of consent:

- Pre Operational Compliance Report (December 2019)
- Post Operational Compliance Report (January 2022)

The Pre-Operational Compliance raised no non compliances.

The post operational compliance report raised the two non-compliances that were also raised in Audit report #4, as detailed in Section 3.5 above.

Annal reviews through construction were replaced by a six month review of the CEMP. The audit found that these are occurring but have not required substantial changes to any plan.

3.15. IMPROVEMENT OPPORTUNITIES

The audit noted that all construction and post construction requirements that are applicable to the project have been closed out. There are some conditions that have part of the requirement incomplete but still within the compliance limits. In light of this it is recommended that:

- The operational noise monitoring report required under condition E4 be provided to the Planning Secretary to close out this condition.

3.16. KEY STRENGTHS

The key strength of this project is the committed team. Multiplex and CBRE have a good understanding of the conditions and dedicate enough resources to manage compliance.

4. RECOMMENDATIONS

4.1. SUMMARY OF COMPLIANCE AND NON COMPLIANCES AGAINST CONDITIONS

One non-compliance was raised in this audit out of a total of 46 conditions relevant to the operational stage of the project, summarised in the table below.

Condition	Findings
E6 The Green Travel Plan required by condition D12 of this approval must be updated annually and implemented unless otherwise agreed by the Planning Secretary.	<p>The Green Travel Plan was updated in March 2023. It is noted that there are a number of requirements in the GTP that were assigned to be implemented at opening, with a regular review. Some of these actions have yet to be implemented including:</p> <ul style="list-style-type: none">• Talk part in National Walk to work day• Establish an internal Bicycle Users Group (BUG). BUGs are formed by people who want to work together to improve facilities for cyclists and encourage cycling• Develop a 'bike buddy' scheme for inexperienced cyclists at year of opening• Organise a breakfast for cyclists to incentivise staff to cycle as well as promoting cycling (Once a month)• Supply a workplace toolkit consisting of puncture repair equipment, a bike pump, a spare lock and lights• All Items under section 5.5 Carpooling <p>It is noted that the updated (2023) plan has stated that these actions will be considered in the next period. It also noted that a number of district wide initiatives have been implemented that are not included in the GTP including running a pilot program for salary packaging of e-bikes.</p>

5. CONCLUSION

The audit found no non-compliances with the Conditions of Approval for this reporting period and therefore the project is being undertaken in accordance with the requirements of the conditions relevant to the post construction and operational stage of the development. The document review found that the requirements of the operational management plans being implemented.

In summary the audit found one non-compliances, 41 compliance and 4 items that were not triggered.

All conditions of the approval have now been meet with the exception of the non-compliance raised against the Green Travel Plan. Turner and Townsend and the LHD updated the GPT in 2023 and from interviews during the audit it is understood that they are working on a way forward to address recommendations that have not been met in the GPT.

The table below shows the compliances against each part of the conditions.

Condition Part	Compliances	Non Compliances	Not triggered
D	29	0	2
E	12	1	2

APPENDIX A AUDIT PROTOCOL

Status	Description
Compliant (C)	The auditor has collected sufficient verifiable evidence to demonstrate that all elements of the requirement have been complied with within the scope of the audit.
Non-compliant (NC)	The auditor has determined that one or more specific elements of the conditions or requirements have not been complied with within the scope of the audit.
Not triggered (NT)	A requirement has an activation or timing trigger that has not been met at the time when the audit is undertaken, therefore an assessment of compliance is not relevant.

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	PART D PRIOR TO COMMENCEMENT OF OPERATION			
	Notification of Occupation			
SC2 – D1	At least one month before commencement of operation, the date of commencement of the operation of the development must be notified to the Planning Secretary in writing. If the operation of the development is to be staged, the Planning Secretary must be notified in writing at least one month before the commencement of each stage, of the date of commencement and the development to be carried out in that stage.	Notice of Occupation Letter 15/12/2021	The Notice of Occupation Letter states that it is the intention that occupation commences on the 17 January 2022. Therefore notification occurred within the one month period.	C
	External Walls and Cladding			
SC2 – D2	Prior to commencement of operation, the Proponent must provide the Certifier with documented evidence that the products and systems used in the construction of external walls including finishes and claddings such as synthetic or aluminium composite panels comply with the requirements of the BCA.	TTW compliance certification for external walls and cladding dated 4 March 2020	External walls and cladding were certified as compliant with this condition in March 2022	C
SC2 – D3	The Proponent must provide a copy of the documentation given to the Certifier to the Planning Secretary within seven days after the Certifier accepts it.	Post approval forms – DPIE re D3 and email response	All documentation was provided to the department in January 2022. The Department have acknowledged	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
		from DPIE dated 17/01/2022	receipt of the documentation and compliance with the condition.	
	Post-construction Dilapidation Report			
SC2 – D4	Prior to commencement of operation, the Proponent must engage a suitably qualified person to prepare a post-construction dilapidation report at the completion of construction. This report is:	Post-Construction Dilapidation Report Douglas Partners 8/12/2021	The Post-Construction Dilapidation Report was prepared in December 2021 which is prior to occupation.	C
SC2 – D4 – a	(a) to ascertain whether the construction created any structural damage to adjoining buildings or infrastructure;	Post-Construction Dilapidation Report Douglas Partners 8/12/2021	Post-Construction Dilapidation Report confirms that defects were similar to those described in the 2019 report.	C
SC2 – D4 – b	(b) to be submitted to the Certifier. In ascertaining whether adverse structural damage has occurred to adjoining buildings or infrastructure, the Certifier must:			
SC2 – D4 – b – i	(a) compare the post-construction dilapidation report with the pre-construction dilapidation report required by these conditions; and		Post-Construction Dilapidation Report confirms that defects were similar to those described in the 2019 report.	C
SC2 – D4 – b – ii	(ii) have written confirmation from the relevant authority that there is no adverse structural damage to their infrastructure and roads;	Email evidence re no structural damage to assets	Email evidence from the following confirmed no adverse damage: <ul style="list-style-type: none"> Ausgrid 6/12/2021 	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
		from Ausgrid, Hunter Water, Jemena and Telstra (December 2021)	<ul style="list-style-type: none"> Hunter water 3/12/2021 Jemena 6/12/2021 Telstra 3/12/2021 	
SC2 – D4 - c	(c) to be forwarded to Council.	Email correspondence to council dated 13/12/2021 re condition D4	Email evidence confirms that the compliance report was provided to Council prior to operation.	C
	Protection of Public Infrastructure			
SC2 – D5 a	Unless the Proponent and the applicable authority agree otherwise, the Proponent must: (a) repair, or pay the full costs associated with repairing, any public infrastructure that is damaged by carrying out the development; and			NT
SC2 – D5 - b	(b) relocate, or pay the full costs associated with relocating any infrastructure that needs to be relocated as a result of the development. <i>Note: This condition does not apply to any damage to roads caused as a result of general road usage or otherwise addressed by contributions required by conditions of this approval.</i>			NT

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	Protection of Property			
SC2 – D6	Unless the Proponent and the applicable owner agree otherwise, the Proponent must repair, or pay the full costs associated with repairing any property that is damaged by carrying out the development			NT
	Utilities and Services			
SC2 – D7	Prior to commencement of operation, a compliance certificate under the section 307 of the Water Management Act 2000 must be obtained from the relevant authority and submitted to the Certifier.	Hunter Water Compliance Certificate 14 August 2019	Hunter Water Compliance Certificate 14 August 2019 confirms compliance with this condition	C
	Roadworks and Access			
SC2 – D8	Prior to the commencement of operation, the Proponent must demonstrate to the satisfaction of the Planning Secretary that the intersection upgrade works at the Chelmsford Drive and Metford Road intersection have been completed or that the intersection is able to operate within design capacity until the intersection upgrade works can be completed.	Site interview Multiplex Project engineer & Site visit DPIE Post approval form and email receipt. Council certificate of practical completion dated 24/8/2021	All works at the intersection are completed in line with the approved plans. The planning secretary was provided all practical completion documentation for Chelmsford Road and confirmed receipt of the documentation on the 6/12/2021.	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D9	Prior to the commencement of operation, the Proponent must demonstrate to the Planning Secretary that a shared path along the eastern side of Metford Road, has been completed in accordance with design specifications prepared in consultation with Council.	Site interview Multiplex Project engineer & site visit DPIE Post approval form and email receipt. Council certificate of practical completion dated 24/8/2021	All works at the intersection are completed in line with the approved plans. The planning secretary was provided all practical completion documentation for Chelmsford Road and the shared path and confirmed receipt of the documentation on the 6/12/2021.	C
	Works as Executed Plans			
SC2 – D10	Prior to the commencement of operation, works-as-executed drawings signed by a registered surveyor demonstrating that the stormwater drainage and finished ground levels have been constructed as approved, must be submitted to the Certifier.	Daracon Letter dated 30/11/2021 De Witt Consulting designs WAE signed 7/12/2021	Daracon have confirmed that works have been completed as the De-Witt designs and signed by a registered surveyor on 7/12/2021	C
	Heritage Interpretation Plan			
SC2 – D11	The Proponent must implement the most recent version of the Heritage Interpretation Plan approved under condition B33.	Site visit	Heritage Interpretation Plan completed. Heritage signage and displays were evident during the site visit (refer Site Photos Appendix E).	C
	Green Travel Plan			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D12	Prior to the commencement of operation, a Green Travel Plan (GTP), must be submitted to the Planning Secretary to promote the use of active and sustainable transport modes. The plan must:	Green Travel Plan Stantec 8/2/2022	Final Green Travel Plan issued on the 21 March 2022	C
SC2 – D12 - a	(a) be prepared by a suitably qualified traffic consultant in consultation with TfNSW;		Prepared by Stantec Traffic engineers in consultation with TfNSW	C
SC2 – D12 - b	(b) include objectives and modes share targets (i.e. site and land use specific, measurable and achievable and timeframes for implementation) to define the direction and purpose of the GTP;		Section 4.3 of the plan	C
SC2 – D12 – c	(c) include specific tools and actions to help achieve the objectives and mode share targets, including supporting TfNSW develop and deliver suitable bus routes to support the use of that transport mode;		Section 5	C
SC2 – D12 – d	(d) include measures to promote and support the implementation of the plan, including financial and human resource requirements, roles and responsibilities for relevant employees involved in the implementation of the GTP; and		Section 5	C
SC2 – D12 - e	(e) include details regarding the methodology and monitoring/review program to measure the effectiveness of the objectives and mode share targets of the GTP, including the frequency of monitoring and the requirement for travel surveys to identify travel behaviours of users of the development.		Section 6	C
	Evacuation and Emergency Planning			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D13	Prior to the commencement of operation, a Bush Fire Emergency Management and Evacuation Plan must be prepared consistent with Development Planning – A Guide to Developing a Bush Fire Emergency Management and Evacuation Plan December 2014.	Disaster plan January 2022 Bushfire response Plan January 2022	These plans have been prepared in January 2022 prior to commencement of operations.	C
	Mechanical Ventilation			
SC2 – D14	Prior to commencement of operation, the Proponent must provide evidence to the satisfaction of the Certifier that the installation and performance of the mechanical ventilation systems complies with:			
SC2 – D14 - a	(a) <i>AS 1668.2-2012 The use of air-conditioning in buildings – Mechanical ventilation in buildings and other relevant codes; and</i>	Group DLA Certificate dated 3 June 2021	The Group DLA certificate notes compliance with this requirement	C
SC2 – D14 - b	(b) <i>any dispensation granted by Fire and Rescue NSW.</i>		None granted	C
	Operational Noise – Design of Mechanical Plant and Equipment			
SC2 – D15	Prior to the commencement of operation, the Proponent must submit evidence to the Certifier that the noise mitigation measures required by condition B23 have been implemented to	Acoustic Logic Acoustic Certificate	Acoustic testing was conducted on Wednesday the 19th of May 2021. Measurements of operational noise emissions from mechanical plant and equipment were	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	ensure the development does not exceed the project specific noise levels identified in the <i>New Maitland Hospital State Significant Infrastructure Application – Stage 2 Noise and Vibration Assessment</i> .	for SSI-9775 dated 25 May 2021	found to be compliant with the external noise emission requirements outlined in the New Maitland Hospital SSI II Noise & Vibration Assessment report p	
	Road Damage			
SC2 – D16	Prior to the commencement of operation, the cost of repairing any damage caused to Council or other Public Authority's assets in the vicinity of the Subject Site as a result of construction works associated with the approved development must be met in full by the Proponent.			NT
	FIRE SAFETY CERTIFICATION			
SC2 – D17	Prior to commencement of occupation, a Fire Safety Certificate must be obtained for all the Essential Fire or Other Safety Measures forming part of this approval. A copy of the Fire Safety Certificate must be submitted to the relevant authority and Council. The Fire Safety Certificate must be prominently displayed in the building.	Fire Safety Certificate 29/11/2021 Post approval document submission form 16/1/2022	A Fire Safety Certificate approved under the Environmental Planning and Assessment regulation 2000 has been prepared in November 2021. A copy of the certificate was provided to DPIE on 16/1/2022. The Fire Safety Certificate is displayed in the Fire Control Room.	C
	Structural Inspection Certificate			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D18	Prior to the commencement of occupation of the relevant parts of any new or refurbished buildings, a Structural Inspection Certificate or a Compliance Certificate must be submitted to the satisfaction of the Certifier. A copy of the Certificate with an electronic set of final drawings (contact approval authority for specific electronic format) must be submitted to the approval authority and the Council after:	TTW Structural Design and Inspection Certificate 21 April 2021	TTW certify that the Structural Design of the New Maitland Hospital, Metford Road, Maitland is in accordance with the requirements of BCA 2016 Clauses B1.1, B1.2, B1.4, and relevant Australian Standards	C
SC2 – D18 - a	(a) the site has been periodically inspected and the Certifier is satisfied that the structural works is deemed to comply with the final design drawings; and			C
SC2 – D18 – b	(b) the drawings listed on the Inspection Certificate have been checked with those listed on the final Design Certificate/s.			C
	Compliance with Food Code			
SC2 – D19	Prior to the commencement of operation, the Proponent is to obtain a certificate from a suitably qualified tradesperson, certifying that the kitchen, food storage and food preparation areas have been fitted in accordance with the AS 4674 Design, construction and fit-out of food premises and provide evidence of receipt of the certificate to the satisfaction of the Certifier.	EFD Certificate of construction compliance sated 20 May 2021	Universal Foodservice Designs Pty Ltd. acknowledges that the New Maitland Hospital kitchen areas have been designed & constructed in accordance with the Australian Codes and Standards	C
	Stormwater Quality Management Plan			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D20	<p>Prior to the commencement of operation, an Operation and Maintenance Plan (OMP) is to be submitted to the satisfaction of the Certifier along with evidence of compliance with the OMP. The OMP must ensure the proposed stormwater quality measures remain effective and contain the following:</p> <ul style="list-style-type: none"> (a) maintenance schedule of all stormwater quality treatment devices; (b) record and reporting details; (c) relevant contact information; and (d) Work Health and Safety requirements. 	<p>Stormwater Operation and Maintenance Plan Daracon December 2021</p> <p>Letter dated 3/12/2021 regarding compliance with condition</p>	<p>Daracon have prepared a Stormwater Operation and Maintenance Plan, that complies with the requirements of this condition.</p> <p>The OMP covers Stormwater including Gross Pollutant Traps, OSD tanks and pits and pipework. Each asset has a full scope of maintenance requirements, record requirements and contact details in addition a full operations manual for each asset is also included.</p>	C
	Rainwater Harvesting			
SC2 – D21	<p>Prior to the commencement of operation, signed works-as-executed Rainwater Re-use Plan must be provided to the Planning Secretary and Certifier.</p>	<p>DPIE – HI Emails re rainwater harvesting 24 May 2021</p>	<p>Signed works-as-executed Rainwater Re-Use Plan have been provided to DPIE (email dated 24 May 2021)</p>	C
	Warm Water Systems and Cooling Systems			
SC2 – D22	<p>The installation of water cooling systems (as defined under the <i>Public Health Act 2010</i>) must comply with the <i>Public Health Act 2010</i>, Public Health Regulation 2012 and the relevant parts of <i>AS/NZS 3666.2:2011 Air handling and water systems of buildings – Microbial control – Operation and maintenance</i> and the NSW Health Code of Practice for the Control of Legionnaires' Disease</p>	<p>Planet Plumbing ACT Water installation certificate 19 April 2021</p>	<p>Water Systems have been certified to comply with this condition.</p>	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	Outdoor Lighting			
SC2 – D23	Prior to the commencement of operation, the Proponent must submit evidence from a suitably qualified practitioner to the Certifier that demonstrates that installed lighting associated with the development achieves the objective of minimising light spillage to any adjoining or adjacent sensitive receivers and:	Design Certificate Downer EDI Power 10/11/2021	Design certificate by a qualified electrician confirms compliance with this condition.	C
SC2 – D23 - a	a) complies with the latest version of AS 4282-2019 - <i>Control of the obtrusive effects of outdoor lighting</i> (Standards Australia, 1997); and			C
SC2 – D23 - b	b) has been mounted, screened and directed in such a manner that it does not create a nuisance to surrounding properties or the public road network.			C
	Signage			
SC2 – D24	Prior to the commencement of operation, way-finding signage and signage identifying the location of staff car parking must be installed.	Site visit	The site visit confirmed that signage has been installed	C
SC2 – D25	Prior to the commencement of operation, bicycle way-finding signage must be installed within the site to direct cyclists from footpaths to designated bicycle parking areas.	Site visit	Bicycle way finding signage was noted during the site inspection.	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D26	Prior to the commencement of operation, 'Do not drink' signage on non-potable water to new hose taps and irrigation systems for landscaped areas must be installed within the site.	Site interview	There is no non potable water used at hose taps.	C
	Site Audit Statement			
SC2 – D27	Prior to the commencement of operation, the Proponent must submit a Site Audit Report and Section A Site Audit Statement for the relevant part of the site prepared by a NSW EPA accredited Site Auditor. The Site Audit Report and Section A Site Audit Statement must verify the relevant part of the site is suitable for the intended land use and be provided for the information of the Planning Secretary and the Certifier.	JBS&G Site audit report & Statement 17/12/2021 Long Term Environmental Management Plan (GHD 15/12/2021)	<p>The site audit report is completed and states that the site is suitable for use in conjunction with the Long Term Environmental Management Plan (GHD December 2021).</p> <p>Based on previous investigations and the remediation and validation works carried out as part of earthworks completed at the site, GHD identified five distinct areas known to contain materials subject to environmental management requirements including;</p> <p>The soils remaining from remediation of bonded asbestos containing material (ACM), emplaced approximately 0.3 m below the surface, to the east of the bio-retention basin (Area A).</p> <p>Remaining concentrations of ACM in soil considered to be less than health-based screening criteria (HSLs), but potential remains for some asbestos to be present.–The soils from the bonded ACM asbestos remediation, emplaced approximately 0.3m below the surface, to the south of the southern access road/west of the future expansion area (Area B).</p>	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
			<p>Remaining concentrations of ACM in soil considered to be less than HSLs, but potential remains for some asbestos to be present.</p> <p>The three identified coal seams remaining approximately 0.8m or more below the surface in the eastern expansion area.(Not contamination per se, but material which could present a hazard if exposed and subject to ignition such as from a bush fire).</p> <p>The remaining ACM-impacted material within Pit 2, approximately 2m or greater below the final design level, in the central/western portion of the northern carpark.– ACM-impacted material excavated from Pit 2, which was placed in a containment area in the eastern portion of the northern carpark, at a depth greater than 2m below the final design level.</p> <p>There is also a potential for isolated occurrences of contamination to be present in other areas of the site as “unexpected finds”, particularly in areas of fill material that have not been disturbed by the site development works. Furthermore, previously identified contamination remains in the portions of Areas 1 and 3 that have not been developed/disturbed, and in Area 4 (which has not been developed/disturbed) .Hence the entire site is subject to management requirements if subsurface disturbance is undertaken</p>	
	Asset Protection Zones			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D28	<p>Prior to the commencement of operation, the Asset Protection Zones (APZ) surrounding the building as identified in Figure 5 of <i>Bushfire Assessment Report New Maitland Hospital Stage 2 – State Significant Infrastructure Application</i>, prepared by Newcastle Bushfire Consulting, dated 2 April 2019, must be provided in accordance with section 4.1.3 and Appendix 5 of the <i>Planning for Bush Fire Protection 2006</i> and the NSW RFS document Standards for asset protection zones, as amended by the following requirements:</p> <p>(a) an inner protection area (IPA) for a distance of 40m to the south-east of the building;</p> <p>(b) an IPA for a distance of 50m to the east of the building;</p> <p>(c) an IPA for a distance of 68m to the west of the building; and</p> <p>(d) an APZ of 70m to the south and south-west, consisting of an IPA of 60m and an outer protection area of 10m.</p>	The Couch Family Trust t/a Newcastle Bushfire Consulting Certification dated 5 May 2021	Bushfire consultants have certified at the APZ is in accordance with this condition.	C
	Landscaping			
SC2 – D29	<p>Prior to the commencement of operation, the Proponent must prepare an Operational Landscape Management Plan to manage the revegetation and landscaping on-site, to the satisfaction of the Certifier. The plan must describe the ongoing monitoring and maintenance measures to manage revegetation and landscaping.</p>	Operational Landscape Management Plan Daracon November 2021	An Operational Landscape Management Plan has been prepared. Section 2 of the plan deals with maintenance measures.	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – D30	The Operational Landscape Management Plan must ensure that all landscaping within APZs complies with the principles outlined in Appendix 5 of the <i>Planning for Bush Fire Protection 2006</i> .		This requirement is covered in Section 2.4 of the plan.	C
SC2 – D31	The Proponent must not commence operation until the Operational Landscape Management Plan endorsed by the Certifier is submitted to the Planning Secretary.	Email dated 9/12/2021 showing OMP submission to DPIE Operational Landscape Management Plan OMP November 2021	Email dated 9/12/2021 showing OMP submission to DPIE	C
	PART E POST OCCUPATION			
	Operation of Plant and Equipment			
SC2 – E1	All plant and equipment used on site must be maintained in a proper and efficient condition operated in a proper and efficient manner.	Carrier service report 31 May 2022	The audit reviewed the inspection report carried out on all “chillers” on site. Independent contractors are used to undertake scheduled maintenance of all equipment in line with the relevant maintenance schedules.	C
	Warm Water Systems and Cooling Systems			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – E2	The operation and maintenance of water cooling systems (as defined under the Public Health Act 2010) must comply with the Public Health Act 2010, Public Health Regulation 2012 and Part 2 (or Part 3 if a Performance-based water cooling system) of AS/NZS 3666.2:2011 Air handling and water systems of buildings – Microbial control – Operation and maintenance and the NSW Health Code of Practice for the Control of Legionnaires' Disease.	Simons Boilers Service sheet 15041 7/4/2022	Warm water systems are serviced by Simons Boilers as evidenced by the Service Sheet report. Water-cooling systems are serviced by "Carrier"	C
	Operational Noise Limits			
SC2 – E3	The Proponent must ensure that noise generated by operation of the development does not exceed the noise limits in <i>New Maitland Hospital State Significant Infrastructure Application – Stage 2 Noise and Vibration Assessment</i> , prepared by Acoustic Logic, dated 5 April 2019.	Acoustic Logic report dated 11/3/2022	Acoustic logic undertook operational noise monitoring on the 10 March 2022 and confirm compliance with this condition in their report date 11/3/2022	C
SC2 – E4	The Proponent must undertake short term noise monitoring in accordance with the <i>Noise Policy for Industry</i> where valid data is collected following the commencement of use of each stage of the development. The monitoring program must be carried out by an appropriately qualified person and a monitoring report must be submitted to the Planning Secretary within two months of commencement use of each stage of the development to verify that operational noise levels do not exceed the project specific noise levels identified in <i>New Maitland Hospital State Significant Infrastructure Application – Stage 2 Noise and Vibration Assessment</i> , prepared by Acoustic Logic, dated 5		Acoustic logic undertook short term noise monitoring on the 10 March 2022 and confirm compliance with this condition in their report date 11/3/2022. No exceedances were identified. The two month period of commencement had not been triggered at the time of the audit. It is recommended that this report now be sent to the Planning Secretary to close out this condition.	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	April 2019. Should the noise monitoring program identify any exceedance of the recommended noise levels referred to above, the Proponent is required to implement appropriate noise attenuation measures so that operational noise levels do not exceed the project specific noise levels or provide attenuation measures at the affected noise sensitive receivers.			
	Unobstructed Driveways and Parking Areas			
SC2 – E5	All driveways, footways and parking areas must be unobstructed at all times. Driveways, footways and car spaces must not be used for the manufacture, storage or display of goods, materials, refuse, skips or any other equipment and must be used solely for vehicular and/or pedestrian access and for the parking of vehicles associated with the use of the premises.	Site visit	The site visit noted compliance with this condition.	C
	Green Travel Plan			
SC2 – E6	The Green Travel Plan required by condition D12 of this approval must be updated annually and implemented unless otherwise agreed by the Planning Secretary.		The Green Travel Plan was been updated in March 2023.It is noted that there are a number of requirements in the GTP that were assigned to be implemented at opening, with a regular review. Many of these actions have yet to be implemented. It is noted that the updated (2023) plan has stated that these actions will be considered in the next period.	NC
	East Car Park			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – E7	Within two years of commencement of hospital operations, the East Car Park as identified on Drawing number 01A-AX0-102, titled Site Plan (roof view), revision 5, dated 28 May 2021, must be completed and operational and contain a minimum 140 line-marked car parking spaces.	GTA Occupation certificate 15/12/2021	GTA now Stantec as traffic engineers for the project confirm compliance with this condition including the 140 car spaces.	C
	Ecologically Sustainable Development			
SC2 – E8	Unless otherwise agreed by the Planning Secretary, within six months of commencement of operation, Green Star certification must be obtained demonstrating the development achieves a minimum 4 star Green Star Design & As Built rating. If required to be obtained, evidence of the certification must be provided to the Certifier and the Planning Secretary. If an alternative certification process has been agreed to by the Planning Secretary under Condition B7, evidence of compliance of implementation must be provided to the Planning Secretary and Certifier.	DPIE correspondence dated 17/8/2021	A ESD process in lieu of GreenStar has been submitted and accepted by planning as evidence in the DPIE Correspondence dated 17/8/2021	C
	Outdoor Lighting			
SC2 – E9	Notwithstanding Condition D23, should outdoor lighting result in any residual impacts on the amenity of surrounding sensitive receivers, the Proponent must provide mitigation measures in			NT

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	consultation with affected landowners to reduce the impacts to an acceptable level.			
	Landscaping			
SC2 – E10	The Proponent must maintain the landscaping and vegetation on the site in accordance with the approved Landscape Management Plan required by condition D29 for the duration of occupation of the development.	Maintenance site reports – Daracon 21/1/2022 22/2/2022	Daracon are undertaking maintenance in accordance with the LMP as evidenced by the site records.	C
	Rainwater Harvesting			
SC2 – E11	The Proponent must implement the rainwater re-use plan required by condition D21 for the duration of the development	Rainwater re-use plan	Rainwater tanks in the lower ground floor used for irrigation – unused water overflows into stormwater. Photographs of the system provided during the audit indicate that the system is functioning and tanks are being used at required capacities.	C
	Asset Protection Zones			
SC2 – E12	The asset protection zones required by condition D28 shall be maintained for the duration of occupation of the development.	Site visit	The Photos provided during the audit noted that the APZ is being maintained. This is also a requirement of the LMP.	C
	Hazards and Risk			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – E13	<p>The Proponent must store all chemicals, fuels and oils used on-site in accordance with:</p> <p>(a) the requirements of all relevant Australian Standards; and</p> <p>(b) the EPA's Storing and Handling of Liquids: Environmental Protection – Participants Manual' if the chemicals are liquids.</p>	Site visit	The site visit that all chemicals are stored in the locked storeroom. There is a designated bunded diesel fuel storage area outside the building for fuel for backup generators (refer site photos).	C
SC2 – E14	In the event of an inconsistency between the requirements of condition E14(a) and E14(b), the most stringent requirement must prevail to the extent of the inconsistency.		Noted	NT
	Dangerous Goods			
SC2 – E15	The quantities of dangerous goods stored and handled at the site must be below the threshold quantities listed in the Department of <i>Planning's Hazardous and Offensive Development Application Guidelines – Applying SEPP 33</i> at all times.		SEPP 33 thresholds are not triggered.	C
	APPENDIX 1 ADVISORY NOTES			
	General			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 - AN1	All licences, permits, approvals and consents as required by law must be obtained and maintained as required for the development. No condition of this approval removes any obligation to obtain, renew or comply with such licences, permits, approvals and consents.	Trade Waste Deed 19/5/2021 Chiller registration Ausgrid Easement Execution Radio Antennae Licence # 11147318/1		C
	Long Service Levy			
SC2 – AN2	For work costing \$25,000 or more, a Long Service Levy must be paid. For further information please contact the Long Service Payments Corporation Helpline on 131 441.	LSL receipt	A receipt for the payment of the LSL dated 27/11/2018 was sighted at the audit.	C
	Legal Notices			
SC2 – AN3	Any advice or notice to the approval authority must be served on the Planning Secretary			NT
	Access for People with Disabilities			
SC2 – AN4	The works that are the subject of this application must be designed and constructed to provide access and facilities for people with a disability in accordance with the BCA. Prior to the commencement of construction, the Certifier must ensure that	Group DLA Accessibility Completion	The Accessibility design certificate confirms that the design provides access and facilities for people with a disability in accordance with the BCA. This is detailed in the Group DLA Accessibility Compliance Report for	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	evidence of compliance with this condition from an appropriately qualified person is provided and that the requirements are referenced on any certified plans.	Statement 16/12/2021	Design Development DD30 Revision F/Rev 6, dated 22.08.2019. Group DLA have also issued a completion statement confirming compliance with the BCA regarding providing access and facilities for people with a disability.	
	Utilities and Services			
SC2 – AN5	Prior to the construction of any utility works associated with the development, the Proponent must obtain relevant approvals from service providers.			NT
SC2 – AN6	Prior to the commencement of above ground works written advice must be obtained from the electricity supply authority, an approved telecommunications carrier and an approved gas carrier (where relevant) stating that satisfactory arrangements have been made to ensure provisions of adequate services.			NT
	Road Design and Traffic Facilities			
SC2 – AN7	All roads and traffic facilities must be designed to meet the requirements of Council or TfNSW (RMS) (whichever is applicable). The necessary permits and approvals from the relevant road authority must be obtained prior to the commencement of road or pavement construction works.	TTW Carports and Roads Design Certificate dated 11 November 2019 Civil design certificate TTW 10/12/21	The audit reviewed the design certificate which confirms that Roads and carports meet the requirements of: <ul style="list-style-type: none"> • BCA 2016 (NCC) Volume 3 Part D2 - Surface and Subsurface Drainage Systems • BCA 2016 (NCC) Volume 1 Part F1.1- Stormwater drainage • BCA 2016 (NCC) Amendment 1 • AS 2890.1 - 2004 Off Street Car Parking • AS 2890.2 - 2002 Off Street Car Parking – 	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
		<p>Structural Design and Inspection Certificate – Eastern Carpark retaining Wall TTW 1/12/2021</p> <p>Structural Design and Inspection Certificate – Northern Carpark Solar Structure TTW 1/12/2021</p>	<p>Commercial Vehicle Facilities</p> <ul style="list-style-type: none"> AS 3500.3 - 2015 Plumbing and Drainage - Stormwater Drainage AS 3725 - 2007 Design for installation of buried pipes AS 3600 – 2009 Concrete Structures Australian Rainfall and Runoff 2016 NSW Department of Housing Managing Urban Stormwater (Landcom Blue Book) AustRoads Guide to Pavement Technology Part 2: Pavement Structural Design 2012 <p>Civil and stormwater design of the hospital have been certified as compliant by TTW Structural Civil and Traffic Engineers.</p> <p>The eastern and northern carparks have been certified as compliant by TTW Structural Civil and Traffic Engineers.</p>	
	Road Occupancy Licence			
SC2 – AN8	A Road Occupancy Licence must be obtained from the relevant road authority for any works that impact on traffic flows during construction activities.			NT
	SafeWork Requirements			
SC2 – AN9	To protect the safety of work personnel and the public, the work site must be adequately secured to prevent access by unauthorised personnel, and work must be	<p>Site visit</p> <p>Downer Onsite monitoring of</p>	The site is fenced with security fencing and a locked gate.	C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
	conducted at all times in accordance with relevant SafeWork requirements.	SWMS document dated 7/6/2020 Multiplex Onsite monitoring of SWMS document dated 7/6/2020	Monthly onsite monitoring of SWMS is occurring to check that works are being undertaken in accordance with relevant SafeWork requirements.	
	Hoarding Requirements			
SC2 - AN10	The Proponent must submit a hoarding application to Council for the installation of any hoardings over Council footways or road reserve.			NT
	Handling of Asbestos			
SC2 - AN11	The Proponent must consult with SafeWork NSW concerning the handling of any asbestos waste that may be encountered during construction. The requirements of the Protection of the Environment Operations (Waste) Regulation 2014 with particular reference to Part 7 – 'Transportation and management of asbestos waste' must also be complied with.			
	Fire Safety Certificate			

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 - AN12	The owner must submit to Council an Annual Fire Safety Statement, each 12 months after the final Safety Certificate is issued. The certificate must be on, or to the effect of, Council's Fire Safety Statement.	Fire Safety Certificate 29/11/2021	A Fire Safety Certificate approved under the Environmental Planning and Assessment regulation 2000 has been prepared November 2021.	C
	APPENDIX 2 WRITTEN INCIDENT NOTIFICATION AND REPORTING REQUIREMENTS			
	Written Incident Notification Requirements			
SC2 - 1	A written incident notification addressing the requirements set out below must be emailed to the Planning Secretary at the following address: compliance@planning.nsw.gov.au within seven days after the Proponent becomes aware of an incident. Notification is required to be given under this condition even if the Proponent fails to give the notification required under condition A25 or, having given such notification, subsequently forms the view that an incident has not occurred.	Refer to notes in A26	Two incidents occurred on the 21 st of January 2020 and notification to the department occurred on the 22 nd . Both incidents were safety related and no environmental harm was caused. Further safety incidents occurred in January and February 2021. DPIE were notified of the incident as require by A26	C
SC2 – 2 – a	Written notification of an incident must (a) identify the development and application number;		Refer A27	C
SC2 – 2 – b	(b) provide details of the incident (date, time, location, a brief description of what occurred and why it is classified as an incident);			C

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – 2 - c	(c) identify how the incident was detected;			C
SC2 – 2 - d	(d) identify when the Proponent became aware of the incident;			C
SC2 – 2 - e	(e) identify any actual or potential non-compliance with conditions of approval;			C
SC2 – 2 - f	(f) describe what immediate steps were taken in relation to the incident;			C
SC2 – 2 - g	(g) identify further action(s) that will be taken in relation to the incident; and			C
SC2 – 2 - h	(h) identify a project contact for further communication regarding the incident.			C
SC2 - 3	Within 30 days of the date on which the incident occurred or as otherwise agreed to by the Planning Secretary, the Proponent must provide the Planning Secretary and any relevant public authorities (as determined by the Planning Secretary) with a detailed report on the incident addressing all requirements below, and such further reports as may be requested.			NT

ID	Compliance Requirement	Evidence collected	Findings and recommendations	Status
SC2 – 4	The Incident Report must include:			
SC2 – 4 – a	(a) a summary of the incident;			NT
SC2 – 4 – b	(a) outcomes of an incident investigation, including identification of the cause of the incident;			NT
SC2 – 4 – c	(b) details of the corrective and preventative actions that have been, or will be, implemented to address the incident and prevent recurrence; and			NT
SC2 – 4 – d	(c) details of any communication with other stakeholders regarding the incident.			NT

APPENDIX B PLANNING SECRETARY AUDIT TEAM AGREEMENT AND AUDITOR CV

APPENDIX C : CONSULTATION

Updated Audit Schedule and Independence statement provided in March 2023 by the proponent

APPENDIX D INDEPENDENT AUDIT DECLARATION

Independent Audit Declaration Form

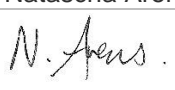
Project Name	New Maitland Hospital – Stage 2
Consent Number	SSI 9775
Description of Project	New Maitland Hospital – Stage 2
Project Address	Metford Road, Metford
Proponent	Heath Infrastructure
Title of Audit	Multiplex
Date	Independent Audit

I declare that I have undertaken the Independent Audit and prepared the contents of the attached Independent Audit Report and to the best of my knowledge:

- the audit has been undertaken in accordance with relevant condition(s) of consent and the *Independent Audit Post Approval Requirements (Department 2018)*;
- the findings of the audit are reported truthfully, accurately and completely;
- I have exercised due diligence and professional judgement in conducting the audit;
- I have acted professionally, objectively and in an unbiased manner;
- I am not related to any proponent, owner or operator of the project neither as an employer, business partner, employee, or by sharing a common employer, having a contractual arrangement outside the audit, or by relationship as spouse, partner, sibling, parent, or child;
- I do not have any pecuniary interest in the audited project, including where there is a reasonable likelihood or expectation of financial gain or loss to me or spouse, partner, sibling, parent, or child;
- neither I nor my employer have provided consultancy services for the audited project that were subject to this audit except as otherwise declared to the Department prior to the audit; and
- I have not accepted, nor intend to accept any inducement, commission, gift or any other benefit (apart from payment for auditing services) from any proponent, owner or operator of the project, their employees or any interested party. I have not knowingly allowed, nor intend to allow my colleagues to do so.

Notes:

- a) Under section 10.6 of the *Environmental Planning and Assessment Act 1979* a person must not include false or misleading information (or provide information for inclusion in) in a report of monitoring data or an audit report produced to the Minister in connection with an audit if the person knows that the information is false or misleading in a material respect. The proponent of an approved project must not fail to include information in (or provide information for inclusion in) a report of monitoring data or an audit report produced to the Minister in connection with an audit if the person knows that the information is materially relevant to the monitoring or audit. The maximum penalty is, in the case of a corporation, \$1 million and for an individual, \$250,000; and
- b) The *Crimes Act 1900* contains other offences relating to false and misleading information: section 307B (giving false or misleading information – maximum penalty 2 years imprisonment or 200 penalty units, or both)

Name of Auditor	Natascha Arens
Signature	 5/4/2023
Qualification	BAppSc, Masters Business and Environmental management, Certified Exemplar lead environmental auditor.
Company	Natascha.a@nghconsulting.com.au
Company Address	NGH 17/21 Mary Street, Surry Hills NSW 2010

APPENDIX E SITE PHOTOS



Diesel backup generators and diesel supply in locked bunded area



Locked and bunded chemical storage area



Wayfinding signage and landscaping



Sediment basin converted to stormwater run-off



Landscaping at rear of building



Car park and landscaping



Asset protection zone and native remnant vegetation



Loading dock and waste separation

13 April 2022

Joel Curran
Mr. Joel Curran
Senior Compliance Officer
Northern Region
NSW Department of Planning, Industry and Environment
E. joel.curran@planning.nsw.gov.au

Dear Joel,

**RE: New Maitland Hospital
Response to Independent Audit Report (under SSI 9775 Stage 2 Conditions, SC2 C37)**

In accordance with Schedule 2 Clause 34 of the State Significant Infrastructure (SSI) consent 9775, Health Infrastructure has received the 6th Independent Audit Report from NGH Environmental and provides this response under Schedule 2 Clause 38.

We have reviewed the Independent Audit Report and note that the Independent Auditor, NGH Environmental has identified 1 non-compliance for this reporting period out of a total of 153 Conditions of Approval plus 12 advisory notes to which we provide the following response:

Clause No.	Non-Conforming Condition	Response
SC2-E6	<p>The Green Travel Plan required by condition D12 of this approval must be updated annually and implemented unless otherwise agreed by the Planning Secretary.</p> <p>The Green Travel Plan was updated in March 2023. It is noted that there are a number of requirements in the GTP that were assigned to be implemented at opening, with a regular review. Many of these actions have yet to be implemented. It is noted that the updated (2023) plan has stated that these actions will be considered in the next period.</p>	<p>The Green Travel plan was updated annually as required by the condition.</p> <p>11 of the 24 Actions outlined in the Green Travel Plan have not yet been fully implemented by the Local Health District (LHD), particularly in relation to cycling and car-pooling.</p> <p>During the first year of operations, LHD staff have been particularly focussed on establishing new clinical care processes and managing increased patient volumes.</p> <p>Now that operations have normalised, the Innovation and Sustainability Team together with Maitland Hospital staff plan to undertake further travel surveys in the next period (March 2023 - 31 March 2024) to gain further insights to inform the refinement of Green Travel initiatives in line with Sustainable Healthcare: Together Towards Zero. During the next period (March 2023 - 31 March 2024) the LHD will address the actions as set out in the Green Travel Plan.</p>

Conclusion

Based on our review, the Independent Audit results represent a well-managed project in general as per conditions set out by the SSI 9775 Stage 2 Consent. NGH Environmental has identified one non-conforming condition relating to the projects Green Travel Plan. HI does not believe this non-conforming condition presents any risk or breach of consent to the development.

This will be the final submission of an Independent Audit Report to DPIE under SSI 9775 Stage 2 Conditions.

Please contact the undersigned if you require further information.

Yours sincerely,



Narelle Bromilow
Project Director
Rural and Regional, Health Infrastructure

Nicholas Dowman
Senior Planning Advisor
Health Infrastructure

By email only: Nicholas.Dowman@health.nsw.gov.au
CC: stephanie.jackman@health.nsw.gov.au

15/06/2023

Dear Mr Dowman

**New Maitland Hospital Stage 2 (SSI-9775)
Independent Audit 6**

Reference is made to your post approval matter, SSI-9775-PA-54, Independent Audit (IA) 6 report [and Response to Audit Recommendations (RAR)] for the New Maitland Hospital, submitted as required by Schedule 2, Part C, Condition C36 of SSI-9775 as modified (the approval) to the Department of Planning and Environment (the department) on 17 April 2023.

The department has reviewed IA 6 and considers it to generally satisfy the reporting requirements of the approval and the department's *Independent Audit Post Approval Requirements* (2018). Please note that acceptance of this report is not an endorsement of the compliance status of the project.

The non-compliance identified in IA 6 with Schedule 2, Part E, Condition E6 has been assessed in accordance with the department's Compliance Policy with the department on this occasion, determining to record the breaches with no further enforcement action. However, please note that recording the breach does not preclude the department from taking alternative enforcement action, should it become apparent that an alternative response is more appropriate.

The department notes that a site inspection was not undertaken for this audit (Section 2.5). Section 3.6 of the department's *Independent Audit Post Approval Requirements* (2018) states that '*Independent Audits must include a physical site inspection*'. This non-compliance will be assessed in accordance with the department's Compliance Policy. Further correspondence may be sent in relation to the identified non-compliance.

Finally, the department notes Health Infrastructure's proposal to cease Independent Audits of the New Maitland Hospital. Schedule 2, Part C, Condition C39 of the approval notes that the Planning Secretary may approve a request for ongoing operational Independent Audits of the development to be ceased where consistent operational compliance has been demonstrated. The department notes that New Maitland Hospital has been operational for less than 18 months and has not shown consistent operational compliance during that period. As such, another operational Independent Audit (IA 7) is required to be submitted to the department no later than 17 April 2026.

Should you wish to discuss the matter further, please contact Joel Curran, Senior Compliance Officer on 02 4904 2702 or compliance@planning.nsw.gov.au

Yours sincerely



Heidi Watters
Team Leader Northern
Compliance

As nominee of the Planning Secretary